

# Discharge planning

## Patient education

Coloplast®  
**Professional**

In time, you should be able to resume the life you led before ostomy surgery. Your doctor will tell you when you can resume your everyday activities including: driving, exercise, and any heavy lifting. Here are some considerations to review:

### Basic skills checklist

The basic skills checklist is important for you to understand prior to leaving the hospital. Your healthcare provider will review this information with you. You can also refer to your ostomy educational booklet for specific details.

- |  |   |
|--|---|
| <input type="checkbox"/> Emptying your ostomy pouch          | <input type="checkbox"/> Signs of potential complications |
| <input type="checkbox"/> Changing your ostomy pouch          | <input type="checkbox"/> Monitor medications              |
| <input type="checkbox"/> Dietary/fluid management guidelines | <input type="checkbox"/> When to seek assistance          |
| <input type="checkbox"/> Odour and gas management            |   |

### Supplies / educational materials

#### Discharge supplies needed for pouch change:

- Pouching system (one or two-piece)
- Written instructions on how to apply pouching system
- Stoma measuring guide and pattern of stoma
- Scissors and marking pen
- Accessory supplies: \_\_\_\_\_
- Ostomy educational booklet
- Dietary/fluid management guidelines as needed

### How and where to order supplies

Those covered under Canadian Medicare can usually obtain supplies from any distributor/dealer. Depending on your insurance, you may need to obtain supplies from a preferred provider.

Your healthcare provider can supply you with a list of local and mail-order ostomy suppliers. You can also contact the Coloplast Consumer Care Team at **1-866-293-6349** for help in finding an ostomy dealer/distributor.

## How and where to order supplies, continued

You may need a prescription for your supplies so your insurance company can be billed appropriately.

It should include your type of stoma and pouching system, including monthly usage and any accessory products.

PRODUCT CODE	DESCRIPTION OF ITEM

## Additional information

NSWOC: \_\_\_\_\_

Physician: \_\_\_\_\_

Ostomy supplier: \_\_\_\_\_

Phone number: \_\_\_\_\_

Address: \_\_\_\_\_

## Special instructions

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The recommendations and information in this material should not be considered a substitute for personal medical advice or diagnosis.