



Service Priorities and Programmes
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Enhancement of diabetic foot care through a structured foot screening and educational program in Department of O&T.

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Introduction

In Hong Kong, the pandemic of diabetic mellitus (DM) was increasing and affecting 5 to 10% population. Foot ulcer was one of the complications of DM. Once patients develop an ulcer, they carry a 10 to 30% chance of progressing to the amputation (Daniel et al, 2010). This is why it is crucial for people to be screened not only for ulcers but for their risk factors. Nurse plays an important role. Through a structured foot screening and education program, patient at risk could be identified early, so that corresponding suggested interventions and referrals could be provided accordingly.

Objectives

1. To perform a foot screening for the diabetic/newly diagnosis diabetic patients to identify their risk and enhancing patient quality care. 2. To detect and provide early foot care education, intervention, and referral for DM and at risk patients. 3. To arise awareness on foot care for DM patients.

Methodology

A structure foot screening and educational programme was conducted from September 2013 and January 2014. All emergency admitted patients were screened for DM history or identified newly diagnosed DM. Then a foot screening using Inlow 60-second diabetic foot screening tool done by nurse under consent. Results were analyzed for suggested frequencies of re-screening and follow up at O&T nurse clinic. Also different parameters of deficit such as self-care, integument, arterial flow, sensation and ?? boney changes problems would be identified. Patients would be categorized into one of the five categories with suggested referrals such as Podiatrist(Podi), P&O, Vascular (VAS), endocrine (Endo) and/or O&T Foot Teams. DM foot ulcer patients would have continued care and follow up at O&T nurse clinic. Demographic data, number of referrals, time to assessment , length of stay and other related data of foot screening programme would be collected and analyzed. In addition a patient satisfaction survey is conducted.

Result

80 DM / newly diagnosis DM patients were recruited into the structured foot screening program from September 2013 to January 2014. There were 27.5% (22) with foot ulcer 72.5% (58) without foot ulcer. All of them were provided DM foot education and follow up foot screening by nurses. In foot ulcer group, the mean time for suggested referral consultation is 1.5 days (Podi); 2.2 days (VAS) and 2.5 days (Endo) after the time of admission, which is decreased by 44% to the overall mean time is 2.1 days when compare with 3.8 days before the program. The mean of length of stay is also decreased by 33.3% to 6.8 days when compare with 10.2 days before. In the non-ulcer group, there are 75% of them with at least one referral; 68% with two referrals and 60% with three referrals. The success early detection and appropriate referrals which contribute to the mean of length of stay is decreased by 47.9% to 3.5 days when compare with 6.73 days before the intervention. 85% patients were satisfied with, in particular for, the time spent in performing foot screening and the continuity care for providing follow up service in O&T nurse clinic.