

STATE OF CONNECTICUT
DEPARTMENT OF DEVELOPMENTAL SERVICES
NURSING DELEGATION PROCEDURE

PROCEDURE: EVACUATING AND CLEANING A COLOSTOMY OR ILEOSTOMY POUCH

Name: _____

Residence: _____

Date of Initial Order: ____ / ____ / ____ Date Order Renewed: ____ / ____ / ____
(in pencil)

Order: _____

I. **Diagnosis:** _____

II. **Purpose of Procedure:** Removes fecal material from ostomy pouch, cleans pouch for reuse, maintains integrity of stoma and peristomal skin, promotes general comfort, promotes positive self-concept.

Signature of Delegating R.N.

Date of Delegation

III. Procedure

TASK	RATIONALE
A. Gather equipment:	
<ol style="list-style-type: none"> 1. Gloves 2. Bedpan (if needed) 3. Protective pads 4. Washcloths 5. Toilet paper 6. Closure device 7. Waste receptacle 	<ul style="list-style-type: none"> • To facilitate changing the colostomy bag with the least amount of distress and discomfort to the individual.
B. Preparation of Individual:	
<ol style="list-style-type: none"> 1. Provide privacy. 2. Explain procedure to individual. 	<ul style="list-style-type: none"> • Reduces embarrassment. • Reduces anxiety, promotes a calm approach and eliminates fear and apprehension.
C. Perform Task:	
<ol style="list-style-type: none"> 1. Put on gloves. 2. Place protective pad on abdomen around and below pouch. 3. If using toilet, seat client on toilet or in a chair facing toilet, with pouch over toilet; if using bedpan, place pouch over bedpan. 4. Remove closure device on bottom of pouch and place within easy reach. (Fold bottom of pouch up to form a cuff before 	<ul style="list-style-type: none"> • Avoids exposure to individual's body secretions. • Prevents seepage of feces onto skin. • Positions individual so feces drain into receptacle. • Promotes efficiency; cuff keeps bottom of pouch clean, which helps to prevent odor and helps keep hands clean during procedure.

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<p>emptying.)</p> <ol style="list-style-type: none"> 5. Slowly unfold end of pouch and allow feces to drain into bedpan or toilet. 6. Press sides of lower end of pouch together. 7. Open lower end of pouch and wipe out with toilet paper. 8. Flush toilet or empty bedpan. 9. Wash closure device while in bathroom and dry with paper towel. 10. Remove gloves, perform hand hygiene, and reglove. 11. Reclamp pouch with cleaned closure device. 12. Wipe outside of pouch with clean, wet washcloth; be sure to wipe around closure device at bottom of pouch. 13. Remove gloves and perform hand hygiene. 	<ul style="list-style-type: none"> • Removes feces from pouch. • Expels additional feces from pouch. • Removes excess feces from lower end of pouch. • Reduces embarrassment and room odor. • Cleans exterior closure device. • Reduces microorganism transfer. • Prevents leakage of feces. • Completes cleaning of pouch. • Reduces microorganism transfer.
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III. Procedure (continued):

TASK	RATIONALE
D. Check Individual's Status:	
<ol style="list-style-type: none"> 1. Make sure the individual is comfortable and tolerated the procedure well. 	<ul style="list-style-type: none"> • To maintain the individual's mental and physical well being.

TASK	RATIONALE
E. Care of Equipment:	
<ol style="list-style-type: none"> 1. Restore or discard all equipment appropriately. 	<ul style="list-style-type: none"> • Provides clean environment.
F. Documentation:	
<ol style="list-style-type: none"> 1. Record date and time treatment completed. 2. Record color, consistency, and amount of feces in pouch (small, medium, large). 3. Record individual's response. 4. Report to nurse any problems that were encountered. 5. Nurse notification as appropriate. 	<ul style="list-style-type: none"> • Communication of information. • Reporting and communication of information.

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.