

McLaren Print System Order

Order No: 50741 Reprint Previous Order No: 5539 Order Date: 2019-12-03 User: MELINDA RESCHKE Phone: 2486823070

Ship Location: McLaren Oakland Waterford Family Medicine 3901 Highland Rd., Suite D Waterford, MI 48328

Forms Quantity: 100 Paragon Dept No: 73650 Dept Name: McLaren Oakland Waterford Family Medicine Company Number: 810

Order Total Price: 0.00

Item Number: MM-126 Item Description: Diabetic Foot Screening Revision Date: 2/2017 Print: 1 sided black and white Paper: 20# White Text Size: 8.5 x 11 Fold: Finish: Drill: None Misc Info:

McLaren Medical Group DIABETIC FOOT EXAM

DIABETIC I	100T EXAM
Current History (Check the appropriate boxes): Change in fost since last visit: () light: () Left Uicer or history of a foot vision: () Right: () Left Foot pen: () Right: () Left	Vehrationy Sensation using 128-Hz Tuning Fork (Check the appropriate boxed): 1. Patient should close their ayes while being screened. 2. Test over the to of the guest to bilaterably. D Normal - Right D Atenomal - Right
Pulses (Circle appropriate pulse):	D Normal - Left D Abnormal - Left
+2 +1 0 Bight Posterior tokal (behind ankle bone)	Monofilament Testing:
+2 +1 0 Right Dorsals pedis (higr of foot)	1. Patient should close their eyes while being screened.
+2 +1 0 Left Posterior tibial	 Using 10-g monofilament, apply pressure to each site until monofilament bends.
+2 +1 0 Left Donalis pedia	
Foot Exam (Check the appropriate boxes): Nells No.9, too lange, or ingress (2 Night SLaft Foot adbunction: CathurConn: Burison (Halaw selige): Diright SLaft Soe detumity: Capen source) Diright SLaft Come source) Diright SLaft Come source) Diright SLaft Come source) Diright SLaft Come source) Diright SLaft Come source) Diright SLaft Come source) Diright SLaft	
Risk Classification and Management Plan (Check the appropriate boxes):	J-a Ja
Risk Category & Definition 0: No Loss of Protective Sensation (LOPS) 1: LOPS 2: LOPS with either high pressure Category of user, neuropathic factors 0: History of user, neuropathic factors	Document a "v" in the circle if the patient feels the monoliament at "v" in the circle if the patient feels the monoliament at the circle if the patient cannot feel the monoliament at the circle if
(Charcot foot), or amputation	Comments:
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