

Sage Prevalon

Heel Protector III XL

REF 7382



Features and benefits

Dermasuede fabric interior	<ul style="list-style-type: none"> Gently grips limb so it remains fully offloaded, even when patient is moving
Rip-stop nylon outer shell	<ul style="list-style-type: none"> Helps maintain patient's freedom of movement Slides easily over bed sheets
Open, floated heel design	<ul style="list-style-type: none"> Completely offloads heel Allows for easy monitoring between assessments
SCD compatible	<ul style="list-style-type: none"> Four ports sewn into boot design accommodate most SCD devices
Contracture Straps	<ul style="list-style-type: none"> Reduces plantar flexion contracture risk^{1,2}
Expandable Straps	<ul style="list-style-type: none"> Stretches to accommodate lower limb oedema No sharp edges or irritating surfaces
Integrated foot and leg stabiliser wedge	<ul style="list-style-type: none"> Helps prevent lateral foot and leg rotation, keeping the peroneal nerve in position.²

Specifications

Product name	Sage Prevalon Heel Protector III XL
Product code	7382
Description	Offloads the heel. Reduces plantar flexion contracture risk. ^{1,2} Helps prevent lateral rotation, reducing the risk of peroneal nerve damage. ²
Manufacturer accreditation	ISO 13485:2016
Recommended for patients with calf circumference of:	46cm - 61cm (18in - 24in)
Packages per case	2

Packaging information

Contents:

(1) Heel Protector

Intended Use:

For offloading the heel and reducing the risk of heel pressure ulcers, for reducing the risk of plantar flexion contracture, and for helping to prevent lateral foot and leg rotation, reducing the risk of peroneal nerve damage.^{1,2}

Caution:

For use on patient while in bed. Do not stand or walk while wearing due to fall risk. Periodically remove heel protector to assess skin according to protocol. Read enclosed instructions prior to using product.

Cleaning Instructions:

Wipe clean with a damp cloth.

Discard according to hospital protocol and local regulations.

Not made with natural rubber latex.

Single patient - multiple use.

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Heel Protector III XL

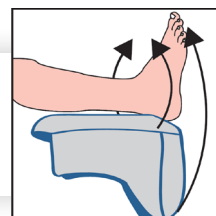
REF 7382

To offload the heel

1

Put the heel protector on

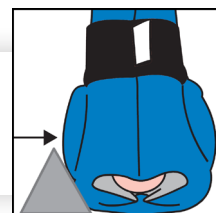
The heel protector is shipped **inside out**. Position heel over opening on grey side. Pull sides up around foot and toes.



2

Position wedge on outside of leg (lateral side)

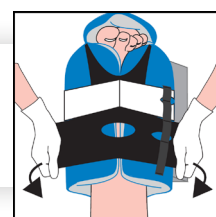
Push wedge tight against side of Heel Protector. Reposition as appropriate.



3

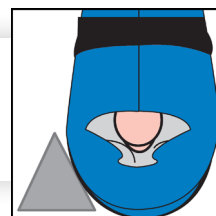
Tighten straps

Wrap straps around the heel protector and adjust. **Do not** over tighten.



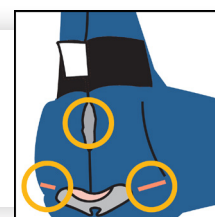
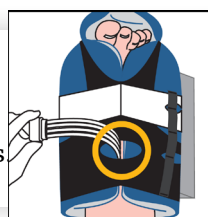
4

Make sure the heel is floated



To use with sequential compression device:

Run tubing through the nearest available port. Ensure tubing is not kinked or contacting skin. Push tubing down into seams when using side ports. **Do not** use heel hole as a port.



References:

1. Meyers, T. (2017). Prevention of Heel Pressure Injuries and Plantar Flexion Contractures With Use of a Heel Protector in High Risk Neurotrauma, Medical, and Surgical Intensive Care Units: A Randomized Controlled Trial. *Journal of Wound, Ostomy, and Continence Nursing: Official Publication of The Wound, Ostomy and Continence Nurses Society*, 44(5), 429–433.
2. Meyers, T. (2010). Meyers T, Preventing Heel Pressure Ulcers and Plantar Flexion Contractures in High Risk Sedated Patients. *J Wound Ostomy Continence Nurse*. 2010 Jul-Aug;37(4):372-8

A healthcare professional must always rely on his or her own professional clinical judgment when deciding whether to use a particular product when treating a particular patient. Stryker does not dispense medical advice and recommends that healthcare professionals be trained in the use of any particular product before using it.

The information presented is intended to demonstrate the breadth of Stryker product offerings. A healthcare professional must always refer to the package insert, product label and/or instructions for use before using any Stryker product. Products may not be available in all markets because product availability is subject to the regulatory and/or medical practices in individual markets.

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