# Amputation Below the Knee CareMap

**For __________________**

## Getting Ready for Surgery

### Planning for surgery:
- **Visits with:**
  - Your surgeon
  - Your rehab clinic team
  - Your anesthesiologist to talk about the medicines you will receive during surgery
  - Tell your primary care provider (PCP) about your surgery. Please tell your clinic nurse if you do not have a PCP.
- Consider going to the Amputee Support Group on Tuesdays.

### Planning for being away from home:
- You will be away from home for at least 4 days. Make plans to cover these tasks while you are away:
  - Child care
  - Pet care
  - Paying bills
  - Taking care of your house
- If you have concerns about where you will go when you leave the hospital, tell your care team. They will set up a time for you to talk with a social worker.

### Planning for your return home:
- During recovery, your ability to get around will be limited. You may need someone to help with daily living.
- Set up your home so that you do not need to use stairs.
- You will need a mobility device to help you get around. Your Physical Therapist in the hospital will help you decide what device is best for your needs.

## Day Before Surgery

- Pack for your hospital stay. Ask your family or friends to bring your belongings once you have settled into your hospital room after surgery.

### What to bring (if needed):
- C-PAP machine
- List of medicines you now take
- Walker, wheelchair, cane, or other mobility devices you have
- Hearing aid, glasses, dentures
- Books, magazines, or other things you can do while resting in bed

### What your family can bring:
- Money for discharge prescription co-pay (cash, charge, or debit card)
- Electronic devices

### Do not bring:
- Medicines, unless you were told to bring them
- Jewelry and other valuables

## Night Before Surgery

- Take a shower or bath using the antibacterial soap you received at your pre-surgery visit.
- **Starting 8 hours before you arrive for surgery:** Do not eat meat or food that is high in fat.
- **Starting 6 hours before you arrive for surgery:** Do not eat anything. You may drink clear liquids (drinks you can see through) up until 2 hours before your arrival for surgery. These include water, tea or coffee (without milk), clear juices, and broth.
**Surgery Day**

**Before You Leave Home**
- Take another shower or bath with the antibacterial soap.
- Take your daily medicines as you were told, with sips of clear liquid.

**Starting 2 hours before you arrive for surgery:**
- Do **not** eat or drink anything.

**At the Hospital**
- Check in at Surgery Registration on the ground floor of the Maleng Building (level G).
- A nurse will call you to come to the pre-op area.
- If you have diabetes, we will check your blood sugar.
- An intravenous (IV) tube will be placed in your arm to give you fluids, antibiotics, and pain medicine.
- Your nose will be swabbed with antiseptic. This will help reduce your risk of infection after surgery.
- You will be given a heating blanket to keep you warm, improve healing, and lower the risk of infection. Keep the blanket on even if you feel warm enough.
- Your surgeon will visit with you to answer any questions
- The Anesthesiology Team will:
  - Talk with you about the pain medicines you will receive during surgery.
  - Take you to the operating room for your surgery.

**After Surgery**
- You will:
  - Be moved to a bed in a hospital unit.
  - Have an IV in your arm to give you fluids, antibiotics and pain medicine, if needed.
  - May have a tube (catheter) in your bladder to drain urine.
  - Have a rigid dressing, such as a cast or splint.
  - Be given injections 2 times a day to prevent blood clots. You will need these injections for 6 weeks.
  - You may also have a nerve catheter to help with pain control.
- Your nurse will help you:
  - Position yourself for best comfort. Avoid using pillows under your knees or hips.
  - Lay flat on your back or stomach for 30 minutes 3 times a day to help keep your joints flexible.
  - Get out of bed 3 times a day.
  - Learn breathing exercises to prevent lung infection (*pneumonia*).
  - Use your *incentive spirometer* (breathing device) and remind you to use it 10 times each hour every day while you are in the hospital.
- Return to your regular diet as you feel able.
Days 1 to 4 After Surgery

**Hospital Stay**
- At first, your pain will be managed by:
  - A nerve catheter, if your doctor prescribes it.
  - IV and oral medicines
  - Non-medicine methods
- Your Physical Therapist will help you start an exercise program that you can do in bed.
- Your team will care for your dressing(s).
- Your IV pain medicine will be stopped and you will start to take pain medicine by mouth every day.
- If you have a urine catheter, it will be removed. Your nurse will help you use the bedside commode.
- Lay flat for 30 minutes 3 times a day to help keep your joints flexible.
- Get out of bed 3 times a day.
- Avoid using pillows under your knees and hips.
- Your nurse will help you go to the Amputee Support Group on Tuesdays.
- Your team will talk with you about plans for safely leaving the hospital.
- If you have a nerve catheter, it will be removed.

**Care Providers Who May Visit You**
- **Surgeon** to check on your dressing and recovery
- **Pain Medicine Specialist** to adjust your pain control medicines
- **Prosthetics and Orthotics** to teach you about artificial limbs
- **Rehabilitation Psychology** to help you adjust to your amputation
- **Rehabilitation Medicine Doctor** to help you plan for rehab
- **Social Work** to help with discharge planning
- **Physical Therapist** to help with mobility, exercise, and equipment you can use to help you get around
- **Occupational Therapist** to teach you about daily self-care and to help you assess the safety of your home
### Day 5: Discharge Day

You will:
- Receive your mobility equipment
- Learn about your medicines
- Talk about your home pain plan with your nurse
- Receive a schedule of your follow-up visits with your surgeon and the Rehab Amputee Clinic Team

### Weeks 1 to 6 After Discharge

- **Week 1 to 6:** Weekly visits in the Rehab Amputee Clinic to:
  - Change your rigid dressing
  - Inspect your incision
  - Help you taper your prescription pain medicines and adjust other medicines as needed

  You will also meet with your surgeon in **week 1 or 2 to review your healing progress**

If your healing goes as expected:
- **Week 3:** Physical Therapy visit for mobility and exercise program
- **Week 4:** Remove half of the sutures
- **Week 5:** Remove the remaining sutures
- **Week 6:** After the cast is removed you will be given a shrinker sock to help reduce swelling

  You will also work with Prosthetics and Orthotics to begin making your prosthesis.

Your Rehab Team can also help with:
- Therapy for pain management
- Return to driving
- Return to work
- Coping and emotional support

### Questions or Concerns?

**Before surgery:**
- Until 4 p.m. the day before surgery, call the Patient Care Coordinator at 206.744._________
- From 4 p.m. to 6 p.m. on the day before surgery, call the Ambulatory Surgery Unit at 206.744.5432
- After 6 p.m. the night before surgery, call the Operating Room at 206.744.8800

**After discharge:**
- Weekdays from 8 a.m. to 4 p.m., call ______________________________
- Evenings, weekends, and holidays, call ______________________________