# Working With an Occupational Therapist to Get Back Into the Work Force

by Sean Toren

Upper-extremity amputations present a host of issues for those who wish to return to the work force. Whether you are about to have amputation surgery or have recently become an amputee, however, there are certain steps you can take to improve your chances of returning to the work force successfully. In fact, even if you've been an amputee for a long time, you may find that there are new technological and medical solutions that may help you do things that you didn't think were possible.

#### **Being Part of the Team**

Your healthcare team will probably include your surgeon and possibly a nurse, a prosthetist who will fit you with a prosthesis, and an occupational therapist (OT) to help you prepare and use your prosthesis. You may also have a worker's compensation case manager if your amputation was job-related and a licensed clinical social worker or therapist if you're struggling emotionally. But don't forget that you are on this team too. In fact, your own education about this process and your understanding of what you need are vital to your obtaining the best possible results.

### **Preoperative Phase**

If you have the opportunity to meet with an OT before your surgery, he or she will evaluate your strength and range of motion and may recommend therapy right away to strengthen necessary areas so that you're better prepared to use your prosthesis once you've been fitted. Some OTs are also well-educated about prosthetic solutions and will work with your prosthetist to make sure that you can use your prosthesis as well as possible.



Amputee Janet Bombard participating in a seminar designed to educate occupational therapists about the rehabilitation needs of amputees

# Postoperative/Preprosthetic Fitting Phase

After you've had amputation surgery, you'll meet with an OT — and possibly a prosthetist — to prepare you for your prosthetic fitting. The OT will begin (or continue) strengthening and range-of-motion therapy. The range-of-motion therapy is especially important at this stage because you don't want to lose the strength and flexibility you have. In fact, you may need even more strength and flexibility after your amputation to be able to use your prosthesis as well as possible.

Your OT will also teach you how to wrap your residual limb to control swelling and to help shape and prepare your residual limb for the prosthesis. In addition, he or she may help you manage any scarring on your residual limb. This is a good time to start talking about your functional goals for home and work and learning how you, your OT, and your prosthetist can work together to achieve these goals, whether through the use of a prosthesis or adaptive equipment.

### **After Your Prosthetic Fitting**

Once you have been fitted with your new prosthesis and have learned how to care for it and your residual limb, you'll begin the process of "functional training" with your OT. The number of sessions you have may depend on your health insurance and worker's compensation policies in your region and can run anywhere from a few days to a few months.

What you'll learn to do — and how successful the process will be — will depend on your own discipline and motivation along with the support and expertise of your OT.

Functional training starts with learning how to use your prosthesis by picking up objects of different shapes and densities and manipulating objects on peg boards. Once you've mastered such activities, your OT will start working on Activities of Daily Living — the things you need to be able to do to live your life. If you want to be able to work on a computer, golf, or drive a car, talk to your OT about what strategies can help get you there. Such strategies may come in a variety of forms, such as learning to type with one hand, diligently practicing with your prosthesis, or using adaptive equipment. Adaptive equipment includes such things as a button hook for dressing, a slant board for writing, and specialized tools or adapters that attach to your prosthetic socket. Your OT is a great resource for strategies to help you do things, but you may also find help through mentoring groups and peer networks.

# **Getting Back to Work**

If you've had an accident that was jobrelated, you may speak to a case manager at this point about returning to the work force. Depending on which state you live in, worker's compensation may pay for vocational rehabilitation. If you receive vocational rehabilitation training, your OT will probably work with your case manager to create a plan for getting you back to work. You'll need to talk to them about whether you want to and whether you are able to go back to your old job and what other job opportunities you might have. Your OT can help simulate on-the-job environments and determine if you need to do any extra training or if you need any adaptive devices to do your job. He or she may even accompany you to work to perform an on-site evaluation of your work environment and to assess the demands made on you there.

While some jobs require little extra training, your amputation level or the physical characteristics of your job may require you to develop job-specific strength and endurance. Such training is called "work hardening" and generally involves a program designed by your OT that can last

anywhere from a day to several months. The goal of work hardening is to give you the tools you'll need to succeed — and possibly to set limits on how much work you can do.

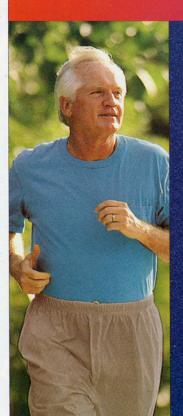
#### Teaching an Old Amputee New Tricks

If you were fitted with a prosthesis years ago, you may find that you're having use problems as you get older, especially if you're wearing a body-powered prosthesis. If this is the case, it might be a good time to contact your prosthetist or OT. If you don't have a prosthetist or OT, ask your family physician for recommendations. It's important that your prosthetist is aware of recent advances in upper-extremity technology. If you get the appropriate technology along with proper training from an OT, your chances of successfully going back to work rise dramatically.

#### **About the Author**

Sean Toren is the writer and translator at Otto Bock HealthCare.

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