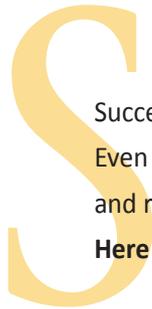


10 Tips

to Improve

Your Prosthetic Outcome

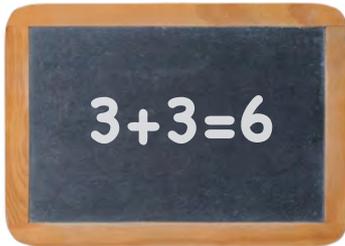
by Pete Seaman, CP



Successful prosthesis use involves a 50/50 effort between you and your prosthetist. Even longtime prosthesis wearers can experience minor problems, but communication and regular maintenance can usually prevent the little problems from becoming big ones. Here are 10 tips for improving your outcome as a lower-limb prosthetic user.

1. **See your primary care physician (PCP) at least every six months;** be sure to discuss the condition of your residual limb and

the function of your prosthesis. If you have prosthetic needs, such as new liners, socks or shrinkers or if your socket no longer fits properly, causing discomfort or instability, inform your PCP, who can write a prescription for you.



2. **You need to be informed about the terms of your medical insurance coverage,**

whether you're insured by Medicare, Medicaid or other private insurance. You should understand what your deductibles and co-pays are, and that if you only have a primary insurer, you may be able to buy a secondary coverage policy so that more of your prosthetic expenses are covered when you need them.



3. **Know what your K-level is and how it affects the components your prosthetist can use when fabricating your**

prosthesis. K-levels are defined by Medicare and are used throughout the medical insurance community to define an amputee's mobility level. They are determined by your PCP and prosthetist and they range from K-0 to K-4, with K-4 being a very active/athletic individual or an active child. You should discuss your K-level with your prosthetist and your PCP and make sure it is documented in their notes.

4. **Even if you think nothing is wrong, you should see your prosthetist at least every three months**

to have your residual limb and prosthesis checked.

Between scheduled visits to your prosthetist, if you notice something is wrong with your limb or prosthesis, schedule an appointment.

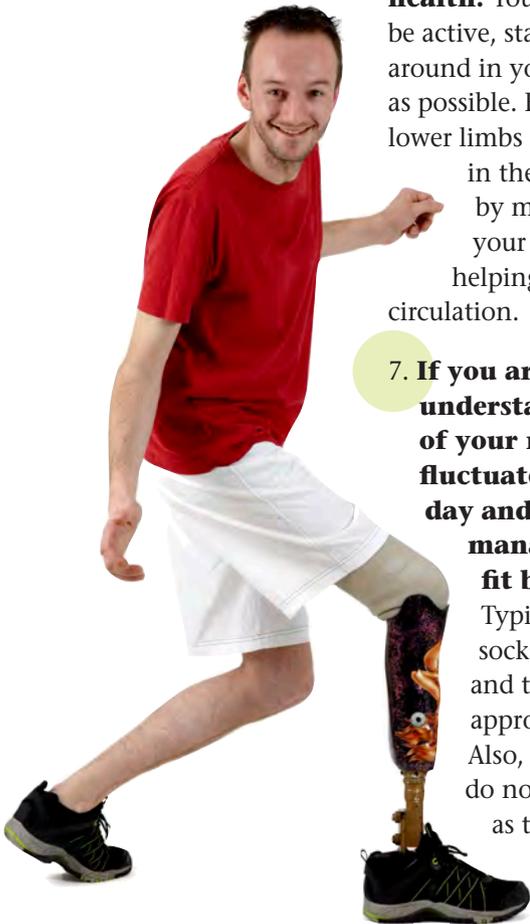


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5. Good hygiene is very important for lower-limb amputees, especially as it relates to your limb and daily cleaning of the inside of your liners. Pay particular attention to your sound foot and leg to make sure they do not cause you problems down the road. Cracks in dry skin, blisters and ulcers can all lead to infection and possible amputation surgery.



6. Just wearing your prosthesis all day while sitting around the house or moving about in a wheelchair does not do much good for your overall health. You should strive to be active, standing and walking around in your prosthesis as much as possible. Blood circulation in the lower limbs is often compromised in the case of diabetics; by moving around on your prosthesis, you are helping to promote increased circulation.



7. If you are a dialysis patient, understand that the volume of your residual limb will fluctuate from day-to-day and you will have to manage your socket fit by using socks. Typically, you'll need more socks right after dialysis and then fewer socks as you approach your next session. Also, if you take diuretics, do not skip your medication, as this will also affect your limb volume and socket fit.

8. Sock-ply management is critical for lower-limb amputees. It's natural for your residual limb to change size and shape following your amputation and you can use different sock-ply configurations to help maintain a good socket fit. Combinations of full-length and/or partial length socks may be required to maintain optimal fit. You need to experiment and be willing to make sock adjustments multiple times a day if necessary. Try to maintain consistent body weight, as this can help to maintain comfortable socket fit. However, if, for example, after being fit with your prosthesis you become more active, resulting in weight loss, that's not a bad thing. Just be sure to stay in touch with your PCP and prosthetist in the event you need a smaller socket.



9. Liners don't last forever. They can wear out in spots, causing the gel to thin and become less protective, leading to possible skin breakdown. Typically, insurance will cover the expense of two new liners every 12 months.

10. If you are a diabetic, seriously consider making dramatic lifestyle changes (diet and exercise), under the oversight of your PCP, to reduce your dependency on multiple medications that can have adverse long-term effects on your body.



>> *You should strive to be active, standing and walking around in your prosthesis as much as possible.*