



## 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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guidelines.diabetes.ca | diabetes.ca | 1-800 BANTING

For Best Practice Recommendations for the Prevention, Diagnosis and Treatment of diabetic foot ulcers, please visit: [www.cawc.net](http://www.cawc.net)

For more information about diabetes, please visit: [www.guidelines.diabetes.ca](http://www.guidelines.diabetes.ca)

For patient education on topics covered in this brochure, refer to the patient brochure or visit [diabetes.ca/footcare](http://diabetes.ca/footcare)

#### Canadian Association of Wound Care

642 King Street West, Suite 234  
Toronto, ON M5V 1M7  
1-866-474-0125  
[www.cawc.net/diabetesandhealthyfeet](http://www.cawc.net/diabetesandhealthyfeet)

#### Canadian Diabetes Association

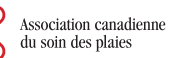
1400-522 University Ave.  
Toronto, ON M5G 2R5  
[diabetes.ca](http://diabetes.ca) | 1-800-BANTING (226-8464)



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.**



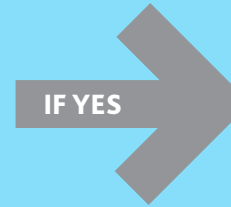
**Numb, painful or tingling?**



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



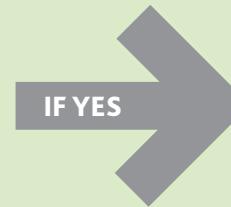
**Showing signs of bony changes or deformities?**



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



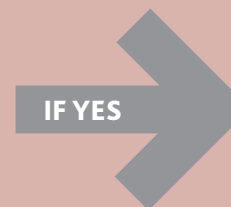
**Dry, cracked, blistered or ulcerated?**



- 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.