PODIATRY EVALUATION & MANAGEMENT

*Check only if applicable:

HISTORY
Chief complaint:

History of Present Illness:
Location - feet L R B other:
Quality: aching throbbing discomfort radiating
Severity: mild moderate severe
Duration - days weeks months chronic
Frequency/Timing: always weightbearing nonweightbearing occasionally with shoes
Modifying factors: palliative care helps
Assoc. signs & sx:

Review of Systems:
Constitutional: Cardiovascular:
Eyes: Neuropsych:
Endo:
Musculoskeletal:
Integumentary:

EXAMINATION:
Constitutional: General appearance: wellnourished malnourished other:
Psyche: - Mood & affect: alert calm agitated friendly nonresponsive
- Orientated to: time place person none
   nonresponsive
Cardiovascular:
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<th></th>
<th>B</th>
<th>R</th>
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Musculoskeletal
-misalignments, masses etc.: bunion B R L / tailors bunion B R L

hammer toe: R1 2 3 4 5 L1 2 3 4 5 mallet toe: R12345 L12345
-range of motion: WNL diminished hypermobile other:
-gait/station: WNL apopulsive restricted ambulation nonambulatory
pronated other:
-stability/dislocation: dislocation at: N/A
-muscle strength/atrophy: WNL diminished flaccid paralysis

Dermatologic
-Inspection (rash, clavi-HD/HM: R1 2 3 4 5 L1 2 3 4 5
lesions, ulcers etc.) Heel callous: R L IPK: R1 2 3 4 5 L1 2 3 4 5
pinch clavus: RH LH Met plantar callous: R L
-Palpation: thin/atrophic WNL induration nodules
-Nails: nondystrophic: all R1 2 3 4 5 L1 2 3 4 5
dystrophic: all R1 2 3 4 5 L1 2 3 4 5

Onychauxic and friable or lytic with nail plate thickness of 3 mm or greater:
All R1 2 3 4 5 L1 2 3 4 5
Is there marked limitation of ambulation due to onychauxia (ambulatory patient) or does the patient suffer pain resulting from the thickening and dystrophy of the nail plate? YES NO
ONYCHOGYRPHOSIS of: ALL R 1 2 3 4 5 L 1 2 3
Does the nail plate cause indentation of or minor laceration of the distal toe? YES NO

Does the Onychogryphosis cause this patient marked limitation of ambulation or pain? YES NO

Onychomycosis is clinically evident: R1 2 3 4 5 L1 2 3 4 5
Does the patient have marked limitation of ambulation, pain or secondary infection resulting from the thickened and infected nailplate? YES NO

Neurologic:
-DTRs: WNL Babinski
-Sensorium: (touch, pin, WNL other:
vibratory etc.)
PLAN:  

DIAGNOSES:  

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Podiatrist signature  

Date  

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