# Empty the Pouch SKILL

# Watch and Review

- Emptying your pouch is the first skill that you will need to do after your operation and the one you will use most often.
- Watch the DVD, then just follow each of the steps.

## SKILL: CHECK THE POUCH LEVEL

Empty or change your pouch when it is 1/3 to 1/2 full. A pouch that is too full may start to pull away from your skin. You will not feel urine or stool coming out of your stoma. You will need to check for fullness by placing your hand over your pouch and feeling it.

# SKILL: ASSUME THE PROPER POSITION

You will need to have a clear view of the water in your toilet and ensure you have enough space to empty your pouch and avoid soiling your clothes. There are several positions, depending on your size, the layout of the bathroom, and your comfort level.

- For the forward position, sit far back on the seat with legs spread wide.
- > For the backwards position, sit or stand facing the toilet handle.
- For the side position, sit or stand alongside the toilet.



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2/3 Full

1/2 Full

1/3 Full

## SKILL: EMPTY THE URINE

#### Sit far back on the seat or stand over the toilet.

- 1. Raise the pouch opening.
- 2. Open the pouch by twisting the nozzle, removing the nozzle plug, or folding down the nozzle.
  - Before lowering, pinch together the nozzle.
  - Lower the nozzle toward the toilet.
  - Release your pinched fingers and let the urine drain.
  - When empty, tap the nozzle to remove any last drops.
- 3. Close the pouch by twisting the nozzle into the closed position, replacing the nozzle plug, or folding up the nozzle.









# SKILL: EMPTY THE STOOL

#### Sit far back on the seat or stand over the toilet

- 1. Make sure to have a piece of toilet paper within reach.
- 2. Raise the pouch so the opening faces up.
- Open the pouch. You will unclamp or unroll the integrated drainage outlet.
- 4. Lower the opening into the toilet. Slide your hands down the pouch to push out the stool.
- 5. If you stand while emptying the pouch, you may want to flush the toilet as you drain the pouch or place a few pieces of toilet paper into the toilet bowl. This prevents the stool and toilet water from splashing up when draining from a high distance.
- 6. Wipe the opening off inside and out with toilet paper or tissue.
- 7. If used, add pouch deodorant.
- 8. Reclamp or reseal the pouch.









# Change the Pouch SKILL

# Watch and Review

- Your entire one-piece pouch will need to be changed every 3 to 5 days. Moisture and sweat, a full and heavy pouch, and uneven skin around the stoma can decrease the length of time the system will stick to the skin. If you see any output or leakage, or if you feel any burning or itching under the barrier, change your pouch right away.
- For an ileostomy or colostomy, it is easier to change the pouch when the stoma is less active. Ideal times include first thing in the morning before eating or two hours after eating.
- For a urostomy, you will always be producing urine, so the pouch and barrier can be changed any time.
- > Watch the DVD, and then just follow each of the steps.

# SKILL: GATHER YOUR SUPPLIES

- New pouch
- Washcloth/wipes/soft paper towels –to clean your skin
- Sizing template to measure your stoma and size the opening
- Pen to trace the size of your stoma
- Scissors to cut the opening
- A small plastic bag for the soiled pouch



- Skin barrier paste (optional) to fill uneven areas in the skin
- Skin barrier powder (optional) to absorb the moisture from weepy skin
- Pouch deodorant (optional) to decrease the odor when emptying the pouch

## SKILL: REMOVE THE OLD POUCH

- 1. Begin by peeling away one corner of the barrier.
- 2. Work around the rest of the barrier, pushing down on the skin at each point while at the same time pulling the barrier away from the skin. Some people use adhesive remover, a piece of wet paper towel, or a washcloth with warm water to help remove the pouch barrier from the skin.
- 3. Place the old pouch in a plastic waste bag.
- 4. If your pouch has a closure clip, do not throw it in the trash. The clamp can be reused.







#### SKILL: CLEAN AND INSPECT

- 1. Inspect your stoma for color. The stoma should be red and moist.
- 2. Inspect the skin for redness or irritation. The skin should look like the rest of the skin on your abdomen. You can use a mirror to check the skin around the stoma.
- 3. Clean the skin around the stoma with warm water. Oils may keep your skin barrier from sticking. Do not use:
  - Soaps/cleansers with oil or perfumes
  - Baby wipes that have oil, moisturizing cream, or alcohol
- 4. Gently pat the skin dry.
- 5. If the skin around the stoma is irritated or weepy, you can apply skin barrier powder. The powder will absorb the moisture. Remember that the new barrier will not stick well if your skin is moist. You may need to dab or spray the powder with skin sealant/skin prep.



#### **Surgical Patient Education**

## SKILL: MEASURE AND CUT THE OPENING

It is important to measure the stoma and make sure the opening of the barrier fits right to the edge of the stoma. For the first three months after your surgery, your stoma will continue to shrink in size as your swelling goes down. In the beginning, you will have to measure your stoma with each pouch change to make sure you have the right size opening. After that, you will be able to pre-cut your pouch opening from your template, or order pre-cut pouches.

- Cover the stoma opening. Place a piece of tissue or gauze pad over the stoma while you are measuring to catch any leakage.
- Measure the stoma. Use your measuring grid and find the size that fits close to the edge of the stoma where the skin and stoma meet. If your stoma isn't round, your WOC nurse or doctor can make you a custom template.
- 3. Place the measuring grid on the back of the pouch barrier and trace the correct size.
- 4. Use scissors to cut an opening in the skin barrier, closely following the traced shape. If you are using a one-piece system, place your finger into the small pre-cut opening and push away the pouch before you start to cut. Be careful not to cut through the front of the pouch. If you cut the pouch, do not tape it closed. It will leak and give off an odor.
- 5. Center the new opening over the stoma to make sure it fits along the stoma edge. Recut and adjust the opening as needed.

#### To practice:

- Gather your supplies in the skills kit.
- Use the stoma practice model, measuring guide, and pouch to:
  - Measure and cut an opening.
  - Apply a new pouch to the model.





# SKILL: APPLY THE NEW POUCH

- 1. Remove the covering from the back of the skin barrier.
- 2. Center the cut opening in the pouch's barrier over the stoma.
- 3. Place the barrier on the skin around the stoma. Press down on all sides for 30 to 60 seconds to make sure it is firmly applied.
- 4. Close the opening if you are using a drainable pouch.
- 5. Lower the pouch.
- 6. If you use a belt to secure your pouch, clip it in place.
- 7. Date and keep the paper from backing to use as your template for the next pouch change.

#### To practice:

- Take out your sample pouch.
- Close the drainage opening at the bottom of the pouch.
- > At the top opening in the skin barrier, fill it 1/3 full with water.
- Remove the paper backing and place the pouch on your skin on your lower abdomen.
- Empty the pouch sitting on or standing by the toilet.

# **Stoma Supplies**

Keep your stoma care simple. Only use paste, powder, prep, or seals if recommended by your doctor or WOC nurse.

### SKIN BARRIER PASTES

Skin barrier paste is used to fill body folds or uneven areas around the stoma. It can help create a better seal between the skin and the skin barrier.











#### **How to Apply**

Apply the paste to skin folds in a single layer. If you have deep skin folds, you may have to apply the paste in layers, letting each layer dry slightly (about a minute) before applying the next layer. Pastes are sometimes placed directly onto the barrier.

Pastes should not irritate your skin. If you develop a reaction to any type of paste, then try another brand. Most pastes are alcohol-based, and they can sting your skin if they are placed on open skin. The stinging should stop within a few seconds as the paste dries.

#### **Skin Barrier Rings**

A barrier ring may also be used to fill gaps where the pouch skin barrier may leak. Barrier rings are easy to work with and contain no alcohol. While they can be cut or molded into any shape, the more they are touched, the less sticky they become.

### SKIN BARRIER POWDER

Skin barrier powder is used to help protect and dry raw, weepy areas on the skin. It is placed under the skin barrier on the skin around the stoma.

#### **How to Apply**

Clean your skin with water, then pat dry. Lightly dust the irritated skin with the powder and brush off the excess. You may have to use skin sealant/skin prep after the powder in order for the pouching system to stick to the skin. Then apply the pouching system.

#### SKIN SEALANT/SKIN PREP

Skin sealant/skin prep is a liquid skin barrier. It comes in a spray, wipe, or gel. It is used to put a plastic-like coating on the skin. It may help the pouching system stick better. It can also act as a coating if you have skin that tears easily. Make sure the skin sealant/skin prep dries completely before applying the pouching system on your skin.

### POUCH DEODORANT

The ostomy pouch is odor proof. The only time an odor will be noticeable is when you empty the pouch. Pouch deodorant comes in drop and spray form. The deodorant is placed in the empty pouch after draining/emptying to decrease odor.

#### ADHESIVE REMOVER

Adhesive removers are used to remove the skin barrier, tape, and sticky residue. You will need to wash away any oily remover with soap and water before applying a new pouch.

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