

## AMPUTEE REHABILITATION CONTINUUM

| Surgical Amputation | Post Surgery 1 Week  | 2-4 Weeks                                | 3-6 Weeks  | 4-8 Weeks   | 6-12 Weeks                         | 6-18 Weeks   | 10-18 Weeks       | 3-4 Months  | 3 ½-4 ½ Months   |
|---------------------|--|--|--|---|------------------------------------|--|-------------------|---|--|
| Acute Care Hospital | Inpatient Rehabilitation   | Discharge Home or Extended Care Facility | Home Health or OP Services   | IP/OP Prosthetic Training with Temporary Prosthesis   | Discharge Home from Rehabilitation | Continue with Home Health or OP Services   | Discharge from PT | Receive Permanent Prosthesis Possible OP PT   | Discharge from PT  |
|                     | <ul style="list-style-type: none"> <li>• Edema control</li> <li>• Shaping of limb to prepare for prosthesis</li> <li>• Improve and maintain ROM/strength</li> <li>• Teach and improve functional mobility</li> <li>• Pain management</li> <li>• Limb desensitization</li> <li>• Improve Activities of Daily Living</li> <li>• Education</li> <li>• Positioning to prevent contracture</li> <li>• Wound Care</li> <li>• Assess uninvolved limb integrity</li> <li>• Balance, Coordination, Agility</li> <li>• Assess home and patient needs upon DC</li> <li>• Arrange continued services</li> <li>• Community reintegration</li> <li>• Recommend support groups</li> <li>• Family training</li> <li>• Dietician consults as needed</li> <li>• Order DME</li> </ul> |  | <ul style="list-style-type: none"> <li>• Edema control</li> <li>• Shaping of limb to prepare for prosthesis</li> <li>• Continue with strengthening and ROM</li> <li>• Continue to educate</li> </ul> | <ul style="list-style-type: none"> <li>• Begin wearing prosthesis</li> <li>• Teach to don and doff prosthesis</li> <li>• Gait Training</li> <li>• Desensitization</li> <li>• Pain Management</li> <li>• Work with prosthetist for adjustments</li> <li>• Teach limb care</li> <li>• Strengthening, energy conservation, work simplification</li> <li>• Improve balance, agility, coordination</li> <li>• Teach functional mobility on all surfaces</li> <li>• Educate on sock ply, edema control and hygiene of prosthesis, socks and skin</li> <li>• Teach safety in home</li> <li>• ROM as needed</li> <li>• Diabetic dietary needs</li> <li>• Equipment needs</li> <li>• Family Training</li> <li>• Supply support group information</li> <li>• Arrange continued services</li> <li>• Order DME</li> </ul> |                                    | <ul style="list-style-type: none"> <li>• Gait Training</li> <li>• Functional mobility</li> <li>• Strengthening and ROM</li> <li>• Balance and agility</li> <li>• Continue to educate</li> <li>• Return to vocational and avocational activities</li> <li>• Community re-entry</li> </ul> |                   | <ul style="list-style-type: none"> <li>• Possible outpatient PT to refine gait pattern</li> </ul> | <ul style="list-style-type: none"> <li>• Follow up with prosthetist as needed</li> </ul> |

DC = Discharge  
 ROM = Range of Motion  
 DME = Durable Medical Equipment  
 Don = Putting on  
 Doff = Taking off  
 IP = Inpatient  
 OP = Outpatient  
 Gait Training = Teaching to walk  
 Contracture = Limited joint motion