FAX COVER PAGE

HomeCentris HEALTHCARE
HOME-CENTRIC HEALTHCARE STRATEGIES

Date: 10/22/2026

To:
Yisroel Schonfeld , PA

From:
HomeCentris Healthcare LLC
10 Crossroads Drive, Suite 102
Owings Mills, MD 21117-8284

Phone: 410-321-8448

Fax: 410-559-3002

Subject:
Form Submission

Memo:

Please review the attached document.

URGENT: Please review and respond to this fax transmission promptly.

HomeCentris Healthcare LLC memo...

Patient: McLeod Townes
DOB: 05/06/1951

Subject: Report of Unstable Symptoms to Certifying Physician

Submitted By: Karen Hill Campbell

Date: 10/21/2026

Agency Rep: Karen Hill Campbell **Rep Phone:** 410-321-8448

Memo: limited strength Notes: acute change in status
limited endurance Notes: acute change in status
muscle weakness Notes: acute change in status
swelling of affected area Notes: condition is chronically unstable
swelling in the arms/legs Notes: Dependent
dependent edema Notes: non-pitting edema
M1745 - Behavioral Issues Notes: acute change in status
swell/redness surround. skin Notes: BLE
Start time 1:34pm
Recert
Patient alert and oriented x3. Patient evaluated at Mercy Hospital for wound to left foot/amputated big toe. Patient prescribed antibiotics Bactrim DS for skin infection every 12 hours daily for x7 days per discharge paper work. Patient has 10 days worth of medicine. Patient to follow up with nephrology and provider. Provider visit scheduled for 10/29 @ 2:30p for hospital follow up visit. Antibiotic education provided to patient to complete antibiotic regimen. Patient instructed to eat before administering antibiotic. Possible GI irritation with possible soften stools. Patient denies pain. Left foot wound care. Cleanse wound pat dry wrap in kerlix and secure with tape. No drainage noted bruising 2x1.5cm beneath big toe area. Point of care glucose 101. Dependent edema to Bilateral lower extremities. Patient instructed on compression wear. Patient has compression stockings. Nurse demonstrated and applied compression wear to feet. No discomfort reported. Patient instructed to remove with sleep with elevated legs when th sitting and laying. Patient states understanding. Labs reviewed with patient with Abnormal kidney results with referral to nephrology. Patient reports he was unable to remember to let great toe amputation. Patient reports he was reminded by his daughter of past lawn mower accident that cause injury. Patient appeared relieved. Patient recounting past event to present day. Patient caregiver is sister Denise and his daughter. Patient reports he is well taken care of. No falls reported. Patient received call from nurse Lisa to assess condition after ER evaluation. Nurse was able to report follow up instructions discussed with and patient reports understanding. SN frequency 1w6

Follow-up Action:

Follow-up Memo:

This memo is for your records.