## A pilot study to facilitate and refine the referral pathways of patients attending the Emergency Department with a 'high risk' foot complaint.

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Aim	The aim of this pilot study was to facilitate and refine the referral pathway for patients seen in the Lyell McEwin Hospital Emergency Department with a foot complaint, who have been identified as at 'high risk' for foot amputation
Methodology	The Diabetes Interdisciplinary Foot Team (including Podiatrists, Endocrine Physicians, Vascular Surgeons, Diabetes Educators and Hospital at Home) is an essential hospital unit which can facilitate the appropriate and timely management of this specialised group of patients to manage and prevent LEA. This team provided an 'on call' service with the use of multimedia, to facilitate the safe, effective treatment of patients presenting with foot complaints to the Emergency Department. Education sessions were provided to all staff involved.
Results	Over six months 40 patients have been referred. The main reason for referral was for infection; however there was a wide range of issues including burns, ingrown nails, charcot, ischemia and general injuries/trauma. Of the 40 patients, 19 (47.5%) were admitted directly to the Lyell McEwin Hospital for treatment (admission rate of 60%). The main reason for admission was infection requiring IV antibiotics (45%) with 6 (15%) patients requiring urgent amputation or revascularization.
Conclusion	This pilot highlights the high number of patients attending the Emergency Department with high risk foot complaints. A large number of patients presented late on in the disease process.

Prevalence and risk factors for nontraumatic amputation of lower limbs in subjects with end stage renal failure on hemodialysis in North Queensland. **Rajit A. Gilhotra<sup>1</sup>**, Usman H. Malabu<sup>1</sup>, Valli Manickam<sup>2</sup>, George Kan<sup>2</sup> & Kunwarjit S. Sangla<sup>1</sup>

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Aim	The aims of the study was to document prevalence and identify risk factors of non-traumatic lower limb amputations in subjects treated with hemodialysis for chronic renal failure in North Queensland.
Methodology	All subjects diagnosed to have ESRF who attended the Townsville Regional Hospital Dialysis Centre from 01/01/2008 to 31/12/2012 were retrospectively studied. Stepwise multivariable logistic regression analysis was used to identify variables most strongly associated with amputation in the study population.
Results	Variables that could be related to the risk of having peripheral arterial disease will be examined such as demographics, past medical history and analytical parameters such as HBA1c, total cholesterol, triglycerides, hematocrit, calcium, phosphorus, PTH, and albumin. Details of the result will be presented at the conference. The importance of identifying risk factors for preventing amputation in the study population cannot be overemphasized. Conclusion will be derived based on the strength of the association between limb loss and the determined variables listed above.