FAX COVER PAGE



Date: 11/05/2026

To:
Geneva Cason , NP

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: Virginia Garrison
DOB: 06/23/1948

Subject: Discharge Summary - OT

Submitted By: Holly Marcum

Date: 11/04/2026

Agency Rep: Holly Marcum **Rep Phone:** 410-321-8448

Memo:

Admitted on: 11/02/2026

Emergency Contact: Chris, 410-598-7738

Diagnoses:
Pyonephrosis (N13.6),Paroxysmal atrial fibrillation (I48.0),Pressure ulcer of sacral region, stage 2 (L89.152),Pressure ulcer of right buttock, stage 3 (L89.313),Pressure ulcer of left buttock, stage 3 (L89.323),Hyp hrt & chr kdny dis w hrt fail and stg 1-4/unsp chr kdny (I13.0),Chronic diastolic (congestive) heart failure (I50.32),Type 2 diabetes mellitus w diabetic chronic kidney disease (E11.22),Chronic kidney disease, stage 3a (N18.31),Type 2 diabetes mellitus with diabetic polyneuropathy (E11.42),Hyperlipidemia, unspecified (E78.5),Depression, unspecified (F32.A),Iron deficiency anemia, unspecified (D50.9),Obstructive sleep apnea (adult) (pediatric) (G47.33),Dietary zinc deficiency (E60.),Hyperkalemia (E87.5),Anxiety disorder, unspecified (F41.9),Insomnia, unspecified (G47.00),Unsp cond assoc w female genital organs and menstrual cycle (N94.9),Prediabetes (R73.03),Solitary pulmonary nodule (R91.1),Morbid (severe) obesity due to excess calories (E66.01),Long term (current) use of anticoagulants (Z79.01),Presence of artificial knee joint, bilateral (Z96.653),Presence of right artificial hip joint (Z96.641),Colostomy status (Z93.3),Acquired absence of other specified parts of digestive tract (Z90.49),Personal history of malignant neoplasm of large intestine (Z85.038)

Medications:
ACETAMINOPHEN 325 MG Tablet / Give 2 tablet by mouth as necessary
ASCORBIC ACID 500 MG Tablet / Give 2 tablet by mouth one time a day
Atorvastatin Calcium - Atorvastatin Calcium 20 MG / 1 Tablet by mouth in the evening
Bisoprolol Fumarate And Hydrochlorothiazide - Bisoprolol Fumarate; Hydrochlorothiazide 10-6.25 MG / 1 Tablet by mouth one time a day
Cefdinir - Cefdinir 300 mg Take 1 tablet by mouth every 12 hours
CYANOCOBALAMIN 1000 MCG / 1 Tablet by mouth one time a day
ELIQUIS 5 MG / 1 Tablet by mouth two times a day
Escitalopram Oxalate - Escitalopram Oxalate 10 MG / 1 Tablet by mouth one time a day

Ferrous Sulfate - Ferrous Sulfate; Folic Acid 325 (65 Fe) MG / 1 Tablet by mouth once a day
FLORASTOR 250 MG / 1 Capsule by mouth twice a day
GABAPENTIN 200 MG / 1 Capsule by mouth two times a day
Magnesium Oxide - Simethicone 400 MG / 1 Tablet by mouth one time a day
MELATONIN 5 MG / 1 Tablet by mouth every 24 hours as needed
MULTIPLE VITAMIN 0 Give 1 tablet by mouth one time a day
Vitamin D3 - Alpha-Tocopherol Acetate; Ascorbic Acid; Biotin; Cholecalciferol; Cyanocobalamin; Dexpanthenol; Folic Acid; Niacinamide; Pyridox 50 MCG (2000 UT) / 1 Capsule by mouth one time a day

Services Provided:
cough/deep breathing exercises
incentive spirometer
home exercise program
equipment training
work simplification/energy conservation
gait training/stair training
transfers training
lifestyle modifications to manage cardio-respiratory condition including diet changes and regular exercise; strategies to control shortness of breath and home remedies to keep lungs healthy
how to maintain a diary to monitor effective and non-effective pain relief including documenting time of pain, rating, precipitating events, medications, treatments, and what works best to relieve pain, teach relaxation skills and diversional activities
therapeutic exercises
therapeutic modalities
balance training
equipment training
gait training
work simplification/energy conservation
transfer training
related medication(s) purpose and schedule
symptoms requiring physician notification

78 year old female patient with medical history including: paroxysmal atrial fibrillation on apixaban, hypertension, hyperlipidemia, depression, and iron-deficiency anemia. Patient is sleeping in her recliner couch nightly. Patient is bathing at kitchen sink seated and standing using soap and water. Patient is incontinent of bladder and bowel and is urinating in a brief and manages her colostomy independently. Patient completes functional mobility using a two-wheeled walker. Patient completes her self care routine, Modified Independent and functional mobility using a two wheeled walker with Supervision to Setup Assist. Patient completed Bilateral Manual Muscle test and demonstrated 5/5 Bilateral Upper Extremity strength at shoulders elbows, wrists and grasp. Patient's personal goals is that she wants to increase her leg strength. Patient was pleasant and motivated and tolerated Occupational Therapy Evaluation well with Min verbal cues throughout. Patient manages her medications with no difficulties with side effects or regimen. Patient completed her self care routine at her baseline. Patient does not require occupational therapy services at this time.

Follow-up Action:

Follow-up Memo:

This memo is for your records.