

Vision Home Health Care Inc.
409 E Centerville Road # A
Garland, TX 75041
Phone: (214) 703-0767 | Fax: (214) 703-0765

PHYSICIAN ORDER**Patient: Wallace, Mildred**

9308 Beck Avenue
107
Dallas, Tx 75228
(214) 859-0227
HIC: 458948774A

MRN: MW102450**DOB:** 10/24/1950**Physician: Ketha, Sumana MD**

2925 Skyway Circle North
Irving, Tx 75038
Phone: (972) 639-5838 | Fax: (972) 675-7310
NPI: 1356565865

Order Date: 8/19/2016 **Order #:** 914759 **Episode Associated:** 6/24/2016—8/22/2016**Allergies:** NKA (Food/Drugs/Latex/Environment)**Summary:** Recertification

Clinical assessment regarding current order: Re certification for continued care.

Expected Outcomes/Goals: The Patient/Caregiver will verbalize understanding of disease processes, factors that increase risk, signs and symptoms, measures important in the management of disease process, possible complications, diet, medications and incorporate knowledge in to daily living practices to minimize complications. Patient will adhere to medications and treatment plan of care.

Client notified of change in service/POC: 1 yes

☐ Order read back and verified.**Clinician Signature:**

Electronically Signed by: Mary Badger RN

Date:

8/19/2016

Physician Signature: Electronically Signed By Ketha, Sumana M.D.**Date:**

12/31/2016