

6 The bandage is then spiralled up to the hip as before and the whole sequence repeated varying the precise route of the turns to achieve the shaping required until all the bandage is used.



It is **important** to ensure that
a) the **hip joint is kept extended** throughout



b) at least one turn of the bandage reaches up into the perineum and one turn right up to the groin crease to avoid the production of fat rolls in those susceptible places.



back view



front view

7 The bandage is then secured with 2 or 3 **safety pins** which act to sew the layers of the bandage together by catching all layers. The pins work best at cross over points of the bandage but beware leaving them placed so as to make lying or sitting miserable.



8 CHECK that the bandage tension is graded, maximal distally and reducing from there proximally. **CHECK** that the bandaging has shaped the stump as intended. **CHECK** that the waist anchoring turns are loose enough to get a hand under comfortably (most important). **CHECK** that the hip is free to move from full extension to 90°.

9 Tell the amputee that their bandage should feel firm but **never painful**.

**PAIN = CONGESTION, so
 TAKE THE BANDAGE OFF.**