

WHO SHOULD ATTEND?

LEAP Level I (Day 1)

- LPN's / RN's / NP's / CNS's
- Diabetes Educators
- Certified Wound Nurses
(CWO CN, CWCN, or CWS)
- PT's / OT's / PTA'S
- Pedorthists/ Orthotists
- Casting Technicians
- Podiatrists
- Physicians

LEAP LEVEL III (Day 2)

Please provide verification of Level I completion if not during this program

- RN's (as per state's scope of practice)
- NP's / CNS's
- Certified Wound Nurses
(CWO CN, CWCN, or CWS)
- PT's / OT's
- Pedorthists / Orthotists
- Podiatrists
- Physicians

Continuing Education Credits

(Pending Approval)

	Level I Program	Level III Program
RN	6.8 Hours	7.0 Hours
PT	7.0 Hours	7.0 Hours
C-Ped	6.0 Hours	6.5 Hours

LSU Health Care Services Division
Diabetes Outpatient Education Center
Lillie Kemp Hospital
52579 Highway 51 South
Independence, LA 70443

**LOWER EXTREMITY
AMPUTATION PREVENTION
SEMINAR**

**AT
SOUTHEASTERN LA. UNIVERSITY
HAMMOND, LA**

April 3 and 4, 2008

SEMINAR FACULTY

- Charles Patout, Jr., MD**
James A. Birke, PhD, PT, C-Ped
Terry Carney, PT
Myra Varnado, RN, CWO CN, CDE
Celly Lawrence, C-Ped



~ PRESENTED BY ~

LSU Diabetes Foot Program
Southeastern Louisiana University
College of Nursing
LSU Diabetes Education Center



Day 1 : A Comprehensive Approach To Level I LEAP

Level I LEAP April 3, 2008

Objectives:

- ◆ Outline a staged Diabetes Management program
- ◆ Describe the mechanics of foot injury and the pathway to lower extremity amputation in diabetes
- ◆ Identify the foot at risk of injury and amputation in diabetes
- ◆ Outline a comprehensive approach for the prevention of diabetes foot problems
- ◆ Correctly measure shoe fit in the high risk individual
- ◆ Identify treatment principles for diabetes foot lesions
- ◆ Perform a diabetes foot screen, assign risk category, and identify an appropriate management plan

Program

8:00 Registration, Coffee and Introductions
 8:30 Staged Diabetes Management
 9:15 Mechanics of Foot Injury
 10:00 Break
 10:30 Identifying the Foot at Risk
 11:15 A Comprehensive Prevention Approach
 12:00 LUNCH PROVIDED
 1:00 Footwear for Injury Prevention
 1:30 Management of Foot Ulceration and Charcot Foot
 2:15 Break
 2:30 Foot Screening Lab
Required for Level I LEAP Certificate
 Wear appropriate clothing for performing foot exams
 4:00 Conclusion

Costs

Day 1 only: \$ 65 includes program and box lunch
 Day 2 only: \$135 includes program, box lunch, and lab materials (\$30 non-refundable)
 Day 1 and 2: \$185
 LSUHCS Staff: Day 1 \$15, Day 2 \$25, Both Days \$35



Day 2: Practical Aspects in the Management of Foot Problems: Alternate Off-loading

Level III LEAP April 4, 2008

Objectives:

- ◆ Demonstrate and practice evaluation tools to assess the foot at risk
- ◆ Review the Decision Pathways for the Staged Management of Diabetes Foot Problems
- ◆ Demonstrate footwear and orthoses used in prevention and treatment of foot ulceration
- ◆ Observe fabrication of the contact cast and walking splint
- ◆ Fabricate/demonstrate several alternative off-loading techniques

(You must complete Day 1 to attend Day 2 Program)

Program

8:00 Registration, Coffee and Introductions
 8:10 Injury Prevention: Evaluation Tools
 9:00 Overview of Decision Pathways for Staged Management of Diabetes Foot Problems
 10:00 Break
 10:10 Case Study Presentations: Decision Pathways
 11:00 Alternative off-loading: Indications for use
 12:00 WORKING LUNCH PROVIDED
Participants will view a Cast/Walking Splint fabrication video presentation
 1:00 Practice lab: Simple orthotics and Alternative Off- loading Options
 2:30 Break
 2:45 Practice lab: Simple orthotics and Alternate Off- loading Options
 4:00 Conclusion

Location

- Directions to program location will be sent with confirmation letter
- Register early to ensure timely receipt of directions
Day 2 is strictly limited to 40 Participants

REGISTRATION

Program Offerings	LSU	Other
<input type="checkbox"/> Day 1: Leap Level I (4/3)	\$15	\$ 65
<input type="checkbox"/> Day 2: Leap Level III (4/4)	\$25	\$135
<input type="checkbox"/> Days 1 and 2	\$35	\$185

Total: _____

Name / Title _____

Address _____

Phone _____

Include email PLEASE

PLEASE COMPLETE REGISTRATION FULLY AND LEGIBLY

SEND WITH FULL PAYMENT TO :

**LSU DIABETES EDUCATION CENTER
52579 HIGHWAY 51 SOUTH
INDEPENDENCE, LA 70443**

(ONLY CHECKS OR MONEY ORDERS PLEASE)

**Deadline is MARCH 10, 2008
(NO REFUNDS AFTER MARCH 10)**

CLASS SIZE IS LIMITED !

Copy brochure as needed

Note below if vegetarian food preference:

For more information, please contact

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