

Diabetic Footwear and Accommodative Foot Orthotics

Careful time and consideration were taken when prescribing and selecting footwear for your condition by your physician and Orthotist/Pedorthist. It is imperative that you closely monitor the fit of your shoes and foot orthotics to ensure problems do not arise with your feet. Routine follow-up is paramount, especially in the first few weeks after fitting. Be sure to schedule 3 week and 6 week follow-up visits with your practitioner immediately after being fit with your new shoes/orthotics.

Common problems experienced with new shoes and foot orthotics are, but are not limited too: callousing, ulceration, nail bed fungus, excessive pressure, exacerbation of symptoms, and discomfort. These can all be avoided if you will take some preventative "steps" with your new footwear and orthotics.

Closely monitor the ends of your toes, the inside of the 1st toe and the outside of the 5th toe. If you experience excessive pressure here indicated by redness/discoloration, call us immediately to make adjustments to your fit.

A small amount of "slipping" of the heel is <u>normal</u>. This allows for a natural break in the forefoot of the shoe and a fluid transition from heel strike to midstance to toe-off.

Your foot orthotics will be fit and/or fabricated according to your physician's specific prescription. Your weight, activity level and condition play a large role in what materials we select to fit you with and/or fabricate your orthotics of. This type of orthotic is not, however, a generic "foot bed" like you can get at a local drug store. They will tell us a lot about the pressures that you place on your feet by the wear pattern we are trained to see in them. Again, this makes routine follow-up all the more important. Should we see a pattern that causes concern, we can recommend a different type of orthotic to your physician or make specific modifications to your existing orthotics.

Another thing to consider is that which separates a "diabetic" shoe from any other "off-the shelf" shoe. Diabetic shoes are much deeper, wider, more accommodative, and more adjustable than a typical, off-the-shelf shoe.

There are features designed into each shoe to accommodate very specific problems that diabetic patients experience with their feet. The depth of diabetic shoes is even adjustable to accommodate changes in a patient's swelling of the feet. Most diabetic shoes will have a steel shank, cushion heel, and/or rocker bottom built into the sole to address multiple foot concerns and allow for a smooth gait cycle.

These shoes are meant to be as preventative as they are comfortable and accommodative. Toe, partial foot and complete lower limb amputations can all be avoided if proper care is taken of your feet, beginning with appropriately fitting shoes and accommodative orthotics. However, it is your responsibility as a

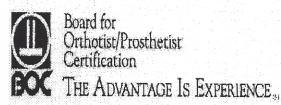
patient to remain active in your own care. In other words, follow the instructions, prescriptions and protocols your physicians have set for you and take care of yourself! Getting appropriately fitting shoes/orthotics is just a small piece of the puzzle.

All of the shoes we provide have gone through a rigorous certification process by Medicare to assure that they meet specified, outlined criteria for the diabetic patient. Take this into account and understand that our selection of shoes must be limited to a select few. We will make appropriate recommendations based on your diagnosis and condition. Not all shoes qualify for Medicare's Supplier Standards and an even smaller number of shoes are appropriate for some diabetic conditions.

We hope to continue to be a part of your diabetic care team, along with your physicians. Routine follow-up care of your feet cannot be stressed enough, so we'd like to see you regularly for scheduled visits. As always, feel free to call us any time should questions or problems arise.

Jeff Cole, CO, BOCP, Chief Orthotist Certified Orthotist/Prosthetist Jason Watson, CO, BOCP Certified Orthotist/Prosthetist

Daryle Hicks, CPed Certified Pedorthist





The patient/caregiver has received written and verbal instructions on how to put on and take off shoes and inserts, wearing schedules, foot care/inspection, and to report any problems if they occur. I was also given the opportunity to ask questions.

| I have received my diabetic shoes | and ins | serts | and | am p | lea | sed | with th | ie s | ervi | ce. |
|-------------------------------------|---------|-------|-----|------|-----|-----|---------|------|------|-----|
| the fit and comfort of above items. | | | | | | | | | | |
| the manufacturer's warranty. | | | | | | | | | | |

Patient Name Date of Delivery

By signing below, I certify that I observed the patient wearing the shoes and inserts and the fit to be proper.

Jeff Cole, CO, LO, BOCP

Date