Tips for Successful Ostomy Pouch Changes

• Change pouch (appliance) every three days, two times a week, or as directed by the Stoma Nurse or Ostomy Specialist.

*Note:*
• Always change a pouch that is leaking or has separated from the skin. Do not try to reinforce with tape.
• Consult a stoma nurse, ostomy specialist or physician if:
  - The pouch is leaking frequently or an effective seal cannot be maintained for at least 24 hours.
  - Peristomal skin erythema (redness) irritation or ulceration is noted.
• Consult a stoma nurse, ostomy nurse specialist for questions regarding pouching, skin integrity, odour control, clothing or psychological adaptation.

• Prior to changing the pouch, assemble all the necessary supplies on a clean work surface that is convenient.

• Clean peristomal skin using a soft cloth and plain water, or a pH balanced cleanser. Gentle friction or an adhesive remover may be used to remove adhesive residue.

*Note:*
- If an adhesive remover is used, rinse thoroughly and pat dry.

• If additional peristomal skin protection is desired, apply a coat of 3M™ Cavilon™ No Sting Barrier Film to the skin around the stoma and allow to dry prior to placing the pouch.

• After the pouch is placed around the stoma, gently press the pouch into place or hold a hand over the pouch for three to five minutes.

• For additional security of the pouch, tape may be used to “picture-frame” the edges of the pouch or reinforce the existing tape collar (use 3M™ Micropore™ Surgical Tape).

• The pouch does not need to be covered during a bath or shower. The tape collar may be dried using a hand-held dryer set on cool.