

Below and Above the Knee Amputations

This handout tells you about care after a below (BKA) or above (AKA) the knee amputation.

Care of the Incision

- 1. Look at your entire leg, front and back, each day. Use a mirror to look for skin sores, blisters, or red marks. Do not pop blisters!
- 2. Wash your leg and incision everyday. You need to keep the leg clean.
 - Do not soak the leg.
 - Use warm water.
 - Use mild soaps without fragrance (Example: Dial[®] soap).
- 3. Apply a telfa to the incision and secure with paper tape.
- 4. Wear ace wraps or a shrinker sock all the time. This will compress your stump.
- 5. Wear a leg protector (rigid removable dressing) as instructed by a physical therapist. It will help reduce swelling, speed up healing and shape the stump for a prosthesis.

Activity

Keep doing the exercises you learned in physical and occupational therapy. You may tire quickly as you do more. This is normal. It will lessen as you get your strength and energy back. Rest as needed but be as active as you can to maintain your strength. Activity and exercise help you get ready for a prosthesis and keeping muscle.

Pain Control

It is normal to have pain at the incision site. Your doctor may have prescribed pain medicine to use at home. Your pain should lessen over time. Your doctor will tell you when you can use over-the-counter pain medicines. You may also have phantom sensation or phantom pain.

Phantom sensation is the feeling that you still have the amputated part (leg or toe). Often, only the furthest part is felt. It is not painful. There may be tingling, numbness, or pressure. It may go away in time or it may last through life. Most people who have an amputation have phantom sensation.

Phantom pain is actual pain (burning, cramping, squeezing, or shooting) in the amputated part. It may be present all the time or it may come and go. Phantom pain may be relieved with pain medicine. If severe phantom pain is a problem, ask your doctor for help.

Diet

You may resume your regular diet when you return home. Decreased activity as well as some prescription pain medicines can cause constipation.

Try to prevent constipation by eating foods high in fiber (whole grain breads and cereals, fresh fruit, and vegetables).

If these do not work, you may use an overthe-counter stool softener or laxative. If the problems do not go away, call your doctor.

Care of Your Other Leg

If you have diabetes or have peripheral vascular disease, it is important to take good care of your other leg and foot and protect it from injury.

To care for your other leg:

- Look at leg and foot daily. Report any sores, scratches, cracks, blisters or reddened areas, to your doctor or nurse.
- Wash your leg and foot daily with mild soap and water. Avoid soaking. Dry well.
- Put lotion on dry skin daily. Do not put lotion between your toes.
- Let a doctor or nurse clip your toenails or show you how to clip toenails.
- Wear shoes that fit well.
- Wear white cotton or wool socks.
- Check shoes and socks for stones, sharp items, or holes.
- Do not use heating pads or hot water bottles on leg or foot.
- Never go barefoot.
- Ask for a mirror if you cannot see your foot.

When to Go to the Emergency Room (ER)

- Sudden increase in pain that is not controlled by your pain medicine.
- Strong bleeding from incision or anywhere else.
- Sudden increase in tenderness or swelling in leg.
- Sudden increase in redness or warmth
- A bluish tint to the skin in the leg.
- Chest pain, shortness of breath, a rapid pulse or rapid breathing.

When to Call

Call if you have any of these symptoms:

- An increase in redness. Red streaks that extend from the site.
- Increased warmth around the site.
- Increased pain that becomes constant or tenderness around the site.
- Bulging or swelling at the site.
- New drainage or bleeding from your site (cloudy, yellow, or foulsmelling).
- Open spots between the stitches where the skin is pulling apart.
- A fever over 101.5° F (38.5° C), by mouth; taken 2 times, 4 hours apart.
- The skin along the site is getting darker or turning black.

Who to Call

Peripheral Vascular Surgery (PVS) clinic at (608) 263-8915.

After hours, call paging at (608) 263-6400. Ask for the vascular surgery doctor on call. Leave your name and phone number with the area code. The doctor will call you back.

If you live out of the area, call: **1-800-323-8942**.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 12/2019 University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing HF#4887.