




Product Information Sheet

SensiFoot																								
Classification		Compression Therapy: Diabetic Sock																						
British Columbia Practice		<ul style="list-style-type: none">As per health authority or agency policy/or standards, prior to the first application of wrap, tubular bandage or stocking that provides 20mmHg or less compression:<ul style="list-style-type: none">A Lower Limb Assessment (Basic & Advanced) is to be done but an Ankle Brachial Pressure Index and/or a Toe Pressure Brachial Index is not required if pedal pulses are palpable or present with a hand-held doppler and capillary refill is normal.An order is not required.Refer to Application of Compression Therapy: Guideline for further information related to indications, precautions, and contraindications of compression therapy.																						
Key Points		<ul style="list-style-type: none">Latex-free acrylic sock which provides mild compression 8-15mm/Hg (the tighter the fit the higher the compression), the acrylic fibres wick moisture away from the skinWashable, may be worn for 4-6 months before needing to be replaced.																						
Indications		<ul style="list-style-type: none">For clients with diabetes for the protection of feet from mild trauma, friction/shear injury.For clients who require compression therapy for the treatment of:<ul style="list-style-type: none">Venous insufficiency (with or without wounds).Mixed arterial / venous insufficiency (with or without wounds).Lymphedema (with or without wounds).Generalized edema.																						
Precautions		<ul style="list-style-type: none">Sock should not slip down or bunched around ankles as it may cause a tourniquet effect.																						
Contraindications		<ul style="list-style-type: none">Do not use in the presence of uncontrolled heart failure.Do not use in the presence of an untreated lower limb skin or wound infection.																						
Formats & Sizes		<ul style="list-style-type: none">Sock (2/package) - need 2 pairs<ul style="list-style-type: none">Knee high – Black or White <table><tr><td>Shoe Size</td><td>XS</td><td>S</td><td>M</td><td>L</td><td>XL</td></tr><tr><td>Women</td><td>4.5-6.5</td><td>7-9</td><td>9.5-11</td><td>11.5-13</td><td>-</td></tr><tr><td>Men</td><td>3.5-5.5</td><td>6-8</td><td>8.5-10</td><td>10.5-12</td><td>12.5-14</td></tr></table> 					Shoe Size	XS	S	M	L	XL	Women	4.5-6.5	7-9	9.5-11	11.5-13	-	Men	3.5-5.5	6-8	8.5-10	10.5-12	12.5-14
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Directions		Rationale / Key Points
Selection		
Choose size of sock based upon client's shoe size.		
Preparation		
Cleanse feet and legs with a non-rinse cleanser. Pat to dry, ensure spaces between the toes are dried. Moisturize intact skin with agency approved moisturizer; allow moisturizer to absorb/dry before putting on the sock.		To remove dead skin and resolve/prevent dry skin.
Application		
Turn the sock inside out by putting hand inside the sock, grasp the heel and pull out. Fold back the sock. Insert toes/forefoot into the sock. Slide foot in until toes and heel are correctly positioned in the sock.		Folding back the sock will minimize the 'bunching' of the dressing when the sock is pulled up the leg.

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Directions		Rationale / Key Points
<p>Grasp the top of the socking; pull it up over the ankle and the calf. The top of the stocking should sit 2 finger-widths below the knee.</p> <p>Ensure no wrinkles in the sock and that the toes can move freely.</p>		<p>The 2 finger-width ensures that there is no compression placed on the popliteal space.</p> <p>One single layer of fabric ensures no areas of layered compression.</p>
Removal		
<p>Grasp the top of the socking and peel it down over the heel and off the toes.</p>		<p>Peeling the stocking off ensures that the stocking will not bunch, roll or layer which could create a risk of a tourniquet effect.</p>
Frequency of Application		
<p>Sock should be removed at night and reapplied in the morning prior to the client getting out of bed, if possible.</p> <p>If there is a clinical requirement for the sock to be worn 24hrs/day, need to be removed once in the day to cleanse and assess the skin.</p>		<p>Removing the sock allows for inspection and care for the skin (washing and/or moisturizing) of the lower leg and foot.</p> <p>Edema in the lower legs/feet should be less in the morning if the client has had their feet up in bed for the night.</p>
Care of Stockings		
<p>Laundry socks in cold water by hand; do not use fabric softener or bleach. Hang until completely dry.</p>		<p>Given everyday use, recommended replacement of stockings is 4-6 months to ensure adequate compression.</p>
Expected Outcomes		
<p>If used for diabetic feet, feet are protected from minor trauma, friction/shear.</p> <p>If used as prevention/maintenance of lower limb edema, there is absence of, or minimal edema.</p> <p>If used as a treatment for lower limb edema: measurable improvement in the ankle and calf measurements within 1 week.</p> <p>Product performs as expected.</p>		<p>If there is no measurable improvement in the amount of edema within one week, consult with Most Responsible Provider.</p> <p>If product does not perform as expected, notify NSWOC/ Wound Clinician and then consider submitting a Supply Chain Product Concern Form</p>
For further information please contact NSWOC/Wound Clinician		