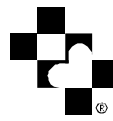


# Care Of



MeritCare  
HealthCare Accessories

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| Fargo,    | (701) 293-8211 | (800) 288-4613 |
| Jamestown | (701) 251-1331 | (800) 456-7649 |
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## BK Prosthesis with Soft Foam Liner and...

... **PTB Cuff/ Waist Belt**

... **Knee Sleeve**

... **Supracondylar Strap or Wedge**

You have been fit with Custom Trans-Tibial (BK) prosthesis with a traditional suspension system. Your prosthesis will instruct you on how to use the prosthesis and how to don/ doff the prosthesis. Some points to remember are:

- Always wear shoes on the prosthetic foot. The shoe should have a similar heel height and style as the shoe that you were initially fit with.
- Periodically check your shoes for abnormal wear, as this can affect the function of the prosthesis.
- The residual limb should be clean and dry. A mild antibacterial liquid soap is recommended for daily cleaning

### Donning the Prosthesis:

#### Pelite or Similar Liner:

- Place socks on the residual limb, one at a time, making sure that there are no wrinkles present. The sheath should go on first, followed by the thickest sock. The thinnest sock should go on last.
- Place the liner on the residual limb, lining up your knee cap with the oval area in front
- Guide the residual limb and liner onto the prosthesis. Gently pull of the sock(s) to remove any additional wrinkles.
- Secure the prosthesis onto your thigh by...
  - **Knee Sleeve:** Roll the knee sleeve onto your thigh. There should be at least two inches of direct contact between your skin and your thigh. If your socks are longer than your knee sleeve, the socks will need to be trimmed so the sleeve is in contact with your thigh.
  - **Supracondylar Strap:** Wrap the strap around your lower thigh crossing the strap just above your kneecap. Pass the strap through the buckle and pull tightly. Secure the hook and loop closure.
  - **PTB Cuff:** Wrap the strap around the backside of the leg and secure it to the other side of the cuff. If a waist belt is also used: Position the belt around your waist and attach at the front. The leather billet should be positioned in the front, on the amputated side.
  - **Supracondylar Wedge:** It may be necessary to guide the residual limb into the socket from the posterior. Position the residual limb into the prosthesis. If the wedge is not incorporated into the liner, position the wedge along side the medial aspect of your residual limb when donning the prosthesis.

### Removal of the Prosthesis:

- **Knee Sleeve:** Reflect the knee sleeve down as demonstrated by your prosthetist. Remove the prosthesis, liner and socks, Check for unusual red or sore areas on your residual limb. Your prosthetist will show you where common weight bearing marks would be located. Notify your prosthetist of any unusual red, sore or uncomfortable areas on your residual limb. Do not leave the knee sleeve pulled down on the prosthesis as this may stretch out the sleeve, Periodically wipe down the sleeve with a damp cloth.
- **Supracondylar Strap or PTB Cuff:** Loosen the strap and unwrap it. Remove the prosthesis, liner, and socks from your residual limb. Check for red or sore areas. Your prosthetist will show you where common weight bearing marks would be located. Notify your prosthetist of any unusual red, sore or uncomfortable areas on your residual limb. Periodically check the strap for wear.
- **Supracondylar Wedge:** Remove the residual limb by pulling up on the liner or the straps attached to the wedge. Remove the liner and socks, Check for unusual red or sore areas on your residual limb. Your prosthetist will show you where common

weight bearing marks would be located. Notify your prosthetist of any unusual red, sore or uncomfortable areas on your residual limb.

- **PTB Cuff and Waist Belt:** Unlatch the cuff from the waist belt. Unwrap the Velcro strap on the PTB cuff. Remove the prosthesis, liner and socks from your limb. Check for unusual red or sore areas on your residual limb. Your prosthetist will show you where common weight bearing marks would be located. Notify your prosthetist of any unusual red, sore or uncomfortable areas on your residual limb

### **Wearing Schedule:**

1. If you are a new amputee, we highly recommend that you work with a physical therapist to learn how to don the prosthesis, walk with the prosthesis in terrain that you are accustomed to, and how to adjust prosthetic socks.
2. If you have worn prosthesis before, Don the prosthesis as listed above. If the prosthesis feel comfortable, wear the prosthesis for approximately 20 minutes. Remove the prosthesis, socks and gel liner. Check your residual limb for any red or sore areas. If none are present, you may put the prosthesis back on. Recheck the fit of the prosthesis every hour afterwards.
3. During the first couple days, you should limit your activity on the prosthesis as your residual limb becomes used to the new socket design. It may be necessary to remove the prosthesis for short periods or time or adjust the thickness of the socks. This is part of the normal break-in process.
4. Notify your prosthetist of any new red or sore areas that may develop. Also notify your prosthetist if you feel that the prosthesis is not stable.
5. Parents of children wearing prosthesis should monitor the child's residual limb for red or sore areas, which commonly occur as the child grows. These and any changes to the Childs gait should be reported to the prosthetist.

### **Risks and Benefits of Using a Prosthesis:**

- While the benefits may be obvious, i.e. increased activity and productivity, improving the quality of your life, etc., it should also be noted that there are risks associated with using prosthesis. These risks include, but are not limited to...
- The risk of falling, tripping or slipping on uneven pavement, thick carpeting or wet/icy areas or floor.
- Using too few or too many prosthetic socks can lead to skin breakdown. This breakdown could cause infections and further complications. Always check your residual limb for unusual sore or red areas after your prosthesis.
  - Misuse of the prosthesis could lead to premature breakage of the components and/or subsequent injury.

### **Additional Concerns:**

**Weight Loss or Gain:** A mild (five pounds or less) weight loss or gain can affect the fit and function of your gel liner and prosthesis and cause premature breakdown of the liner.

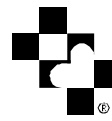
**Changes in Medication:** Changes in certain medications can cause your body to retain

**Changes in Lifestyle:** A sudden increase or decrease in your activities can also affect the fit and function of your prosthesis.

### **Maintenance:**

1. Inspect the prosthesis or gel liner daily for cracking, loose or worn parts. **Do not attempt to modify or adjust the prosthesis on your own.** Contact HealthCare Accessories for an appointment with your prosthetist.
2. Change in weight, activity, overall health and/or skeletal structure may cause your prosthesis to fit unsatisfactorily. Visit with your physician or prosthetist on a regular basis to see if any changes are necessary.
3. Follow-up appointments are necessary to help maintain proper function. The fit and function of the prosthesis should be checked annually. Please follow your prosthetists recommendations for additional recheck appointments and contact HealthCare Accessories to schedule an appointment.

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**After Hours Care:**

If you need to contact HealthCare Accessories LLC after hours, call the office that you are closest to. You will be forwarded on to an operator who will assist you. *Please state that this is in reference to a prosthetic concern.* Depending on the situation, you may be charged for this service.

**Note: Refer to specialized “Care of” Sheet for Users with Diabetes/Neuropathy/Peripheral Vascular Disease (PVD)/Insensate Skin**