



University Surgical Associates

Exceptional surgeons. Compassionate care.

Shauna Lorenzo-Rivero, MD 979 E 3rd St., Suite C-320, Chattanooga, TN - Phone 423-267-0466 fax 423-778-8168

Ileostomy Care Instructions

You will likely be going home with a new ileostomy. You will be seen by a certified wound/ostomy nurse and participate in the care of your ostomy.

Before you leave the hospital, the nurse should have reviewed with you:

- Taking Care of Your Ostomy booklet
- Ostomy supplies for at least 2 pouch changes
- When or how to make your follow-up outpatient appointment with your surgeon
- You will schedule follow up with a home health nurse before leaving the hospital

The nurse should have given you:

- Prescriptions for ostomy supplies (if needed)
- A chart to allow you to record your intake and output at home
- A graduated cylinder" or clear plastic container with measurements to help you measure your output & commode hat or urinal for urinary output measurements

One major risk of having an ileostomy is dehydration. This is related to fluid loss through your stoma.

The signs and symptoms of dehydration include dry mouth or tongue, dizziness upon standing, weakness, a decrease in urination, urine darker in color, cramps in your abdomen and legs, and confusion.

If you are having any signs of dehydration, please call your surgeon. 423-267-0466

To avoid dehydration, we instruct you to:

- Drink 10 to 12 glasses of fluids daily, including electrolyte-enhanced beverages such as Gatorade, Pedialyte, or Powerade. (This is especially important in warm weather, because you are perspiring more and losing more fluid from your body.)
- Measure your fluid intake and ileostomy output for at least 2 weeks and bring your output record to your first appointment with your surgeon. Use your "cylinder" as you were taught in the hospital to collect and measure the drainage in your ileostomy pouch.
- Record these amounts on your measurement chart.
- If your ileostomy output is less than 500 mL or greater than 1200 mL for 24 hours, please call your surgeon.
- Show this chart to your visiting nurse upon her visits.
- Bring this chart with you to your follow-up appointment with your surgeon.

If you have questions regarding the care of your ostomy at home, please contact the home health nurse that is seeing you or contact a certified wound/ostomy nurse at "The Pouch Place" 4400 Brainerd Rd 423-493-0700 during business hours only. You may also call your surgeon for any emergent concerns 423-267-0466.



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Visiting nurse instructions

To the Visiting Nurse:

Thank you for participating in the care of this patient. This patient has had multiple teaching sessions with the wound/ostomy nurses and should have a good idea of how to care for his/her own ostomy. This patient has also been given several items that will assist him/her in his/her own care, such as instruction sheets, ostomy supplies, and ostomy output measuring tools. However, we would like to stress a few important points to assist you during your visits.

Bowel function:

It is important to encourage the patient to monitor their bowel function closely every day. The patient should continue to record their ileostomy output and the amount of fluid they have taken in, just as they were taught in the hospital. A graduated cylinder has been given to this patient for recording their ostomy output daily.

- The patient has been instructed to show you their daily measurement chart at each visit, please ensure that they are completing this chart. If the ostomy output is less than 500 mL or greater than 1200 mL of liquid stool in a day, it is very important to call the doctor's office with this information between 9am – 5pm.
- Continue to reinforce to the patient that the major risk with an ileostomy is dehydration related to fluid losses. Daily fluid intake is 10 to 12 glasses of fluids, including electrolyte-enhanced beverages. In the hot weather, encourage them to take in increased amounts of fluid and closely measure their ileostomy output.
- Have the patient watch for signs and symptoms of dehydration, including dry mouth or tongue, decrease in urination, urine darker in color, dizzy when he/she stands, cramps in his/her abdomen or legs, dizziness, increased thirst, or weakness.

Stoma care:

It is also important to monitor the appearance of the stoma. The tissue of the stoma should be moist, pink or red in color.

- If the stoma has color changes from pink/red to dark purplish/blue in color, becomes swollen, or a large amount of continuous bleeding into the pouch, and or at the Mucocutaneous Junction (Stomal Incision), this is not normal. Call the patient's doctor's office for assistance 423-267-0466.
- If you or the patient has any questions regarding the care of the patient's ostomy, please refer to the instructions provided to the patient by the wound/ostomy nurses.
- If the patient develops the following bowel symptoms please call the surgeon's office or go to the nearest emergency department, if severe: increasing abdominal distension and cramps, nausea, vomiting, inability to tolerate food or liquids, decrease in ostomy output, or has had no output from ostomy for 4 to 6 hours.

