

Post Hospital Order Date: 05/11/2025 --:--
Santos, Eduardo (MA220506075202)
DOB: 07/26/1952
Episode: 05/07/2025 - 07/05/2025
Resumption of Care Date: 05/13/2025

Nightingale Visiting Nurses
125 County ST.
Taunton, MA 02780
Phone: (508) 967-0761
Fax: (508) 967-0767

Inpatient Information

Hospital Stay From:
2025-05-09 - 2025-05-11

Primary Diagnosis

J189 Pneumonia, unspecified organism (O)

DATE: 05-13-2025

Secondary/Other Diagnosis

J440 Chr obstructive pulmon disease with (acute) lower resp infct (E)

DATE: 05-13-2025

Risk Profile

Risk Factors: History of falls (2 or more falls - or any fall with an injury - in the past 12 months). Reported or observed history of difficulty complying with any medical instructions (for example, medications, diet, exercise) in the past 3 months. Currently taking 5 or more medications. Currently reports exhaustion. Other risk(s) not listed in 1-8.

Advance Directives

Advance Directives? Yes.
Intent: Medical Power of Attorney (Natalie Santos, (774) 526-3830), Other: Full code
Copies on file with Agency? No.
Surrogate: Yes (Natalie Santos, (774) 526-3830)
Patient was provided written and verbal information on Advance Directives? Yes.

Medications

Dextromethorphan-guaifenesin Oral Liquid 10-100 MG/5ML - 10 ml - PO every 4 hrs as needed (N)
HumaLOG KwikPen Subcutaneous Solution Pen-injector 100 UNIT/ML - . - 16u breakfast, 14u lunch, 24u dinner
Lantus SoloStar Subcutaneous Solution Pen-injector 100 UNIT/ML - 36u - qd at bedtime
Latanoprost Ophthalmic Solution 0.005 % - . ml - 1 drop both eyes qd hs
Lisinopril Oral Tablet 40 MG - 1 Tab(s) - po bid
Nortriptyline HCl Oral Capsule 10 MG - 1 Cap(s) - po qd hs
Timolol Maleate Ophthalmic Solution 0.5 % - . ml - 1 drop both eyes qd
Farxiga Oral Tablet 10 MG - 1 Tab(s) - daily
Flomax Oral Capsule 0.4 MG - 1 Cap(s) - daily
Lasix Oral Tablet 20 MG - 1 Tab(s) - daily prn
Nitroglycerin Sublingual Tablet Sublingual 0.4 MG - 1 Tab(s) - prn
Metoprolol Succinate ER Oral Tablet Extended Release 24 Hour 25 MG - 0.5 Tab(s) - daily
traZODone HCl Oral Tablet 50 MG - 1 Tab(s) - daily at bedtime
Ezetimibe Oral Tablet 10 MG - 1 Tab(s) - daily
Omeprazole Oral Capsule Delayed Release 40 MG - 1 Cap(s) - daily
Xarelto Oral Tablet 20 MG - 1 Tab(s) - daily
Atorvastatin Calcium Oral Tablet 80 MG - 1 Tab(s) - daily

DME and Supplies

Cane, Grab Bars, Tub/Shower Bench, wheelchair Diabetic Supplies

Orders and Treatments

Frequencies

Physical Therapy:

Physician: Dr. Singla, Raju

Clinician: Agency, Clinician

Signature:



Signature:

Date: 6/1/2025

Date: 5/30/2025

Electronically signed by Dr. Singla, Raju on 6/1/2025

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Frequencies

(Continued) Frequencies

5/11/2025 (Sunday) - 5/12/2025 (Monday) 1 visit per week for 1 week
 * Narrative Statement/Order Details: Skilled PT Treatment
 5/18/2025 (Sunday) - 6/21/2025 (Saturday) 2 visits per week for 5 weeks
 * Narrative Statement/Order Details: Skilled PT Treatment
 6/22/2025 (Sunday) - 7/5/2025 (Saturday) 1 visit per week for 2 weeks
 * Narrative Statement/Order Details: Skilled PT Treatment

Occupational Therapy:

5/18/2025 (Sunday) - 5/24/2025 (Saturday) 1 visit per week for 1 week
 * Narrative Statement/Order Details: Evaluation

PRN Orders

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Additional Orders

This 72-y.o. male patient alert and oriented x 3, legally blind, forgetfulness at baseline, was seen today for Resumption of Care via physician referral secondary to recent hospital admission from SOB and Left Lower Lobe Pneumonia with subsequent weakness. Patient was seen for PT services before recent hospitalization due to GAIT INSTABILITY, CHRONIC BACK PAIN, FALLS. PMHx includes LUMBOSACRAL DISC DISEASE, CHRONIC PAIN, PAROXYSMAL AFIB, COPD WITH SEVERE PERSISTENT ASTHMA, DM-II, HTN, CAD, IDA, MIGRAINE, LEGAL BLINDNESS, OCULAR HTN, MENIERE'S DISEASE, BPH, GERD, GAD, HLD, HX OF COLONIC POLYPS, HX OF ASP PNA, POLYPECTOMY, COLONOSCOPY. Patient lives with wife in the son's basement and uses blind cane for ambulation; 6 stairs with rail to enter the basement; has son, daughter and grandchildren living on the main floor of the house; 4 stairs to enter the house and 6 stairs with rail to enter the basement. Upon PT assessment, the patient shows deficits on B LE strength, balance and endurance that affects overall transfer and ambulation. The patient needs to continue skilled PT services to help improve B LE strength, balance and endurance, therefore helping the patient reach the highest potential. Current status: Pt complains of chronic low back and bilateral knee pain of 7/10 (where: 0 = No pain and 10 = worst pain possible); Bed mobility at Modified Independent; Sit <> stand and Transfers at CGA/SBA; Ambulatory with blind cane at CGA/SBA level x 30 ft on even surfaces with rests due to deficits of strength, endurance and balance; B LE strength of 3+ to 4-/5 grossly; High fall risk; stair climbing at not tested this visit. Based on overall PT assessment, the patient needs to continue skilled PT services at this time to address deficits. Safety awareness emphasized during this visit to prevent future falls. OT Evaluation added to POC.

Patient is a full code. Systems: Skin is warm, dry and intact; urinating and moving bowels without difficulty; vital signs are stable; lungs clear to auscultation; has a good appetite and is taking food and fluids without difficulty.

The Nightingale handbook was reviewed with the patient/caregiver, discussed patient rights and responsibilities, definition of home-bound status, HIPPA, universal precautions, and washing techniques, the emergency care plan, signs and symptoms of infection, procedure for complaint resolution, and important phone numbers were pointed out. The patient was informed of all services available as well as the Nightingale phone line available 24 hours a day for non-emergency concerns. All consents were explained; completed and signed; all questions answered.

Interventions

PT

Patient identified to be at High risk for falls. Physical Therapy to provide skilled assessment, identify and mitigate risk factors, provide instruction and reinforcement of teaching to prevent falls/injury to perform muscle re-education to restore previous function to help prevent future falls.

Physician: Dr. Singla, Raju

Clinician: Agency, Clinician

Signature:



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Interventions

(Continued) Interventions

Physical Therapy to develop and manage a balance program focused on skilled assessment, identify and mitigate risk factors, provide instruction and reinforcement of teaching to address fall risk and promote overall safety.

Physical Therapy to provide education on proper implementation of B LE exercises to perform muscle re-education to restore previous function and help prevent future falls and muscle deconditioning. Physical Therapy to perform therapeutic exercises and provide patient with home exercise program to restore functional strength and mobility, skilled assessment, identify and mitigate risk factors, provide instruction and reinforcement of teaching to perform muscle re-education to restore previous function and to help prevent future falls and muscle deconditioning.

Physical Therapy to provide education on safe Sit <> stand and overall Transfers to perform muscle re-education to restore previous function and help prevent future falls.

Physical Therapy to provide education on safe ambulation and maneuverability to perform muscle re-education to restore previous function and improve gait stability and promote safety.

Homebound Status

Homebound: Yes

Patient is confined because of illness, needs the aid of supportive devices such as crutches, canes, wheelchairs, and walkers; the use of special transportation; or the assistance of another person in order to leave their place of residence.

Patient has a normal inability to leave home.

Leaving home requires a considerable and taxing effort for the patient.

Specify: Patient has difficulty exiting the home and due to legally blind, fall risk, unsteady gait and poor endurance that requires the assistance of another person to leave the home.

Vital Sign Parameters

Notify physician of:

Temperature greater than (>) 100.7 or less than (<) 96

Pulse greater than (>) 120 or less than (<) 50

Respirations greater than (>) 25 or less than (<) 10

Systolic BP greater than (>) 170 or less than (<) 50

Diastolic BP greater than (>) 100 or less than (<) 50

O2 Sat less than (<) 88%

Goals and Outcomes

Goals

PT

Patient will demonstrate no falls within this episode. (Goal Term: long, Target Date: 7/5/25)

Patient able to climb up and down 6 stairs or more with rails at SBA level or better within this episode. (Goal Term: long, Target Date: 7/5/25)

Patients strength of Bilateral hip and knee flexor and extensor muscle group; Bilateral ankle dorsiflexors and plantarflexor muscle groups to improve to ½ to 1 muscle grade or more grossly to allow patient to have safe mobility, improve transfers, stair climbing, ambulation and promote safety. (Goal Term: long, Target Date: 7/5/25)

Patient/Family/Caregiver will demonstrate ability to follow home exercise program (HEP) at SBA or higher within this episode. (Goal Term: long, Target Date: 7/5/25)

Patient will improve ability to safely Transfer to Modified Independent level with or without ambulatory assistive device to allow patient to have safe mobility and avoid falls. (Goal Term: long, Target Date: 7/5/25)

Patient will improve gait capacity as evidenced by the ability to ambulate with ambulatory assistive device at Modified Independent level or better for 50 ft or more on even surfaces to allow patient to have safe mobility and avoid falls within this episode. (Goal Term: long, Target Date: 7/5/25)

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Clinician: Agency, Clinician

Signature:



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Rehab Potential			
Good to achieve stated goals with skilled intervention and patient's compliance with the plan of care.			
Discharge Planning			
Discharge when medical condition is stable and patient is no longer in need of skilled services. Discharge to care of physician. Discharge patient to self care. Discharge when goals met/maximum potential is reached.			
Clinician Signature: Digitally Signed by: LLOYDS BAYNOSA , PT		Date: 05/13/2025	
Physician's Name: RAJU SINGLA MD	Physician's Address: 289 Pleasant St FALL RIVER MA 02721	Phone Number 5086795888	
		Fax Number 5086791059	
Physician's Signature: --		Date: --	

Physician: Dr. Singla, Raju

Clinician: Agency, Clinician

Signature:



Signature:

Date: 6/1/2025

Date: 5/30/2025

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