Below and Above the Knee Amputations
What You Need to Know about Limb Loss

This handout will tell you how to take care of yourself at home after your Below the Knee Amputation (BKA) or Above the Knee Amputation (AKA). Your nurse will review this sheet with you before you go home.

When to Call Your Doctor

When you do your dressing change daily, look at your incision site for signs of infection or breakdown. Call your doctor if you have these signs of infection or skin breakdown.

- An increase in redness at the site or red streaks on your skin that extend from the site.
- Increased warmth around the site.
- Increased pain that becomes constant or tenderness around the site.
- Bulging or swelling at the site.
- New drainage or bleeding from your site (drainage may be cloudy, yellow, or foul-smelling).
- Open spots between the stitches where the skin is pulling apart (dehiscence).
- A temperature of more than 101.5° F (38.5° C), by mouth; taken twice 4 hours apart.
- If you notice the skin along the site is getting darker or turning black.

With these symptoms you should contact a doctor right away (go to the emergency room if your doctor cannot be reached).
- Sudden increase in pain that is not controlled by your pain medicine.
- Uncontrollable bleeding from incision or anywhere else.
- Sudden increase in tenderness or swelling in leg.
- Sudden increase in redness, warmth, or even a bluish skin discoloration in leg.
- Chest pain, shortness of breath, a rapid pulse and/or rapid breathing.

Care of the Incision

1. Look at your entire leg, front and back, each day. Use a mirror to look for skin abrasions, blisters, or red marks. Do not pop blisters!
2. Wash your leg and incision everyday. It is very important to keep the leg clean.
   - Do not soak the leg.
   - Use warm water.
   - Use mild soaps without fragrance (Example: Dial® soap).
3. Apply a telfa to the incision and secure with paper tape.
4. Wear ace wraps or a shrinker sock at all times. If you are using ace wraps, rewrap every 2-4 hours while awake, to compress the stump. Make sure there are no creases. Wear a leg protector (rigid removable dressing) as instructed by your physical therapist.
   - This will help to reduce swelling to speed up healing and to shape the stump in preparation for a prosthesis.
Activity

Your doctor would like you to keep doing your exercises the way you learned in Physical and Occupational Therapy. You may notice that you tire quickly as you do more. This is normal. It should lessen as you get your strength and energy back. Take rest periods as needed but be as active as you can be to maintain your strength. Activity and exercise are important in preparing for your prosthesis and keeping muscle.

Pain Control

It is normal to have pain at the incision site. Your doctor may have prescribed pain medicine for you to use at home. Your pain should lessen over time and may be managed with something you can buy over-the-counter. Be sure to ask your doctor which is best for you.

You may also have one or both of the problems listed here.

- **Phantom sensation** is the feeling that you still have the amputated part (leg or toe). Often, only the farthest part is felt, and although not painful, there may be tingling, numbness, or pressure. It may disappear as you get stronger, or it may last throughout life. Almost all people who have had an amputation have phantom sensation.

- **Phantom pain** is actual pain (most often the burning, cramping, squeezing, or shooting type) in the amputated part. It may be present all the time or it may come and go. Phantom pain may be relieved with pain medicine. If severe phantom pain is a problem for you, talk to your doctor about something else for pain relief. Many people report they have more relief from the medicine called Neurontin, which your doctor can discuss with you.

  • (Please refer to *Health Facts For You: Neuropathic Pain*)

Diet

You may resume your regular diet when you return home. You should avoid constipation. Decreased activity as well as some prescription pain medicines can cause constipation.

You can try to prevent constipation by trying these methods:

- Eat foods high in fiber (whole grain breads and cereals, fresh fruit and vegetables)

  • (Please refer to *Health Facts for You: Constipation*).

If these do not work, an over-the-counter stool softener or laxative (something that loosens and softens bowels) may be used. If the problems do not go away, call your doctor.

Care of Your Other Leg

If you have diabetes or have peripheral vascular disease, it is important to take good care of your other leg and foot and protect it from injury.

**Ways to care for other leg:**

- Look at legs and feet daily for sores, scratches, cracks, blisters or reddened areas. Report them to your doctor or nurse.
- Wash your legs and feet daily with mild soap and water. Avoid soaking. Dry well.
- Put lotion on dry skin daily. Do not put lotion between your toes.
- Let a doctor or nurse clip your toenails or show you how to clip toenails.
- Wear shoes that fit well.
- Wear white cotton or wool socks.
- Check shoes and socks for stones,
sharp things, or holes.
• Do not use heating pads or hot water bottles on legs or feet.
• Never go barefoot.
• Ask for a mirror if you are not able to see your foot.

Are You at Risk for Poor Blood Flow to the Legs and Feet?

You are more likely to have poor blood flow to the legs if you:
• Smoke
• Have high blood pressure
• Have high cholesterol
• Have diabetes
• Are over age 50
• Do not exercise
• Have heart disease in your family

Phone Numbers

Peripheral Vascular Surgery (PVS) clinic at (608) 263-0186

After hours, call paging at (608) 263-6400. Ask for the vascular surgery physician on call. Leave your name and phone number with the area code. The doctor will call you back.

If you live out of the area, call 1-800-323-8942.

References

Constipation - www.medicinenet.com