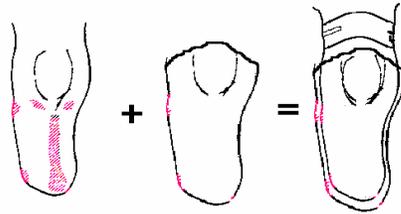


Rigid Removable Dressing



The Removable Rigid Dressing is used as a postoperative dressing for the below the knee amputation. The purpose of the dressing is to control the swelling that is common following amputation surgery. The dressing acts as a protective shield to the amputation wound, yet still provides the medical attendant the ability to inspect the wound. Reapplication provides the caregiver the opportunity to increase compression to the limb as necessary, thereby promoting healing and residual limb maturity and shape. This technique has reduced the severity of knee flexion contractures and has allowed earlier prosthetic fittings with higher success rates than previous postsurgical management.

Care and Use Instructions

The RRD should be worn at all times. Avoid getting it moist or wet. You may safely remove the RRD for brief intervals (less than 15 minutes) to inspect your incision or clean your stump. The Rigid Removable Dressing should be removed daily and the wound checked for proper healing. If you suspect infection call your physician immediately.

You may cleanse your stump with soap and water. Do not soak it in stagnant water until the staples are removed. Staples are usually removed 3 - 6 weeks after surgery. You may use hydrogen peroxide to cleanse your incision.

The RRD should fit snugly. If you can turn or rotate it freely, if it slides on and off without effort, the RRD is too loose. If the RRD feels constricting, if you notice indentation along the upper border or red patches anywhere when you take it off, the RRD is too tight. As your

stump heals, it shrinks in size. You will be discharged with several different stump socks of varying thickness. As your stump shrinks, layer the socks on your stump so that when you put the RRD on, it fits snugly. This means you will need to add socks as your stump heals and becomes smaller to maintain the proper fit.

People with leg amputations tend to hold their leg with the knee bent. It is very important to prevent your knee from becoming "stiff". Several times each day should straighten your leg out so that the back of your knee touches whatever surface it is resting on (couch, chair, bed, floor, etc). Also continue doing the exercises you learned in physical therapy. If you keep up with the exercises, you should quickly progress when it comes time to learn to walk with your artificial leg (prosthesis).

People who have had amputations frequently experience pain and sensation extending to the part that was amputated. This is common and normal, we call it "phantom pain" Your doctor can prescribe to help with the "phantom pain", if appropriate. The snug fit of your RRD often helps to with the phantom pain/sensation.

The physician who did the amputation will continue to follow you. Do not hesitate to contact them if you have questions.

In the near future, the rehabilitation services will contact you.

All emergencies should be evaluated and treated by the Emergency Department.

Should you have any questions about the Rigid Removable Dressing do not hesitate to contact your prosthetist at Morgantown Orthotic and Prosthetic Center @ 800 598 6672.

Putting the RRD On and Off

To remove:

- 1) Pull the end of the stockinette cover up and out of the hook velcro
- 2) Open the strap and remove the plastic suspension panel.
- 3) Pull stockinette down to the top of the cast.
- 4) Pull out any soft foam wedges you might see on the sides of the limb used to shim the top of the cast.
- 5) Have the patient bend at the knee and totally relax his leg. This allows the muscles to soften and elongate.
- 6) Grasp the cast and gently work it back and forth pulling the cast off as you do this.

To re-apply:

- 1) As the edema lessens, the cast will become loose. To tighten add wool socks that were issued at the time the rigid dressing was originally applied. If the cast was loose when you removed it, you need to add another sock to snug the cast back up. Evaluate.
- 2) The amputee should bend his knee and totally relax his leg.
- 3) Line the cast up with the patella and gently work back and forth pushing the cast in place.
- 4) Replace the foam wedges if there are any.
- 5) Pull up the stockinette and place the plastic suspension panel above the patella. Tighten the velcro strap around the leg. Then pull the stockinette down over the velcro on the suspension panel.