

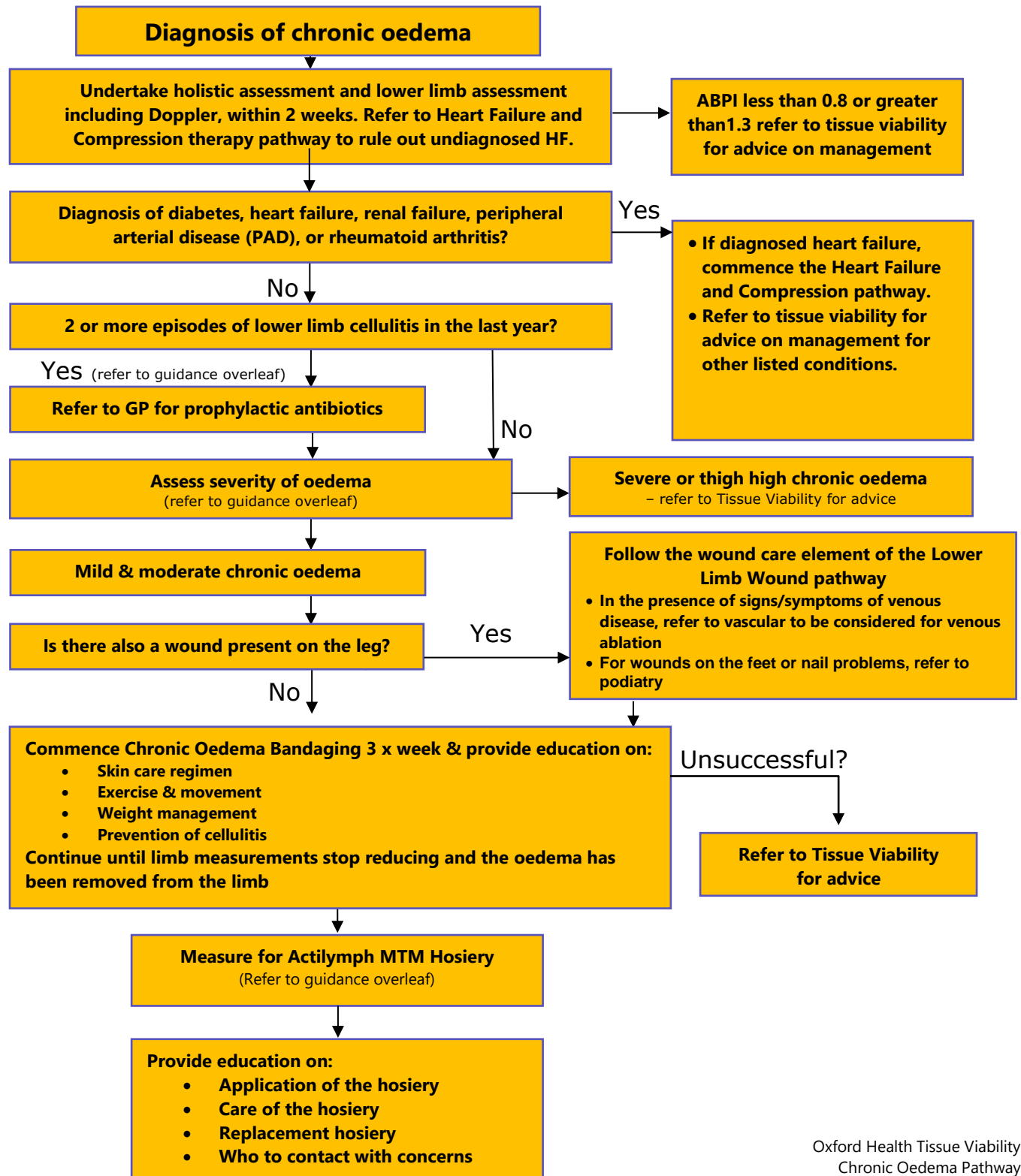
## Lower Limb Chronic Oedema Pathway

(Please refer to the guidance on the reverse of this pathway algorithm)

This pathway is for adults with uncomplicated lower limb chronic oedema, being seen by Primary & Community nursing services within Oxfordshire.

### EXCLUSIONS:

- New oedema present for less than 3 months – refer to GP for medical review
- Oedema to the genitals, sacrum and waist – refer to GP for medical review
- Ankle-brachial pressure index (ABPI) <0.6 – refer to GP for urgent referral to vascular team



## Guidance for lower limb chronic oedema pathway

Supporting documentation can be accessed/ downloaded from the tissue viability website <http://www.oxfordhealth.nhs.uk/tissue-viability>

No	Action to be taken by the clinician undertaking the assessment	Documents/Guidance/ tools to support action
1	<p>Assess the legs for signs of chronic oedema:</p> <ul style="list-style-type: none"> <li>Swelling present for more than 3 months</li> <li>Swelling pitting or hard</li> <li>Unresolved by elevation or diuretics</li> <li>Test for stemmer sign by pinching skin at the base of the 2<sup>nd</sup> toe. If unable to raise a skin fold this is a positive stemmer sign, diagnostic of chronic oedema</li> </ul> <p>Check for swelling to the genitals, sacrum and waist - If present refer to GP for an urgent medical review and investigation. If rapid onset with unknown cause refer to GP for urgent assessment. If either present do not place on pathway until medical assessment performed.</p>	<ul style="list-style-type: none"> <li>Chronic Oedema Signs and Symptoms Tool (<b>CHROSS Checker Tool</b>) – available on the TV Website <a href="http://www.oxfordhealth.nhs.uk/tissue-viability">www.oxfordhealth.nhs.uk/tissue-viability</a></li> <li>Lower limb assessment form</li> </ul>
2	<p>Undertake holistic assessment to identify cause of oedema and co-morbidities.</p> <p>Assess whether patient has any risk factors or previous diagnosis of heart failure (refer to Heart Failure &amp; Compression Therapy Pathway).</p> <p>If patient has diabetes, peripheral arterial disease (PAD), rheumatoid arthritis or renal disease stage 4 or above refer to tissue viability for advice prior to commencing the pathway.</p>	<ul style="list-style-type: none"> <li>Patients medical summary</li> <li>Nursing assessment</li> <li>Wound assessment and care plan form</li> <li>Tissue Viability referral form</li> <li>Heart Failure &amp; Compression Therapy Pathway</li> </ul>
3	<p>Undertake holistic vascular assessment (History, symptoms &amp; clinical examination) including doppler assessment and identification of pedal pulse sounds – mono/bi or tri-phasic. Ensure ABPI is between 0.8 – 1.3. If you are unable to record dopplers OR ABPI &lt;0.8 or &gt;1.3, refer to tissue viability with vascular assessment information for advice prior to proceeding.</p> <p>ABPI &lt;0.6 also refer to GP for urgent vascular referral. Do not apply compression.</p> <p><b>NB. Consider falsely elevated readings in elderly pts, particularly with diabetes &amp; renal disease.</b></p>	<ul style="list-style-type: none"> <li>Guide to carrying out a Doppler</li> <li>Doppler assessment &amp; recording form</li> <li>Lower limb assessment form</li> <li>Tissue Viability referral form</li> <li>Vascular referral form</li> </ul>
4	<p>Assess severity of symptoms:</p> <ul style="list-style-type: none"> <li>Mild – soft pitting oedema / below knee</li> <li>Moderate – oedema may be harder with some skin changes, ulceration, lymphorrhoea, hyperkeratosis, papillomatosis with only moderate limb distortion / below knee</li> <li>Severe – significant limb distortion and skin folds, and/or knee/thigh oedema</li> </ul> <p><b>For severe symptoms or misshapen knee/thigh oedema refer to Tissue Viability for advice and appropriate compression or onward referral to the Lymphoedema Clinic if necessary.</b></p> <p>For mild to moderate symptoms proceed with pathway.</p>	<ul style="list-style-type: none"> <li>CHROSS checker tool</li> <li>Tissue Viability referral form</li> <li>Wound care formulary (Compression section)</li> </ul>
5	<p>Have there been 2 or more episodes of lower limb cellulitis in the last year?</p> <p>If yes, refer to GP for prophylactic antibiotic therapy (SCAN Guidelines, 2021; BLS Consensus Document on the Management of Cellulitis in Lymphoedema 2<sup>nd</sup> edition)</p>	<ul style="list-style-type: none"> <li><a href="https://clinox.info/local-guidelines-and-pathways/antimicrobial-guidelines-adults/58134">https://clinox.info/local-guidelines-and-pathways/antimicrobial-guidelines-adults/58134</a></li> <li><a href="#">BLS-2016-Consensus-Document-on-the-Management-of-Cellulitis-in-Lymphoedema-2nd-edn.pdf</a></li> </ul>
6	<p>Complete baseline limb measurements.</p>	<ul style="list-style-type: none"> <li>Lower limb measurement form</li> <li>Wound assessment and care plan form</li> </ul>

7	<p>Is ulceration present on the leg?</p> <ul style="list-style-type: none"> <li>Follow the wound management advice on the Oxfordshire Lower Limb wound pathway. BUT continue with this pathway for all other aspects of care.</li> <li>In presence of signs and symptoms of venous disease, refer to vascular to be considered for venous ablation.</li> <li>If wound below malleolus or problems with nails in the presence of positive stemmer sign, refer to podiatry.</li> </ul>	<ul style="list-style-type: none"> <li>Lower limb wound pathway</li> <li>Wound assessment and care plan form</li> <li>Guide to measuring wound surface area</li> <li>Vascular referral form</li> <li>Podiatry referral form</li> </ul>
8	<p>Devise skin care plan - use total emollient therapy avoiding soap and using soap substitutes. Limbs should be bowl washed as per Best Practice Statement for lower limb cleansing. Assess for hyperkeratosis, varicose eczema and fungal infections. Refer to GP and/or tissue viability for advice if required.</p>	<ul style="list-style-type: none"> <li>Emollient formulary</li> <li>Best Practice Statement; Care of the Older Person's skin (2012)</li> <li>Varicose eczema pathway</li> <li>Tissue Viability referral form</li> <li>OHFT BPS for Lower Limb Cleansing</li> </ul>
9	<p>Shape the limb with wadding to ensure an even graduation and apply Multi-Layer Lymphoedema Bandaging with Actico as per product guidance. Replace 3 x week as the bandage will move as limb size reduces.</p> <p>If oedema present in toes, measure for Haddenham Microfine toecaps. If toes are wet, consider stump bandaging with Actico</p> <p><b>NB. If non-concordant with bandaging or difficulties applying the bandaging – refer to TV for further advice and consideration of alternative forms of compression.</b></p>	<ul style="list-style-type: none"> <li>Actico product guide</li> <li>Actico MLLB video on L&amp;R website</li> <li>Tissue Viability referral form</li> <li>Wound care formulary (Compression section)</li> <li>Coban 2 application Guides on 3M website</li> <li>JUZO ACS Light wrap application video on JUZO website</li> <li>Haddenham website for Microfine toecaps measurement form</li> <li>TV website video for stump bandaging</li> </ul>
10	<p>Provide patient education on:</p> <ul style="list-style-type: none"> <li>skin care regimen</li> <li>exercise &amp; movement</li> <li>Weight management</li> <li>Monitoring for and prevention of cellulitis</li> </ul>	<ul style="list-style-type: none"> <li>Chronic Oedema Assessment and Management Presentations</li> <li>Oxfordshire Hosiery Booklet</li> <li>L&amp;R website videos</li> <li>OHFT Looking after your legs leaflet</li> </ul>
11	<p>Re-measure limb each time bandaging is changed. Once the limb has stopped reducing in size and has been decongested of the oedema, measure for Actilymph hosiery. If the oedema was moderate-severe, or a moderate-severe amount of oedema has shifted, or the measurements are outside the standard size range, made-to-measure Actilymph hosiery will be required. Refer to CHROSS checker tool and Hosiery formulary to select hosiery.</p> <p><b>NB. If you are unsure of what compression garments to order or require help with interpreting measurements, please refer to TV.</b></p>	<ul style="list-style-type: none"> <li>CHROSS checker tool</li> <li>Lower limb measurement form</li> <li>Oxfordshire Hosiery Formulary</li> <li>Oxfordshire Hosiery Booklet</li> <li>Wound care formulary (Compression section)</li> <li>Actilymph/MTM measuring guide &amp; video on L&amp;R website</li> <li>Tissue Viability referral form</li> </ul>
12	<p>Provide patient education on:</p> <ul style="list-style-type: none"> <li>Hosiery application</li> <li>Care of hosiery</li> <li>Replacement hosiery</li> <li>Who to contact with any concerns</li> </ul>	<ul style="list-style-type: none"> <li>Oxfordshire Hosiery Booklet</li> <li>OHFT Looking after your legs leaflet</li> <li>District Nursing Services Patient Information Leaflet</li> </ul>