Follow Pressure Injury Prevention Strategies which include:
- Frequent position changes
- Early mobilization
- Assess skin integrity EVERY SHIFT

IS PATIENT AMBULATORY? (2 person assist will be considered NOT ambulatory)

1 person assist for transfers and mobility

CONTINUED VISIBLE SIGNS OF PRESSURE? (blanchable and/or non-blanchable redness)

Return to Pressure Injury Prevention Strategies

- Apply and monitor off-loading device
- Perform skin check q2h once device applied
- Refer to appropriate team members

Heel Off-loading Algorithm

Routine Pressure Injury Prevention Strategies:
- Encourage adequate repositioning q2 hours
- Inspect skin for areas of pressure per shift
- Apply alcohol free moisturizer to skin if skin is dry and cracking
- Encourage adequate fluid intake
- Promote good nutrition

To Prevent Heel Pressure Injuries:
- Elevate/float heels off the surface of the bed
- Use pillows lengthwise along legs to distribute weight and knees slightly flexed to avoid hyperextension
- Hyperextension may cause obstruction of the popliteal vein, which could predispose a patient to deep vein thrombosis
- Heel elevation in bed is especially important for patients with diabetes mellitus, peripheral vascular disease, neuropathy and during and following surgery
- Do not use rolled blankets, towels, or pillow cases, incontinent pads or IV bags to elevate heels

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