



ADVANCING • PROMOTING • SUPPORTING

## Example

Date: \_\_\_\_\_

Patient's Name: \_\_\_\_\_

Client File# \_\_\_\_\_

DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

We have had the pleasure of assisting our mutual patient \_\_\_\_\_. This is letter is our Podortho Nursing report of our findings which include our Nursing Assessments, Nursing Diagnosis, Treatment plans, and Evaluations.

### Nursing Diagnosis/Assessment: (example)

1. Compromised skin integrity on apex of right great toe **related to:** injury when walking through the night in the dark to go to the bathroom.
2. Type two diabetic with L.O.P (loss of protective sensation) **related to:** uncontrolled blood sugars ranging from 9mmol-12mmol fasting. Sensation testing using a 5.07 monofilament score was 3/10 suggesting significant L.O.P. His total score on the inlow's 60 second diabetic foot screen was 9/23 and requires screening every six months. Patient stated he felt numbness and tingling in his feet regularly. He presented with Erythema and dependent rubor. Foot wear was inappropriate as shoe was to small in length.
3. Self-care deficit **related to:** Inability to determine the appropriate foot wear to accommodate his structural deformities in his toes as evidence by interphalangeal joints appear atrophied causing claw and hammer toes.
4. Inability to cut nails **related to:** previous hip injury and excessive thickening with a yellowish discoloration in all nails bi-laterally.

## **Treatment Plan:**

1. Wound care protocol includes treating the local infection conservatively by irrigation with sea-cleanse, Low level laser therapy and wound dressing. Asses for potential infection and health teaching with patient for home care between appointments. Health teaching on preventing further injury to toes. Diabetic foot health hand out provided for patient to follow at home.
2. Diabetic Health teaching and discussion around solutions for foot wear and make recommendations. Patient was fitted for orthopedic off the shelf shoes at our clinic. Inlow's screen scheduled at our clinic for every six months as per recommendations.
3. Digital appliances recommended. Patient was given the option of off the shelf or a custom made device made from padding and strapping. Motor neuropathy health education done with questions addressed.
4. Regular diabetic foot care recommended by Podortho Nurse. Nail debridement required and possible fungal nail protocol could be implemented.

## **Evaluations:**

1. Wound is closed.
2. Foot wear has been changed and assessed as appropriate and comfortable for patient.
3. Patient is wearing digital appliances daily.
4. Foot care was done and patient is booked in for care at our clinic every six weeks.

## **Recommendations:**

Possible referral to vascular specialist as dependent rubor has been noted which might suggest some vascular complications. This is left to your discretion.

If you have any questions or concerns, please don't hesitate to contact me. I can be reached at the below numbers.

Podortho Nurses strive for best practice in foot and lower limb care for our patients working with an interdisciplinary team approach.

## **Your name and Credentials**

Professional Podortho Nurse Specialists Are Registered Nurses (Registered Practical Nurse / Registered Nurse) that specialize in the field of Advanced Medical Foot Care. The primary objective of a Podortho Nurse is to optimize foot health, improve client mobility and overall Health Related Quality of Life. This is achieved by performing lower leg and foot assessments, which has been known to detect early signs of life threatening diseases or disabling conditions. In conjunction, Podortho Nurses use the Nursing Process to assess and diagnose, develop and implement a plan of care, and evaluate patient outcomes, while working as part of an interdisciplinary health care team to ultimately provide adequate quality client care.

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