

Diabetic Foot Exam and Ulcer Risk Assessment

Step 1: Visual Inspection of Feet	<p>Fill in the blanks indicating positive findings with either “right,” “left,” or “both” feet.</p> <p>Skin, Hair, and Nail Condition</p> <p><input type="checkbox"/> Is the skin thin, fragile, shiny and hairless? _____</p> <p><input type="checkbox"/> Are the nails thick, too long, ingrown, or infected with fungal disease? _____</p> <p>Musculoskeletal Deformities</p> <p><input type="checkbox"/> Toe deformities? _____</p> <p><input type="checkbox"/> Bunions (Hallus Valgus)? _____</p> <p><input type="checkbox"/> Charcot foot? _____</p> <p><input type="checkbox"/> Foot drop? _____</p> <p><input type="checkbox"/> Prominent Metatarsal Heads? _____</p>
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Step 2: Vascular Assessment	<p>Pedal Pulses – Fill in the blanks with a “P” or an “A” to indicate present or absent.</p> <p>Posterior tibial: Left _____ Right _____</p> <p>Dorsalis pedis: Left _____ Right _____</p>
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Step 3: Sensory Exam	<p>Sensory Foot Exam</p> <p>Label the sensory level at 10 sites on each foot with a “+” if the patient can feel the 5.07 (10-gram) Semmes-Weinstein nylon monofilament or a “-” if the patient cannot feel the filament.</p>
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Risk Categorization (based on “International Working Group on the Diabetic Foot” classification)

INDICATE PATIENT CATEGORY HERE	Risk Stratification Category	Description of Risk Category	Recommended Interventions for Various Risk Strata	Recommended Footwear
	0	No sensory neuropathy	Annual foot examination	
	1	Sensory neuropathy only	Foot examination every 6 months	Shoes with appropriate fit
	2	Sensory neuropathy plus peripheral vascular disease and/or foot deformities	Foot examination every 3 months	Special footwear (including insoles and orthoses)
	3	Previous foot ulcer	Foot examination every 1-3 months	Special footwear (including insoles and orthoses)