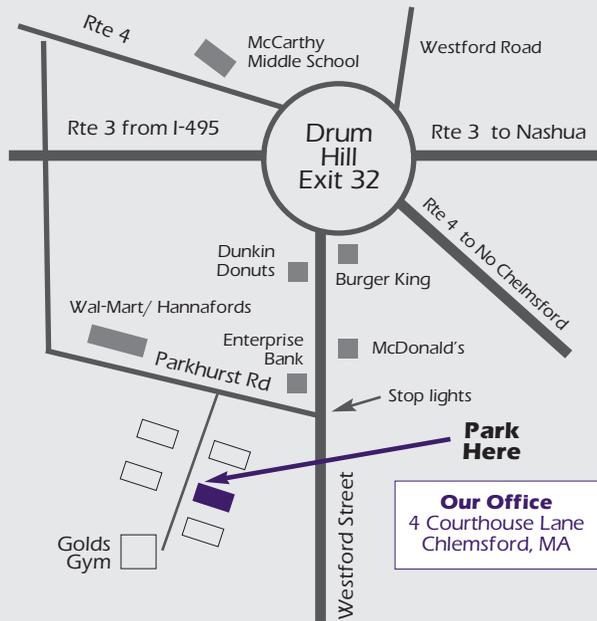


Chelmsford Office

978-441-9241
4 Courthouse Lane
(Behind Wal-Mart at Drum Hill)

New England Foot & Ankle, P.C. is located in the Courthouse office complex on Parkhurst Road behind Wal-Mart. Follow the signs to Gold's Gym. Our office is in the yellow building (the second building) on the left, just past the mailboxes.



Newburyport Office

978-463-0086
260 Merrimac Street
(Towle Office Bldg)

New England Foot & Ankle, P.C. is located on Merrimac Street, approx 1/2 mile west from downtown Newburyport (towards Amesbury). Parking and entrance at rear of building. Follow the information sign in the courtyard to the appropriate building entrance.



New England Foot & Ankle, P.C.



Jerold Fleishman, DPM



Timothy Downs, DPM



Caroline Gauthier, DPM



Cathy Coker, DPM

When Your Child's Feet Hurt... We Can Help.

Some Facts You Should Know.



Our Doctors are on staff at:

- Lowell General Hospital, Lowell
- Saints Medical Center, Lowell
- Anna Jaques Hospital, Newburyport
- Merrimack Valley Hospital, Haverhill

New patients are welcome.
Please call for an appointment.

We accept most managed care plans and private insurances, check, cash and major credit cards

 **NEW ENGLAND
FOOT & ANKLE, P.C.**

visit our Website at:
www.nefootankle.com

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Specialized diagnosis and treatment means a specialized degree of care

A podiatrist is a physician specializing in the diagnosis and medical/surgical treatment of the foot and ankle. National studies have shown that when foot problems are treated by a podiatrist, patients have more satisfactory results and a quicker recovery time, when compared to other physicians.

Children and adolescents are not little adults

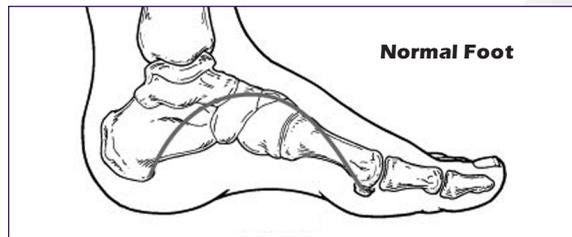
Childhood and adolescence are full of unexpected illnesses. Parents take their children to the pediatrician for ear aches, runny noses and stomach aches. Parents are excellent at taking notice of childhood milestones, such as first tooth, first words and first steps. However, a commonly overlooked area of the body that should also be watched closely is the feet.

The development and function of a child and adolescent's foot is extremely complex. Therefore, examining, diagnosing, and treatment of pediatric foot problems should be performed by a podiatric physician who sub-specializes in the pediatric foot.

Your child's feet need to last a lifetime

Many parents are under the impression that certain childhood deformities will "go away" with time. While this may be true for some problems, some will only get worse. Unfortunately, this means that some problems that may have been able to be easily corrected during early ages may need more complicated treatment as the child grows older. This is true for problems as simple as an ingrown nail, to more complex issues, such as childhood flatfoot.

Many parents delay taking their child to be evaluated, because the child may not complain of pain. They will finally take them to be examined after observing the child limping (e.g. ingrown nail), constantly rubbing their feet (e.g. flatfoot),



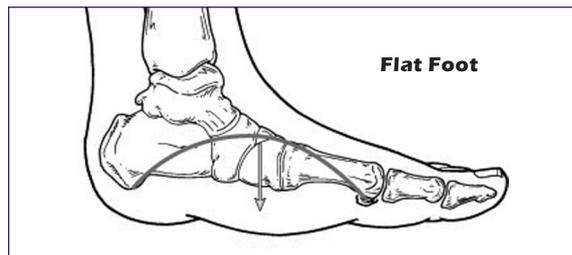
or tripping (e.g. in toe). If a child complains of foot pain consistently or tires more easily than their peers during sports, they should be evaluated promptly. While the majority of children will develop normally, there are certain problems that can be easily identified. For most childhood foot problems, early intervention is the key.

1. My child has a wart!

Warts are relatively common in children. They are especially frequent during summer months, when children are more apt to be barefoot. Warts are caused by a virus that enters the skin, usually from minor trauma, such as walking on concrete. The incidence increases when children walk barefoot in public areas, such as pools or beaches. Treatment is usually relatively painless. Small warts can be trimmed and treated with topical medication. Larger warts may need to be removed by laser, or similar methods. Children usually return to their normal activities within a day.

2. My child has flat feet!

Many parents are concerned that their kids have flat feet. This is especially true when children start to walk. It is relatively normal for an infant's foot to look flat and even turn outward. The "flatness" of the foot is due to an excessive amount of fatty tissue in the arch area. This



should decrease over time, and an arch forms, usually around 5-7 years old. To keep the child stable during the initial walking years, it is normal for the legs to turn outward, to give the child a wider area to stand on, and hold their balance.

Over time, the legs and feet should start to turn in. Most often, by the age of 6, the legs and feet should be relatively straight. However, many things can go wrong during this process. They can range from unusual joint fusions to loose ligaments. Certain problems can be addressed in very early childhood, but others may need to wait until the child has better bone formation.

3. My child's feet turn in!

As discussed previously, some children have feet that turn in. Some call it "in-toe" or "pigeon" toe. This condition usually results from a delay of the foot twisting outward from an inward position. As explained earlier, the foot starts in an outward position and as the child ages, the foot turns inward. Sometimes the hip, leg and foot are not all doing what they should at the same time. Additionally, one of the segments can turn too much and another, not enough. Regardless, the condition will usually self correct itself over time. If you notice that the condition is present for a long period of time, or causing the child to trip consistently while at play, talk to your pediatrician about an evaluation by a pediatric foot doctor.

4. My child complains of heel pain!

Some children, between the ages of 5-12 years old, may voice that they have heel pain, especially during strenuous activities. This is a normal occurrence. The pain that is experienced is due to swelling in the back of the heel bone. As children increase their activities, the heel cord pulls on an area of the heel that is not fully developed bone.

Although with ice, elevation and rest, the pain and swelling should subside, the area should be



examined by a qualified pediatric foot doctor. It is important to determine whether the pain that the child feels is due to a tendon rupture, fracture, or just inflammation.

5. My child has an ingrown nail!

This problem can go relatively unnoticed for a long period of time. Usually pain, redness and the presence of pus is when the call to the pediatrician is made. Although this may seem a small problem by most standards, there can be serious consequences if an ingrown nail is ignored for too long. An ingrown nail can result from many different causes that can range from tight shoes, incorrect nail trimming or from a naturally abnormal growing nail. Early intervention is the key to prevent toe infection. If the problem persists, a more permanent resolution can be performed to prevent the small problem portion of the nail from growing back.

Our Offices

We have offices located in Chelmsford and Newburyport. We realize that doctor visits can be traumatic to children, so both offices provide a relaxed and comfortable environment to insure a thorough examination, which include on site X-ray services.

We treat all types of child and adolescent foot problems, stressing preventative care and early intervention. Common pediatric and adolescent problems treated are:

- Ingrown Nails
- Adolescent Bunions
- In toe/Out toe
- Flatfoot
- Heel Pain
- Warts
- Emergency Lacerations
- Fractures
- Sports related injuries
- Orthotics

New patients are welcome.
Please call for an appointment.
We accept most managed care plans and private insurances, check, cash and major credit cards