



LOWER EXTREMITY AMPUTATIONS: DISCHARGE INSTRUCTIONS

GUIDELINES

These are general instructions. Special instructions for you may be included in the hospital discharge paperwork.

MEDICATIONS:

You will be started back on your pre-operative medications on the day after surgery. Discharge medications will include most of those medications that you were taking prior to your surgery. The health care team will review your medications before your discharge. If you are a diabetic, all of your hypoglycemic medications will be restarted within 24 hours of the time of surgery.

Call us if you think your medicines are not helping or if you feel you are having side effects. Keep a written list of your medications and carry it with you. Bring all medicines to any appointments.

PAIN CONTROL:

You need to achieve and maintain adequate post-operative pain control, so that you can perform functional activities. If you have some mild discomfort, take acetaminophen, aspirin, or ibuprofen to ease the pain as recommended by your licensed healthcare provider.

ACTIVITY:

Physical Therapy and Occupational Therapy will be assigned to work with you and they will evaluate your exercises and range of motion. At home, the more activity that you engage in, the better. Physical Therapy and Occupational Therapy may assess for your safety at home and may set up an activity / exercise program for you. It is important to maintain your range of motion and hip / knee joint flexibility, in order to prepare for prosthetic training.

You may shower, but do not soak your leg incision for at least 4 weeks or until you have seen your vascular surgeon. Avoid lifting more than 10 pounds (nothing heavier than a gallon of milk) for at least two weeks after surgery. After that time, you may lift up to fifty pounds but be careful.

If you smoke, please quit. Smoking can increase your risk of having a heart attack, lung disease, cancer or make your vascular problem worse.

DRESSING:

Cover the leg incision with Vaseline gauze or Xeroform for the first 5 days after discharge, then transition to just a dry 4 inch by 4 inch gauze, wrapped in Kerlix, and then covered with an Ace Wrap. After 2 weeks, you may leave the amputation site open to air. Staples and / or sutures usually come out in 2 to 3 weeks.

DIET:

You may return to the diet you had before your admission. It is important that you get adequate protein and calories for at least 6 weeks after your surgery. A diet low in saturated fat and cholesterol, and high in vegetables, fruits and whole grains, will be important for the rest of your life. Drink at least six (6) cups of water per day, or as directed otherwise by your doctor.

FOLLOW UP:

Be sure you understand your follow-up visit schedule. Keep all appointments. Write down any questions you may have. This way you will remember to ask these questions during your visit.

CALL US, IF ANY ONE OF THE FOLLOWING OCCUR:

- Increased redness, swelling, pain, and / or drainage in the stump site.
- Opening (spreading apart) of the incision edges.
- A temperature that is 101 degrees, for more than 8 hours.

Phone: 434-243-6828, between 8:00 am and 4:30 pm

434-924-0000, for evenings, nights, and weekends.

Ask to speak with the Vascular Resident on call

SEEK EMERGENCY CARE IMMEDIATELY IF:

- Accidental fall on the leg incision.
- Drainage of foul-smelling, cloudy fluid from the leg amputation stump.
- Severe pain in the stump site.