

CONDITION OF FEET AND ANKLES

****Please circle any of the following that currently apply to you:***

ATHLETE’S FOOT

EDEMA

NAIL FUNGUS

BROKEN SKIN

FLAT FEET

NEUROPATHY

BUNIONETTES

HALLUX VALGUS

CLUB NAIL

BUNIONS

HEEL SPURS

VARICOSE VEINS

CALLUSES

INGROWN TOENAILS

WARTS

CORNS

METATARSALIGIA

BREAKS/SPRAINS

Please list any other foot conditions that you have experienced that are not listed above.

I _____ acknowledge that the information that I gave on the previous page is both

(PLEASE PRINT)

current and correct.

Date: _____ Signature: _____