






Skin and Wound Product Information Sheet

Ventopedic Heel and Ankle Offloading Boot	
Classification	Heel Suspension: Boot
Key Points	<ul style="list-style-type: none"> • Washable pressure offloading/suspension device for heels. • Designed to allow for easy visualization of both the heel and the lateral/medial malleolus • Designed to allow for continuous air circulation within the boot which helps to keep the lining of the boot and the client’s skin dry and comfortable • Designed with a non-slip surface on the sole of the boot; may be worn for weight-bearing activities e.g. standing or transfer to chair
Indications	<ul style="list-style-type: none"> • To protect heels and malleoli at risk for skin breakdown due to pressure or friction/shear • To support healing of existing heel and malleoli pressure ulcers or skin breakdown
Precautions	<ul style="list-style-type: none"> • Consult with Wound Clinician, Occupational Therapist or Physiotherapist prior to use as device requires correct sizing • Remove boot at least once per shift each 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 • For client who is wearing the device when up in the chair; ensure that the heel is not in contact with any surface e.g. wheel chair leg supports
Contraindications	<ul style="list-style-type: none"> • Do not use if the heel does not float off the bed after boot properly applied • Do not allow client to walk while wearing the boot
Formats & Sizes	<ul style="list-style-type: none"> • Boot (calf circumference) <ul style="list-style-type: none"> ○ Small: 20-30cm (8-12”) ○ Medium: 32.5-40cm (13-16”) ○ Large: 40-50cm (16-20”) ○ Bariatric: 50cm + (20”+)
	
Application Directions	Rationale
Select the appropriate sized device by measuring the calf circumference.	Incorrect sizing may decrease the effectiveness of the boot and fail to suspend the heels off of the bed.
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
Un-do the Velcro straps and place the boot on the mattress 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 middle opening of the device.	This ensures correct placement of the foot and leg in the boot to suspend the heel.
Adjust the leg stabilizer stretch panel and then the rest of the panels working down to the top of the foot. Do not over-tighten; should be able to slip a finger comfortably under the straps.	Secures the leg in the boot to prevent slipping or rotating.
	
Check to ensure that the heel is centred in its opening and not touching the mattress; also ensure that the malleoli are visible in the device’s side windows.	Suspending the heel removes pressure from the heel.



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Daily Care	
<p>With each repositioning change (e.g. every 2 hours), ensure that the heels are not touching the mattress/support surface.</p> <p>At minimum once per shift, remove boot and check the client’s skin for signs of skin irritation and pressure points.</p> <p>If using a heavy moisturizer or zinc-based product on the legs, protect the device with a small sheet/towel.</p>	<p>If device does not suspend the heels off of the mattress, then do not continue to use the device; use an alternative method (e.g. pillows) for off-loading the heel and consult OT/PT or Wound Clinician.</p> <p>If skin irritation is present or reddened areas do not blanch, do not continue to use the device; use an alternative method (e.g. pillows) for off-loading the heel and consult OT/PT or Wound Clinician.</p>
Cleansing of Device	
<p>If the boot becomes soiled, it can be machine washed at 71-75°C and dried at 104.°C. While boot is being laundered, ensure that another mechanism is in place for offloading the heel.</p>	<p>To maintain cleanliness of the boot, reduce risk of infection and comply with infection control policy</p>
Expected Outcome	
<p>Heel is offloaded from the mattress surface.</p> <p>Client does not develop heel pressure ulcer.</p> <p>Existing heel pressure ulcer heals.</p>	
For further information, please contact your Occupational Therapist, Physiotherapist or Wound Clinician.	