

General Commissioning Statement

Treatment	Referral to secondary care
For the treatment of	Corns and calluses
Background	<p>NHS Scarborough and Ryedale CCG (SRCCG) commissions' healthcare on behalf of its local population across primary, secondary and tertiary care sectors. Commissioning policy including clinical referral pathways and thresholds have been developed and defined using appropriate NICE guidance and other peer reviewed evidence and are summarised here in order to guide and inform referrers.</p> <p>This commissioning policy is needed in order to clarify the criteria for referral to secondary care for corns and calluses.</p>
Commissioning position	<p>NHS Scarborough & Ryedale CCG do not routinely commission referral for corns and calluses. This commissioning position statement does not refer to diabetic patients.</p> <p>Patients may be considered via the NHS Scarborough and Ryedale CCG Individual Funding Request Panel (IFR) in the following circumstance:</p> <ul style="list-style-type: none"> • In some cases of foot or toe abnormality, where conservative methods fail or are inappropriate, it may be necessary to refer to an orthopaedic or podiatric surgeon to correct any deformity <p>NB All patients to be referred to local podiatry services prior to referral to secondary care.</p>
Effective from	November 2014
Summary of evidence / rationale	<p>The management of corns and calluses is available on the Map of Medicine (MoM).</p> <p>Presentation</p> <ul style="list-style-type: none"> • Corn - small, defined area of hardening, protruding skin characterised by having a central core of keratin, which is found on bony areas of toes and feet • Hard corns - usually dry, solid masses found on joints of toes • Soft corns - soft, moist lumps found between toes • Callus - broader, indistinct region of thickened skin, predominantly found on the feet (or sometimes hands), a typical site being upon the sole of the foot under the heads of metatarsals

Notes

1. This Statement will be reviewed in the light of new evidence, or guidance from NICE.

	<p>Both corns and calluses may cause pain and discomfort.</p> <p>History and diagnosis Clinical examination. Consider the following:</p> <ul style="list-style-type: none"> • A discrete-nucleated callus (plantar corn) may be confused with a viral wart or other disorders of keratin production e.g. porokeratosis plantaris discrete
Date	November 2014
Next Review Date	2017
Contact for this policy	SRCCG Service Improvement Team scrccg.enquiries@nhs.net

References:

1. Map of Medicine Corns and Calluses
<http://app.mapofmedicine.com/mom/240/page.html?department-id=20017093&specialty-id=20017097&pathway-id=20019592&page-id=20019593&history=clear>
2. GP notebook.com
<http://www.gpnotebook.co.uk/simplepage.cfm?ID=382730244>