Ileostomy Care

An ileostomy is a surgical procedure that allows intestinal contents to pass from the ileum through a stoma for excretion. Since intestinal contents of the ileum have not passed through the colon, output from an ileostomy is liquid and drains continuously. Proper education regarding ileostomy care is critical in maintaining hydration, minimizing odor, and preventing infection. Antibiotics are administered within 1 hour of incision of ileostomy surgery to minimize the risk of surgical site infections. Since the contents of the ileum is liquid, an ostomy pouch must be worn at all times because of constant drainage. Monitoring the stoma site for skin breakdown and encouraging increased fluid intake are critical for the patient with a new ileostomy. A low fiber diet is prescribed temporarily to rest the intestines.



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Antibiotics
ABX-guy
Based on evidenced based practice and the Joint Commission's National Patient Safety Goals, parenteral antibiotics are administered within 1 hour of ileostomy surgery to minimize the risk of infection.

Monitor Skin Breakdown
Monitor with Skin Breakdown
Stool originating from the small intestine contains enzymes and bile salts that irritate the skin. Since altered skin integrity related to intestinal content seepage may occur when the stoma is flat, creating a stoma protrusion of at least 1 cm helps make ileostomy care easier. While switching ostomy pouches, the skin should be cleansed and a solid skin barrier should be applied.

Drains Continuously
Draining Continuously
Intestinal content drainage is constant and cannot be regulated. Since an ileostomy drains continuously, an ostomy pouch must be worn at all times. Unless leakage occurs, the drainable pouch is changed every 4-7 days and emptied when 1/3-1/2 full. Because of the continuous drainage, irrigations are rarely done.

Fluid and Electrolyte Imbalance
Fluid and Electric-light Unbalanced
Drainage from the stoma affects the patient's fluid and electrolyte balance. Initially, the colons of patients with new ileostomies are unable to absorb fluids and experience periods of high-volume output. The electrolytes potassium and sodium should be closely monitored. Encourage the patient with an ostomy to drink at least 3L of fluid a day to prevent dehydration. Promoting adequate fluid intake is particularly important during hot weather, excessive sweating, and episodes of diarrhea. Teach the patient about the signs and symptoms of dehydration including poor skin turgor and dry mucous membranes.

Low Fiber Diet
Down-arrow Fiber-box
Immediately after an ileostomy, the patient is ordered a low-fiber diet to allow the intestines to heal and minimize obstruction. As the body adjusts to the ileostomy, fiber is gradually reintroduced into the patient's diet with the goal of returning to a normal, pre-surgical diet. Instruct the patient to chew foods such as popcorn and unpeeled vegetables thoroughly before swallowing. Teach client to omit gas forming foods, such as cabbage, beans, asparagus, and foods that cause odor and that do not digest well (nuts and corn).

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