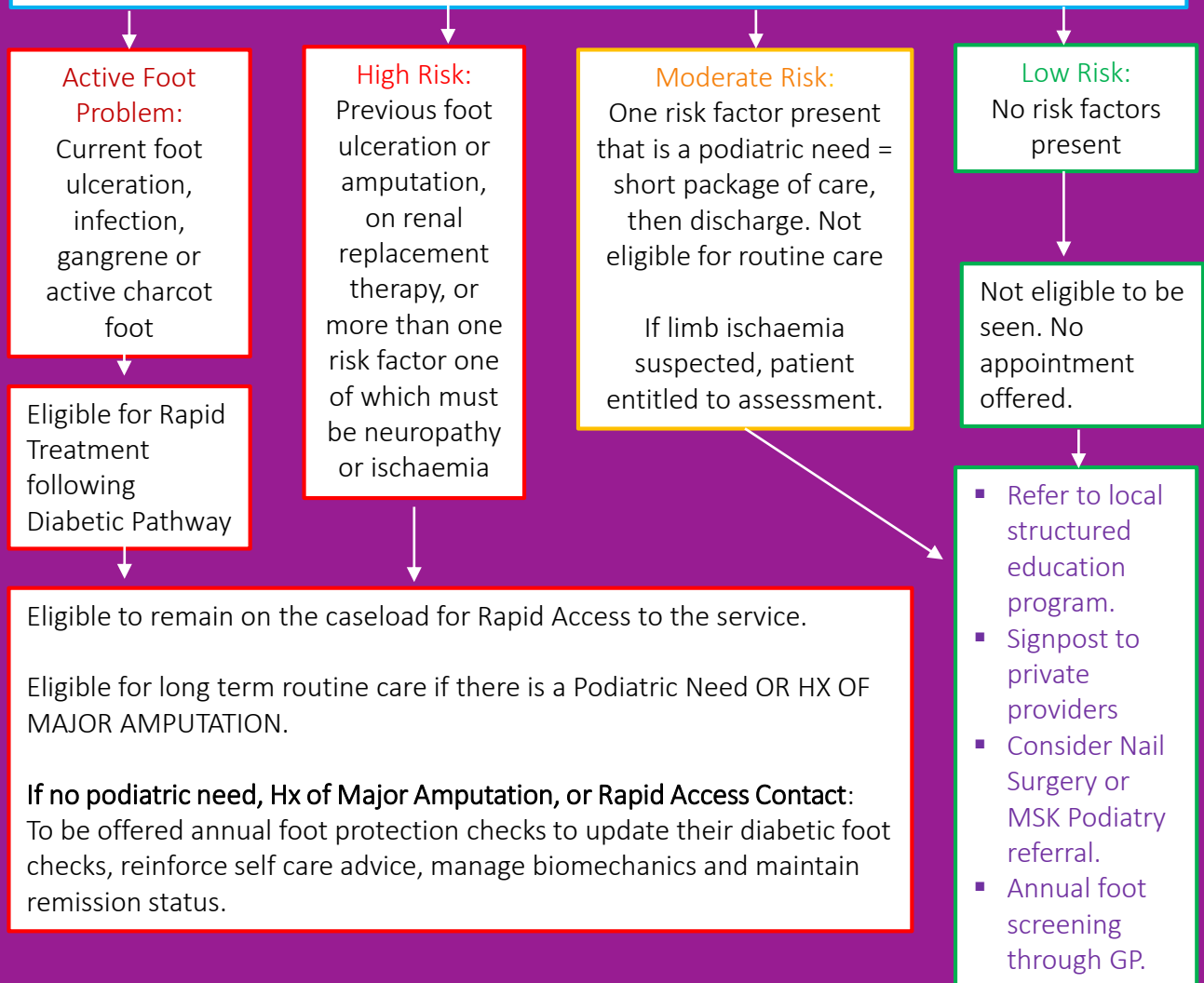




Podiatry Eligibility Pathway for Patients with Diabetes

Does the patient present with any of the following risk factors or Podiatric Needs:

- Neuropathy
- Limb ischaemia – monophasic pulses with clear clinical signs of ischaemia and / or abnormal ABPI / toe pressures
- History of major or minor foot amputation
- Foot ulceration, current or past
- Foot infection and / or inflammation
- Charcot foot, current or past
- Gangrene of the foot
- Advanced Renal Disease
- ❖ Podiatric Need:
 - ❖ Pathological Callous / corns
 - ❖ Symptomatic pathological nails





Podiatry Eligibility Pathway for Patients WITHOUT Diabetes

Do any of the following apply?

- Patient is immunocompromised to include high dose steroids, HIV, cancer treatment or transplant drugs
- Patient has advanced PVD, absent or monophasic pulses, with clinical signs and symptoms.
- Patient has significant venous impairment to include lymphoedema and history of severe ulcerated chilblains.
- Patient has advanced renal disease or is on renal replacement therapy.
- Patient has a neuropathic condition or damage to the peripheral nerve system which may be caused by disease or trauma.
- Patient suffers from COPD, emphysema, or cystic fibrosis, and/or receives oxygen therapy.
- Patient suffers from inflammatory systemic arthritis.
- Patient has an active foot ulceration, gangrene and / or inflammation

YES

Does the patient present with two of the following risk factors, ONE BEING NEUROPATHY OR LIMB ISCHAEMIA?

- Neuropathy
- Limb ischaemia – monophasic pulses with clear clinical signs of ischaemia and / or abnormal ABPI / toe pressures.
- ❖ Podiatric Need:
 - ❖ Pathological Callous / corns
 - ❖ Symptomatic pathological nails

YES

NO

No appointment offered

- Signpost to private providers
- Consider Nail Surgery or MSK Podiatry referral.

NO

- If patient has an active foot ulcer and / or inflammation / gangrene, package of care to be provided. Patient to remain on the caseload for Rapid Access to the service.
- If patient has a podiatric need, eligible for long term care unless risk factors reduce or non compliance.
- If no podiatric need or Rapid Access Contact: To be offered annual foot protection checks to update their foot checks, reinforce self care advice, manage biomechanics and maintain remission status.

- If patient has an active foot ulcer and / or inflammation / gangrene, package of care to be provided but discharged once healed if clinically appropriate.
- If limb ischaemia suspected, patient entitled to assessment.
- Otherwise, patient is not eligible for assessment, package of care, or long term care. No appointment offered. Consider alternative care pathways.