

A guide to writing your patient diary



Keeping a diary is fun. You can hand write or type whichever you prefer. Writing a daily note of how your recovery goes is both helpful to you and your clinician.

Contents

PUBLISHING YOUR DIARY	1
SUGGESTED CONTENT	2
WHO IS DAVID TOLLAFIELD?	2
HOW TO SUBMIT	2
WHAT'S IN IT FOR ME?	2
IF YOUR DIARY IS PUBLISHED	3
BUNION SURGERY	3
MORTON'S NEUROMA	3

Publishing your diary

Your diary can be produced as a post or short article in Footlocker. The context of the material in this short guide covers various tips.

Contact and submissions. Please use e-mail: myfootjourneys@mail.com

Always check your spam as replies can disappear without you knowing

Is there a best way?

No, do what is comfortable.

Do you have to be a good writer?

No, just put down how you feel in your own words.

Perhaps complete your diary at the same time each day

Suggested content

- How do I feel today, better worse?
- What are my limitations after surgery?
- How much pain medication did I need?
- Describe doing simple tasks
- Did I do something silly, advice to others?
- Did I have any downsides?
- What was it like bathing, dressing?
- How far could you walk (without discomfort)?
- Was there anything I learned I could pass onto readers
- Use a scale for discomfort maybe 1-5 (see diagram below)

Who is David Tollafeld?

I am an author and podiatrist and I will work with you or your own podiatrist (podiatric surgeon) to produce a publication for patients and lay readers. I work for the company Busypencilcase Communications Ltd. Please do connect to my website where there are more details about me. I have attached my own journey (#2) and examples of another patient with excerpts. Do not worry about embellishment unless you feel comfortable. Please describe any experience as you are sharing this information potentially with others.

How to submit

Ideally use Microsoft Word, but you can handwrite if you prefer. Record at the end of the day. As time progresses (after 3-4 weeks) you can record less frequently. It is better to write your thoughts immediately as recall is neither accurate nor easy after the event. It is better to submit photos separately from a digital camera or smartphone/tablet labelled with the date on the file although not essential. Discuss with your consultant where to send to files or write to me at **myfootjourneys@mail.com** I will stay in touch with your consultant during the process.

What's in it for me?

Publishing is very expensive and so I cannot pay patients neither would this be ethical. You can back out at any time. This is a voluntary activity supported by your professional and any information you

provide is guaranteed anonymity at all times. A made up name will be used selected by me or left to choose. However, you will still be acknowledged as a beta-reader. As a member of the College of Podiatry I am bound by their ethical code.

If your diary is published

Publishing within Footlocker gives access to anyone who signs up. In some cases I will publish a wider description of the content, usually as an e-book. E-books cannot be provided free but are set at a low price for uploading on tablets, smart phones and kindle. Published books in print will be sent to all contributors free once available. If you want to see a sample go to amazon.co.uk and select **books-Tollafeld**, or click on the link below and you will be able to download a free sample of my [Morton's Neuroma](#) book.

Patient materials will be available free from my website <http://www.consultingfootpain.co.uk/>

Bunion surgery

Day 5 Woke at usual time, my body clock seems to be getting back to normal. I have mastered the art of getting in and out of the bath keeping my left leg clear of the water, being nimble and agile has its advantages. No pain on waking but after bathing and dressing and manoeuvring downstairs I was starting to feel uncomfortable, after sitting with foot elevated for a while was feeling better. Have not felt the need for any pain relief so far today. The rest of the day was spent watch Christmas films on TV with foot elevated. No pain, although I have started to feel sharp shooting pains from my toes and across the top of my foot, they last a few minutes and are quite painful. Evening spent watching TV with foot elevated and a pack of frozen peas under heel/arch of my foot. No pain to speak of, still getting shooting pains which make me 'ouch' out loud!

Day 13 Finally, the day I have been looking forward to. I was up earlier than I have become used to as my appointment was for 9 am ... the nurse removed the bandages carefully, this time I sat and watched as I knew what was underneath! David T popped in to have a look and to take a picture, as we were chatting I kept my eyes on him (rather than watch the nurse) whilst she removed the Steristrips, the relief was instant; the strips had become very constrictive and were making my foot quite uncomfortable. Wearing my Aircast boot means I can walk without the aid of a crutch, I must admit that I found using two at the same time didn't work for me as my balance was all over the place, but one on the same side as the injured foot gave me more stability but everyone is different.

Day 27-28 Resting with foot elevated certainly helps, the swelling has reduced considerably over the past two days, all but one little bit of scabbing has come off and I'm walking around the house with a slipper on as I'm finding the Aircast boot is making my hip ache with the weight and lop-sided gait, but still wearing it to go outside, which is minimal. I'm continuing to massage with Bio-Oil onto the scar. I'm now into my fifth week since surgery and hopefully when I see the Physiotherapist next week she will tell me to leave the Aircast boot of entirely. Shooting pains are less and less, all in all, everything is going nicely.

Morton's Neuroma

Day 1: The anaesthetic block lasted until midnight and then the foot came back to life. That meant it had worked for 15 hours. A forced wiggle (of the foot) brought stinging so I took another ibuprofen after I had loaded myself with paracetamol and codeine earlier. The wiggle was involuntary and the wound hurt like crazy. My first night had not been so good, but then I don't sleep well anyway. Stinging to throbbing so level 2-3 at most; this is the visual analogue scale used when assessing pain. Ten is pretty bad but I was okay...

...The shower was avoided and would have to wait until the initial discomfort started to ease, allowing me to stand. The sticky dressing was no longer secure and had overlapped. The foot

continued to wax and wane - pain wise; but always best in the Aircast™ for any standing, of which I did little. Hanging the foot down was not too bad. This is a tell tale sign as to how things are going. Hanging a foot down can be pretty unpleasant in the early days, so I seemed to have overcome hurdle 1 in that regard.

My stinging was replaced by throbbing. Paracetamol (x2) 500mg and (x1) 400mg ibuprofen was sufficient to control my discomfort. My second night was much better.

Day 23-26 When the foot hit the ground first thing I noted soreness but the strange sensation wore off after a few steps. I dried in between toes carefully and noted the full numbness effect; strange and not pleasant. I noted at the end of today it ached with a soreness that I had not experienced, intermingled with a sensation of itching. The scar was changing colour and looked more like a healed incision line now at just over three weeks. My foot was noticeably tender over the 4/5th nail. I tried cutting it back in the morning but there was no problem with length or thickness. The changes in nerve messages seemed disturbed and occasionally I could feel intenseness of discomfort. *This was something I had been unaware of as a foot surgeon but now when I talk to patients, the sensation of a nail being sensitive is not uncommon.*

An anti-inflammatory tablet helped my foot during the night but the mild form of nerve pain was part of normal recovery. I managed a walk down the road to the end and back in my boots (0.7 mile). So at least the boots were okay until I had covered a ¼ mile. *It was progress, the top of the foot uncomfortable at times as if the result of a needle stuck in me where it ached.* The scab ever present stood out as the colour faded elsewhere.

Nearly six weeks

Day 40-58: That first morning step still sent out messages, the sensation dense and unpleasant, not painful but adjacent to where the neuroma was. *Such is the confusion of messages to and from this small plantar digital nerve.* When I poked my foot the tenderness had diminished and walking continued to improve when visiting town. The scar line had settled well, majority now a faint line and no colour changes of concern. *The air temp remained cold at around zero.* A bout of spasm was experienced in bed, the first so far. Was the numbness just a little less?...



'Progress through the art of communication'

