


COMMIT 3 DAYS.
SO FUTURE GENERATIONS WON'T HAVE TO.



Walker Blister Care Protocol

susan g. komen
3-Day 

Powered by
Bank of America 



Blisters happen because of friction

- Most common problem on the Komen 3-Day.
- Caused by friction
 - between layers of skin
 - your skin and sock
 - your sock and shoe
- Heat and moisture can make skin more fragile.



Hot Spots

- Any area where you feel pressure, tenderness or a burning sensation may be a potential blister.
- Preventing a blister from forming is the key.



Hot Spot Treatment

- Reduce the cause of the friction.
 - Change your socks.
 - Apply an anti-friction or antichafing lubricant (such as Vaseline® or Bodyglide®) over the area.



Hot Spot Treatment

- Protect the hot spot by covering it with a piece of 2nd skin and cover it up with Cover Roll Stretch bandage or a Band-Aid.
- Avoid any creases or folds in your bandages; they will increase friction.
- Adding Bodyglide® over the bandage helps it slide under your sock.



Blisters

Do you leave it alone or drain it?



Small Blisters

- Don't pop a blister if:
 - Small, <1"
 - No pain
- Blister gel pad (such as 2nd Skin®) and a Cover Roll bandage or Band-Aid for protection or leave alone/open shoe



Small Blisters

- Elevate Overnight
- No bandage
- In the morning, use a blister gel pad (such as 2nd Skin®) and a bandage.



Dressing Small Blisters

- Clean the blister with an alcohol swab and then cover with a blister gel pad (such as 2nd Skin®). Be sure to remove both plastic coatings off the blister gel pad.
- You may want to spray benzoin spray (Tuf-Skin, New-Skin) over the gel pad to help the bandage pad stay in place.
- Cover with a bandage.



Large Blisters

- Yes, drain a blister if:
 - Big, >1" or so
 - Pain from the pressure
 - Subungual (under the nail)

- Because of needle stick precautions, only medical personnel may lance blisters on the 3-Day®.



Large Blisters

- Large blisters must be cleaned with betadine or an alcohol swab.
- Then, a sterile needle can be used to drain the fluid (on the 3-Day, only the medical team may do this).
- Antibiotic ointment must be applied over the open blister.
- This may be followed with a square of blister gel pad (such as 2nd Skin®), then benzoin, then a bandage.



Subungual Hematomas

- Yes, the nail will fall off
- New nail 6 -12 months
- Leave nail alone
- Consult with Medical or Sports Medicine crew member for treatment options.
- Only medical personnel may lance blisters on the 3-Day®.



De-roofed Blisters

What if the skin is
already gone?



De-roofed Blisters

- Shower first
- Antibiotic ointment
- Big bandage



De-roofed Blisters

- Overnight
 - Air dry if possible
 - Clean sock/sleeping bag
 - Elevate
- Next day
 - Blister gel pad (2nd Skin®)
 - Bandage
 - Consider open shoe



What if there is blood in it?

- Blood filled blisters could be high risk for infection.
- These need to be medically evaluated.
- Consider stopping walking until these severe blisters are evaluated.



What if there is blood in it?

- Overnight
 - Remove bandage and allow blister to dry if possible.
 - Keep feet bare or wear clean socks.
 - Elevate at the end of the bed on a pillow or other roll of clothing.
 - Use ibuprofen as needed
- In the morning
 - First layer: blister gel pad (such as 2nd Skin®)
 - Second layer: bandage.
 - Third layer: clean, dry sock



Listen to your Body.

- Once a blister has formed you will be uncomfortable.
- Prevent blisters from forming by paying attention to your feet.
- During your training walks, practice walking with the shoes and socks you will use during the event.
- Change to dry socks at lunch (or more frequently if your feet are wet or sweaty).
- Treat hot spots and small blisters early on.
- Stop walking if your blisters are severe.



Blister-free feet are happy feet!