



Walking Mobility Clinics

Complete Mobility & Lower Limb Services

Patient's Name: _____

Patient's Address: _____

Home #: _____ Cell#: _____

Date of Birth: _____

Health Card: _____

DIAGNOSIS / PROBLEMS

- | | |
|--|--|
| <input type="checkbox"/> Plantar Fasciitis, Heel Pain | <input type="checkbox"/> Drop Foot |
| <input type="checkbox"/> Metatarsalgia (eg. Morton's Neuroma) | <input type="checkbox"/> Back Pain (DDD, DJD, Spinal Stenosis) |
| <input type="checkbox"/> Achilles Tendinitis | <input type="checkbox"/> Vascular Disease |
| <input type="checkbox"/> Knee Pain
(PFS, Ligament Injury, Tendinitis) | <input type="checkbox"/> Neuropathy/Neuropathic Pain |
| <input type="checkbox"/> Arthritic Foot/Knee/Hip | <input type="checkbox"/> Diabetic Foot & Leg/Wound |

PEDORTHIC SERVICES

- | | |
|--|---|
| <input type="checkbox"/> Biomechanical Gait Assessment | <input type="checkbox"/> Shoe Modifications |
| <input type="checkbox"/> Custom Foot Orthotics | <input type="checkbox"/> Custom Made Footwear |
| <input type="checkbox"/> Knee Brace (Custom/Off-the-Shelf) | <input type="checkbox"/> Ankle Brace |
| <input type="checkbox"/> AFO/Dropfoot Splint | <input type="checkbox"/> Plantar Fasciitis Night Splint |
| <input type="checkbox"/> Orthopaedic Footwear | <input type="checkbox"/> Walking Cast/Boot |
| <input type="checkbox"/> Compression Stockings:
___ 15-20mmHg ___ 20-30mmHg ___ 30 40mmHg | <input type="checkbox"/> Wound Boot |

MEDICAL CONSULTANT SERVICES: ASSESSMENT & TRIAGE

- Assessment & Triage for Lower Extremity Pathology
- Assess for Gait & Mobility Aids: AFO, Braces, Orthotics, Walkers, Canes
- Diabetic Foot: Assess/Counsel/Team Triage and Care
- Wound Care

PHYSICAL REHABILITATIVE SERVICES

- Stabilization, Stretching and Strengthening Program
- Manual Therapy and Manipulations
- Cold Laser Therapy

CHIROPODY SERVICES: ASSESS AND TREAT

- Nail Care
- Corns & Calluses
- Plantar warts
- Ingrown nails

Comments: _____

Ref. #: _____

Physician's Name: _____

Date: _____

PLEASE FAX REFERRAL & PROVIDE ORIGINAL TO PATIENT