



# SITING A STOMA

*Bronney Laurie*

*Stomal Therapist Nurse*

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# Why is it important to site a stoma?

A poorly sited stoma impacts greatly on the patients future quality of life.

May decrease stoma related complications - leakage, skin damage, pouch adherence.

Affect the ability of the patient to adapt to the stoma and become independent.

Healthcare costs – pouch wear time and miscellaneous products.



# How to choose the right site

Allow yourself and the patient time to discuss the reasons stomal siting is important, explain the procedure.

Lie, stand, bend and sit the patient noting any folds/rolls/creases that appear.

Consider occupation, diagnosis, disability, dexterity or impairments.

Religious belief.

Clothing worn daily; belt line, underwear.

Involve the patient in the decision.

Can the patient see the stoma?



# Challenges to site

Abdominal creases, folds, excessive skin, pendulous abdomen., wrinkles, scars, suture lines, pendulous breasts,

Patient in a wheelchair.

Contractures, posture, mobility

Distended abdomen.

Presence of hernia

Multiple stoma sites.



# Body shapes



# Equipment

Marking Pen

Razor

Wipes to clean the skin

Stoma pouch

Bioclusive dressing

Education information







# Positioning

Ileostomy right side

Colostomy left side.

Identify umbilicus, anterior iliac crest and pubic symphysis.

Work within the rectus abdominis muscle – this helps support the stoma and reduces the risk of parastomal hernias.

Assess the abdomen with patient fully dressed.

Assess the exposed abdomen with patient lying, standing, sitting and bending.

Mark any skin creases, scars.

Draw an imaginary incision line.

Identify the rectus abdominis muscle.

Mark a site 5cm away from incision with a flat surface.

Site marked ideally should be seen by the patient.

Mark sites on both sides of the abdomen.

Cover marks with transparent dressing.

Confirm best choice by having the patient once again sit, stand, bend and lie down.

## Siting a stoma



# Conclusion

The surgeon may never be able to place the stoma at optimal site marked and the final site will be chosen by the surgeon after assessing the condition of the bowel in surgery.

On certain body shapes the stoma may sit in a crease no matter what.

Always assess the patient carefully and listen to their priorities.

*Sometimes there is never the right place.*







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