

Clinical Guidelines

Heel Protectors

Intended Use:

Intended for prevention and management of heel pressure injuries, prevention of plantarflexion contractures and peroneal nerve injury, and skin protection of the feet while in bed.

Consider for patients with any of the following risk factors:

- Braden Mobility sub score of 1–3
- Braden Sensory Perception sub score of 1–3
- For patients unable to lift heel off of bed independently
- For patients unable to reposition themselves independently
- For patients with existing or a history of heel pressure injuries

Indications for Use:

- For lifting the heel off of the bed for patients who are at risk of heel pressure injury
- For positioning of the ankle and/or leg for patients who are unable to maintain a neutral position
- For preventing and managing of heel pressure injury in patients who have existing or history of pressure injury
- For preventing skin injury to the foot for patients at risk



TruVue

Intended Care Setting: Intended to be used in hospitals and other inpatient facilities.

Suggested uses of the TruVue Heel Protector

Pressure Injury Prevention and Management	Positioning	Protection
Consider for patients at risk of heel pressure injuries such as those with: • Critical illness, e.g. ventilated, sedated, immobilized, on vasopressors • Chronic illness, e.g. Diabetes, PVD, CAD, COPD, CHF, edema, malnutrition, frail, cachexic • Lower extremity orthopedic trauma/injury, e.g. hip fracture, amputation • Altered sensory perception, e.g. CVA, sedation, neuropathy, spinal cord injury • Impaired cognition, e.g. unable to follow self-repositioning • During lengthy procedures, e.g. ECMO, CVVHD, CRRT, OR, EP/Cath Lab	Consider for patients who need assistance in maintaining ankle and/or hip in neutral position • Critical illness, e.g. ventilated, sedated, immobilized, on vasopressors • Lower extremity orthopedic trauma/injury, e.g. hip fracture • Altered sensory perception, e.g. CVA, sedation, neuropathy, spinal cord injury	Consider for patients who need protection from: • Friction at the heel when agitated • The opposite limb, e.g. casts, rigid splints, external fixators

Interventions

- Remove each shift and as needed for skin assessment
- Re-adjust to ensure proper placement after repositioning patient
- Remove for chair transfers and ambulation
- Utilize tubing port to direct tubing away from patient's skin

Contraindications

- Do not use for ambulation or chair transfers

Additional Information

- Single patient use
- Multiple sizes are available
- The TruVue Heel Protector can be used across the continuum of care