

Divine Edge Health Services LLC
8330 Lbj Freeway Suite 345
Dallas, TX 75243
Phone: (214) 493-3118 | Fax: (888) 958-2383

PHYSICIAN FACE TO FACE ENCOUNTER

Patient: Canady, Terry

3405 Wendelkin St
Dallas, Tx 75215
(214) 371-6968
HIC: 458081882A

Physician: KETHA, SUMANA

2925 Skyway Cir ,
North, Irvin, Tx 75038
Phone: (972) 675-7313 | Fax: (972) 675-7310
NPI: 1962447805

MR#: DEHS0000000024

Order #: 977173

DOB: 12/15/1954

SOC: 07/12/2016

Episode: 9/6/2016-11/4/2016

☒ POC Certifying Physician

☐ Non-POC Certifying Physician

I certify that the above named patient is under my care and that I, or the nurse practitioner or physician's assistant working with me, had the required face-to-face encounter meeting the encounter requirements on the date below.

Face To Face Encounter Date

07/21/2016

The primary medical reason, diagnosis, or condition related to the reason for home healthcare for the encounter was:

Hypertension, seizures, schizophrenia, and atrial fibrillation.

Other Conditions/Diagnoses related to the needed home care:

Mentally challenged.

I believe that based on my clinical findings, the patient is homebound and the following home health services are medically necessary.

☒ Skilled Nursing

☐ Physical Therapy

☐ Occupational Therapy

☐ Speech Therapy

☐ Home Health Aide

☐ MSW

☐ Other

*** Additional qualifying information supporting the patient's eligibility for services is noted in the physician's clinical chart and are available for review upon request.**

Physician Signature:

S. Ketha

Electronically signed by: Sumana Ketha, M.D.

Date: 09/22/2016