AS A WOUNDED COMBAT SERVICE MEMBER WHO NEEDS AN AMPUTATION, YOU WILL HAVE TO FACE MANY ISSUES DURING YOUR CARE AND REHABILITATION, THE MOST IMMEDIATE BEING THOSE RELATED TO SURGERY. HERE, WE WILL ANSWER SOME OF THE BASIC QUESTIONS ABOUT THE SURGERY OR SURGERIES THAT A TYPICAL INJURED SOLDIER MAY HAVE TO UNDERGO.

The initial surgery and treatment of your injuries has most likely been done in the theatre of operation. Certainly, having surgical elements close to the battlefield has helped many of our troops survive their injuries. The goal of a battlefield amputation is to remove all dead and severely damaged tissue while retaining as much of the limb as possible. These amputations are usually left open for two reasons. First, wounds that are sustained in battle are often heavily contaminated with dirt, debris and shrapnel, and closure at this time could put you at a very high risk for a wound infection, which could lead to an amputation at a higher level. Second, tissue that looked healthy during the initial surgery may have been compromised by the blast but will not show signs of necrosis (tissue death) until later. Most patients with battlefield injuries will undergo multiple debridements in the operating room until all of the tissue appears healthy. A debridement is the removal of unhealthy, infected, nonliving tissue, which puts the patient at risk for an infection.

**Levels of Amputation**

Your definitive amputation and closure will most likely take place at a medical center far from the battlefield, and the final level of your amputation will be decided at this point using a team approach. You are the controlling part of this decision-making team, along with your surgeons, prosthetists and therapists. The goal is to restore your limb to its preinjury function level, while maintaining as much limb length as possible. There are many possible levels of amputation in the upper and lower extremities, and the level chosen will affect your rehabilitation plan and the fitting of your prosthesis. Although in lay terms, the word
“amputation” is used to describe the removal of all or part of a limb, you may hear “amputation” more precisely defined as the removal of a limb by cutting through one or more bones and “disarticulation” defined as the removal of a limb by cutting through the joint. Your amputation or disarticulation may fall into one of the following upper- or lower-extremity categories:

**Upper extremity**
- **Transcarpal amputation** (through the hand)
- **Wrist disarticulation** (through the wrist)
- **Transradial amputation** (through the forearm)
- **Elbow disarticulation** (through the elbow)
- **Transhumeral amputation** (through the arm above the elbow)
- **Shoulder disarticulation** (at the shoulder)
- **Forequarter amputation** (above the shoulder including the shoulder blade)
- **Fingers**

**Lower extremity**
- **Transmetatarsal amputation** (through the foot)
- **Ankle disarticulation** (through the ankle – also know as a Syme amputation)
- **Transtibial amputation** (through the leg below the knee)
- **Knee disarticulation** (through the knee)
- **Transfemoral amputation** (through the thigh)
- **Hip disarticulation** (at the hip)
- **Hemipelvectomy** (above the hip to include some of the pelvis)
- **Toes**

**After Surgery**
After surgery, your limb will be in a protective, compressive dressing. It may be in a plaster splint depending on the severity of your injury. A drainage tube will usually come out through the bandages to help prevent fluid formation in your limb. This is removed after a few days. After the initial dressing is changed and your surgical team has evaluated your wound, “shrinker socks” may be applied. These specialized elastic socks help decrease the swelling in your limb, lower pain levels associated with swelling, and prepare it for prosthetic fitting.

**Pain Management**
Your pain will be closely managed after your amputation. You may have had nerve block catheters placed before your final surgery, and these catheters will help control the pain before and after the operation. They may also help decrease the phantom sensations or phantom pain that you may experience after surgery. Soon after your initial dressing change, the catheters will be removed and your pain will be controlled with a combination of intravenous and oral medications. There are many different pain control regimens, and each one is tailored to the specific patient. The important thing is to make your healthcare team aware of your pain. Everything will be done to make you comfortable.

**Physical and Occupational Therapy**
Depending on your injuries, physical and occupational therapy will start upon your arrival at the hospital and will continue after your operation. Your medical team will try to get you out of bed as soon as possible to prevent other complications, such as pneumonia or bedsores. Physical therapists and experienced members of the nursing staff will be there to make sure that you are safe when getting out of bed and to teach you to get around independently with crutches, a walker or a wheelchair.

**Ask Questions**
Most patients feel a sense of hopelessness and loss of control of their lives after losing a limb. Treatment of a combat amputee is truly a team effort, and you are the central part of that team. You can do a lot to ensure a successful outcome. Ask questions and educate yourself about amputee rehabilitation. Ignorance is the enemy. Keep in mind that it is your decision to make.

- Talk with your surgeon about the surgery and what you should expect.
- Talk openly with the amputee care team about your desires and needs. This will help them tailor your treatment to meet your needs.
- Speak with a prosthodontist about your prosthetic options.
- Meet with your physical therapist and occupational therapist to start conditioning exercises, which can help speed your recovery.
- Read educational materials that your team recommends.

Finally, talk to other amputees. There are some questions that your amputee care team will not be able to answer. Sharing your experiences with other amputees will help you conquer the obstacles that you are facing.