ACT NOW!

Tool for all NHS Primary and Secondary Care services to promote prompt and rapid referral to the MDFT (Multidisciplinary Foot Care Team) (Edmonds et al, 2020).

Refer the PLwD (Person/People Living with Diabetes) if they present with any of the following to their foot/feet:



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| ACT NOW! Checklist | | | | |
|--|-----------------|--|------------------|--------------------------------------|
| ASSESSMENT OF FOOT | Tick if present | Digital photo taken to include with referral | Date referred | Document referral to Specialist MDFT |
| A - ACCIDENT? | | | | |
| Recent or history of an accident or trauma? | | | | |
| C - CHANGE? | | | | |
| Is there any new swelling, redness or change of shape of the foot? | | | | |
| T - TEMPERATURE? | | | | |
| If there is a change in temperature present? Could this be an infection or possible Charcot? | | | | |
| N - NEW PAIN? | | | | |
| Is there pain present? Is it localised or generalised throughout the foot? | | | | |
| O - OOZING? | | | | |
| What colour is any exudate? Is there an odour? | | | | |
| W - WOUND? | | | | |
| Can you document the size, shape and position of the wound in the foot affected? | | | | |