

# Family Education Sheet

## Home Care Instructions for Changing an Ostomy Pouch (Bag)



**Boston Children's Hospital**  
Until every child is well™

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[www.bostonchildrens.org/familyeducation](http://www.bostonchildrens.org/familyeducation)

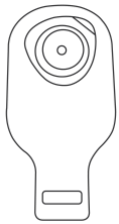
An ostomy is a surgically created opening in the intestine (bowel). This is also called a stoma. To learn more, please read the Family Education Sheet "[Ostomies: A Patient Guide and Colostomies.](#)"

Your child will go home wearing an ostomy pouch. The pouch collects stool (poop). Your nurse will teach you how to change the pouch and how to care for the stoma. Your nurse will also tell you what supplies you'll need, and show you how to use paste or a moldable ring.

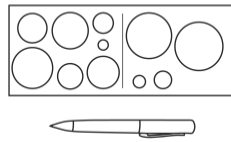
Important tip: It helps to set out all of your supplies within easy reach before removing the old pouch.

### Supplies that you will need:

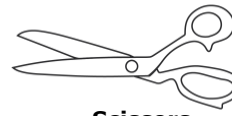
The best approach is to keep it simple and start with a basic pouch system.



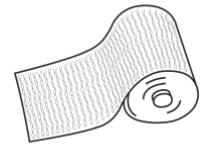
**One piece pouch:**  
Skin wafer, pouch,  
and closure on bottom  
are made together



**Measuring card & pen**



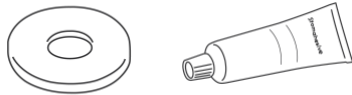
**Scissors**



**Gauze or soft paper towel:** to clean skin

### Additional supplies you may use:

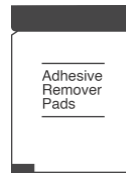
Extra products can be added if needed to get consistent wear time and keep the skin healthy.



**Moldable flat or convex ring or ostomy paste** can help fill in uneven skin creases/scars to prevent leaks and skin irritations



**Skin protective powder** forms a protective layer to dry out and protect sensitive skin

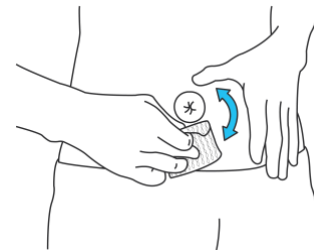
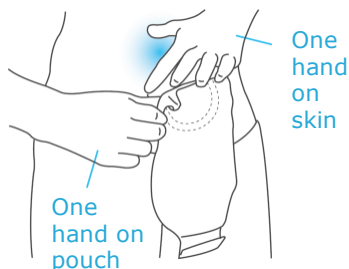


**Adhesive remover pads:** May help with wafer removal and to take off extra adhesive on the skin



**Skin protective wipes** form a protective film on skin or "seal in" powder if needed (see Step 6)

## Steps for changing an ostomy pouch

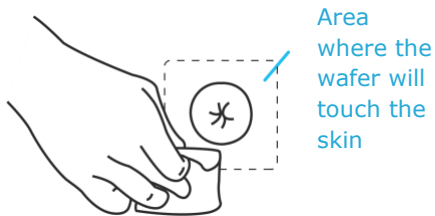


- 1 **Empty the pouch** before removing it.
- 2 With one hand on the skin and the other hand on the wafer, **gently lift the wafer off of the skin.** It may be helpful to use an adhesive remover pad to lift the wafer off of the skin. The **adhesive must be washed off** with soap and water. If you do not do this, the next wafer may not stick to the skin well.
- 3 **Place the old pouch into a plastic bag** to throw it away. Sealable sandwich bags work well.

- 4 **Wash and clean the skin around the stoma** with warm water using a washcloth or soft paper towel then pat dry. It's normal to have a small amount of bleeding from the stoma when washing the skin.

## Steps for changing an ostomy pouch (continued)

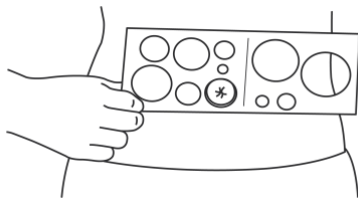
- 5 Look at the stoma.** The stoma should be moist and pink or red.



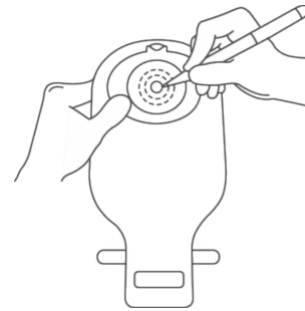
- 6 Look at the skin around the stoma.**

- **If there is no irritation,** continue to step 7.

- **If skin is raw, wet or open, sprinkle skin protective powder on the wet, open skin.** This will help the skin heal. Then lightly pat the protective barrier wipe over the powder to form a crust. Let the area dry for 1-2 minutes.



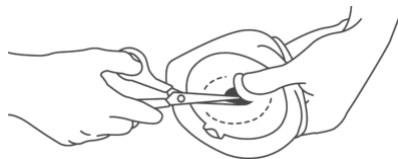
- 7 Measure the stoma** with the measuring card. Find the circle size on the card that fits closest to the stoma without touching it. The stoma may change size or shape during the first 3-4 weeks after surgery as the swelling goes down.



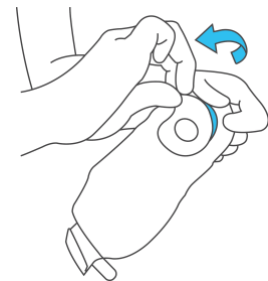
- 8 Trace the chosen circle size onto the back of the paper on the wafer.** Some pouches have pre-marked circles and numbers to guide you.



- 9 Warm the wafer** between your hands.

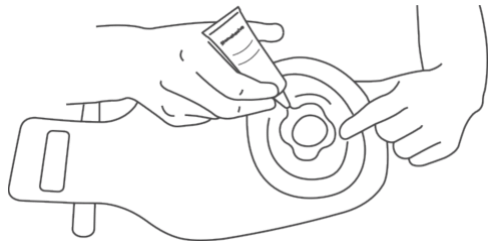


- 10 Cut the wafer** to the circle size. The starter hole may not need to be in the middle. You may need to cut it off-center to keep the wafer from going into the belly button or groin area.



- 11 Peel the paper/plastic off** of the back of the wafer.

## Steps for changing an ostomy pouch (continued)



- 12 If you've been told to, put a **moldable ring around the stoma or paste** around the opening of the sticky side of the wafer.
  - **If the stoma is flat, a nurse may use a convex moldable ring** to apply gentle pressure around stoma to help stool go into the pouch. The "FLAT SIDE" touches the wafer so that the "BOWL SIDE" touches the skin.
  - **If using paste**, squeeze it around the opening you cut in the wafer. It should be the same thickness as toothpaste.



- 13 **Center the pouch around the stoma and place it onto the skin.** Firmly press the wafer to the skin near the stoma and hold for 3-4 minutes so the wafer sticks to the skin. You can place a warm facecloth over the stoma to help the wafer stick to the skin.
- 14 **If your child has watery stool or leaking from the stoma**, place cotton balls or absorbent gel packets into the pouch after emptying out stool. The gel packets will be ordered for home use only.
- 15 **Close the end of pouch.** The pouch may have a built-in, Velcro-like closure or a spout at the bottom.
- 16 **Wash your hands** when you're done.

### When should I empty the pouch?

Empty the pouch when it's 1/3 full, at least 4-5 times during the day and at night 1-2 times dependent upon stool volume. If the pouch gets too full, it gets heavy and may leak.

### When should I change the ostomy pouch?

- If there is a leak under the wafer
- Every 2-4 days as instructed by your nurse

### What can I expect at home?

There are several medical supply companies that will deliver ostomy supplies to your home.

- A case manager from Boston Children's will contact a supply company to order what you need. The company chosen usually depends on your health insurance.
- After the first delivery, you call the company directly for more supplies. Be sure to plan ahead so you don't run out. It usually takes a week to get new supplies.
- The case manager will arrange for a visiting nurse to come to your home, depending on your insurance. This nurse will answer questions and help with bag changes as needed.

### Important tips

- It's very important to have a follow-up visit with your child's doctor. The team will help schedule this before you go home.
- **Always carry an extra pre-cut pouch with you** when you're away from home in case it leaks or needs to be removed for a medical procedure. If relevant, keep one in the school nurse's office.

*This Family Education Sheet is available in [Arabic](#), [Haitian Creole](#), [Traditional Chinese \(Hong Kong & Taiwan\)](#), [Spanish](#), and [Simplified Chinese \(China PRC, Singapore and Malaysia\)](#).*

### When should I call the doctor or nurse?

Call if you have questions or concerns or if your child:

- Has a fever of 101°F / 38.3°C or feels very hot
- Is vomiting (throwing up)
- Is cranky and irritable
- Has a bloated, swollen belly
- Has very little or no stool coming out of the stoma for more than 4 hours
- Has a large increase in the amount of stool coming out of the stoma
- Has diarrhea that is foul-smelling or bloody
- Is unable to eat or drink
- Has a blue, purple or black stoma
- Has a rash or redness of the skin around the stoma for more than 2-3 days

If there is bleeding from the stoma, press a cool, wet cloth on the area. If it's still bleeding in 5 minutes, call your child's doctor.

### Contact us

Monday–Friday from 8:00 a.m. – 6p.m.: Call the surgical nurse practitioner's line at (617) 355-7716.

After 6 p.m. on weekdays and on weekends and holidays: Call (617) 355-7800 and ask to speak to the surgeon on call.