

Data Collection Form: Baseline Data

1. Participant Characteristics

Date of birth: / / Sex: Male ₁ Female ₂

Height: _____m Weight: _____kg Body mass index: _____
(kg/m²)

Smoking history: Past ₁ Current ₂ Never ₃

Living alone: Yes ₁ No ₂

Ethnicity: ₁ Indigenous Australian (Aboriginal or Torres Strait Islander)
₂ English
₃ European
₄ American
₅ African
₆ Asian
₇ Pacific Islander
₈ Other _____

Cause of ESRD: Diabetic nephropathy ₁
Hypertensive nephropathy ₂
Chronic glomerulonephritis ₃
Polycystic kidney disease ₄
Reflux nephropathy ₅
Renovascular disease ₆
Vasculitis ₇
Unknown ₈
Other _____ ₉

Dialysis treatment: Haemodialysis ₁ CAPD ₂ APD ₃

Dialysis start date: _____ Duration of dialysis (months): _____

2. Comorbidities

Diabetes: Yes ₁ No ₂

Type of diabetes: Type 1 ₁ Type 2 ₂

Date of diagnosis: _____ Duration of diabetes (months): _____

Retinopathy: Yes ₁ No ₂

Known peripheral neuropathy: Yes ₁ No ₂

Known peripheral arterial disease: Yes ₁ No ₂

Lower extremity revascularisation procedure: Yes ₁ No ₂

Hypertension (requiring medication): Yes ₁ No ₂

Dyslipidaemia: Yes ₁ No ₂

Ischaemic heart disease: Yes ₁ No ₂

Congestive cardiac failure: Yes ₁ No ₂

Cerebrovascular disease: Yes ₁ No ₂

Osteoarthritis: Yes ₁ No ₂

Inflammatory arthritis: Yes ₁ No ₂

Other _____

3. Laboratory Results

Parameter	Blood test 1	Blood test 2	Blood test 3	Average result
C-Reactive Protein (mg/L)				
Serum Albumin (g/dL)				
Total Calcium (mmol/L)				
Serum Phosphate (mmol/L)				
Parathyroid Hormone (pmol/L)				
Glycated haemoglobin (%)				
Haemoglobin (g/L)				

4. Risk Factors

4.1 History of Lower Extremity Complications

4.1.1 Past Foot Ulceration

Left foot Yes ₁ No ₂

Right foot Yes ₁ No ₂

4.1.2 Current Foot Ulceration

Left foot Yes ₁ No ₂

Right foot Yes ₁ No ₂

4.1.2.1 Location

Left Foot

- ₁ Dorsal toes
- ₂ Plantar toes, forefoot, and midfoot
- ₃ Dorsal foot
- ₄ Heel
- ₅ Multiple areas of the foot

Right Foot

- ₁ Dorsal toes
- ₂ Plantar toes, forefoot, and midfoot
- ₃ Dorsal foot
- ₄ Heel
- ₅ Multiple areas of the foot

4.1.2.2 Type

Left Foot

(Based on results of
neurovascular assessment)

- Neuropathic ₁
- Neuro-ischaemic ₂
- Ischaemic ₃
- Other ₄

Right Foot

(Based on results of
neurovascular assessment)

- Neuropathic ₁
- Neuro-ischaemic ₂
- Ischaemic ₃
- Other ₄

4.1.2.3 Duration

Left foot

Duration (months): _____

Right foot

Duration (months): _____

4.1.3 Lower Extremity Amputation (LEA)

Left lower extremity

Minor (below ankle) ₁ Major (above ankle) ₂ N/A ₃

Location of LEA: _____

Right lower extremity

Minor (below ankle) ₁ Major (above ankle) ₂ N/A ₃

Location of LEA: _____

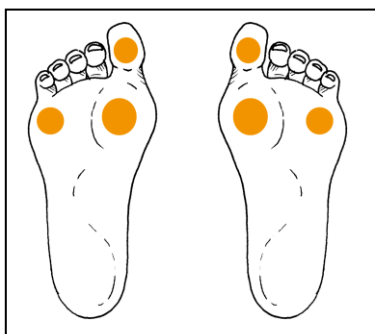
4.2 Neurological Assessment

4.2.1 Vibration Perception Threshold (Neurothesiometer)

	Trial 1 Volts (v)	Trial 2 Volts (v)	Trial 3 Volts (v)	Average Volts (v)
Left Foot				
Right Foot				

Note. Vibration perception threshold >25 V indicates peripheral neuropathy.

4.2.2 Protective Sensation (Semmes-Weinstein 5.07/10g Monofilament)



	Sites (Plantar hallux, plantar 1 st MTPJ and plantar 5 th MTPJ)
Left Foot	/3
Right Foot	/3

Note. Inability to detect the monofilament at ≥1 site(s) indicates peripheral neuropathy.

4.3 Arterial Assessment

4.3.1 Pedal Pulses

	Dorsalis Pedis	Posterior Tibial
Left Foot		
Right Foot		

Note. P= palpable, NP= not palpable. Absence of ≥ 2 pedal pulses on both feet indicates peripheral arterial disease.

4.3.2 Ankle-Brachial Pressure Index (ABPI) and 4.3.3 Toe-Brachial Pressure Index (TBPI)

	Left	Right
Toe Systolic Pressure (mmHg)		
Ankle Systolic Pressure (mmHg)		
Brachial Systolic Pressure (mmHg)		
ABPI value		
TBPI value		

Note. ABPI= ankle-brachial pressure index; TBPI= toe-brachial pressure index. $ABPI \leq 0.9$ or $TBPI \leq 0.6$ indicates peripheral arterial disease. $ABPI > 1.3$ or non-compressible arteries (i.e. > 240 mm Hg) indicates arterial calcification.

4.4 Biomechanical Assessment

4.4.1 Range of Motion

	Left Foot	Right Foot
1 st MTPJ		

Note. MTPJ= metatarsophangeal joint. Range of motion $< 65^\circ$ indicates limited joint mobility of the 1st MTPJ.

4.4.2 Foot Deformity

	Left Foot	Right Foot
Hammer/Claw Toes ₁		
HAV ₂		
Bony Prominences ₃ (e.g. prominent metatarsal heads)		
Charcot Neuroarthropathy ₄		
Other ₅ (e.g. forefoot pad atrophy, amputation)		

Note. P= present, A= absent. HAV= hallux abducto valgus. HAV graded in accordance with the Manchester Scale. No deformity= 1, mild deformity= 2, moderate deformity= 3, severe deformity= 4. Foot deformity recorded with the presence of ≥ 1 foot deformities.

4.4.3 Plantar Pressures

Left foot

Trial: 1 2 3

Right foot

Trial: 1 2 3

4.5 Footwear Assessment

4.5.1 Fit

Length: Good (thumbs width) ₁ Too short (<½ thumb) ₂ Too long (>1½ thumb) ₃
(palpation)

Width: Good ₁ Too narrow ₂ Too wide ₃
(grasp test)

Depth: Good ₁ Too shallow ₂

4.5.2 General Features

Fixation: None ₁ Laces ₂ Velcro ₃
Straps/buckles ₄ Zips ₅

Forefoot Sole Flexion Point:
at level of MTPJs ₁ proximal to 1st MTPJ ₂ distal to 1st MTPJ ₃

Heel Height: 0-2.5cm ₁ 2.6-5.0cm ₂ >5.0cm ₃

Materials: Leather ₁ Synthetic ₂ Mesh ₃
(upper)
Other₄ _____

4.5.3 Type

Footwear Style:

Walking shoe ₁ Ugg-boot ₆ Court shoe ₁₁
Boot ₂ Backless slipper ₇ Moccasin ₁₂
Slipper ₃ Surgical/bespoke ₈ Thong/flip-flop ₁₃
Sandal ₄ Oxford shoe ₉ Mule ₁₄
Athletic shoe ₅ High heel ₁₀ Other₁₅ _____

4.5.4 Condition

Age of Shoe: 0-6 months ₁ 6-12 months ₂ >12 months ₃

4.6 Dermatological Assessment

4.6.1 Skin Pathology

	Left foot	Right foot
Hyperkeratosis₁		
Heloma Dura₂		
Uraemic Pruritus₃		
Xerosis₄		
Calciphylaxis₅		
Other₆		

Note. P= present, A= absent. Skin pathology recorded with the presence of ≥1 skin pathologies. Xerosis graded in accordance with the Xerosis Severity Scale. Mild= 1-2, moderate= 3-4, severe= 5-6.

4.6.2 Nail Pathology

	Left foot	Right foot
Half-and-Half Nail₁		
Absent Lunula₂		
Onychomycosis₃		
Onychocryptosis₄		
Onychia₅		
Other₆		

Note. P= present, A= absent. Nail pathology recorded with the presence of ≥1 nail pathologies.

4.7 Foot Health Care Behaviours/Podiatry Attendance

4.7.1 Provision of Foot Care

Daily Foot Care

Inspection of Feet: Yes ₁ No ₂

Other

Avoid Barefoot Walking: Yes ₁ No ₂

Flexibility to Reach Feet: Yes ₁ No ₂

Treatment of nails and skin lesions: Yes ₁ No ₂

4.7.2 Podiatry Attendance

Seen a Podiatrist: Yes ₁ No ₂

Number of times attended a podiatrist in the last 12 months _____