

Pathway for Preventing and Managing Diabetic Foot Complications

Person with diabetes, with no history of foot complications

Intervention: Regular (every 3–12 months)
Goal: Prevent development of ulcer or other complication

STEP	CARE DELIVERY LOCATION
Risk Assessment	
<ul style="list-style-type: none"> Complete holistic assessment Foot screen for: pre-ulcerative lesions, neuropathy, poor circulation, deformity and evidence of pressure/fungal infections, poor self-care, ill-fitting footwear 	
Plan of Care	
<ul style="list-style-type: none"> Address other health issues and make appropriate referrals 	
<ul style="list-style-type: none"> Education 	
<ul style="list-style-type: none"> Preventative foot care, footwear and/or orthotics 	
<ul style="list-style-type: none"> Support blood sugar control 	
Re-screening, Reassessment and Evaluation of Interventions	
<ul style="list-style-type: none"> Every 3–12 months based on level of risk 	
<ul style="list-style-type: none"> As required based on identified risk factors 	

Relative financial burden on health-care system



Person with diabetes, with current foot ulcer or other complication

Intervention: Urgent (within 24 hours) and ongoing
Goal: Eliminate or minimize complications

STEP	CARE DELIVERY LOCATION
Risk Assessment	
<ul style="list-style-type: none"> Complete holistic assessment Foot screening: infection, active Charcot (structural collapse) Poor circulation and ulceration 	
Plan of Care	
<ul style="list-style-type: none"> Address other health issues and make appropriate referrals 	
<ul style="list-style-type: none"> Education 	
<ul style="list-style-type: none"> Wound care, including offloading (pressure relief) 	
<ul style="list-style-type: none"> Foot care and footwear: needed by patients during their acute episode 	
<ul style="list-style-type: none"> Support blood sugar control 	
<ul style="list-style-type: none"> May require medical and surgical intervention 	
Re-screening, Reassessment and Evaluation of Interventions	
<ul style="list-style-type: none"> Continues after crisis resolved; every 1–3 months 	
<ul style="list-style-type: none"> As required based on need 	

Relative financial burden on health-care system



Person with diabetes, with remission of foot complications

Intervention: Frequent (every 1–3 months)
Goal: Prevent recurrence of ulcer or other complication

STEP	CARE DELIVERY LOCATION
Risk Assessment	
<ul style="list-style-type: none"> Complete holistic assessment Foot screening based on history of previous ulceration/ amputation 	
Plan of Care	
<ul style="list-style-type: none"> Address other health issues and make appropriate referrals 	
<ul style="list-style-type: none"> Education 	
<ul style="list-style-type: none"> Preventative foot care, footwear and/or orthotic 	
<ul style="list-style-type: none"> Support blood sugar control 	
Re-screening	
<ul style="list-style-type: none"> Every 1–3 months based on identified risk 	
Re-screening, Reassessment and Evaluation of Interventions	
<ul style="list-style-type: none"> As required based on identified risk factors 	

Relative financial burden on health-care system

