



Getting Ready for an Amputation

Translated into plain language by Helen Osborne, 2006

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Getting ready for an amputation can be a scary time. For many people, it is one of the most upsetting events in their lives. The Amputee Coalition of America (ACA) can help. One way is with this fact sheet about what you can do before and after surgery.

Before Surgery

Get to know the health professionals on your surgical and rehabilitation teams. Team members can include a surgeon, anesthesiologist, physical therapist (PT), occupational therapist (OT), prosthetist, and insurance specialist. Learn about each team member's qualifications and experience. This includes his or her education, prosthetic training, and credentials. Also, find out where each person's office is and whether it is accessible to people with disabilities.

Meet with your surgeon and prosthetist. At this meeting, ask how surgery and rehabilitation can help you function at the highest possible level. This means having the best gait you can with no pain or chafing. Your surgeon or prosthetist might also talk about types of surgery, the length of your residual limb (the part that remains after amputation), and ways to reduce edema (swelling).

Make a list of questions. Bring this list to your appointments as a reminder of what to ask.

Make sure you understand the answers. If not, ask again. Here are some questions many people ask:

- Why do I need an amputation?
- What kind of amputation will I have?
- What kind of anesthesia will you use?
- How will you control my pain?
- What happens during rehabilitation?
- Will I learn to use a walker or use crutches?
- What are my prosthetic options?
- What does my health insurance pay for? Is there a yearly or lifetime limit to how much my insurance pays? Are there any costs I have to pay?

Learn about peer visitors. A peer visitor is someone about your age who has the same type of amputation as you. He or she can offer support, tell you about helpful resources, and help you succeed as an amputee. The ACA trains and certifies peer visitors. To learn more and arrange a meeting with a peer visitor, call **1-888/AMP-KNOW (888/267-5669)** or e-mail npninfo@amputee-coalition.org.

After Surgery

Use compression. After surgery, most people use compression (tight wraps) around their residual limb. This is to reduce swelling and pain. Compression also increases circulation (blood flow), which helps with healing. Here are some types of compression:

- Elastic bandage
- Elastic shrinker sock
- Plaster cast
- Immediate post-operative prosthesis (made of plaster or plastic).

Start physical therapy. Your doctor will want you to start physical therapy soon after surgery. This is to increase circulation, lessen muscle atrophy (wasting of the muscles), and prevent contractures (when joints are tight and cannot straighten out). Physical therapy can include:

- Exercises to improve range of motion
- Exercises to stretch and strengthen all your limbs
- Training to use a walker or crutches
- Training to use a wheelchair
- Training to do activities of daily living (ADLs), such as getting dressed and eating meals.

Find out about prosthetic options. You may meet with a prosthetist soon after your stitches are taken out and the wound is healed. At this time, you will talk about your prosthetic options (choices).

Your prosthetic options depend, in part, on health insurance. Medicare and some insurance companies use a grading system called the “K” level. This shows whether your prosthetic choice is medically appropriate (needed for health reasons) and if your insurance will pay for it.

Once you and your doctor choose prosthetic options, he or she will write a prescription and letter of medical necessity. Your insurance company may need to preauthorize (approve) this. It is a good idea to ask if you need to pay any costs.

Prosthetic Fitting

Your prosthetist will meet with you for a prosthetic fitting. While fittings are not all the same, here are some basics to expect:

- Your residual limb will be measured. This can be done with a casting technique, computer, or other method. A cast is then made and used as a mold for the socket.
- You will try on one or more clear plastic diagnostic sockets. This is to see which socket fits you best.

- Your final socket and components will be aligned and fit to you.
- You will then start learning to use the prosthesis. This includes how to “don” and “doff” (put on and take off) your prosthesis as well as take care of your residual limb.
- Your prosthetist will check your new prosthesis. This is to make sure it fits well and does not cause skin problems.
- The socket may need to be adjusted as your swelling goes down. Sometimes, it helps to add a sock inside your prosthesis.
- The socket and prosthesis will be made once your residual limb is at its final size. You may need minor changes from time to time. These are normal. Talk with your prosthetist if you have any questions or concerns.

Therapy After You Get a Prosthesis

After you get a prosthesis, you will have therapy with a PT, OT, or both. This therapist should work closely with your prosthetist. Here is what to expect in therapy:

- Stretching exercises
- Strengthening exercises
- Gait (walking) training, with or without assistive devices (walker, cane or crutches)

- Aerobic conditioning (to give you more energy and prevent some diseases)
- Lessons in how to manage and care for your prosthesis
- Lessons in how to care for your residual limb
- Lessons in how to care for your remaining limbs (intact limbs with no amputation)

Feelings and Emotions

Most people find that having an amputation is one of the most upsetting times in their lives. You may find comfort and support in many ways – through family, friends, faith, healthcare providers, peer visitors, and support groups. Time is often the best healer of all.

Ways to Learn More

The ACA can help as you recover from an amputation. To learn more:

- Call the ACA toll-free at **1-888/AMP-KNOW (1-888/267-5669)**
- Visit the ACA Web site at www.amputee-coalition.org

****Translated from *Points to Know and Consider When Preparing for and Undergoing an Amputation*, by Paddy Rossbach, RN, CEO of the Amputee Coalition of America (ACA).**