



We can provide interpreters for a variety of languages, information in larger print or other formats (e.g. audio) - please call us on 01932 723553.

To use the Text Relay service, prefix all numbers with 18001.

اگر نیاز به ترجمہ دارید، لطفاً با شماره 01932 723553 تماس بگیرید۔

ਜੇ ਤੁਹਾਨੂੰ ਤਰਜਮੇ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਇਸ ਨੰਬਰ ਤੇ فون ਕਰੋ: 01932 723553

اگر آپ اس کا اردو زبان میں ترجمہ چاہتے ہیں، تو براہ کرم اس فون نمبر 01932 723553 پر رابطہ کریں

Se precisa de uma tradução por favor contacte: 01932 723553

আপনার অনুবাদের দরকার হলে এখানে যোগাযোগ করুন : 01932 723553

यदि आपको अनुवाद की ज़रूरत है तो कृपया इस नंबर पर फोन करें: 01932 723553

Jeżeli chcemy, aby te informacje w innym języku, proszę zadzwonić 01932 723553

Ashford Hospital
London Road
Ashford, Middlesex
TW15 3AA
Tel: **01784 884488**

St. Peter's Hospital
Guildford Road
Chertsey, Surrey
KT16 0PZ.
Tel: **01932 872000**

Website: www.ashfordstpeters.nhs.uk

Rehabilitation and going home after lower limb amputation Physiotherapy Department

INTRODUCTION

This information pack is intended to give you and your next of kin some guidance about your rehabilitation and discharge home. It is designed to complement any advice the many professionals you will meet will give you.

If you have any other questions please do not hesitate to ask any member of the team looking after you.

PHYSIOTHERAPIST

A physiotherapist may see you before your operation but if this is not possible they will see you as early as the 1st day after your operation.

- They will teach you how to get out of bed and into a wheelchair as well as any other transfers which may be necessary for you to go home.
- They will teach you exercises which are essential in maintaining your strength, balance and mobility, also advise on managing your residual limb (stump).
- Supporting you with the psychological adaptation to amputation
- Facilitating wound healing
- Providing compression therapy to manage stump swelling
- Helping you regain function
- Assisting in managing your pain
- Predicting prosthetic use. A physiotherapist will discuss with you whether it is appropriate for you to be referred for prosthesis (artificial leg). The limb fitting centre for this area is at Queen Mary's Hospital in Roehampton, but there are many around the country so it is possible to refer you to your most

to swell many years after the initial operation and you may find that this device is useful whenever your stump swells.

If you are a below knee amputee try not to keep your knee bent or resting on pillows when in bed – it is essential that you make sure your knee can go straight.

Look after your remaining leg (especially if you are diabetic) and residual limb. Take care when you transfer from wheelchair to bed etc. Inspect your lower limbs regularly and act on any areas of broken skin, bumps and scrapes. Inaction may slow down your rehabilitation or, in the future, prevent you from wearing your prosthesis if you have one. If you are unsure about anything consult a Health care Professional.

**Please note this is an advisory leaflet only.
Your experiences may differ from those described.**

Further Information

We endeavour to provide an excellent service at all times, but should you have any concerns please, in the first instance, raise these with the Matron, Senior Nurse or Manager on duty. If they cannot resolve your concern, please contact our Patient Experience Team on 01932 723553 or email patient.advice@asph.nhs.uk. If you remain concerned, the team can also advise upon how to make a formal complaint.

Author: Heather Pursey / Ruth Linstead **Department:** Physiotherapy and Occupational Therapy

Version: 2

Published: Dec 2016

Review: Dec 2018

Mobility Centre – Queen Elizabeth’s Foundation

(For car adaptations)

Leatherhead Court

Leatherhead

Surrey KT22 0BN

Fax: 01372 844657

E-mail: webmaster@gefd.org

Tel: 01372 841100

TAKE CARE OF YOUR REMAINING LIMB AND YOUR RESIDUAL LIMB/STUMP

After your amputation and with the dressing still in place you should start to handle your residual limb. It will be necessary to monitor the condition of your skin from now on so it is important you get used to touching and handling your limb.

It is not unusual to feel that your limb is still there. These are called phantom sensations and are perfectly normal. Handling your stump may help. Occasionally amputees suffer from phantom pain; if so discuss with the team looking after you as there are options to help you manage this.

You may find that your residual limb becomes swollen. This is normal after surgery. It is advisable to keep your limb elevated as much as possible. On your wheelchair you may be given a stump board - keep your limb on it, **DO NOT** allow your leg to hang down for long periods of time.

Once your wound has healed, your physiotherapist will measure you and issue you with a “Stump Shrinkage sock”. This is designed to help with the swelling. It is not uncommon for stumps

local centre (There is a specific information booklet about Roehampton that, if you are referred there, your physiotherapist can supply).

- Discharge planning. If appropriate, you will continue to attend outpatient physiotherapy for further rehabilitation-this will be discussed with you and arrangements made as necessary.

MOBILITY

We **DO NOT ADVISE YOU TO HOP** (with or without a walking aid) on your remaining leg for several reasons:

1. Hopping can be exhausting and as a result of this you can be at risk of falls which may lead to injury which in turn may slow down your rehabilitation.
2. The repeated pressure you put down through your remaining leg could cause injury/ soft tissue to break down, which again may slow down your rehabilitation.
3. Your stump is at risk of becoming more oedematous (swollen) as it is hanging down, this in turn may slow down healing or prevent you from wearing your prosthesis.

To enable you to move around you are issued with a wheelchair.

OCCUPATIONAL THERAPIST (OT)

An OT will meet you soon after your operation when, if appropriate, he/she will assess you for a wheelchair. Until you are provided with a long-term wheelchair of your own, you will be able to borrow a hospital one.

Prior to your discharge home the OT may decide it is necessary to carry out an Access visit to assess and advise on using your wheelchair at home. OT will also assess any need for equipment to help maintain and support your independence when you return home.

WILL I BE SUITABLE FOR PROSTHETIC (ARTIFICIAL) LIMB?

Using a prosthesis requires a lot of physical effort and previous physical ability can influence your final ability to walk with a prosthetic limb and therefore it is important to keep/get yourself as fit and as strong as possible.

If you are able to achieve the following, then you may be suitable for prosthetic rehabilitation

- Understand the importance of safe wheelchair drill, e.g. brakes, positioning of chair, removal of sides/stump board/footplates and be completely independent in using your wheelchair indoors.
- Using a standing pivot transfer, you should be able to transfer independently to and fro from wheelchair to bed/chair/toilet and back.
- Push up from sitting in wheelchair to stand independently in the parallel bars.
- Have independent standing balance within parallel bars for at least 5 minutes.
- Achieve a hip/knee flexion contracture of less than 25°



- You must be able to follow instructions, process new information and remember it over a period of time.
- Be able to mobilise in the parallel bars with the aid of the PPAM (Pneumatic Post Amputation Mobility) aid. You should be able to achieve 6-10 lengths, repeatedly.

(Devised by BACPAR South Thames Region January 2004)

WHEN WILL YOU GO HOME?

Once the team looking after you are happy and you have all the equipment necessary you will be discharged from hospital, most people go home 5-10 days after the operation. Some people require assistance from carers when they first go home-if this is necessary it will be discussed with you.

As a result of your reduced mobility it may be necessary, if you live in a house, to bring your bed downstairs. Hopefully this will only be temporary as once you have prosthesis you should be able to manage the stairs again.

It may be necessary, before you return home, to have further rehabilitation and you may then be referred on to a rehabilitation hospital. Of course this will be discussed with you first if appropriate.

Driving

This may be possible with an amputation, either with an automatic car, or with some special modifications. Remember you may have to let the DVLA and your insurance company know about your change in circumstances.