# STATE OF CONNECTICUT DEPARTMENT OF DEVELOPMENTAL SERVICES NURSING DELEGATION PROCEDURE

### PROTOCOL: APPLYING ADHESIVE STOMA PLATE AND/OR POUCH

Name:		
Residence:		
Date of Initial Order://	Date Order Renewed: (in pencil)	
Order:		
I. Diagnosis:		
II. Purpose of Procedure: Maintains integulcerations, excoriation, and other skin breapromotes general comfort and positive self-evacuation, reduces odor from overuse of other skin breadth.	akdown caused by fecal conta -image/self-concept, provides	minants, prevents infection,
evacuation, reduces each from everage of c	<del>ou poudii.</del>	
Signature of Delegating R.N.	Da	ate of Delegation

#### III Procedure

III. Procedure		
TASK	RATIONALE	
A. Gather equipment:		
<ol> <li>Gloves</li> <li>Protective pad</li> <li>Basin of warm water</li> <li>Soap</li> <li>Washcloth/towel or gauze</li> <li>Measuring guide</li> <li>New pouch appliance(s)</li> <li>Scissors</li> <li>Pen/pencil</li> <li>Peristomal skin paste and stoma plate (if needed)</li> <li>Waste receptacle</li> </ol>	To facilitate changing the face plate with the least amount of distress and discomfort to the individual.	
B. Preparation of Individual:		
<ol> <li>Provide privacy.</li> <li>Explain procedure to individual.</li> </ol>	<ul> <li>Reduces embarrassment.</li> <li>Reduces anxiety, promotes a calm approach and eliminates fear and apprehension.</li> </ul>	
C. Perform Task:		
Wash hands and put on gloves.	<ul> <li>Reduces microorganism transfer.         Avoids exposure to individual's body secretions.</li> </ul>	

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- Place disposable protective pads around stoma pouch close to stoma, remove old stoma plate and/or pouch, and discard contents; discard gloves.
- 3. Perform hand hygiene and put on fresh gloves.
- 4. Inspect stoma and peristomal skin.
- 5. Perform stoma care: Gently clean entire stoma and peristomal skin with gauze or washcloth soaked in warm, soapy water (if some fecal matter is difficult to remove, leave wet gauze or cloth on area for a few minutes before gently removing fecal matter); rinse and pat dry.
- 6. Place gauze pad over stoma opening to prevent spillage while preparing adhesive stoma plate and pouch.
- 7. Measure stoma with measuring guide. Use measuring guide to trace opening on back of plate.
- 8. Leaving intact adhesive covering of plate, cut out circle, allowing an extra 1/8 inch for placement over stoma.
- 9. Remove gauze and apply stomal paste around stoma or apply stomal paste to edges of opening in plate.
- Remove adhesive covering of plate, and place plate on skin with hole centered over stoma; hold in place for about 30 seconds.
- 11. Center pouch over stoma and place on plate. If applying a two-piece appliance, snap pouch on the flange of the plate.
- 12. Remove gloves and perform hand hygiene.

- Removes old pouch for new pouch application; maintains clean environment.
- Reduces microorganism transfer.
- Provides data.
- Removes stool soilage and promotes secure pouch application.
- Protects skin and linens during procedure.
- Provides for accurate fit of pouch.
- Cuts barrier to appropriate size for stoma; allows pouch to be placed over stoma without adhering to it.
- Prevents skin irritation of uncovered peristomal skin.
- Adheres plate to skin; warmth of skin and fingers enhances adhesiveness once plate makes contact with skin.
- Secures pouch for collection of feces.
- Reduces microorganism transfer.

#### III. Procedure (continued):

TASK	RATIONALE
D. Check Individual's Status:	
<ol> <li>Make sure the individual is comfortable and tolerated the procedure well.</li> </ol>	<ul> <li>To maintain the individual's mental and physical well being.</li> </ul>

TASK	RATIONALE
E. Care of Equipment:	
Restore or discard all equipment	<ul> <li>Provides clean environment.</li> </ul>
appropriately.	

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F. Documentation:	
<ol> <li>Record date and time treatment completed.</li> </ol>	<ul> <li>Communication of information.</li> </ul>
<ol><li>Record color, consistency, and amount of feces in pouch (small, medium, large).</li></ol>	
<ol><li>Record condition of stoma and peristomal skin.</li></ol>	
4. Record size of stoma.	<ul> <li>Reporting and communication of</li> </ul>
<ol><li>Record individual's response.</li></ol>	information.
<ol><li>Report to nurse any problems that were encountered.</li></ol>	
<ol><li>Nurse notification as appropriate.</li></ol>	

PLEASE NOTE: NO TASK IS CONSIDERED COMPLETED UNTIL THE DOCUMENTATION AND REQUIRED REPORTING OCCURS. ANY CHANGE OR VARIATION FROM THE INDIVIDUAL'S BASELINE SHOULD BE REPORTED PROMPTLY TO THE LICENSED NURSE.