



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. Foot wear: 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.
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
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.

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

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

For more information about diabetes, please visit: www.guidelines.diabetes.ca

For patient education on topics covered in this brochure, refer to the patient brochure or visit diabetes.ca/footcare

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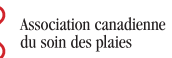
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This brochure is a guide only and should not be used for any diagnostic or therapeutic decisions. Specific medical concerns should be directly handled by a qualified healthcare professional.

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Diabetes, Healthy Feet and Your Patients



How healthy are
YOUR
patient's feet?

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

Are your patient's feet...

What you can do to help your patient.



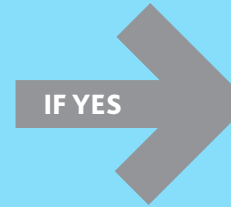
Numb, painful or tingling?



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



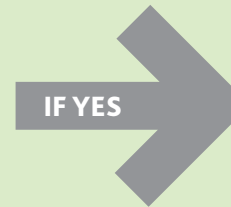
Showing signs of bony changes or deformities?



- Assess for bony deformities or Charcot changes.
- Refer patient for professionally fitted or custom footwear.



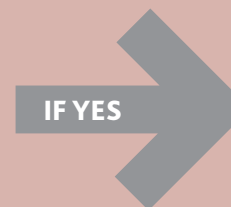
Dry, cracked, blistered or ulcerated?



- 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.



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



- 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.