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# Firelands Regional Medical Center School of Nursing

Nursing Foundations

Online Bowel Elimination Assignment

Which patient story video did you watch?

I watched Logan's story, "Living with an Ostomy."

1.) What lifestyle changes may occur as a result of ostomy/bowel diversion surgery?

Whether you have a temporary ostomy or a permanent ostomy you can still live a normal life, but some aspects of the normal life before an ostomy might change. Logan explained that individuals with ostomies can participate in activities of daily living just like before and that their body is in a state of healing or adjusting to a new form of bowel elimination. Some lifestyle changes would be adjusting to a new diet, avoiding foods high in fiber for the first couple weeks to allow your body to slowly adjust and soon enough one can incorporate foods they were eating before an ostomy. Another change that one may experience with an ostomy is developing a schedule that works best for them. For example, space out meals but keep them smaller and set alarms every few hours throughout the night to ensure no leakage occurs from the ostomy to avoid spills. Another suggestion that Logan mentioned is to get a device to go around your waist to hold the bag to allow for adequate filling of the bag. Also, carry around extra supplies to change or clean the ostomy bag because accidents can happen.

2.) What are some psychosocial/emotional needs for patients with a new ostomy?

A patient who has a new ostomy may experience a sense of fear, anxiety, or depression due to having a feeling that they must develop a new lifestyle. Both patients and medical staff should recognize these feelings and develop ways to manage them. Another need would be self-esteem and body image, meaning one may be embarrassed or not want to be seen in public with an ostomy, but as a nurse we are to ensure them that normal lives are possible even with an ostomy. We can do this by providing education to help them feel comfortable, confident, have a sense of self, have meaning, and feel part of a community.

3.) Describe the importance of having a support system after undergoing an ostomy/bowel diversion surgery.

As mentioned in the previous question, patients with new ostomies face fears and anxieties from learning how to manage this obstacle. Patients also struggle with self-esteem along with body image from losing weight prior to the surgery or having a feeling of embarrassment because they have a bag outside of their body that exposes their bowel contents. For most people, bowel elimination is a private matter that is not talked about often so having that exposed can be scary, challenging, and hard to adapt to. An individual must learn how to take care of the ostomy and stoma along with emptying and cleaning the ostomy and stoma. This can come with an extreme amount of responsibility that one may not be ready for. That is why it is extremely important that we as nurses not only provide proper education but also emotional support to the patient and make sure they have an adequate support system before going home. With family or friends as a support system, patients with ostomies can have a set of hands to help them out and have someone to talk to about difficulties or problems not only with the ostomy but also with their mental, physical, and emotional health. Patients with an ostomy may have a disability in which they are unable to properly care for their ostomy so that support system should be in place to assist with that care. The same goes for older individuals unable to care for their ostomy properly, the support system is also there to identify and reciprocate any changes that affect the ostomy function.

4.) What are some dietary changes that the nurse could educate on for a patient with a new ostomy?

In the video, Logan mentioned that for the first two to three weeks after surgery he was put on a low residue diet, which is avoiding foods that are high in fiber to give your GI system time to adjust and heal. Logan included some examples of this diet such as bananas, apples without the peel, turkey burgers, smooth peanut butter, potatoes, yogurt (2 cups per day), and pasta and cereal with less than 2 grams per serving. Other nutritional options for the low residue diet include white rice, meat, fish, eggs, juice without pulp. So, a new should provide education as to why the low residue diet is good for a few weeks after your surgery along with providing examples for the patient as to what they should eat on this specific diet. As the weeks progress, patients can incorporate the healthy foods that they were eating before the surgery back into their diet. I mentioned in the first question that meals should be spaced out, meaning instead of eating three large meals each day, allow yourself to have five to six small meals every three to four hours to not overload your GI system, but also allow for digestion work. Logan also recommended not drinking fluid 30 minutes after eating to allow your body to properly digest the food you just ate. With ostomy and stomas, patients lose fluid along with salt and other nutrients that are usually absorbed by the small and large intestine, so it is particularly important to consume more fluid compared to what one was drinking before. After incorporating foods back into a patient’s diet, they are at risk for food blockage which occurs from foods such as corn, fresh pineapple, popcorn, and fresh mushrooms. To avoid this, chew food well, drink fluids, and limit the amount of those foods into small portions.

5.) What are some resources available for patients with a new ostomy/stoma?

Patients with a new ostomy/stoma can be provided with education from nurses caring for them, but this procedure is an adjustment for everyone, and some people may need more explaining than others. If a patient needs more explanation an ostomy nurse could be a resource in which they can access to get help with whatever their needs may be. The book provides some resources on page 1298, https://www.wocn.org/ this website is The Wound, Ostomy, and Continence Nurses Society aiming to help individuals with an ostomy and provide resources to get into contact with a WOCN. The United Ostomy Associations of America, https://www.ostomy.org/ provides individuals who have or will be getting an ostomy with support groups, education, resources, and advocacy. This is a great resource for patients with a new ostomy because they can talk to, relate, and hear experiences from other individuals who experienced the same thing. This allows patients to feel a part of a specific community, gain confidence and self-esteem, and figure out how they can live a normal life with an ostomy/stoma. Another form of education that can be included as a resource is the intranet at Firelands where nurses can access educational papers or manuals and provide patients with a copy of the information to take home while they adjust to living with a new ostomy. There is an abundance of resources available for patients not only in the hospital but online as well as support groups to know that they are not alone.