

# Person—peripheral vascular disease indicator (foot), code N

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# Person—peripheral vascular disease indicator (foot), code N

## Identifying and definitional attributes

<b>Metadata item type:</b>	Data Element
<b>Short name:</b>	Peripheral vascular disease in feet (status)
<b>METEOR identifier:</b>	302459
<b>Registration status:</b>	<a href="#">Health!</a> , Standard 21/09/2005
<b>Definition:</b>	Whether peripheral vascular disease is present in either foot, as represented by a code.

## Data element concept attributes

### Identifying and definitional attributes

<b>Data element concept:</b>	<a href="#">Person—peripheral vascular disease indicator (foot)</a>
<b>METEOR identifier:</b>	269522
<b>Registration status:</b>	<a href="#">Health!</a> , Standard 01/03/2005
<b>Definition:</b>	The outcome of assessment for the presence of peripheral vascular disease in either foot.
<b>Object class:</b>	<a href="#">Person</a>
<b>Property:</b>	<a href="#">Peripheral vascular disease indicator</a>

## Value domain attributes

### Identifying and definitional attributes

<b>Value domain:</b>	<a href="#">Yes/no/not stated/inadequately described code N</a>
<b>METEOR identifier:</b>	301747
<b>Registration status:</b>	<a href="#">Health!</a> , Standard 21/09/2005 <a href="#">Housing assistance</a> , Standard 10/02/2006 <a href="#">Community Services (retired)</a> , Standard 14/02/2006 <a href="#">Early Childhood</a> , Standard 21/05/2010 <a href="#">Homelessness</a> , Standard 23/08/2010 <a href="#">Independent Hospital Pricing Authority</a> , Standard 01/11/2012 <a href="#">Disability</a> , Standard 07/10/2014 <a href="#">Indigenous</a> , Standard 13/03/2015 <a href="#">Children and Families</a> , Standard 22/11/2016
<b>Definition:</b>	A code set representing 'yes', 'no' and 'not stated/inadequately described'.

## Representational attributes

<b>Representation class:</b>	Code						
<b>Data type:</b>	Number						
<b>Format:</b>	N						
<b>Maximum character length:</b>	1						
<b>Permissible values:</b>	<table><thead><tr><th>Value</th><th>Meaning</th></tr></thead><tbody><tr><td>1</td><td>Yes</td></tr><tr><td>2</td><td>No</td></tr></tbody></table>	Value	Meaning	1	Yes	2	No
Value	Meaning						
1	Yes						
2	No						

Supplementary values: 9 Not stated/inadequately described

## Collection and usage attributes

**Guide for use:** CODE 9 Not stated/inadequately described  
This code is not for use in primary data collections.

## Data element attributes

### Collection and usage attributes

**Guide for use:** CODE 1 Yes  
Record if peripheral vascular disease is present in either foot.  
CODE 2 No  
Record if peripheral vascular disease is not present in either foot.

**Collection methods:** If it is mild, peripheral vascular disease can be completely without symptoms. However, compromised blood supply in the long term could cause claudication (pain in the calf after walking for a distance or up an incline or stairs), rest pain or vascular ulceration.

Physical examination is necessary to assess the peripheral vascular circulation. Purplish colour and cold temperature of feet are indications to suspect that the circulation may be impaired.

Palpate pulses:

The simplest method to estimate blood flow and to detect ischaemia to the lower extremities is palpation of the foot pulses (posterior tibial and dorsalis pedis arteries) in both feet. Note whether pulses are present or absent. If pulses in the foot can be clearly felt, the risk of foot ulceration due to vascular disease is small.

Test capillary return:

A helpful confirmation sign of arterial insufficiency is pallor of the involved feet after 1 - 2 min of elevation if venous filling time is delayed beyond the normal limit of 15 sec.

Doppler probe:

If pulses cannot be palpated, apply a small hand-held Doppler, placed over the dorsalis pedis or posterior tibial arteries to detect pulses, quantify the vascular supply and listen to the quality of the signal.

When the foot pulses are very weak or not palpable, the risk assessment could be completed by measuring the ankle brachial index (ankle pressure/ brachial pressure). Normal ankle brachial index is 0.9 - 1.2. An ankle brachial index less than 0.6 indicates compromised peripheral circulation.

### Source and reference attributes

**Submitting organisation:** National Diabetes Data Working Group  
**Origin:** National Diabetes Outcomes Quality Review Initiative (NDOQRIN) data dictionary.

### Relational attributes

**Related metadata references:** Supersedes [Person—peripheral vascular disease status \(foot\), code N Health!](#), Superseded 21/09/2005

**Implementation in Data Set Specifications:** [Diabetes \(clinical\) NBPDS Health, Standard 21/09/2005](#)

***DSS specific information:***

Peripheral vascular disease is the leading cause of occlusion of blood vessels of the extremities with increasing prevalence in individuals with hypertension, hypercholesterolemia and diabetes mellitus, and in cigarette smokers. Peripheral vascular disease is estimated to occur 11 times more frequently and develop about 10 years earlier in people with diabetes.

Presence of symptomatic peripheral vascular disease requires an interdisciplinary approach including a vascular surgeon, an endocrinologist or physician specialising in diabetes care.

References:

*Foot Examination - an interactive guide; Australian Prescriber*