DIABETIC FOOT INFECTION

**Significant History/Findings**
- Trauma (injury), puncture wound, foreign body
- Ulceration or gangrene
- Swelling, drainage, odor
- Systemic signs: fever, chills, malaise
- Diabetes duration/control

**NON-LIMB-THREATENING INFECTION**
- ≤ 2 cm cellulitis
- Superficial ulcer
- Does NOT probe to bone
- Limited edema, inflammation
- No bone/joint involvement
- No systemic toxicity
- No significant ischemia

**LIMB-THREATENING INFECTION**
- > 2 cm cellulitis
- Edema, pain, lymphangitis
- Drainage, odor
- Probe wound for extensions
- Systemic signs: hypotension, cardiac arrhythmia (systemic toxicity)
- Ischemic changes

**DIAGNOSTICS**
- Oral temperature
- Deep wound culture from base of ulcer/wound tissue specimen if possible
- Diagnostic imaging
  - Radiographs
  - MRI, WBC or bone scan
- Vascular evaluation
- Serologic testing
  - CBC with differential
  - Blood culture
  - ESR, CRP
  - Blood glucose
  - Renal metabolic profile

**OUTPATIENT MANAGEMENT**
**TREATMENT**
- Surgical debridement of callus & ALL necrotic tissue
- Wound care - See Pathway #3
- Empiric antibiotic coverage followed by culture directed antibiotics
- Close monitoring of progress
- Hospital admission if infection progresses or wound/foot deteriorates

**CONSULTATIONS as Necessary**
- Endocrinology
- Vascular surgery
- Pediatric surgery
- Infectious disease
- Nephrology
- Cardiology
- General surgery

**HOSPITAL ADMISSION**
**TREATMENT**
- Surgical debridement of ALL necrotic tissue
- Exploration & drainage of abscess
- Surgical resection of osteomyelitis
- Open wound management
- Empiric antibiotics modified by culture directed antibiotics
- Advanced wound management
  - Negative pressure (NPWT) see Pathway #3
- Repeated wound debridement PRN
- Revascularization, as needed
- Foot-sparing reconstructive procedures
- Definitive amputation, if necessary

**OUTPATIENT CARE**
- Antibiotics
- Home wound care
- Off-loading
- Office podiatric care

**INFECTION Resolves**

**Non-Infected Ulcer**
Proceed to Pathway #3

**Open Wound/Ulcer or Healed Foot**
Proceed to Pathway #3

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