

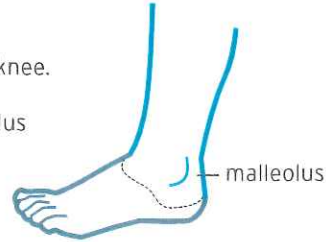
Lower Limb - Recommendations for Clinical Care

For further information, please refer to the full NWCSP Lower Limb Recommendations at NationalWoundCareStrategy.net

For people with one or more wounds below the knee.

Leg wound - originating on or above the malleolus (ankle bone) but below the knee.

Foot wound - originating below the malleolus.



Wounds on the Leg
One or more wounds above the malleolus

Wounds on the Foot
One or more wounds below the malleolus

Immediate and Necessary Care

RED FLAG ASSESSMENT

- Acute or spreading infection of leg or foot (e.g. increasing unilateral redness, swelling, pain, pus, heat) [Alert GP]
 - Symptoms of sepsis
- Acute or chronic limb threatening ischaemia [Urgent referral to vascular services]
 - Suspected deep vein thrombosis (DVT) [Refer to GP]
- Suspected skin cancer [Urgent referral to dermatology services]

Immediate care

- Cleaning and emollient
- Simple low-adherent dressing
- Leg wounds, first line mild graduated compression
- Supported self-care (when appropriate)

People without the above symptoms should be offered strong compression in the form of two-layer compression hosiery kits as first line treatment (with strong multi-component compression bandaging as an alternative).

The need for application aids should be considered

Diagnosis and treatment

1. Assess and identify contributing causes for non-healing

2. Diagnose cause of non-healing and formulate treatment plan

People with confirmed or suspected diabetic foot ulceration

- Refer to diabetic foot team
- Provide care in line the NICE

Guideline for Diabetic Foot Problems

People with confirmed or suspected peripheral arterial disease

- Refer for vascular surgical opinion
- Provide care in line the NICE

Guideline for Peripheral Arterial Disease

Ongoing care and review

Review at each dressing change and at weekly intervals

- Monitor healing at 4 - week intervals (or more frequently if concerned)
- If unhealed at 12 weeks, reassess

Assessment times for diagnosis and treatment

- In hospital with diabetic foot wound - refer to MDT within 24 hours
- Any other type of foot wound - refer to MDT within 1 working day