

Most facilities lack *consistent* methods to offload heels post hip surgery

THE CHALLENGE



Hip Surgery Patients Have Additional High-Risk Factors

Pre-Op

- Immobility and or deformity
- Bucks traction
- Nutritional compromise
- Dehydration
- Some degree of vascular compromise and/or + DM

Post-Op

- Surgery longer than 2 hours
- General or epidural anesthesia
- Pain and ongoing immobility
- Impaired innervations
- Impaired circulation and edema
- Anti-embolic hose

Decades of data suggest a need for aggressive pressure relief:

- 14% of orthopedic patients in the United States and 17% in Canada develop heel ulcers post hip surgery.
- 91% of 'facility acquired' heel ulcers are related to hip or knee surgery.

THE SOLUTION



Standardization of Care

- Pressure is transferred to the calf ELIMINATING Heel Pressure.
- Low density foam facilitates repositioning to reduce sacral pressure.
- Reduces post op DVT by promoting venous return.

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How does your facility offload heels post hip surgery?



Dimensions: 20"-23"(L) x 23"(W) x 7"(H)

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