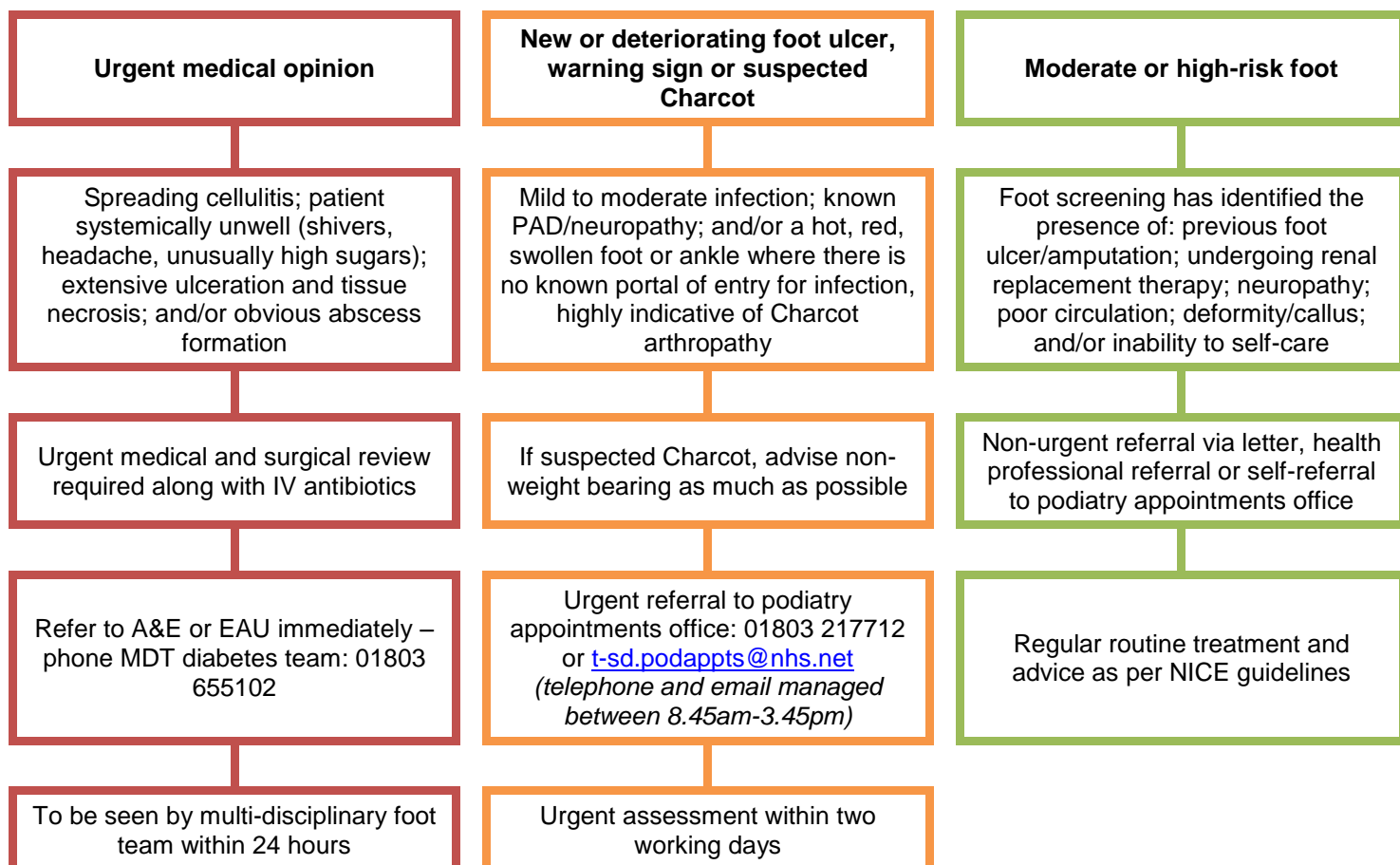


Department of Podiatry and Orthotics
Diabetic Foot Referral Pathway Algorithm



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Diabetic Foot Screening

All people with diabetes should have their feet checked at diagnosis and annually thereafter, searching for the risk factors of ulceration. The foot should then be classified as being at low, moderate or high risk, the risk status documented and coded and the patient informed.

Neuropathy: This is detected with a 10g monofilament. Test three sites on each foot. If the patient is unable to feel one out of three sites tested, this would indicate neuropathy.

Peripheral Arterial Disease (PAD): Palpate the dorsalis pedis and posterior tibial arteries. If unable to palpate, this could indicate PAD. If Doppler ultrasound available, a monophasic signal would indicate PAD.

Callus and/or Deformity: Deformity and significant callus indicate high pressure areas under the foot which will be vulnerable to ulceration. When combined with neuropathy or PAD, this will put the foot at high risk of developing an ulcer.

Other risk factors: An inability to self-care should be considered a risk factor, eg a visual impairment or learning disability; and patients on renal replacement therapy are at high risk of developing foot ulceration.

