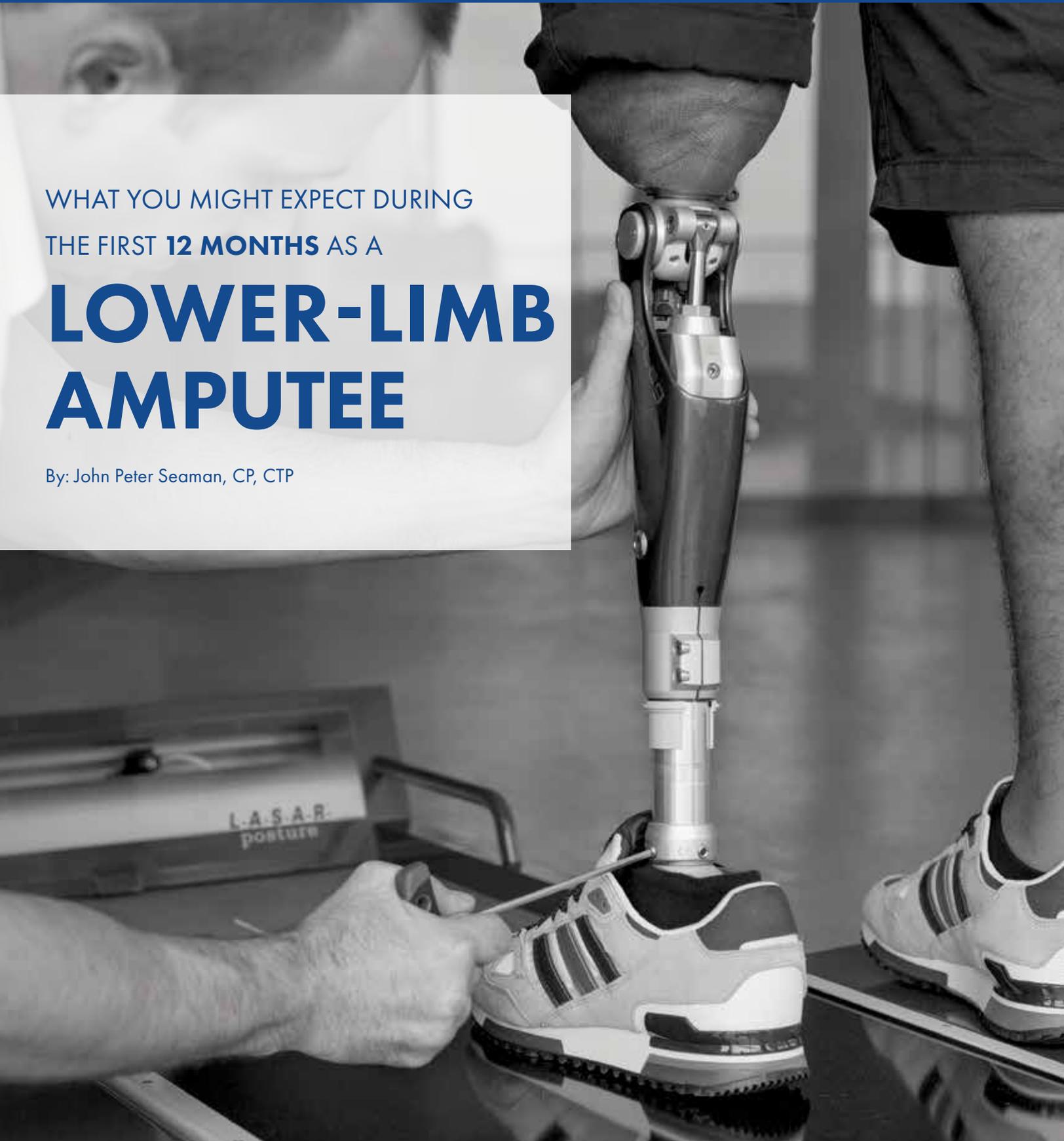


WHAT YOU MIGHT EXPECT DURING
THE FIRST **12 MONTHS** AS A

LOWER-LIMB AMPUTEE

By: John Peter Seaman, CP, CTP



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As a recent amputee, you're not alone if you feel clueless about what to expect during your first year as an amputee. While there are no set guidelines that will fit every amputee's individual situation, there are some generalities that may apply. One certainty is that you will see your prosthetist many times during your first year as an amputee, possibly as many as 15 to 20 times, if not more. For this reason, you should do everything in your power to find a prosthetist that you are comfortable with.

MONTH 1

Following your amputation, you and your residual limb will start your respective psychological and physical healing processes. Depending on how fast your limb heals, you should expect to have your stitches/staples removed within 3 to 4 weeks of your surgery. You should start pre-prosthetic physical therapy soon after your amputation, working on your upper body strength and your lower limbs to maintain good range of motion in your hips and knees and strength in your leg muscles. You should also start desensitizing your residual limb by rubbing it and manually moving your tissue around with your hands to loosen any scar tissue that might develop inside your limb. You will also meet your prosthetist multiple times, first for a consultation/evaluation and then to be fitted with a "stump shrinker" (an elastic stocking) that will start shaping your residual limb for initial prosthetic fitting.



MONTHS 2 & 3

Once your incision has completely healed, your stitches have been removed and your doctor has provided a prescription for a preparatory prosthesis, you will meet with your prosthetist to be measured and “cast.” Depending on how your prosthetist works, he or she will either cast your residual limb or create a digital image of it by scanning or taking pictures of it. Once your prosthetist has a positive model of your limb, it will be used to create a diagnostic (check or test) socket for test fitting purposes. This socket will be connected to a knee (for transfemoral amputees) or just a pylon (for transtibial amputees), which in both cases will then be connected to a prosthetic foot. When you see your prosthetist for a test fitting, it might be completed in one visit or it could take multiple visits. Once a diagnostic socket is deemed to fit “comfortably,” your preparatory socket will be

MONTHS 4 & 6

Your residual limb will continue to go through physiological changes as you use your prosthesis more, typically resulting in volume loss. If your rehabilitation process proceeds well, you might see your prosthetist on a monthly or bimonthly basis during this time period. It might become necessary for your prosthetist to fit you with a socket replacement during this time frame due to significant volume loss in your residual limb, which can cause your original preparatory socket to become too large and adversely affect its fit. If

“REGAIN STRENGTH, BALANCE, ENDURANCE AND CONFIDENCE.”

fabricated and connected to your other prosthetic componentry, resulting in your first prosthesis. Adjustments to this prosthesis may be required during the first month or two that you wear it, leading to follow-up visits to your prosthetists. After you are fitted with your first prosthesis, your doctor should provide a prescription for physical therapy. Usually, you will see a physical therapist two or three times a week for 1-hour sessions. These sessions are important to ensure that you develop good habits while you relearn how to walk, using a prosthesis. You will typically start walking using a walker as you work to regain strength, balance, endurance and confidence.

so, you may be test fit again before you are fitted with another downsized laminated socket. This process can take a few visits to your prosthetist to complete. Be aware that every socket you are fit with will feel different, which may require some getting used to and possible adjustments following fitting. If your rehabilitation has proceeded well to this point, you might not need continued physical therapy.

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MONTHS 7-9

By now, your residual limb may have stopped shrinking and reached a somewhat mature state. At this point, your physician might prescribe that you be fit with your definitive (final or permanent) prosthesis, assuming your preparatory socket no longer fits intimately. This may require test fitting again and additional visits to your prosthetist before a new laminated socket is fabricated. Your prosthetist will also incorporate componentry into your definitive prosthesis that matches your current/ and or potential level of activity, assuming your activity level has changed since originally being fit with your preparatory prosthesis. You may have

progressed through the use of a variety of assistive devices (walker to a 4-prong cane to a single-prong cane) to the point where you can ambulate without an assistive device. However, not all lower-limb amputees are able to function safely without the use of an assistive device, depending on their overall health, determination and confidence. Be aware that for some amputees, prolonged use of an assistive device can enhance safety and reduce the potential for falls.

MONTHS 10 -12

As you approach the end of the first year since your amputation, you will hopefully have become comfortable with life as an amputee: You will have mastered using a prosthesis – putting it on (donning), taking it off (doffing), making adjustments to the number of socks being worn, etc.; your phantom pain will have subsided and your phantom sensations will have lessened or become more tolerable; you will have found that you are able to do many of the activities of daily living (ADLs) that you did prior to your amputation, but possibly in different ways; and you will have established a good relationship with your prosthetist, who you've seen many times during the past year and will continue to see on a regular basis in the future.



Amputee Resources



Mission: To reach out to and empower people affected by limb loss to achieve their full potential through education, support and advocacy and to promote limb loss prevention.

Website: <http://www.amputee-coalition.org>

Southeast Oakland County Amputee Support Group Meetings

Beaumont Hospital

Rehabilitation Dining Room

East Entrance

Central Towers – 7th Floor

3601 West 13 Mile Rd.

Royal Oak, MI 48073

Contact: Kim Armitage

Phone: 248.376.7973

Email: bionicwmn1@att.net

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Amputee Resources

Attending Prosthetist: _____

Phone: _____

Email: _____

Next Appointment Date/Time: _____

Locations:

Berkley

28801 Woodward Ave.
Berkley, MI 48072
P 248.399.0030
F 248.399.0031

Detroit

In Henry Ford Hospital
2799 W. Grand Blvd.
Suite E-1225
Detroit, MI 48202
P 313.916.2201
F 313.916.9491

Grand Blanc

Genesys Orthotics and
Prosthetics
2598 Genesys Parkway
Grand Blanc, MI 48439
P 810.606.6570
F 810.606.6571

Waterford

4800 Highland Rd., Suite 1
Waterford, MI 48328
P 248.674.9600
F 248.674.9603

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