

[Doctor Name/Clinic Name]

[Address Line 1]

[City, State, Zip Code]

[Phone Number]

[Date]

[Patient Name]

[Patient Address]

[City, State, Zip Code]

Dear [Patient Name],

This letter is a follow-up regarding your recent foot surgery performed on [Date of Surgery]. We want to ensure your recovery is progressing well and that you are taking the necessary steps to manage your diabetic foot health.

Post-Surgical Instructions:

- Keep the surgical dressing clean and dry until your next appointment.
- Inspect the surgical site daily for signs of infection, such as increased redness, swelling, warmth, or discharge.
- Check your blood sugar levels frequently, as stable glucose levels are essential for proper healing.
- Avoid putting weight on the affected foot unless otherwise instructed by your surgeon.
- Take all prescribed medications, including antibiotics and pain relief, exactly as directed.

Warning Signs:

Please contact our office immediately if you experience a fever over 101F, foul-smelling drainage from the wound, or sudden, severe pain that does not improve with medication.

Follow-Up Appointment:

Your next follow-up appointment is scheduled for:

Date: [Date]

Time: [Time]

If you have any questions or need to reschedule, please call us at [Phone Number].

Sincerely,

[Doctor Signature]

[Doctor Name/Clinic Name]