Using the 3-minute Diabetic Foot Examination to Create a Risk-Based Referral System for at Risk Geriatric Patients
Beverly Ann Brown, FNP-C

Background and Significance
- Diabetic peripheral neuropathy affects 50% of diabetic patients
- It is recommended that all diabetic patients have an annual foot examination routinely
- Risk-based referral system

Purpose

PICO Question
(P) Among geriatric patients at the practice center clinic (I) will implementation of routine diabetic foot care using the 3-minute diabetic foot examination (O) reduce complications of diabetic foot neuropathy (i.e., amputations) (C) compared to usual care (T) over six months

Method

Design
Evidence-based practice pre-post implementation project

Intervention
3-Minute diabetic foot exam and risk stratification

Framework
Johns Hopkins Evidence-Based Practice Model with 3-phases: Practice, Evidence, Translation

Sample & Setting
Urban community-based geriatric clinic serving 230 clients
- Sub-sample of 65 diabetic clients participated in foot exams

Results

Diabetic Foot Risk Stratification
- Urgent: Immediate referral to specialist (vascular, podiatry, surgery)
- High: Referral to wound nurse
- Medium: Reassess in 1-2 months
- Low: Reassess in 2–3 months

Conclusions
- Increased identification of minor/major foot conditions (e.g., calluses, corns, elongated toenails, ill-fitting shoes)
- Quick and easy referrals to specialist
- Lack of caregiving support, and cognitive deficits were identified as risk factors for diabetic foot amputations
- Need early screening, education, home health support, and early intervention by health care personnel helped prevent diabetic foot complications.

References

Rates of Amputation Over Time

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<thead>
<tr>
<th>Rate of Amputation (Monthly)</th>
<th>Pre-Implementation</th>
<th>Post-Implementation</th>
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<tbody>
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<td>Pre-Implementation</td>
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<tr>
<td>Post-Implementation</td>
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References: