Assessing the Patient Who is at Risk for Heel Pressure Injury
Complete Braden Scale

BRADEN 19-23
Follow Pressure Injury Prevention Strategies which include:
• Frequent position changes
• Early mobilization
• Assess skin integrity EVERY SHIFT

BRADEN 18 OR LESS
Follow Pressure Injury Prevention Strategies which include:
• Reposition every 2–4 hours
  (even when on a therapeutic surface)
• Elevate/float heels off the surface of the bed
• Use pillows lengthwise
• Assess skin integrity EVERY SHIFT FOR RED AREAS

Establish if patient is appropriate for heel device:
• Visible signs of pressure?
  AND/OR
• Braden – Mobility ≤ 2 and Activity ≤ 2
• Fractured hip or lower extremity fracture
• Ischemia of the lower limb
• Remaining lower limb amputee
• Peripheral neuropathy—Diabetes mellitus
• Leg spasms/aquately controlled pain
• Mental confusion
• Skin grafts to the lower leg or foot
• Paralysis of the lower leg or foot
• Unconscious
• Slings and springs
• Bucks traction

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

NO
1 person assist for transfers and mobility

YES

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

NO

YES

Return to Pressure Injury Prevention Strategies

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

If continued skin breakdown, consider consult:
• Occupational Therapist

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