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Additional information re: Morton's Neuroma (to accompany GP referral)

Patient Name:Address:			DOB:	
Clinical hist	ory:			
Duration of pain		Please mark out the site of pain		
□ <6 weeks			r rouse man out the one of pain	
	☐ 6 week	s to 6 months		-0
	□ >6 mor	nths	a99 FBB	200 - 190 B
Onset of pa	in			1
	☐ running / exercise			
	☐ standing / walking		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	□ at rest	/ at night		
	□ whilst v	vearing closed shoewea	ar 🔲 🔾	
	(relieve	ed by removing shoe)		
Character of pain			Left foot	Right foot
	☐ burning pain			
	☐ shooting pain			
	□ sensati	on changes		
Previous su	rgery?			
	□ Yes	□ No		
Investigatio	ns done s	o far:		
☐ X-rays (weight bearing) of ankle and feet			☐ Ultrasound	
Treatments	so far:			
☐ Activity modification			☐ Oral analgesics / NSAIDs	
(reduce weight, reduce impact exercises)			□ Podiatrist review	
☐ Broad and supportive shoewear			☐ Corticosteroid injection (if pain >3 months)	
□ Orthotics	/ neuroma	pad		