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APPOINTMENT:	

PODIATRY ASSESSMENT REQUEST FORM (NCCCG)

INADEQUATELY COMPLETED FORMS AND UNJUSTIFIABLE REQUESTS WILL BE RETURNED TO THE REFERRER

PATIENT DETAILS:			Referral Date: Short date letter merged		
SURNAME:	DOB:	PRACTICE:	URGENCY: OFFICE:		
Surname	Date of Birth	Organisation Full Address	Routine Urgent		
FIRST NAME:	GENDER:	(stacked)			
Given Name	Gender(full)	Tel: Organisation Telephone	Biomechanics Refer directly to department /		
NHS NUMBER:		Number	Paediatrics booking centre		
NHS Number			Wound Care		
ADDRESS		Practice code:	General Podiatry		
ADDRESS:		Organisation National	Give reasons for domiciliary		
Home Full Address (stacked)		Practice Code	request in referral reason box		
			Domiciliary		
			CATEGORY: NHS PP P		
			INPATIENTS (Community hospital setting only):		
		INTEGRICAL DIGITA	Walking Chair Trolley Bed		
PHONE:	Talanhana	INFECTION RISK?	Needs Oxygen		
Home: Patient Home Telephone Mobile: Patient Mobile Telephone		(if yes, state MRSA, etc.) YES NO	Hospital ward details :		
Work: Patient Work Telephone			Discharge date:		
			LIKELY MODE OF TRANSPORT (patient to arrange)?		
			Own Car Relative/carer Bus		
			Taxi		
			Unable to transfer onto couch without assistance		
INTERPRETER REQUIRED? (if yes, state language) YES NO DEETHNICITY: Ethnic Origin			ETHNICITY: Ethnic Origin		
PATIENT HAS GIVEN	VERBAL CONSE	NT FOR:			
the information	within this referr	al to be sent to the receiving care	e team		
the receiving care team to access the summary / full GP record (where available) for the duration of the period of care,					
where there is a legitimate reason to do so					
ADDITIONAL NEEDS / LONE WORKER RISKS / GENERAL INFO:					
REFERRAL REASON:					
N.B. The Podiatry Service does not provide a routine simple nail cutting service					
DELETE WHERE APPROPRIATE:					
Problems					
Medication					
Allergies					
REFERRER DETAILS:					
REFERRER'S NAME: Free Text Prompt					
SIGNATURE			DATE: Chart data latter marged		
SIGNATURE:			DATE: Short date letter merged		

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SEND REQUEST TO:	Email
West Cumbria	
Podiatry Dept, Workington Community Hospital, Park Lane,	
Workington, CA14 2RW	podiatry.requests@ncic.nhs.uk
Podiatry Dept, Flatt Walks Health Centre, 3 Castle Meadows,	
Whitehaven, CA28 7QE	
<u>Carlisle</u>	
Podiatry Dept, North Carlisle Medical Centre, Eden Street, Stanwix,	
Carlisle, CA3 9JZ	carlislepodiatry@ncic.nhs.uk
Podiatry Dept, London Road Community Clinic, Hilltop Heights,	
London Road, Carlisle, CA1 2NS	
<u>Eden</u>	penrithpodiatry@ncic.nhs.uk
Podiatry Dept, Penrith Health Centre, Bridge Lane, Penrith, CA11 8HX	реплирован уелыслиз.ик

Note to <u>provider</u>: this referral form has been standardised locally in line with the required NHS minimum requirements and guidance from Information Governance. Please email <u>primis@ncic.nhs.uk</u> with any proposed amendments to the form.

Guidelines for referral for Podiatry assessment.

Referrals are accepted from all health care practitioners and patients themselves
Where possible we aim to cure problems and discharge the patient. We can no longer treat people who have a low medical need but need help cutting their toenails. The majority of our long-term caseload is concentrated on the management of chronic painful foot conditions and the at risk limb/foot which is compromised by circulatory and/or neuropathic complications or an increased risk of infection.

An assessment tool assists in determining varying degrees of medical and podiatric pathology, the combination of which will decide whether a new patient can be accepted for treatment.

Domiciliary visits are available for patients who meet the <u>strict</u> criteria for domiciliary care. People who are able to leave the house for hospital appointments, day care or for social events will be asked to attend clinic. The patient transport service may be able to assist people who find it difficult to access transport due to medical reasons.

The following is intended as a guide for the types of conditions/patients where treatment may be appropriate

- At risk foot/limb-compromised by circulatory and /or neuropathic complications or an increased risk of infection.
- Diabetes mellitus where long term complication are present
- Connective tissue disorders such as Rheumatoid Arthritis or Scleroderma.
- Pharmacological complications such as chemotherapeutic/immune-suppression agents
- Biomechanical dysfunction-resulting in pain in the lower limb in adults and children
- Podopaediatrics children under 12 with gait problems or painful foot conditions
- **Hyperkeratosis**-Heavy corn/callous formation resulting in pain or mobility problems.
- **Pathological nail conditions**-Advice on self-management and where necessary routine treatment may be provided by a podiatry assistant.
- Painful in growing toenails-Depending on the patient's medical status, these may be managed conservatively or treated in one of our nail surgery clinics.
- Wound care- especially where debridement is indicated.

General Podiatry referrals may be made to clinics at the following locations:

West Cumbria

- Whitehaven
- Silloth
- Aspatria
- Wigton
- Workington
- Cockermouth
- Maryport & Keswick

Carlisle

- North Carlisle Medical Centre
- London Road Community Clinic
- Brampton Hospital

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Longtown Medical Centre

Eden

- Penrith Health Centre
- Kirkby Stephen Health Centre
- Shap Health Centre
- Alston Hospital
- Appleby Health Centre

Domiciliary visits are only available for housebound people who meet the strict criteria for domiciliary care