

Diabetes Foot Screen

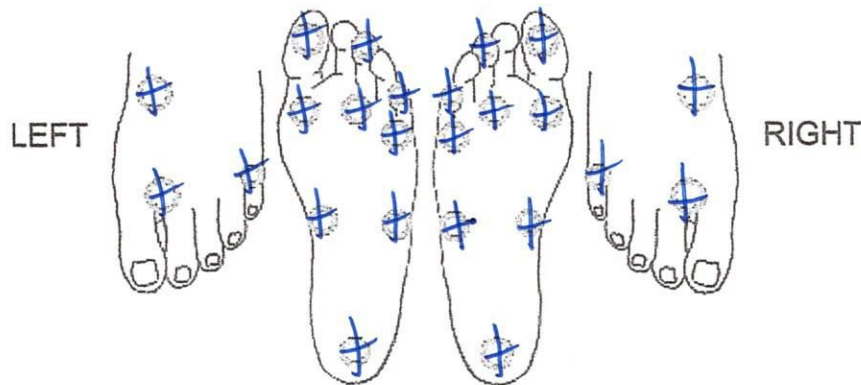
Name (Last, First, MI) Portia Branson Date: 1 / 22 / 2024

Fill in the following blanks with a "Y" or "N" to indicate findings in the right or left foot.

	R	L
Is there a history of a foot ulcer?	<u>N</u>	<u>N</u>
Is there a foot ulcer now?	<u>Y</u>	<u>Y</u>
Is there a claw toe deformity?	<u>Y</u>	<u>Y</u>
Is there swelling or an abnormal foot shape?	<u>Y</u>	<u>Y</u>
Is there elevated skin temperature?	<u>Y</u>	<u>Y</u>
Is there limited ankle dorsiflexion?	<u>Y</u>	<u>Y</u>
Are the toenails long, thick or ingrown?	<u>Y</u>	<u>Y</u>
Is there heavy callous build-up?	<u>Y</u>	<u>Y</u>
Is there foot or ankle muscle weakness?	<u>Y</u>	<u>Y</u>
Is there an absent pedal pulse?	<u>N</u>	<u>N</u>
Can the patient see the bottom of their feet?	<u>Y</u>	<u>Y</u>
Are the shoes appropriate in style and fit?	<u>Y</u>	<u>Y</u>

Note the level of sensation in the circles:

+ = Can feel the 5.07 filament — = Can't feel the 5.07 filament



Skin Conditions on the Foot or Between the Toes:

Draw in: Callous , Pre-ulcer , Ulcer  (note length and width in cm)
Label with: R - redness, M - maceration, D - dryness, T - Tinea

RISK CATEGORY:

- ☒ 0 No loss of protective sensation.
- ☐ 1 Loss of protective sensation
- ☐ 2 Loss of protective sensation with either high pressure (callous/deformity), or poor circulation.
- ☐ 3 History of plantar ulceration, neuropathic fracture (Charcot foot) or amputation.

Performed by

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