

Occupational Therapy TOOLKIT

Amputation of the Lower Extremity

Impairments and Functional Limitations:

ADL, IADL, work and leisure impairment

Functional mobility impairment

Impaired strength, upper and lower body

Limited activity tolerance and endurance

Residual limb pain and hypersensitivity

Phantom limb pain and phantom limb sensation

Impaired balance

Fall risk

Fear of falling

Altered body image

Other symptoms and conditions – diabetes, PVD, depression, ESRD

Occupational Therapy Intervention:

ADL, IADL, work and leisure training including but not limited to...

- Recommend and/or provide adaptive equipment and task modifications to compensate for impaired balance and strength
- Train in lower body ADLs, including donning and doffing prosthesis and socks.
- Instruct in the care of the prosthesis and sock hygiene.
- Instruct in the care of the residual limb and the remaining leg.
- Instruct in pacing and energy conservation strategies.

Train in safe and efficient functional mobility (sit to stand; bed mobility skills; transfers; ambulation and wheelchair mobility) during ADL and IADL tasks.

- Train with and without the prosthesis.
- Train in the use of adaptive mobility equipment – hospital beds, lift chairs, standard wheelchair/electric wheelchairs, transfer boards, hoist lifts, leg lifter, bed rails.
- Monitor cardiac status during ambulation. A below-knee amputee uses 38% to 60% more energy walking on level ground than does a non-amputee, and an above-knee amputee uses 52% to 116% more energy.

Address ability to drive safely. Provide referral to driving rehab specialist and/or explore alternative transportation options.

Provide UE activities and exercises to increase strength specifically for scapular depressors, elbow extensors and wrist extensors.

- Examples include overhead pulley, chair push-ups and depression blocks.
- Instruct in home program with verbal and written instructions

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Occupational Therapy Intervention:

Provide functional balance activities to increase balance confidence with ADL tasks.

- Provide graded activities in sitting and standing, supported and unsupported, with and without prosthesis.

Complete a comprehensive, performance-based home assessment. Recommend and/or provide home and activity modifications.

Provide education about fall risk and prevention strategies.

Manage phantom limb pain and phantom limb sensation

- TENS
- Stump massage, percussion, and vibration
- Ultrasound, superficial heat and cryotherapy
- Mirror Box Therapy

Patient and Caregiver Handouts:

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