

Patient-related symptoms/concerns

- Falls
- Mobility change
- Post-hospital decrease in IADL
- Weight loss/fatigue

Initial GP visit

Primary care

Diabetes specialist/geriatrician

Opportunity for referral

Assessment procedures

- Clinical review
- 4-metre gait speed
- Get up and go test
- Electronic frailty index (eFI) or similar tool

Confirm or exclude presence of frailty

- Comprehensive assessment of functional status
- Confirmation of frailty diagnosis
- Review of glycaemic goals
- Exclude vascular and neuropathic causes of mobility impairment

Assessment procedures

- Clinical review
- Fried score
- Frail score
- SPPB
- Grip strength
- 4-metre gait speed
- Diagnosis of sarcopaenia (dexa scan)
- Evaluate and/or exclude peripheral neuropathy (monofilament or vibration perception)
- Evaluate PVD and referral for further assessment if required— (Epidemiological evidence suggests utility of ABPI even in the absence of symptoms)

Initial management plan

Promote positive lifestyle intervention with regular exercise
Nutritional assessment and exclude vitamin D deficiency
Review glucose control and medications according to functional status