

CLTI Patient Record

Record ID

If this is an elective admission, the patient has been consented

- Yes
 No
 N/A (emergency admission)

Local patient ID

(At the hospital of intervention)

Pathway

- Presentation and intervention within one hospital
 Presentation and intervention at different hospitals

Hospital - first vascular assessment

- Addenbrookes' Hospital
 Aintree University Hospital
 Cambridge University Hospital
 Cheltenham General Hospital
 Dorset County Hospital
 Glenfield Hospital
 Heartlands Hospital
 Hull Royal Infirmary
 New Cross Hospital
 Queen Elizabeth Hospital
 Queen Elizabeth, King's Lynn
 Peterborough City Hospital
 Royal Bournemouth Hospital
 Royal Liverpool University Hospital
 Royal United Hospitals Bath
 Russells Hall Hospital
 Salisbury District Hospital
 Scarborough Hospital
 Southmead Hospital
 St George's Hospital
 West Suffolk Hospital
 Whiston Hospital
 York Hospital
 Manchester Royal Infirmary
 Wythenshawe Hospital
 Royal Stoke University Hospital
(The identifier of the hospital at which the patient was first seen by the vascular team)

Hospital - intervention

- Addenbrookes' Hospital
 - Aintree University Hospital
 - Cambridge University Hospital
 - Cheltenham General Hospital
 - Dorset County Hospital
 - Glenfield Hospital
 - Heartlands Hospital
 - Hull Royal Infirmary
 - Manchester Royal Infirmary
 - New Cross Hospital
 - Queen Elizabeth Hospital
 - Queen Elizabeth, King's Lynn
 - Peterborough City Hospital
 - Royal Bournemouth Hospital
 - Royal Liverpool University Hospital
 - Royal Stoke University Hospital
 - Royal United Hospitals Bath
 - Russells Hall Hospital
 - Salisbury District Hospital
 - Scarborough Hospital
 - Southmead Hospital
 - St George's Hospital
 - West Suffolk Hospital
 - Whiston Hospital
 - Wythenshawe Hospital
 - York Hospital
- (The identifier of the hospital at which the patient had intervention)

Referral to vascular services

Date of referral

Source of referral

- GP
- Podiatrist
- Community nurse (district, WIC, dressings clinic)
- Diabetic foot clinic
- Self-referral
- A&E within hospital
- Other specialty within hospital
- Other hospital

Mode of referral

- Telephone referral
- Online referral
- Paper/letter referral

Vascular review

Patient condition at first visit

- Stable CLTI (eg rest pain, mummified toes)
 - Severe CLTI (eg foot sepsis)
- (As described in PAD QIF)

Duration of CLTI symptoms

- < 1 week (0-6 days)
 - 1 week (7-13 days)
 - 2 weeks (14-20 days)
 - 3 weeks
 - 4 weeks
 - 5 weeks
 - 6 weeks
 - 7 weeks
 - 8 weeks
 - 9-12 weeks
 - >12 weeks
- (CLTI symptoms: night pain, rest pain or tissue loss/ulceration)
-

Date first seen by vascular team

_____ Time _____

Setting seen by vascular team

- Routine vascular clinic
 - Hot clinic/slot
 - Dedicated limb salvage clinic
 - A&E
 - Ward
 - Other
-

Grade of most senior clinician assessing the patient at 1st vascular review

- Vascular SpR
 - Vascular Consultant
 - Vascular Specialist Nurse
-

Admission date

_____ Time _____

Transfer-related questions

Setting first seen at arterial centre

- Routine vascular clinic
 - Hot clinic
 - Dedicated limb salvage clinic
 - A&E
 - Vascular ward
 - Not seen
 - Other
-

Date first seen at arterial centre

_____ Time _____

Site of first imaging

- Spoke Hospital
 - Arterial centre (Hub)
-

Imaging investigations

Type of first imaging

- Arterial duplex
 CTA
 MRA
 Diagnostic angiogram

Date of first imaging

Type of additional imaging

- Arterial Duplex
 CTA
 MRA
 Diagnostic angiogram
 No additional imaging

Date of additional imaging

Assessment

WIFI or equivalent classification system documented in patient medical record for CLTI

- Yes
 No

Date of anaesthetic assessment (if applicable)

Outcome of anaesthetic assessment (if applicable)

- Proceed to surgery as planned
 Delay surgery for further investigations/optimisation

Patient assessed by Consultant in care of the elderly

- Yes
 No
 Non-applicable (patient not elderly/frail)

MDT date (if applicable)

Treatment

Date of intervention

Primary procedure type

- Open (+/- endovascular)
 Endovascular

Reason for delay to treatment

- No delay
 Medical condition/need for optimisation
 Lack of inpatient bed availability
 Lack of open/hybrid theatre availability
 Lack of angio suite availability
 Patient preference
 Other _____
 (Delay is compared to the 5-day inpatient and 14-day outpatient timeline recommended in the VSGBI PAD QIF)

Form completed by _____