

# Immediate and Necessary Lower Limb Care

🛑 Do not use this pathway if there is:

- a. Any red flags    b. Excessive exudate    c. Abnormal leg shape    d. Deep pitting oedema or skin folds    e. Impaired sensation

## IDENTIFY

Legs at risk – examine for signs of early venous disease  
Those who have a lower limb wound at risk of non-healing due to underlying venous disease  
If there a clear cause for the wound and / or swelling  
If the limb is an appropriate build and shape  
If there is intact sensation

### RED FLAGS

- Signs of acute wound infection
- Signs of Sepsis
- Suspected limb threatening ischaemia
- Suspected DVT
- Bleeding varicose veins
- Suspected skin cancer

Use  
a wound  
assessment  
framework

## IMMEDIATE

Clean the wound as required and apply emollient to peri-wound skin.  
  
Apply simple non adherent dressing (as per local formulary) taking into account exudate levels

## NECESSARY

Measure and apply mild compression, BS class 1 (14–17 mmHg) if NO red flags  
  
Prescribe according to local formulary  
  
Provide after care advice on when to wear hosiery, for how long and how to launder appropriately

### A person presenting with a leg wound

- A person presenting with a leg wound should receive a full assessment (including an ankle-brachial pressure index within 14 days of the original presentation).
- Consider onward referrals according to local policy:
  - Local leg ulcer clinic / community leg club
  - Vascular specialist for diagnosis of venous disease and/or arterial disease and possible vascular intervention
  - Lymphoedema specialist
  - Dermatology
  - Tissue Viability Nurse