















Skin and Wound Product Information Sheet

PRO-heeLx Heel Protector			
Classification	Heel Suspension: Boot		
Key Points	• Designed with a 2" heel lift to offload/suspend the heels above the bed surface and help protect against heel pressure ulcers.		
	• The outer fabric is made of breathable nylon, allowing moisture and heat to migrate away from the foot. The inner-liner material is designed to manage moisture within the boot, keeping the client's skin and boot liner dry.		
	• Durable straps cross-over the front of the device which helps support the foot in a neutral position, eg. support a client's foot drop.		
Indications	 Optional Stabilizer Wedge helps prevent complications related to lateral rotation of the foot. To protect heels at risk for skin breakdown due to pressure or friction/shear 		
	To support healing of existing heel pressure ulcers or skin breakdown		
Precautions	 Consult with Wound Clinician, Occupational Therapist or Physiotherapist prior to use as product selection requires an assessment of the cause of the wound and the correct sizing of the device Remove boot with at least once per shift to do a skin assessment of the limb and foot Monitor the skin closely if there is a pre-existing wound(s) on the lower leg or foot 		
Contraindications	 Do not use if the heel is not suspended off the mattress when boot has been properly applied Do not allow client to stand, transfer or walk while wearing the boot Do not use if material is torn or frayed 		
Formats & Sizes	Boot (fits Women(W) and Men(M) shoe sizes)		

Application Directions	Rationale
Select appropriately sized device.	
Wash the client's lower limb with warm water and pat dry. Moisturize the skin, pat dry to remove any excess. Ensure that the spaces between the toes are dry and free from moisturizer	To ensure healthy skin.
Undo the straps and place the boot on the mattress surface beside the client's leg.	To ensure that the boot is in the proper position prior to application.
Supporting the knee to prevent hyperextension, lift the leg and position the heel over the heel opening of the device.	This ensures correct placement of the foot and leg in the boot to suspend the heel.
Attach the calf strap to the opposing side of the boot. Straps should be just tight enough to ensure that the boot stays in positon.	
For the foot straps, either criss-cross them and attach the straps to the top of the boot <u>or</u> run each foot strap up it respective side of the boot and secure the strap at the top of boot.	The foot strap assists with minimizing foot-drop
Check that the boot is correctly applied: using two fingers check that there is adequate clearance between all of the straps and the client's limb/foot and that the heel is not touching the mattress surface.	
Daily Care	

Created by the British Columbia Provincial Intraprofessional Skin & Wound Committee in collaboration with the OTs, PTs and WCs from

















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With each repositioning change (eg every 2 hours), • ensure that the heels are suspended off of the mattress/support surface • remove boot and check the client's skin for signs of skin irritation and pressure points at minimum once per shift If using a heavy moisturizer or zinc-based product on the legs, protect the cushion with a coverlet designed for the boot.	If device does not suspend heels off of the mattress then discontinue the use the device; use an alternative method (eg pillows) for off-loading the heel and consult OT/PT or Wound Clinician. If skin irritation is present or reddened areas do not blanche, do not continue to use the device; use an alternative method (eg pillows) for off-loading the heel and consult OT/PT or Wound Clinician.		
Cleansing of Device			
Device is machine washable at 38°C, may be bleached if needed and dried in the dryer on low temperature. While boot is being laundered, ensure that another mechanism is in place for offloading the heel. Keep strap hook free from lint to ensure a secure strap application. Expected Outcome			
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Heels are off-loaded from the mattress surface Client does not develop a heel pressure ulcer. Client's existing heel pressure ulcer heals.			
For further information, please contact your Occupational Therapist, Physiotherapist or Wound Clinician.			