

Stoma Care Guide

A suture is a stitch or row of stitches holding together the edges of a wound or surgical incision.

What is a Stoma?

A stoma is a surgical opening on the abdomen for the purpose of removal of bodily waste – faeces or urine.

What does a stoma look like?

The stoma should be pink like the colour of the inside of your mouth and may look like a cherry or rosebud. If the stoma colour changes to blue/purple or grey contact the stomal therapy nurse.

Is the stoma painful?

No. There are no nerve endings which will cause pain. However, your child's tummy maybe tender just after the operation.

Who will teach me to look after the stoma?

The stomal therapy nurse and the ward staff will teach you basic care.

The stomal therapy nurse is a registered nurse who has undertaken advanced training in the care of people of all ages who have a stoma. The nurse will teach you to care for your child's stoma both in the hospital and after discharge.

How often should I change my child's bag?

A bag which can be emptied as necessary, is used after the operation. It can be left in place usually for one to two days as long as it is secure,.

Your stomal therapy nurse will help you decide the best type of appliance for your child and how to care for it.

Can I bath my child?

Yes. Water will not get into the stoma. You can bath your child with the bag on or off. You may prefer to leave it on as the stoma may be active during the bathing procedure.

Can I feed my child normally?

Yes.

Can my child do normal activities?

Yes, a stoma should not be a barrier to normal activities, including swimming. Talk to your stomal therapy nurse if needed.



Where do I obtain further supplies?

- Supplies and equipment are available from the WA Ostomy Association
- The stomal therapy nurse will assist you to join (membership costs \$50 per year)
- Supplies can be posted to your home if required at a cost of \$8 per month
- It is your responsibility to order the supplies you require each month.

Who will help me at home?

Metropolitan area

The stomal therapy nurse is available Monday to Friday 8.00am to 4.00pm via the hospital switchboard on 6456 2222. If required, you will be referred to the PCH visiting nurse, who will visit your home.

Country areas

The stomal therapy nurse may be contacted through the hospital switchboard on 6456 2222. You will be referred to the community stomal therapy nurse closest to you.

For after-hours queries, staff from the ward your child attended may be able to assist. Contact the ward via the switchboard.

Important information

Bleeding

Sometimes when you clean the stoma, the surface may bleed slightly. This is nothing to worry about and you can apply a special powder to form a protective barrier. However, if the stoma appears to bleed heavily from the inside, you should seek medical advice immediately.

Discharge from the back passage

Sometimes you may notice a discharge on your child's nappy or underwear. This may be faeces or mucous, and is nothing to worry about. Mucous is produced by the portion of bowel remaining lower than the stoma.

Diarrhoea

If your child's motions become very watery and more frequent than normal, contact your doctor. Any child with diarrhoea can become ill very quickly.

Sore skin

The main reason for sore skin is leakage of bag contents onto the skin. Check the bag is fitting correctly around the stoma (ensure the hole is not too big or too small). Never tape down the base plate if it is leaking. You may have to do a complete bag change.

Prolapse

This is a well-known problem and may be very frightening to look at. It usually happens when the muscle holding the stoma weakens allowing a small amount of the bowel to slide out, increasing the length of the stoma.

This should not cause the child any pain or stop the stoma from working. However, if the colour of the stoma changes or your child is complaining of pain, please come to the emergency department for assessment.

Discharge checklist

Please ensure you have the following information before you go home:

- what equipment you use and how to obtain it (ensure you have enough equipment to take home)
- where to seek help
- the name of the stomal therapy nurse
- how to contact the WA Ostomy Association
- when your next follow-up appointment is.

It is also important you are confident with the following before you go home:

- how to apply and dispose of your child's appliance
- how to prevent skin problems
- how to stop contact bleeding.

How to change your child's appliance

- 1. Gather together equipment:
 - scissors
 - new appliance pouch and baseplate if applicable
 - template
 - tissues/toilet paper
 - bag for rubbish
 - large cloth for washing -
 - bowl of warm water.
- 2. Prepare appliance, cut pouch or baseplate to size using template.
- 3. Remove old appliance, taking care to push skin away from baseplate.
- 4. Cleanse the skin and stoma using warm water and soft disposable cloth(large cloths cut into smaller pieces are ideal).
- 5. Pat dry the skin around stoma.
- 6. Apply baseplate and run finger around baseplate close to stoma to ensure good adhesion.
- 7. Attach pouch, making sure it is pressed down firmly. Close outlet of pouch.
- 8. Dispose of old appliance and equipment in rubbish.

If the skin around the stoma is red and/or broken, contact the stomal therapy nurse at PCH (08) 6456 2222.

Remember — seek advice early, do not wait.

This document can be made available in alternative formats on request for a person with a disability.

Child and Adolescent Health Service

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