



NEW AMPUTEE CHECKLIST

A practical amputee checklist for the first 3 months after limb loss. Built for new amputees, caregivers, prosthetists, and healthcare teams.

HOW TO USE THIS CHECKLIST

Work down the timeline, not all at once. Check off what is done, put an exclamation mark (!) on what needs help, and bring this sheet to appointments.

Nº	DAY 1-3	
1	I know the name and phone number of my care team (surgeon or nurse) and who to call after I leave the hospital.	
2	I know what each medicine is for and when to call if something feels wrong.	
3	I know what my incision or dressing should look like and which changes are urgent.	
4	I have asked how to position my body to reduce contractures and stiffness.	
5	My caregiver or support person has heard the same instructions I heard.	

Nº	WEEK 1	
1	I know how to inspect my residual limb daily for redness that does not fade, drainage or odor, blisters or skin opening, warmth, swelling, pressure spots, color changes (red, brown, purple, green, or black) increased pain. I will report changes to my care team early before they become bigger problems.	
2	I know how long I have to keep my limb bandaged.	
3	I know how to manage residual (stump) pain and phantom pain.	
4	I have asked whether I should use a shrinker, rigid dressing, or another shaping method, and when. I also understand how to figure-8 wrap the limb if needed.	
5	I know which movements or stretches I should do every day and which ones to avoid.	
6	I have a simple plan for the bathroom, shower, nighttime trips, and stairs.	
7	I have the equipment I need now, such as crutches, walker, wheelchair, shower chair, commode, toilet riser, grab bar, or transfer board.	
8	I have identified which daily tasks are still difficult and asked for help or solutions.	
9	I have my next follow-up appointment booked before I leave or before the week ends. Appointment Date & Time: _____	
10	I have started a folder for discharge papers, medication list, bills, and insurance notes.	
11	I know who can help with work, school, transport, or disability forms.	
12	I have written down 3 prosthetic questions for my first prosthetist visit.	



CALL YOUR CARE TEAM RIGHT AWAY IF YOU NOTICE:

- Fever, chills, or feeling suddenly unwell
- More redness, warmth, swelling, drainage, bleeding, or bad smell
- New openings in the wound or skin turning dark
- Pain that suddenly spikes or makes weight-bearing impossible

PAIN LEVEL	WHAT IT MEANS
0 TO 3	Manageable. Keep tracking what helps and what triggers it.
4 TO 6	Moderate. Mention it at your next follow-up if it continues.
7 TO 10	Severe. Call sooner, especially if paired with swelling, skin changes, or fever.

WHAT'S NORMAL

- Pain can come and go suddenly
- Phantom sensations (tingling, itching, pressure) are common
- Phantom pain can feel sharp, burning, or electric
- Pain may change daily as swelling changes

WHAT HELPS

- Medication as prescribed
- Compression or shrinker
- Positioning or elevation
- Gentle movement or stretching
- Relaxation or breathing

PHANTOM VS RESIDUAL LIMB PAIN

- **Residual limb pain** → from the actual limb (skin, muscle, incision)
- **Phantom pain** → feels like it's coming from the missing limb

WOUND CARE & DRESSING

- Your wound should look clean, closed, and improving each day.
- Follow your team's instructions on when to change the dressing and when to leave it alone.


IMPORTANT NOTE: Your limb size will change daily early on. This affects comfort, prosthetic fit, and pain.

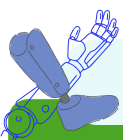


QUICK WINS

- Take one photo each week so you can see healing progress. You can also film yourself in your progress, which will give you a clear vision that you are moving forward.
- Pick one safe daily task to practice instead of trying to master everything at once.
- Write down one question before every appointment.
- Celebrate equipment wins, even small ones, like a better shower setup or easier transfer.
- Ask for help early. It saves energy and prevents falls.
- Rest without guilt when your body asks for it.

IMPORTANT NOTE: Recovery timelines vary widely. Some people are ready for prosthetic fitting in 4–6 weeks. Others, especially those with diabetes or vascular conditions, may take several months. Both are normal. The items below mix early prosthetic prep with pre-prosthetic work. Focus on what matches your stage.

№	WEEK 2 TO 4	
1	I know when I can safely transfer, shower, stand, or move without help.	
2	I am doing daily desensitization—gentle tapping, rubbing different textures (silk, cotton, velvet), or massage on my residual limb with my doctor or PT’s approval.	
3	I have one simple routine for sleep, hydration, and movement to support healing.	
4	I understand that major weight changes and poor overall health can affect prosthetic fit, comfort, and long-term mobility.	
5	I have asked whether I need a home health, physical therapy, or occupational therapy.	
6	I can name the biggest barriers in my home and which fixes I need first.	
7	I have practiced safe bathing, dressing, toileting, and kitchen tasks that work for me.	
8	I have asked what tools, adaptations, or alternatives could make my daily life easier.	
9	I know how swelling changes fit and why a prosthesis may feel different from one day to the next.	
10	I have asked what socket, liner, suspension, or device options are realistic for my goals.	
11	I know how many socks or liners I may need and how to clean and replace them.	
12	I have started asking what activity level or function score my insurer uses for coverage.	
13	I have checked whether my plan covers prosthetic components, replacement parts, repairs, therapy, and backup supplies.	



WHAT TO EXPECT IN GETTING YOUR FIRST PROSTHETIC

- **Limb healing and shaping.** It can take a few weeks or a month, depending on your case. So you may have a lot of sock changes to do.
- **First fitting (test socket or temporary device).** It may feel heavy, awkward, or uncomfortable at first. Some pain early on is common. So start with short wear or short walks. Take frequent breaks as well and check your skin after each use.
- **Multiple adjustments based on your feedback.** The fit can change daily as your limb changes. Your feedback is critical, so speak up early.
- **Learning to stand, move, and build confidence.** Some discomfort is normal, but sharp or worsening pain is not.
- **Gradual progress in real-life use.** Progress is not linear. Good and bad days are normal.

IMPORTANT NOTE: Pain and blisters often mean you are doing too much and too fast. So don't push yourself too hard. Take it slow and get more breaks.


PROSTHETIST TIP

Tell patients what to expect before the first fitting. Show a simple visual of the socket, suspension, liners, and the like. That single overview removes a lot of fear.

Nº	MONTH 1	<input checked="" type="checkbox"/>
1	I have written down my top 3 goals for the next 90 days, such as showering alone, returning to school, or walking outside.	
2	I have asked my care team the realistic timeline for recovery and prosthetic use.	
3	I know how to safely put on and remove each part of my prosthesis independently or with help if needed.	
4	<p>I have asked how to trial different prosthetic options based on my needs:</p> <ul style="list-style-type: none"> ○ For lower limb amputees: feet, knees, sockets, liners ○ For upper limb amputees: hands, hooks, and control systems (body-powered or myoelectric) <p>NOTE: Different devices suit different tasks. You may need more than one option.</p>	
5	I know how to appeal a denial and who can help with paperwork.	
6	I have asked about grants, nonprofit help, transportation support, or vocational rehab if costs are piling up.	
7	I have one peer group, online community, counselor, faith leader, or trusted person I can contact this week.	
8	I have talked with family about what help feels useful and what does not.	
9	I have a plan for travel, work, school, or sports that matches my current ability.	
10	I remind myself that healing is not linear and I am not behind.	
11	I have found at least one local or online amputee support group or person I can talk to.	

FINANCIAL ASSISTANCE (EXCLUDING INSURANCE)

Veterans Affairs	Global Reach Bionics	Move For Jenn
TRICARE	Heather Abbott Foundation	Challenged Athletes Foundation
Vocational Rehab	Limb Preservation Foundation	Ability Found
Limbs for Life Foundation	Jordan Thomas Foundation	LifeNets: The Wheelchair Project
Steps of Faith Foundation	Amputee Blade Runners	The Wheelchair Recycler
Help Hope Live	Chive Charities	First Hand Foundation



PROSTHETIST TIP

Do not wait for the patient to know the right question. Ask directly about skin breakdown, blisters, sweating, showering, stairs, driving, sleep, clothing, work, and fear of falling. Those issues often matter more than gait terms in the first months.

Nº	MONTH 2 TO 3	<input checked="" type="checkbox"/>
1	I can explain what is improving, what still hurts, and which daily tasks still need adaptation.	<input type="checkbox"/>
2	I am tracking fit changes, skin issues, and pain patterns so my team gets useful details.	<input type="checkbox"/>
3	I have asked what to do if my prosthesis breaks, needs repair, or no longer fits.	<input type="checkbox"/>
4	I know how to order liners, sleeves, socks, consumables, and replacement parts before I run out.	<input type="checkbox"/>
5	I have asked whether I need a backup mobility plan for travel, or repair delays.	<input type="checkbox"/>
6	I have checked whether my car, workplace, or school setup needs changes now.	<input type="checkbox"/>
7	I know who to call for mental health support if grief, anxiety, isolation, or body image issues hit hard.	<input type="checkbox"/>
8	I have started a short list of what I can do today that I could not do a few weeks ago.	<input type="checkbox"/>
9	I have asked what training comes next, including balance, endurance, stairs, uneven ground, or upper-limb task practice.	<input type="checkbox"/>
10	I have asked what long-term fitness, strength, or conditioning work would help me stay mobile and protect my prosthetic fit.	<input type="checkbox"/>
11	I know that physical therapy is the beginning, not the end, of long-term strength and mobility training.	<input type="checkbox"/>
12	I have given myself credit for adapting to something hard.	<input type="checkbox"/>




LONG TERM FITNESS MATTERS

A prosthetic works best when your body stays strong and your weight stays relatively stable.

Your body will change shape in the first year, and that's normal. Stable weight after the early healing period helps protect socket fit and comfort. Large changes in either direction can affect, socket fit, balance, comfort, skin issues, and energy use.

Physical therapy helps you learn to use your prosthesis. Long-term fitness helps you keep using it well.


Ask about amputee-friendly gyms, trainers, or adaptive fitness programs if possible.

Nº	INSURANCE DOCUMENTATION TRACKER	
1	Hospital discharge summary and surgery notes	<input type="checkbox"/>
2	Medication list and refill history	<input type="checkbox"/>
3	Follow-up visit notes and therapy reports	<input type="checkbox"/>
4	Letters of medical necessity	<input type="checkbox"/>
5	Insurance approvals, denials, EOBs, and appeal deadlines	<input type="checkbox"/>
6	Bills, receipts, mileage, and equipment purchases	<input type="checkbox"/>



THE INSURANCE PART NO ONE EXPLAINS

- **K-levels decide what you qualify for.** Medicare and most insurers rate amputees K0–K4 based on activity. Ask what K-level your doctor documented.
- **Your plan probably has a cost-share.** Many plans cover only 70–80% of prosthetic costs. Ask what your out-of-pocket maximum is before the bill arrives, not after.

Nº	QUESTIONS TO ASK INSURANCE	
1	What exactly is covered right now?	<input type="checkbox"/>
2	What needs prior authorization?	<input type="checkbox"/>
3	What documentation proves medical necessity?	<input type="checkbox"/>
4	What happens if I need repairs or a temporary backup device?	<input type="checkbox"/>
5	What is the appeal process and deadline if I am denied?	<input type="checkbox"/>
6	What is most commonly denied, and how can I prepare for it?	<input type="checkbox"/>



INSURANCE REALITY

- Start the approval process early. Do not wait until you urgently need a device.
- Denials can happen. This does not mean the answer is final.
- If denied, appeal. About half of appeals succeed when properly documented.
- Strong documentation from your doctor and prosthetist improves approval chances.
- Ask what is covered, but also what alternatives or upgrades exist.
- If possible, plan for backup options in case of delays or repair.

WHAT AMPUTEES WISH SOMEONE HAD TOLD THEM ON DAY 1

We asked our community: if you could tell a new amputee just three things, what would they be? Here's what they said.

"It's going to be rough, but stick with the exercises and therapy. Ask lots of questions. Be prepared to make a stand when needed. Get a hospital social worker to do the leg work. Make sure you have any ramps, etc built before you go home. Ask specifically what your insurance covers. Get someone to advocate for you along side you. Keep all paperwork together including medicine list, instructions." - **Below-knee amputee for more than 5 years**

"Get comfortable with being uncomfortable. It is a process. You will have good days and bad days, they will all be temporary." - **Above-knee amputee for more than 5 years**

"You will be OK and that there is more to life than a foot! Be open and honest when asked about how you feel and don't be afraid to laugh about it! Phantom pain and sensations are REAL and different for everyone. Make sure to talk with your DR and other amputees on what worked for them." - **Below-knee amputee for 1-2 years**

"Your body is still beautiful. Even though you might have to do things differently, there is still a life after amputation. Do things at your own pace, listen to your body, give it the rest it deserves." - **Upper limb amputee for more than 5 years**

EMERGENCY AND SUPPORT CONTACTS

Surgeon/Limb Clinic	
Prosthetist	
Physical Therapist/Occupational Therapist	
Primary Care/Nurse Line	
Trusted Support Person	



USEFUL SUPPORT RESOURCES

- IsBrave.com for helpful guides in navigating your journey.
- 988 Suicide & Crisis Lifeline: Call or text 988 in the U.S. for emotional support.
- Amputee Coalition for peer support or support groups.