

Healthcare Professional Referral to Podiatry (ND) Form

Before completing please read eligibility criteria overleaf

<p>Patients Details: Mr/Mrs/Miss</p> <p>Surname:</p> <p>Forename(s):</p> <p>Address:</p> <p>.....</p> <p>.....</p> <p>Postcode: EX.....</p> <p>Contactable Tel No:</p> <p>.....</p> <p>(Include STD code if applicable)</p>	<p>Male <input type="checkbox"/> Female <input type="checkbox"/></p> <p>Marital Status:</p> <p>Date of Birth:</p> <p>GP Name:</p> <p>Practice:</p> <p>Hospital No (if Known)</p> <p>NHS No :</p> <hr/> <p>Podiatry clinic wishing to attend:</p> <p>If In-patient : Hospital:.....</p> <p>Ward:Discharge date:</p> <p>Follow up out-pt appt required if discharged before patient can be seen: Yes/No</p>
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<p>General Health – Please specify</p> <p>Diabetes <input type="checkbox"/> Foot/leg ulcer <input type="checkbox"/> Rheumatoid arthritis <input type="checkbox"/> Good health <input type="checkbox"/></p> <p>Poor circulation <input type="checkbox"/> Foot/leg amputation <input type="checkbox"/> Neuropathy <input type="checkbox"/> Arterial surgery (leg) <input type="checkbox"/></p> <p>Heart disease <input type="checkbox"/></p> <p>Other:</p>

<p>Medications – Please list clearly all medications been taken: None <input type="checkbox"/></p> <p>.....</p> <p>.....</p>

<p>Foot Problems - Please specify:</p> <p>Infection <input type="checkbox"/> Ulcer <input type="checkbox"/> Ingrown toenail <input type="checkbox"/> Deformed thickened nails <input type="checkbox"/></p> <p>Painful corns <input type="checkbox"/> Painful hard skin <input type="checkbox"/> Heel pain <input type="checkbox"/> Pain on walking <input type="checkbox"/></p> <p>Joint pain in feet <input type="checkbox"/> No pain <input type="checkbox"/></p> <p>For patients with Diabetes indicate foot risk: Low/Medium/High/Acute (Acute=ulcer, infection, ischaemia, Charcot's).</p> <p>If foot ulcer: Site and size:Photograph sent Yes/No</p> <p>Current dressing:</p> <p>Reason for referral:</p>
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<p>Referred By: (Circle and specify)</p> <p>GP /DN/PN/HV/Staff Nurse/ Hosp Doctor:</p> <p>Other please state:.....</p> <p>Name:Date:</p> <p>Contact Details (specify)</p> <p>Ward/HC/Other.....Phone No.....</p> <p>Email:.....</p>	<p>Please return this completed form to:</p> <p>North Devon Podiatry Services Barnstaple Health Centre Vicarage Street, Barnstaple North Devon EX32 7BH or Email it to: Podiatry@ndevon.swest.nhs.uk FAX 01271 321586</p>
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Please read CAREFULLY before completing the details on the reverse of this form

ELIGIBILITY.

Currently the podiatry service is commissioned by NHS Devon to provide podiatry treatment to the following groups.

- People with medical conditions that puts feet at risk i.e. Diabetes; Vascular Disease and Rheumatoid Arthritis.
- People with severe foot deformities.
- Musculoskeletal /gait abnormalities (only available to those in full time education).
- Acute foot conditions that require short term care i.e. ingrown toe nails
- General podiatry conditions such, as callous/corns/thickened nails is available only to people who are 65 years of age and over.

NB. Toe nail cutting is only available for abnormal nails and where a medical reason is indicated i.e. diabetes and only where this is deemed very high risk.

Voluntary nail cutting schemes are available in the North Devon area. Contact numbers for these are as follows:

Ilfracombe area: 01271 863926

St Giles in the Heath: 01566 772882

South Molton/Barnstaple: 01392 314753

PRIORITY.

High priority is given to people with a medical condition that puts feet at risk such as Diabetes, Vascular Disease or a foot problem such as ulceration.

Low priority is given to people with general foot problems e.g. corns & callous.

LOCATION.

Podiatry is available at the following locations: Barnstaple Health Centre, Bideford Hospital, Braunton Medical Centre, Wallingbrook (Chulmleigh) Health Centre, Holsworthy Hospital, Ilfracombe Hospital, Lynton resource centre, South Molton Hospital, Torrington Hospital.

NB. Domiciliary Podiatry is not available accept in very exceptional circumstances

ON RECEIPT OF THIS FORM PEOPLE WILL EITHER:

- Receive an appointment /added to waiting list to be further assessed to determine any need for treatment.
- Receive notification that they are not eligible for treatment.

People assessed to need podiatry treatment will be given a course of treatment and normally discharged unless their foot risk is very high.

People will also be expected to co-operate with treatment and advice that may be given e.g. footwear. Failure to do so will also result in discharge from the service.

If further information is required please contact 01271 341509