

FOOT/ANKLE FOLLOW UP FORM

WORK COMP: Y N WORK STATUS: OOW LIGHT DUTY DESK DUTY FULL DUTY

POST-OP

FOLLOW UP

WEEKS POST-OP: _____

WEEKS FROM INJURY: _____

WB STATUS: NWB TDWB PWB FWB

F/U TO: MRI CT IMMOB PT ORTHOTIC PT INJXN

AVE PAIN: 0 1 2 3 4 5 6 7 8 9 10

AVE PAIN: BETTER WORSE SAME

OTHER:

EXAM: CALF PAIN: Y N NV STATUS: INTACT OTHER: _____ SWELLING: Y N _____

INCISIONS: HEALED OTHER: _____ ALIGNMENT: NL ABNL _____

PINS: Y N INTACT COMPLIC: _____ OTHER: _____

ROM:

STRENGTH:

STABILITY: NL OTHER: _____ TTP:

OTHER:

TREATMENT: sutures out steri strips on sterile dressing bacitracin ace wrap // sutures left in no steri strips

Injection: cortisone diagnostic // R L ankle STJ tendon sheath other: _____

DATA: MRI CT XR U/S XR -HP DICOM WB NWB B R L ANKLE FOOT AXIAL/HEEL HFA

POSTOP XR: INTRA-OP PIC REVIEWED: Y N ALIGNMENT: NL ABNL _____

FRACTURE/OSTEOTOMY: HEALED PARTIAL NONE // FUSION: HEALED EARLY CONSOLIDATION NONE

HARDWARE: INTACT BROKEN LUCENCY // TAR IMPLANT: INTACT OTHER: _____

OTHER:

IMPRESSION/PLAN:

IMMOB: BOOT: T SH / POSTOP SHOE / CAST / TOE PLATE / WB STATUS: NWB TDWB PWB WBAT

DEVICE: STIRRUP SP BRACE MALLEO ACHILLO ORTHOTICS NIGHT SPLINT ARIZONA AFO SOLID AFO
RITCHIE CF ALLARD TOE OFF 2.0 CF FOOT PLATE CF MORTON'S EXT SH. ARTICULATING AFO

PT: PROTOCOL WRITTEN IMAGING REQUIRED: MRI CT DVT STUDY EMG ULTRASOUND

OTHER:

F/U: MD PA 1 2 3 4 5 6 7 8 9 10 11 12 (3 MO) 4 ½ MO 6 MO 1 Y PRN