

SEEK & FIND: OSTOMY



Student Name: Kristen Joan Pauluhn Date: 1/14/21

Instructor Signature _____ Student's earned points _____/20

Please use the product name & NOT the product number when completing this assignment.	Possible Points	Earned Points
<p>Name 2 pouching systems in the listed category. A pouching system is a barrier and a pouch. Describe abdominal characteristics, stoma characteristics, and one other reason why you would chose that system.</p> <p>Include manufacturer and full product name; it should be available in your home country.</p> <p>For each category, be sure to list products from <u>two separate companies</u>.</p> <p>Example: Cymed one-piece, drainable pouch with thin hydrocolloid washer and press 'n seal closure (cannot use this one as an answer).</p> <p>1. Flat, one-piece pouching system</p> <p>a. <u>Convatec esteem durahesive cut to fit with Invisiclose and filter</u></p> <p>b. <u>Coloplast Assura Flat Maci, 1-piece drainable pouch with EasiClosure Wide Outlet</u></p> <p>Abdominal and stoma characteristics/use <u>Best for abdomen that is flat, flexible system works best for firm abdomen; stoma that is budded, or stoma in a crease/skin fold.; Use: better for those with poor dexterity or who need simpler plan of care.</u></p> <p>2. Flat, two-piece pouching system</p> <p>a. <u>Hollister New Image Flat Flextend Skin Barrier with New Image Drainable Ostomy Pouch with Lock n' roll Microseal Closure</u></p> <p>_____</p> <p>b. <u>Convatec Sur-Fit Moldable (hydrocolloid) Durahesive Skin Barrier with Convatec Sure Fit Natura Urostomy Pouch</u></p> <p>_____</p> <p>Abdominal and stoma characteristics/use <u>Abdomen: Rigid system best for soft abdomen; Stoma: budded/no retraction; Uses: Best for those with visual acuity issues as they can feel the stoma and wafer application and hear the pouch attach if an accordion flange or similar is used, Two piece also allows for patients to rinse pouch, and swap pouch to a mini, opaque, or closed end system when desired, allows for easy removal of pouch for irrigation without having to remove the entire pouching system (just the pouch is removed and then replaced after</u></p>	3	

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<p>Name 2 pouching systems in the listed category. A pouching system is a barrier and a pouch. Describe abdominal characteristics, stoma characteristics, and one other reason why you would chose that system</p> <p>Include manufacturer and full product name; it should be available in your home country.</p> <p>For each category, be sure to list products from <u>two separate companies</u>.</p> <p>Example: Genairex 10” One-piece extended precut wear urostomy system with built-in convexity (cannot use this one as an answer).</p> <ol style="list-style-type: none"> 1. Soft/flexible convexity <ol style="list-style-type: none"> a. <u>Hollister Premier with CeraPlus Soft Convexity 1-piece Urostomy Pouch.</u> <u>*USE: system can be hooked to night drainage, contains belt tabs so can be worn with a belt to assist in maintaining convexity, also contains an anti-reflux valve so that urine flows from one chamber to the next without allowing urine to flow back up which helps keep excess urine from coming in contact with barrier</u> b. <u>Coloplast Assura Convex Light Barrier with Assura® Maxi Drainable Pouch with EasiClose outlet, filter, and soft cloth on front with opaque front *USE: this 2 Piece system allows for belt use to assist maintaining convexity and also allows for patient to change out ostomy pouch with as long as barrier ring and circumference of pouch ring match. Two-piece systems allow for patient to switch from clear to opaque pouches once comfortable in stoma care which allows for greater privacy.</u> <p>Abdominal and stoma characteristics/use <u>Soft convexity is best used for abdomens which are soft and a stoma which is flush or retracted. In some instances, soft convexity can be used in a soft abdomen even if stoma is budded. Abdomen: Use for a soft/flexible convexity pouch include peri-stomal skin that is shallow concave areas or where the stoma is not fully budded in all directions of the “clock-face.” This provides support and flexibility.</u></p> 3. Hard/firm convexity <ol style="list-style-type: none"> a. <u>Hollister Premier 1-PC Drainable Ostomy Pouch – Convex Flextend Barrier, Lock n’ Roll Microseal Closure, Tape</u> b. <u>Convatec Esteem Synergy ® Adhesive coupling technology™ Convex moldable Durahesive ® Skin Barrier with Esteem synergy ® Adhesive</u> 	<p align="center">3</p>	

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<p><u>Coupling Drainable Pouch * USE: this barrier and pouch utilizes a “landing zone” with a foam adhesive rather than a plastic ring which gives the flexibility of a one-piece but functionality/versatility of a two piece system</u></p> <hr/> <p>Abdominal and stoma characteristics/use</p> <p><u>Firm convexity is more rigid than soft convexity to helps provide structure in a very soft abdomen, causes stoma to protrude, and flatten skin folds. Instances to use a firm/hard convexity include is stoma is below surface of skin, or in a crease/fold.</u></p> <hr/>		
<p>Provide manufacturers' name(s) and give use for the following accessory products that is: Why would one use the accessory product?</p> <p>1. Skin barrier rings (list two)</p> <p>a. <u>Hollister Adapt CeraRing Barrier The addition of ceramide into the barrier ring helps protect skin's moisture barrier.</u></p> <hr/> <p>b. <u>Colloplast Brava ® Moldable Ring. Also enhances seal with second layer of skin barrier</u></p> <hr/> <p>—</p> <p>Use: <u>Used to enhance seal with a second layer of solid skin barrier. Moldable design allows for filling of uneven skin surfaces such as dips, creases, folds to create seal around stoma. Allows for belt usage.</u></p> <p>2. Disposable convex insert (NOT convex barrier ring) <u>Convatec Sur-fit Natura Disposable Convex Insert</u></p> <hr/> <p>Use: <u>Supports peristomal skin, convex shape created even peristomal pressure to prevent leakage.</u></p> <hr/> <p>3. Liquid bonding cement: <u>Torbot Liquid Bonding Cement</u></p> <hr/> <p>Use: <u>Extra strong adhesive for ostomy appliance, fast drying, contains zinc oxide to relieve irritation.</u></p> <hr/> <p>4. Ostomy Belt (NOT hernia belt) <u>Convatec Ostomy Appliance Belt, (Adjustable)</u></p> <hr/> <p>Use: <u>Worn to apply pressure to pouching system to enhance pouching seal. Provides ostomate with an added sense of security.</u></p>	<p>3</p>	

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<p>5. Skin barrier powder: <u>Hollister Adapt Stoma Powder</u></p> <hr/> <p>Use: <u>Used to absorb moisture on denuded peristomal skin which allows for better barrier adhesion.</u></p> <hr/> <p>6. Pouch deodorant : <u>Coloplast Brava ® Lubricating Deodorant</u></p> <hr/> <p>Use: <u>Decrease or eliminate odor. Lubricant will help stool fall to bottom of pouch and not around stoma, which aids in emptying process.</u></p> <hr/>		
<p>Name 2 different pediatric pouches. Provide an alternate use for a small pouch.</p> <p>Include manufacturer and full product name; be sure to list products from <u>two separate companies</u>.</p> <p>Example: Montreal Ostomy (BE/MO) One-piece pediatric urostomy pouch (Cannot use as an answer).</p> <ol style="list-style-type: none"> <u>Hollister Pouchkins Pediatric Urostomy Pouch – 1 Piece</u> <hr/> <u>Coloplast SenSura ® Mio Kids Flex 2-Piece Barrier – Star shaped, elastic barrier, no starter hole, with SenSura ® Mio Kids Flex Drainable pouch – with full circle filter, and EasiClose™ Outlet (similar to snap closure).</u> <hr/> <p>Alternate use: <u>Can be used to collect drainage from a fistula. Can be used to pouch a leaking g-tube site to collect and quantify drainage amount, protect perigastrostomy skin.</u></p> <hr/>	2	
<p>Name a commercial access port used to bring a tube out through the front of a pouch. Include both manufacturer and full product name.</p> <hr/> <p>Your facility does not carry any commercial access ports, and you are asked to bring a tube out through a pouch. Describe an alternate method for bringing the tube out through a pouch. (The nipple device described in the textbook in the tube chapter is a commercial device; it is <u>not</u> an alternate method).</p> <p><u>An alternative includes modifying an ostomy or urostomy pouch with a small puncture at proximal aspect of the pouch to allow and exit site for the tube. The exit site could be made occlusive with the use of hy-tape (pink tape). If possible, this modification should be made at the upper aspect, as stool/urine would be draining downward into pouching system.</u></p> <hr/>	2	

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<p>Select <u>one</u> major manufacturer of ostomy supplies. List 3 types of skin barrier wafers that have different ingredients integrated into the wafer. Include an indication for use for each type of <u>skin barrier wafer</u> chosen.</p> <p>1. <u>Hollister: CeraPlus</u></p> <hr/> <p><u>Cermide forms a waterproof protective barrier as it links to the statum corneum, prevents water loss that and lead to skin damage and dryness, minimizes trans epidermal water loss, contains lipids that retain moisture, lipids also act a lubricant which may help skin be more resistant to injury over time.</u> <u>Indication: Can be used with Hollister New Image pouches which are drainable, high output, closed and urostomy pouches</u></p> <hr/> <p>2. <u>Hollister Soft Flex (standard wear skin barrier); Gentle to skin and allows for frequent pouch removal, (latex-free), Indication: Colostomies and Ileostomies, best for newer ostomates who require more frequent assessment of ostomy/ peristomal skin, example includes newborn/pediatric patients with use of Pouchkins Soft flex barrier – no tape, flexible and sized for babies/children, allows for gentle removal in patient population with less mature skin which could be sensitive to stronger adhesives</u></p> <hr/> <p>3. <u>Hollister: Flextend Absorbs and hold fluids, durability by cross-linking, more resistant to erosion, durable; (latex free); Indication: colostomies & ileostomies, less frequent change schedule, best for an experienced ostomate who has had no peristomal skin issues and who requires less monitoring for complications</u></p> <hr/>	3	
<p>Name 2 pouches/pouching systems from different manufacturers that are specifically designed for wound/fistula needs.</p> <p>Include manufacturer and full product name.</p> <p>1. <u>Convatec Eakin Wound Pouch extra-large pouch with bung closure (for wounds up to 245 mm x 160 mm)</u></p> <hr/> <p>2. <u>Hollister Wound Drainage Collector – Sterile w/ Barrier, Medium size for wounds up to 3 3/4 “</u></p> <hr/>	2	
<p>List 2 pouching systems for large stomas that have skin barriers with <i>greater than a 4 inch (10.16 cm) cutting surface</i>. Do <u>not</u> include a fistula pouch (see prior question). Include manufacturer and full product name.</p>	2	

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Example: Torbot Bongort® Max E Wound Management Pouch with a ConvaTec Stomahesive skin barrier 8 x 8 (cannot use as an answer).

1. Brava Protective sheet 6" x 6" as baseplate for absorbing moisture and protection from maceration with a Eakin Fistula and Wound management pouch with horizontal cutting area, with cutting surface up to 9.7 " x 6.3", with fold and tuck closure

2. Other options include making own pouching system which may be necessary in case of monetary restrictions, insurance coverage, or lack of wound pouch large enough to accommodate stoma on being readily on hand at time of need. To accomplish this one can, make a pouch with a Nuhope or Torbot Contact cement with a drainable plastic bag (such as a Zip-lock bag) and a skin barrier such as Brava Protective Sheet or Hollister Flextend Skin Barrier 20 cm x 20 cm. First select plastic bag large enough to accommodate stoma and effluent. Next made a pattern of the stoma and trace onto the plastic bag and cut opening in bag slightly larger than the barrier. Next apply contact cement around the cutout area of bag to create adhesive surface and let dry. Apply contact cement to pouch side of barrier to increase adhesion. Proceed with pouching procedure once the cement id tacky/dry. Place the zip lock closure side down to allow for emptying. To stabilize and secure add 2" wide strip of tape or Coloplast Brava Elastic Barrier strips ½ on skin barrier and ½ of skin.

**Submit completed project to your dropbox.

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