



AlphaCare Home Health Agency, Inc.

PLAN OF CARE

Patient: Allard, Douglas-MR#000004480

Date: 03/26/2025

□ Chart: 1 Episode: 3

Patient's HI Claim No MTN960933278	Start of Care Date 11/26/2024	Certification Period 03/26/2025 -- 05/24/2025	Medical Record No 000004480	Provider No 227523
Patient's Name and Address Allard, Douglas 555 Eastern Ave Fall River, MA 02721 Phone: 774-206-0172		Provider's Name Address and Telephone Number AlphaCare Home Health Agency, Inc. 1707 GAR Highway Swansea, MA 02777 Phone: 617-600-4547 Fax: 855-225-2958		
Date of Birth: 11/11/1961		Sex <input checked="" type="radio"/> Male <input type="radio"/> Female		
Summary of Changes Since Last Plan of Care Update Physician Name: Singla, Raju (MD (Dr. Alliance)) Date Order Received: 02/06/2025 Time Order Received: 1:55 PM MEDICATIONS: Active Acetaminophen 325 MG Tab(s) Oral 650 mg PRN/As Needed Every 6 hours for pain Change Start Effective Date: 02/06/2025 Discontinued Acetaminophen (Pain Reliever Extra Strength) 500 MG Tab(s) Oral 500 mg Three times per day As needed for pain New Start Effective Date: 01/13/2025 Discontinued Date: 02/06/2025 predniSONE 10 MG Tab(s) Oral 40 mg x2 days, 30 mg x2 days, 20 mg x2 days, 10 mg x2 days Daily Taper New Start Effective Date: 02/06/2025 Discontinued Date: 02/14/2025				
ELIGIBILITY HOMEBOUND STATUS: Patient is NOT HOMEBOUND. Please be advised, patient is not confined to place of residence. Patient goes out independently for errands, social reasons, and leisure activities, and does so routinely without any taxing effort. Services are medically necessary. Start Effective Date: 03/26/2025 RECERTIFICATION OF PATIENT ELIGIBILITY: I estimate the duration of continued Home Health services for this patient to be 60 days Start Effective Date: 03/26/2025 Please note, as per 114.3 CMR 50.02/101 CMR 350.02 (general definitions), services provided by a professional registered nurse, licensed practical nurse, or a nursing student under the supervision of a registered nurse include giving medications ordered by the physician and are nursing services. As such, per 114.3 CMR 50.04/101 CMR 350.04, said nursing services are reimbursable by MassHealth (Medicaid) as skilled nursing services. Start Effective Date: 03/26/2025 Services are expected to end within 60 days unless goals are not met. Patient will be discharged when goals are met and patient is safe and independent with care at home or when patient is no longer in need of skilled nursing services. Start Effective Date: 03/26/2025 VERBAL ORDER FOR PLAN OF CARE: Verbal order for this plan of care taken and read back by clinician signing this plan of care. Start Effective Date: 03/26/2025 FACE TO FACE ENCOUNTER: NON-HOMEBOUND/f2f SCHEDULED WITHIN 30 DAYS: I certify/recertify that this patient is under my care and that I, or a nurse practitioner or physicians assistant working with me, has a scheduled face to face encounter within the next 30 days that meets the physician face to face encounter requirements with this patient. I certify/recertify that the above stated patient is NOT HOMEBOUND and that upon completion of the/this FTF encounter, has a need/continued need for intermittent skilled nursing, physical therapy and/or speech or occupational therapy services in their home for their current diagnoses as outlined in their initial plan of care. These services will continue to be monitored by myself or another physician, (nurse practitioner or physicians assistant working with me) who will periodically review and update the plan of care as required. Start Effective Date: 11/26/2024				
DIAGNOSIS				
Clinician's Signature and Date Of Verbal SOC Where Applicable (see below): Electronically Signed by: Carpenter, Petra (RN) RN 03/26/2025 08:45:35 PM EDT			Date HHA Received Signed POT	
Physician's Name and Address Singla, Raju (MD (Dr. Alliance)) 289 Pleasant Street Suite/Apt #601 Fall River MA, 02721		Physician's Phone # 508-679-5888 Physician's Fax # 508-679-1059 Physician's NPI # 1043204407		
Attending Physician's Signature and Date Signed		Anyone who misrepresents, falsifies, or conceals essential information required for payment of Federal funds may be subject to fine, imprisonment, or civil penalty under applicable Federal laws.		
Caregiver Signature:				



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DIAGNOSIS

Primary

F33.9 Major depressive disorder, recurrent, unspecified Start Effective Date: 11/26/2024 0

Other

F10.10 Alcohol abuse, uncomplicated Start Effective Date: 11/26/2024 0

F41.1 Generalized anxiety disorder Start Effective Date: 11/26/2024 0

I10 Essential (primary) hypertension Start Effective Date: 11/26/2024 0

I73.9 Peripheral vascular disease, unspecified Start Effective Date: 11/26/2024 0

Z91.198 Pt noncompl with other med trtmt and regimen for other rsn Start Effective Date: 11/26/2024 0

G89.29 Other chronic pain Start Effective Date: 01/13/2025 0

MEDICATIONS

amLODIPine Besylate 10 MG Tab(s) Oral 10mg Daily Start Effective Date: 11/26/2024

cloNIDine HCl 0.1 MG Tab(s) Oral 0.1mg Three times per day/prn for anxiety Start Effective Date: 11/26/2024

Furosemide 40 MG Tab(s) Oral 40mg Daily Start Effective Date: 11/26/2024

Lisinopril 20 MG Tab(s) Oral 20mg Daily Start Effective Date: 11/26/2024

DULoxetine HCl 60 MG Cap(s) Oral 60mg Daily Start Effective Date: 11/26/2024

QUETiapine Fumarate 100 MG Tab(s) Oral 100mg Every night at bedtime Start Effective Date: 11/26/2024

traZODone HCl 100 MG Tab(s) Oral 200mg Every night at bedtime Start Effective Date: 11/26/2024

buPROPion HCl ER (XL) (Wellbutrin XL) 300 MG Tab(s) Oral 300mg Daily Start Effective Date: 11/26/2024

hydroXYzine HCl 50 MG Tab(s) Oral 50mg Three times per day/prn for anxiety Start Effective Date: 11/26/2024

Naltrexone HCl Oral 50mg Daily Start Effective Date: 11/26/2024

tiZANidine HCl 4 MG Tab(s) Oral 4mg Twice per day/prn muscle spasms pain Start Effective Date: 01/16/2025

Acetaminophen 325 MG Tab(s) Oral 650 mg PRN/As Needed Every 6 hours for pain Change Start Effective Date: 02/06/2025

DME/SUPPLIES

DME:

Medication Lockbox Start Effective Date: 03/26/2025

SAFETY MEASURES

SAFETY MEASURES:

Clear Pathways Start Effective Date: 03/26/2025

Emergency Care Plan Start Effective Date: 03/26/2025

Fall Prevention Start Effective Date: 03/26/2025

Infection Control: Standard Precautions Start Effective Date: 03/26/2025

Infection Prevention Start Effective Date: 03/26/2025

Medication Safety/Storage. The Patient/ Caregiver was provided with an updated copy of the Medication list and

Instruction on the ordered Medications. Start Effective Date: 03/26/2025

NUTRITIONAL REQUIREMENTS

DIET/HYDRATION:

Cardiac Diet Start Effective Date: 03/26/2025

ALLERGIES

NKDA Start Effective Date: 11/26/2024

FUNCTIONAL LIMITATIONS

FUNCTIONAL LIMITATIONS:

The patient's routine inability to follow instructions affects daily function related to medication administration.

Start Effective Date: 03/26/2025

ACTIVITIES PERMITTED

ACTIVITIES PERMITTED:

No Restrictions Start Effective Date: 03/26/2025

MENTAL STATUS

MENTAL/PSYCHOSOCIAL/COGNITIVE STATUS:

Alert Start Effective Date: 03/26/2025

Anxious Start Effective Date: 03/26/2025

Depressed Start Effective Date: 03/26/2025

Difficulty Coping Start Effective Date: 03/26/2025

Forgetful Start Effective Date: 03/26/2025

Impaired Judgment Start Effective Date: 03/26/2025

Inadequate Support System Start Effective Date: 03/26/2025

Oriented Start Effective Date: 03/26/2025

PROGNOSIS

PROGNOSIS:

Fair Start Effective Date: 03/26/2025

GOALS/INTERVENTIONS

VISIT FREQUENCY:

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SNV 5-7x/week for skilled assessment, medication management, and teaching Start Effective Date: 03/26/2025

Vital Sign Parameters

VITAL SIGN PARAMETERS Notify Physician if:

Pain Rating is greater than 8 on 0-10 scale Start Effective Date: 03/26/2025

NOTIFY MD IF:

BP less than 90/50 OR greater than 150/90

HR less than 50 OR greater than 120

TEMP greater than 100

O2 less than 90% Start Effective Date: 03/26/2025

Rehospitalization/Emergency Risk

REHOSPITALIZATION/EMERGENCY RISKS & INTERVENTIONS:

Establish Patient Emergency Plan and instructions for 24-hour contact Start Effective Date: 03/26/2025

Promote single pharmacy Start Effective Date: 03/26/2025

Provide education content at patient's level of health literacy Start Effective Date: 03/26/2025

Provide medication education Start Effective Date: 03/26/2025

RISK: Currently reports exhaustion Start Effective Date: 03/26/2025

RISK: Currently taking 5 or more medications Start Effective Date: 03/26/2025

RISK: Decline in mental, emotional, or behavioral status in the past 3 months Start Effective Date: 03/26/2025

RISK: other risk: Impaired decision making, non compliance Start Effective Date: 03/26/2025

RISK: Reported or observed history of difficulty complying with any medical instructions in the past 3 months Start Effective Date: 03/26/2025

Cardiovascular

CARDIOVASCULAR INTERVENTIONS

Assess for and Teach Patient to recognize Signs & Symptoms of Hypertension, explaining first that HTN can sometimes present without any symptoms Start Effective Date: 03/26/2025

Assess: Cardiovascular status Start Effective Date: 03/26/2025

Assess: Extremity color, temperature, swelling and pain Start Effective Date: 03/26/2025

Educate patient on measures to manage Hypertension Start Effective Date: 03/26/2025

Educate Patient on measures to manage Venous Insufficiency Start Effective Date: 03/26/2025

CARDIOVASCULAR GOALS

Pt/Pcg will state understanding of measures to manage disease and identify S/S to report Start Effective Date:

03/26/2025 Progress Towards Goals: 20%

Medication Management

MEDICATION MANAGEMENT INTERVENTIONS

Administer AM medications via lockbox per medication profile/MD orders Start Effective Date: 03/26/2025

Prepour remaining medication doses (including max PRN) per medication profile/MD orders, leading up to next SNV for pt to attempt to self-administer. SN will assess for compliance with prepoured meds at following visit. Start Effective Date: 03/26/2025

Assess for S/S intoxication; hold medications if pt appears intoxicated and notify MD. Start Effective Date: 03/26/2025

Assess: Medication compliance, effectiveness, side effects Start Effective Date: 03/26/2025

Instruct Pt/Pcg: Medication actions, uses, frequency, dose, side effects, interactions of all new/change meds Start Effective Date: 03/26/2025

To promote patient independence okay for skilled nurse to prefill/prepour medication doses per medication profile/MD orders, and reduce visits within frequency range. If patient demonstrates ability, plan of care will be re-evaluated and MD notified of requested changes. Start Effective Date: 03/26/2025

MEDICATION MANAGEMENT GOALS

Pt will comply with medication regimen and be knowledgeable of side effects to report. Start Effective Date:

03/26/2025 Progress Towards Goals: 20%

Pt/Pcg will verbalize/demonstrate knowledge of and compliance with medication management: dose, route and schedule/ actions, interactions and contraindication/administration and compliance with prefilled medications/adherence to diet impacting medications/safe preparation and storage of medications/side effects and symptoms to report Start Effective Date: 03/26/2025 Progress Towards Goals: 20%

Psychiatric/Neurological

PSYCHIATRIC/NEUROLOGICAL INTERVENTIONS:

Assess for and teach patient to recognize s/s anxiety Start Effective Date: 03/26/2025

Assess for and teach patient to recognize s/s of depression Start Effective Date: 03/26/2025

Assess for: s/s intoxication or substance use Start Effective Date: 03/26/2025

Assess for: Suicidal ideations and/or thoughts of self-harm Start Effective Date: 03/26/2025

Assess: mental status, mood, s/s mania/depression Start Effective Date: 03/26/2025

Educate patient on measures to manage depressive d/o Start Effective Date: 03/26/2025

Instruct Pt/Pcg: Signs and symptoms of anxiety, agitation, ineffective coping Start Effective Date: 03/26/2025



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Instruct Pt/Pcg: Stress management skills Start Effective Date: 03/26/2025

PSYCHIATRIC/NEUROLOGICAL GOALS:

Pt will be free from exacerbation of psychiatric symptoms and/or hospitalizations Start Effective Date: 03/26/2025

Progress Towards Goals: 10%

Pt will develop positive coping skills to manage feelings of anxiety/depression. Start Effective Date: 03/26/2025

Progress Towards Goals: 20%

Pain

PAIN INTERVENTIONS

Assess/Instruct Pt/Pcg: Pain management measures; pain medication, rest, body alignment, ROM, meditation, massage

Start Effective Date: 03/26/2025

Assess: Pain level Start Effective Date: 03/26/2025

Assess: Pt response to and effectiveness of current pain management regimen Start Effective Date: 03/26/2025

PAIN GOALS

Pt will report pain well-managed using both pharma and nonpharma methods Start Effective Date: 03/26/2025 Progress

Towards Goals: 10%

Pt/Pcg will verbalize/demonstrate measures to manage pain: medication management/alternative pain relief measures, behavior modification to avoid factors that increase pain/use of pain scale to identify intensity and determine

comfort goal Start Effective Date: 03/26/2025 Progress Towards Goals: 10%

Patient Centered Goal

PATIENT CENTERED GOAL

Will find out what is wrong with my back and feel better Start Effective Date: 03/26/2025 Progress Towards Goals: 0%

Pt will comply with SNV, POC, medication regimen, and MD appointments. Start Effective Date: 03/26/2025 Progress

Towards Goals: 10%

Pt will understand correlation between noncompliance and R/F decompensation/hospitalization. Start Effective Date:

03/26/2025 Progress Towards Goals: 10%

Long Term Goal

SN LONG TERM GOALS:

Patient will remain safely at home and in the community with clinical management by SN and MD follow-up until

independent with care Start Effective Date: 03/26/2025 Progress Towards Goals: 0%

ADVANCE DIRECTIVES

ADVANCE DIRECTIVES:

FULL CODE Start Effective Date: 03/26/2025

REHAB POTENTIAL

SN REHAB POTENTIAL:

SN Rehab Potential: Fair Start Effective Date: 03/26/2025

DISCHARGE PLANNING

SN DISCHARGE PLAN:

Patient will be discharged when goals are met and patient is safe and independent with care at home or when patient is no longer in need of skilled nursing services. Start Effective Date: 03/26/2025

FREQUENCIES

Active

RN/LPN: 1 x day for 60 days starting 03/26/2025 (week 1) Start Date: 03/26/2025 End Date: 05/24/2025

Electronic Signature

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Time: Saturday, 03 January 2026 20:38:36

Signer: Sameer S Katte

