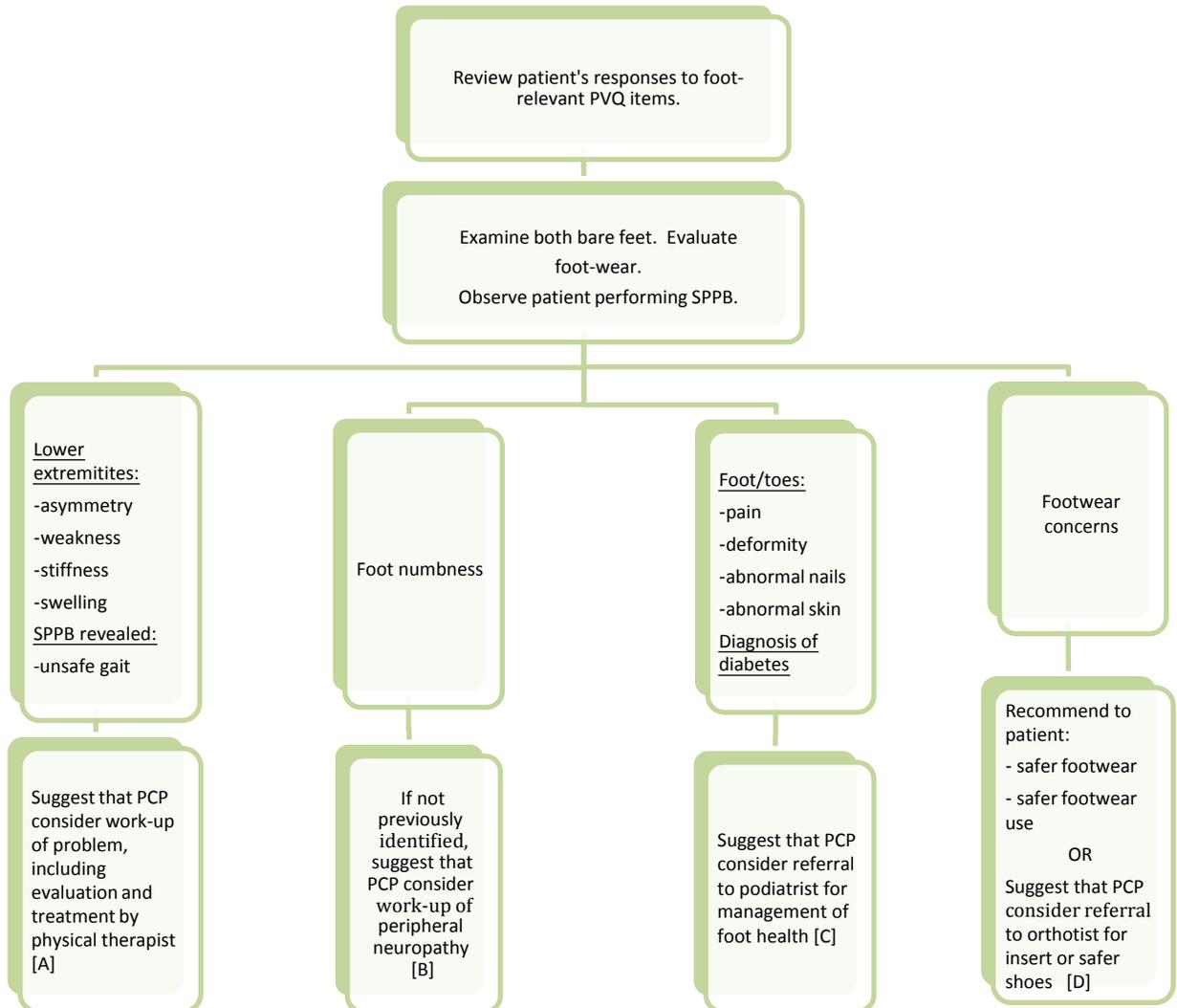


## Feet and Footwear Protocol



## Foot and Footwear Problems

Communication of FCM

### **Recommendations:**

- A. Suggest that the PCP consider evaluation of the problem, if not previously diagnosed, and consider a referral for physical therapy.**

**Background:**

- PVQ – Tripped over something during a fall, leg weakness
- FCM SPPB gait evaluation – Asymmetry of leg use, foot drag

**Assessment:** The patient has ankle or foot problem that requires further evaluation and therapy.

- B. Suggest that the PCP consider evaluation of peripheral neuropathy, if not previously diagnosed.**

**Background:**

- PVQ – Foot numbness

**Assessment:** The patient has decreased sensation in feet, which could contribute to risk of falling.

- C. Suggest that the PCP consider referral to a podiatrist for management of foot health.**

**Background:**

- PVQ – Foot pain or deformity, Diabetes
- FCM exam – Foot pain to palpation, feet deformed, nail hygiene poor, foot skin breakdown

**Assessment:** The patient has foot ulcers, bunions, hammertoes, calluses, corns, nail abnormalities, skin and nail problems, diabetes may increase patient's risk for continuing foot problems and consequent falling.

- D. Suggest that the PCP consider referral to orthotist for shoe inserts, customized foot wear, or an orthosis for better foot support.**

**Background:**

- PVQ – Patient is wearing shoes with poor support for his/her feet

**Assessment:** The patient's shoes are likely to increase his/her risk of falling.