

DIABETIC FOOT ASSESSMENT AND REFERRAL PATHWAY

Patient attends for foot examination/ assessment at diagnosis and / or annual review
Examination to include:

- Testing for neuropathy with 10g monofilament (multiple sites)
- Palpation of foot pulses
- Inspection of foot deformity
- Inspection of footwear
- History of ulceration
- Footcare education

Low Risk

Normal sensation & pulses palpable

Review annually by practice - include foot care education to improve knowledge and encourage self-care

www.whittington.nhs.uk/Podiatry

Moderate Risk

One risk factor e.g. loss of sensation or signs of PVD

Are any of the following present:

- Corn or callus
- Toe nail problems
- Structural deformity
- Poor vision
- On dialysis

NO

Review by practice 1-3 mths according to need - include foot care education to improve knowledge and encourage self-care

Review annually or 3-6 mths by practice according to need include footcare education to improve knowledge and encourage self-care

If Podiatry required direct patient to www.whittington.nhs.uk/podiatry to self refer

High Risk

Previous ulcer or amputation or more than one risk factor

YES

Refer to Community Podiatry using EMIS GP podiatry referral form – Whittington

Lesion /problem resolved Podiatry to refer back to practice

Lesion/ problem resolved Podiatry to refer on

Active

- Presence of:
- New foot ulceration with cellulitis or infection
 - Suspected osteomyelitis or ulceration probing to bone
 - Suspected acute Charcot foot
 - Necrosis or gangrene
 - Chronic ulceration failing to improve

Refer immediately to Diabetic Foot MDT at Whittington Hospital on Podiatry.whitthealth@nhs.net. In case of delay in referral, start broad spectrum antibiotics if appropriate

Risk Status should be documented and the patient informed

Next review due post-Covid