

Living with Your Ileostomy: A Guide to Home Care

UNC Health Care

Nursing Professional Development, Practice, &
Research

Wound, Ostomy, Continence Nurse Consult Service



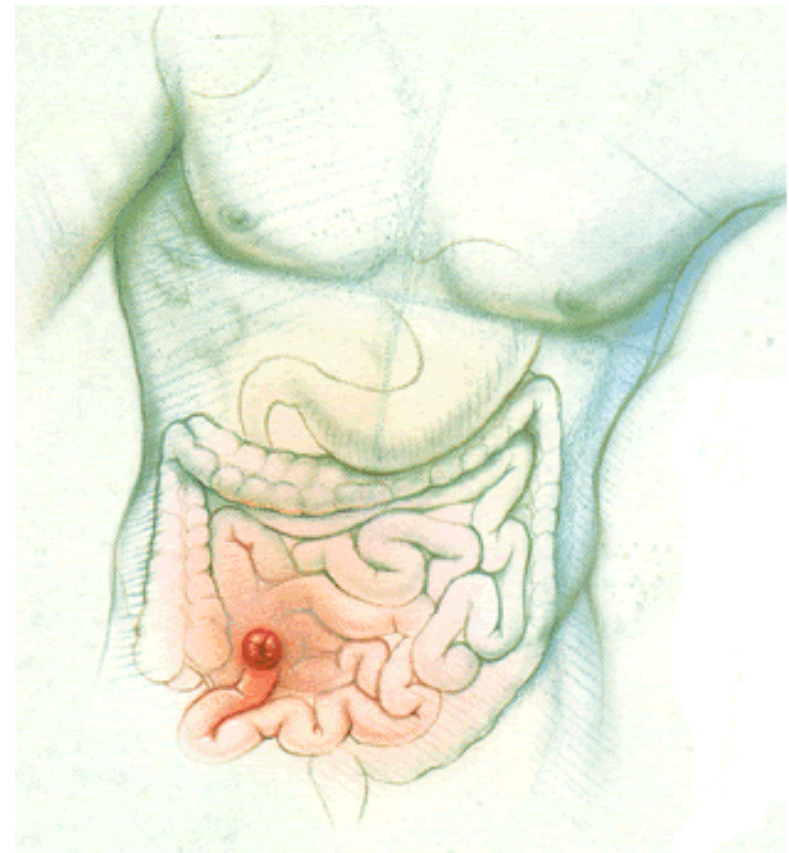
Introduction

- This booklet includes guidelines to help you care for your new ostomy at home.
- It's important to know that you're not alone. Thousands of people have ostomy surgery each year.
- It's also important to know that learning new things takes time. You might not feel comfortable with your ostomy right away.
- If you have further questions after reading this booklet, please contact the WOCN's (wound and ostomy nurses) at UNC.
 - Office phone and voice mail – 919-843-9234
- If your doctor or WOC nurse tells you something different from what you read here, follow their advice.



What's an Ileostomy?

- A surgically-created opening in the abdomen and the ileum (or small intestine). The surgeon brings the ileum through the abdominal opening and sews it down to the skin.
- You will hear this new opening referred to as “stoma”, “ostomy”, or “ileostomy”.

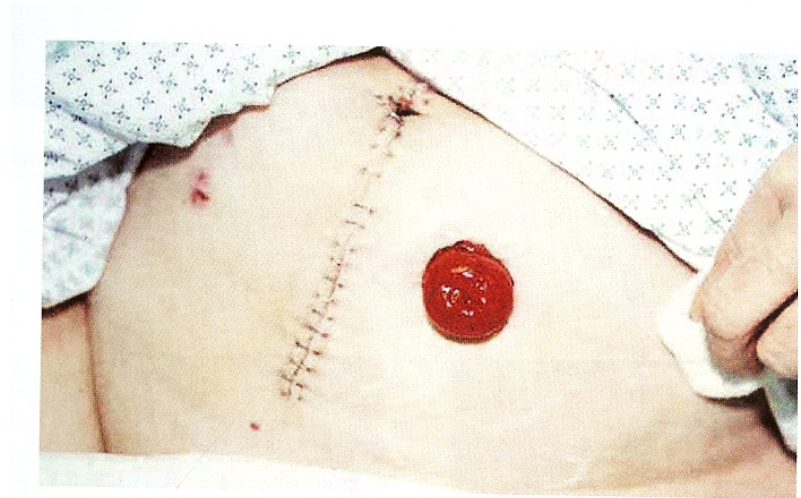


www.googleguide.com



What's an Ileostomy?

- A stoma should appear pink and moist like the inside of your cheek.
- This stoma allows stool and gas to pass through and out of the body.
- You might notice the stoma contract, which is normal.
- Be gentle with your stoma because it may bleed easily and has no nerves to feel when it's touched.
- The stoma will be swollen after surgery and will change in size over the next two months.



What Should You Expect About Your Stool?

- You have no muscle at the opening, so you will not have control over bowel movements or gas.
- Your stool and gas will pass from your stoma and empty into the pouch, which you wear on your abdomen.
- Your stool will thicken to be the consistency of applesauce or oatmeal but it will never be formed.
- For the first couple of days after surgery your stool might be green, but then it will turn brownish-green.
- The color of the stool may be affected by the foods that you eat (beets, spinach, etc.).
- The stool will contain a large amount of digestive enzymes, which can quickly irritate the skin.



What Happens With My Remaining Rectum?

- Your rectum may not have been removed.
- This part of your bowel still makes mucous, which needs to pass from your body.
- You may also pass a small amount of stool from your rectum.
- Don't be alarmed; it's normal.
- If you feel the urge, sit on the toilet and pass this drainage without straining.



Facts About Pouches

- There are many different types of ostomy pouches.
- Your WOC nurse will help you select a pouch that best suits your needs and fits your contours.
- Don't be alarmed if you need to try several pouches before finding the best fit for your stoma and your body shape.
- Most of the newer pouches are odor-proof.



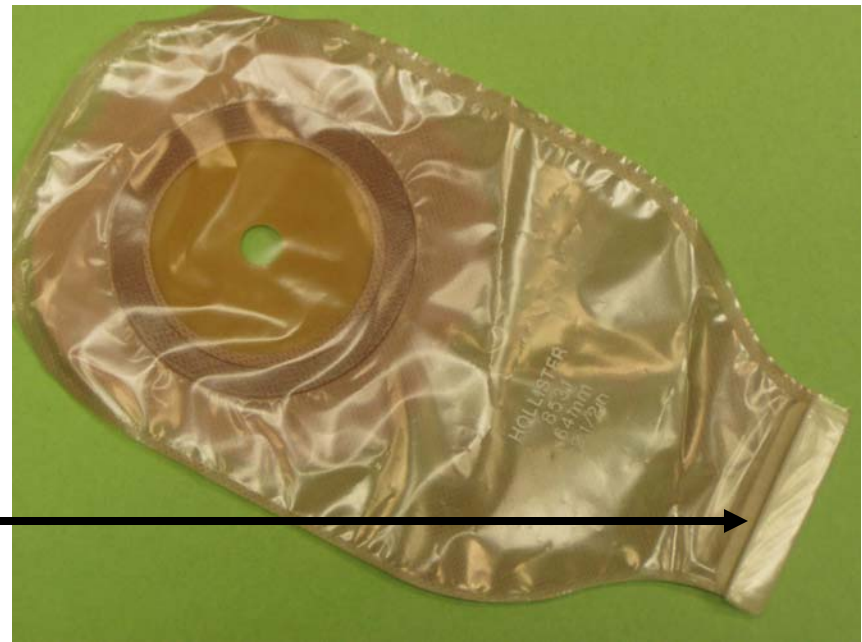
Facts About Pouches

- Two main types of pouching systems.
 - One-piece pouch (pictured on the top)
 - Two-piece pouch (pictured on the bottom)
- A one-piece pouch has the skin barrier and the pouch made as one unit.
- A two-piece pouch has a “wafer” that applies directly to your skin and a pouch that snaps onto the wafer with a Tupperware-like seal.
- Your WOC nurse can show you the differences between these pouches and help you decide which pouch would better fit your lifestyle.
- In the hospital, you will wear a transparent or see-through pouch so that staff can frequently check your stoma and stool.
- At home – if you prefer – you may choose to wear an opaque or tan pouch, which you cannot see through.



Emptying the Pouch

1. Empty the pouch when it's 1/3 to 1/2 full of stool or gas.
2. Undo “velcro” and unfold pouch tail.
3. Drain contents into the toilet or basin.
4. Use toilet paper, a paper towel, or a wet wipe to clean off the tail.
5. Fold pouch tail until “velcro” strips meet and press together.



Managing Gas

- After the surgery, you may have “air in the pipes” or gas, which should decrease over 2 weeks.
- After this period, you may still experience gas.
- You can prevent excessive gas by minimizing swallowed air.
 - Chewing gum, talking while eating, smoking, drinking carbonated beverages, and using straws for drinking.
- You can also prevent excessive gas by eating less gas-producing foods and liquids (refer to attached handout).
- Food should be eaten slowly and chewed well.
- Usually, foods that caused you to have gas before your ostomy surgery will still cause gas.
- If a favorite food causes a lot of gas, eat less of it or eat it when you know you will not be in public 4-6 hours later.
- Some pouches have gas-release valves as well as add-on filters to help make gas more manageable.



Managing Gas and Odor

- **Foods that may cause gas/odor**
 - Highly seasoned foods
 - Onions
 - Garlic
 - Foods in the cabbage family
 - Broccoli
 - Nuts
 - Beans
 - Peas
 - Asparagus
 - Fish
 - Eggs
 - Strong cheeses
 - Carbonated beverages



www.googleguide.com



Food Blockage

- You're at risk for food blockage with your new ileostomy.
- Be cautious with high fiber foods for the first 2 months after surgery (refer to attached handout).
- After 2 months, add these foods into your diet one at a time.
- Chew these foods thoroughly.



High Fiber Foods

- **Foods that may cause blockage**
 - Celery
 - Coleslaw
 - Coconut
 - Pineapple
 - Mushrooms
 - Popcorn
 - Kernels (such as corn on the cob)
 - Whole fruits/vegetables with rough skins, seeds, or fibers
 - Citrus fruits
 - Dried fruit (raisins, figs, dates, etc.)
 - Nuts or seeds



Diet

- How much fluid should you drink?
 - Around 10, 8-oz glasses of fluid per day.
 - Water, juices, sports drink, etc.
 - When you're well hydrated, your urine should be clear/straw-colored.



www.googleguide.com



Activity

Sports/Exercise/Fun

- People who have ostomies enjoy a wide variety of activities, like swimming, skiing, golfing, working out, biking and numerous others.
- You should avoid contact sports that put you at risk of getting hit or punched in the abdomen.
- For the first several weeks after surgery, you should avoid abdominal exercises and heavy lifting.
- Talk to your doctor before you start working out again after surgery.

Swimming

- Your pouch should always be worn while swimming.
- Swimming will not make your pouch come off.
- Always wait a few hours after putting on a new pouch before getting in the water.
- Many styles of bathing suits for women conceal pouches nicely.
- Men may or may not choose to wear a t-shirt.
- If you plan to be in the water for extended periods, water-resistant tape may give your pouching system extra security.

Work

- Your doctor will talk with you about when you should be able to return to work.
- If your job involves heavy lifting, let your doctor know.
- You may need to wear an ostomy support belt.



Activity

Sexual Activity

- You may have fear that a spouse or loved one will not be able to accept your new ostomy.
- Don't assume that your partner will be "turned off" by the fact that you have an ostomy.
- Your partner may be afraid of hurting you.
- You will need to let your partner know that you still desire closeness and that sexual activity will not hurt the stoma.
- Ask your doctor about your sexual concerns
- Your doctor will tell you when it is safe to begin having sex again.
- Don't use the stoma as an orifice for intercourse
- A few basic tips
 - Practice good hygiene.
 - Empty your pouch first.
 - Be sure you have a good seal.
 - You may want to wear a pouch cover.
 - Some men wear a t-shirt or cumberbund.
 - Some women prefer to wear crotch-less panties or teddies with a snap crotch.
 - You may consider the top position to give you more control as well as make your partner feel less worried about hurting you.



Other Tips

- You should be able to wear a pouch on average for 3-5 days.
- Change your pouch at a time when your ileostomy isn't very active.
 - Your ileostomy will be “quiet” or less active in the morning before breakfast and before activity.
- Don't poke pinholes in your pouch to let gas out.
- To avoid splashing, put toilet paper in the toilet before emptying.
- As often as desired, put ostomy deodorizer or 1 tablespoon of mouthwash inside the pouch for odor control.
- To prevent stool from sticking, spray a small amount of cooking spray, like Pam, or place ostomy lubricant into the pouch.
- Keep about 3-4 weeks of extra supplies on hand.
- Don't preorder a large amount of supplies in case your needs change.
- Store your supplies in a cool place.
- You may change your pouch while sitting or standing in front of a mirror.



Changing a 1-Piece Pouch

1. Gather all supplies (Washcloth, Pen, Pouch, Scissors, Stoma Paste, Stoma Measuring Guide)
2. Gently remove the pouch from skin working from top to bottom.
3. Wash skin around your stoma with a soft cloth and water.
4. As needed, shave the hair around stoma starting close to the stoma and moving outward in order to prevent nicking the stoma.
5. Using the Stoma Measuring Guide, measure and select the smallest size that fits around the stoma without touching it.
6. Trace the correctly-sized pattern on back of pouch.
7. Cut along traced line.
8. Check the fit of the pouch.
9. Remove backing paper from the wafer adhesive.
10. Squeeze out stoma paste or “caulking” around cut opening on the back of wafer.
11. Re-clean skin and dry well.
12. Apply pouch to the skin.
13. Remove remaining strips of backing paper.
14. Close tail.
15. Cover pouch with hand for 5 minutes to trap body heat, which “melts” wafer onto skin.



Changing a 2-Piece Pouch

1. Gather all supplies (Washcloth, Pen, Wafer/Pouch, Scissors, Stoma Paste, Stoma Measuring Guide)
2. Gently remove the pouch from skin working from top to bottom.
3. Wash skin around your stoma with a soft cloth and water.
4. As needed, shave the hair around stoma starting close to the stoma and moving outward in order to prevent nicking the stoma.
5. Using the Stoma Measuring Guide, measure and select the smallest size that fits around the stoma without touching it.
6. Trace the correctly-sized pattern on back of wafer.
7. Cut along traced line.
8. Check the fit of the wafer.
9. Snap the wafer and pouch together and check the seal.
10. Remove backing paper from the wafer adhesive.
11. Squeeze out stoma paste or “caulking” around cut opening on the back of wafer.
12. Re-clean skin and dry well.
13. Apply pouch to the skin.
14. Remove remaining strips of backing paper.
15. Close tail.
16. Cover pouch with hand for 5 minutes to trap body heat, which “melts” wafer onto skin.



Skin Irritation

- Take extra care of the skin around your stoma.
- Always remove your pouch gently from your skin.
- Stinging or burning underneath your pouch may mean that you have a leak.
- Do not “patch” a leaking pouch.
- If the pouch leaks, change it right away, even if it’s not due to be changed.



Skin Irritation

“Crusting” treatment for skin irritation

1. Clean area around your stoma with water and pat dry.
2. Dust with Stoma Powder directly on irritated skin.
 - Powder won't hurt your stoma
3. Use a non-alcohol skin prep pad to “blot” or “dab” gently on top of Stoma Powder.
 - Powder will seem to disappear/dissolve.
 - After 10-15 seconds, a “crust” will have formed on the skin.
4. After area dries, pouch as usual.
 - If skin itches and has an irregular red rash or if skin doesn't improve, you may have a yeast rash around your stoma, and you will need to call your WOC nurse or your doctor.



Supplies

- o Steps to getting your ostomy supplies.
 - o You need a prescription.
 - o It will read “ostomy supplies as needed.”
 - o You need a new prescription yearly and when changing suppliers.
 - o Your prescription remains on file and valid for 1 year with the supplier.
 - o Contact your insurance company.
 - o Notify them of your new ostomy and your need of supplies.
 - o Get the details of your coverage.
 - o Medicare covers 80% of supplies
 - o Medicaid covers supplies through a home health company and/or some Durable Medical Equipment companies (Mercy Surgical # 1-800-637-2950, National Rehab # 1-877-567-8468 ext. 389).
 - o Get a list of “preferred providers or suppliers.”
 - o Options of suppliers
 - o Durable Medical Equipment companies
 - o Some local pharmacies
 - o Mail-order/internet companies (Byram Medical # 1-800-234-1779, Edgepark Surgical Inc. # 1-800-321-0591, American Ostomy Supply # 1-800-858-5858)



Supplies Used at UNC Health Care

Order #	Product
15521	Coloplast Sensura 1-Piece Pouch
8531	Hollister Premier 1-Piece Pouch
14603 & 18003	Hollister New Image 2-Piece Pouching System
79300	Hollister Stoma Paste
7906	Hollister Stoma Powder
3344	3M No-Sting Barrier Film



Travel

- Always travel with an extra set of supplies (pouch, clamp, scissors, etc).
- In the car, wear your seat belt either above/below your stoma or use a small pillow between the belt and stoma.
- Don't leave ostomy supplies in the car during warm weather because they will melt.
- When flying, check the TSA and UOAA websites for current recommendations/tips.



Bathing

- You can take a shower with your pouch on or off.
- Take a bath with your pouch on.
- If you're showering on the day that you've planned to change your pouch, you may remove it and shower without your pouch.
- You may have drainage while taking a shower.
- In between your pouch change days, you may shower with your pouch in place.
- There's no need to cover your pouch.
- You may also use water resistant tape around the perimeter of the pouch.
- To dry off your pouch, use a towel and/or a hair dryer set on cool air.



Clothes

- You should be able to wear the same style of clothes you have always worn.
- You should not, however, wear tight clothing or belts over your stoma, which would rub your stoma and cause it to bleed.
- You may consider suspenders or an elastic waistband.
- Consider exploring the internet for ostomy clothing options.



When Should You Call Your Doctor?

- If your stoma color changes from a healthy pink/red to dark purple, brown, or black.
- If you have diarrhea or vomiting.
 - Diarrhea would be stool more watery than normal, emptying your pouch more frequently than normal, or output greater than 1 liter in a 24-hour period.
- If you are having abdominal pain or cramping.
- If you are having bleeding from your stoma that won't stop with pressure.
- No stool for 12 hours



When Should You Call Your WOC Nurse

- If you have any questions or problems with putting your pouch on and keeping it on.
- If you have red or irritated skin around your stoma.



Resources

- Hollister Educational Theater
 - <http://www.hollister.com/us/ostomy/learning/theatre.asp>
- UOAA
 - Home – <http://www.uoaa.org>
 - Guidebooks – http://www.uoaa.org/ostomy_info
 - Support Groups – <http://www.uoaa.org/supportgroups.shtml>
- UNC-HC WOCN Website
 - Home – <http://www.unchealthcare.org/site/Nursing/servicelines/wocn>
 - Accessories (covers, undergarments, etc.) – Home > Patient's Page > Ostomy Accessories
- UNC-HC Skype Name
 - uncwocn



Follow Up

- UNC Hospitals WOC Nurses (Barbara Koruda, Lara Leininger, Michael Kalos, and Lisa Jenkins)
 - Office phone and voice mail – 919-843-9234
 - Messages will be returned by the next business day
 - Work hours – Monday through Friday, 8:00am to 4:30 pm
- To see a WOC nurse during your appointment
 - Arrive no later than **3:30 p.m.** despite the scheduled time
 - Request to see the WOC nurse at the check-in desk

