

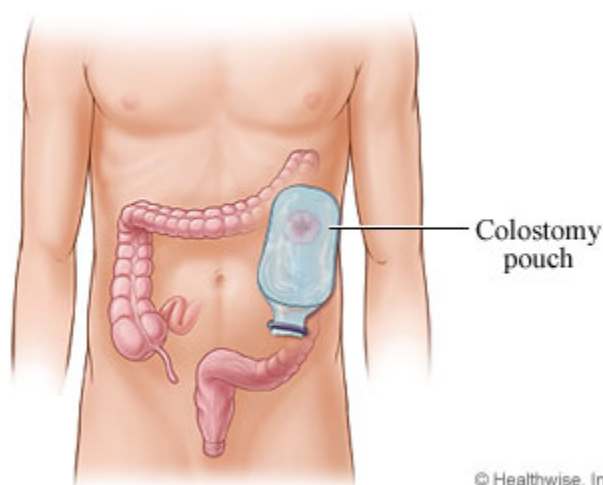


CARE INSTRUCTIONS

KAISER PERMANENTE

Colostomy: Before Your Surgery

What is a colostomy?



A colostomy is surgery that makes an opening in the skin on the belly and connects the bowel (colon) to that opening. The opening is called a stoma. A colostomy may be temporary or permanent.

A colostomy may be done either as an open surgery or as a laparoscopic surgery. Open surgery is done through a large cut (incision) in the belly. Laparoscopic surgery is done through several small incisions in the belly. The doctor inserts a thin, lighted tube (laparoscope, or scope) and special surgical tools through the incisions. The doctor is able to use the scope to see your organs and do the surgery. The type of surgery you have depends on your health needs. With either type of surgery, the incisions will leave scars on your belly that will fade with time.

After the surgery, stool will pass out of your body through the stoma instead of your anus. A plastic bag is attached over the stoma to collect stool.

You may worry about what your life will be like after a colostomy. Many people who have colostomies lead active, normal lives. Colostomy bags are odor-proof. They do not show under clothes. Other people

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will not know that you have a colostomy unless you choose to tell them. An ostomy nurse can help you learn to care for your colostomy.

Most people go home 4 to 7 days after the surgery. You will probably need about 6 weeks to fully recover.

Follow-up care is a key part of your treatment and safety. Be sure to make and go to all appointments, and call your doctor if you are having problems. It's also a good idea to know your test results and keep a list of the medicines you take.

What happens before surgery?

Having surgery can be stressful. This information will help you understand what you can expect and how to safely prepare for surgery.

Preparing for surgery

- Bring a list of questions to ask your doctors. It is important that you understand exactly what surgery is planned, the risks, benefits, and other options before your surgery.
- Tell your doctors ALL the medicines, vitamins, supplements, or herbal remedies you are taking. Keep a list of these with you, and bring this with you to every appointment. You will be told which medicine to take or to stop before your surgery.
- Some medicines, such as aspirin or ibuprofen (Advil, Motrin), and certain vitamins and herbal remedies can increase the risk of bleeding or interact with anesthesia. You may be asked to stop these a week before surgery.
- Before your surgery, you will speak with an anesthesia provider to discuss your anesthetic options, including the risks, benefits, and alternatives to each. This may be on the phone or in person.
- Your doctor may ask you to take a laxative to empty your bowels before surgery. Your doctor also may ask you to take an antibiotic before surgery. It is important to follow these instructions exactly.

Taking care of yourself before surgery

- Build healthy habits into your life. Changes are best made several weeks before surgery, since your body may react to sudden changes in your habits.

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- Stay as active as you can.
- Eat a healthy diet.
- Cut back or quit alcohol and tobacco.
- If you have an advance directive—which may include a living will and a durable power of attorney for health care—let your doctor know. If you do not have one, you may want to prepare one so your doctor and loved ones know your health care wishes. Doctors recommend that everyone prepare these papers before surgery, regardless of the type of surgery or condition.

What happens on the day of surgery?

- Follow the instructions exactly about when to stop eating and drinking, or your surgery may be canceled. If your doctor has instructed you to take your medicines on the day of surgery, please do so using only a sip of water.
- Take a bath or shower before you come in for your surgery. Do not apply lotions, perfumes, deodorants, or nail polish.
- Do NOT shave the surgical site yourself.
- Remove all jewelry, piercings, and contact lenses.
- Leave your valuables at home.

At the hospital or surgery center

- Bring a picture ID.
- Before surgery you will be asked to repeat your full name, what surgery you are having, and what part of your body is being operated on. The area for surgery may be marked.
- A small tube (IV) will be placed in a vein, to give you fluids and medicine to help you relax. Because of the combination of medicines given to keep you comfortable, you may not remember much about the operating room.
- You will be kept comfortable and safe by your anesthesia provider. The anesthesia may range from making you fully asleep, to simply numbing the area being worked on. This will depend on the procedure you are having, as well as a discussion between your doctor, the anesthesia provider, and you.
- The surgery will take about 2 to 4 hours.

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- As you wake up in the recovery room, the nurse will check to be sure you are stable and comfortable. It is important for you to tell your doctor and nurse how you feel and ask questions about any concerns you may have.
- You will have a colostomy bag attached over your stoma on your belly. Stool (feces, bowel movement) will pass out of your body through the stoma and into a plastic colostomy bag. Colostomy stool is softer and more liquid than normal stool. How soft or firm the stool is depends on which part of the intestine connects to the stoma.
- After surgery, the bowel usually "rests" for a few days before it starts working again. You may have a thin plastic tube in your nose that goes into your stomach. This tube drains stomach juices and prevents nausea. The drainage usually looks green, brown, or even black with flecks of blood. This tube is usually removed after a few days. After the tube is removed, you can start drinking and eating again.
- An ostomy nurse or other health care professional will teach you how to care for your skin and stoma.

Going home

- Be sure you have someone to drive you home.
- For your safety, you should not drive until you are no longer taking pain medicines and you can move and react easily.
- Arrange for extra help at home after surgery, especially if you live alone or provide care for another person.
- You will be given more specific instructions about recovering from your surgery, including activity and when you may return to work.

When should you call your doctor?

- You have questions or concerns.
- You do not understand how to prepare for your surgery.
- You become ill before surgery (such as fever, cold or flu, chest pain, or shortness of breath).
- You need to reschedule or have changed your mind about having the surgery.

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Where can you learn more?

Go to <http://www.kp.org>

Enter Q784 in the search box to learn more about **"Colostomy: Before Your Surgery"**.

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