



Trillium
Health Partners

Better Together

Discharge From Hospital Following Ileostomy Surgery.

An Informational Booklet: For You and Your Family.

The booklet is a compilation of helpful hints and suggestions that have been adapted from a variety of sources. The majority of these questions and suggestions have come from people who have learned to live a full and productive life with an ostomy.

Karen Witkowski
Nurse Clinician/Enterostomal Therapy
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Is there any special care for my stoma or the skin around my stoma?

- To clean the skin around your stoma, all you really need to use is warm water and a washcloth, or good quality paper towels. The use of gauze or gloves is not necessary.
- It is not necessary to use soap to clean around our stoma. But if you prefer to use soap, use a very mild soap. Avoid using soaps and cleansers with oils, perfumes, or deodorants since these can sometimes cause skin problems or keep your skin barrier from sticking.
- Rinse the soap off the skin around your stoma very well because the residue may keep your flange from sticking and may also cause skin irritation. Always dry your skin well before putting on your new pouching system.
- Sometimes you may see a small amount of blood on your cloth. The stoma tissue contains small blood vessels and may bleed a small amount when cleaned. Any bleeding that does not stop should be reported to your health care professional.
- The stoma has no nerve endings, so you are not able to feel, if you are rubbing too hard. Therefore, use a gentle touch when cleaning around the stoma – do not scrub.
- Do not use alcohol or any other harsh chemicals to clean your skin or stoma. They may be irritating to your skin. Do not use moistened wipes, baby wipes or towelettes that contain lanolin or other oils, these can interfere with the skin barrier sticking and may irritate your skin. Unless recommended, do not apply powders or creams to the skin around your stoma because they can keep your skin barrier from sticking.

How do I change my pouching system?



Steps to Apply Hollister One-Piece Pouching System

1. Assemble the necessary supplies

- Pouch, measuring guide, scissors, marker, barrier ring (as required), disposal bag to discard your used product, wet and dry cleaning cloths.

2. Remove the pouching system

- Gently remove the pouching system. Keep one finger against the skin and always remove in the direction of hair growth. Dispose of pouch in the disposal bag.

3. Care for the Skin

- Gently cleanse the stoma and surrounding skin with wet, warm cloth. A mild soap may be used as long as all residues are removed. Pat skin dry.

4. Check stoma and surrounding skin condition

- The stoma will be swollen after surgery. It may take six weeks for the stoma to reduce to its permanent size.
- The stoma should be light pink or red in color.
- The stoma will be moist and may bleed slightly when washed.
- The skin around the stoma should not have any signs of a rash or redness.
- The stoma and surrounding skin should not be painful.

5. Measure stoma

- Measure the stoma using measuring guide - it is important that there be a small amount of space (wiggle room) (between the cut opening and stoma. This allows room for the stoma to expand and pass stool through the opening.

6. Prepare the pouch

- Trace the pattern of the stoma onto the paper backing of the pouch.
- Cut the pouch to match the pattern.
- Remove the paper backing from the skin barrier portion of the pouch and set aside.
- Apply a barrier ring around the cut opening of the skin barrier portion of the pouch (if using).

7. Apply the pouch

- Place the skin barrier opening around your stoma. Make sure the pouch is hanging in the correct position, normally downward. Gently press the barrier onto your skin. Remove the remaining tape backing.

8. Close pouch

- Roll up the pouch three times in the same direction and press the seal from the middle out until secure.

General Guidelines

- Empty the pouch when 1/3 to 1/2 full of stool/ gas.
- Change the pouching system q Monday / Wednesday and Friday for the first 6 weeks and then twice weekly thereafter (will vary with each individual).
- Change the pouching system if visible signs of leakage or if there is a burning or itchy sensation.

Steps to Apply Hollister Two Piece Pouching System



1. Assemble the necessary supplies

- Flange, pouch, measuring guide, scissors, marker, barrier ring (as required), wet and dry cleaning cloths, disposal bag to discard your used product.

2. Remove pouching system

- Gently remove the pouching system. Keep one finger against the skin and always remove in the direction of hair growth. Dispose of flange and pouch.

3. Care for the stoma and skin

- Gently cleanse the stoma and surrounding skin with wet, warm cloth. A mild soap may be used as long as all residues are removed. Pat skin dry.
- Check stoma and surrounding skin condition
- The stoma will be swollen after surgery. It may take six weeks for the stoma to reduce to its permanent size.
- The stoma should be light pink or red in color.
- The stoma will be moist and may bleed slightly when washed.
- The skin around the stoma should not have any signs of a rash or redness.
- The stoma and surrounding skin should not be painful.

4. Measure the stoma

- For the first six weeks following surgery, the stoma should be measured and the opening in the flange adjusted accordingly. It is important that there be a small amount of space (wiggle) between the cut opening and stoma. This allows room for

the stoma to expand and pass stool through the opening. After the six-week period of time, measurement is generally not required and flanges may be precut in advance.

5. Prepare the flange

- Trace the pattern of the stoma shape onto the back of the flange.
- Cut the flange to match the pattern.
- Remove the clear plastic backing the flange and set the flange aside.
- Apply the barrier ring around the cut opening of the flange – if using.

6. Apply the flange

- Place the skin barrier opening around your stoma and press it gently onto your skin. Remove the remaining tape backing.
- A mirror may be helpful to center the flange

7. Apply the pouch

- Place the pouch onto the base ring of the flange.
- Place your fingers under the flange for support while attaching the pouch to the flange. Move your fingers in a clock-wise fashion.
- Gently tug downward on the pouch to confirm it is securely attached.

8. Apply the closure

- Roll up the pouch three times in the same direction. Fold the flap down and press the seal from the middle out until secure.

General Guidelines

- Empty the pouch when it is 1/3 to 1/2 full of stool or gas.
- Change the complete system q Monday/Wednesday and Friday for the first six weeks and twice weekly thereafter (will vary with each individual).
- Change the complete system if visible signs of leakage.
- Notify your ET nurse or nurse of any concerns or question.

What should I do with my soiled supplies after I change my pouching system?

Put your soiled pouching system into a plastic bag. The plastic bag can then be thrown away in your household garbage.

Personal Hygiene

A person with an ostomy can shower or bathe with or without the pouching system in place. Many people find it quite convenient to plan the pouching system change around the shower. Water, soap or shampoo cannot harm the stoma nor enter the stoma. It is a good habit to empty the pouch before showering, bathing or other water activities.

If the water pressure is too strong do not let it hit your stoma directly.

Check your pouching system before and after water activities. If you are in the water for a long time the pouching system may start to loosen up from your skin. Some people may find it helpful to wait an hour or so after changing their pouching system before swimming.

Pouching systems are waterproof. However, you may feel more secure if you put skin friendly tape around the edges of your skin barrier when you are in the water.

Some people wear tight “biking style” shorts to keep their pouch close to the body and help keep it from “floating”. Other options may include a speedo type bathing suit under a trunk style bathing suit.

Gas filters do not work after they get wet. Therefore, it is best to protect the filter with waterproof tape before water activities. Many of the manufactures supply filter seals with the pouches.

After bathing or swimming, you may use a towel or a hairdryer on the coolest setting to dry the tape and cloth backing of the pouching system to prevent skin irritation from wetness.

What are some ways to keep my skin from getting irritated?

The best skin protection is a well-fitted and comfortable pouching system. Your ET nurse will help you choose the system that works best for you.

The opening of your skin barrier should be no more than 1/8" away from the edge of your stoma.

Measure your stoma once a week for the first six to eight weeks after your ostomy surgery. Your stoma shrinks while it is healing and you need to keep measuring so you can make sure that the opening in the skin barrier is the right size for your stoma. Re-measure your stoma if any irritation develops between the stoma and the flange.

It is helpful to hold your skin smooth as you put your pouching system on to avoid wrinkles that may lead to leakage.

Check your skin and the back of your skin barrier each time you change your pouching system. You can use a mirror to check your skin under the stoma. Look for any places where stool may have leaked under the skin barrier and onto your skin. When you apply your next pouching system these areas may need some extra reinforcement with skin barrier strips, rings or paste. Your ET nurse will advise you when this is recommended.

I have sensitive skin. Will the flange irritate my skin?

If your skin is sensitive, it is helpful to tell your ET nurse. A skin patch test may be necessary to see if you have any reaction to the different skin barriers and tapes. For the most part, the ingredients in the skin barriers do not cause skin irritation. If you are having a "reaction" to the skin barrier or tape, most of the time you will see skin changes that match the shape of the product. Inform your ET nurse so she can determine the cause of the irritation and recommend another product if needed. Itching or burning under the skin barrier may indicate that you have leakage, a skin rash, or a skin infection. You will want to remove your pouching system as soon as possible to check your skin for irritation.

How can I prevent infection?

The stoma is your bowel. It is protected by mucus so stool or urine won't hurt it. A stoma rarely becomes infected. The most important thing is to protect the skin around your stoma. A correct fitting pouching system is the best way to prevent an infection of your skin.

If there is a small leak under my skin barrier, is it okay to patch it with tape or paste?

Always change your pouching system at the first signs of leakage.

Do not try to patch the pouching system with tape or paste. A leak under the skin barrier should not be fixed. Leaving a leaking pouch on can cause skin irritation.

How can I prevent leakage?

Always empty your pouch before it is half-full. Release the gas before the pouch gets too full or use a pouch with a filter.

What can I do to remove hair from around my stoma?

You may shave with an electric razor or dry shave with an ostomy skin barrier powder using a safety razor. Always wash the skin well with water after shaving. To protect the stoma when shaving, place an empty toilet paper roll over the stoma to add protection.

Shaving or clipping excess hair around the stoma in the direction of hair growth may limit skin irritation.

Will my lifestyle have to change?

An ostomy should not affect your ability to resume your lifestyle, whatever that lifestyle was before. Many people find they can continue all of the activities that they enjoyed prior to illness and surgery. It will take time before you will be physically and

emotionally ready to resume normal activity. Allow yourself the recovery time; be good to yourself and take the extra time to regain strength and energy.

What about returning to work? What do I say to my colleagues?

It is normal to be concerned with return to work or school activities. “Will I smell, will there be noises, will they see it, what if someone asks?” are commonly expressed concerns. You need to be reassured that there should not be odor as the pouches are designed for stool; however, deodorant drops or room aerosols for the bathroom can be used to add confidence and comfort. Noises are often muffled by clothing and can be further muffled by placing an arm across the stoma site. The appliance itself should not be visible – the key point to remember is that as a person you have not changed, but rather, have undergone a surface change that has given you back your health. The decision to share with others that you have an ostomy is very personal. Disclosure should occur only if you want it to occur.

Should I be wearing different style of clothing?

The style of clothing you wore prior to ostomy surgery can generally be worn following surgery. Some men may prefer suspenders as opposed to a belt; some people find it more comfortable to wear pants with pleats. A full, fairly snug under pant is generally recommended to give support to the pouching system and create a smooth line under clothing. Snug-fitting clothing can be worn without fear of harming the stoma or interfering with stoma functioning.

Will my diet have to change?

Having an ileostomy is not usually associated with a highly restricted diet. After surgery, your diet may require some modification, but eventually you will be able to enjoy most or all of your favorite foods.

During the first six weeks following surgery, it is recommended that you follow a low fiber or low residue diet. This type of diet avoids the “potential problem foods” such as skins, seeds, nuts, and fresh fruits and vegetables. These foods tend to be more

difficult to digest and could lead to a food blockage. Following the six-week period, all foods should be gradually reintroduced. The dietician will see you while in hospital for education and a review of potential problem foods. A dietician will also be available if you should have questions post discharge from hospital.

You should always be aware of the importance of fluid intake – a least eight glasses of fluid per day, and extra salt and potassium. Once the colon has been removed you lose some of the ability to absorb water, salt and potassium.

What do you mean by a food blockage?

A food blockage is an accumulation of undigested food particles in the intestine, which are not able to pass through the ileostomy. There are specific **signs and symptoms** of a food blockage, which you should be aware of:

- Stool may change from semi-liquid to liquid
- Amount of stool may increase
- Ileostomy may function almost continuously
- Stool may have a noticeable odor
- Abdominal cramping or pain
- Abdomen may feel bloated
- Nausea/vomiting may be present
- If blockage complete – no stool will be passed

If signs of a food blockage are present, you should:

- Walk, or assume a knee-chest position
- Massage the stomach or abdominal area
- Take a warm bath or shower
- Drink warm fluids
- Avoid food
- If symptoms do not subside within a few hours, you should go to your local Emergency Department

Food blockages are often resolved with intravenous fluid and ileostomy lavage or flushing of the bowel. A bland diet with increased fluids is encouraged for a few days following a blockage. Food blockages are not common but can occur. Remember to chew your food well, drink lots of fluids, and reintroduce potential problem foods at the sixth postoperative week.

Should I be concerned about odor?

Ostomy products are designed to control odor. No one should ever detect an odor of stool when the appliance is secure and in place. Presence or absence of odor in the stool is somewhat determined by each individual's body chemistry. There are, however, measures, which can aid in reducing the odor of stool when the appliance is emptied. These include:

- Using commercial deodorizing tablets or liquids for deodorizing the inside of the pouch
- Using aerosols or wicks to freshen the bathroom

Foods which tend to produce odor:

- Fish
- Chicken
- Eggs
- Onions
- Beans
- Vegetables of the cabbage family

Foods and liquids which may reduce odor:

- Cranberry juice
- Yogurt
- Buttermilk
- Fresh parsley

What can I do about gas?

- Eat regular balanced meals. Skipping meals is more likely to increase gas production. Initially after surgery there will be more gas as well as noise due to the fact that the bowel has been handled and is empty. Gas and noise lessens once diet and activity is resumed.

- Eat slowly, chew food well.

- Avoid gum chewing, smoking, mouth breathing, drinking carbonated drinks or sucking on ice chips or candies.

- Be aware of potential gas producing foods and experiment by excluding them from the diet. Troublesome foods may include:
 - Vegetables of the cabbage family
 - Asparagus
 - Sweet potatoes
 - Onions
 - Milk and milk products
 - Melons
 - Dried beans and peas
 - Spicy foods
 - Beer
 - Cheeses such as Roquefort, Brie and other strong cheeses

What does a high stoma output mean?

High ileostomy output means that you are producing more stool than what would be considered normal. Normal ileostomy stool output is between 750cc's to 1000cc's in a 24-hour period. That would be the equivalent of emptying your pouch 4 - 6 times per day. High ileostomy stool output would be more than 1000cc's in a 24- hour period or emptying your appliance more than 8 times a day.

Besides emptying your pouch more frequently you may also experience dehydration (water loss) and electrolyte loss (potassium and sodium loss).

The following are signs and symptoms of **dehydration and electrolyte loss** which potentially could be a problem if your outputs remained high.

Signs of dehydration:

- Increased thirst, dry mouth and skin, decreased urine output, fatigue, shortness of breath, stomach cramps.

Signs of sodium loss:

- Loss of appetite, stomach cramps, cold arms and/or legs, fatigue, feeling faint.

Signs of potassium loss:

- fatigue, muscle weakness, shortness of breath, decreased sensation in arms/legs, gaseous bloated feeling

If you experienced these signs and symptoms, you would need to:

- Increase fluids.
- Decrease foods which may contribute to high outputs – fruit juices, sweetened drinks, coffee, spicy foods, and beer.
- Increase foods and fluids high in sodium – salt, milk, cheese, tomato juice, bread, butter, pickles, chicken soup, bouillon, and pretzels.
- Increase foods and fluids high in potassium – orange juice, tomato juice, tea, bananas, potatoes, melon.
- Separate fluids and foods – wait 30-45 minutes after eating to have fluids.
- Reduce intake of sugars and sweets.
- Include foods higher in soluble fiber – applesauce, bananas, tapioca, barley, and oats.

Are there any medications that I should avoid if I have an ileostomy?

You should be aware of enteric coated or sustained released preparations. Enteric coated (coating added to the pill) or sustained release drugs may not be effective because such drugs can pass unabsorbed through the intestinal tract. Products which can be either crushed or chewed or which are in a liquid or injectable form are best. Always inform your pharmacist that you have an ileostomy when filling new prescriptions.

Do I need to take special precautions when I travel?

Many people with an ostomy travel just like anyone else. Here are some travel tips:

- Carry identification with your medical contact information, ostomy product codes and your ET nurse's name and phone number. Medical "I.D. bracelets" can be ordered through www.diabeticdrugstore.com and click on "I.D. bracelets". Bracelets can also be purchased through drug stores. Your ostomy chapter, ostomy retailer or company will often carry ostomy identification cards.
- Before departing on a trip, check for the name and address of the local ostomy vendors.
- Double the ostomy supplies that you normally require. Always carry supplies in your hand luggage.
- Pre-cut your flanges or pouches in advance to avoid the need for scissors.
- To avoid unnecessary questioning by Immigration in the event of luggage checks, a letter outlining the medical reasons for the ostomy supplies may be helpful. Your ET nurse or Doctor can provide you with the letter.
- Before travelling abroad, get a copy of the current directory of English-speaking physicians in various foreign cities who charge a standard fee. The International

Association for Medical Assistance to Travelers (IAMAT) or www.iamat.org publishes lists of English speaking physicians in over 2,500 cities around the world. Telephone number – 716-754-4883

- Make sure you have travel insurance.
- Do not keep supplies in a car in the summer. Heat can interfere with the ostomy adhesives.
- Take advantage of available bathroom facilities to empty your pouch more frequently than you normally would to avoid unexpected bathroom delays.
- Carry toilet tissues or pre-moistened wipes in the event the next restroom is lacking.
- Carry an “emergency kit”. The kit should contain a zip lock baggie, pre-cut flange, pouch, paste (optional), individually packaged pre-moistened towelettes or paper towel and mirror. Check your kit regularly to make sure items are useable.
- In an emergency, your pouching can be emptied into a Ziploc bag or baggie with twist tie until it can be disposed of later.
- Eat lightly and sensible, especially on airplanes. Gases expand as the plane ascends. Some people will become “gassier” in flight.
- Learn to say "toilet" in more than one language.

Diet Tips:

- Apple sauce, oatmeal, bananas, cheese, creamy peanut butter, boiled rice, tapioca, and boiled milk will help to thicken loose stool.
- Drink at least 6-8 glasses of non-caffeinated liquids each day.

- Caffeine may cause looser output. Beverages such as coffee, tea, chocolate and cola drinks contain caffeine.
- Yogurt helps to control gas formation and buttermilk helps to soothe an irritated bowel.

I'm concerned about intimacy. Are there any suggestions?

It is not unusual for persons with an ostomy to have concerns about resuming relations, and more particularly, whether their sex life will change and/or if their partner will find them less attractive. Fears of rejection, odor, leakage, and performance are natural. You need to share your feelings and concerns. Understanding each other's feelings is a very important part of coping with an ostomy. An ostomy should not limit or curtail sexual activity. In fact, many people report that the experience of the surgery and the knowledge that the disease is treated has brought their families and loved ones closer than they were before. During sexual activity, you may want to experiment with different positions to find the most comfortable. Prior to sexual intimacy you will want to empty your appliance to minimize concerns about leakage or spillage. A closed end pouch, mini pouch, a frilly half-slip, crotch less panties, a tube top stretched over the abdomen or cummerbund can often help to keep you from thinking about your ostomy. You will need to speak with your surgeon if there are difficulties with achieving an erection, pain with intercourse or with any other concerns.

Will I have any help at home?

Prior to discharge, you will be seen by the Community Care Access Center Coordinator (CCAC) who will organize community nurses to continue to provide you with the support and education. All Ontario residents are eligible for Home Care.

Where do I purchase supplies?

Your hospital ET nurse will provide you with initial supplies and order information prior to discharge. CCAC may provide limited ostomy supplies for up to 4 weeks. This will be very dependent upon where you live.

Vendor information will be provided to you prior to discharge. You always want to have enough products available – one month's supply is suggested.

I'm feeling stressed!

Stress - a word we all use on a regular basis to describe a wide variety of thoughts and feelings. "I'm stressed out," "Too much stress at work," "I'm under too much stress!"

Stress is a word that is hard to define because it means different things to different people; however, it's clear that most stress is a negative feeling rather than a positive feeling.

Coping with disease, or dealing with the stress of surgery means dealing with a variety of problems, including: pain, uncertainty and fear about the future; limitation in physical ability; pain; changes in social relationship roles; insecurity about physical attractiveness or competence; negotiating and communicating with a complex medical system that can be confusing and frightening. The following discussion on stress and coping will hopefully allow you to recognize if you are suffering from stress and gain some insight into how to effectively handle stress.

How do I know if I am suffering from stress?

Each person handles stress differently. Some people actually seek out situations that may appear stressful to others. A major life decision, such as changing careers or buying a house, might be overwhelming for some people, while others may welcome the change. Some find sitting in traffic too much to tolerate, while others take it in stride. The key is determining your personal tolerance levels for stressful situations.

Stress can cause physical, emotional and behavioral disorders that can affect your health, vitality, peace-of-mind, as well as personal and professional relationships. Too much stress can cause relatively minor illnesses such as insomnia, backaches, or headaches, and can contribute to potentially life-threatening diseases like high blood pressure and heart disease.

What are the signs of stress?

The most common signs of stress are:

- Excessive fatigue / exhaustion
- Muscle tension
- Irritability / anger
- Upset stomach
- Nervousness / trembling
- Sleeplessness
- Cold, sweaty hands
- Loss of, or increase in, appetite
- Grinding teeth / clenching jaws
- General body complaints (weakness, dizziness, headaches or pain in the back or muscles)

Tips for reducing or controlling stress

- **Be realistic.** If you feel overwhelmed by some activities (yours and/or family's), learn to say NO! Eliminate an activity that is not absolutely necessary. You may be taking on more responsibility than you can or should handle. If you meet resistance, give reasons why you are making the changes. Be willing to listen to other's suggestions and be ready to compromise.
- **Shed the "superman/superwoman" urge.** No one is perfect, so don't expect perfection from you or others. Ask yourself, "What really needs to be done?" How much can I do? Is the deadline realistic? What adjustments can I make?" Don't hesitate to ask for help if you need it.

- **Meditate.** Just ten to twenty minutes of quiet reflection may bring relief from chronic stress as well as increase your tolerance to it. Use the time to listen to music, relax and try to think of pleasant things or nothing.

- **Visualize.** Use your imagination and picture how you can manage a stressful situation more successfully. Whether it is a business presentation or moving to a new place, many people feel visual rehearsals boost self-confidence and enable them to take a more positive approach to a difficult task.

- **Take one thing at a time.** For people under tension or stress, an ordinary workload can sometimes seem unbearable. The best way to cope with this feeling of being overwhelmed is to take one task at a time. Pick one urgent task and work on it. Once you accomplish that task, choose the next one. The positive feeling of "checking off" tasks is very satisfying. It will motivate you to keep going.

- **Exercise.** Regular exercise is a popular way to relieve stress. Twenty to thirty minutes of physical activity benefits both the body and the mind.

- **Hobbies.** Take a break from your worries by doing something you enjoy. Whether it is gardening or painting, schedule time to indulge your interest.

- **Healthy life style.** Good nutrition makes a difference. Limit intake of caffeine and alcohol (alcohol actually disturbs regular sleep patterns), get adequate rest, exercise, and balance work and play.

- **Share your feelings.** A conversation with a friend lets you know that you are not the only one having a bad day, caring for a sick child or working in a busy office. Stay in touch with friends and family. Let them provide love, support and guidance. Do not try to cope alone.

- **Give in occasionally. Be flexible!** If you find you're meeting constant opposition in either your personal or professional life, rethink your position or

strategy. Arguing only intensifies stressful feelings. If you know you are right, stand your ground, but do so calmly and rationally. Make allowances for other's opinion and be prepared to compromise. If you are willing to give in, others may meet you halfway. Not only will you reduce your stress; you may find better solutions to your problems.

- **Go easy with criticism.** You may expect too much of yourself and others. Try not to feel frustrated, let down, disappointed or even "trapped" when another person does not measure up. The "other person" may be a wife, a husband or child whom you are trying to change to suit you. Remember that everyone is unique, and has his or her own virtues, shortcomings, and right to develop as an individual.

Where do I get help if it's needed?

Help may be as close as a friend or spouse. But if you think that you or someone you know may be under more stress than just dealing with a passing difficulty, it may be helpful to talk with your doctor, spiritual advisor, or employee assistance professionals. They may suggest you visit with a psychiatrist, psychologist, social worker, or other qualified counselor.

Adapted from: National Mental Health Association Factsheet: Stress - Coping With Everyday Problems.

National Mental Health Association

703-684-7722

www.nmha.org/contact/index.cfm

When should I call my Doctor or consult your CCAC provider nurse?

Reasons that you would call your doctor include:

- Temperature or fever – 38.5°C. or greater.
- Increased pain or redness along your incision line.

- Drainage from your incision line.
- Change in the color of your stoma (from red/pink to grey/dusky or black).
- Excessive bleeding or discharge from your rectum (if your rectum has been left in place).
- Increased pain or drainage from your perineal wound (if your rectum has been removed).
- Excessive ileostomy output (emptying your pouch more than 6 times per day).
- No ileostomy output (no stool or gas for more than 4-6 hours accompanied by cramps, bloating, nausea, and/or vomiting).
- Cloudy, foul smelling urine, low back pain.
- Prolonged nausea and/or vomiting.
- If you cannot locate your surgeon or family doctor, and you are in need of medical assistance, go to your local Emergency Department.

Do I need to make a follow- up appointment?

You will need to see your surgeon within 2 weeks of discharge. Call your surgeon's secretary to book the appointment.

Resources and supports

Each province, state and country will vary in their financial support of patients with ostomies. Prior to discharge, it is important to discuss financial reimbursement/ insurance concerns, and how and where to purchase supplies. In Ontario, a person with a permanent ostomy or who will have the ostomy for more than 6 months will receive funding through a program called “Assistive Devices”. The funding is \$600 00 per year for life or for long as the individual has the ostomy. Most people with an ostomy spend \$1000 00 to \$1200 00 per year. Ostomy supplies should be readily available worldwide. There are numerous resources available for patients with ostomies. These include Enterostomal Therapists, support groups and associations, literature, web sites, videos, and ostomy supplier support.

Ostomy Manufacturers

Ostomy manufacturers provide multiple resources for patients including Videos/DVD's, magazines, booklets, literature, and ostomy products. Samples can be obtained by calling the 1-800 #'s

<p>Hollister Incorporated 95 Mary Street Aurora, Ontario (L4G 1G3) 1-800-263-7400 www.hollister.com</p>	<p>Coloplast Canada Corporation 3300 Ridgeway Drive, Unit 12 Mississauga, Ontario (L5L 5Z9) 1-888-880-8605 www.coloplast.com</p>	<p>ConvaTec 2365 Cote-de-Liesse Montréal, Québec (H4N 2M7) 1-800-465-6302 www.convatec.com</p>
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Ostomy Clothing and Accessories

<p>Weir Comfees 89A High Street P.O. Box 1088 Sutton, Ontario (LOE 1R0) 1-866-856-5088 – www.weircomfees.com</p>	<p>White Rose Collection www.whiterosecollection.com</p>
<p>Ostomy secrets 1-877-613-6246 www.ostomysecrets.com</p>	<p>Intimate Moments Apparel www.intimatemomentsapparel.com</p>
<p>Colo-majic Distribution Canada Ltd. www.colostomymajic.com (flushable liners)</p>	<p>Vanilla Blush www.vblush.com</p>

Financial Resources

<p>Ontario Provincial government Assistive Devices Program – ADP 1-800-567-9604 416-327-8804 For permanent Ostomies or for those who will have an ostomy for more than 6 months. Ontario residents only.</p>	<p>Northern and Indian Affairs infoPubs@ainc-inac.gc.ca 1-800-567-9604</p>
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Private Insurance Plans	Veteran's Affairs Canada 1-866-522-2122 www.information@vac-acc.gc.ca
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Support Groups

United Ostomy Association of Canada Inc. 1-888-969-9698 www.ostomycanada.ca	United Ostomy Association of Ontario Brantford & District Ostomy Association 519-752-5037
United Ostomy Association of Ontario Ostomy Toronto 416-596-7718 www.ostomytoronto.com	United Ostomy Association of Ontario Hamilton & District Ostomy Association 905-542-2386
GLO Network www.uoaaa.org Support group for gay/lesbian/bisexual ostomates ; their partners; family; caregivers & friends.	United Ostomy Association of Ontario Halton Peel Counties 905-825-3443
Canadian Cancer Society 1-888-939-3333 www.cancer.ca	Colorectal Cancer Association of Canada 416-920-4333 www.ccac-acccc.ca
Colon Cancer Canada 1-888-571-8547 www.coloncancer canada.com	Bladder Cancer "Webcafe" On line resource for people diagnosed with bladder cancer. www.blcwebcafe.org



Notes



Credit Valley Hospital

2200 Eglinton Avenue West
Mississauga ON L5M 2N1
T: (905) 813-2200

Mississauga Hospital

100 Queensway West
Mississauga ON L5B 1B8
T: (905) 848-7100

Queensway Health Centre

150 Sherway Drive
Toronto ON M9C 1A5
T: (416) 259-6671