

Stoma Appliances Prescribing Guidelines

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Coventry & Warwickshire
Area Prescribing Committee
Clinical Guideline – CG024

APPLIANCE	USUAL MONTHLY QUANTITY	PRESCRIPTION DIRECTIONS	NOTES
Colostomy bags	30 - 90 bags	Remove and discard after use.	Bags are not drainable/ reusable. Usual use: 1-3 bags per day. Flushable bags only to be used on advice of bowel / stoma nurse.
Ileostomy bags	15-30 bags	Drain as required throughout the day. Use a new bag every 1-3 days.	Bags are drainable
Urostomy bags	10-20 bags	Drain as required throughout the day. Generally replace bag every 2 days.	Bags are drainable
Night drainage bags for urostomy patients	4 bags (1 box of 10 bags every 2-3 months)	Use a new bag every 7 days.	Bags are drainable
Flange (base plate for two piece systems)	15 flanges	Change every 2-3 days	The flange is not usually changed at every bag change
Flange extenders (for one and two piece systems)	10-90 flange extenders	Change every time bag is changed	Often required for extra security if the patient has a hernia or skin creases and there is leakage around the stoma
Belts (for convex pouches)	3 per year	1 to wear, 1 in the wash, 1 for spare	Washable and re-usable.
Adhesive removers	1-4 cans or 30-60 wipes (depending on frequency of bag changes)	Use each time stoma bag is changed	Sprays are more cost effective than wipes. 'Non-sting', silicone based products are recommended.
Deodorants (Odour neutralising drops)	Not routinely required. Maximum 1	1-2 drops per bag change or at emptying	Should not be required. If correctly fitted, no odour should be apparent except when bag is emptied or changed. Household air freshener is sufficient in most cases.
Lubricating deodorant gels	2 bottles	Put one squirt in to stoma bag before use	Only recommended if patients have difficulty with 'pancaking'. Bottles are more cost effective than sachets. A few drops of baby oil or olive oil can be used as an alternative.
Skin fillers	Follow directions of bowel / stoma nurse	Change each time bag is changed	Filler pastes/ washers are used to fill creases or dips in the skin to ensure a seal
Skin protectives (wipes, pastes and powders)	Follow directions of bowel / stoma nurse	Apply when bag is changed as directed Wipes 1-2 per day Creams/Pastes/Powders at discretion of specialist stoma nurse	SHORT TERM USE ONLY (acute prescription): may be used on skin that is broken, sore or weepy to promote healing. If used for ≥ 3 months, refer patient to bowel / stoma nurse. Barrier creams are NOT recommended as they reduce adhesiveness of bags/flanges.

1. If quantities ordered exceed those listed without good reason (e.g. number of bags in times of diarrhoea), refer patient to specialist nurse.
2. 'Stoma underwear' is not necessary and should not be prescribed, unless a patient develops a parastomal hernia and has been advised to wear 'support underwear' or a belt.
3. There is no clinical need for Skin Cleansers to be prescribed. These can be purchased if required, a small water spray bottle is an alternative or water wipes.
4. Pharmacies and DACS are required to supply complimentary wipes and disposal bags with an extensive range of products (noted in the Drug Tariff Part 1XC). Please review dry wipe/wet wipe/gauze requests.

Bowel/ Stoma nurse contact numbers (Monday- Friday 8am-4pm)

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