

*Due to the complexity of diabetic foot syndrome (DFS), successful diagnosis and therapy require an early interprofessional treatment approach. The interprofessional working group on DFS (WG DFS) of the QualiCCare association offers a national practice guideline and national indication-specific practice recommendations for the optimal care of infectious, angiopathic, and/or neuropathic diabetic foot ulcers, as well as Charcot arthropathy for Switzerland, based on the guidelines of the International Working Group on the Diabetic Foot (IWGDF) and current literature.*

*According to the guidelines of WG DFS, patients at medium risk must be treated by a local interprofessional network with DFS specialists. Patients at high risk must be treated immediately by an interprofessional foot team or center.*

*Recognition of interprofessional foot centers and/or networks is not regulated by law, but appropriate quality requirements and standards are necessary to ensure high-quality care for patients with DFS.*

The AG DFS recognizes a local **interprofessional network** according to the following criteria:

**1) The interprofessional network includes the following disciplines and professionals with DFS expertise:**

- Diabetology
- Surgery or orthopedics
- Infectiology
- Diagnostic angiology
- Interventional angiology or radiology or vascular Surgery
- Orthopedic shoemaker master
- Orthopedic technician
- Specialized wound care expert (recognized by SAfW)
- Podiatry HF
- General practitioner or primary care Physician

**2) Interprofessional case discussions on offloading, infectious diseases, angiology, and wound management are conducted with the participation of at least two different medical specialties and at least one non-medical profession, either physically with the patient or online.**

**3) Written cooperation agreements listing the participants in the network and the responsible contact person of the network are available.**

**4) The following diagnostics and initiation of therapy are available within 72 hours:**

- Angiological assessment
- Infectious disease evaluation
- Debridement
- Offloading

**5) The procedure for relapse prevention and aftercare is ensured by the network:**

- The treatment plan/recommendation will be documented and communicated to the general practitioner
- Assessment of perfusion at least once a year or more frequently depending on the intervention performed or in case of new clinical aspects.
- Regular and timely reevaluation by orthopedic shoemakers/masters/technicians.

**6) Documentation/photo documentation available to all professionals within the network.**

Wound documentation at initial contact or following measures (e.g., debridement/amputation/revascularization/antibiotic therapy) should be systematic, structured, and objective, following intervals according to IWGDF guidelines.

**7) Guidelines adherence**

Adherence to the «Practice Guideline for Optimal Treatment of Acute Diabetic Foot Syndrome and Foot Ulcer (DFS/DFU) ([DE](#), [FR](#), [IT](#), [EN](#)) » as well as to indication-specific practice

recommendations (Charcot Foot [DE](#), [FR](#), [EN](#) / Peripheral Arterial Disease [DE](#), [FR](#), [EN](#) / Pressure Offloading [DE](#), [FR](#), [EN](#) / Diabetic Foot Infection [DE](#), [FR](#), [EN](#)) of the QualiCCare Working Group DFS.

**8) The foot care team attends specialty-specific training on DFS. Confirmations are verifiable.**

## The DFS Working Group recognizes **interprofessional footcare centres** according to the following criteria:

**1) The interprofessional foot centre includes the following disciplines and professionals with DFS expertise, of whom at least 3 can simultaneously care for DFS patients on-site:**

- Diabetology
- Vascular surgery
- Surgery or orthopaedics
- Infectiology
- Diagnostic angiology
- Interventional angiology or radiology or vascular surgery
- Orthopaedic shoemaker master
- Orthopaedic technician
- Specialized wound care expert (recognized by SAFW)
- Podiatry HF

**Note:** The general practitioner or primary care physician will be informed.

**2) The interprofessional foot centre includes the following disciplines and professionals with DFS expertise, of whom at least 3 can provide emergency care for DFS patients 24/7**

- Diabetology
- Vascular surgery
- Surgery or orthopaedics
- Infectiology
- Diagnostic angiology
- Interventional angiology or radiology or vascular surgery

**3) Interprofessional case discussions on offloading, infectiology, angiology, and wound management are conducted involving at least two different medical specialties and at least one non-medical profession, either physically with the patient or online.**

**4) Written cooperation agreements with external service providers are available and can be viewed upon request. A contact person is designated.**

**5) The following interventions are feasible 24/7:**

- Revascularization
- Infection therapy
- Diabetes therapy
- Debridement/Amputation
- Offloading

**6) The procedure for relapse prevention and aftercare is ensured by the foot centre.**

- The treatment plan/recommendation will be documented and communicated to the general practitioner.

- Perfusion assessment will be conducted at least once a year, or more frequently depending on the intervention performed or new clinical aspects.
- Regular and timely re-evaluation by orthopaedic shoemakers/masters/technicians will be conducted.

**7) Documentation/photo-documentation is available for all professionals in the foot centre.**

Wound documentation at initial contact or following measures (e.g., debridement/amputation/revascularization/antibiotic therapy) should be systematic, structured, and objective, following intervals according to IWGDF guidelines.

**8) Equipment of the foot centre:**

Acute hospitalization possible.

**9) Guidelines adherence**

Adherence to the «Practice Guideline for Optimal Treatment of Acute Diabetic Foot Syndrome and Foot Ulcer (DFS/DFU) ([DE](#), [FR](#), [IT](#), [EN](#)) » as well as to indication-specific practice recommendations (Charcot Foot [DE](#), [FR](#), [EN](#) / Peripheral Arterial Disease [DE](#), [FR](#), [EN](#) / Pressure Offloading [DE](#), [FR](#), [EN](#) / Diabetic Foot Infection [DE](#), [FR](#), [EN](#)) of the QualiCCare Working Group DFS.

**10) The foot care team attends specialty-specific training on DFS. Confirmations are verifiable.**