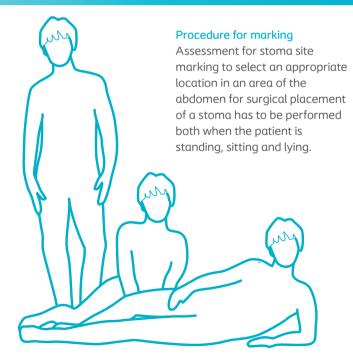
Stoma site marking





Important to remember:

Challenges and considerations

An optimal stoma location can help reduce fitting challenges and other problems for the patient. Challenges may lead to skin problems and reduced quality of life. Therefore, it is important that the location of the stoma is adapted to the patient, not vice versa – a good life with a stoma starts with a proper stoma marking.

The rectus abdominis muscle

The stoma site should if possible be located within the rectus abdominis muscle to provide best possible support to the stoma, eventually prevent formation of a peristomal bulge and other complications. Ask the patient to tighten his pelvic floor muscles when lying on back, for instance by having the patient raise his head up off the mattress. In this way, you can feel and identify the muscle on both sides of the umbilicus.

Anatomic conditions:

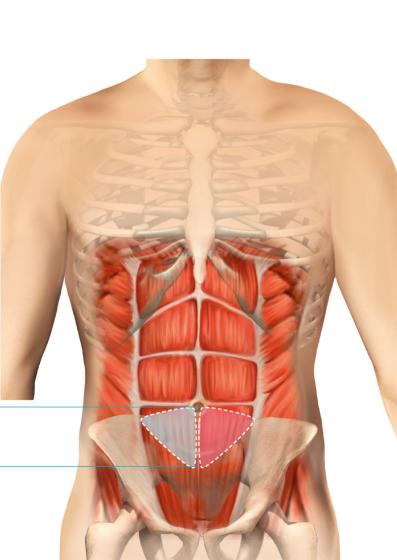
- Scars from previous operations
- Hip bone
- · Pubic bone
- Groin
- Umbilicus
- Waistline
- Rib cage



Most common area for marking of an ileostomy or a urostomy



Most common area for marking of a colostomy





1. Physical condition

Body profile, current weight and recent weight changes, manual dexterity and eyesight. The site should be placed in an area that the patient can easily see and reach.



2. Handicaps and other conditions

Be observant of wheelchair use, prostheses, bony prominences, skin folds, scars from previous operations, umbilicus, belt line, and sensitive skin areas.



3. Social activities

Consider occupation, special work positions, practicing of sports, hobbies, usual clothing, cultural and religious aspects.



4. Procedure for marking a stoma site

If possible, assess the stoma marking site by having the patient assume standing, sitting as well as lying positions.

Ostomy Care / Continence Care / Wound & Skin Care / Urology Care

