## **INFORMATION ON POST AMPUTATION**

# WOUND DRESSINGS

# Therapy Goals

When working with a patient immediately following an amputation, there are certain goals that occupational therapy practitioners should consider. Maintenance of range of motion, prevention of contractures, early mobilization, and functional mobility training are areas that should be covered during the postoperative timeframe.

(Kwasniewski et al., 2022)

# **Types of Dressings**

**Soft:** non-adherent dressing with gauze pads and wrapping Benefit: easy inspection of the incision site Risk: not as compressive as other options

**Semiridgid:** zink coated gauze

<u>Benefits:</u> provides more protection and more compression <u>Risk:</u> requires skin checks only every 3 days

**Ridgid:** plaster cast applied to residual limb

<u>Benefit:</u> good control of excess fluid in residual limb

<u>Risk:</u> high risk for pressure injuries can delay infection
detection

(Kwasniewski et al., 2022; Rossbach, 2015)

#### **Contractures**

To prevent contractures from happening, it is best to keep the joint in full extension. It can also be helpful to provide range of motion exercises as wound healing permits. If an incision crosses a joint, educate and provide reminders to patients not to place a pillow underneath the area. (Esquenazi & DiGiacomo, 2001;

uenazi & DiGiacomo, 2001; Kwasniewski et al., 2022; Standard of Care, 2011)

### Postoperative Dressing Order

There is not a protocol for every postoperative amputation as the dressings are individualized on the patient and wound needs. The surgeon should be consulted for what protocol they have chosen for the patient. A general rule of thumb that is followed is listed below:

- Non-adherent dressing on the incision
- Sterile gauze pad(s)
- Rolled gauze to hold what is listed above in place
- Compression wrapping

An important reminder is that occupational therapy is responsible for educating the patient on how to don/doff the compression wrapping before going home.

(Kwasniewski et al., 2022)

# References

Esquenazi, A., & DiGiacomo, R. (2001). Rehabilitation after amputation. Journal of American Podiatic Medical Association 91(1):13-22. https://doi-org:10.7547/87507315-91-1-13

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