

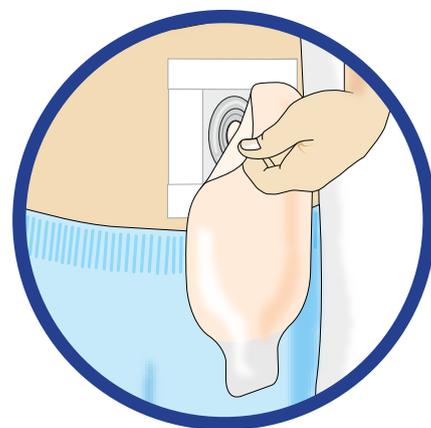


## Tips for Successful Ostomy Pouch Changes

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

- 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.

- 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 or 3M™ Transpore™ White 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.



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