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11cm in feet and inches

Diabetes Discoveries & Practice Blog Podiatric foot examination is an important part of the overall medical work for diabetics. yes, you can leave your socks on. Too often, patients hear these guidelines at the beginning of routine treatment exams. For patients with diabetes, or who are suspected of having diabetes, it can be a critically missed opportunity. The evidence speaks volumes about the symptoms and warning signs for the underlying problems we can observe at a glance in the legs and feet. Coronary and vascular diseases, neuropathy, dehydration, vitamin deficiency, and other secondary components to the state of diabetes can all reveal themselves in changes in the patient's legs, but are often unrecognizable because patients may not know what to look for. But a trained doctor can search for trophic changes and basic circulatory measures in less than three minutes. Here, I explain more about the importance of podiatric foot examinations for patients with diabetes: So, what should you look for during this examination? Trophic changes from the appearance of lower patient extremities, a sign that vascular and neurological changes have occurred, are seen as follows: No thickened nail hair growth (not fungal origin) Changes in skin pigment Shiny texture rubor skin coloring, especially in a dependent state. Claudication episodes reported by the patient's Temperature gradient between the legs and/or feet, or the general cold presentation of the Edema Parathesias Burning sensation episode as reported by the patient Some steps are required when performing this examination. First, pulses should be evaluated — both dorsal pedis and posterior tibial pulses of each leg, examined individually. The absence of a clear pulse—even secondary to a state of dirty edema—should be noted as such. Capillary stuffing can be checked when the toes are on the toes, check all 10 toes and look for a refill time of less than three seconds from the initial blanching. Now back off and look for the following: Is there a pattern, or absence, of hair growth? As the saying goes, grass doesn't grow if it's not watered. This could be a sign of possible small vessel disease, or neuropathy. Since the follicles are not deepest, hair growth can stop. Do nails grow in a thickened and color-changing way? This could possibly mean a yeast infection, or hypertoxic growth. Does the skin have a shiny texture to it? Are there any pigment changes? Hemosiderin (hemolysis products), meat stasis, etc.? Do you see a dependent rubor discoloration? Does it turn pale at altitude? With the back of your hand, run from the dorsum of the foot to the shin. Is the temperature uniform? do each leg one by one, then both at the same time. Is there a difference in temperature? Is there edema noted? Is it snitching? Bilateral or or Also pay attention to whether there is depression in the lower legs of the patient's socks/stockings. If so, talk to them about diabetic socks, with a wider elastic band that will not produce a tourniquet effect. Finally, it's time for sensory testing. Monofilament testing is an inexpensive, easy-to-use, portable test to assess the loss of protective sensations, and it is recommended to detect peripheral neuropathy in normal legs. Monofilaments, often called Semmes-Weinstein monofilaments, calibrated, single fiber nylon threads that produce stress buckles that can be reproduced. Monofilament commonly used to diagnose peripheral neuropathy is 5.07/10 grams. The test is simple and painless for the patient. Press the tip of the filament to the tip of the toe until slightly bent and (with their eyes closed) ask them to say when, or if, they feel it. Continue at some point the soles of the feet if they are negative on the feet until you reach a level of sensitivity. Then, evaluate and note changes in the lower extremities of the trophic with negative results that lead to further evaluations that may not have been done if the feet remained in the socks. I encourage you to start doing foot examinations on any patient with diabetes — or who you suspect may have diabetes — to identify and prevent complications in the lower extremities. Your colleagues in podiatric medicine are here to consult and collaborate so that we can provide the best possible care to these patients. For more information, including patient education sheets and patient care checklists in Spanish and English, see Working Together to Manage Diabetes: Toolkits for Pharmacy, Podiatry, Optometry, and Dentistry (PPOD). Have you done a foot exam for your patients with diabetes? Share your experience by leaving a comment below. David Alper, DPM, is a member of the supervisory board at the American Podiatric Medical Association (APMA) and a podiatrist practicing in Belmont, MA. Dr. Alper graduated from the Ohio College of Podiatric Medicine. Diabetes Discovery and Practice Blog Dialogue with thought leaders about emerging trends in diabetes care We welcome comments; all comments must follow our comment policy. Blog posts written by individuals from outside the government can be owned by the author and the graph can be owned by its creator. In such cases, it is necessary to contact the author, artist, or publisher for permission to re-use. The conversion of 177 cm to feet and inches is 5 feet 9.685 inches or 69.685 inches. This equals 1,936 meters. One centimeter equals 0.39370079 inches, while 1 inch equals 2.54 cm. One hundred centimeters equals 1 meter, while 12 equal to 1 foot. The meter is used to measure length in metric systems, which are used in most parts of the world. The United States, Canada, and the United Kingdom are important exceptions, because countries most often use inches and feet to measure length. The metric system was built and published in France in 1795. Measuring 5 feet 6 inches is equivalent to a total of 66 inches. This is calculated by first turning the foot into inches, by 12 inches equal to 1 foot, then multiplying 12 inches by 5. The result was 60 inches then added to the original 6 inches for a total of 66 inches. This inch is a long standard unit in the United States, Canada and The United Kingdom. Converting this measurement 66 inches to a yard yielded a total of 1.83 meters. The comparable measurement of 66 inches in the metric system is 1.68 meters. 5 feet 7 inches long, in inches, out to 67 inches. There's 12 inches in the foot, so it's just a matter of multiplying 5 by 12 and then adding the remaining 7 inches. Being part of the Imperial measurement standard, this inch originated in England as long as three barleycorns were resting together. The term foot came after the Norman invasion of 1066, where it was defined as 12 inches long. The use of the Imperial system was largely restricted to the United States and The United Kingdom, while most of the world used metric systems. Irregular imperial system measurements differ sharply from metric systems, where measurements are evenly divided into 10 place values. Tammy Jones/Getty Images Students should be able to estimate and calculate conversions of different types, including units of measurement. This worksheet requires conversion between feet and inches and inches to feet. Sample question is: 88 in = 7 ft 4 in (ft)113 ft = 1,356 in (in)67 in = 5 ft 7 in (ft)139 ft = 1,668 in (in)98 ft = 1,176 in (in)88 ft = 1,056 in (in)115 in = 9 ft 7 in (ft)23 in = 1 ft 11 in (ft)82 ft = 984 in (in)30 in = 2 ft 6 in (ft)11 in (ft)82 ft = 984 in (in))30 in = 2 ft 6 in (ft)6 in101 in = 8 ft 5 in (ft)112 ft = 1,344 in (in)45 ft = 540 in (in)64 ft = 768 in (in)25 ft = 300 in (in))128 ft = 1,536 in (in)16 in = 1 ft 4 in (ft)74 ft = 888 in (in)20 ft = 240 in (in)18 ft = 216 in (in) Print PDF Convert from and to inches or feet using the requested unit. The answer is on the 2nd page of the PDF. Print PDF Convert to and from inches or feet using the requested unit. The answer is on the 2nd page of the PDF. Print PDF Convert to and from inches or feet using the requested unit. The answer is on the 2nd page of the PDF. Print PDF Convert to and from inches or feet using the requested unit. The answer is on the 2nd page of the PDF. Pdf.