

**Annual Foot Review**  
Assumed patient receiving ongoing care and education

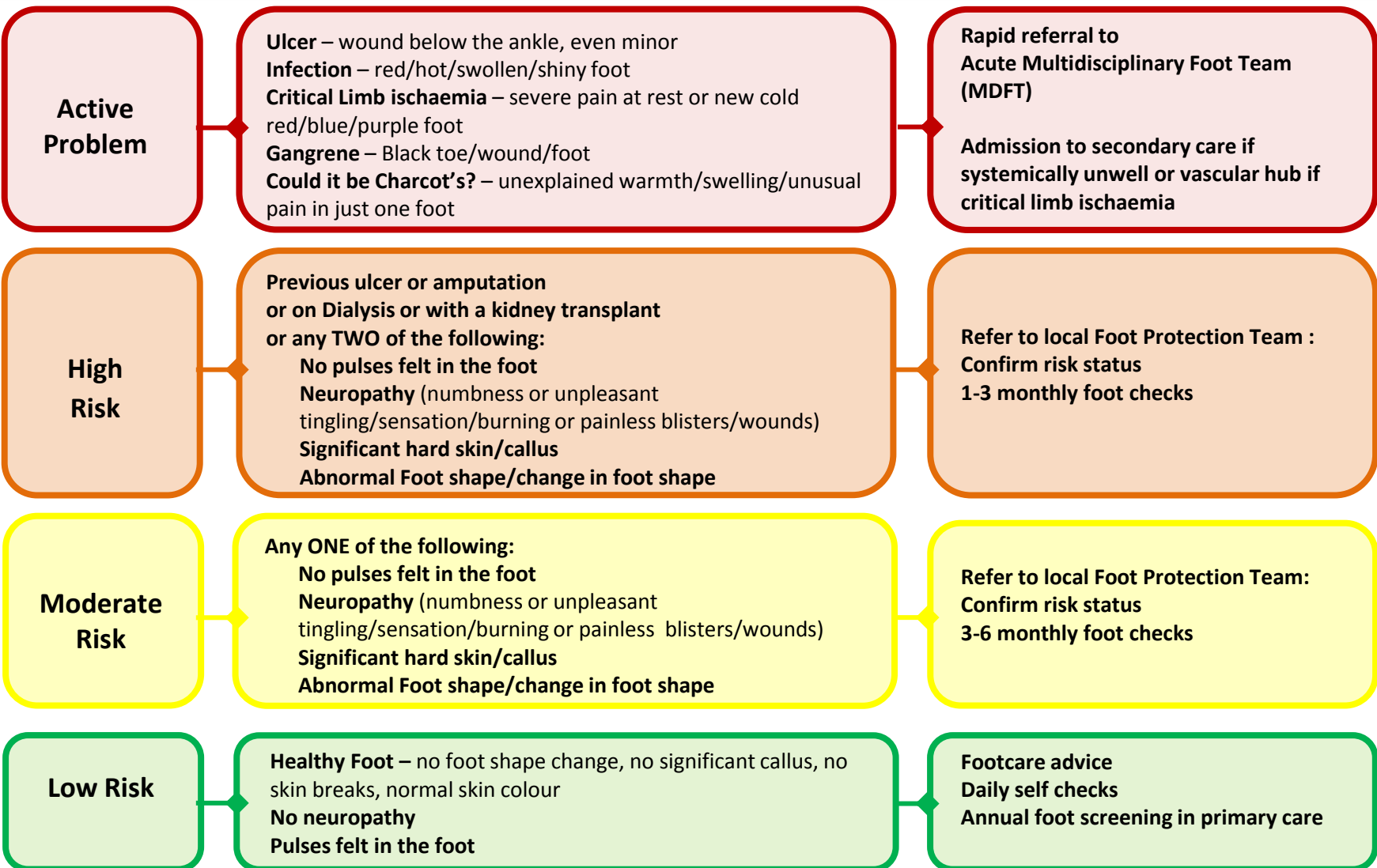
**Foot examination with shoes and socks/stockings removed**

Test foot sensation  
Palpate foot pulses

Ask about change in foot shape  
Inspect for deformity/significant callus

Ask about any pain or numbness  
Inspect footwear

Ask about previous foot ulcers  
Check for signs of infection



**Risk Status**

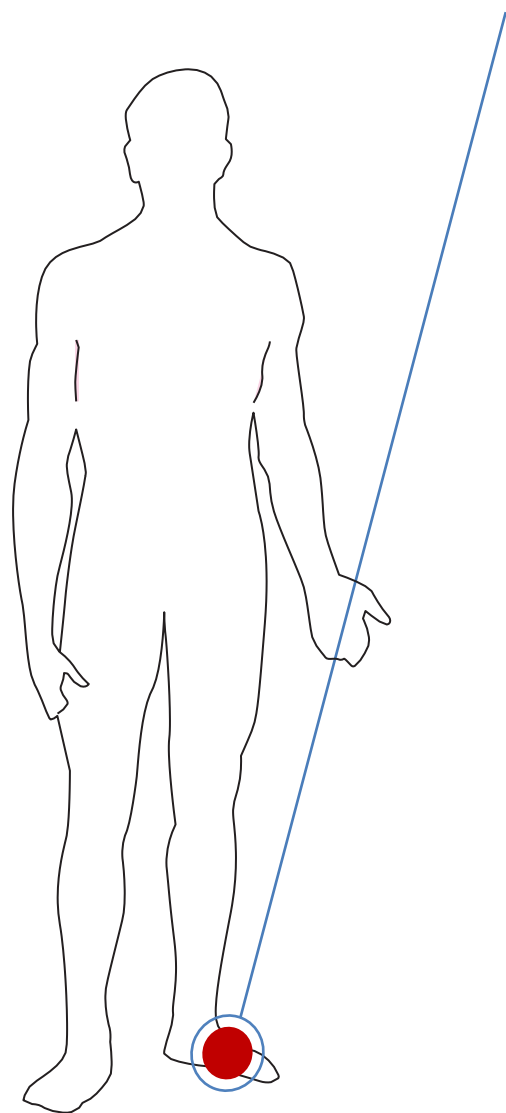
Document and explain risk status to patient and/or carer.

Provide written and verbal education and emergency contact numbers

Risk status may go up or down

Provide patient information leaflets:

- [Ulcer](#)
- [Charcot’s Foot](#)
- [High Risk](#)
- [Moderate risk](#)
- [Low risk](#)



	FINDING
History	Previous ulcer or amputation (toe/foot leg)
	Kidney Transplant or Dialysis
	Impaired vision
Inspection	Significant callus or corns
	Abnormal foot shape: High arch/bunion/flat foot
	Abnormal toes:: Claw toes/Hammer toes/overriding toes
	Change in foot shape in one foot
Neuropathy	Neuropathic pain (tingling/burning/electric shock)
	Painless blister or wound
	Score 8 or less on 10g monofilament testing
Vascular Disease	Claudication (calf or buttock pain on walking, relieved by rest)
	Any foot pulses not palpable
Active Problem	Change in foot shape in one foot with swelling and warmth
	Foot wound/ulcer
	Ingrown toenail with signs of infection
	Infection (redness/swelling/warmth/malodour/discharge)
	Gangrene (black toe foot wound)
	Foot/leg pain at rest, improved by hanging leg down
	New cold foot with new blue/red/purple colour change



High arch, prominent metatarsal heads



Bunion



Claw toes

**All people with Diabetes should be on a register and minimum data should include annual measures for microvascular disease. Please see Cardiovascular Risk for additional requirements**

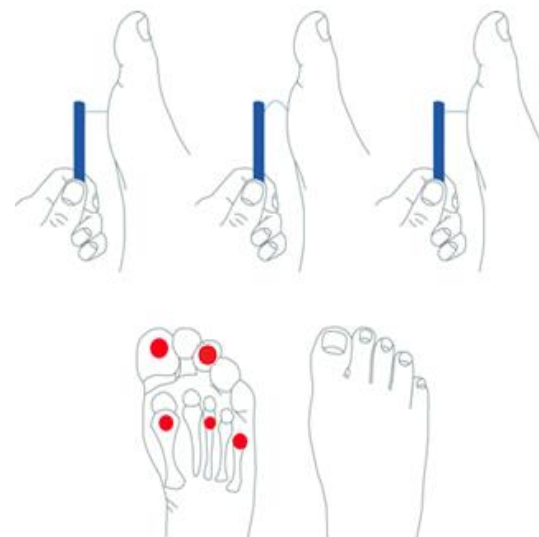
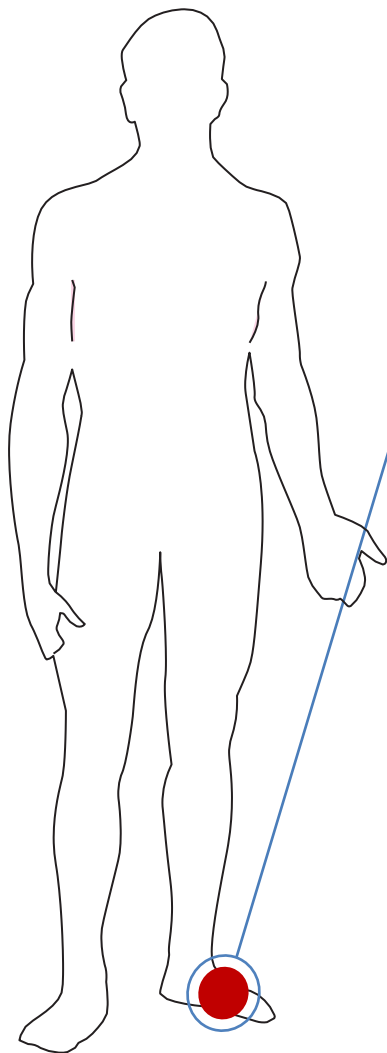
**Mental health problems affect the ability to self-care. Check for: - Impaired memory - 6 item cog (see slide 31) Anxiety or depression – PHQ4 (see slide 31)**

Photographs courtesy of Dermatronics 'A pictorial guide to diabetic foot examinations' 2016

## USING A MONOFILAMENT

- Apply the filament to a sensitive area of skin (e.g. the forearm) so that the patient is aware of the sensation they are supposed to feel.
  - Test 5 sites\* on both feet:
    - ✓ Plantar surface of the hallux and 3<sup>rd</sup> toe
    - ✓ 1<sup>st</sup>, 3<sup>rd</sup> and 5<sup>th</sup> metatarsal heads

\*If callus is present at any of the sites then test at the nearest non-calloused area.
  - Ask the patient to close their eyes and say 'yes' every time that they feel you touch the skin on the foot
  - Place the monofilament at 90° to the skin surface
  - Slowly push the monofilament until it has bent ~ 1cm (don't jab)
  - Hold the monofilament in this position for 1-2 seconds, then slowly release the pressure until the monofilament is straight
  - Remove contact from the skin
  - If the patient does not respond, repeat the test at the site twice. If there is still no response, record as a negative response
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- **Maximum score 10. A score of 8 or less indicates neuropathy**
  - **Replace monofilament after 500 uses ( approximately 6 monthly frequent testing, yearly infrequent testing)**



	CCG	Acute Diabetes Specialist Foot Team	Foot Protection Team	Vascular Hub	
<b>Inner NW London</b>	H &F	St Mary's Hospital T:0203 312 5437	E: <a href="mailto:clcht.spa.referral@nhs.net">clcht.spa.referral@nhs.net</a> F:0300 008 3251	<b>Inner NWL Vascular Hub:</b> St Mary's Hospital Contact Vascular Surgery on-call	
	Central London	F:0203 312 6875 E: <a href="mailto:imperial.idfootreferrals@nhs.net">imperial.idfootreferrals@nhs.net</a>			
	West London	Chelsea & Westminster Hospital T:0203 315 3161 F:0203 315 2732 E: <a href="mailto:Diabetes.TeamCW@chelwest.nhs.uk">Diabetes.TeamCW@chelwest.nhs.uk</a>			
	Hounslow	West Middlesex Hospital E: <a href="mailto:Hounslow.RFS@nhs.net">Hounslow.RFS@nhs.net</a> T:05511 434910	E: <a href="mailto:HRCH.Hounslowdiabetes@nhs.net">HRCH.Hounslowdiabetes@nhs.net</a> T:05511 434910		
		<b>All Hounslow Diabetes foot referrals from GP for SystemOne Practices to be sent via TASK</b> For EMIS practices referrals to be sent via Email to <a href="mailto:HRCH.Hounslowdiabetes@nhs.net">HRCH.Hounslowdiabetes@nhs.net</a>			
<b>Outer NW London</b>	Brent	Central Middlesex Hospital T: 020 8453 2401/2607 F: 020 8453 2415	BIDS T:020 8963 8803 / 8804 F: 020 3963 8891 E: <a href="mailto:LNWH-tr.Diabetes-BCS@nhs.net">LNWH-tr.Diabetes-BCS@nhs.net</a>	<b>Outer NWL Vascular Hub:</b> Northwick Park Hospital Contact Vascular Surgery on-call M: 07976682471	
	Ealing	Ealing Hospital T:020 8967 5383 F:020 8967 5507	High Risk (DICE) T:0208 383 9870 F:0208 843 1482		Moderate Risk T:0208 383 5738/ 5751 or 0208 579 5316 F:0208 383 5735 E: <a href="mailto:lnwh-tr.podealingcom@nhs.net">lnwh-tr.podealingcom@nhs.net</a>
	Harrow	Northwick Park Hospital: T:020 8869 2100 F: 0208 869 2961	CLCH Harrow F:0300 008 3104 E: <a href="mailto:Podiatryharrow@nhs.net">Podiatryharrow@nhs.net</a>		
	Hillingdon	Hillingdon Hospital T:01895 279229 E: <a href="mailto:thh.diab-endo-referrals@nhs.net">thh.diab-endo-referrals@nhs.net</a>	T:01895 485005 E: <a href="mailto:cnw-tr.hchcontactcentrerefs@nhs.net">cnw-tr.hchcontactcentrerefs@nhs.net</a>		