

Important Considerations:

- o Individualization: This is a general plan.
- o Cardiovascular Fitness: * Upper body ergometer (UBE) exercises.
- o Strengthening Exercises: * Isometric exercises for the residual limb muscles (quadriceps, hamstrings, hip abductors, hip adductors).
- o Diabetes Management: Close communication with the patient's endocrinologist or primary care physician is crucial for optimal blood sugar control, which is vital for wound healing and overall recovery. The specific exercises, intensity, and progression will need to be tailored to the individual patient's needs, progress, and any complications.
- o Range of Motion (ROM) Exercises: * Gentle active and passive ROM exercises for the hip and knee of the amputated limb.
- o Desensitization: * Gentle massage and tapping of the residual limb to reduce sensitivity.

Phase 2: Prosthetic Fitting Phase (During and Immediately After Fitting)

- o Goals:
 - o Ensure proper fit and alignment of the prosthesis.

Phase 1: Pre-Prosthetic Phase (Immediately Post-Op to Prosthetic Fitting)

- o Goals:
 - o Promote wound healing and prevent infection.
 - o Strengthen the muscles of the residual limb and the unaffected limb.
- o Interventions:
 - o Wound Care: * Monitor the wound for signs of infection (redness, swelling, drainage, increased pain).
 - o Edema Control: * Elevate the residual limb when resting. * Focus on flexion, extension, abduction, adduction, and rotation. * Strengthening exercises for the unaffected limb (hip, knee, ankle). * Use compression bandages or shrinker socks as prescribed.