

Living with a Urostomy

Essential advice before and after your operation

Coloplast®
Care



Your urostomy...

Having any operation can be an emotional experience but being well prepared can help you to know what to expect. Whether your operation was planned or an emergency, this booklet has been specially written to answer some of the questions often asked about having a urostomy and can also act as a quick reference guide for later on.

...we're here to help

The first thing you can be assured of is that you will have lots of support.

Your care team includes your Surgeon, your Stomal Therapy Nurse and many other healthcare professionals. We are all here to give you, your family and carers, help and advice both before and after your operation, while you are in hospital and when you go home.

It's natural to have lots of questions so, no matter how small it may seem, if you have any concerns please ask a member of your care team. They will be more than happy to help.

The information contained in this booklet is general and some of it may not apply to you. Inevitably there will be some issues that this booklet doesn't address or that you would like more information about. **Please be aware, there are graphic images contained within.**

At Coloplast we've developed a number of other resources to help you through your experiences.

For complimentary copies please call us on

Australia - 1800 653 317

New Zealand - 0800 265 675



Proudly Supporting...

Bowel Cancer Australia

This booklet has been produced by Coloplast with content reviewed by Bowel Cancer Australia's Stomal Therapy Nurse.

Coloplast is a proud supporter of Bowel Cancer Australia, a national charity working to reduce the impact of bowel cancer in our community through advocacy, awareness, education, support and research. To do all this Bowel Cancer Australia relies on public support. If you would like to get involved or make a donation, please visit bowelcanceraustralia.org

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Please be aware, there are graphic images contained within the following pages.

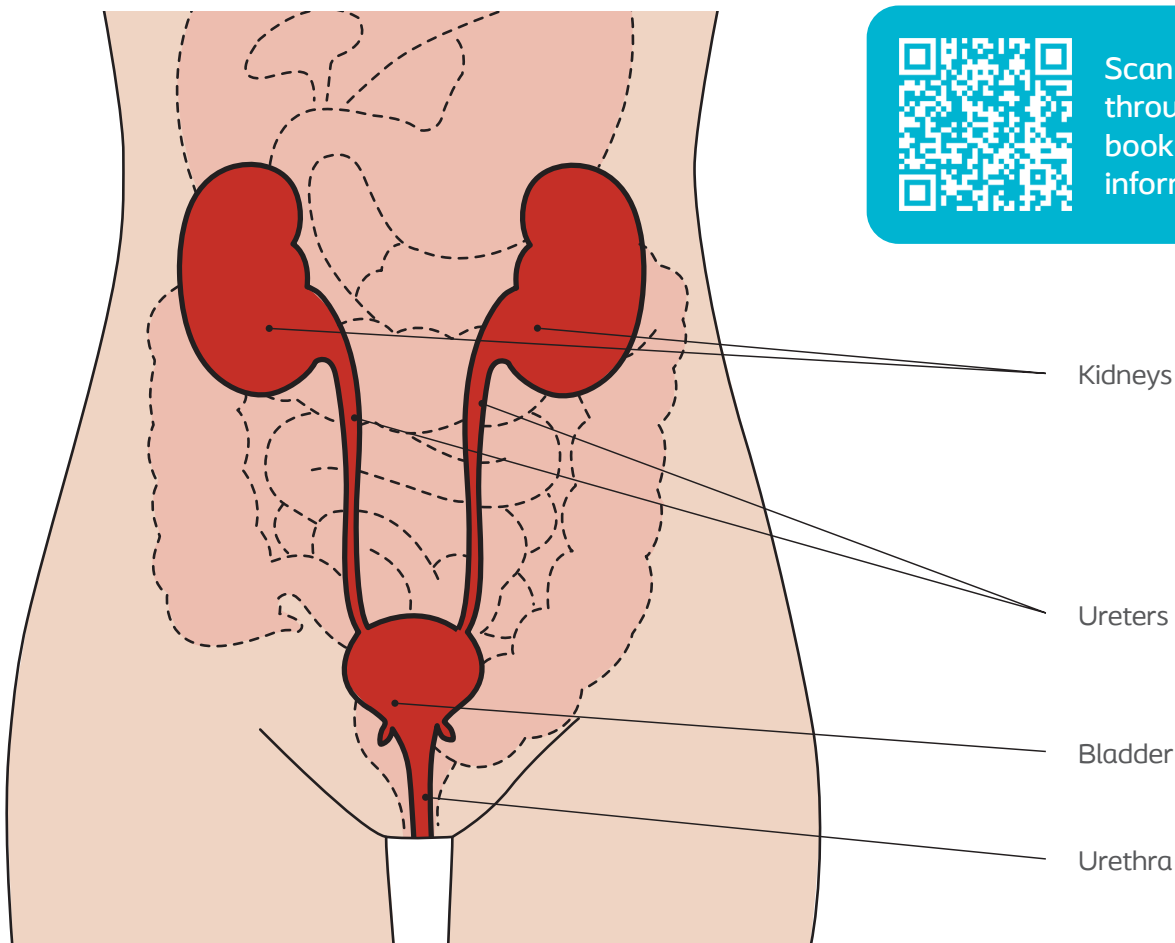
Your operation

Understanding your urinary system

Having any type of surgery can feel a little daunting. To help you understand what is involved in your operation, we'll first take a look at your urinary system and describe how it works.

Have a look at the diagram below of the urinary system and follow it down from the kidneys via the ureters to the bladder and urethra.

Urine is made by your kidneys and travels down two tubes called the ureters to your bladder. You have control over the time you go to the toilet and your urine is stored in your bladder until you get a sense of when you need to urinate. Your urine then passes out of your body through the urethra.



Scan the QR codes throughout this booklet for more information.

What is a urostomy?

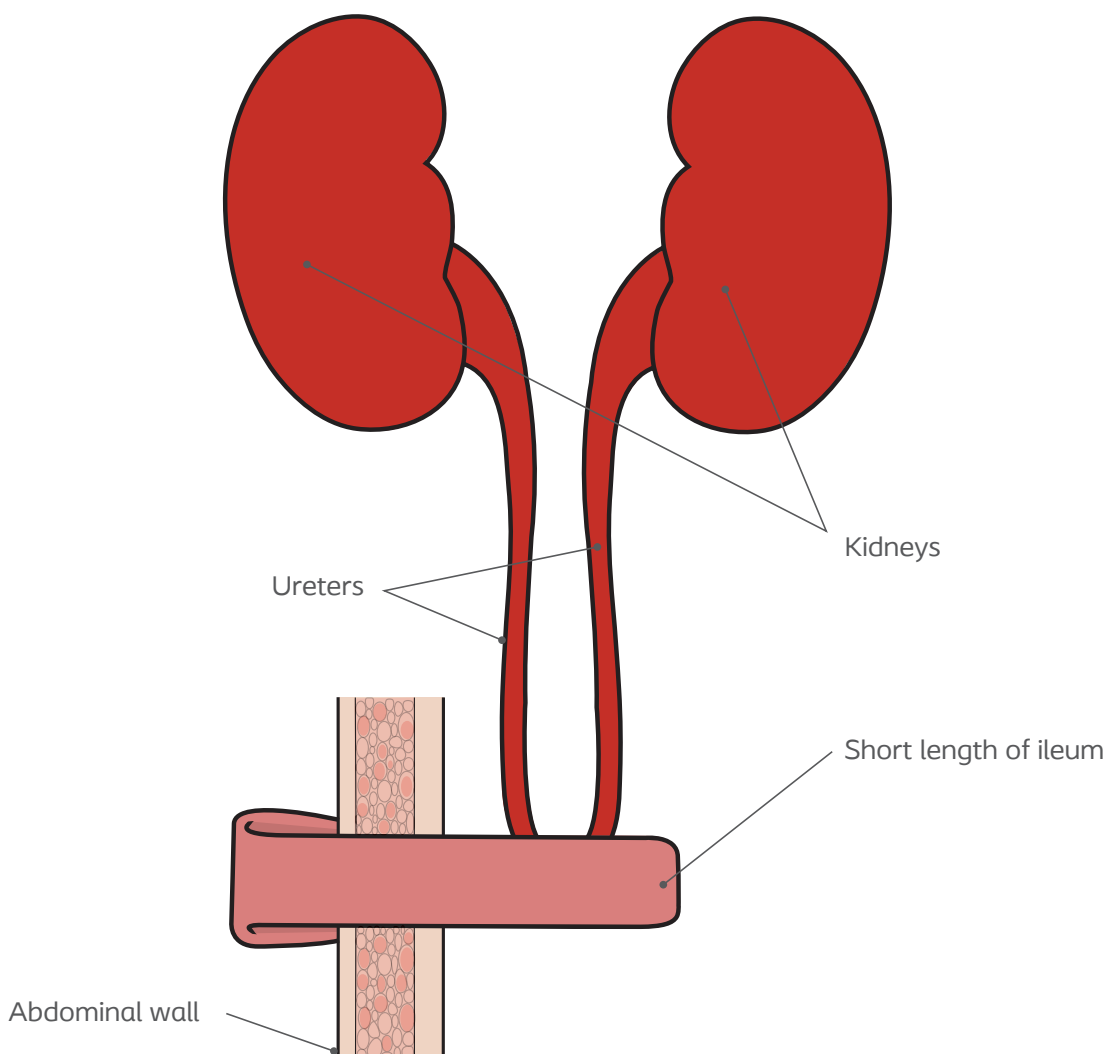
The type of stoma you will be having is called a urostomy or ileal conduit. Your surgery may need to be performed for a number of different reasons and your Surgeon and Stomal Therapy Nurse will explain all of this to you. For some people, your bladder may need to be removed because it's damaged or diseased. During your operation a passageway will be made for urine to pass from your kidneys to the outside of your abdomen to form a small spout. The passage way is called an ileal conduit and the opening is called a stoma. The term urostomy means 'urine opening'. If possible, you may be able to agree on a site for your stoma with your Stomal Therapy Nurse before your operation.

What difference will having a urostomy make?

When a urostomy is made it alters the usual way you pass urine. After surgery, instead of coming out through your urethra, your urine will pass through the stoma instead. The traditional way you pass urine is controlled by a special muscle in the urethra. However, the main difference you will notice when you have a stoma is that you will no longer be able to hold on to, or have control over, when you need to pass urine.

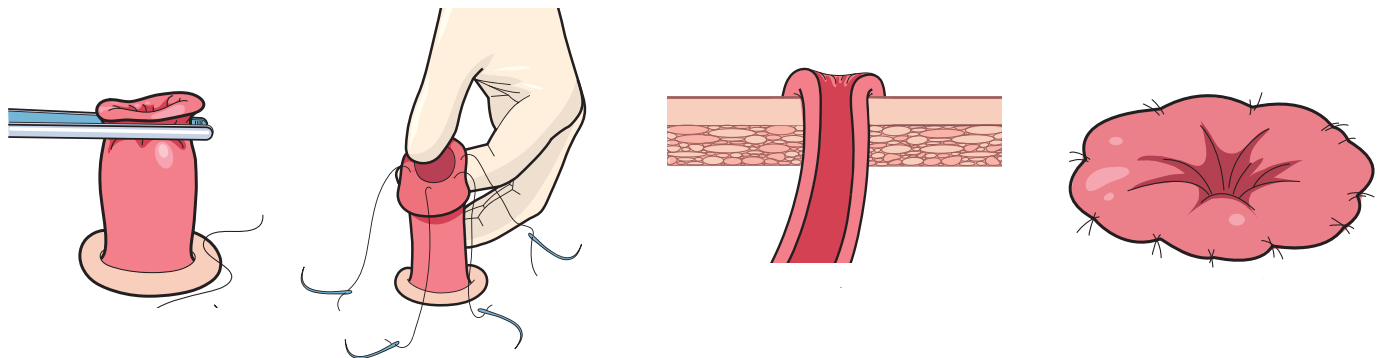
Urostomy formation

The most common urostomy procedure is an ileal conduit. The urostomy is formed by detaching the ureters from your bladder and joining them to a short length of your small bowel (ileum). One side of the ileum is sealed off and the other is brought to the surface of the abdomen to form a stoma. Your bladder may also have to be removed although this will depend on the reasons for your surgery.



Formation of a urostomy continued

1. An artificial opening is created in the abdomen and the end of the intestine is pulled up through the abdominal wall and layers of skin.
2. The intestine is folded back to form a cuff.
3. The cuff is stitched to the abdomen to keep the intestine in place.
4. A stoma is formed.



What will the stoma look and feel like?

The stoma will be moist, pinkish red in colour and should protrude slightly from your abdomen. It may be quite swollen to begin with but will reduce in size over time – usually 6-8 weeks after surgery. Despite being red, there is no sensation in the stoma and it's not painful.



Urostomy - with bilateral stents, just after operation



Healthy urostomy – some time after operation

Why do I need to wear a bag?

After your operation your urine will pass out through your stoma instead of your urethra. However, unlike your urethra, there is no muscle around the stoma, so you'll have no control over when you pass urine. Instead it will be expelled through your stoma and you will need to wear a urostomy bag to collect the output. There are several different types of bags and your Stomal Therapy Nurse will show you which ones are suitable for you.



How does a urostomy bag work?

The bag is designed to stick onto your abdomen where it will collect urine from your stoma.

A urostomy bag has special features including a non-return valve where an extra layer of plastic within the bag helps direct the flow of urine down into bag and prevents the urine backflow up over stoma and adhesive edge. This helps stop the urine collecting around the stomal opening, which corrodes the adhesive. There is a plug/bung at the bottom of the bag, to make it easy to drain the contents into a toilet. The bag is waterproof, so you can wear it whilst you are showering or bathing.

In Hospital

How can my Stomal Therapy Nurse help?

Your Stomal Therapy Nurse is a qualified nurse with additional training in all aspects of stoma care who will be able to help you and your family before, during and after your operation. Depending on your circumstances, your Stomal Therapy Nurse may be able to help you to decide on a suitable site for your stoma before your operation. This is important as it can affect the care of your urostomy and issues such as the type of clothes you wear. Your Stomal Therapy Nurse, along with many other healthcare professionals, will provide you with as much help as you need, for as long as you need it – not only when you are in hospital but also after you go home.

How will I feel after my operation?

Following surgery it's not surprising that you'll feel weak. You may go through a whole range of emotions and this will vary from person to person. It's important to remember, emotionally and physically, it may take at least six to eight weeks for you to recover and to get back to feeling like yourself again.


What should I know?

You will need to use a bag with a plug/bung at the bottom to enable you to drain the urine out. When you wake up after the operation you'll be wearing your first bag. This will probably be a clear one so that your nurses will be able to check on your new stoma easily. At first your stoma may be swollen but it will gradually decrease in size over several weeks. You may also have drips and drains attached to your body. Please don't be alarmed as these are all perfectly routine and will be removed when appropriate. Stents will also be in place initially. The stents/tubes are necessary to protect the join the Surgeon has made between the ureters and the ileal conduit/segment of small bowel to create the stoma. These will be removed, or will fall out, within 7-10 days following your surgery. Your doctor will advise you when you will be able to eat and drink as usual.

When will my stoma begin to work?

Your stoma will begin to work immediately after your operation but the stents can be left in place for 7-10 days. At first, the urine may be tinged red, but it will soon return to its normal colour. There will also be mucus in the urine from your stoma. Following a urostomy, your bowel movements may be disrupted and you may experience some constipation. This is because the operation you have had involves using part of your ileum and it can take a little time before your bowels start to work normally again. When it does start to work you may find that you have some diarrhoea for a short time – this will settle.

Your Stomal Therapy Nurse will teach you how to look after your stoma and change your bag – it really is quite simple when you get used to it.

A woman with blonde hair, wearing a white lab coat over a dark top, is smiling warmly at another woman whose back is to the camera. The woman in the foreground is also wearing a white lab coat. They appear to be in a professional setting, possibly a laboratory or office.

Please ask about anything that may be bothering you, particularly in these early days. You can be sure that your concerns would have been raised before.

What happens when the bag needs draining?

In the first few days after your operation, you will wear a clear urostomy bag, but you can then move onto an opaque bag. Your nursing staff will help with draining the bag, and other tasks, until you are ready and have learnt how to do it for yourself. A larger night drainage bag will be attached to collect urine passed overnight.

How do I change my bag?

Your urostomy will work steadily throughout the day. Most people tend to change their bag in the morning as their urine output is usually at its lowest at this time (providing of course that you haven't drunk all night!). Another good tip is to cough a few times before changing your bag as this will empty most of your urine into the bag first. Before starting to change the bag make sure you have everything at hand that you'll need. Just like everything else in life, a little bit of forward planning can help a lot – you may find our 'Changing guide' within, a useful reminder.

How often do I need to drain or change my bag?

This will vary from person to person. Your Stomal Therapy Nurse will be able to advise you how often you will need to change your bag. During the night, your urostomy bag can be attached to a night drainage bag, so you won't need to wake up to drain your bag.

What sort of bag should I choose?

There are many different types of bags available and your Stomal Therapy Nurse will help choose the most appropriate one for you. For example, you may wish to move away from the clear bag fitted immediately after your operation to an opaque bag. Also you may choose to use a night drainage bag when you go home.

Stoma bags

There are two main types of systems:

One-piece system

This consists of the collection bag with an integrated baseplate attached, which firmly fits around your stoma.

Two-piece system

This has the collection bag separate from the baseplate and the two parts are securely clipped together. This means that you don't have to remove the baseplate from around the stoma every time you change the bag. Both systems will be kind to your skin, lightweight, leak-proof and odour proof which means that they will be virtually undetectable to anyone else, so you can carry on with life as normal. Bags are available in a variety of sizes to suit your specific needs.

How should I dispose of used bags?

It's recommended that you empty your bag before you remove it. Then seal the bag inside a disposable bag and place in the bin. DO NOT flush it down the toilet, as it will cause a blockage. If you are using public disabled toilets, they should have suitable facilities. You can also use nappy changing bins or sanitary bins if available.

SenSura[®] Mio

Urostomy Range



Your Stomal therapy nurse can show you the range of options and guide you in choosing the best product for you. In time, as you gain more experience in managing your stoma, you may choose to explore your stoma management options further.

One-piece	<p>SenSura Mio Flat</p> 	<p>SenSura Mio Convex</p> <p>Soft Shallow Deep</p> 	<p>SenSura Mio Concave</p> 
	<p>SenSura Mio Flat</p> 	<p>SenSura Mio Convex</p> <p>Shallow Deep</p> 	<p>SenSura Mio Concave</p> 

SenSura Mio urostomy features

- Specifically designed for aggressive output
- Neutral grey design
- Multi-chamber for added discretion
- Soft flow control outlet

SenSura[®] Mio

1-Piece and 2-Piece Click Urostomy (Flat, Convex and Concave)

i If you experience an allergic reaction, please contact your healthcare professional. Coloplast accepts no liability for any injury or loss that may arise if this product is used in a manner contrary to Coloplast's current recommendations.

Disposal

The product is intended for single use only and should be disposed of in accordance with local guidelines, e.g. with normal household waste. Do not flush the product down the toilet.

Belt

- Adjust the belt length, by pulling the straps, so it fits your body. There is no need to remove the fabric covering the buckle.
- Attach each of the four belt hooks to one of the four belt ears on either side of the baseplate. Start from the front and apply a light pressure towards the stomach. Then pull the belt hooks away from the coupling, until they "click" in place. (Only applies for products with belt ears - Convex or 2-Piece appliances.)

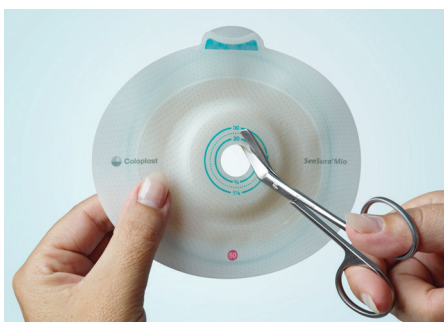
Preparation

1-Piece



- Trace and cut a hole in the baseplate to fit the size and shape of the stoma using a pair of curved scissors and the cutting guide on the baseplate. You can use the enclosed stoma measuring guide to measure the size and shape of the stoma. Ensure the opening is not cut too small, as a tight opening can cause friction and injury to the stoma.
- Thoroughly clean the stoma and surrounding skin area. The skin must be completely dry before application of the baseplate.
- Please remember to close the outlet before use.

2-Piece Click



- Trace and cut a hole in the baseplate to fit the size and shape of the stoma using a pair of small curved scissors and the cutting guide on the baseplate.
- You can use the enclosed stoma measuring guide to measure the size and shape of the stoma.
- Ensure the opening is not cut too small, as a tight opening can cause friction and injury to the stoma, or block the opening, causing the urine to push the adhesive away from the skin.
- Thoroughly clean the stoma and the surrounding skin area. The skin must be completely dry before application of the baseplate.

Scan the appropriate QR code below to view a 'How to Use' video for your bag

SenSura Mio Uro Flat (1-piece)



For Convex,
please refer
to flat video.

SenSura Mio Uro Concave (1-piece)

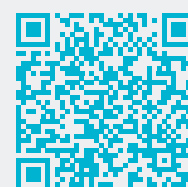


SenSura Mio Uro Click Flat (2-piece)



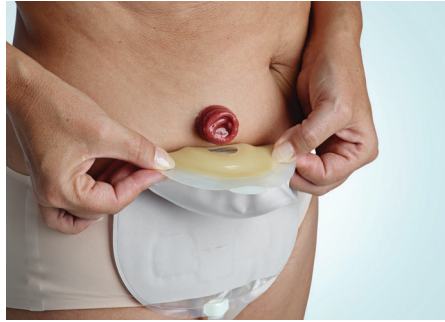
For Convex,
please refer
to flat video.

SenSura Mio Uro Click Concave (2-piece)



Application

1-Piece



- Clean and dry the skin. Peel off the protective film from the adhesive.
- Fold the adhesive backwards, align the adhesive around the stoma and press it firmly onto the skin.
- Apply a small amount of pressure on the bag to ensure fast adhesion and a perfect fit between the adhesive and the skin around the stoma.
- The outlet can be hidden in the pocket on the front to make it more comfortable and discreet. (Only applies for bags with a textile front.)

Application (2-Piece)



- Clean and dry the skin. Peel off the protective film from the adhesive.
- Align the baseplate around the stoma and apply a small amount of pressure on the baseplate to ensure fast adhesion and a perfect fit between the adhesive and the skin around the stoma.
- The adhesive must fit snugly around the stoma. To prevent leakage it is important to ensure a tight seal around the stoma. When applying pressure to the baseplate/bag on the abdomen, begin in the area around the stoma and press the adhesive to the skin. Run a finger all the way around the stoma to ensure that the adhesive seals. Smooth the baseplate down, starting from the stoma and moving outwards to the edges, to ensure that the adhesive has made full contact with the skin.
- Ensure the top of the baseplate is dry and clean (When cleaning the top of the baseplate only use water).
- Make sure that the locking ring is open. Position the bottom of the bag coupling at the bottom of the baseplate coupling.
- Press the bag and the baseplate together at the bottom with your middle fingers and with your index fingers apply a gentle pressure to the top of the coupling until you feel the bag is correctly positioned to the baseplate.
- With your index fingers apply a gentle pressure to the top of the coupling until you feel the bag is correctly positioned to the baseplate.
- Close the locking ring by pressing the lock together. The bag is securely attached to the baseplate when you hear a 'click'.

Emptying/Drainage

1-Piece and 2-Piece



- Hold the plug/end of the outlet upwards and squeeze the outer end of outlet, pull out the plug, and relax your hold on the outlet and then drain the bag. After complete drainage, ensure that the outlet is firmly closed with the plug fully inserted.
- If you are using an opaque bag, you will be able to tuck the outlet up into the slit in the opaque cover, above the outlet.

Removal

1-Piece



- Gently remove the bag by pulling the removal ear on the adhesive away from the stomach and roll the adhesive slowly downwards. An adhesive remover wipe or spray can be used to prevent skin damage if adhesion is strong.
- Apply light pressure on your skin with your free hand to help removal.
- The product is intended for single use only and should be disposed of in accordance with local guidelines, e.g. with normal household waste.
- Do not flush the product down the toilet.

Removal (2-Piece)



- Remove the bag by opening the locking ring by pressing the small turquoise tab facing your stomach with a finger tip.
- Hold onto the removal ear and remove the bag by carefully bending and pulling the bag away from the baseplate.
- Gently remove the baseplate by pulling the removal ear on the baseplate away from the stomach and roll the baseplate slowly downwards. An adhesive remover wipe or spray can be used to prevent skin damage if adhesion is strong.
- Apply light pressure on your skin with your free hand to help removal.
- The product is intended for single use only and should be disposed of in accordance with local guidelines, e.g. with normal household waste.
- Do not flush the product down the toilet.

Night bag (1-Piece and 2-Piece)

- For greater security we suggest you use the Coloplast Urostomy night bag, specially designed to connect directly into the SenSura Mio Urostomy bag. However, the SenSura Mio Urostomy bags can be connected to all types of overnight drainage bags by using the connector supplied. The narrow end is pushed into the outlet of the SenSura Mio Urostomy bag and the other end is connected to the night bag. The night bag can collect 2 litres of urine when connected to your urostomy bag to allow you a peaceful night's sleep.

What else should I know?

One of the most important things to remember is to take good care of the skin around your stoma. Here are some tips that you may find helpful:

The baseplate needs to fit snugly around your stoma

If the hole in the baseplate is larger than your stoma, your skin will become exposed to the harmful effects of the urine and become sore. Additionally, if the baseplate is cut too small it may cause damage to your stoma. Therefore, it's important to regularly check your template size and ensure the baseplate is a snug fit around your stoma. A handy tip is to place your template over your stoma and check if any skin is showing.

Watch out for irritants

Leakage on to the skin, excessive removal of baseplates and harsh skin cleansers, can all cause some irritation of the skin.

Bleeding

It's usual to experience a small amount of bleeding around your stoma when cleaning. This is not a cause for alarm. However, if bleeding comes from inside the stoma, you should see your doctor urgently.

Urinary infections

Due to the nature of your surgery, it is important to drink plenty of water (2-3 litres/day). This is because you may have an increased risk of urinary tract infection. Generally if your urine is dark you may be dehydrated so you should increase your fluid intake. You may also have mucus present in your urine – this is normal. However, once your stoma is established, if you notice your urine is cloudy, smelly, bloody or if you experience loin pain, you may have an infection - please consult your doctor. If a urinary tract infection is suspected, a urine specimen will be taken from your stoma by your Stomal Therapy Nurse. In addition to increasing your fluids, taking oral Vitamin C has been shown to decrease the risk of developing urinary tract infections.

It's advisable to carry a spare changing kit with you when you go out.

Where necessary, **Brava® Supporting Products** are available to reduce the risk of leakage. Your Stomal Therapy Nurse can advise you which, if any supporting products are appropriate for you.



Going home

How do I obtain supplies?

In Australia

After leaving hospital, your local Ostomy Association will supply your ostomy products. You have the option of having the products mailed directly to you or visiting the Ostomy Association and picking up the products personally. Your Stomal Therapy Nurse will register you with your local Ostomy Association and order your first month of products. After this initial supply, you will need to order your products each month, as required. Instructions for ordering and your membership card showing your membership number, will be found in the first supply that you receive. Please ensure that you always order only what you need.

In New Zealand

Your Stomal Therapy Nurse will discuss with you how to organise your ongoing supply of ostomy appliances after being discharged from hospital.

Do I need a special diet?

No. Just like everyone else you should eat a well balanced diet, and as long as your Surgeon or Stomal Therapy Nurse has not advised otherwise. This can include all of your favourite foods. You may find that your appetite reduces during the first 4-6 weeks post-surgery. If this is the case, speak to your Stomal Therapy Nurse or dietitian, who may recommend a high protein or energy drink. Due to the nature of your surgery, you will need to drink relatively more to help your body maintain the right fluid balance. People with a urostomy are usually advised to drink 2-3 litres of fluid a day. You should also be aware that eating certain foods (such as asparagus, shellfish and curries) may cause your urine to take on an offensive colour and cloudy appearance. Beetroot and certain types of medicines may also discolour the urine. Also, please speak with your Stomal Therapy Nurse if you require additional information on nutrition.

When you go home there is no reason why, with time, you will not be able to resume the life you were leading before the operation.

Will I still be able to travel?

Generally, it's not advisable to fly within the first 6 weeks following any operation because of the increased risk of Deep Vein Thrombosis (DVT) and it's important to check your travel insurance. However, apart from that, there is no reason why having a urostomy should restrict your ability to travel in any significant way – whether in your country or abroad, for business or pleasure. Just remember to pack all of the things you will need for the journey and make sure that you have enough supplies for the duration of your time away. If you are flying, don't forget to divide up your supplies between your main and hand luggage to allow for lost luggage or delays.

Scissors packed in hand luggage may be confiscated, so it would be safer to pack in checked baggage.

Should I still exercise?

Exercise is good for everyone and just because you've had a urostomy, you are no exception. It is very likely that any exercise you enjoyed before the operation will also be suitable to continue afterwards. Walking is a good, general low impact exercise that you may enjoy. You can start with walking around the block and gradually increase your walking distance as you become stronger.

Special small bags/mini caps are available for use when swimming and playing sport, so there is no reason to feel like you can't join in. Obviously you will need to start with gentle exercise at first but you will soon be able to do just as much, if not more, than before.

If you are concerned about the possibility of hernia formation after stomal surgery, you could consult with a physiotherapist as to what exercises are safe for you to do.

What about sex?

This very much depends on the nature of the operation you have had. For men, if you've had your bladder removed this may result in impotence, so it's important to talk to your Stomal Therapy Nurse or Surgeon. They are used to discussing such delicate issues and will be able to help. If appropriate, you may be able to have a penile implant at a later date.

Who can I turn to for support?

After having a urostomy the main aim is to get you back to enjoying life. That means being at home, or at work, or on holiday – not in hospital – and not 'ill'. But this doesn't mean that your specialist care team is no longer there to help once you leave hospital – in fact quite the opposite.

Your Stomal Therapy Nurse, and his or her colleagues, will always be on hand to help you with any problems or questions that you might have.

Coloplast offers a personal support program for ostomates - Coloplast® Care. For more information, see page 20.

Ostomy Associations

ACT

ACT & DISTRICTS STOMA ASSOCIATION

W: actstoma.net.au

E: stoma@actstoma.net.au

T: (02) 5124 4888

A: Floor 2, 1 Moore Street, Canberra ACT 2600

Open: First and second week of each month on Monday, Tuesday, Wednesday 10:00am to 1:00pm

New South Wales

NSW STOMA LIMITED

W: nswstoma.org.au

E: info@nswstoma.org.au

T: 1300 Ostomy
or (02) 9565 4317

A: Unit 5, 7-29 Bridge Road, Stanmore NSW 2018

Open: Monday to Thursday 8:00am-4:00pm, Friday 8:00am-2:00pm

OSTOMY NSW LTD

W: ostomynsw.org.au

E: orders@ostomynsw.org.au

T: (02) 9542 1300
F: (02) 9542 1400

A: Ground Floor, 20-22 Yalgar Rd, Kirrawee NSW 2232

Open: Monday to Thursday 9:00am-2:00pm

Northern Territory

CANCER COUNCIL NORTHERN TERRITORY

W: nt.cancer.org.au

E: ostomy@cancernt.org.au

P: (08) 8944 1800

F: (08) 8927 4990

A: Unit 2, 25 Vanderlin Drive, Casuarina NT 0811

Open: Monday to Thursday 8:30am-2:00pm

Queensland

GOLD COAST OSTOMY ASSOCIATION

W: goldcoastostomy.com.au

E: gcoa@bigpond.com

T: (07) 5594 7633

F: (07) 5571 7481

A: 8 Dunkirk Close, Arundel QLD 4214

Open: Tuesday and Thursday 9:00am-3:00pm

NORTH QUEENSLAND OSTOMY ASSOCIATION

E: admin@nqostomy.org.au

T: (07) 4775 2303

F: (07) 4725 9418

A: 13 Castlemaine Street, Kirwan QLD 4812

Open: Monday and Thursday 8:00am-4:00pm, Wednesday 8:00am-12:00pm

QUEENSLAND OSTOMY ASSOCIATION

W: qldostomy.org.au

E: admin@qldostomy.org.au

T: (07) 3848 7178

F: (07) 3848 0561

A: 22 Beaudesert Road, Moorooka QLD 4105

Open: Tuesday and Thursday 9:00am-3:30pm

QUEENSLAND STOMA ASSOCIATION

W: qldstoma.asn.au

E: admin@qldstoma.asn.au

T: (07) 3359 7570

F: (07) 3350 1882

A: Unit 1, 10 Valente Close, Chermside QLD 4032

Open: Monday to Thursday 8:30am-2:30pm, last Saturday of each month 8:30am-12:30pm

TOOWOOMBA & SOUTH-WEST OSTOMY ASSN INC.

E: bob.schull@bigpond.com

T: (07) 4636 9701

F: (07) 4636 9702

A: Education Centre, Blue Care Garden Settlement, 256 Stenner Street Toowoomba QLD 4350

Open: Tuesday 9:00am-3:30pm

WIDE BAY OSTOMATES ASSOCIATION

W: wboa.org.au

E: wbestomy@bigpond.com

T: (07) 4152 4715

F: (07) 4153 5460

A: 88a Crofton Street, Bundaberg West QLD 4670

Open: Tuesday, Wednesday, Thursday 8:30am-3:00pm

South Australia

ILEOSTOMY ASSOCIATION OF SOUTH AUSTRALIA

W: ileosa.org.au

E: orders@ileosa.org.au

T: (08) 8234 2678

F: (08) 8234 2985

A: 73 Roebuck Street, Mile End SA 5031

Open: Monday, Tuesday, Wednesday and Friday 10:00am-2:00pm

OSTOMY ASSOCIATION OF SOUTH AUSTRALIA

W: colostomysa.org.au

E: colosa@colostomysa.org.au

T: (08) 8235 2727

F: (08) 8355 1073

A: 1 Keele Place, Kidman Park SA 5025

Open: Monday to Thursday 10:30am-2:30pm

Victoria

BENDIGO AND DISTRICT OSTOMY ASSOCIATION INC

T: (03) 5441 7520
F: (03) 5442 9660
A: 43-45 Kinross Street, Bendigo VIC 3550
P: The Secretary, PO Box 404, Golden Square VIC 3555
Open: Tuesday, Wednesday and Thursday 10:00am-2:00pm. Second Tuesday of each month 9:00am-3:00pm

OSTOMY ASSOCIATION OF MELBOURNE

W: oam.org.au
E: enquiries@oam.org.au
T: (03) 9888 8523
F: (03) 9888 8094
A: Unit 14, 25-37 Huntingdale Rd, Burwood VIC 3125
Open: Tuesday to Friday 9:00am-4:00pm

WARRNAMBOOL & DISTRICT OSTOMY ASSOCIATION

E: warrnamboolostomy@swh.net.au
T: (03) 5563 1446
F: (03) 5563 4353
A: 279 Koroit Street, Warrnambool VIC 3280
Open: Friday 12:00pm-4:00pm

COLOSTOMY ASSOCIATION OF VICTORIA

W: colovic.org.au
E: info@colovic.org.au
P: (03) 9650 1666
F: (03) 9650 4123
A: Suite 221 - Level 2, Block Arcade, 98 Elizabeth Street, Melbourne VIC 3000
Open: Weekdays 9:00am-2:00pm

PENINSULA OSTOMY ASSOCIATION

W: penost.com.au
E: poainc1@bigpond.com
T: (03) 9783 6473
F: (03) 9781 4866
A: 12 Allenby Street, Frankston VIC 3199
Open: Monday, Thursday 10:00am-3:00pm

GEELONG OSTOMY

W: geelongostomy.com.au
E: goinc@geelongostomy.com.au
T: (03) 5243 3664
F: (03) 5201 0844
A: 6 Lewalan Street, Grovedale VIC 3216
Open: Monday, Wednesday, Friday 9:30am-2:30pm

VICTORIAN CHILDREN'S OSTOMY ASSOCIATION

W: rch.org.au/edc
E: edc@rch.org.au
T: (03) 9345 5325
F: (03) 9345 9499
A: Equipment Distribution Centre, Royal Children's Hospital, Basement 2 (green lifts), 50 Flemington Road, Parkville VIC 3052

Western Australia

WESTERN AUSTRALIAN OSTOMY ASSOCIATION

W: waostomy.org.au
E: info@waostomy.org.au
T: (08) 9272 1833
F: (08) 9271 4605
A: 15 Guildford Road, Mount Lawley WA 6050
Open: Monday to Friday 9:00am-4:00pm, Tuesday 6:30am-4:00pm. Fourth Saturday of each month 9:00am-1:00pm

Tasmania

OSTOMY TASMANIA

W: ostomytas.com.au
E: admin@ostomytas.com.au
T: (03) 6228 0799
F: (03) 6228 0744
A: Amenities Building, St. Johns Park, St. Johns Avenue, New Town TAS 7008
P: PO Box 280 Moonah, Tasmania 7009
Open: Monday 9:00am-3:00pm, Tuesday 9:00am-1:00pm

New Zealand

EBOS Healthcare

14-18 Lovell Court, Rosedale, 0632, Auckland, New Zealand
Freecall: 0800 265 675

Sources of help and advice

Coloplast Consumer Care

At Coloplast we pride ourselves on continuing our long tradition of partnering with Stomal Therapy Nurses and ostomates. An example of this collaboration is the development of SenSura® Mio, the first scientifically proven ostomy appliance that maximises all the key features of a superior baseplate.

For ostomates, we have a vast array of resources including websites, product information booklets, instruction leaflets, stoma sizing guides... to name a few!

If you would like more information on the resources available please give us a call.

Australia - 1800 653 317

New Zealand - 0800 265 675

Coloplast® Care - 1800 431 297

aucare@coloplast.com

Your local Stomal Therapy Nurse is

Your ostomy association is

Your local support groups are

Notes



Your guide to a better life with an ostomy



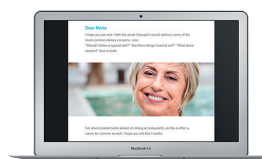
Website

Dedicated website with articles and reliable advice



Ostomy Check

Exclusive Ostomy Check self-assessment tool to track your ostomy health



Emails

Inspiration relevant for your situation directly into your inbox



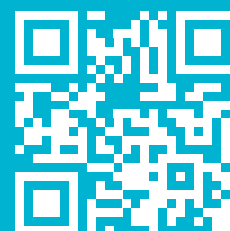
Phone support

Advisers ready to answer questions and provide support over the phone

Join Coloplast Care today via our website, phone or scanning the QR code.

📞 1800 431 297

💻 ostomy.coloplastcare.com.au



*Coloplast Care currently available in Australia only.

Optimise your fit with **Apply – Remove – Check**

The foundation for a good appliance-change routine

Apply, Remove, Check (ARC) is a simple three step process to help you find an appropriate appliance-change routine with adequate changing frequency – to help you maintain healthy peristomal skin.

Apply

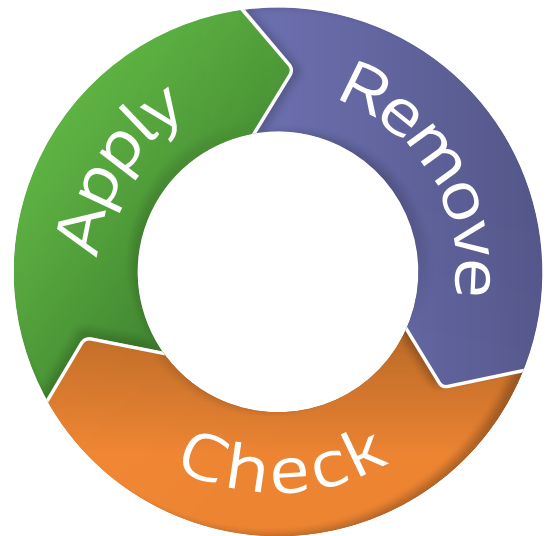
A correct appliance-change routine starts with the proper application of your baseplate.

Remove

To protect your skin, it's important to use the right technique to remove your appliances gently.

Check

A quick examination of your skin and adhesive will reveal if you are in the right routine. But first you need to know which symptoms to be aware of.

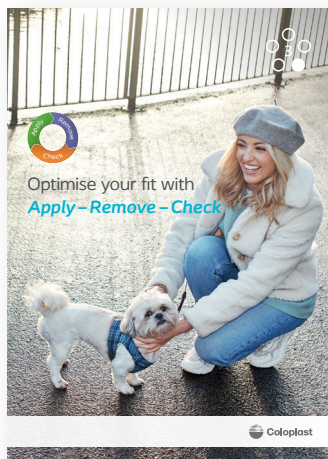


Scan the QR code to download your **FREE** copy of the **ARC Booklet and ARC Diary** today!

Alternatively, please call Coloplast (AU) 1800 653 317 or Ebos (NZ) 0800 265 675



For a full introduction to ARC read the 'Optimise your fit with Apply, Remove, Check' booklet.



The ARC diary is designed to help you record your appliance changes and establish the right routine.

Establish your Apply-Remove-Check routine
Please make an entry in the diary every time you change your appliance

Change	Apply Pouch applied	Remove Pouch removed	Worn for	Check Ocular warnings My skin is:	The baseplate is:	Has visible output	Conclusions Routine My routine is:	Comments
1	date	date	day(s)	Healthy Intact Irritated	Intact Broken down	Has visible output	Manageable Not manageable	
2	date	date	day(s)	Healthy Intact Irritated	Intact Broken down	Has visible output	Manageable Not manageable	
3	date	date	day(s)	Healthy Intact Irritated	Intact Broken down	Has visible output	Manageable Not manageable	
4	date	date	day(s)	Healthy Intact Irritated	Intact Broken down	Has visible output	Manageable Not manageable	
5	date	date	day(s)	Healthy Intact Irritated	Intact Broken down	Has visible output	Manageable Not manageable	
6	date	date	day(s)	Healthy Intact Irritated	Intact Broken down	Has visible output	Manageable Not manageable	
7	date	date	day(s)	Healthy Intact Irritated	Intact Broken down	Has visible output	Manageable Not manageable	



Be careful not to store your bags in direct sunlight or near heat, as this can make them deteriorate.

The Coloplast story began back in 1954.

Our company reflects the passion, ambition and commitment of the people who made it happen. Elise Sørensen, a nurse, invented the first disposable, self-adhesive ostomy pouch, because she was determined to help her sister out of isolation. Aage Louis-Hansen added his engineering ability and entrepreneurial drive, and through strong commitment and resilience he founded Coloplast.

Still today, people with intimate healthcare needs often live in isolation.

We are fighting to change that.