

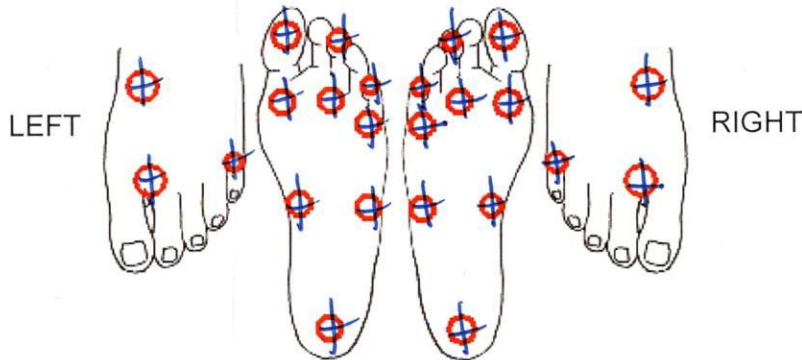
Diabetes Foot Screen

Name (Last, First, MI) Betz David Date: 4 / 1 / 25
6/24/1979
 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?	N	N
Is there a foot ulcer now?		
Is there a claw toe deformity?		
Is there swelling or an abnormal foot shape?		
Is there elevated skin temperature?		
Is there limited ankle dorsiflexion?		
Are the toenails long, thick or ingrown?		
Is there heavy callous build-up?		
Is there foot or ankle muscle weakness?		
Is there an absent pedal pulse?	N	N
Can the patient see the bottom of their feet?	SS	SS
Are the shoes appropriate in style and fit?	SS	SS

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 J. Benton, CRP