

Diabetic Foot Inspection

ASK

History of :

- ✓ Leg
- ✓ Foot Ulcer

- ✓ Limb Surgery
- ✓ Smoking

EXAMINE

Skin

1. Check for gangrene
2. Check for ulcers on the plantar (bottom) aspect of the foot
3. Check for callus
4. Check for Fungai infections of the foot and toenail

Neuro

Conduct light touch test for tactical sensation using your fingers or a light piece of cotton wool or gauze swab. This should be done on the first, third and fifth toes for 1-2 seconds with the patients’ eyes closed and responding by saying “yes” to when they feel the touch. When light touch is not sensed in two or more sites, there is loss of protective sensation (LOPS)

Pulses

Check peripheral (Dorsalis Pedis at the base of the big toe; posterior Tibial behind medial malleolus)

Musculoskeletal

Check for joint, toe, or other tissue deformity

ACT

1. Remove calluses
2. Drain and protect blisters
3. Treat ingrown and thickened toe nails
4. Provide antifungal treatment for fungal infections –topical antifungal creams for skin infections of the foot (i.e., tinea pedis) or oral antifungal medications for severe toe nail infections (i.e., onychomycosis)

ADVISE

1. Inspect your feet daily – checking for cuts, blisters
2. Wash Daily – use lukewarm water and avoid hot water
3. Dry well especially between the toes
4. Moisturise the feet (not between the toes)
5. Feel for bumps (corns, calluses, bunions) or temperature changes
6. Look between the toes and check each toe nail (colour changes)
7. Cut the toenails carefully, not too short and file the nails straight across
8. Check for dry, cracked skin
9. Examine the bottom of the feet
- 10.Wear appropriate shoes that are not too tight nor too loose
- 11.Avoid walking barefoot
- 12.Do not cut corns and calluses at home
- 13.Track what you find on your feet
- 14.Ensure your healthcare provider examines your feet regularly

REFER

1. Infected ulcer
2. Spreading infection
3. Critical limb ischaemia
4. Gangrene
5. Suspicion of acute arthropathy
6. Unexplained red swollen foot
7. Loss of protective sensation
8. Diminished or absent dorsalis and posterior tibial pulses