



Prescribing Guideline for Stoma Care in Adults across South Tyneside & Sunderland

Authors | Medicines Optimisation Team, Sunderland & South

Tyneside (NENC ICB)

Stoma Care Specialist Nurses, South Tyneside and

Sunderland NHS Foundation Trust

Community Stoma Care Specialist Nurse, Coloplast

Nursing Service

Approved | Sunderland Prescribing Group

by South Tyneside & Sunderland FT Colorectal Services

Version 1

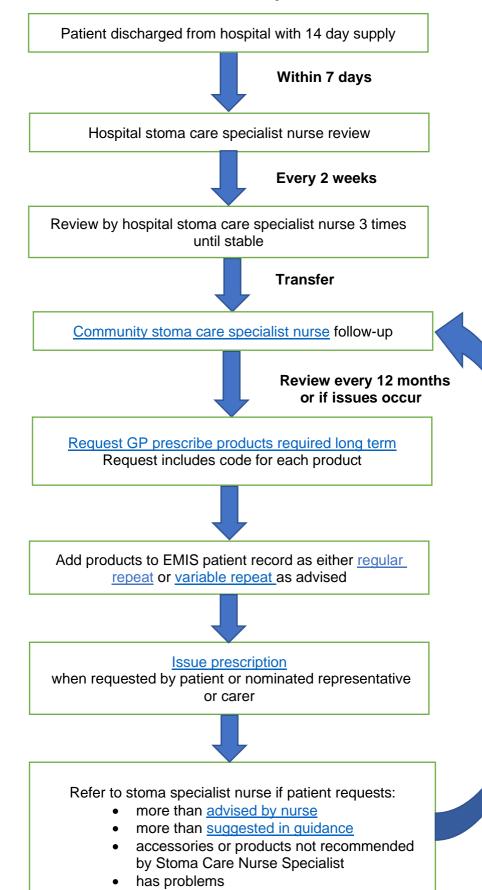
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Review

Date September 2025

This guideline is intended for use in primary care and only refers to the use of stoma products in adults

Adult Stoma Care Pathway South Tyneside and Sunderland Summary



NEW PATIENTS

REVIEW

- New stoma patients will be discharged from hospital with a minimum of 14-day supply of stoma products.
- Patients are reviewed by the hospital Stoma Care Specialist Nurses within 7 days post-discharge, then on a fortnightly basis for three visits (dependent on patient needs) to manage the patient's product requirements until they become stable.
- Following this period, patients will then be transferred to the Community Stoma Care Specialist Nurse for ongoing follow up and support.
- GP practices will only be notified of the prescription items the patient requires once the Stoma Care Specialist Nurse is satisfied that the product will be prescribed longer term.

SUPPLY

- All new patients are given the choice of having their stoma prescriptions supplied by a Dispensing Appliance Contractor (DAC) or local community pharmacy. The patient has the right to choose and to change whoever dispenses their products at any time.
- Stoma bags (pouches) and flanges need to be individually tailored and hence are not included in a formulary. For these prescriptions, GP practices should check the quantities being requested are reasonable as per Appendix 1.
- Stoma accessories and supporting products should only be prescribed after recommendation from a Stoma Care Nurse Specialist as per Appendix 2.
- Requests for prescriptions should come from the patient, their carer, or their nominated representative.
- Prescriptions should only be ordered by a DAC or a pharmacy contractor in exceptional circumstances.
- All recommendations for stoma products will contain the code of the product to be used, to enable prescribers to select the appropriate item from the prescribing system.
- All patients are advised to allow two weeks for their prescription to be generated and dispensed by either a DAC or local community pharmacy to allow for raising a prescription and dispensing to occur.

EXISITING PATIENTS

- It is recommended that patients with a stoma have a review every 12 months, or sooner if there are problems.
- This review should be completed by the STSFT Stoma Care Nurse Specialists or the Sunderland and South Tyneside Community Stoma Care Nurse.

Please see Appendix 3 for an example discharge/review letter which will be sent to practices to advise on prescribing and which items should be added to the patients' *regular repeat*, *variable repeat* or *discontinued*.

Please see Appendix 4 for a guide to adding items to 'variable repeat'.

COMMUNITY STOMA NURSING CLINICS & CONTACT DETAILS

Monday AM & PM weekly - Millfield Medical Group, SR4 7AF

Tuesday PM fortnightly - Washington Primary Care Centre, NE38 7QZ

Tuesday PM fortnightly - Cleadon Park Primary Care Centre, NE34 8PS

Appointments can be made via phone 07391866343 or via email amanda.logan1@nhs.net

Location	С	HS	Primary Care	STSFT	
Speciality	Colostomy/ Ileostomy	Urostomy/ Nephrostomy	All patients	All patients	
Name	Maralyn Boyd Susan Rodda Rosemary Jobling Tamsin Collins Kate Mitton Melissa Campbell	TBC	Amanda Logan	Jane Barnes Teresa Liddle	
Contact	0191 5656256 (ext.47221) stsft.sunderland- colorectal-nurse- specialists@nhs.net		07391866343 amanda.logan1@nhs.net	0191 2032908 teresa.liddle@nhs.net jane.barnes7@nhs.net	

PRESCRIBING

Prescribing of stoma appliances (bags/pouches)

The Stoma Care Nurse Specialists will provide each patient with a choice of appliances suitable for their individual needs:

- One-piece systems consist of a pouch and a seal (adhesive flange) as one item which is placed around the stoma and attached directly to the skin and as such are easy to apply and are not bulky on the patient's abdomen. This system comes either with a pre-cut opening or an opening that can be cut to fit the stoma.
- Two-piece systems have two parts, a base plate (flange) which attaches to the skin onto which the patient can clip a separate pouch. The base plate is usually changed every 2-3 days, whereas the pouch is changed on average about 2 or 3 times a day. This system comes either with a pre-cut opening or an opening that can be cut to fit the stoma. This system has the benefit of protecting the skin because the base plate is changed less often than the 'one piece' systems.
- Closed appliances are used for colostomy patients. These bags cannot be re-used and are discarded once filled.
- Drainable appliances are used for ileostomy and urostomy patients and are either designed with Velcro or a clip fastening or "non-return" valve and tap for semi-liquid or liquid effluent respectively. These bags can be emptied as required and left in situ for up to 48 hrs dependent on output.

Flange Cutting

- All pre-cut stoma products are circular. Some stomas are irregularly shaped and the product needs to be cut to an individual template.
- DAC's offer a bespoke cutting service. This is often a reason why an individual may choose their service.
- Not all community pharmacies offer a cutting service. They should be contacted on an individual basis to confirm.

Bags & Wipes

• DACs and community pharmacies are required to supply bags and wipes when dispensing stoma appliances and are reimbursed for this, therefore bags and wipes should not be prescribed.

Accessories / Supporting Products

- Stoma accessories should not be routinely required. Stoma patients should use a plain and simple procedure when changing their bag, thus avoiding the need for expensive accessories.
- Only accessories recommended by Stoma Care Nurse Specialist should be prescribed.
- High use of stoma accessories may indicate that the patient is struggling to manage their stoma and would benefit from a review with a Stoma Care Nurse Specialist.
- Most accessories are only required for short periods of time to combat a specific problem and once resolved, the
 accessory is no longer needed.
- Please see Appendix 2 for general guidance on the prescribing of stoma accessories to promote clinically appropriate use and to reduce waste and over-ordering.

Dispensing Contractors and Pharmacies

- A full list of dispensing appliance contractors can be found at http://www.nhs.uk/Service-search/pharmacies/appliancepharmacies
- A full list of pharmacies can be found at https://www.nhs.uk/service-search/pharmacy/find-a-pharmacy

Requests for prescriptions from appliance contractors without recommendation from a Specialist Stoma Care Nurse **should not** be accepted.

Patients who exceed quantities outlined in Appendix 1 should be referred back to the specialist who last reviewed them.

Appendix 1 – Stoma Types & Appliances

Type of stoma	Type of appliance	Directions	Usual quantity per month*	Notes
Colostomy Large bowel (colon) brought to surface	One-piece closed appliance	Changed 1-3 times per day	30 – 90 pouches	Not reusable
Usually formed stool	Two-piece closed appliance	Flange – changed every 2-3 days	10 – 15 flanges	The flange is not changed every bag change
		Pouch – changed 1-3 times a day	30 – 90 pouches	Not reusable
Ileostomy Small bowl (ileum) brought to surface Semi-formed or loose output	One-piece drainable appliance	Drained as required. Changed every 1-3 days	15 – 30 pouches	Drainable Usage depends on output
Average volume 500-800mls	Two-piece drainable appliance	Flange – changed every 2-3 days	10 – 15 flanges	The flange is not changed every bag change
		Pouch – Drained as required. Changed every 1-3 days	15 – 30 pouches	Drainable Usage depends on output
Urostomy Ileal conduit Small bowel stoma for passage of urine	One-piece drainable appliance	Drained as required. Changed every 1-3 days	15 – 30 pouches	Drainable Usage depends on output
Require additional night bags	Two-piece drainable appliance	Flange – changed every 2-3 days	10 – 15 flanges	The flange is not changed every bag change
		Pouch – Drained as required. Changed every 1-3 days	15 – 30 pouches	Drainable. Usage depends on output
	Night drainage bags	Use a new bag every 7 days	4 bags	Drainable Rinse as directed by stoma nurse

^{*}The quantities mentioned above are guidelines only. Some patients may require a higher or lower quantity than stated. If there are any prescribing concerns please refer to the patient's Stoma Care Specialist Nurse for detail or further assessment

<u>Appendix 2 – Stoma Accessories & Supporting Products</u> Table adapted from PrescQIPP

Only accessories recommended by Stoma Care Nurse Specialist should be prescribed.

High use of stoma accessories may indicate that the patient is struggling to manage their stoma and would benefit from a review.

Accessory	Usual Quantity/month	Directions	Notes
		Used every time bag	Sprays should be used first line as they are more cost-effective than wipes.
Adhesive	Up to 2 sprays per month		'Non-sting' silicone-based products are recommended.
Remover Spray	ap to a spraye per mem.	is changed	Wipes may be useful for individuals with reduced or limited dexterity or where problems of excess adhesive residue exist.
Adhesive	Not recommended for		Not recommended for routine prescribing
sprays/solutions	routine prescribing		Need for these are superseded by availability of newer bags, therefore patients still using these
Bag covers	gramma processing		should be referred for a review
Barrier Creams	Not recommended for		Not recommended for routine prescribing
Darrier Greams	routine prescribing		Barrier creams are NOT routinely recommended as they reduce adhesiveness of bags/flanges
Belts	3-6 per year	1 to wear, 1 to wash, 1 spare	Specialist initiation only One-off prescription – DO NOT ADD TO REPEAT
			Belts are adjustable and are used to secure stoma products to skin in patients with problematic
(bag support)			stoma's
	3 per year		Specialist initiation only and MUST be measured.
D. II.		1 to wear, 1 to wash, 1 spare	One-off prescription – DO NOT ADD TO REPEAT
Belts			Belts are used to prevent parastomal hernias or support existing hernias.
(hernia support)			Patients with manual jobs/hernia require a heavy-duty belt.
			Use a lightweight belt for sports.
			Not recommended for routine prescribing
B	Not recommended for routine prescribing		If correctly fitted, no odour should be apparent except when bag is emptied or changed. Household air freshener is sufficient in most cases.
Deodorants			If odour present at times other than changing or emptying – refer for review.
			Deodorants should only be prescribed where the use of an odour neutraliser is considered essential to the patient's acceptance of the stoma.
			Not recommended for routine prescribing. Specialist initiation only.
Discharge	Quantity directed by specialist on initiation	Used each time bag	Output should be managed with medication to prevent dehydration and kidney injury.
Solidifying Agents		is emptied	If the patient has been reviewed and is on medication but output is still loose then this product can be considered. 1-2 sachets/strips to be used each time appliance is emptied

	1	T		
Filters and	Not recommended for		Not recommended for routine prescribing	
bridges	routine prescribing		Need for these is superseded by availability of newer bags, therefore patients still using these should be referred for review.	
		Changed every time	Specialist initiation only	
Flange extenders	Up to 3 packs a month	bag is changed.	Sometimes required for extra support and adhesion. Use may vary and may not be needed	
•	(depending on pack size)	May require 2-3 for each bag change	every day.	
Gauze and wet	Not recommended for		Not recommended for routine prescribing	
wipes	routine prescribing		These should not be prescribed. Dry wipes are supplied by DACs/pharmacies	
	Not recommended for		Not recommended for routine prescribing	
Lubricating	routine prescribing	One squirt in stoma	Only recommended if patients have difficulty with 'pancaking', which is often a short-term issue.	
deodorant gels		bag before use.	Bottles are more cost effective than sachets.	
	If required 1-2 bottles per month.	3	A few drops of baby oil or olive oil can be used as an alternative. A filter cover can also be helpful with pancaking and advise patient to increase fluid intake and assess diet.	
Pressure	Not recommended for		Not recommended for routine prescribing	
plates/shield	routine prescribing		Need for these is superseded by availability of newer bags, therefore patients still using these	
plates/silicia	roduite prescribing		should be referred for review.	
	Not recommended for routine prescribing Used for protection of	Used each time stoma appliance change	Not recommended for routine prescribing	
Powders			Specialist initiation only – for ACUTE prescription only	
TOWACIS			Quantity and use dictated by initiating specialist.	
	excoriated/bleeding skin	3.	Short term use only.	
	lleostomy and urostomy	Change every bag	Specialist initiation only	
	patients 1 pack per month		Create a leak resistant seal if there are dips and creases in skin. Protects skin from irritation.	
Protective Rings			The patient should be reviewed to ensure the ring is the correct size before prescribing.	
J	Colostomy patients 1-3	, ,		
	boxes		If colostomy patients are requiring three boxes then it may be more cost effective to consider a convex pouch – to be assessed by the specialist nurse.	
			Not recommended for routine prescribing	
	Not recommended for		Specialist initiation only – for ACUTE prescription only	
Protective Wafers	routine prescribing		Quantity and use dictated by initiating specialist.	
	l coming processing		Short term use only.	
	1 tube per month		Specialist initiation only	
Skin Fillers	Not usually for long term	Used each time bag changed.	Fills dips or creases in skin around the stoma. Alcohol containing products may sting.	
(pastes)	use.			
		Apply when bag is	Specialist initiation only – for acute prescription only	
Skin protective	Follow directions of stoma		May be used on skin that is broken, sore or weepy to promote healing.	
wipes and sprays	nurse	changed as directed	If used for over 3 months – refer.	
,			Barrier wipes or sprays should not routinely be needed for colostomy patients with healthy functioning stoma.	
			Tarrottorining Storman	

			Specialist initiation only
Sports shield	1-2 per year	Use as directed	One-off prescription only, do not add to repeat.
			For use during sporting activities
			Specialist initiation only
Stoma caps	15 to 30 per month depending on usage	Use as directed	A stoma cap is a small mini pouch used for discretion when a standard pouch is deemed unnecessary, for example if the patient has established a reliable bowel routine or uses irrigation.
			They can also be used for short-time wear, e.g. while swimming, playing sports, intimate activity etc. They are designed to cover a stoma or mucous fistula but have little or no actual capacity. They are not suitable for ileostomy patients due the high activity of this type of stoma
Cummont	Not recommended for		Not recommended for routine prescribing
Support underwear	Not recommended for routine prescribing		Commercially available support underwear is available and should be purchased by the patient.



Clinical Nurse Division Coloplast Limited Peterborough Business Park Peterborough Cambs PE2 6FX

Date: - 23/06/2023

Test GP Email Practice
Dr TEST DOCTOR
PLEASE DO NOT SEND
COLOPLAST TEST LTD,PETERBOROUGH
TESTISHIRE

PE2 6FX

Dear Dr DOCTOR,

Re: John Pelan Hospital No:- test1 D.O.B:- 01/10/1970
Colopiast Ltd Nene Hall Peretborough Business Park Test Estate Area Peterborough PE2 6FX

The above patient has been seen by the Stoma Nurse and the products below have been recommended to be added for REGULAR/REPEAT PRESCRIPTION.

Company	Product Details	Code Number	Approx Qty P/Mth	Pack Size
Coloplast Ltd	SenSura® Mio 1-piece closed with BodyFit TechnologyTM and full-circle filter Neutral Grey with Inspection Window Starter hole 15-45mm Maxi	10681	2	30

The below products have been recommended as short term use and therefore should only be added to VARIABLE LIST.

Company	Product Details	Code Number	Approx Qty P/Mth	Pack Size

The patient has been advised these products will be issued for a **TIME FRAME** and further review has been arranged to assess these products further use.

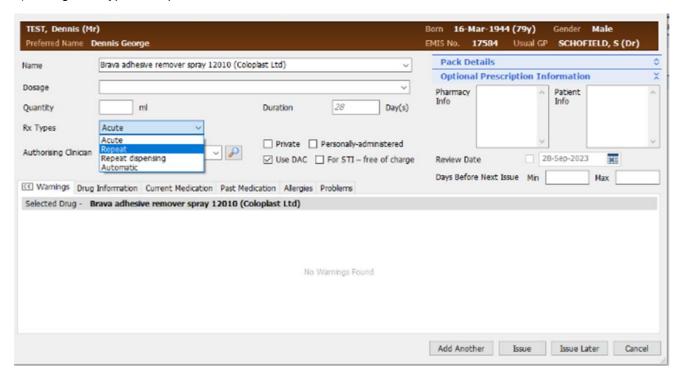
CLINIC DATE AND TIME

The products below are to be discontinued:

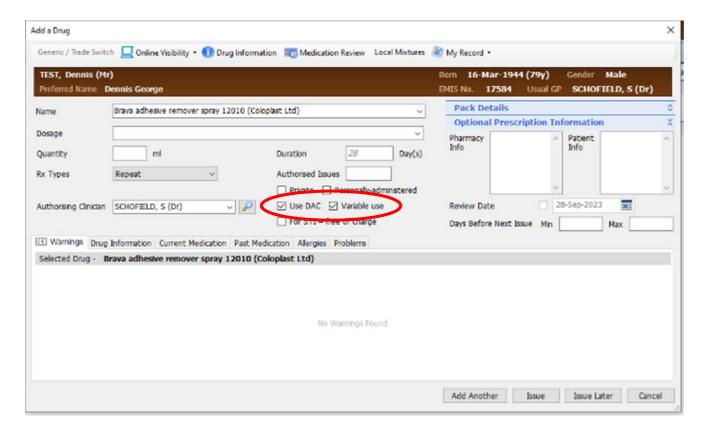
Company	Product Details	I	Approx Qty P/Mth	Pack Size

Appendix 4 - How to add items to variable repeat on EMIS

1) Change Rx Type to 'Repeat'



2) Tick 'variable use' and tick 'DAC' if the patient is using a direct appliance contractor for stoma products



3) Once ticked either click issue or issue later