

Community Treatment and Care Services

Automated Brachial Pressure Index (ABPI/Doppler) Service Specification

OVERVIEW

CTACS offer an ABPI (doppler) service to help support clinicians in the diagnosis and management of chronic diseases.

REFERRAL PROCESS

Referral is by clinician only via a referral form which must be completed in full and sent in word format into CTACS mailbox. The referral form can be uploaded to Vision correspondence to support clinicians refer more efficiently into service.

Referring clinicians should advise patients at point of referral that they will be added to a waiting list and the service will be in touch when an appointment becomes available.

PLEASE NOTE: This service is for routine referrals only and we do not accept urgent referrals.



INCLUSION CRITERIA FOR ABPI REFERRAL

The following indications for referral to CTACS:

- Where there is diagnostic uncertainty of Peripheral Arterial Disease and ABPI would support diagnosis and management decisions. Please note ABPI measurement is not routinely required in the presence of a convincing history and clinical examination as outlined on Refhelp. <u>Intermittent Claudication – RefHelp</u> (nhslothian.scot)
- As part of assessment and management of leg ulcer/wound. <u>Ulcer Leg and Foot –</u> <u>RefHelp (nhslothian.scot)</u>
- When considering compression hosiery as part of management of venous skin changes
- When repeat ABPI and leg remeasurement is required to support ongoing use of compression hosiery – please note due to service pressures this should not be requested more than once in a 12-month period.



EXCLUSION

- Lymphoedema refer to relevant service Lymphoedema/Chronic Oedema RefHelp (nhslothian.scot)
- Repeat Referrals early than 12 months after previous ABPI.
- Requests for CTACS to provide recommendations on compression hosiery
- When class 1 compression is being considered ABPI is not required for this purpose.
- Patent is housebound
- Patient is medical or physically unsuitable to tolerate procedure (please email clinical inbox if there is any uncertainty about a specific patient scenario and the clinical team can advise)



PROCESS

The CTACS Nursing team will (depending on the referral details) see the patient and undertake either:

ABPI Only

Or

ABPI + Leg measurements

Correspondence regarding the results/interpretation and measurements (if requested) will be returned to the requesting clinician via Trak correspondence directly into DOCMAN (as per other outpatient/discharge processes).

Please Note:

Whilst ABPI is an important part of the assessment process it is only a part of the overall holistic assessment of a patient and should not be used in isolation or as a sole diagnostic tool to base decisions. It is the responsibility of the referring clinician to make further decisions on management including any prescribing decisions following return of results. CTACS are unable to offer prescribing recommendations on compression hosiery, other than for those patients currently being managed within CTACS on a wound management pathway (see below).

The CTACS team will undertake ABPI to support care plans around wound and leg ulcer management for individuals in their care.

Correspondence regarding the results/interpretation and measurements and any request for compressions hosiery and equipment will be returned to the requesting clinician via Trak correspondence directly into DOCMAN (as per other outpatient/discharge processes).