What to expect at your annual foot check
People with diabetes are much more likely to suffer serious foot problems because raised blood sugars reduce circulation and feeling. This damage can lead to amputations. Diabetes is to blame for over 150 amputations in the UK each week. But most foot problems can be prevented. That’s why keeping a close eye on your feet is vital. Looking at your feet every day and having a trained healthcare professional check them at least once a year is an essential part of your diabetes care.

If you’ve not had your foot check this year, ask your GP or nurse for one.

What should happen at your foot check

- You should be barefoot during your foot check.
- Your whole foot should be looked at including the heel, underneath and in between your toes, and toenails. This is looking for corns, calluses, changes in shape, any cracks or dry skin or areas that look discoloured.
- Your feet should be tested for numbness or changes in feeling with a tuning fork, a fine plastic strand called a monofilament or they might even use their hands and ask if you can feel them.
- They will check the circulation of your feet by testing the temperature and blood flow in the toes or the pulses.
- Your shoes should also be checked to make sure they’re not causing any problems.
**Questions they should ask you**

- Have you ever had a foot ulcer?
- Have you seen any cuts or blisters that you didn’t feel?
- Do you notice any discomfort through the day or at night?
- If you do have pain, does anything help it?
- Do you check your feet on a daily basis?
- How has your diabetes been recently?

**Before you leave your foot check**

- You should be told the results and your level of risk of foot problems.
- They should explain what your risk means and what to do next, including:
  - advice about how to care for your feet – according to your level of risk
  - an agreed management or treatment plan
  - emergency contact details
  - referral to Foot Protection Service when appropriate.

**My results**

Date of foot check: .................................................................

My risk of foot problems:

- **Low**
- **Moderate / Increased**
- **High**

Do I need to be referred to a specialist for expert advice?  **Yes** or **No**

If you have not been given this information, ask for it.
Checking your feet every day will help spot any foot problems

**Damage to your nerves might be shown by:**
- tingling sensation or pins and needles
- pain (burning)
- less sweaty feet
- changes in the colour of your feet
- changes to the shape of your feet
- blisters and cuts that you can see but don’t feel
- loss of feeling in your feet or legs.

**Damage to your blood supply might be shown by:**
- cramp in your calves (at rest or when walking)
- shiny smooth skin
- loss of hair on your legs and feet
- cold, pale feet
- changes in the skin colour of your feet
- wounds or sores that do not heal
- pain in your foot or feet
- swollen feet.

---

**For more information and advice**

Go to [www.diabetes.org.uk/putting-feet-first](http://www.diabetes.org.uk/putting-feet-first)

Call **0345 123 2399** Monday to Friday, 9am–7pm

Email **helpline@diabetes.org.uk**