



## NICE GUIDANCE 19 (NG19): Diabetic Foot

### Low Risk:

- Annual diabetic foot screening.

### Medium Risk:

- 3 – 6 months foot screening.

### High Risk:

- Every 1 to 2 months foot screening.

### Active Ulceration:

- Every 1 to 2 weeks foot screening.

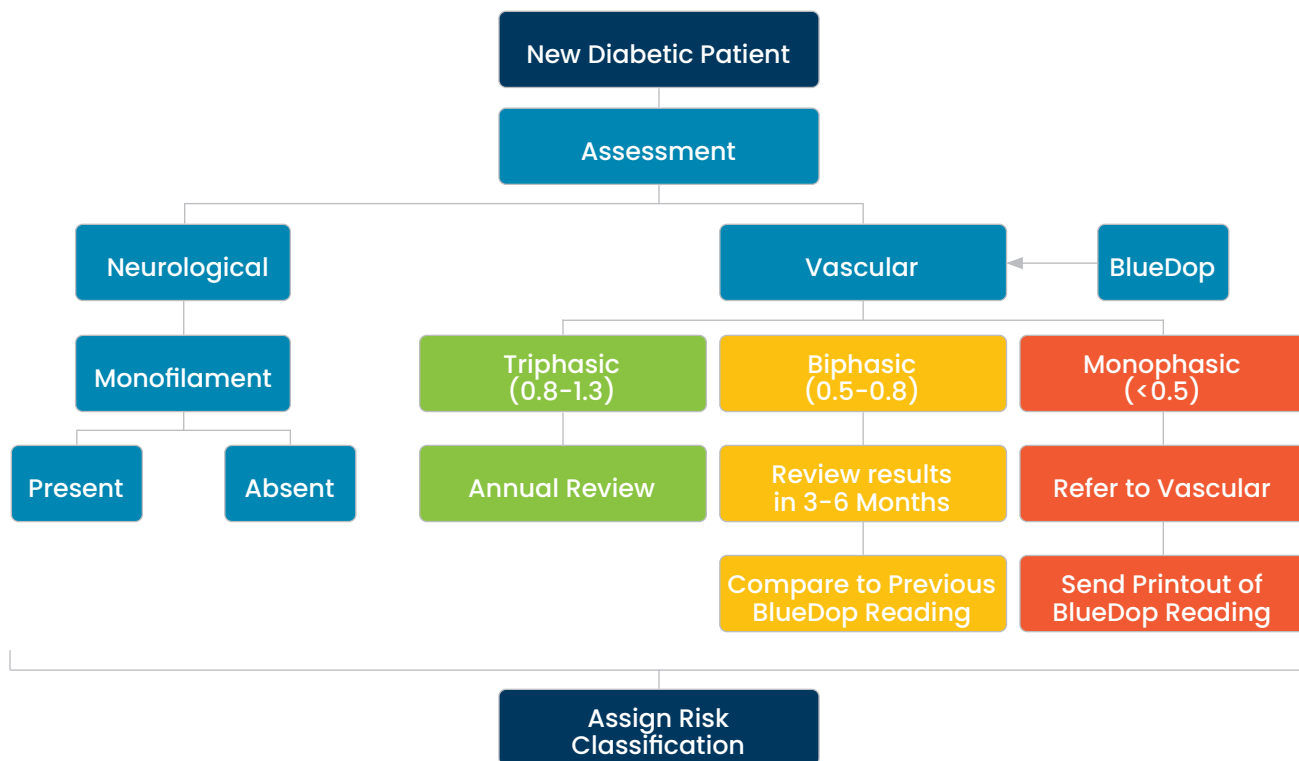
NG19: 1.3.11

Offer 1 or more of the following as standard care for treating diabetic foot ulcers:

- Offloading.
- Control of foot infection.
- **Control of ischaemia.**
- Wound debridement.
- Wound dressings.

NG19: 1.5.4

### BLUEDOP WITH NG19 PATHWAY



## NICE GUIDANCE 19 (NG19): Diabetic Foot

### Low Risk:

- No risk factors present except callus alone.

### Moderate Risk:

- Deformity **or**
- Neuropathy **or**
- Peripheral arterial disease.

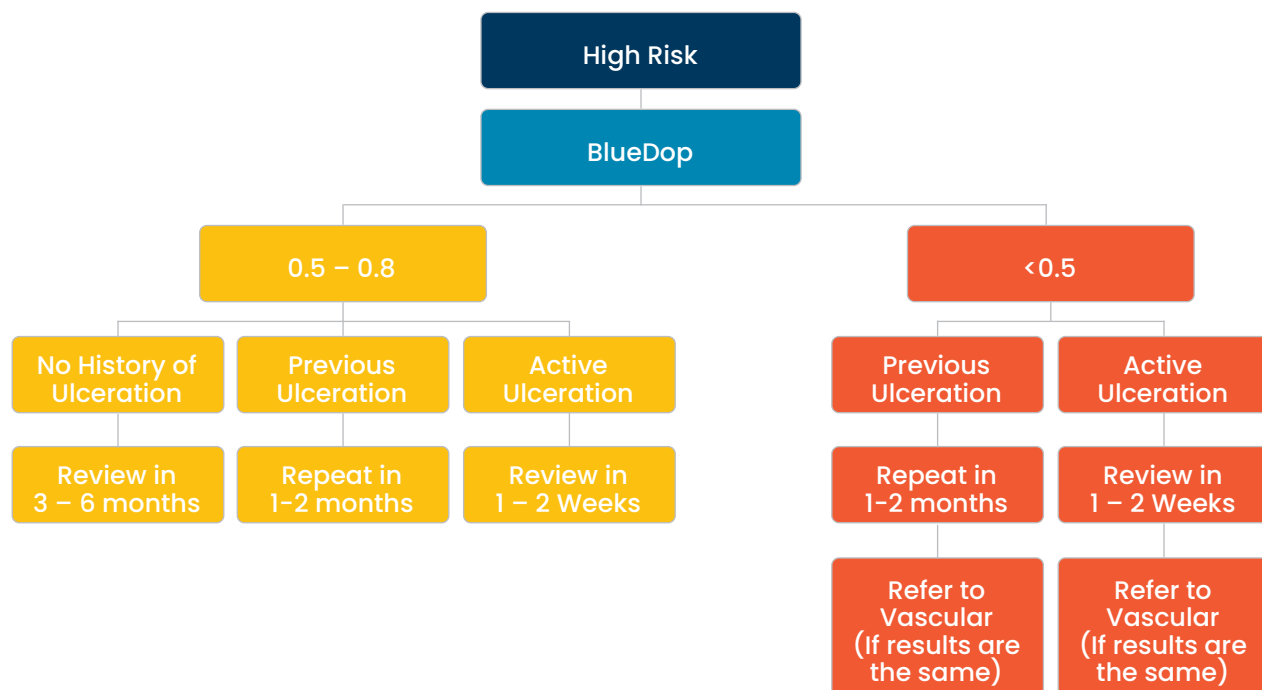
### High Risk:

- Previous ulceration **or**
- Previous amputation **or**
- On renal replacement therapy **or**
- Neuropathy and peripheral arterial disease together **or**
- Neuropathy in combination with callus and/or deformity **or**
- Peripheral arterial disease in combination with callus and/or deformity.

### Active Diabetic Foot Problem:

- Ulceration **or**
- Infection **or**
- Chronic limb-threatening ischaemia **or**
- Gangrene **or**
- Suspicion of an acute Charcot arthropathy, or an unexplained hot, swollen foot with a change in colour, with or without pain.

### BLUEDOP WITH NG19 PATHWAY – HIGH RISK/ACTIVE ULCERATION EXPANDED



## Venous Leg Ulceration (NICE Guidance)

### **Leg Ulcer - Venous:**

A leg ulcer is a break in the skin below the knee that has not healed within 2 weeks. A venous leg ulcer occurs in the presence of venous disease and is the most common type of leg ulcer, accounting for 60–80% of cases.

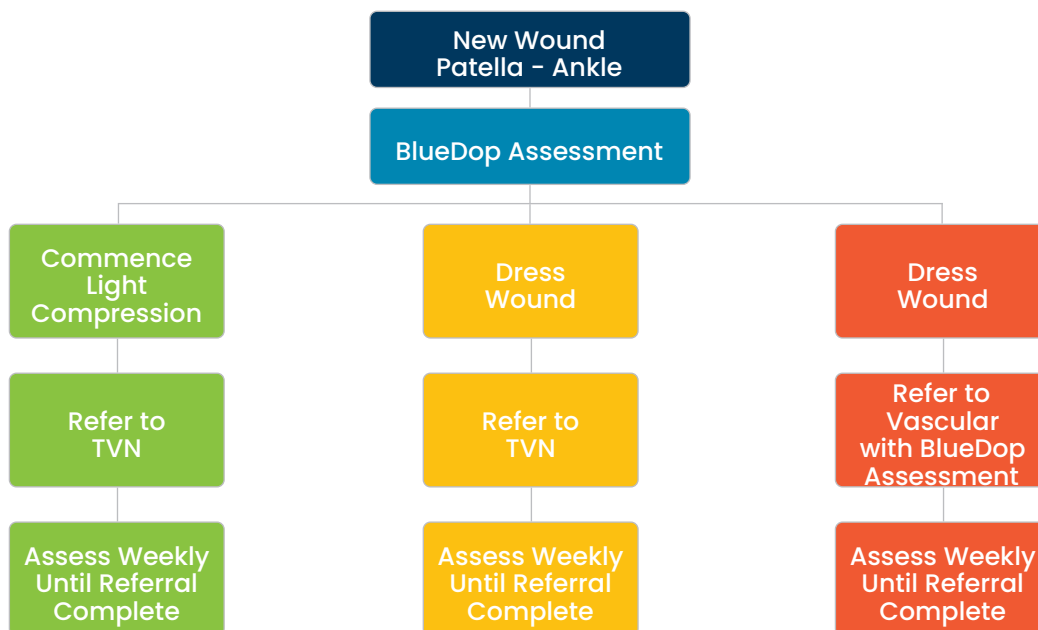
### **Arrange Investigations:**

Arrange a Doppler assessment of both legs to determine the ankle-brachial pressure index (ABPI) to exclude arterial insufficiency. See the section on **Interpretation of ABPI** for more information.

References:

Assessment | Diagnosis | Leg ulcer - venous | CKS | NICE  
 Interpretation of ABPI | Diagnosis | Leg ulcer - venous | CKS | NICE

### BLUEDOP IN CONJUNCTION WITH NICE PATHWAY



## Hosiery (NICE Guidance)

### How frequently should a person be reviewed?:

Ideally, Doppler studies should be repeated every 6–12 months or earlier if clinically indicated.

### Level of Compression:

Class 1 stockings (light compression) exert an ankle pressure of 14–17 mmHg.

Class 2 stockings (medium compression) exert an ankle pressure of 18–24 mmHg.

Class 3 stockings (high compression) exert an ankle pressure of 25–35 mmHg.

#### References:

Assessment | Exclude Arterial Insufficiency | Compression Stockings | CKS | NICE May 2022

### Complete ABI Investigations:

- Less than 0.8 – compression stockings are contraindicated, as severe arterial insufficiency is likely. Refer the person for specialist vascular assessment.
- Between 0.8 and 1.3 – compression stockings are safe to wear.
- Greater than 1.3 – avoid compression, as high ABPI values may be due to calcified and incompressible arteries. Refer the person for specialist vascular assessment.

### BLUEDOP IN CONJUNCTION WITH NICE PATHWAY

