

Lower Limb Pathway

PATIENT PRESENTATION

Patient presents with lower limb wound and/or oedema.

LOWER LIMB ASSESSMENT

Follow and complete the leg ulcer (LU) assessment chart:

Immediate care:

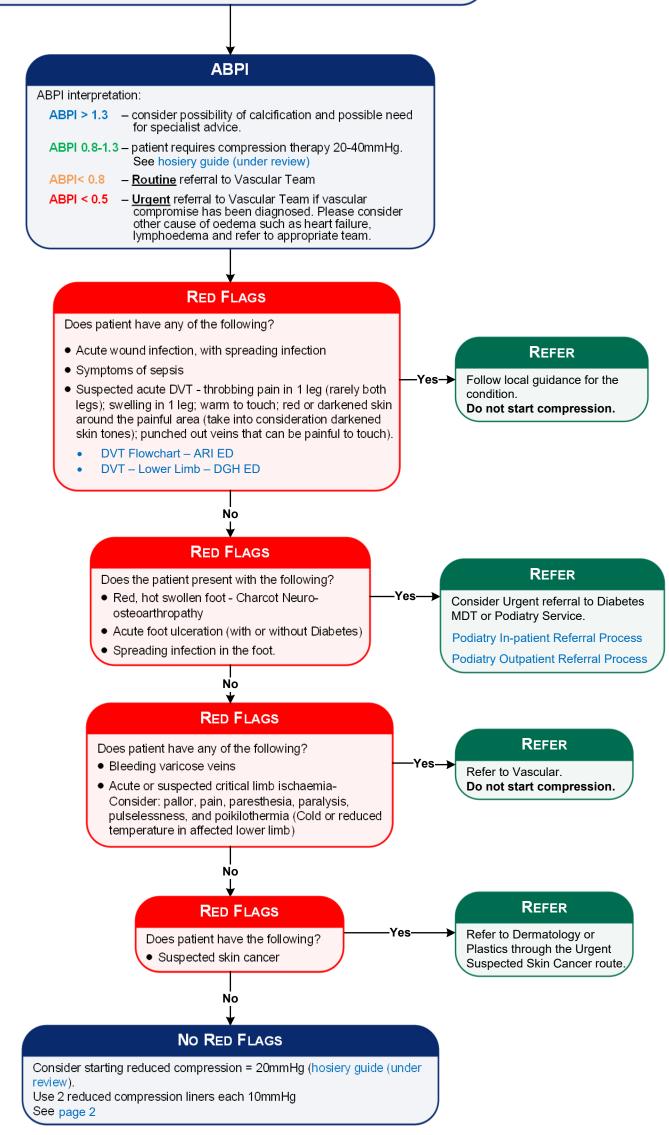
- Clean wound with appropriate solution;
- Debride according to scope of practice;
- Wound swab only if suspected or spreading infection (follow the Scottish Ropper Ladder)
- Holistic wound assessment & management (9SWAT);
- Skin care before applying bandage, hosiery or garment.

Skin Care:

- Carry out basic lower limb skin care on every patient.
- Either wash in the shower or use a basin with a clean, disposable liner.
- Cleanse with a bland non-perfumed soap substitute or emollient.
- Gentle removal of dry skin, plaques and wound slough and debris may require a
- debridement
 Include hyperlink to debridement pathway.
- Dry fully then apply an appropriate moisturiser to the whole leg and allow to absorb prior to application of dressings.

In the presence of a Skin Tear:

- Follow Skin Tear Management Pathway.
- If not healed after 2 weeks, follow LU assessment chart and complete the lower limb assessment, including ABPI.



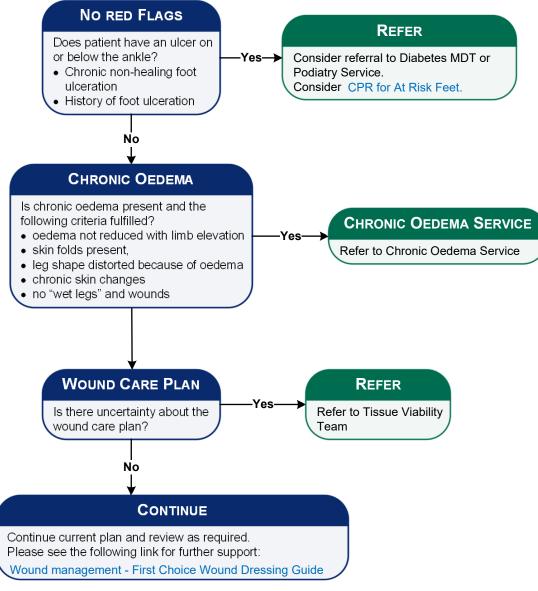
😯 Realistic Medicine – Shared decision making Benefits of treatment Risks of treatment Alternative treatments No treatment										
Version – 1	Title – Lower Limb Pathway			Department	FINAL					
Creator – Tissue Viability Team		Lead – Ines Pereira	Last Review – 22 April 2025		Next Review – 22 April 2027					

All guidance will routinely be reviewed every 24 months from the "last review" date. Information contained in this document is intended as guidance of best practice.

Grampian Guidance



Lower Limb Pathway



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