



**University
Hospitals Sussex**
NHS Foundation Trust

Following amputation

Patient information

The purpose of this leaflet is to help you understand what to expect from your hospital stay following an amputation.

It will give your family and support network a greater understanding about what to expect before and after limb loss. It is important to remember that everyone is different and will have different experiences after a limb loss.

Who will be involved in my care?

Doctors

You will have a team of doctors that will see you regularly whilst you are in the hospital to monitor your recovery and manage any medical problems. On discharge you may be given an outpatient appointment to see your consultant but your day to day care will be handed over to your GP.

Nurses

The nurses will take care of you from the day you are admitted until the day you leave hospital. They will be there to help and advise you with personal hygiene, wound care and monitoring the condition of your skin. They are also your link with other staff involved with your care.

Vascular Nurse Specialist

This nurse specialises in your care. They are there to provide advice for you and the ward staff about your treatment. They also provide a link between you and other staff until you are discharged from hospital.

Podiatrist

A podiatrist can advise you on the treatment and care of your remaining foot. This is especially important if you have diabetes. You can ask your GP to refer you to your local NHS podiatrist.

Occupational Therapist (OT)

Will assess that you can manage your daily activities safely, such as washing, dressing and meal preparation. They will order your wheelchair and arrange any equipment you might need when you first go home. They may visit your home to support with planning for your discharge. OT will support you to decide what activities are most important to you to be able to return home so that you can live as independently as possible. They will also arrange any care support that you may need.

Physiotherapist (PT)

The Physiotherapist will help you regain your strength and confidence following surgery. You will be given an exercise programme for muscle strengthening and general fitness. They will practice transfers with you and any other tasks that you may need to be able to do at home. They will support you to progress through your exercise program whilst in hospital to ensure that you will be safe to return home.

Before your surgery

Once you have been admitted to hospital and you and the doctors have discussed an amputation, you will be seen by an Occupational Therapist and Physiotherapist for a pre-op assessment. They will ask you about how you are feeling, if you or your family have any questions and they will ask you about your home life and how you have been managing before your admission. The Occupational Therapist will ask you questions about your home and ask you if consent to have an access visit completed, as well as taking measurements to arrange a wheelchair for you.

The Physiotherapist will assess what your current mobility is as well as your strength and range of movement in your arms and remaining leg. This can help after surgery when teaching you how to get in and out of bed.

You are likely to be put on a pressure relieving mattress to help prevent any pressure sores.

After your surgery

Initially after surgery you may feel groggy and disorientated but this is normal. You will be monitored closely for the first few hours after surgery. You may also notice some lines and tubes such as:

- A drip in your arm for fluid/ medication
- Pain relief: local anaesthetic (LA), patient controlled analgesia (PCA), or epidural.
- Catheter: a tube that goes directly into your bladder. This tends to be removed once you are more mobile.
- A drain tube from you amputation site. This is to remove unwanted fluid while you are in your first few days of healing.

What happens during rehabilitation in hospital?

The OT and PT will come and see you the day after your surgery to see how you are feeling and answer any further questions that you may have (If they were unable to complete the pre-op assessment before surgery they may do this now).

What will physiotherapy help me with?

After your operation, it is important to start moving around as soon as possible to help prevent post-operative complications, such as blood clots, chest infections and pressure sores. A physiotherapist will teach you exercises to reduce the risk of muscle weakness and joint stiffness. They will continue to check that you are exercising correctly and, working alongside an occupational therapist (OT), will teach you safe ways to get in and out of bed and use a toilet or commode. The OT can also help you to practice everyday activities, such as washing, dressing and other household tasks.

What will occupational therapy help me with?

Before you are discharged, the occupational therapist (OT) will help you to adapt to your home environment, ensuring that you can live as independently as possible.

The OT may complete a home visit while you are recovering in hospital. The purpose of this is to establish if there is adequate space for you to use a wheelchair throughout your property. We advise that you are based on one level, ideally downstairs, with access to a bed, toilet and washing facilities. The OT can provide a commode, and if there is no access to a bathroom then we recommended that hygiene needs are met with a sink or washbowl.

The OT cannot provide stair lifts, access ramps or wet rooms but can refer your case to social services for an assessment on more significant adaptations, if appropriate, as these are not considered a condition of discharge.

Wheelchair

The OT will provide you with a wheelchair with a pressure relieving cushion whilst you are in the hospital. The wheelchair will be your safest way of getting around after your surgery, especially during the early stages.

It is not advised to use crutches or walking frame to hop on your remaining leg. This can cause damage to your leg and put you at higher risk of having an accident. The OT and PT may assess you with crutches or a frame if it is for only a short distance for example: your wheelchair will not fit into your bathroom and you need to be able to get to the toilet. Please discuss this with your OT and PT.

How to look after your residual limb

Any swelling of your residual limb will cause a delay in the healing process and can increase pain and stiffness. Resting your stump on a bed or chair will support healing and reduce swelling. Avoid hanging your stump over the edge of the bed or chair. If required the OT will provide a stump support for your wheelchair, this will help reduce any swelling and protect your stump from accidental knocks.

When lying in bed do not rest your stump on a pillow. This can cause the knee and hip to become stiff and fixed in a bent position. This makes rehabilitation more difficult and can also delay prosthesis fitting in the future.

When can I go home from hospital?

The doctors will want to look at your wound around five days after surgery and if they are happy with the healing of your wound they will make you medically ready for discharge. This does not necessarily mean you are ready to go home as there are a number of things that need to be done before this.

You might need more time to regain strength and independence. In this case, we have inpatient rehabilitation facilities across Sussex that we might refer you to. We try to get you to a facility in your local area however this may not be possible, depending on which centres have bed availability. Unfortunately, we are unable to say exactly where you will go at the point of referral. During this time you will continue to be seen by OT/PT until you leave.

The doctors may also refer you back to your local hospital to continue your care closer to home. If you are transferred, you will continue to be seen by doctors, OT and PT whilst there.

You might also progress to independence with transfers and managing personal care tasks. Your home may be well set up for you before surgery. If this is the case the OT and PT might look at getting you straight home. If needed, you may be referred for further physiotherapy or occupational therapy support at home. Some people may need support from carers when being discharged home. This will be assessed whilst you are in hospital.

On discharge you will also be referred to Sussex Rehab Limb Centre where you will be able to explore getting a prosthetic limb. They will contact you about an appointment.

Useful contacts

Occupational Therapy

Royal Sussex County Hospital, Eastern Road, Brighton, BN2 5BE

Phone: **01273 696955 Ext: 67467**

Sussex Rehabilitation Centre

(Limb Centre)

Brighton General Hospital, Elm Grove, Brighton BN2 3EX

Phone: **01273 242160**

Limbless Association

Provide support to amputees and the limb-loss community.

Advice on managing as an amputee and exercise opportunities.

Unit 10, Waterhouse Business Centre, 2 Cromar Way, Chelmsford, Essex CM1 2QE

01245 216670

Helpline: **0800 644 0185**

www.limbless-association.org

**This leaflet is intended for patients receiving care
in Brighton & Hove or Haywards Heath**

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