

COLON AND RECTAL SURGERY

Ostomy Guide



CARING FOR YOUR OSTOMY

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CARING FOR YOUR OSTOMY

An ostomy, or stoma, is an opening on the abdominal wall through which waste material passes out of the body into a pouch for emptying. An ostomy may be temporary or permanent. There are two types of ostomies: a **colostomy** is created from the large intestine (colon), and an **ileostomy** is created from the small intestine (ileum).

Type of Stoma	
Pouch Number and Brand	
Surgeon	314-454-7177
Ostomy Nurse	314-454-7177

In the Hospital

Following your surgery, you will meet your ostomy nurse, who will teach you how to care for your stoma. The ostomy nurse will see you daily (Monday to Friday) while you are hospitalized and can help you adjust to your ostomy and answer your questions.

Your Home Ostomy Care Following Discharge

It is common for patients who have undergone ostomy surgery to receive home health care following discharge. Eligibility is determined by individual insurance plans, not the surgeon's office.

If you are not getting the support you need, have
questions or are having difficulty keeping your bag on for
longer than 24 hours, call the office at 314-454-7177 to
schedule an appointment with our certified ostomy nurse.

What is an Ostomy Nurse?

- A Wound, Ostomy and Continence (WOC) nurse, or ostomy nurse, is a registered nurse who specialize in the care of patients with wounds, ostomies or continence disorders.
- An ostomy nurse will help manage your postoperative care and ensure that you are adjusting to your new ostomy, understand basic care of your ostomy and have support following hospital discharge.
- Outpatient resources are available through your surgeons office. Please call for an appointment.

Choosing Supplies:

- Having the proper ostomy supplies important.
- The type of pouching you used in the hospital may need to be changed in the weeks following surgery. Your stoma may shrink and your abdomen will change as you heal.
- Your ostomy nurse is a good source of information for new products. If you are experiencing difficulty or have questions, call 314-454-7177 to make an appointment with our ostomy nurse to evaluate your pouching system.

Obtaining Supplies:

- On discharge you will be given starter supplies.
- Some patients with home health care will receive supplies through their home health agency, while others will be directed to order supplies depending on insurance. See page 12 for providers.
- Supplies require a physician order and are obtained through durable medical equipment providers.
- Allow one to two weeks to process and receive your order.
- Orders will require a physician's signature.
- Please ask your providers to fax these to us at 314-454-5249.
- Your insurance company can assist with questions regarding suppliers they have a contract with and coverage for supplies. See page 12.

Paying for Your Supplies:

- The product and supplier you choose is determined by your insurance and personal requirements. Always check with your insurance carrier for the details of your insurance.
- Medicare Part B: Covers ostomy supplies at a predetermined maximum quantity each month.
- Medicaid is the federal/state insurance you should check with the state Medicaid office for specifics.
- Individual Health Insurance: most plans typically will pay you 80% of the "reasonable and customary" costs after the deductible is met.

Outpatient Ostomy Nursing Services

St. Louis

Bonnie Johnston | 314-454-7177

Registered Nurse, Adult Nurse Practitioner, Certified Wound Ostomy Continence Nurse

Washington University Colon and Rectal Surgery

- Center for Advanced Medicine 4921 Parkview Place, St. Louis, MO 63110
- Center for Advanced Medicine South County
 5201 Midamerica Pl., St. Louis, MO 63129
- Barnes-Jewish West County Hospital
 1040 N. Mason Rd. Suite 120, St. Louis, MO 63141

 Medicare, Medicaid and Most Private Insurances accepted

Medical West Healthcare Center | 314-725-1888

444 S. Brentwood Blvd., Clayton, MO 63105 Consult fee applies – no insurance accepted; open Saturdays

In Your Area

Wound Ostomy Continence Nurse Society

wocn.org/page/Nurse_Referral

COLOSTOMY PATIENTS

A colostomy is a stoma, or opening, on the abdomen created from the large intestine (colon), through which fecal matter is eliminated.

Your care team covers these steps to improve your recovery.

Preoperative education and stoma site markin			Preoperat	ive educa	ition and	stomas	site n	narking
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- ☐ Postoperative ostomy nurse education pouching
- ☐ Postoperative ostomy nurse education diet and fluids
- ☐ Home health (as approved by insurance)
- ☐ Postoperative ostomy nurse visit in surgeon's office

In the Hospital

Following surgery, you will be asked to participate in the care of your ostomy. Your ostomy nurse, the staff nurses and patient care technicians will all assist you as you become independent.

You should:

- ☐ Empty your pouch independently
- ☐ Understand diet and fluid recommendations
- ☐ Identify and manage constipation
- Change a pouch independently at least once
- Understand complications with the skin around your stoma and when and who to call if this happens
- ☐ Identify who to call for ostomy care following discharge

Following Discharge

- It is okay if you do not have a bowel movement every day.
- Eat a high fiber diet and drink six to eight glasses of water daily.
- Stool softeners or laxatives are okay if you are constipated.
- Skin breakdown such as redness, bleeding and pain are not normal. Please call the office at 314-454-7177 and schedule an appointment with the ostomy nurse if you'd like help with pouching.
- Please call the office at 314-454-7177 with questions.

Fiber for Colostomy Patients

- Why fiber? The purpose of a fiber supplement is to add bulk to your stool so it is easier to pass and to prevent caking of stool under the ostomy appliance. The daily recommendation of fiber is 25-30 grams each day.
- Why do I need a fiber supplement if I am not constipated? The amount of daily fiber supplement that we recommend here is not considered a laxative.
- To meet this goal you may take one of the following:
 - -Original texture Metamucil® powder, two to three tablespoons
 - -Konsyl® powder,two to three level teaspoons
- Mix the fiber supplement in eight ounces of water, juice or sugar-free flavored beverage of your choice. It is best to use a shaker cup or a cup with a lid. Shake vigorously and then drink quickly.
- Every day, drink six to eight (eight ounce) glasses of caffeine-free beverages, preferably water. You can drink caffeinated beverages, but don't count them in your daily fluid intake total.
- Why not fiber pills? We have found that fiber pills or capsules are not as effective as the supplements listed above.

ILEOSTOMY PATIENTS

An ileostomy is a stoma, or opening, on the abdomen created from the small intestine (ileum), through which fecal matter is eliminated.

lleostomy patients are at increased risk for dehydration, difficulty pouching and skin breakdown. Patients with a loop ileostomy are at even greater risk due to location of the stoma in the small bowel.

Your care team covers these steps to improve your recovery.

Ш	Preoperative education and stoma site marking
	Postoperative ostomy nurse education - pouching
	Postoperative ostomy nurse education - diet and fluids
	Home health (as approved by insurance)
П	Postonerative ostomy nurse visit in surgeon's office

After surgery, you will participate in the care of your ostomy. Your nurses and patient care technician will all assist you

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Υοι	ı should:
	Have a measuring device provided by your care team.
	Empty your pouch into the measuring container that is placed into the toilet or a canister.
	Understand the ileostomy input and output chart on pages 10-11 and record your measurements.
	Total your output every 24 hours. Discuss with your care team. More than 1,200 mL in 24 hours is too high. See page seven
	Know how and when to take the medications on page eight to nine.
	Understand ileostomy diet on page six.
	Know how to prevent dehydration. See pages seven to 11.

Change a pouch independently at least once.

Understand complications with the skin around your stoma and when and who to call if this happens.
 Identify who to call for ostomy care following discharge.
 Continue to measure and record output until your postop visit. Call us at 314-454-7177 if your output is greater

than 1,200 mL or you have problems pouching.

Know how to get ostomy supplies. See page 12.

Ileostomy Diet/Nutrition

See page six. Follow this diet for four to six weeks.

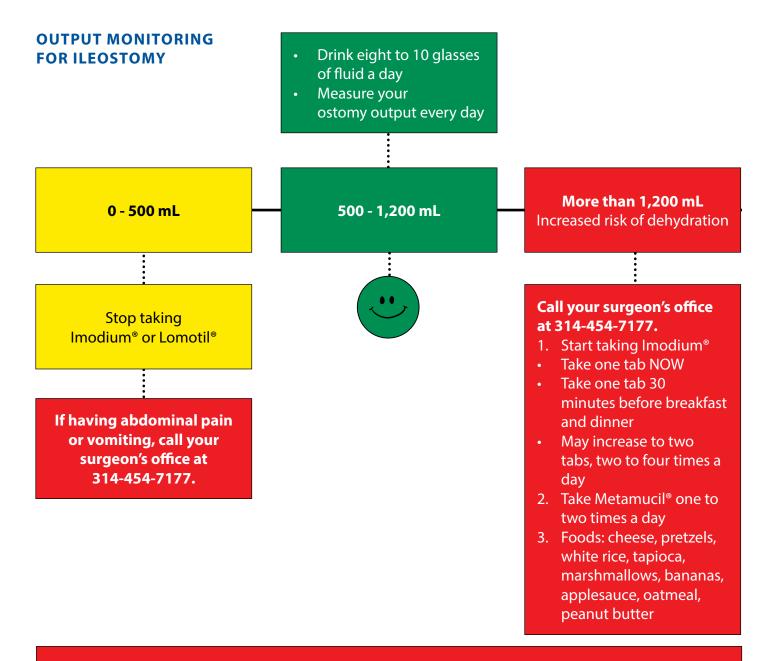
Tips

- Small bites of food.
- Chew food well.
- Do not eat fast.
- Small, frequent meals and snacks instead of large meals.
- Eat largest meal in the middle of the day to help decrease stool output at night.
- Drinking with straws, and drinking carbonated drinks may increase the amount of gas your body produces.
- Foods that may decrease odor are buttermilk, yogurt, kefir, parsley, and cranberry juice.
- If the stool becomes watery, eat foods to thicken stool:
 - Banana or applesauce
 - Pasta, potatoes, tapioca, or rice
 - Smooth peanut butter
 - Cheese
 - Marshmallows
- Drink eight to 10 cups of liquid per day.
- Stoma output should be more than 500 mL and less than 1,200 mL per day. See page seven.
- You may need anti-motility medications such as Imodium[®] if output more than 1,200 mL. See page seven.
- No two people react the same to foods, take the time to learn what your body tolerates best.

Diet - Ileostomy Foods for Four to Six Weeks After Surgery

Food tolerance is different for everyone. Once you start adding foods back into your diet, after four to six weeks, introduce foods one at a time. If you are unsure about adding to your diet, call our office at 314-454-7177.

RECOMMENDED AFTER SURGERY	AVOID FOR FOUR TO SIX WEEKS
Milk	Asparagus
Regular, powdered or soy milk	Bamboo shoots
Buttermilk	Bean sprouts
Yogurt (non-fruited)	Berries
Cheese	Bran
Low-fat ice cream or sherbet	Broccoli
Meat and other protein foods	Cabbage
No beans, nuts, or seeds. Chew all meats well.	Canned fruits if they have peels, seeds or pulp
Meats and poultry (no skin)	Cauliflower
Smooth nut butter	Celery
• Fish	Citrus fruits
• Eggs	Coconut
Bacon	Cole slaw
Sausage (no casing)	Corn
Grains	Cucumbers
Avoid whole grains.	Dried beans and peas
Bread, rolls, crackers, pasta, cereal made with white	Dried fruit (raisins)
flour	Fruit skin/peels
White rice	Fruit with pulp, skin or seeds
 Cream of Wheat/ oatmeal/ grits 	Granola
 Pancakes/waffles 	Lentils
Vegetables	Lettuce (salads)
Some may cause gas, blockages, or odors for some people.	Meat with skins/casings (such as a bratwurst)
 The ONLY vegetables allowed are well-cooked carrots 	Mushrooms
and potatoes without skin	Nuts or food with nuts
Fruits	Olives
Some fruits with skins and seeds may cause blockages.	Pea pods
 Pulp-free fruit juices (except prune juice) 	Peas
• Banana	Pickles
 Avocado 	Pineapple
 Soft melons (honeydew, cantaloupe) 	Popcorn
 Peeled or cooked fruits without skin 	Prunes
Applesauce	Raw vegetables
 Canned fruits (except pineapple and grapes) 	Sauerkraut
Any Fats	Seeds or foods with seeds
Fats may cause discomfort. Start with very small amounts.	Spinach
Beverages	Squash
Decaffeinated coffee or tea	Wheat bran cereals
Noncarbonated beverages	Whole wheat bread
 Lower-sugar sports drinks, like G2® or Powerade Zero® 	Wild or brown rice



When to call your surgeon's office (314-454-7177) or go to the hospital:

- Weakness
- Unable to eat/drink
- Decreased urination (less than 500 mL in 24 hours)
- Persistent high ostomy output (greater than 1,200 mL in 24 hours)

Ileostomy Medications for High Output Ileostomy

These medications may be used to control your output. Ileostomy patients may experience output greater than 1,200 mL following surgery. Output more than 1,200 mL is too high and will cause you to become dehydrated. Dehydration can lead to a hospital readmission and cannot be ignored. If you have high output, your doctor will recommend you eat certain foods and take medications to slow down and reduce the amount of output from your ostomy.

Always check with your doctor before adding or changing medications.

MEDICATION	DESCRIPTION	HOW TO TAKE	HOW MUCH TO TAKE	MY PRESCRIPTION
Imodium [®]	An over-the-counter pill to reduce the amount of ostomy output	30 min. before meals and at bedtime or every six hours	one to two tabs; up to eight tabs daily	
Lomotil®	A prescription used to reduce the amount of ostomy output	30 min. before meals and at bedtime or every six hours	one to two tabs; up to eight tabs daily	
Metamucil®	A fiber supplement – this will thicken your output	Daily mixed in water or juice	one teaspoon to one tablespoon; one to two times a day	
Food: oatmeal, pasta, cheese, marshmallows, rice, bread	Certain foods will thicken your output	Include one of these foods at every meal or snack	Eat throughout every day	

ILEOSTOMY MEDICATION SCHEDULE

Use this chart to remind you what time you need to take your ileostomy medications each day. Call the office for assistance.

MEDICATION	6 a.m.	7 a.m.	8 a.m.	9 a.m.	10 a.m.	11 a.m.	12 p.m.	1 p.m.	2 p.m.	3 p.m.	4 p.m.	5 p.m.

MEDICATION	6 p.m.	7 p.m.	8 p.m.	9 p.m.	10 p.m.	11 p.m.	12 a.m	1 a.m	2 a.m	3 a.m	4 a.m	5 a.m.

INPUT AND ILEOSTOMY OUTPUT LOG

Your nurse will teach you how to keep track of your output. Continue to do this for two weeks after you go home. You should also keep track of how much you are drinking each day. Use the chart provided to record your fluids in and ostomy output to identify hydration. Total your output at the end of each day. See example below. (30 mL = one ounce)

Output should NOT exceed 1,200 mL per day
Call the office at 314-454-7177 if your output is greater than 1,200 mL in 24 hours.

DATE	FLUIDS IN	OSTOMY OUTPUT (ML) CONSISTENCY; (LIQUID/APPLE SAUCE/OATMEAL)	URINE COLOR (CLEAR, LIGHT YELLOW, AMBER, DARK/TEA COLORED)	DAILY TOTAL OUTPUT
Monday, Aug. 21, 9am	16 oz.	150 mL (apple sauce)	yellow	
Monday, Aug. 21, 1pm	6 oz.	250 mL (apple sauce)	dark yellow	
Monday, Aug. 21, 9am	21 oz	300 mL (liquid)	clear	700 mL

DATE	FLUIDS IN	OSTOMY OUTPUT (ML) CONSISTENCY; (LIQUID/APPLE SAUCE/OATMEAL)	URINE COLOR (CLEAR, LIGHT YELLOW, AMBER, DARK/TEA COLORED)	DAILY TOTAL OUTPUT

ADDITIONAL RESOURCES

GENERAL RESOURCES	CONTACT
Washington University Colon Rectal Surgery	ColonRectalSurg.wustl.edu
Barnes-Jewish Hospital	BarnesJewish.org/Patients-Visitors
Barnes-Jewish West County Hospital	BarnesJewishWestCounty.org/Patient-Visitor-Information
Washington University Physicians	WUPhysicians.wustl.edu
Siteman Cancer Center	Siteman.wustl.edu

OSTOMY RESOURCES	CONTACT
Coloplast Coloplast ostomy care resources	Coloplast.com 1-888-726-7872
ConvaTec Convatec ostomy care resources	convatec.com 1-800-422-8811
Hollister Hollister ostomy care resources	hollister.com/en/ostomycare/ostomycarelearningcenter 1-888-740-8999
Byram Medical Byram Medical ostomy care resources	byramhealthcare.com/ostomy 1-877-902-9726
Edgepark Medical Edgepark ostomy care resources	edgepark.com 1-888-394-5375
Liberator Medical Liberator ostomy care resources	liberatormedical.com 1-800-601-7185
McKesson McKesson ostomy care resources	mpcs.mckesson.com 1-855-404-6727
Medline Medline ostomy care resources	medline.com 1-800-633-5463
Securi-T/Genaire Securi-T/Genaire ostomy care resources	genairex.com 1-877-726-4409
United Ostomy Associations of America, Inc. Ostomy resources, advocacy, and support	Ostomy.org 1-800-826-0826
Great Comebacks Ostomy community	greatcomebacks.com 1-800-422-8811
Ostomy Secrets Retailer for discreet ostomy undergarments	ostomysecrets.com 1-800-518-8515
Nu-Hope Hernia Belts	nu-hope.com 1-800-899-5017
Stealth Belt Support Belts	stealthbelt.com 1-800-237-4491

For more information, visit Physicians.wustl.edu





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