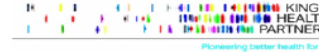


# Southwark and Lambeth

## Diabetes Foot Care Pathway

South East London, Dartford and Gravesham



Risk Level	Definition	Action	How to refer
Low	<p><b>Intact foot and at low risk of damage:</b></p> <ul style="list-style-type: none"> <li>Normal foot sensation</li> <li>Palpable foot pulses</li> <li>No foot deformity</li> <li>No history of ulceration or amputation</li> </ul>	<p><b>Foot care within Primary Care Setting (GP)</b></p> <ul style="list-style-type: none"> <li>Annual Foot Screening - <a href="http://bit.ly/How2FS">http://bit.ly/How2FS</a></li> <li>Foot check for tissue damage</li> <li>Referral to active care if applicable</li> <li>If intact foot but with abnormal sensation or absent pulses, refer to Foot Protection Team</li> <li>If new ulceration or acute Charcot referral to MDfT (see referral guidance under <i>How to refer</i>)</li> </ul>	<p><b>Continue to manage in Primary Care</b></p>
Moderate	<p><b>Intact foot but moderate risk of damage:</b></p> <ul style="list-style-type: none"> <li>Peripheral neuropathy (i.e. abnormal sensation), or</li> <li>Peripheral vascular disease (i.e. absent foot pulses)</li> <li>Deformity/lesions</li> </ul>	<p><b>Foot Care within Foot Protection Team</b></p> <ul style="list-style-type: none"> <li>Diabetes foot checks and surveillance every six months</li> <li>Foot check for tissue damage</li> <li>Regular podiatry and general foot care</li> <li>Referral to active care if applicable</li> <li>Callus removal, nail care and regular foot care review as per NICE guidelines</li> </ul>	<p><b>Foot protection team (FPT)</b></p> <p>Via GPs to Lambeth &amp; Southwark Community Footcare Service Tel: 020 3049 7900 Via referral form Email: <a href="mailto:gst-tr.communityfoothealth@nhs.net">gst-tr.communityfoothealth@nhs.net</a></p>
High	<p><b>Intact foot but high risk of damage:</b></p> <ul style="list-style-type: none"> <li>Previous foot ulceration</li> <li>History of Charcot foot</li> <li>Patients on dialysis</li> <li>Previous amputation</li> <li>Neuropathy and lower limb peripheral arterial disease together</li> <li>Neuropathy in combination with callus/deformity</li> <li>Lower limb peripheral arterial disease in combination with callus/deformity</li> </ul>	<p><b>Foot Care within Foot Protection Team</b></p> <ul style="list-style-type: none"> <li>Diabetes foot checks and surveillance every two – three months</li> <li>Foot Check for tissue damage</li> <li>Regular podiatry and general foot care</li> <li>Referral to active care if applicable</li> <li>Callus removal, nail care and regular foot care review as per NICE guidelines similar to the yellow box above</li> </ul>	<p><b>MDfT specialist foot team</b></p> <p>Via GPs to GSTT or KCH MDfT clinics GSTT: 020 7188 1913 KCH: 020 3299 3223</p> <p>eRS referral - Email: GSTT: <a href="mailto:gst-tr.diabetesAndEndocrine@nhs.net">gst-tr.diabetesAndEndocrine@nhs.net</a> KCH: <a href="mailto:kch-tr.DFReferrals@nhs.net">kch-tr.DFReferrals@nhs.net</a></p>
Active (Foot ulceration/ charcot foot)	<p><b>Current active foot tissue damage:</b></p> <ul style="list-style-type: none"> <li>Any foot ulceration</li> <li>Acute Charcot foot (hot/swollen/painful foot)</li> <li>Any foot infection</li> <li>Septic patients should be referred to A&amp;E with in-patient MDfT support</li> </ul>	<p><b>Rapid referral within one working day to MDfT for footcare within specialist foot team</b></p> <ul style="list-style-type: none"> <li>Triage of referrals within one working day</li> <li>MDfT review within one additional working day</li> <li>'One-stop' case reviews</li> <li>Coordinate OPAT Care</li> <li>Refer housebound patients to FPT immediately</li> <li>Ensure patients provided with written and verbal information and contact numbers – see links to leaflets in "Important information" box</li> </ul>	

### Important information

- Patients on dialysis, blind or unable to self-care to be considered as high risk.

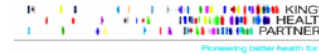
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## Diabetes Foot Care Pathway

South East London, Dartford and Gravesham



Risk Level	Definition	Action	How to refer
Low	<p><b>Intact foot and at low risk of damage:</b></p> <ul style="list-style-type: none"> <li>Normal foot sensation</li> <li>Palpable foot pulses</li> <li>No foot deformity</li> <li>No history of ulceration or amputation</li> </ul>	<p><b>Foot care within Primary Care Setting (GP)</b></p> <ul style="list-style-type: none"> <li>Annual Foot Screening - <a href="http://bit.ly/How2FS">http://bit.ly/How2FS</a></li> <li>Foot check for tissue damage</li> <li>Referral to active care if applicable</li> <li>If intact foot but with abnormal sensation or absent pulses, refer to Foot Protection Team</li> <li>If new ulceration or acute Charcot referral to MDfT (see referral guidance under <i>How to refer</i>)</li> </ul>	<p><b>Continue to manage in Primary Care</b></p>
Moderate	<p><b>Intact foot but moderate risk of damage:</b></p> <ul style="list-style-type: none"> <li>Peripheral neuropathy (i.e. abnormal sensation), or</li> <li>Peripheral vascular disease (i.e. absent foot pulses)</li> <li>Deformity/lesions</li> </ul>	<p><b>Foot Care within Foot Protection Team</b></p> <ul style="list-style-type: none"> <li>Diabetes foot checks and surveillance every six months</li> <li>Foot check for tissue damage</li> <li>Regular podiatry and general foot care</li> <li>Referral to active care if applicable</li> <li>Callus removal, nail care and regular foot care review as per NICE guidelines</li> </ul>	<p><b>Foot protection team (FPT)</b></p> <p>Via GPs to Oxleas Podiatry Service Tel: 020 8320 3550 Via referral form Email: <a href="mailto:oxl-tr.Podiatry@nhs.net">oxl-tr.Podiatry@nhs.net</a></p>
	<p><b>Intact foot but high risk of damage:</b></p> <ul style="list-style-type: none"> <li>Previous foot ulceration</li> <li>History of Charcot foot</li> <li>Patients on dialysis</li> <li>Previous amputation</li> <li>Neuropathy and lower limb peripheral arterial disease together</li> <li>Neuropathy in combination with callus/deformity</li> <li>Lower limb peripheral arterial disease in combination with callus/deformity</li> </ul>	<p><b>Foot Care within Foot Protection Team</b></p> <ul style="list-style-type: none"> <li>Diabetes foot checks and surveillance every two – three months</li> <li>Foot Check for tissue damage</li> <li>Regular podiatry and general foot care</li> <li>Referral to active care if applicable</li> <li>Callus removal, nail care and regular foot care review as per NICE guidelines similar to the yellow box above</li> </ul>	
High	<p><b>Current active foot tissue damage:</b></p> <ul style="list-style-type: none"> <li>Any foot ulceration</li> <li>Acute Charcot foot (hot/swollen/painful foot)</li> <li>Any foot Infection</li> <li>Septic patients should be referred to A&amp;E with in-patient MDfT support</li> </ul>	<p><b>Rapid referral within one working day to MDfT for footcare within specialist foot team</b></p> <ul style="list-style-type: none"> <li>Triage of referrals within one working day</li> <li>MDfT review within one additional working day</li> <li>'One-stop' case reviews</li> <li>Coordinate OPAT Care</li> <li>Refer housebound patients to FPT immediately</li> <li>Ensure patients provided with written and verbal information and contact numbers – see links to leaflets in "Important information" box</li> </ul>	<p><b>MDfT specialist foot team</b></p> <p>Via GPs to QEWS MDfT Clinic eRS Referral Advice / guidance: Tel: <b>0208 836 4008</b> Email: <a href="mailto:Lg.qeh-acutefootservice@nhs.net">Lg.qeh-acutefootservice@nhs.net</a></p>
Active (Foot ulceration/charcot foot)			

### Important information

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## Diabetes Foot Care Pathway

South East London, Dartford and Gravesham



Risk Level	Definition	Action	How to refer
Low	<b>Intact foot and at low risk of damage:</b> <ul style="list-style-type: none"> <li>Normal foot sensation</li> <li>Palpable foot pulses</li> <li>No foot deformity</li> <li>No history of ulceration or amputation</li> </ul>	<b>Foot care within Primary Care Setting (GP)</b> <ul style="list-style-type: none"> <li>Annual Foot Screening - <a href="http://bit.ly/How2FS">http://bit.ly/How2FS</a></li> <li>Foot check for tissue damage</li> <li>Referral to active care if applicable</li> <li>If intact foot but with abnormal sensation or absent pulses, refer to Foot Protection Team</li> <li>If new ulceration or acute Charcot referral to MDfT (see referral guidance under <i>How to refer</i>)</li> </ul>	<p><b>Continue to manage in Primary Care</b></p> <p>➔</p>
	<b>Intact foot but moderate risk of damage:</b> <ul style="list-style-type: none"> <li>Peripheral neuropathy (i.e. abnormal sensation), or</li> <li>Peripheral vascular disease (i.e. absent foot pulses)</li> <li>Deformity/lesions</li> </ul>	<b>Foot Care within Foot Protection Team</b> <ul style="list-style-type: none"> <li>Diabetes foot checks and surveillance every six months</li> <li>Foot check for tissue damage</li> <li>Regular podiatry and general foot care</li> <li>Referral to active care if applicable</li> <li>Callus removal, nail care and regular foot care review as per NICE guidelines</li> </ul>	
Moderate	<b>Intact foot but high risk of damage:</b> <ul style="list-style-type: none"> <li>Previous foot ulceration</li> <li>History of Charcot foot</li> <li>Patients on dialysis</li> <li>Previous amputation</li> <li>Neuropathy and lower limb peripheral arterial disease together</li> <li>Neuropathy in combination with callus/deformity</li> <li>Lower limb peripheral arterial disease in combination with callus/deformity</li> </ul>	<b>Foot Care within Foot Protection Team</b> <ul style="list-style-type: none"> <li>Diabetes foot checks and surveillance every two – three months</li> <li>Foot Check for tissue damage</li> <li>Regular podiatry and general foot care</li> <li>Referral to active care if applicable</li> <li>Callus removal, nail care and regular foot care review as per NICE guidelines similar to the yellow box above</li> </ul>	<p><b>Foot protection team (FPT)</b></p> <p>Via GPs to Lewisham Podiatry Service</p> <p><b>Downham H&amp;LC</b> 02030491800 <a href="mailto:lg.fhsdownhamhc@nhs.net">lg.fhsdownhamhc@nhs.net</a></p> <p><b>Jenner HC</b> 02030492446 <a href="mailto:lg.fhsjennerhc@nhs.net">lg.fhsjennerhc@nhs.net</a></p> <p><b>Lee HC</b> 02030492070 <a href="mailto:lg.fhsleehc@nhs.net">lg.fhsleehc@nhs.net</a></p> <p><b>Sydenham Green HC</b> 02030492737 <a href="mailto:lg.fhssydenhamgreenhc@nhs.net">lg.fhssydenhamgreenhc@nhs.net</a></p> <p><b>South Lewisham HC</b> 02030492503 <a href="mailto:lg.fhssouthlewishamhc@nhs.net">lg.fhssouthlewishamhc@nhs.net</a></p> <p><b>Waldron HC</b> 02030493402 <a href="mailto:lg.fhswaldronhc@nhs.net">lg.fhswaldronhc@nhs.net</a></p> <p><b>Lewisham Hospital Community Clinic</b> 02031926790 <a href="mailto:lg.fhslewishamhospital@nhs.net">lg.fhslewishamhospital@nhs.net</a></p> <p><b>Lewisham Home visiting service</b> 02030491860/70 <a href="mailto:lg.fhshomevisiting@nhs.net">lg.fhshomevisiting@nhs.net</a></p> <p><b>Acute Foot Service &amp; MDfT</b> 02031926612 <a href="mailto:Lh.acutefootservices@nhs.net">Lh.acutefootservices@nhs.net</a></p> <p>➔ ➔ ➔</p>
	<b>Current active foot tissue damage:</b> <ul style="list-style-type: none"> <li>Any foot ulceration</li> <li>Acute Charcot foot (hot/swollen/painful foot)</li> <li>Any foot Infection</li> <li>Septic patients should be referred to A&amp;E with in-patient MDfT support</li> </ul>	<b>Rapid referral within one working day to MDfT for footcare within specialist foot team</b> <ul style="list-style-type: none"> <li>Triage of referrals within one working day</li> <li>MDfT review within one additional working day</li> <li>'One-stop' case reviews</li> <li>Coordinate OPAT Care</li> <li>Refer housebound patients to FPT immediately</li> <li>Ensure patients provided with written and verbal information and contact numbers – see links to leaflets in "Important information" box</li> </ul>	
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Active (Foot ulceration/ charcot foot)			

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## Diabetes Foot Care Pathway

South East London, Dartford and Gravesham



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Moderate	<p><b>Intact foot but moderate risk of damage:</b></p> <ul style="list-style-type: none"> <li>Peripheral neuropathy (i.e. abnormal sensation), or</li> <li>Peripheral vascular disease (i.e. absent foot pulses)</li> <li>Deformity/lesions</li> </ul>	<p><b>Foot care within Primary Care Setting (GP)</b></p> <ul style="list-style-type: none"> <li>Diabetes foot checks and surveillance every six months</li> <li>Foot check for tissue damage</li> <li>Regular podiatry and general foot care</li> <li>Referral to active care if applicable</li> <li>Callus removal, nail care and regular foot care review as per NICE guidelines</li> </ul>	
High	<p><b>Intact foot but high risk of damage:</b></p> <ul style="list-style-type: none"> <li>Previous foot ulceration</li> <li>History of Charcot foot</li> <li>Patients on dialysis</li> <li>Previous amputation</li> <li>Neuropathy and lower limb peripheral arterial disease together</li> <li>Neuropathy in combination with callus/deformity</li> <li>Lower limb peripheral arterial disease in combination with callus/deformity</li> </ul>	<p><b>Foot Care within Foot Protection Team</b></p> <ul style="list-style-type: none"> <li>Diabetes foot checks and surveillance every two – three months</li> <li>Foot Check for tissue damage</li> <li>Regular podiatry and general foot care</li> <li>Referral to active care if applicable</li> <li>Callus removal, nail care and regular foot care review as per NICE guidelines similar to the yellow box above</li> </ul>	<p><b>High Risk (Foot Protection Team)</b> Via GPs to Oxleas Podiatry Service Té: 020 8320 3550 Via referral form Email: <a href="mailto:oxl-tr.Podiatry@nhs.net">oxl-tr.Podiatry@nhs.net</a></p>
Active (Foot ulceration/charcot foot)	<p><b>Current active foot tissue damage:</b></p> <ul style="list-style-type: none"> <li>Any foot ulceration</li> <li>Acute Charcot foot (hot/swollen/painful foot)</li> <li>Any foot Infection</li> <li>Septic patients should be referred to A&amp;E with in-patient MDfT support</li> </ul>	<p><b>Rapid referral within one working day to MDfT for footcare within specialist foot team</b></p> <ul style="list-style-type: none"> <li>Triage of referrals within one working day</li> <li>MDfT review within one additional working day</li> <li>'One-stop' case reviews</li> <li>Coordinate OPAT Care</li> <li>Refer housebound patients to FPT immediately</li> <li>Ensure patients provided with written and verbal information and contact numbers – see links to leaflets in "Important information" box</li> </ul>	

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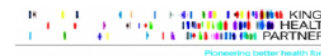
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## Diabetes Foot Care Pathway

South East London, Dartford and Gravesham



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High	<b>Intact foot but high risk of damage:</b> <ul style="list-style-type: none"> <li>Previous foot ulceration</li> <li>History of Charcot foot</li> <li>Patients on dialysis</li> <li>Previous amputation</li> <li>Neuropathy and lower limb peripheral arterial disease together</li> <li>Neuropathy in combination with callus/deformity</li> <li>Lower limb peripheral arterial disease in combination with callus/deformity</li> </ul>	<b>Foot Care within Foot Protection Team</b> <ul style="list-style-type: none"> <li>Diabetes foot checks and surveillance every two – three months</li> <li>Foot Check for tissue damage</li> <li>Regular podiatry and general foot care</li> <li>Referral to active care if applicable</li> <li>Callus removal, nail care and regular foot care review as per NICE guidelines similar to the yellow box above</li> </ul>	<b>MDfT specialist foot team</b> Via GPs to PRUH MDfT clinic Tel: 01689 865 202 eRS referral via EMIS Email: <a href="mailto:kch-tr.pruhdiabeticfootclinic@nhs.net">kch-tr.pruhdiabeticfootclinic@nhs.net</a>
Active (Foot ulceration/ charcot foot)	<b>Current active foot tissue damage:</b> <ul style="list-style-type: none"> <li>Any foot ulceration</li> <li>Acute Charcot foot (hot/swollen/painful foot)</li> <li>Any foot Infection</li> <li>Septic patients should be referred to A&amp;E with in-patient MDfT support</li> </ul>	<b>Rapid referral within one working day to MDfT for footcare within specialist foot team</b> <ul style="list-style-type: none"> <li>Triage of referrals within one working day</li> <li>MDfT review within one additional working day</li> <li>'One-stop' case reviews</li> <li>Coordinate OPAT Care</li> <li>Refer housebound patients to FPT immediately</li> <li>Ensure patients provided with written and verbal information and contact numbers – see links to leaflets in "Important information" box</li> </ul>	

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