

# Changing The Colostomy Appliance

Skill	Performed Correctly	N/A
Hand hygiene, explain procedure to patient, shut resident door, and pull curtain to maintain privacy.		
Open clamp, cuff the tail of the pouch, and empty contents of bag into receptacle (basin) or toilet. <i>Note character and amount of drainage. Do not discard plastic clamp.</i>		
Locate the stoma size pattern. With a pen, trace the size hole on the paper backing of the pouch adhesive. Cut out the opening. If stoma is round, use stoma guide to measure stoma. Use a size that is 1/8 inch larger than the stoma. If the stoma is not round – make a pattern. Use a piece of plastic transparent material and place over stoma or wound. Trace stoma or wound on transparency. Cut it out and label pattern head, feet, pouch side, and skin side. Trace the pattern on the back of the faceplate. Be sure to line it up so that the tail of pouch will be in the appropriate direction.		
Remove the paper backing from the pouch adhesive wafer. Apply a thin layer of skin protectant, such as powder or paste, as ordered.		
Remove the old appliance gently and wipe around the stoma with tissue.		
Dispose of the old appliance in a biohazardous plastic bag. Save the plastic clamp.		
Inspect the skin. Wash the area with warm water; do not use soap.		
Dry the skin carefully. A skin prep may be ordered to protect skin and enhance adherence of the product. If so, follow instructions on can or package.		
Apply the new appliance or paste at the base of the stoma on the skin. Hold in place for approximately two minutes. Line opening of pouch up with stoma and press down – being sure to clear the stoma. Use fingertips to seal down face plate immediately around stoma first, then around the paper border.		
Add a few drops of deodorant to the pouch, if available, and clamp it to close.		
Dispose of waste material and gloves.		
Cover resident, ensure personal items and call light are within reach, and lower bed if necessary. Hand hygiene, ask if resident if anything else is needed.		

Learner Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Observer Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Topics for Discussion:

### Maintenance of the Pouch

- Assess the pouch for leakage.
- Empty the pouch when 1/3 full. If changing of appliance is not indicated, the pouch can be flushed with water using a bulb-syringe, then re-clamped. It may be necessary to empty the contents of the ostomy pouch frequently without changing the entire appliance if the resident has excessive excrement.
- Change the pouch as needed, with leakage, two times per week or per provider's order.

### Information to report to the nurse includes:

- change in the skin at the stoma site.
- discoloration of the stoma.
- amount and type of drainage from the stoma.
- resident reaction.

Document information in the resident's clinical record regarding observation of change in the skin at the stoma site, discoloration of the stoma, amount and type of drainage from the stoma, and any adverse resident reaction observed during the procedure.