## Comprehensive Diabetes Lower Extremity Amputation Prevention Program Risk and Management Categories for the Foot

Risk Category	Description
0	Diabetes, but no loss of protective sensation in feet
1	Diabetes, loss of protective sensation in feet
2	Diabetes, loss of protective sensation in feet with high pressure
	(callout/deformity), or poor circulation.
3	Diabetes, history of plantar ulceration or neuropathic fracture.
Note: "loss of protective sensation" is assessed using a 5.07 monofilament at 10 locations on each foot.	

Category	Management Category
	Education emphasizing disease control, proper shoe fit/design
0	Follow-up yearly for foot screen
	Follow as needed for skin/callus/nail care or orthoses
	Education emphasizing disease control, proper shoe fit/design, daily self-
1	inspection, skin/nail care, early reporting of foot injuries
	Proper fitting/design footwear with soft inserts/soles
	Routine follow-up 3 – 6 months for foot/shoe examination &nail care
	Education emphasizing disease control, proper shoe fit/design, self-
2	inspection, skin/nail/callus care, early reporting of foot injuries
	Depth-inlay footwear, molded/modified orthoses; modified shoes as needed
	Routine follow-up $1-3$ months for foot/activity/footwear evaluation and
	callus/nail care
	Education emphasizing disease control, proper fitting footwear, self-
3	inspection, skin/nail/callus care and early reporting of foot injuries
	Depth-inlay footwear, molded/modified orthoses; modified/custom footwear, ankle-foot orthoses as needed
	Routine follow-up $1 - 12$ week for foot/activity/footwear evaluation and
	callus/nail care

Diabetic Foot Clinic visit frequency may vary based on individual patient needs..