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# Foot Inspection or Foot Assessment?

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## Session aims



- 1. To establish group position on inspection and assessment
- 2. Interpret Diabetes foot care guidelines
- 3. Practical sessions on neurological and vascular
- 4. Inspection / Assessment Discussion points
- 5. Review group algorithm for inspection and assessment





Inspection or assessment?





- NICE guidelines prevention and management of foot problems (2004)
- National minimal skills (competency) framework (2006) for foot assessment





Examination of the patients feet should include:

- Testing of foot sensation using 10g monofilament
- Palpation of foot pulses
- Inspection of foot deformity
- ...and inspection of footwear

# 2. Inspection and Assessment identifies <u>risk factors</u>



### NICE guidelines (2004) – ref algorithm

- Low current risk
- Increased risk (1 risk factor)
- High risk (x2 risk factors/prev ulcer)
- Ulcerated foot

2. National minimum skills framework for commissioning foot care services for people with diabetes (2006)



4 levels (A,B,C,D)

#### A. Routine basic assessment and care

Identify risk status 2) provide foot care advice
 manage new lesion/ulcer

B. Expert assessment and care of the foot at increased risk but without an active ulcer/lesion
1) Confirm neuropathy 2) assess severity of pvd
3) provide Rx 4) initiate management plan

2. National minimum skills framework for commissioning foot care services for people with diabetes (2006)



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1) assess multi factoral aetiologies 2) manage infection 3) refer x-ray MRI arterial imaging 4) wound management 5) off loading 6) communicate with carers/family/mdt

D. Management of the patient whose foot ulcer is resolved

1) Education 2) footwear / orthotic insoles 3) <u>continued surveillance and treatment</u>



- Light touch
- Protective sensation pain
- Vibration perception
- Temperature perception

### 3. Neurological Testing - Sensory



- protective pain sensation
- 10 g monofilament
- \*Significant for predicting ulcer risk
- practical



### 3. Neurological Testing - Sensory



#### Vibration Perception 128 hz tuning fork





#### Neurosthesiometer

3. Is Vascular disease different in University of HUDDERSFIELD

Yes – severity can be measured by;

Palpation of foot pulses

Clinical examination

Doppler examination and Waveform

## Ankle Brachial Pressure Index (ABPI)

#### 3. Vascular Assessment



#### **Pulse Palpation**





#### 3. Vascular Assessment



 Doppler assessment of foot pulses

practical



#### Vascular Assessment





Waveform Analysis



Ankle Brachial Pressure Index

#### 4. Inspect or assess these feet











#### 4. Inspect / assess Foot Deformity











#### 4. Inspect / assess Footwear





## 5. Algorithm for inspection & assessment Huddersfield

#### Inspection

#### Assessment

- 1) Cotton wool test / \*Monofilament
- 2) Identify gross foot \*deformities
- 3) \*Pulse palpation and Doppler
- 4) Hands on temp gradient test
- 5) \*Footwear inspection for wear and tear / foreign objects
- 6) Visual colour check
- 7) Check for oedema
- 8) visual check nails
- 9) Tuning fork
- 10) visual check skin

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#### 1) \*Monofilament

- 2) Diagnosis complex \*deformity/Charcot
- 3) \*Pulses Doppler analysis ABPI TBPI
- 4) Quantify temperature
- 5) \*Footwear analysis
- 6) Visual colour check
- 7) Check for oedema
- 8) Diagnosis of nail conditions
- 9) Tuning fork / neurosthesiometer
- 10) Diagnosis of skin conditions
- 11) Range of joint motion collagen changes
- 12) Gait and pressure analysis

## Thank you and take home message





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#### References and further reading



- NICE (2004) 'Clinical guidelines for Type 2 Diabetes: Prevention and Management of Foot Problems'
- DoH (2001) 'National Service Framework for Diabetes: Standards' HMSO
- FDUK and DUK (2006) 'National Minimum Skills Framework for Commisioning of Foot Care Services for People with Diabetes'

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