

Abbreviations: SH, shoulder; TH, transhumeral; TR, transradial; WD, wrist disarticulation.

eAppendix 2. Amputation Care Checklist Item Response Completion At Initial Visit (N = 808)

Checklist items	Co	Completed		Missing/ Unknown/ Skipped	
	No.	%	No.	%	
Quality of care					
Functional assessment in prior year	775	95.9	33	4.1	
Amputation-related care in prior year	782	96.8	26	3.2	
Prosthetic/amputation check up at the VA in prior year	785	97.2	23	2.9	
Prosthetic/amputation check up by phone in prior year	785	97.2	23	2.9	
Contacted by any care provider outside of appointments	783	96.9	25	3.1	
Family or caregiver involved in care in prior year	783	96.9	25	3.1	
Received information about amputation care in year	778	96.3	30	3.7	
Pain management					
Well managed	511	63.2	297	36.8	
Managed with medication	518	64.1	290	35.9	
Managed with other strategy	516	63.9	292	36.1	
Initial amputation care					
Family or caregiver involved in initial amputation management	768	95.1	40	5.0	
Peer visit after amputation	739	91.5	69	8.5	
Other					
Discussed amputation care goals in prior year	184	22.8	624	77.0	
Worked to develop care plan in prior year	79	9.8	729	90.0	
Providers helped to coordinate care after move	63	7.8	745	92.0	

eAppendix 3. Linear Regression of Service Satisfaction Ratings, Separate Bivariate Models

Variables		OPUS Client Service Satisfaction
	β	P Value
OPUS client device satisfaction	0.7	< .001
Trinity Amputation and Prosthetic Experience Scale	-15.6	< .001
Amputation level		
Shoulder	6.1	.13
Transhumeral	-2.7	.24
Transradial (ref)		
Bilateral	5.3	.23
Prothesis type		
Body-powered (ref)		
Myoelectric/Hybrid	0.1	.97
Cosmetic	11.7	.02
Amputation care in prior year		
No (ref)		
Yes	-6.8	.001
Age group	0.0	1001
18 to 44	1.3	.69
45 to 64 (ref)	1.5	.03
65 to 74	0.2	.95
75+	1.3	.71
Years since amputation	0.0	.91
Era of amputation	0.0	.51
Pre-Vietnam	0.8	.87
Vietnam War	-0.4	.88
Post-Vietnam through Gulf War	0.5	.88
Post-Gulf War to September 10, 2001	1.2	.74
September 11, 2001 to present(ref)	1.2	./4
Gender		
Male (ref)		
Female	-0.9	.92
Race	-0.5	.52
White (ref)	0.6	005
Black	8.6	.005
Other/Mixed	4.9	.27
Unknown	6.6	.08
Ethnicity	3.4	20
Hispanic	3.4	.29
Not Hispanic (ref)	7.6	20
Unknown	7.6	.29
Lower limb amputation		
No (ref)	0.0	70
Yes Coornabio region	-0.8	.79
Geographic region	г 0	00
Northeast	-5.0	.08
South (ref)	2.1	25
Upper Midwest	-3.1	.25
West	-3.8	.16
Amputation etiology	1.0	44
Combat	1.6	.41
Accident	-1.4	.50
Burn	-0.6	.86
Cancer	-9.0	.24
Diabetes	-10.7	.45
Infection hypoxistics: Orthotics and Prosthetics Licer's Survey	-0.9	.78

Abbreviation: Orthotics and Prosthetics User's Survey.

eAppendix 4. Baseline and Follow-up CSS and Quality of Care for all Participants

	Baseline (N = 808)		Follow-up (n = 585)	
	Total, No.	Mean (SD)	Total, No.	Mean (SD)
OPUS CSS	402	36.2 (20.0)	301	35.2 (20.2)
Quality of Care Index	761	1.3 (1.5)	576	1.2 (1.5)
		No. (%)		No. (%)
Other quality of care items				
Pain is well-managed	511	342 (66.9)	357	246 (68.9)
Manage pain using medication	518	267 (51.50	364	178 (48.9)
Manage pain using other strategy	490	252 (48.8)	364	166 (45.6)
Family or caregiver involved in initial amputation	768	366 (47.7)	570	275 (48.3)
management				
Peer visit after amputation	739	187 (25.3)	557	140 (25.1)
Discussed amputation care goals in prior year	184	79 (42.9)	118	51 (43.2)
Worked to develop care plan in prior year	79	51 (64.6)	51	30 (58.8)
Providers helped to coordinate care after move	63	10 (15.9)	41	5 (12.2)

Abbreviations: CSS; client satisfaction survey; DoD, US Department of Defense; OPUS, Orthotics and Prosthetics User's Survey; VA, US Department of Veterans Affairs.