Referral Pathways for the Diabetic Foot – Scarborough, Whitby, Ryedale



Foot examination:

- 1. Foot: Deformity or callus
- 2. Arteries: Palpate dorsalis pedis and posterior tibial pulses
- 3. Neuropathy: 10g monofilament
- 4. Active foot disease

All of the following:

- 1. No neuropathy
- 2. At least one palpable foot pulse
- 3. No foot deformity
- 4. Not on dialysis

One of the following:

- 1. Neuropathy
- 2. No palpable foot pulses
- 3. Foot deformity

One of the following:

- 1. Neuropathy AND no palpable foot pulses
- Neuropathy OR absent foot pulses AND callus OR deformity
- 3. Previous foot ulcer OR amputation
- 4. Dialysis

One of the following:

- 1. New foot ulcer
- 2. Spreading infection
- 3. Critical ischaemia
- 4. Gangrene
- 5. Hot, red, swollen foot (possible Charcot foot)

One of the following:

- 1. Foot ulcer with fever or any signs of sepsis
- 2. Clinical concern that there is a deep-seated soft tissue or bone infection

LOW RISK

- 1. Annual foot screening in primary care
- 2. Advise importance of good foot care
- 3. Advise possible progression of foot risk

MODERATE RISK

Refer to community podiatry:
Podiatry Department Springhill House
19 Springhill Close Scarborough
YO12 4AD
Tel. 01423 542972

HIGH RISK

Refer to high risk community podiatry:
Podiatry Department
Springhill House
19 Springhill Close
Scarborough
YO12 4AD
Tel. 01423 542972
Email

ACTIVE FOOT DISEASE*

In all cases advise
MINIMAL
weight-bearing on
affected foot
Urgent same day
referral
Telephone
07920073785

LIFE-/LIMB THREATENING DIABETIC FOOT DISEASE

Refer urgently to vascular on-call via York switchboard (or Acute Medicine at JCUH if Whitby)

For all Email referrals: HDFT.podiatryreferrals@nhs.net State priority in subject heading.