Foot Care in Type 2 Diabetes

Remove Shoes at Each Visit
Inspect Feet for Acute Problems

No Ulcer
Annual Foot Exam
- monofilament exam
- sensory exam
- inspect for deformity
- history of ulcer or amputation

Low Risk
- with normal exam
- Focus on:
  1. self-management education
  2. control blood sugar
  3. control blood pressure
  4. smoking cessation
- Follow-up complete foot exam yearly

High Risk
- with abnormal exam
- Focus on:
  1. self-management education
  2. protective shoes
  3. podiatry care
  4. (plus) the measures for Low Risk
- Follow-up every 2-3 months

Ulcer Found
Assess Ulcer
- debridement
- blood count
- temperature
- wound culture
- assess circulation

Uncomplicated Ulcer
- <2 cm
- no systemic infection
- no deep tissue involved
- & adequate circulation
- Outpatient Care
  - weekly debridement
  - daily dressing changes
  - non-weight bearing
  - oral antibiotics (if indicated)
  - Weekly visits until healed
  - then treat as high risk
  - Failure to improve in 4 weeks → treat as complex ulcer

Complicated Ulcer
- >2 cm
- deep tissue involved
- major infection or inadequate circulation
- Hospital Care
  - surgical debridement
  - dressing changes
  - IV antibiotics
  - vascular assessment & treatment
  - Daily visits until infection controlled
  - circulation restored and/or ulcer size reduced
  - then treat as simple ulcer

Follow-up complete foot exam yearly
Follow-up every 2-3 months

Focus on:
- 1. self-management education
- 2. protective shoes
- 3. podiatry care
- 4. (plus) the measures for Low Risk