

Wear Schedule

Ultimately, it's our desire for you to use your prosthesis from morning to bedtime. However, it takes time, effort, patience, and training to get to that point. Once you have completed physical therapy and have acclimated to the prosthesis, it's very important to attempt to make the prosthesis a part of your daily routine. If you use it like a tool versus an extension of your body, you will never become proficient with the prosthesis. Be diligent, strong, and determined and **you will succeed!!**

- **Week 1** - You may use the prosthesis for approximately 15-20 minutes, 3 times daily. After removing your prosthesis, check your skin for abnormal redness or skin irritation. Leave the prosthesis off for 3-4 hours before wearing again. Do not wear for longer than 15-20 minutes and no more than 3 times a day. Contact your prosthetist if you have any condition that concerns you.
- **Week 2** - You may increase the time you wear your prosthesis between 45 minutes and 1 hour each time but no more than 3 times a day. Always check for signs of excessive pressure or skin irritation after removing your prosthesis. Contact your prosthetist if you have any conditions that concern you.
- **Week 3** - You may now gradually increase the time you wear your prosthesis. Remove your prosthesis and rest your residual limb if you become tired or sore. Maintain visual awareness of your residual limb for excessive pressure or other skin irritation and contact your prosthetist if you have any condition that concerns you.

The increase in prosthesis use is dependent on:

- Skin tolerance.
- Your physical ability to use the prosthesis for the desired length of time.
- The Physical Therapist and/or Physicians directive.

Skin Inspection

It's absolutely necessary to inspect your skin regularly after prosthetic use especially during the first few months of use.

Any findings outside of normal skin tolerances described should be immediately reported to your Prosthetist.

It is completely normal for there to be some redness, especially in a vacuum and total contact system.

- **Blanche test**

1. Gently push your finger into an area of redness. If the area immediately turns a lighter color, this is normal. If the area doesn't change to a lighter color, this is abnormal.
2. If the area pushed on takes several minutes (over 5 minutes) to return to the original color, this is abnormal.

- **Visual inspection**

1. After removing your prosthesis and the interface liner, visually inspect your residual limb.
2. Use a mirror to look at the bottom and back side. If any areas look abnormal, perform blanche test, and if abnormal, call your Prosthetist for advice or to schedule an appointment.

Volume Management

It's absolutely necessary to maintain a total contact fit within your socket. However, your residual limb will continue to shrink and your volume can change either by muscle wasting or fluid change. Volume management and communication with your Prosthetist are absolutely required for you to be successful with your prosthesis.

How will I know when I need to add prosthetic socks?

- If you do not meet mild resistance when you are first applying the prosthesis, you likely need a sock.
- If your residual limb (stump) feels like it's moving within the socket while walking and after vacuum or suspension is established, you very likely need a sock.
- If you perceive that your bearing excessive weight on the bottom of your stump, you likely need a sock.
- If you feel your residual limb pistoning in the socket, you likely need a sock or you have lost suspension. If after adding a sock the issue isn't resolved, you'll need to call your Prosthetist.
- If your using a below the knee prosthesis and the top of your knee cap is not even with the lateral sides of the socket, you likely need a sock.
- You may use 1/2 socks or full length socks, dependent on your volume changes and socket design.
- If socks DO NOT resolve the issues, try a gel spot in the bottom of your most inner socket.
- If you remove the prosthesis and interface liner and you see a defined discolored typically round mark on the bottom of your limb, you may have too many socks or need a gel spot to slightly increase pressure on the bottom of your residual limb.
- If your limb doesn't make light contact with bottom of the socket, you have too many socks on or you're swollen. Lack of total contact will cause skin irritation.

Maintenance & Care of Prosthesis

- **Interface Liner** - Your liner may/may not incorporate fabric on the outside. However, the primary area of concern in terms of cleanliness is the area touching your skin. This area must be cleaned daily or no less than once every three days.
 - * *Soap & Water - use a damp cloth or wash cloth with the same soap you wash your skin with wash the gel surface and rinse very well. Pat dry if needed (if not equipped with fabric on outside, the outer surface may be cleaned in the same manner).*
- **Sealing Sleeve** – The inner surface that makes contact with your skin should be cleaned in same manner as the interface liner.
- **Socket Cleaning** – The socket can be cleaned with mild soap & water or a 50% solution of water and Isopropyl alcohol.
- **Sanitizing** - Sanitizing the components that make contact with your skin is recommended as indicated by smell and/or skin irritation or visual discoloration. We recommend a 50% solution of water and Isopropyl alcohol.
- **Flushing the Vacuum Pump** – Recommended once every 30 days following manufacturer's guidelines (if equipped).
- **Prosthetic Components** - All remaining components should be maintained by your Prosthetist. So as a partner in your healthcare, please communicate any concerns with your Prosthetist.