



## ***Bowel Prep for Patients with a Colostomy***

The information contained in this brochure is for people with a colostomy undergoing procedures such as colonoscopy, barium studies and colostomy closure or reversal.

**This bowel procedure is not recommended for people with ileostomies.**

### **Diet**

Your health care provider will advise you about dietary restrictions necessary before your procedure. Typically one or two days before your procedure, you will be asked only to eat or drink clear liquids such as:

- Coffee
- Tea
- Soft drinks (not red)
- Apple juice
- White grape juice
- Gatorade (not red)
- Water
- Jello (not red)
- Popsicles (not red)
- Chicken or beef broth

Examples of inadvisable liquids include:

- Alcohol
- Red-colored liquids
- Orange juice
- Tomato juice
- Milk or dairy products

### ***Bowel Prep for Patients with a Colostomy – Page 1***

Copyright© 2011 by the Wound, Ostomy and Continence Nurses Society. Date of Publication: 8/2008. Date of Update: 6/9/2011.  
This document was prepared by the WOCN Ostomy Committee. This document may be reproduced non-commercially for educational purposes only.



## ***Bowel Prep for Patients with a Colostomy***

### **Oral Medications**

Before the procedure, your health care provider will prescribe a medication designed to clean out your colon such as MiraLAX®, Dulcolax® or GoLYTELY®. It is important to follow the instructions for each medication carefully.

For some people, these medications cause unpleasant side effects such as nausea, bloating, and cramping. If you are unable to complete your bowel preparation, tell your health care provider prior to the procedure appointment. If your colon is not completely evacuated, you will have to repeat the procedure.

### **Output from Your Stoma**

When you take one of these medications, or a similar one, you may expect to have a large volume of liquid stool, which may overflow your regular pouch. Extra large pouches called irrigation sleeves, or high-volume output pouches are available.

If you use a two-piece system, it can be attached to your existing barrier, or it can be held in place by a belt or adhesive if you use a one-piece system. A WOC nurse or your health care provider can assist you in obtaining an irrigation sleeve or high-volume output pouch from your local ostomy supply store. If you cannot find an irrigation sleeve, sit on or next to the toilet with your pouch unclamped so you can empty directly into the toilet or stay near the bathroom so the pouch can be emptied as needed.

You may want to stay home near the toilet the day of your bowel prep, as output volume and timing may be unpredictable. You should be prepared to drain your pouch every 30-60 minutes.

### ***Bowel Prep for Patients with a Colostomy – Page 2***

Copyright© 2011 by the Wound, Ostomy and Continence Nurses Society. Date of Publication: 8/2008. Date of Update: 6/9/2011.  
This document was prepared by the WOCN Ostomy Committee. This document may be reproduced non-commercially for educational purposes only.



## ***Bowel Prep for Patients with a Colostomy***

### **Colostomy Irrigation**

Your health care provider may also request you cleanse your colon with an irrigation (an enema through your stoma). Some people with colostomies routinely regulate their bowel movements in this way.

During your first irrigation, you may feel faint, hot, or sick (vasovagal syncope). Therefore, you are recommended to do it with your health care provider or an informed person in attendance in case you need assistance.

If you have never done this procedure, here are some tips.

Equipment you will need:

- Irrigation bag
- Tubing
- Cone tip
- Irrigation sleeve
- Water soluble lubricant for the cone tip
- Clip for the bottom of the sleeve
- Belt (optional)

### ***Bowel Prep for Patients with a Colostomy – Page 3***

Copyright© 2011 by the Wound, Ostomy and Continence Nurses Society. Date of Publication: 8/2008. Date of Update: 6/9/2011.  
This document was prepared by the WOCN Ostomy Committee. This document may be reproduced non-commercially for educational purposes only.

## ***Bowel Prep for Patients with a Colostomy***

### **Procedure**

You may choose to do this in the bathroom seated on the toilet or on a chair near the toilet. If you are in the hospital, it can be done in bed with assistance from the nurse.

- Remove your pouch
- Close the clamp on the irrigation tubing. Fill irrigation bag with prescribed fluid and amount. A typical order would be 750 -1000 ml of warm tap water. You can start with 500 ml and evaluate results.
- Open the flow clamp on the tubing to allow the fluid to clear the air in the tubing. Turn the flow clamp off. To remove air bubbles from the tubing, open the flow clamp on the tubing and allow the irrigation solution to flow through to the end.
- Attach irrigation sleeve by snapping it on to your existing barrier if using a two-piece system, securing with a belt, or using its own adhesive to attach to your skin or existing pouch.
- Hang the irrigation bag so its bottom will be at the level of your shoulder when you are seated.
- Lubricate the cone end with water soluble lubricant and gently insert the tip into your stoma through the top of the irrigation sleeve. You will have to hold the cone snugly to your stoma to prevent water from leaking around the cone.
- Turn the flow clamp on and allow the irrigation solution to run into your colon by adjusting the flow clamp. The desired time frame for instillation of the fluid is five to 10 minutes. Slow or stop the instillation as needed to prevent cramping, but do not remove the cone from the stoma. Once cramping resolves, continue with the process.
- If the irrigation solution does not flow into your stoma, try changing the angle of the cone until it does flow.
- When the desired amount of fluid has been delivered or when you can't hold anymore, close the clamp, hold the cone in place for 10 to 15 seconds after the solution has instilled, then gently remove the cone. Your abdomen may feel distended or bloated.
- You may experience an immediate return of irrigant and stool with more stool being expelled over the next hour. Empty the pouch as necessary.
- The purpose of irrigation is to clean all stool from your colon.
- It may be necessary to do this procedure more than once until the return is clear. Your health care provider will advise you.

After you have completed the irrigation procedure, remove the irrigation sleeve. Cleanse around the stoma and apply your appliance.

### ***Bowel Prep for Patients with a Colostomy – Page 4***

Copyright© 2011 by the Wound, Ostomy and Continence Nurses Society. Date of Publication: 8/2008. Date of Update: 6/9/2011.  
This document was prepared by the WOCN Ostomy Committee. This document may be reproduced non-commercially for educational purposes only.



## ***Bowel Prep for Patients with a Colostomy***

### **References**

Black, P. (2000). *Holistic stoma care*. Edinburgh, Bailliere, Tindall.

Erwin-Toth, P., Doughty, D. (1992). Principles and procedures of stomal management. In Hampton, B. G., Bryant, R. A. (eds.). *Ostomies and continent diversions*. St. Louis: Mosby.

Gulfshore Endoscopy Center. (2003). *Preparation for your colonoscopy*. Naples, FL: author.

Hoff, MD, S. (2003). *Preparation for your colonoscopy*. Tulsa, OK: author.

Milne, C., Corbett, L., & Dubuc, D. (2003). *Wound, ostomy, and continence nursing secrets*. Philadelphia: Hanley & Belfus.

Tulsa Gastroenterology, Inc. (2003). *Colonoscopy prep*. Tulsa, OK: author.

WOCN. (1998). *Guidelines for management: Caring for a patient with an ostomy*. Laguna Beach, CA: Wound, Ostomy and Continence Nurses Society.