

## Diabetic and Neuropathic Ulcers: Assessment and Treatment (in Adults)

## Site Applicability

All VCH & PHC sites

### **Practice Level**

Basic skills for the following professions (within their respective scope of practice):

• RN, RPN, LPN, NP

## **Policy Statement**

VCH & PHC nurses will follow the Decision Support Tool (DST) developed by the Provincial Nursing Skin & Wound Committee (see guideline link below) when providing care for adults who have a diabetic/neuropathic ulcer.

#### **Need to Know**

- The Provincial Nursing Skin and Wound Committee (PNSWC) developed this DST to provide standardized diabetic/neuropathic ulcer wound care management for all patients, clients and residents across the province.
- While more than 1.8 million Canadians currently have diabetes, this number is predicted to increase to 2.4 million by 2016. Of these, 15% will develop foot ulcers during the course of the disease <sup>11, 19</sup> and of these 14 – 24% will undergo a lower extremity amputation. This means that health care professionals will treat approximately 360,000 diabetic foot ulcers in the future.
- o Clients with diabetes who have infected foot ulcers have a higher risk of lower limb amputation.
- A client with poorly controlled diabetes may have a more subtle response to local wound and systemic infection due to reduced blood flow and diminished sensation.
- Some of the factors that place diabetic clients at high risk for poor healing include poor glycemic control, decreased sensation in the foot, foot deformities, infection, previous ulceration, and previous amputation.

## **Practice Guideline**

- The Provincial DST <u>Guideline Summary: Diabetic/Neuropathic Ulcers</u> is a one page assessment and treatment overview
- The Provincial DST <u>Guideline</u>: <u>Assessment and Treatment of Diabetic and Neuropathic Ulcers in Adults</u> provides detailed guidance on the assessment and the determination of treatment goals for patients, clients and residents who have developed a diabetic/neuropathic ulcer. The DST also outlines interventions and discharge planning considerations as well as expected client/family outcomes.

## Patient/Client/Resident Education

VCH & PHC Teaching Pamphlets:

- <u>Diabetic Foot Care: You and Your Feet</u> (Cat# FL.955.D54)
- Top Ten Tips for Good Foot Care (Cat# FL.955.T62)

**Note:** This is a **controlled** document for VCH & PHC internal use. Any documents appearing in paper form should always be checked against the electronic version prior to use. The electronic version is always the current version.





### **Related Documents**

#### VCH:

- BD-00-07-40037: <u>Lower Limb Ulcers (Arterial, Venous and Mixed)</u>: <u>Guidelines for Assessment & Treatment in Adults</u>
- BD-00-12-40000: Ankle Brachial Index (ABI) Procedure for Adults using a Handheld Doppler
- BD-00-12-40040: Monofilament Testing for Loss of Protective Sensation Procedure

#### PHC:

- NCS6429: <u>Lower Limb Ulcers (Arterial, Venous and Mixed)</u>: <u>Guidelines for Assessment & Treatment</u> in Adults
  - o Arterial Ulcers: Assessment and Treatment Algorithm (Appendix to Lower Limb Ulcers)
  - o Venous and Mixed Ulcers: Assessment and Treatment (Appendix to Lower Limb Ulcers)
- NCS5458: Ankle Brachial Index (ABI): Procedure in Adults using a Handheld Doppler

### **Documentation**

As per site documentation guidelines

## **Developed by**

# Developed by: British Columbia Provincial Nursing Skin and Wound

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## **Endorsed by**

VCH: (Regional SharePoint 2<sup>nd</sup> Reading)

Health Authority Professional Specific Advisory Council Chairs (HAPSAC)

Health Authority Interprofessional Advisory Council Chairs (HAIAC)

**VCH Operations Directors** 

VCH Professional Practice Directors

PHC: Clinical Nurse Specialist, Wound & Skin Care

## Final Sign-off & Approved for Posting by

Chief Nursing Officer & Executive Lead Professional Practice – VCH Professional Practice Standards Committee - PHC

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