# Position for better outcomes

Mölnlycke® Z-Flex® Fluidized Heel Boot



### Position for **better** outcomes

The heel is second to the sacrum in the location of pressure injury incidence, and it is the most common site of pressure injuries for the perioperative patient<sup>1</sup>. Thirty seven percent of patients who develop one heel pressure injury develop them bilaterally<sup>1</sup> and the heel is the most common site of deep tissue injury<sup>2</sup> (DTI). Heel pressure injuries account for 41% of all DTIs<sup>3</sup> and the effects of a full-thickness heel pressure injury can be devastating to ambulation and quality of life.

Certain validated risk factors predispose the patient to heel pressure injury development: diabetes mellitus, vascular disease, immobility and an overall Braden Scale score of 18 or less<sup>1</sup>. Because of the small surface area and high tissue-interface pressure, pressure over the heel is difficult to effectively off-load<sup>2</sup>.

Healing a heel pressure injury can require over a year; delays in healing can be attributed to underlying comorbid problems and barriers to maintaining pressure relief for the heel<sup>3</sup>.

The heel is unique. Full thickness pressure injuries with osteomyelitis or critical limb ischemia can lead to amputation<sup>3</sup>. In one study, 11% of patients with heel pressure injuries required heel amputation, and in another study 42% of 43 patients (18 patients) with heel pressure injuries required lower leg amputation as a result of persistent infection or non-healing wounds<sup>3</sup>.

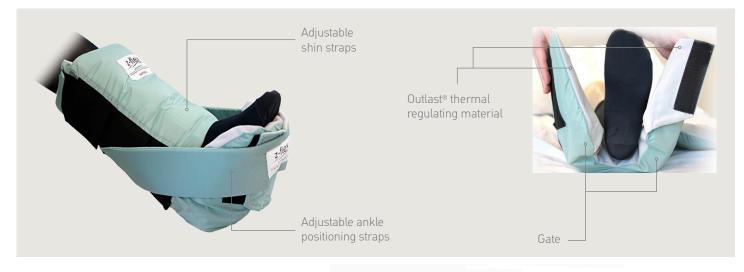


### Looking forward to better outcomes

**Now** by instituting regular, effective repositioning of the extremities, skin assessment and use of heel-protective devices, the incidence of hospital-acquired heel pressure injuries can be significantly reduced<sup>2</sup>.

## Mölnlycke<sup>®</sup> Z-Flex<sup>®</sup> Fluidized Heel Boot

- Designed with a fluidised medium to allow secure repositioning of the lower leg
- Adjustable shin straps accommodate a variety of leg sizes which facilitate use of sequential compression devices
- Anatomically neutral foot position is supported by an adjustable ankle positioning strap
- A built-in gate allows skin assessment of the heel at scheduled intervals
- Outlast® thermal regulating material helps keep legs comfortable longer
- Provides ease of use and comfort for the patient
- For single patient use only



DID YOU KNOW?

As much as 41% of all deep tissue injuries are heel pressure injuries<sup>2</sup>.

**Fully offloads the heel and protects the Achilles** Through a unique combination of positive air displacement and fluidised technology

Fits almost all leg sizes and accommodates compression devices Thanks to adjustable shin straps

Allows easy access for regular skin inspection Thanks to a built-in gate



### **Ordering Information**



#### Mölnlycke® Z-Flex® Fluidized Heel Boot

Ref. no	Description	Case Oty
1400122	Z-Flex Fluidized Boot (Case of 2 Z-Flex Fluidized Heel Protector w/ gate, Ankle Strap)	2
1400123	Z-Flex Fluidized Boot (Case of 8 Z-Flex Fluidized Heel Protector w/ gate, Ankle Strap)	8

**References:** 1. Delmore, B., Lebovitz, S., Suggs, B. Risk Factors Associated With Heel Pressure Ulcers in Hospitalized Patients. J Wound Ostomy Continence Nurs. 2015;42(3):242-248. 2. Salcido, R., Lee, A., Ahn, C. Heel Pressure Ulcers: Purple Heel and Deep Tissue Injury. 2011, ADVANCES IN SKIN & WOUND CARE & VOL. 24 NO. 8. 3. Black, J. Preventing pressure ulcers occurring on the heel. Wounds International Vol 4 | eSupplement | ©Wounds International 2013.

#### Find out more at www.molnlycke.com.au

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