Foot Ulcer Management Issues

Networking your way to success
Foot Ulcer Management Issues -
Introductions

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Insert date/name
Introducing –
The foot in Diabetes

Inspiring tomorrow’s professionals
Introducing -
The literature and key guidelines
Introducing Mr Smith

Age - 58
Type 2 Diabetes 20 years duration
HbA1c – 75 mmol/mol
BMI – 36
Co morbidities – Hypertension, hyperlipidaemia, Stable Angina.
Social – Car Salesman, non-smoker, “moderate drinker”, no formal exercise.
Introducing Mr Smith’s foot

- Ulceration to plantar aspect of 2nd metatarsal head
- Painless
- Deep – extending to joint capsule but not bone
- Moderate surrounding inflammation and exudates
- Macerated callus surrounds wound edges.
Discussion task 1 – What immediate care and assessment does Mr Smith need?

Discussion task 2 – What referrals are necessary for Mr Smith?
Assessment –
First impressions last a lifetime

- Palpation of foot pulses
- 10g monofilament
- Appropriateness of footwear
- Visual inspection for foot deformities (NICE 2004)
Management –
How long until you know the relationship will work?
Padding and Strapping

• Plaster models – design a pad.
Dressings - task

- Plaster models - Choose a dressing to apply.
- Debate dressing choices...
Thank You!

Any questions?
Bullet Points for New Clinical Solutions

• New solutions come from new or improved working relationships

• Four simple assessments pave the way to a multitude of management options

• Take the pressure off / turn the volume down