CLINICIAN'S BROCHURE



Are your patients at risk for diabetes-related foot complications?

Remember to... Look, Feel and Ask.

- 1. SKIN: Is the skin dry or calloused? Are there open areas such as blisters or ulcers?
- 2. NAILS: Are nails well kept or unkempt?
- 3. DEFORMITY: Have there been changes to the bony structure of the foot? They may be indicative of Charcot.
- 4. FOOTWEAR: Does the patient's footwear fit properly? Are the shoes appropriate for the activity for which they are being used?
- 5. TEMPERATURE: Is the foot cool? This may be indicative of arterial disease.

Is the foot hot? This may be

indicative of inflammation, infection or Charcot.

Frequency of assessment is dependent on findings. * Based on Inlow 60-Second Foot Screen

- 6. RANGE OF MOTION: Check the hallux range.
- 7. SENSATION: Use a monofilament to test 10 sites on the foot to detect potential neuropathy.
- 8. SENSATION: Ask 4 questions to detect potential neuropathy:
 • Are your feet ever numb?
 - Do they tingle?
 - Do they ever burn?
 - Do they feel like insects are crawling on them?
- 9. PEDAL PULSES: Are pulses present, absent or bounding?
- **10.DEPENDENT RUBOR:** This may be indicative of poor arterial flow or perfusion.
- 11. ERYTHEMA: This may be indicative of inflammation, infection or Charcot changes.

For Best Practice Recommendations for the Prevention, Diagnosis and Treatment of diabetic foot ulcers, please visit: www.cawc.net

For more information about cardiovascular disease and diabetes, please visit: diabetes.ca/documents/ about-diabetes/Synopsis_Final.pdf

To purchase monofilaments, visit the CAWC Boutique: http://cawc.net/ index.php/resources/store

For patient education on topics covered in this brochure, refer to the patient brochure or visit www.cawc.net/diabetesandhealthyfeet



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This brochure is an educational enabler and should not be used for any diagnostic or therapeutic decisions.

Diabetes, Healthy Feet AND Your Patients



How healthy are YOUR patients' feet?

Look at your patient's feet and know the signs.

Are your patient's feet...

Numb, painful or tingling?

Showing signs of bony changes or deformities?

Dry, cracked, blistered or IF YES ulcerated?

Displaying dependent rubor, signs of ischemia and/ or gangrenous ulcers?

What you can do to help your patient.

- Monitor blood glucose management.
- Refer patient for professional nail and skin care.

 Refer patient for professionally fitted footwear.

- Assess for bony deformities or Charcot changes.
- Refer patient for professionally fitted or custom footwear.
- Refer patient for professional skin care to manage callouses.
- Treat ulcer based on depth of injury, presence of infection and/or ischemia.
- Recommend non-weight bearing in the presence of a plantar ulceration.
- Refer patient for non-weight bearing footwear.
- Refer patient for vascular assessment.
- □ Assess and manage pain.
- Refer patient for professionally fitted footwear.
- Treat ulcers based on depth of injury, presence of infection and/or ischemia.
- □ Recommend smoking cessation.