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Hand-Out

-How to Take Care of Skin and Nails at Home-

07/15/14

Knowledge is power, and this hand-out offers you tips on keeping the skin and nails of your feet as healthy as possible!

Both beauty and health come from within. The health of the skin and the nails on your feet is very much reflected by your general health. The more “internal” health you have, the less “external” interventions you'll need.

This hand-out focuses both on preventive steps to keep the skin and nails of your feet as healthy as possible, as well as interventions for taking care of various problems that you may experience with the skin and nails of your feet.

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1. Eat a healthy diet and maintain a healthy weight:

- A healthy diet of *fresh, natural, whole, and unprocessed foods* provides:
 - *Healthy proteins* for maintenance of muscle mass and skin tissue;
 - *Healthy fats and oils* for cell membranes and lowering of the bad cholesterol, LDL, and increasing of the good cholesterol, HDL, to keep your arteries patent and allow good arterial circulation with all the nutrition down to your feet;
 - *Complex carbohydrates* for energy;
 - And lots of *vitamins, minerals, and phytonutrients* for good cell metabolism and a healthy immune system, among other things.
 - Avoid unhealthy saturated animal fats from animal products, trans-fats, other unhealthy fats, LDL cholesterol, and too many simple carbohydrates that are converted into fat. They all contribute to arteriosclerosis, which is occlusion of your arteries.
 - Occluded arteries will prevent a good flow of arterial blood to your feet, that are at the highest risk due to their distance from your heart and the longest arteries to reach them.
 - A heavy body causes a lot of stress and extra pressure on your feet, resulting in more corns, calluses, aches, and pains.
- See my hand-out on “Health, Well-being, and Happiness.”
- See my hand-out on “Recipes.”

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2. Don't smoke:

- The nicotine in cigarettes hardens your arteries, increasing your blood pressure, and hindering a good arterial blood flow. The nicotine also causes spasms of your capillaries, making it difficult for your arterial blood to give up nutrients and oxygen to your muscles and organs. Smoking also causes emphysema and less oxygen in your arterial blood.

3. Exercise or just “get up and move around” throughout the day:

- Exercise and moving *decrease the chance of body-wide inflammation.*
- A sedentary life-style increases the chance of body-wide inflammation.
 - A body-wide inflammation increases insulin-resistance and insulin levels, and contributes to weight-gain and cardiovascular disease.
- Exercise, such as walking, will squeeze your calf and thigh muscles and help pump your venous blood and lymph fluids back to the core of your body and, thereby, *decrease swelling in your feet and lower legs.*
 - Walking works well for reducing the swelling of your feet and lower legs if it's caused by leaking valves of your veins or lymph vessels. If the swelling is caused by another chronic disease, the swelling will not go away until the disease process has been corrected.
- Severe swelling in your feet and lower legs in the free spaces between your cells separates the end of your arteries and the beginning of your veins from the cells of your tissues, at the capillary level. The exchange of oxygen, nutrition, and medications from the arterial blood into your



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cells is hindered, and the exchange of cell waste and carbon dioxide from your cells into the venous system is hindered. Your swollen skin and muscle tissues can be easily injured and infected, and healing is slow.

- See my hand-out on “Swelling.”
- See my hand-out on “Exercise.”

4. Wear shoes and socks with a proper fit and of a proper material:

- Wear shoes that are big enough in the toe-box to ***prevent rubbing on the bony parts of your hammer toes and bunions.***
 - This minimizes friction and development of corns, calluses, and ulcers on your toes and sides of your feet.
- Wear shoes that are ***big enough for your swollen feet to be comfortable.***
- Wear bigger shoes for times when you feet are more swollen.
 - This allows for a free flow of your venous blood and lymph fluids.
- Wear socks that are big enough and not too tight around your lower legs.
 - This prevents swelling of your lower legs above the socks.
- ***Wear a soft insert or a custom-made orthotic to prevent corns and calluses on the bottom of your feet, and subsequent pain and ulcers.***
- ***Wear shoes that your feet can breathe in and socks that wick away moisture to keep your feet dry.***

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- Fungus, such as *athlete's foot*, thrives well on skin that is moist and warm. The moisture can be cut down by wearing socks of a cotton-blend material, and shoes that are not plastic. Change your socks, use foot powder, and clean your feet as frequently as necessary.
- Both *shoes and socks cushion and protect the skin of your feet from the environment*. The less humidity in the air, the drier the skin will be on your feet, unless it's protected by a sock and shoe. Your skin will stay softer and have less calluses if you tend to wear socks and shoes.
- See my hand-out on “Shoes and socks.”
- See my hand-out on “Corns and Calluses.”
- See my hand-out on “Orthotics.”

5. Keep your skin and nail folds clean, dry, and moisturized:

- Wash and dry your skin and nail folds daily, or more frequently if needed, with *soap and water to remove dirt, bacteria, fungal organisms, etc.* Keep in mind that your skin continuously gets dirty with waste products, from your cells, that are released onto your skin through perspiration. Dry with a soft towel, especially between your toes, to prevent a moist environment that creates an ideal environment for athlete's foot to thrive.
 - Use soaps that don't dry your skin and nail folds.
 - If you get a cut in your skin, a clean surface will allow less organisms to enter your underlying tissues and start an infection.
 - A cut or scrape can be cleansed with water and soap, dried, and then treated with an antiseptic, an antibiotic cream, and a band-aid.

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- Soaking your feet in water may feel therapeutic, but keep in mind that long exposures to the water dry out the oil follicles of your skin and leave it more dry, brittle, and susceptible to cracking.
- ***Moisturize your skin and nail folds with a good lotion or moisturizer to keep them soft and prevent them from cracking*** and allowing organisms to enter your underlying tissues and start an infection.
 - The bottom and sides of your feet have no hair follicles and no sebaceous glands to produce sebum, a lipid-like substance, that keeps your skin and hair moist. Your skin will be more dry in those areas. The dryness of your skin also depends on your general health, whether or not you smoke, the humidity level, and if you protect your skin with socks and shoes.
- *See my hand-out on “Products.”*

6. Remove corns and calluses and prevent them from recurring:

- ***A corn is cornified skin that develops into your tissue due to internal pressure from an underlying bone and external pressure from a shoe or simply the mechanical stress of walking around.***

A corn has no blood supply or sensory nerve endings, but the pressure it creates on nerve endings in the surrounding skin and underlying tissue causes pain.

- A hard-corn is often found on top or at the tip of a hammer-toe, on the metatarsal pad on the bottom of your foot, or the side of a bunion.

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- A soft corn is often found between your toes.
- ***A corn can become so deep that it crushes the underlying tissue and starts the beginning of an ulcer.***
- A corn should be removed with a scalpel by a professional.
- It's not advised to remove a corn at home with a liquid medicated corn remover. The acid can easily damage the surrounding skin and underlying tissue. Diabetics may not feel the subsequent pain.
- Hard corns can be prevented by reducing the pressure of a bony prominence in the weight-bearing area of your foot.
 - Use adhesive pads with a hole that is centered over the bony prominence. The pad can be held in place with paper tape.
- Hard corns and soft corns can also be prevented by cushioning the bony prominence causing the corn or the skin of an adjacent toe.
 - Lamb's wool, toe separators, foam tubes or gel tubes for the toes are effective for preventing corns on or between the toes. Foam tubes and gel tubes are also available with a covered tip and ideal for preventing corns at the end of a hammer-toe. Bunion covers are ideal for cushioning the skin over a bunion.



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- ***A callus is cornified skin that builds up on the outside of your skin.*** Just like a corn, a callus has no blood supply or sensory nerve endings.

It can create pressure on the skin or underlying tissue and cause pain.

- ***Calluses are caused by pressure and friction from a shoe or from the mechanical stress of walking.***
- Calluses are protective, but can become so thick that they crack and leave an opening for organisms to enter your underlying tissue and start an infection. They can also crush your tissue and start an ulcer.
 - An open fissure can be cleaned and closed with liquid band-aid.
- Calluses can be filed down on dry skin with an emery board or on wet skin with a pumice stone. A callus-removing cream can also be used.
- A professional can remove thick calluses with a dremel tool or scalpel.
- *See my hand-out on “Supplies.”*
- *See my hand-out on “How to take care of corns, calluses, bunions, and hammer-toes at home and with surgery.”*



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7. Treat athlete's foot and/or prevent it:

- ***Athlete's foot is a fungal infection that thrives best in an “opportunistic” environment that is warm, moist, and dark; like your feet in a closed shoe.***
- Athlete's foot causes your skin to become red and flaky; possibly with cracks in the skin. The borders are irregular. The open cracks expose your underlying tissue and create an opening for the fungus and other organisms to enter your underlying tissues to spread the fungus or start another infection. Fungal skin infections can be painful, burn, and itch.
- Athlete's foot is often misdiagnosed for something else, and visa versa. The irregular borders and the pain, burning and itching are the best clues.
 - ***Keep the skin, nails, and nail folds on your feet clean and dry.***
 - Wash your feet as often as needed and dry the skin well with a soft towel, including the space between your toes and your nail folds.
 - Use foot powders to absorb moisture from your skin. It's easy to shake foot powder into your socks before wearing them. Avoid using foot powder if you have cracks or openings in your skin.
 - Use socks of a cotton-blend material that wicks away moisture from your skin.
 - Change your socks when they get moist from perspiration; even if it means several times a day.



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- ***Treat athlete's foot with a medicated anti-fungal cream that can be purchased over-the-counter. Follow the directions.***
- *See my hand-out on "Supplies."*

8. Treat warts:

- ***Warts are caused by a viral infection and grow between the upper two layers of your skin where the temperature is ideal.*** A wart looks like a corn, but has small blood vessels that appear as little black dots on the surface. Warts will bleed if cut. Warts can be contagious to touch.
 - The easiest and cheapest method to get rid of warts is to apply a round piece of duct tape on the wart. The tape needs to be replaced when loose and should be slightly bigger than the wart. The presence of the tape will increase the temperature in the area covered and the wart, which is very temperature-sensitive, will likely not survive. If the treatment works, the wart is usually gone in a few weeks.
 - Topical creams and polishes, purchased over-the-counter, can also be used instead of the duct tape.
 - Finally, you can see a podiatrist, dermatologist, or other specialist to have the wart removed with one of the medical treatments available.
- *See my hand-out on "Supplies."*



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9. Clip your toe nails properly:

- People are wondering why their nails grow a certain way. Many “wife’s tails” have developed over the years about ways to change the way your nails grow. The truth is that you can't fool with “Mother Nature.”
- Your nail plate originates in the matrix, which is the “root” of your nail. The matrix lies on top of the last bone of each toe before the visible nail plate, and the matrix is covered by skin. The matrix closest to your foot creates the cells that form the top layer of your nail plate. The matrix closest to your nail plate creates the cells that form the bottom layer of your nail plate. And, the matrix in the middle creates the cells that form the middle layer of your nail plate.
- The shape of the matrix, from side-to-side, depends on the shape of the last bone in your toe. And, ***the shape of your nail plate, from side-to-side, depends on the shape of your matrix.*** Most people start out with nails that are relatively flat, from side-to-side, and with time, those nails will start curving in more and more, from side-to-side. Consequently, this is mostly due to the changing shape of the underlying bone. The bone is becoming more narrow, called “atrophy,” and this is caused by many different physiologic factors related to aging, among them limited arterial blood supply, the amount of oxygen in the arterial blood, and the amount and quality of nutrition in the arterial blood.
- The shape of the nail plate, from side-to-side, can also be affected by genetic factors, a variety of systemic or localized diseases and infections, and localized trauma affecting the matrix, the nail plate, or the surrounding tissue or skin.



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- The ***thickness of your nails*** is guided by the health of the matrix and is equally affected by your arterial blood supply, both in quantity and quality. The nail thickness can also be affected by genetic factors, trauma, and a variety of systemic or localized diseases and infections.
- Your ***nails can also have vertical or horizontal ridges, white or other colorful spots, other “blemishes,” or be detached from the nail bed.*** A foot care nurse can guide you and a podiatrist can offer treatment options.
- As a general rule, if all your finger nails and toe nails are affected, it's due to a ***systemic problem***. If all your toe nails are affected, it's due to a ***lower-extremity problem***. However, if the nail problem affects only one or a few toe nails, it's due to a ***localized problem*** in each separate toe.
- **Your nails should be trimmed short and with rounded corners, because:**
 - ***Sharp nail corners might dig into the skin of the adjacent toes.*** If you're unable to round the corners yourself with clippers, clip straight across and round the corners with an emery board.
 - ***Sharp corners of an ingrown nail will cause pressure and pain, and eventually break the skin on its own toe and cause an infection.***
 - ***The free edge at the end of a nail that's too long will hit the end of the shoe and get traumatized, or it will curl under itself and dig into the end of the toe, break the skin, or cause a callus or a corn.***
 - The nail should be clipped short to avoid the above, but still long enough to avoid trauma to the nail bed.



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- *The clipped nail can be filed smooth with an emery board.*
- **A thick nail should be thinned with an emery board, if possible, because:**
 - *The pressure from an over-lying shoe may cause the thick nail plate to crush the underlying nail bed and start an ulcer.*
- *Use help of a podiatrist or foot care nurse if you're unable to clip or thin your own nails safely.* This is especially important for diabetics.

10. What to do with ingrown nails:

- *An ingrown toe nail is a nail that curves so much on one or both sides that the nail plate on the affected side(-s) is unable to grow past the nail fold at the end of the toe without digging into the nail fold and break the skin.* The skin of the nail fold can also break if a curved nail is not clipped completely across and a “hook” of nail is left at the side.
- *The shape of the ingrown nail is caused by the shape of the matrix, which is caused by the shape of the underlying bone,* as previously discussed. Clipping your ingrown nail with a “v” in the middle will not change the shape of the nail. Stuffing cotton under the sides of the nail can lift the sides temporarily, but it doesn't permanently change the way that your nail plate grows, and the cotton will collect a lot of dirt.
- *The best way to clip an ingrown nail is to round the ingrown corner so that it can't penetrate the skin of the nail fold.* This has to be repeated every time the nail is clipped.



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- If the ingrown nail is so deep that it's impossible or too painful to have the nail rounded with clippers, a podiatrist can remove the side of the nail, including the underlying matrix, with a procedure called a ***partial matrixectomy***. An acid, usually phenol, is applied to the matrix afterward to prevent any further nail growth on that side.
- ***When the corner of an ingrown nail or a hook of a nail breaks the skin of the nail fold, dirt enters the underlying tissue and an infection starts.*** The toe becomes red, swollen, and painful. A localized pocket of puss usually develops where the skin has broken. The only way to fix this is to clip away the nail piece that has penetrated the skin fold. The area will have to be cleaned, an antibiotic cream can be applied, soaks can be done in Epsom salt, and antibiotics can be prescribed, especially if the person is diabetic, has poor arterial circulation, or is immune-suppressed.

11. What to do with fungal nails:

- ***The fungal organisms that grow in your nail are “opportunistic” like the fungal organisms that grow on your skin. A dark, warm, and moist environment is ideal for the fungus to infect your toe nail and thrive. Also, your nail is much more likely to become infected with a fungal organism if you have a weak immune system, if your circulation is poor, if you're diabetic, if you're compromised in any other way, or if your toe nail has suffered trauma, such as pressure, friction, or gotten loose from the nail bed.***
- ***The nail infected with fungus will become thick, flaky, and discolored, either white, yellow, brown, gray, or black.*** The color depends on the particular fungal organism that is infecting your nail.



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- A specimen can be collected by a doctor and sent to a laboratory for a definitive diagnosis of the fungus. The dust of a fungal nail often has a sweet, very particular smell, as well. Nails can be thick for other reasons, and a thick non-fungal nail is usually not flaky and has no sweet smell.

- ***Keep your nails clean and dry and avoid contact with the fungal organism from other people who are infected.*** Use foot powders, and change your socks as frequently as possible. Wear shoes that allow your skin to breathe.
 - ***A doctor or podiatrist can prescribe oral medications for a possible cure for the fungal nail(-s).*** The medication needs to be taken for a long time, may have to be repeated, may cause liver damage, and does not cure all fungal nails. The medication is usually only prescribed if the fungal nails are thick and cause a lot of pressure onto the nail bed. The medication is expensive and not always covered by insurance.

 - Another choice is to use ***topical ointments, lotions, or polishes*** that will make the fungal nail look better; however, usually none of the topical choices have the ability to completely cure the fungus.

 - ***A fungal nail will cause less pressure and hurt less if the height of the nail is thinned down periodically.*** This can be done at home with an emery board, or by a foot care nurse or podiatrist with a dremel tool.
 - In the process of thinning an fungal nail, occasional bleeding can occur because the nail bed under the fungal nail often is very uneven with bumps. Just like any other cut or scrape, the area should be cleaned and an antibiotic ointment can be applied.



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12. Know the signs and symptoms of infections and what to do:

- ***The common signs and symptoms of an infection are redness, swelling, heat, and pain.*** Usually all four signs and symptoms are present, but sometimes to such a small degree that one or more are not noticed.
- ***Infections can be in the skin, called dermatitis, or in the underlying tissues, called cellulitis. Infections can also be somewhere deeper in the body and not visible to the naked eye.***
- ***Puss*** is another sign of infection. It's a collection of dead bacteria that have been attacked and engulfed by your immune system. The color of the puss indicates which particular organism caused the infection.
- Red and brown blotches are often found on the skin of swollen lower legs. This is either an inflammation of the skin, called ***stasis dermatitis***, and caused by poor venous flow, or a non-inflammatory discoloration of ***hemosiderin deposits***, also caused by poor venous flow. Hemosiderin deposits are harmless, but cause permanent discoloration of the skin.
- Infections and inflammations can be ***treated with antibiotics***; however, if there's swelling involved, it'll reduce the effectiveness of the antibiotics. Therefore, ***ted-hose, compression hose, or wrappings of the lower extremities are often done to reduce the swelling***. It's important to keep in mind the a wrapping must start at the toes and move all the way up past the infection and inflammation; even it it's present on the lower leg.
- ***See my hand-out on "Swelling."***



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13. When do you need to see a foot care nurse, a podiatrist, a dermatologist, an orthothist, or a primary doctor:

- *When your nails cannot be clipped safely at home and/or you're at risk for infections, ulcers, and amputations, a visit to a podiatrist or a foot care nurse is warranted for proper and safe care of your toe nails.*
- Risks would include being diabetic, having poor arterial circulation, having poor venous circulation, having neuropathy, having a poor immune system, or being at risk for any other reason.
- When you develop *painful corns, a visit to a podiatrist or foot care nurse is warranted for proper removal of the corn with a scalpel.*
- *A visit to a podiatrist or orthothist is also warranted if you need a custom-made orthotic to correct your step or cushion your feet to prevent the corns from growing in the first place or to minimize their growth.*
- *Any new redness on the skin of your feet or lower legs should be inspected by your primary doctor, dermatologist, podiatrist, or foot care nurse.* It needs to be determined if the redness is caused by an infection or has another reason, and the proper treatment should be started.
- *Any new brownish, pinkish, reddish, silvery, or blackish skin growth should be brought to the attention of a PCP, podiatrist, dermatologist, or foot care nurse.* A raised surface, irregular borders, different texture from the surrounding skin, regular bleeding and/or inability to heal could all *indicate the growth of a skin cancer.* If the cancer cells are squamous



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cells or basal cells, the chance for survival is high if the cells are removed early enough. If the cells are malignant melanoma, there's a high chance that the cancer cells have metastasized before they appear as a spot on the skin, and the chance of survival is much lower.

- ***A red line up the foot or leg is usually an inflamed lymph vessel.*** It can spread an infection quickly to your whole body through your lymph system and ***could be fatal.*** Seek medical help quickly if you notice this.

14.Links and references:

- My biggest inspiration to this hand-out is “The Salon Professional's Guide to Foot Care,” by Godfrey Mix, DPM, published by Milady SalonOvations in 1999.
- Please refer to the various related printable hand-outs from my website, www.HFHF.us, with valuable information on body and foot health, including various foot conditions, as suggested throughout this hand-out.