**Does wound severity predict time to presentation?**

**Background and aims**

The Integrated Diabetes Foot Care Pathway promotes timely referral for people with diabetes-related foot ulceration (DFU) to an interdisciplinary High Risk Foot Service (iHRFS). This audit explores time to presentation (TTP) to an iHRFS to determine its association with SINBAD score and ulcer depth, healing rate and outcomes, and referral source.

**Methods**

Retrospective audit of Australian Diabetes Foot Registry data for RPAH Diabetes Centre iHRFS, for DFU presenting between February 2021 and April 2023. These were grouped by TTP; TTP < 7 days (Rapid), 8- 13 days (Short), 14-28 days (Medium), and greater than 28 days (Long). Descriptive statistics were summarised for each cohort.

**Results**

296 DFU were included. The median TTP in days was 4 rapid (IQR 1-6), short 10 (IQR 9-12), medium 21 (IQR 16-22) and 60.5 (IQR 36-121.5) for the long group. There was no statistically significant difference in ulcer severity between groups.The proportion of SINBAD score of 3 or more appears similar amongst groups. The median time to healing was 74.5 days for rapid (8-406), short 44 (14-258), medium 71.5 (7-420) and long 77 (0-693). Percentage of ulcers healed at 12 weeks was 42.2% rapid, 64.5% short, 47.3% medium and 39.8% long. General practitioners were the predominant referrer (32-40%), except the short group which were podiatrists (48%).

**Conclusions**

TTP over 28 days is common*.* In our service most patients are seen within 3 days of referral, longer TTP may reflect referrer & patient related delays. Notably, a smaller proportion of deep ulcers presented in the short TTP group. The longer healing time and lower percentage of ulcers healed at 12 weeks in the delayed presentation group may suggest the impact of wound chronicity. Those presenting after 28 days with longer wound duration is a risk factor for poorer healing outcomes in this cohort which is consistent other reports.