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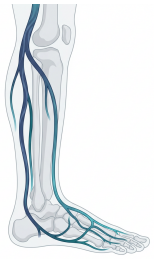
WIGLEY FEET

PATIENT EDUCATION · DIABETIC FOOT & WOUND CARE

Diabetic Foot Care

Diabetes can affect the feet in two major ways: nerve damage (neuropathy) that reduces the ability to feel injury, and reduced circulation that slows healing. Together, these can turn a small blister or callus into a serious wound without a patient ever feeling it. That's why regular professional foot care is one of the most effective ways to prevent diabetic foot ulcers and amputation. Comprehensive diabetic foot care includes routine exams, safe nail and callus care, daily self-check education, and protective footwear.



For educational illustration only.

At a Glance

Focus area	Diabetic Foot & Wound Care
Goal of care	Diabetes can affect the feet in two major ways: nerve damage (neuropathy) that reduces the ability to feel injury, and reduced circulation that slows healing.
Where it's provided	In our office or a surgical center, based on your evaluation and what is clinically appropriate.
Your next step	A consultation with Dr. Stephen Wigley IV to review your symptoms and options.

Who May Benefit

- Every patient with diabetes — even without current foot problems
- Patients with neuropathy, calluses, or foot deformities
- Anyone with a history of foot ulcers or partial amputation

When to Seek Care

- Any cut, blister, redness, or swelling — even painless ones
- Numbness, burning, or tingling in the feet
- Thick calluses, ingrown nails, or nail changes
- A wound that isn't visibly improving within days (urgent)

How We Evaluate

- Comprehensive diabetic foot exam — skin, nails, sensation, circulation, and structure
- Neuropathy screening and vascular assessment
- Risk-based care planning and footwear evaluation

Treatment Options

- Routine diabetic foot exams and preventive care
- Professional nail and callus care (never self-treat)
- Therapeutic diabetic shoes and inserts for eligible patients
- Prompt wound care and coordinated vascular evaluation when needed

What to Expect

1. A risk assessment and personalized prevention plan
2. Ongoing routine care that protects your feet
3. Fast access to wound care if a problem develops

Common Questions

How often should a person with diabetes see a podiatrist?

At minimum once a year for a comprehensive exam — more often if you have neuropathy, deformities, calluses, or a history of ulcers. Your risk level sets the schedule.

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Why can't I trim my own nails or calluses?

With reduced sensation, a small slip can create a wound you may not feel — and with slowed healing, small wounds can become serious. Professional care removes that risk.

Sources & Further Reading

- American College of Foot & Ankle Surgeons — FootHealthFacts.org
- American Podiatric Medical Association — apma.org
- American Diabetes Association — diabetes.org

Questions? Call Wigley Feet at (305) 895-9528 to schedule an evaluation. New patients can also request an appointment at www.wigleyfeet.com.