

# Amputee Rehabilitation at The Johns Hopkins Hospital

People who have had limb amputations face rehabilitation challenges, and The Johns Hopkins Hospital has assembled an interdisciplinary team of professionals, including physiatrists, therapists, orthotists, prosthetists and nurses, who work together to manage the unique needs of amputee patients.

## Inpatient Services

Rehabilitation begins immediately after amputation occurs (or, if the amputation surgery is elective, even beforehand). Patients are educated about what to expect in terms of pain, recovery and ultimate functional status. In the immediate postoperative period, preventing contractures, reconditioning, and controlling edema are of major importance. Team members may make recommendations regarding positioning, wound dressings and wound management. Patients begin physical and occupational therapy within 48 hours after surgery.

Individuals requiring intensive postoperative rehabilitation may be admitted to our comprehensive inpatient rehabilitation facilities off-site at Good Samaritan Hospital or within The Johns Hopkins Hospital. While in the Hospital, efforts are focused on optimal wound healing, maintaining and increasing strength and range of motion, and preparing the residual limb for prosthetic wear.

## Outpatient Services

The rehabilitation team continues to work with the client long after hospital discharge. To help with the transition to

wearing a prosthetic limb and living more independently, patients are seen at our outpatient clinic.

When the residual limb is healed, the optimal prosthetic prescription minimizes discomfort and allows advanced gait training. Our clinics provide a continuum of care throughout the stages of training and prosthetic fitting. Patients who require particularly intensive training may be considered for inpatient admission.

Having all health care professionals involved in one clinic and including the client in all discussions and recommendations ensures smooth communication, close cooperation and the best possible outcome.

## Orthotics

Patients who use orthoses (orthotics, braces, splints, supports) for the legs, arms or spine as part of their daily activities and/or part of the rehabilitation program require a multidisciplinary evaluation and prescription, as well as routine follow-up for changes or replacement. Special populations requiring orthoses include people with stroke, spinal cord injury, multiple sclerosis, sports-related or traumatic injuries, diabetic foot problems and spine or extremity postoperative devices.



Dynamic alignment of a transfemoral prosthesis.

**For more information,  
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