## Request for Podiatry assessment

NHS Borders Podiatry service provides highly specialised care for patients with major foot complications.

## What we treat:

- Ulceration and foot infections that have needed antibiotics.
- In-growing toenails with inflammation and infection.
- Painful musculoskeletal foot problems in children and adults.
- Nail care and callus reduction is **only** carried out in patients who have been classified with a moderate or high diabetic foot risk, patients who are under the care of the specialist vascular team or patients who have been told they are immune suppressed due to medication, dialysis, chemo or radiotherapy.

What we do not treat: Please be aware any referral received for these conditions will be declined.

- Fungal toenails
- Verrucae
- Non-painful foot deformities (for example toe deformities or flat feet).
- Nail care, for those without a medical need (as above)

Unless you have a health problem that means you are at risk of foot disease and ulceration NHS Borders Podiatry will not be able to offer ongoing care.

Title: Mr/Mrs/Miss/Ms/Mx	Forename:		Surname:
D.O.B	Preferred contact number:		If we call you, is it ok to leave a message on your answer machine? Yes / No
Email address:	Do you require an interpreter? Yes / No		If yes for which language?
Address:		GP & surgery a	iddress
Postcode:		Postcode:	

<b>Reason for referral:</b> Please give as much relevant information as possible including any treatments already tried or investigations e.g. x-rays or blood tests. If possible, please attach a photograph of the problem.
Please indicate current level of pain, where 0 is no pain and 10 is extreme pain
Are you currently on antibiotics for this problem? Yes / No
Do you have an open wound on your foot? Yes / No
<b>Medical history:</b> Please be aware <b>we may not have access to your GP records.</b> If you need more space, please continue on a separate sheet.
<b>Current medication:</b> Please be aware <b>we may not have access to your GP records.</b> If you need more space, please continue on a separate sheet, or attach a copy of your repeat prescription with this form.

A limited home-visit service is only available for patients who are classified as housebound.

I need a home visit because (tick all that apply)

- I am bed /chair bound and have a key safe (we may ask for your key safe number to facilitate a visit).
- I use a hoist and am unable to travel in a wheelchair taxi.
- I am temporarily too unwell to travel due to undergoing medical treatment.

We may contact your GP for further information regarding any of the above.

Please fill in **all** sections of this form and sign below. Incomplete forms will be returned which may result in a delay in receiving an appointment.

Date:

## What happens now?

When you have fully filled in this form, please send it to:

AHP Booking Team AHP Support Office Borders General Hospital TD6 9BS

Or email Podiatryadmin@borders.scot.nhs.uk

Once we receive your request it will be triaged by a member or staff and if appropriate you will receive an appointment to see one of our team. Please be aware we work from selected sites in the Scottish Borders and are not in every area. Some travel may therefore be required, to attend your appointment.

## What can I do until my appointment?

For pain in muscles, bone or joints, visit <u>www.nhsinform.scot/illnesses-and-conditions/muscle-bone-and-joints/</u>

For fungal nail infections, visit <u>www.nhsinform.scot/illnesses-and-conditions/skin-hair-and-nails/fungal-nail-infection/</u>

For information on warts, visit <u>www.nhsinform.scot/illnesses-and-conditions/skin-hair-and-nails/warts-and-verrucas</u>