

# Pressure Ulcer Prevention of the Heels & Foot

Check feet regularly for redness, heat, bruising, blisters, breaks in the skin, pain and cracked heels

## Category 1(Photograph 1)

Non-blanching erythema intact skin with non-blanching redness of a localised area; usually over a bony prominence.



1

## Category 2(Photograph 2)

Partial thickness loss of dermis. Presenting as a shallow open ulcer with red/pink wound bed, no slough or as an intact/open blister.



2

## Category 3(Photograph 3)

Full thickness tissue loss. Subcutaneous fat may be visible but bone, tendon would not be visible. Slough may be present.



3

## Category 4(Photograph 4)

Full thickness tissue loss, exposed bone, tendon or muscle. Slough, necrotic tissue, or eschar may be present.



4

## Suspected Deep Tissue Injury (Photograph 5)

Purple/Maroon localised area of intact skin or a Blood filled blister of underlying soft tissue damage. Pain, periwound maceration or brittle skin plaques may be present.



5

**Patients who are at risk of developing a pressure ulcer must totally offload the area. Pressure causes pressure damage; remove the pressure, remove the risk. Act NOW!??**

Risk factors include Diabetes, Inflammatory Arthritis, Peripheral Neuropathy, Circulatory problems, Renal Insufficiency, Incontinence or Immobility

- Protect heels of high-risk patients before a problem develops
- A pressure reducing / relieving mattress will not relieve enough pressure at the heel to prevent a pressure ulcer forming
- Total offloading is more efficient than alternating pressure

- When sitting in a chair, elevate the legs using a reclining chair, or a foot stool
- Ensure the heels are making no contact with any surface below
- Firm pillows lengthways (below the knee), for each leg or repose boots are recommended for offloading
- Please report pressure ulcers via the incident reporting system, alert the Tissue Viability Service if Category 3&4 pressure ulcers via [t-sd.tissueviability@nhs.net](mailto:t-sd.tissueviability@nhs.net)/01803 655814
- All heel ulcers to be referred to the Podiatry Service via [t-sd.podappts@nhs.net](mailto:t-sd.podappts@nhs.net)/01803 217712
- All Diabetic Inpatients with foot ulcers to be referred to the Inpatient Diabetic Podiatry Service via [torbayinpatientpodiatry@nhs.net](mailto:torbayinpatientpodiatry@nhs.net)