COLOSTOMY CARE

OBJECTIVES:

- 1. Define colostomy.
- 2. Identify the purposes of colostomy
- 3. Explain the types of colostomy
- 4. Discuss how to apply colostomy care
- 5. List warning signs of colostomy
- 6. List complications of colostomy



Colostomy is a surgically created opening into the colon through the abdomen. It may be temporary or permanent.

CRITERIA OF HEALTHY STOMA

- 1-1 cm above skin level
- 2- moist
- 3- Red/pink color
- 4- Painless

5- No evidence of erythema, rash, ulceration or inflammation in the surrounding skin.

PURPOSE OF COLOSTOMY CARE

- **1.** Skin protection & care
- 2. Receptacle for drainage
- Patient acceptance & self care

INDICATION FOR COLOSTOMY

- × Colon Cancer
- **×** Hirschprung's Disease
- **×** Ulcerative Colitis
- **× Polyps in Intestine**





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CLASSIFICATION:

ACCORDING TO DURATION -:

× Permanent Colostomy× Temporary Colostomy

ACCORDING TO STOMA SITE

* Ascending Colostomy
 * Transverse Colostomy
 Loop transverse
 double-barrel transverse
 * Descending Colostomy



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EQUIPMENTS



Materials for cleaning: soft washcloth and towel or paper towel, mild soap.

Pouching equipment: pouch with wafer type skin barrier, stoma paste and scissor.

Pouch closure (standard clamp or rubber band). Disposable gloves.

Receptacle for effluent (graduated if output is measured).

Pen or pencil.





MEASURING GUIDE



PROCEDURE

A) Emptying Pouch:

- * Collect equipment.
- * Explain procedure to child and parent.
- * Wash hands.
- * Select an appropriate environment. The bathroom is ideal for children who can stand or kneel in front of the toilet.
- * Put on gloves.

*open clamp or remove rubber band.

*determine the optimum time to change ostomy pouch when the pouch is one third filled with stool, half hour before meals, and when leakage present.
*empty contents of pouch into toilet or other receptacle.
*note the amount, color, consistency, and the presence of mucus or blood.

*assess stoma and surrounding skin

r:to detect any inflammation or abnormal signs in the skin. *rinse the inside of the pouch with a small amount of lukewarm tap water.

r: to remove the entire stool.

*wipe end of pouch and clean with tissue; replace clamp or rubber band.

B: CHANGING POUCH:

1-Collect equipment.

- 2-Explain procedure to child and parent.
- 3-Wash hands with soap and water, rinse and dry.
- 4-Put on disposable gloves.
- 5-Empty current ostomy pouch of stool.
- 6-Remove current ostomy appliance

7-dispose appliance in appropriate container.

8-remove gloves, wash hands again.

9-put on new disposable gloves.

10-wash stoma and peri-ostomal skin with water or an ostomy soap as prescribed.

11-rinse the skin well and pat dry.

12-examine skin for redness or breaks in the skin.

- 13-measure stoma using measuring guide for appropriate width and length of stoma at base.
- 14-place a stoma adhesive wafer around the stoma with the hole fitted close to the base of the stoma.
- 15-place the skin barrier on the skin and enter the pouch over the stoma and press gently moving from the inner stoma edge to out (make sure the pouch is closed).



16-remove gloves and wash hands.

17-record the following observations in the medical record:

*condition of skin.

*consistency of stools.

*amount and color of urine.

*appliance type applied.

WARNING SIGNS:

- 1-Bleeding from the stoma.
- 2-Bleeding from the skin around the stoma.
- 3-Change in bowel pattern.
- 4-Change in the stoma size.
- 5-Increase in body temperature above 38°c.

COMPLICATIONS:

1-Leakage.

2-Prolapse

3-Obstruction or stenosis.

4-Stoma becomes edematous and enlarged.

