

# Diabetic Foot Exam

## Patient Details:

Name:

Date of Birth:

Date of Examination:

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## Visual Inspection

### Right Foot:

#### Skin:

- Ulcers (Location: \_\_\_\_\_)
- Blisters (Location: \_\_\_\_\_)
- Cuts/Cracks (Location: \_\_\_\_\_)
- Calluses/Corns (Location: \_\_\_\_\_)
- Redness (Location: \_\_\_\_\_)
- Swelling (Location: \_\_\_\_\_)
- Signs of infection: \_\_\_\_\_

#### Nails:

- Fungal infection
- Ingrown
- Thickened/Discolored

**Deformities (describe & location):** \_\_\_\_\_

### Left Foot:

#### Skin:

- Ulcers (Location: \_\_\_\_\_)
- Blisters (Location: \_\_\_\_\_)
- Cuts/Cracks (Location: \_\_\_\_\_)
- Calluses/Corns (Location: \_\_\_\_\_)
- Redness (Location: \_\_\_\_\_)
- Swelling (Location: \_\_\_\_\_)
- Signs of infection: \_\_\_\_\_

**Nails:**

- Fungal infection
- Ingrown
- Thickened/Discolored

**Deformities (describe & location):** \_\_\_\_\_

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**Sensory Examination****Monofilament Test:****Right Foot:**

- Sensed
- Not Sensed

**Left Foot:**

- Sensed
- Not Sensed

**Vibration Test:****Right Foot:**

- Sensed
- Not Sensed

**Left Foot:**

- Sensed
  - Not Sensed
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**Pulse Check*****Right Foot:***

- Dorsalis Pedis Pulse:
  - Present
  - Absent
- Posterior Tibial Pulse:
  - Present
  - Absent

**Left Foot:**

- Dorsalis Pedis Pulse:
    - Present
    - Absent
  
  - Posterior Tibial Pulse:
    - Present
    - Absent
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**Footwear Inspection**

- Suitable fit (no tightness, adequate room for toes)
  - Adequate support and cushioning
  - No internal seams causing pressure points
  - Sole condition: \_\_\_\_\_ (e.g., worn out, intact)
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**Recommendations and Interventions:**

**Follow-up Date (if required):**