



Guiding You To Better Health

Medical Order:

Patient Name: Kathryne Niesen DOB: 11/28/1948

Community / Home Health / Hospice:

Atria Grass Valley

Phone: 5302280969 Fax: 5302721092

CC: Progressive HH

Phone: 8668233896 Fax: 8888749518

Order Details: For scheduling Please Contact: Jesse - 5302638143 - Jesseniesen@gmail.com

Ordering Provider:

Nicole Frankle, NP

NPI 1467729525

LIC 95007633

Wound Care Referral

Diagnosis:

DX Wound/injury to right great toenail, left foot.

Please See Attached :

N Frankle NP

Provider Signature

9/12/25

Order Date/ Signature Date

Phone: 855-434-7763 Fax: 949-281-5550

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