



Amputee Support Packet

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1) Amputation Information

I just had an amputation, now what?

Dealing with limb loss can be a very overwhelming experience. The first days and weeks are some of the most difficult. Most amputees wake up from surgery with a lot of questions. Our company strives to help guide you through this process and answer your questions along the way.

For starters, it is important to know that Advanced Prosthetics has several amputees on staff who can answer a variety of your questions. Amputees can be young, active individuals who have lost their limb due to an accident or birth. However, most amputees are older individuals whose amputations are performed as life saving measures as the result of poor circulation, diabetes, or another disease.

In most cases, you will be able to return to the activities or a similar version of the activities that you performed prior to the amputation. However, it is important to realize that healing and learning to use a prosthesis is not an overnight process and will take time, rehabilitation, and patience.

How long will it take me to heal after amputation?

Everyone is different. The healing process can take longer if there is compromised circulation in the limb. Normally the healing process can take between 4 to 7 weeks. Although the waiting can be frustrating, take advantage of the time and focus on getting your mind and body ready for the prosthesis through rehabilitation services such as physical and occupational therapy.

What health care professionals should I work with and what are their roles?

Your healthcare team will include several different medical professionals. This will include your surgeon, prosthetist, primary care physician, physical and occupational therapists. You may also potentially work with a wound center or limb health specialist. Many of these professionals will track your limb health and progress. The physical and occupational therapists will strengthen muscles and teach you how to walk with the prosthesis once you receive it. Your relationship with Advanced Prosthetics is important because you will continue to follow up with our company throughout your lifetime to adjust, repair, and replace your prosthetic limb as needed.

I am waiting for my limb to heal – Is there anything I can do?

Yes! It will be important to participate in rehabilitation services as mentioned above to strengthen muscles. You can also prepare for the prosthesis by using several techniques described on pages 6 and 7.

Are there different types of prosthetics?

There are many different types of prosthetic limbs that range from high-level running prosthesis to cosmetic prosthesis. The right device for you depends on many factors that will be determined by your prosthetist, doctors, and physical therapists.

2) Prosthetic Terminology

AK/BK Amputation:

AK (Above Knee) and BK (Below Knee) are terms to describe two common types of amputations that are performed. For information on other amputation types, ask one of our prosthetists.

Certified Prosthetist:

A medical professional who measures, designs, fabricates, fits, or services a prosthesis as prescribed by a licensed physician. A prosthetist can also assist in the formulation of the prosthesis prescription for the replacement of external parts of the human body lost due to amputation or congenital deformities or absences.



Shrinker:

A shrinker is an elastic sock that fits over your limb. It reduces swelling, shapes and controls the volume of your limb.

When do I wear my shrinker?

After the surgeon removes the staples or sutures from your limb, the shrinker should be worn as much as possible (except when bathing). Once you have the prosthesis, the shrinker should be worn overnight and at times when the prosthesis or gel liner is not worn during the day. The shrinker **MUST** be pulled up above the knee (below knee amputation) or as high into the groin as possible (above knee amputation). If the shrinker is not worn overnight, it may be difficult to get the prosthesis on during the morning because of swelling that happens overnight.



Gel Liner:

This is a tubular cushioned sock that has fabric on the outside and clear gel on the inside. Its purpose is to attach the prosthesis to your body and protect your skin from the pressure/stress while walking.



Prosthetic Socks:

These are special white-colored socks with holes on the bottom. There are various different thicknesses and have markings with numbers to identify their thickness. Their purpose is to tighten the fit of the prosthesis when needed. Your limb will fluctuate in volume as a new amputee and you will notice swelling and atrophy during the first several months. This will cause your prosthetic to become too tight or too loose for your limb. You will need to add or

remove socks on top of your gel liner depending if it is too tight or loose. If you do not use prosthetic socks, it is likely that you will develop a sore on your leg.

3) Phantom Pain

What is Phantom Pain?

After a limb is amputated, it is common to sometimes feel like the limb is still there. This is called phantom sensation. If the person has pain as though the arm or leg is still there, it is called phantom pain.

Cause of pain:

The cause of phantom pain is not exactly known. It is likely related to the body's nervous system telling the brain that the arm or leg is still present. There may be an increase in pain messages sent to the brain while gone. Often the pain becomes less over time, especially as you can use a prosthesis. Phantom pain is very real but not everyone will experience it. The pain may feel like burning, cramping, stabbing, or shooting pain. There are a few things you can do to help ease the pain.

Some things that can make the pain worse include:

- Being too tired, or stressed
- Too much pressure on the amputated limb
- Changes in the weather
- Poor circulation, or swelling
- An artificial limb that does not fit properly

To help ease the pain you can:

- Slowly tighten and release the muscle in the limb
- Take medication as instructed by your doctor
- Take a warm bath or shower massage, after the incision line is closed and healed
- If you have a prosthesis on, take it off for a few minutes
- If you do not have a prosthesis on, put it on and get active
- If there is swelling, try a shrinker or ace wrap
- Use the techniques on the following: **page 7**

4) Preparing for Your Prosthesis

Here are some techniques that can help your limb feel less sensitive to touch and pressure. Please check with your doctor before starting these techniques to prevent injury.

- Massage
- Tapping
- Desensitization
- Scar Massage

Massage

Massaging your limb can be done with your compression dressing on or off.

- Using one or both hands, gently squeeze and release to massage your limb. At first, be cautious around your suture line or scar.
- Start at your suture line and massage up around your limb
- Massage at least five minutes and do this 3-4 times a day.
- After your sutures are removed and the wounds have healed, you can increase the pressure when you squeeze to massage the deeper muscles.

Tapping – What is this?

Tapping should be done for 1-2 minutes, 3-4 times a day. At first, tapping can be done with the compression dressing on or off while the sutures are in place.

- Use the soft padded parts of your fingers, not your finger nails
- Gently tap up over the suture line.
- After the suture has healed, you can increase the pressure. Use your fingers from one or both hands to gently tap the end of your limb to make you less sensitive to touch and pressure

Desensitization – What is this?

A technique that makes your limb less sensitive to the touch and the prosthetic feel less noticeable when you wear it.

- Remove any compression stockings or dressings from the limb
 - Be very careful with any scabs or open wounds. **Do NOT touch these areas.**
- This process should take 2-3 minutes and repeated 2 times a day.
- Hold a cotton ball in your hand and gently rub the cotton ball on the skin of your limb in small circles and rub your entire limb
- When you are able, use a rougher material, like a paper towel instead of a cotton ball.
- As you progress and are able, use a terry cloth towel or washcloth instead of the paper towel.
- Keep doing this until you are able to tolerate the gentle rubbing of the terry cloth.

Scar Massage – What is this?

This is done to keep your scar from getting stiff and tight.

- Before your suture line heals, **Do NOT** pressing on the scar line.
- It is best to do this when your compression dressing is off.
- Place 2 of your fingertips on the skin over the boney end of your limb
- Press firmly and move your fingers in circles across the bone. Keep making circles until you have massaged all the skin around the end of your limb.
- After your suture line has healed, place your fingers on the scar line and move in circles across your scar. Press in gently along the scar to move the skin over the tissue lying underneath.

5) Prosthetic Wearing Schedule

Your prosthesis should be worn most days unless there is a medical problem such as skin issue with an abrasion or blister. It is important to wear your prosthesis daily to help your body adapt to wearing an artificial device. However, it is critical that you stay on a wearing schedule to build a tolerance to the prosthesis. Slowly increase your wearing schedule using the chart below. You can break up the total amount of hours each day into 2 or 3 wear periods.

Day	Hours of Prosthetic Wear
Days 1-7	1 to 3 hours of wear
Day 7-14	4- 5 hours of wear
Day 14-28	6-8 hours of wear

Note: You may also choose to wear the prosthetic limb *ONLY* during physical therapy exercises for the first week.

Skin Checks:



It is extremely important to check the skin on your limb **before** and **after** each usage. If you are having trouble seeing all parts of the limb, a hand-held mirror works well. Look for abrasions or blisters, especially around the scar line, or any other sort of unusual marks that were not present prior to wearing the prosthetic. It is important to realize that you will most likely see redness initially due to new pressure on your leg. It is not usually a problem unless it lasts longer than 30 minutes. If redness persists longer than 30 minutes or another one of these problems presents itself, discontinue usage and call your prosthetist.

6) New Prosthesis Instructions

1. **Listen to Your Body:** Always follow your physical therapist and physician instructions. **Follow your wear schedule!** The first time you wear your prosthesis home, you need to remove it every 1 to 1.5 hours and inspect your residual limb carefully. As mentioned, if there are any red spots, which disappear in 10-20 minutes, do not worry. Your skin is simply reacting to new pressure areas and weight-bearing spots. If, however, the red area does not disappear in ten to twenty minutes, please call our office. We will schedule a prompt appointment. This is especially important if you are diabetic or have a vascular disease.

NOTE: Under **NO** circumstances should you ever adjust or change your prosthesis. The components have been carefully assembled, adjusted and secured according to the manufacturer's exact specifications.

It should never be changed by anyone except a qualified prosthetist. Call us if you notice a problem.

2. **Sleeping and Bathing:** Do not wear your prosthesis to bed. Put it on when you get up in the morning and take it off before taking a nap. Do not wear your prosthesis in the shower. It is important to wash your limb to prevent bacteria growth and infections.
3. **Fitment:** You will lose fit in your prosthetic socket as your residual limb changes. This is normal and, in most cases, adjustments can be made to your prosthesis to accommodate. Please read how to use sock management below.

4. **Sizing your socks:**

Figuring out the correct number of socks to apply over the liner can be tricky and will take some experimentation. A few signs that you need to add socks are the following:

- The locking pin goes straight down into the lock very quickly without resistance
- Feeling a great deal of pressure on the front or bottom of the limb. Feeling like all your weight is at the bottom.
- When walking, the prosthesis starts to rotate or turn on your leg.

Your limb will not fit completely inside the prosthetic if you have on too many socks. In this case, remove a layer of socks and try a lesser amount.

5. **Gel Liner Instructions:** Turn the liner inside out with the gel exposed on the surface. Place the tip of the liner against the limb and roll it onto the limb. There should be no wrinkles in the liner. Pay careful attention to the position of the locking pin at the end of the liner. It should be level and pointed away from the body. If the locking pin is not in the proper position, you will have a hard time fitting on the prosthesis.



- Always wear liner with prosthetic. Do not wear overnight!
- Wash gel liner after each usage. Follow procedure below:

Wash the inside of the liner with warm water and non-scented soap after each usage. Rinse well as the soap residue could cause skin irritation. Pat dry with a paper /regular towel and let dry overnight with the fabric side facing out. If the liner is not washed, there is a high risk of bacteria growth and infections.

6. **Washing:** Your shrinker and prosthetic socks are safe to machine wash. Occasionally, it is a good idea to use rubbing alcohol to clean the inside of the prosthetic. Make sure to dry before wearing it and never submerge your prosthetic in water.