PURPOSE: Unna boot helps treat uninfected, non-necrotic leg and foot ulcers that results from venous insufficiency and stasis dermatitis.

POLICY & GENERAL INSTRUCTIONS: This is a clean procedure performed in the clinic.

PERSONNEL: Trained nursing staff

EQUIPMENT: Normal saline solution, unna boot, bandage scissors, gloves, ace bandage.

PROCEDURE:
1. Wash your hands and put on gloves
2. Wash cloth or scrub sponge with ordered cleaning agent
3. Assess the ulcer and skin. Assess the ulcer size, drainage & appearance
4. Clean the affected area gently with the sponge and cleaning agent. Rinse with normal saline solution.
5. Position the patient’s leg in a slightly flexed position.
6. Put on gloves
7. Apply the unna boot (gauze) in a circular motion from the foot to the knee. The wrap should be snug but not tight. To cover the area completely be sure each turn overlaps the previous one by half the bandage’s width.
8. Continue wrapping the patient’s leg up to the knee, using firm, even pressure. Mold the boot with your free hand as you apply the bandage to make it smooth and even.
9. Cover the boot with an ace bandage for compression.
10. Observe the patient’s foot for signs of impairment, such as cyanosis, lose of feeling, or swelling. (This indicates that the bandage is too tight and should be rewrapped.)
11. Leave the boot on for 5 to 7 days, or as ordered by the physician.
12. Patient Instruction:
   A. Observe for signs of impairment
   B. Tell the patient the boot will stiffen, but will not be as hard as a cast
   C. To cover the boot with a plastic kitchen trash bag sealed at the knee to avoid getting the boot wet
13. Remove the boot with a sterile tongue blade and bandage scissors or scalpel

SPECIAL CONSIDERATION: Do not make reverse turns while wrapping the bandage. (This could create areas of excessive pressure that may cause discomfort)