

**1/21/25**

Today I entered my internship and got to shadow Brittany. I arrived in the middle of the patient's appointment so I wasn't fully sure on what the patient was here for, but Brittany told me that the patient had multiple amputations due to diabetes. This was very interesting to me because I never really knew that diabetes could have such an effect to the point where one needs amputation. This patient was getting his first prosthetic ever and it was for his leg. He was a BK leg amputee, lost half of his other foot, had an amputated left arm, and only two fingers on his right arm. It was definitely one of the most major cases I've seen in my time at Hanger. Brittany started by putting his prosthetic on, but the patient was very sensitive to any sort of sensation on his leg. I asked Brittany about why that is and she said that when people wait a long time after they are amputated to get a prosthetic, the limb can become very sensitive because its not being used as much. Brittany had to cut the length of the prosthetic down a bit and then the patient practiced getting used to just having it on. Brittany told me that that this patient was going to have a very slow journey, but that's okay. This appointment was just getting used to having it on and the next appointment he will try and stand. I also got to help transfer this patient to a different chair. He was sliding out of the wheelchair he was sitting in and couldn't push himself up, so myself, Brittany, and a new shadower bailey, helped lift him to move him to another chair. Brittany also introduced the Koala which I found very fascinating. I will attach a picture below, but it is basically a device that straps to one's arm and has multiple attachments at the bottom for different activities. For example a fork for eating or a guitar pick. For this patient, the koala would be used with a claw type of attachment to help stabilize him when he does stand. Lastly, Brittany took a scan of his foot that was missing his toes. For this foot, he has a foam insert that acts as toes for when he is wearing shoes. The scan was for a brace that is being made for this foot. The last part of this appointment was getting to see the patient transferred. A team came in with a bed made for transporting people, similar looking to a

crash cart type bed, and they worked together to lift the patient and put him on the bed. I never knew this type of service existed so it was cool to see it in action. This was definitely the most intense appointment I have seen thus far at Hanger, but I really learned a lot today about patient care and the different types of prosthetics for different amputations.



example of a Koalaa design



this is what the stand for the scan looked like

**1/23/25**

Today marked my last day of internship. I started by shadowing Jon who had an extremely interesting appointment. The patient had an AK(above knee) amputation and a bluetooth leg. I had only ever seen a bluetooth leg once before and it was on my first day, how ironic. The socket was very heavy duty and had straps and screws holding it together. I asked Jon about this and he said they do this for patients whose weight fluctuates because it is adjustable. I found that to be very cool! The patient put the prosthesis on, and then Jon uses an

app on his phone to basically decide the resistance the joints of the prosthetic have. It was really cool to see how adjusting the resistance can change the entire way the patient walks. This appointment took a while because it was a lot of trouble shooting to find the perfect settings for the leg. The leg can even be calibrated to better adjust to one's natural gait which is so cool. I found this to be one of my favorite shadowing experiences so far because the technology today is just so interesting and advanced.



bluetooth leg

The next patient I saw was a woman with an AK amputation. I was with Becca and the woman was getting a new socket fitted because her old one was very uncomfortable. This process included a lot of adjustments to the new socket, including shaving down the plastic to make it more comfortable, adjusting the alignment, and adding putty in the bottom to determine if it needs to be tighter around the limb. I really enjoyed talking to this patient about her experience as an amputee and how she has grown to embrace it. She was very fit and told me all about how she has come to love her prosthesis. She also had a very cool koi fish design on the prosthetic.



Lastly, I was with Becca for one last appointment. It was for an older man who was prescribed a special type of brace from his primary doctor. The brace was made to limit the amount of force being put on one's heel when there's a wound or injury there. The brace was very straightforward but I found it interesting to see that medicare did not cover this brace. This was because it was meant for the purpose to prohibit more injury of the heel, but medicare doesn't cover it when the purpose is that, despite it being the most common use of the brace. Due to this, it cost around \$250. The patient decided to leave without getting it and consult his doctor again to see if he really needed this brace. It was interesting to see how the financial side of things really affects people's decisions in healthcare. Overall, it was a great last day experience and I feel as though I got to see a little bit of everything.



The brace

