

Daryeelka Ileostomykaaga (Qalliinka Saxaro ka keenta mindhicir yaraha)

Care of Your Ileostomy



**THE OHIO STATE
UNIVERSITY**
WEXNER MEDICAL CENTER

The James



THE OHIO STATE UNIVERSITY
COMPREHENSIVE CANCER CENTER



Tusmada

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Buugani waxaa loogu talagalay ujeedooyin macluumaad oo keliya. Kala hadal dhakhtarkaaga haddii aad wax su'aalo ah ka qabto daryeelkaaga.

This book is for information purposes only. Talk to your healthcare provider if you have any questions about your care.

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La Noolaanshaha Ostomykaaga/ Daloolkaaga Cusub

Life With Your New Ostomy

People of all ages have had ostomy surgery for many different reasons and go on to live active and healthy lives. It does take time to become comfortable with your new ostomy.

Use this guide to help you care for, use, and live with your ostomy. Talk to your doctor or ostomy nurse about any concerns or things you do not understand. We are here to support you.

If you are working, you should be able to keep the same job. The only types of work that you may not be able to do are those that involve heavy lifting. Talk with your doctor to learn about any work limits you may need to think about.

See your doctor, counselor, or therapist for help to cope with any problems you have with your new ostomy or with changes to your self-image.

Dadka da' kasta leh ayaa lagu sameeyay qalliinka kaadi/saxaro- ururinta sababo badan oo kala duwan awgeed waxayna sii wadaan inay ku noolaadaan nolol firfircoon oo caafimaad qabta. Waxay qaadanaysaa wakhti inaad ku raaxaysato qalliinkaaga kaadi/saxaro-mareenka cusub.

Isticmaal tilmaan-bixiyahan si uu kaaga caawiyo inaad daryeesho, isticmaasho, oo aad ula noolaato qalliinkaaga. Kala hadal dhakhtarkaaga ama kalkaalisada ostomy wixii welwel ah ama waxyaabo aadan fahmin. Waxaan halkaan u joognaa inaan ku taageerno.

Haddii aad shaqaynayso, waa in aad sii haysan kartaa isla shaqadaas. Noocyada kaliya ee shaqada ee laga yaabo inaad awoodin inaad qabato waa kuwa ku lug leh qaadista waxyaabaha culus. Kala hadal dhakhtarkaaga si aad wax uga ogaato xad kasta oo shaqo oo aad u baahan karto inaad ka fikirto.

La tasho dhakhtarkaaga, lataliyahaaga, ama daaweeyahaaga wixii caawinaad ah si aad ula qabsato dhibaato kasta oo aad kala kulanto qalliinkaaga cusub ama isbeddelada ku yimaadda sawirkaaga-nafeed.

Contacts

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Xiriirada

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Si aad ballan ula yeelatid kalkaalisada ostomy, wac 614-293-6529

Hawlaha maalinlaha ah iyo Joogitaanka guriga

Daily Activities and Being at Home

- You can wear the same clothing styles as you did before.
- You can do the same activities as you did before.
- You can bathe and swim with a pouch in place.
- You can empty your pouch in private, using the rest room at home or at public places. Always empty the pouch into the toilet. Do not empty urine or stool into the sink.
- You can travel with your pouch.
- People with ostomies can become pregnant. But talk with your doctor about how much time you'll need after surgery before you become pregnant.
- Waxaad xiran kartaa qaabab la mid ah dharka aad hore u xiran jirtay.
- Waxaad samayn kartaa hawlo la mid ah sidii aad hore u samayn jiray.
- Waxaad qubaysan kartaa oo aad dabaalan kartaa adigoo bacda xiran.
- Waxaad faaruqin kartaa bacdaada si gaar ah, adigoo isticmaalaya qolka musqusha ee guriga ama goobaha dadweynaha. Had iyo jeer ku faaruqi bacda musqusha. Ha ku faaruqin kaadida ama saxarada waji-dhaqa.
- Waxaad la safri kartaa bacdaada.
- Dadka qaba ostomies way uur yeelan karaan. Laakin kala hadal dhakhtarkaaga inta jeer ee aad u baahan doonto qaliinka ka hor intaadan uur qaadin.

Learning to care for an ostomy takes time and patience. It is common to have some problems at times. A home health nurse can provide support to help you.

Barashada daryeelka ostomy waxay qaadataa wakhti iyo dulqaad. Waa wax caadi ah in mararka qaar lala kulmo dhibaatooyin qaar ah. Kalkaalisada caafimaadka guriga ayaa ku siin karta taageero si ay kuu caawiso.

Ileostomy: Habraaca

Ileostomy: Procedure

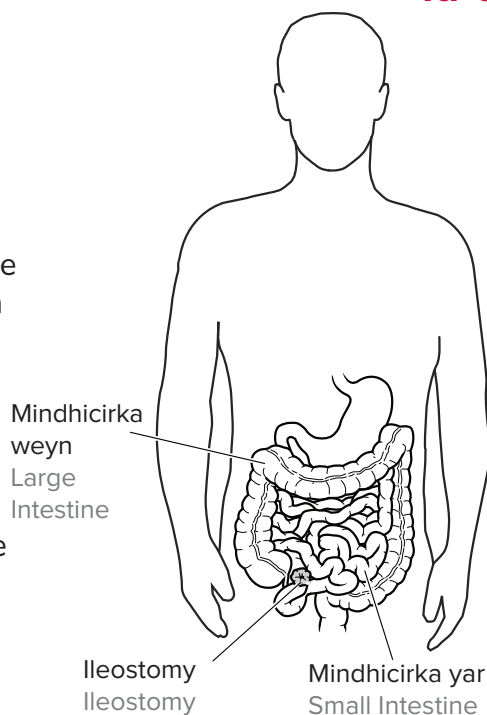
Key things to know

- A surgically created opening on the outside of the body (stoma) that allows stool to drain into a collection device (pouch).
- For an ileostomy, the stoma is made from the small intestine (the ileum).

When a part of your intestine doesn't work as it should, a doctor can do surgery to make an opening in your belly and bring a part of your intestine to the surface of your skin. This opening is called an ostomy.

With an ostomy, waste no longer leaves your body from your anus. It leaves your body through the part of your intestine at the ostomy opening. This part of the intestine is called the stoma.

Your stoma does not have a sphincter, so you are not able to control when waste or gas leaves your body. Your waste will now automatically go from the stoma into an attached plastic bag (pouch). The pouch will block the smell of the waste and it cannot be seen when you are wearing clothes.



Waxyaabaha muhiimka ah in la ogaado

- Qalliin lagu sameeyay bannaanka jidhka (stoma/dalool) kaas oo u oggolaanaya kaadidu inay ku shubto aaladda ururinta (bac).
- Ilostomy, stoma ayaa laga sameeyaa mindhicirka yar (ileum).

Marka qayb ka mid ah mindhicirkaagu u shaqayn waayo sidii la rabay, dhakhtarku wuxuu samayn karaa qaliin si uu calooshaada uga furo oo uu qayb ka mid ah mindhicirkaagu u keeno maqaarkaaga korkiisa. Daloolkan waxa loo yaqaan ostomy.

Ostomy-ga/qalliinka, wasakhdu kama sii baxayso jidhkaaga futada. Waxay jidhkaaga uga baxdaa qaybta mindhicirkaaga ee daloolka qalliinka. Qaybtan xiidmaha ka mid ah waxaa loo yaqaan stoma.

Daloolkaaga ma laha celiye, markaa ma awoodid inaad xakamayso marka saxaro ama dhuuso ka baxayso jidhkaaga. Qashinkaagu hadda wuxuu si toos ah uga sii baxayaa daloolkaaga oo geli doonaa bac ku dheggan (kiish). Kiishashka ayaa xannibi doona urta wasaqda lamana arki karo marka aad dhar xidhantahay.

Ileostomy: Daryeel

Ileostomy: Care

Key things to know

- Your ostomy pouch should be changed every 3 to 5 days or about 2 to 3 times a week. Create a travel kit with the things you need to change a pouch away from home.
- The pouch should be changed before it leaks. If you have any itching or burning around the stoma, there could be a leak starting and the pouch should be changed.
- It is important to look at the stoma and the surrounding skin each time the pouch is changed.
- The stoma should be bright red or pink. The skin around the stoma should look like your other skin. It should not be irritated or red.

You can learn to take care of your ostomy

Good care can make living with a stoma easier. It can help keep a good seal between the skin and the pouch. This can prevent your skin from getting irritated.

Waxyaabaha muhiimka ah in la ogaado

- Kiishkaaga duleelkaaga waa in la beddelaa 3 ilaa 5 maalmood kasta ama qiyaastii 2 ilaa 3 jeer toddobaadkii. Samee xirmo safar oo leh waxyaabaha aad u baahan tahay si aad ugu bedesho kiishka meel ka baxsan guriga.
- Kiishka waa in la beddelaa ka hor inta aanu daadan. Haddii aad leedahay cuncun ama gubasho agagaarka stoma/duleelka, waxaa laga yaabaa iney bilaabanto daadasho waana in la beddelaa kiishka.
- Waa muhiim in la eego caloosha iyo maqaarka ku hareeraysan mar kasta oo kiishka la beddelo.
- Daloolku waa inuu noqdaa casaan dhalaalaya ama casaan khafiif ah. Maqaarka ku wareegsan stoma waa inuu u ekaado maqaarkaaga kale. Waa in aanay noqon mid cuncuna ama gudguduudan.

Waxaad baran kartaa inaad daryeesho qalliinkaaga/duleelkaaga

Daryeelka wanaagsan wuxuu fududayn karaa la noolaanshaha stoma. Waxay kaa caawin kartaa in shaabad fiican ay ku hayso maqaarka iyo kiishka dhexdooda. Tani waxay ka ilaalin kartaa maqaarkaaga inuu cuncuno.

Follow-up care is a key part of your treatment and safety. Be sure to 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.

When should you call for help?

- **Call your doctor now or seek immediate medical care if:**
 - You are vomiting
 - You have new or worse belly pain
 - You have a fever
 - You cannot pass stools or gas
 - You have a large amount of ongoing bleeding into the pouch (more than 4 tablespoons)
- **Watch closely for changes in your health, and be sure to contact your doctor if:**
 - Your stoma turns pale or changes color
 - Your stoma swells or bleeds (a small amount of bleeding after cleansing is normal)
 - You have a notable increase or decrease in output

Daryeelka la-socodku waa qayb muhiim ah oo ka mid ah daawayntaada iyo bad-qabkaaga. U hubso inaad tagto dhammaan ballamaha, oo wac dhakhtarkaaga haddii aad dhibaato ku qabtid. Sidoo kale waa fikrad wanaagsan inaad ogaato natiijada baaritaankaaga oo aad hayso liiska daawooyinka aad qaadato.

Goorma ayay tahay inaad wacdo gargaar?

- **Hadda wac dhakhtarkaaga ama raadso daryeel caafimaad oo degdeg ah haddii:**
 - Aad matagayso
 - Aad qabtid calool xanuun cusub ama sii xumaanaya
 - Ay qandho ku hayso
 - Aadan soo dhaafin karin saxaro ama dhuus
 - Aad leedahay qadar badan oo dhiigbax ah oo ka socda kiishka (in ka badan 4 qaado)
- **Si dhow ula soco isbeddellada caafimaadkaaga, oo hubi inaad la xiriirto dhakhtarkaaga haddii:**
 - Calooshaadu/duleelka isu bedelo caddaan ama midabkiisa bedelmo
 - Calooshaadu ay bararto ama dhiigbaxdo (dhiigbax yar kadib nadiifinta waa caadi)
 - Aad leedahay koror muuqda ama hoos u dhac ku yimaada wax soo saarka

Diyaarinta

Preparing

Supplies:

Gather the supplies before starting. You will need the following supplies to change a pouch:

- Ostomy pouch
- Scissors
- Measuring guide
- Pen or marker
- Disposable paper towels, shop towels, or wash clothes.
- Tap water or soap (Dial or Ivory) and water
- Plastic bag

Accessories as needed:

- Adhesive remover spray or wipes
- Stoma powder
- Moldable barrier ring
- Skin barrier film spray or wipes

Find a clear place with room to lay out the supplies and change your pouch.

Alaabta:

Soo ururi alaabta ka hor inta aanad bilaabin. Waxaad u baahan doontaa sahayda soo socota si aad u beddesho kiishka:

- Kiishka Ostomy
- maqas
- Hagaha cabbiraadda
- Qalin ama calaamadiye
- Shukumaanada waraaqaha la tuuri karo, shukumaanada dukaanka, ama dharka lagu dhaqo.
- Biyaha tuubada ama saabuunta (Dial ama Ivory) iyo biyo
- Bac balaastiik ah

Agabka sida loogu baahdo:

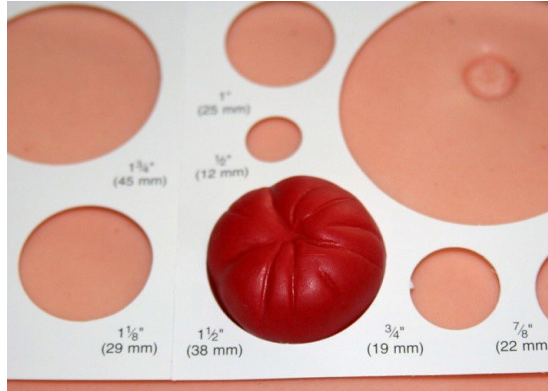
- Buufinta ka saarta xabagta ama masaxaha
- Budada caloosha
- Giraanta xannibaadda la laabi karo
- Buufinta ama xariga tirtiridda xannibaadda maqaarka

Soo hel meel cad oo qol leh si aad u dejiso alaabta oo aad u beddesho kiishkaaga.



Measure:

- Measure your stoma with the guide and write down the size. Your stoma will get smaller 4 to 6 weeks after surgery.
- Your stoma may have a rod in place when you go home. Your doctor or ostomy nurse will remove the rod.

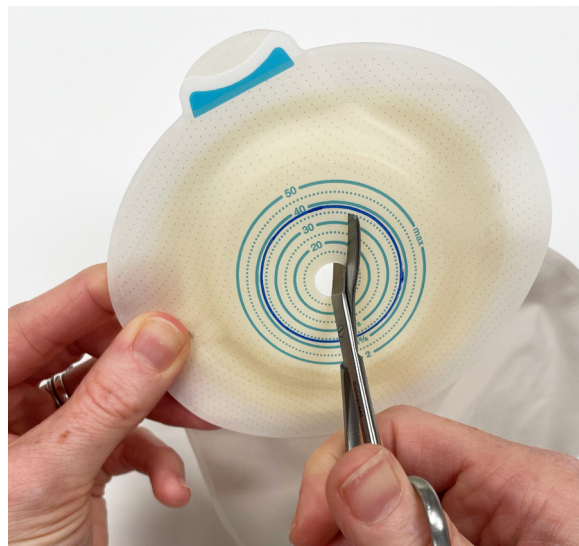


- Trace the measurement onto the back of the wafer barrier.



Cut to Size:

- Pull the plastic pouch away from the skin barrier to prevent cutting a hole in it.
- Place the scissors through the center hole to start cutting.



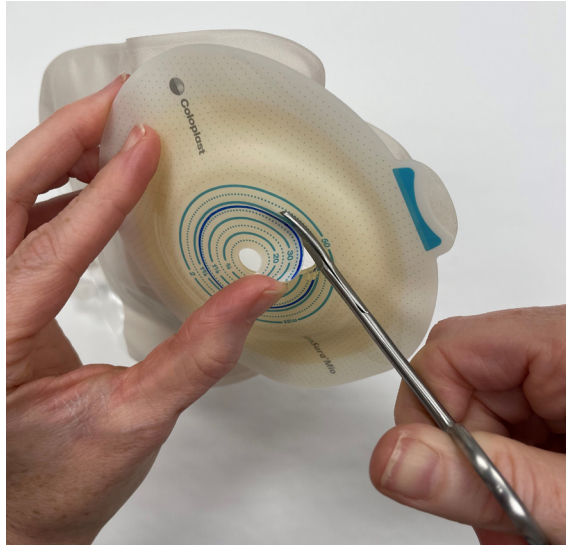
Cabbir:

- Ku cabbir calooshaada hagaha oo qor cabbirka. Calooshaadu/ daloolkaaga way yaraan doontaa 4 ilaa 6 toddobaad qalitaanka ka dib.
- Calooshaadu waxaa ku dhex jiri kara ul marka aad guriga tagto. Takhtarkaaga ama kalkaalisada daloolka ayaa kaa saari doona usha.
- Raad raac cabbirka xagga dambe ee xannibaadda warqada.

U jar cabbirka:

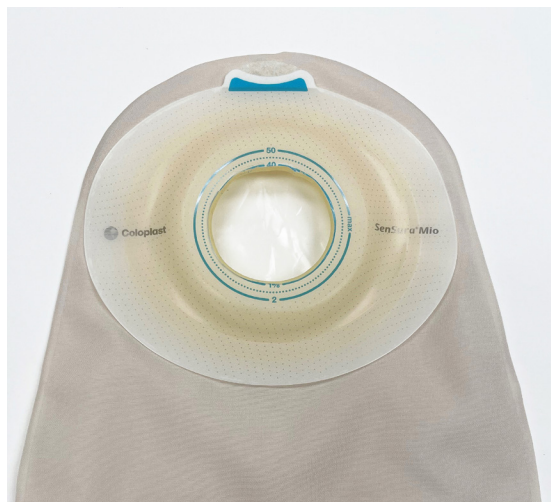
- Ka soo jiid kiishka balaastikada ah ee ka fogee maqaar ilaaliyaha si aad uga hortagto ka dhex goynta daloolkiisa.
- Maqasyada dhig daloolka dhexe si aad u bilawdo goynta.

- Cut all of the marker line off.



- Ka jar dhammaan xariiqda calaamadeeyaha.

- Aim to make the hole an 1/8 inch larger than the stoma. The pouch should be close to the stoma without touching it.



- Ujeedo inaad ka dhigto daloolka 1/8 inch ka weyn stoma. Kiishku waa inuu ku xidhmaa caloosha isagoon taaban.

- Warm the skin barrier in your hands or under your arm. This helps with getting a good seal.

- Ku diiri maqaar ilaaliyaha gacmahaaga ama cududda hoosteeda. Tani waxay kaa caawinaysaa helitaanka shaabad wanaagsan.

- After the opening is cut, hold up the wafer to your stoma to check the size. If you can see the entire stoma through the opening, it is ready to apply.



- Ka dib marka furitaanka la gooyo, kor u qaad warqada ilaa calooshaada si aad u hubiso cabbirka. Haddii aad ka arki karto stomaga oo dhan iyada oo loo marayo furitaanka, waxay diyaar u tahay inaad dabaqdo.

Remove Backing:

- Carefully remove the protective backing from the wafer barrier.



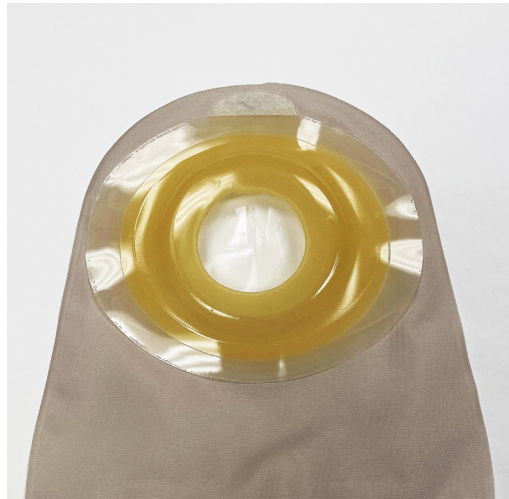
Ka saar Taageerada:

- Si taxadar leh uga saar xayndaabka warqada gaashaanka.

Ready to Apply:

- The pouch is now ready to put on.
- You can look down to apply the pouch or use a hand mirror or full length mirror to see the pouch going around the stoma.

Consider using electric clippers weekly to remove any hair on the skin around your stoma (called peri-stomal skin).



Diyaar u ah in la Dabaqo:

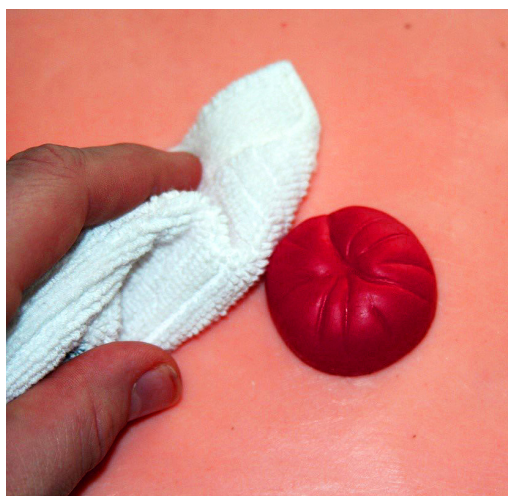
- Kiishka ayaa hadda diyaar u ah in la xidho.
- Waxaad hoos u eegi kartaa si aad u xidhato kiishka ama isticmaal muraayad gacanta ama muraayad dhererkeedu buuxo si aad u aragto kiishka oo ku wareegaysa stoma.

Tixgeli inaad isticmaasho jar-jareyaasha la-dabeeyo toddobaad kasta si aad uga saarto timaha maqaarka ku wareegsan stoma (oo loo yaqaan maqaarka peri-stomal).

Daryeelka Maqaarka: Nadiifinta

Skin Care: Cleaning

- Use a disposable towel or wash cloth, soap, and water to clean around the stoma. The stoma itself does not need to be cleaned. Remember, you have no feeling on the stoma.
 - Clean skin is important. The pouch will adhere best to clean, dry skin.
 - Avoid soaps or products that contain moisturizer, like baby wipes. Dial or Ivory are good choices. Moisturizer prevents the pouch from getting a good seal.
- Pat the skin dry.
- Have extra paper towels or wash clothes ready in case the stoma has output during the pouch change.
- Isticmaal shukumaan la tuuri karo ama maro, saabuun, iyo biyo ku dhaq si aad u nadiifiso agagaarka stoma. Stoma lafteeda uma baahna in la nadiifiyo. Xusuusnow, wax dareen ah kuma lihid stoma/duleelka.
 - Maqaarka nadiifka ah waa muhiim. Kiishka ayaa sida ugu wanaagsan ugu dhegga maqaarka nadiifka ah, qalalan.
 - Iska ilaali saabuunta ama alaabta ay ku jiraan qoyaanka, sida masaxarada ilmaha. Dial ama Ivory waa dooqyo wanaagsan. Qoyaanka wuxuu ka ilaaliyaa kiishka inay hesho shaabad fiican.
- Maqaarka qallaji.
- Diyaarso shukumaano waraaqo ah oo dheeri ah ama dhar dhaq haddii ay calooshu/duleelku wax soo saaro inta lagu jiro kiishka beddelka.



Dhibaatooyinka maqaarka

Skin Problems

- Use the stoma powder on any area of the skin that is **moist, irritated, or red**.
 - Put a thin layer of powder on the skin, and then brush it off. It will only stick to the moist areas that need to heal
- You can use a skin barrier film wipe and gently dab it onto the powder to form a “crust.” This is called crusting.
- Skin barrier film can be used alone on dry, red, irritated skin. It can also be used if the wafer barrier adhesive causes the skin to become sore. Gently wipe it on the skin and allow it to dry.
- Stoma powder and or barrier film are only needed if you are having skin problems.
- U isticmaal budada stoma meel kasta oo maqaarka ka mid ah oo **qoyan, cuncunta, ama casaan ah**.
 - Maqaarka saar lakab khafiif ah oo budo ah, ka dibna ka daadi. Waxay ku dhegganaan doontaa oo keliya meelaha qoyan ee u baahan inay bogsadaan
- Waxaad isticmaali kartaa masaxa xariga maqaarka oo si tartiib ah ugu dheji budada si aad u sameysid “qolof.” Tan waxaa loo yaqaan qolofeyn.
- Xariga ilaalinta maqaarka ayaa keligiis loo isticmaali karaa maqaarka qalalan, gudguduudan, cuncun leh. Waxaa kale oo loo isticmaali karaa haddii xabagta warqada ilaalinta ay keento maqaarka inuu xanuunsado. Si tartiib ah ugu tirtir maqaarka una ogolow inuu qalalo.
- Budada caloosha iyo ama xariga ilaalinta ayaa loo baahan yahay oo keliya haddii aad dhibaato maqaarka ku haysato.

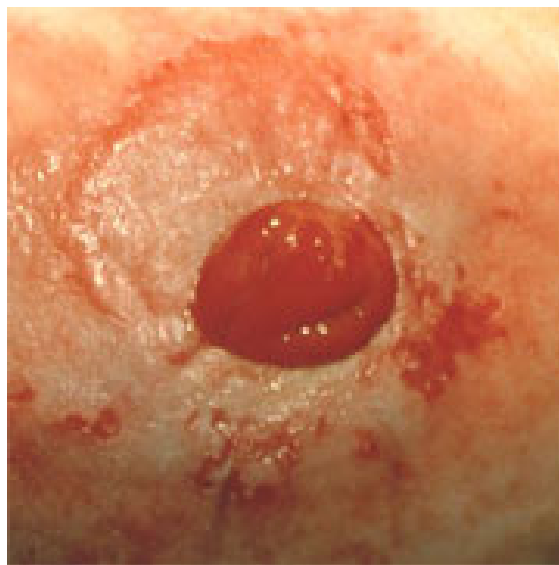
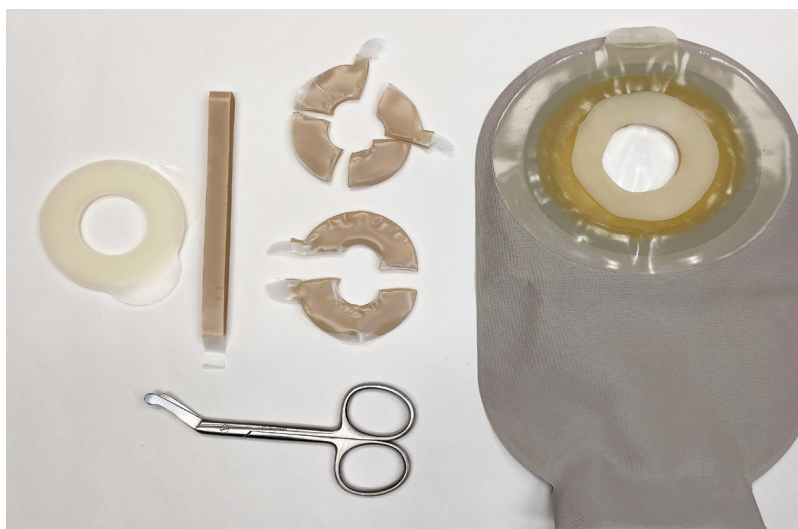


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Dhibaatooyinka Qubida

Problems With Leaking

- For a good seal, you need:
 - › Clean, dry skin that is not broken
 - › A warm pouch that is cut to fit close to the stoma
- You can use the entire moldable barrier ring around the stoma if you have enough supplies.
 - › Stretch the ring to fit around the stoma or to fit on the cut opening of the pouch to fill in any gaps in the skin surface.
- You can also fill in low spots on your skin with the moldable barrier ring by cutting it in half or quarters and putting it directly on the low spot of your skin.
- Another option is to mold a piece into the shape of a worm and place it on the cut edge of the pouch.
- Si aad u sameysid dhejis/shaabadeyn wanaagsan, waxaad u baahan tahay:
 - › Maqaar nadiif ah oo engegan oo aan jabin
 - › Kiish diirran oo loo gooyay si uu ugu habboonaado caloosha
- Waxaad isticmaali kartaa dhammaan giraanta xayndaabka caarada lalaabi karo ee agagaarka stoma haddii aad haysato agab kugu filan.
 - › Fidi giraanta si ay u deeqdo caloosha ama si aad ugu dhejiso furaha la jaray ee kiishka si aad u buuxiso dalool kasta oo maqaarka sare ah.
- Waxaa kale oo aad ku buuxin kartaa dhibco hoose oo maqaarkaaga ah giraanta xannibaadda ee la bedeli karo adiga oo gooya kala badh ama afar meelood oo si toos ah u dhejiya meesha hoose ee maqaarkaaga.
- Ikhtiyaar kale ayaa ah in loo qaabeeyo gabal sida dirxiga oo la dhigo cidhifka la jaray ee kiishka.



Convex Pouch

If your stoma is flat or if you have problems with leaking, you may need to use a convex pouch with a belt.

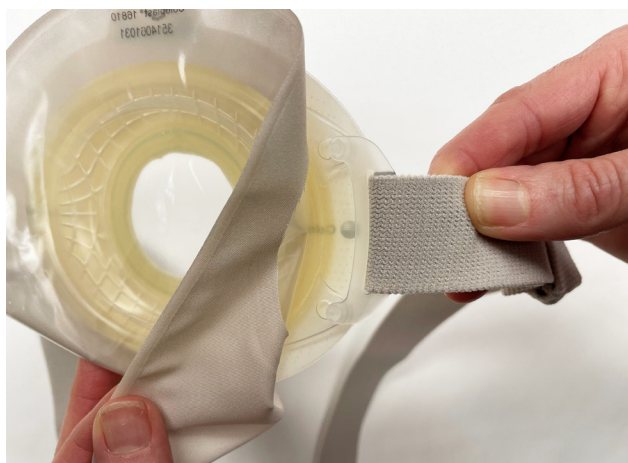


- Instead of being flat, the convex wafer barrier has a dip to help prevent leaking.
- Cut the wafer barrier to size and apply the pouch over the stoma.
- A belt can be used to help stabilize the pouch. Belt use is optional with a convex pouch.
 - Connect the belt to the belt tabs attached to the pouch.
 - The belt will fit snugly, but you should be able to fit 2 fingers between the belt and your waist.

Kiishka Hoos-gedisan

Haddii calooshaadu fidsan tahay ama haddii ay dhibaato kaa haysato daadinta, waxaa laga yaabaa inaad u baahato inaad la isticmaashid kiish hoos-gedisan suun.

- Halkii aad ka ahaan lahayd mid fidsan, warqada ilaalinta ee hoos-gedisan ayaa leh dhuuq si ay uga hortagto daadasho.
- U jar warqada ilaalinta ilaa cabbirka oo ku mari kiishka caloosha.
- Suunka ayaa loo isticmaali karaa in lagu dejiyo boorsada. La isticmaalka suunka kiishka hoos-gedisan waa ikhtiyaari.
 - Ku xidh suunka xargaha suunka ee ku dheggan kiishka.
 - Suunka ayaa si fiican ugu habboonaan doona, laakiin waa inaad awood u yeelatid inaad 2 farood geliso suunka iyo dhexda dhexdooda.



Adeegsiga: Kiish 1-Gabal ah

Applying: 1-Piece Pouch

Apply Pouch

- Cut the wafer barrier to size of stoma.
- Make sure the skin is clean and dry. Warm the pouch wafer in your hands or under your arm for a few minutes. A warm pouch will seal faster.
- The pouch should lay flat and point down toward your feet.
- Use your hand on the peristomal skin to make sure it is flat and has no creases in the pouch surface as you apply the pouch.

Remove Border Tape

- Not all brands of pouches have a tape border. If your pouch has a tape border, remove the tape around the edges now.



Warm Pouch

- Put your hand over the pouch for 3 to 5 minutes to warm the wafer to your skin. You can do gentle friction on just the wafer area to help the pouch seal to your skin.
- You have no sensation in your stoma. Use your hand around the stoma to warm the pouch
- The heat from your fingers and hand will help the pouch seal faster.



Adeegso boorsada

- U jar warqada ilaalinta ilaa cabbirka stoma.
- Hubi in maqaarku nadiif yahay oo engegan yahay. Ku diiri warqada ilaalinta gacantaada ama cududda hoosteeda dhowr daqiiqo. Kiishka diirran ayaa si dhakhso leh u xidhmi doona.
- Kiishka waa inuu si siman u jiifaa oo u jeedaa xagga cagahaaga.
- U isticmaal gacantaada maqaarka caloosha-xuubka si aad u hubiso inay fidsan tahay oo aanay lahayn wax dillaac ah oogada kiishka markaad xidhaneysa boorsada.

Ka saar Koolada Xuduudka

- Dhammaan noocyada kiishashku ma laha xuduud koolo ah. Haddii kiishkaagu leeyahay xuduud sharooto ah, ka saar sharootada ku wareegsan cidhifyada hadda.

Kiish Diiran

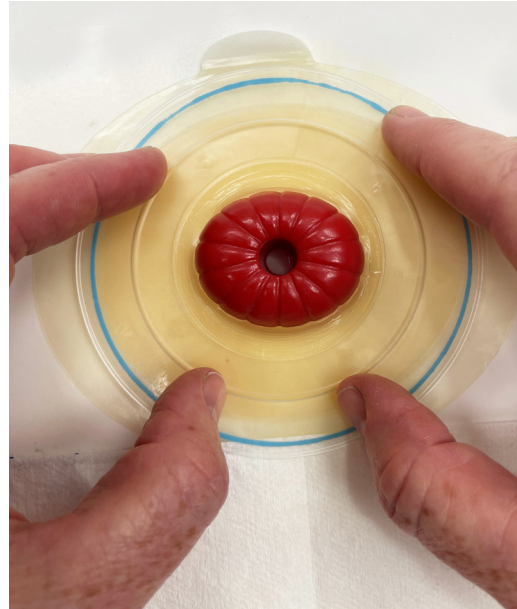
- Gacantaada saar kiishka 3 ilaa 5 daqiiqo si aad ugu diiriso warqada maqaarkaaga. Waxaad ku samayn kartaa is jiid-jiid jilicsan oo kaliya aagga warqada si aad uga caawiso xirmada kiishka maqaarkaaga.
- Wax dareen ah kuma qabtid duleelkaaga. Istickmaal gacantaada agagaarka caloosha si aad u diiriso kiishka
- Kuleylka farahaaga iyo gacanta ayaa kaa caawin doona inaad si dhakhso leh u xirto kiishka.

Adeegsiga: Kiish 2-Gabal ah

Applying: 2-Piece Pouch

Apply Wafer

- Cut the wafer barrier to size of stoma.
- Make sure the skin is clean and dry.
- Apply the wafer barrier directly over the stoma.
- Use your hand on the peri-stomal skin to make sure it is flat and has no creases in the pouch surface as you place the wafer.
- You should be able to see the stoma through the opening.
- You can look down or use a hand or full length mirror to see the pouch going around the stoma.

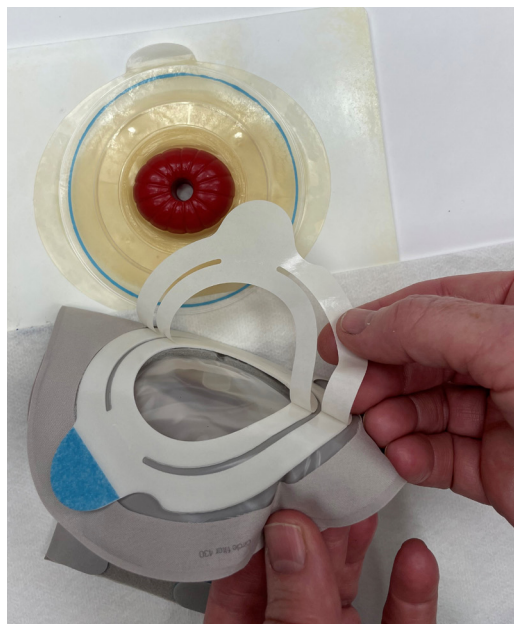


Adeegso Wafer/warqada

- U jar warqada ilaalinta ilaa cabbirka stoma.
- Hubi in maqaarku nadiif yahay oo engegan yahay.
- Si toos ah u mari warqada ilaalinta ee stoma.
- U isticmaal gacantaada maqaarka caloosha-xuubka si aad u hubiso inay fidsan tahay oo aan lahayn wax dillaac ah oogada bacda markaad dhigayso warqada.
- Waa inaad awood u leedahay inaad ka aragto stoma ee furitaanka.
- Waxaad hoos u eegi kartaa ama isticmaali kartaa muraayada gacanta ama mida buuxda si aad u aragto boorsada oo ku wareegaysa caloosha.

Remove Border Tape

- Not all brands of pouches have a tape border. If your pouch has a tape border, remove the tape around the backing now.

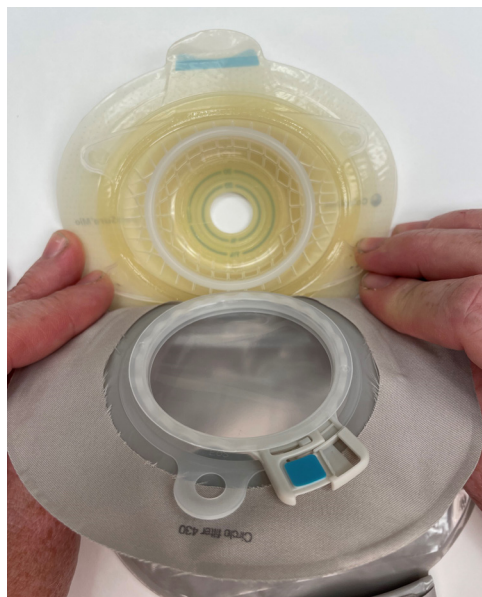
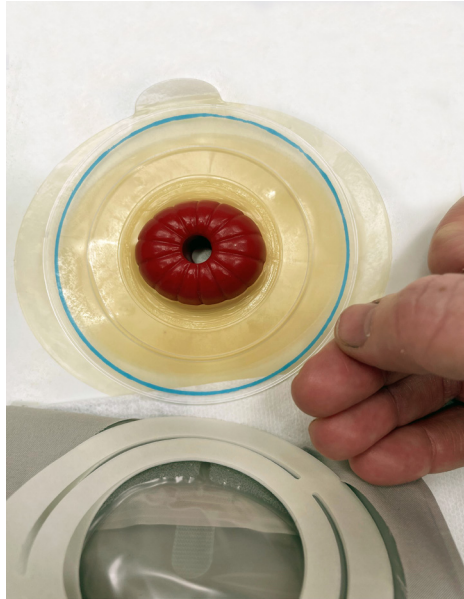


Ka saar Koolada Xuduudka

- Dhammaan noocyada kiishashku ma laha xuduud koolo ah. Haddii kiishkaagu leeyahay xuduud sharooto ah, ka saar sharootada ku wareegsan cidhifyada hadda.

Connect Pouch

- The pouch should lay flat and point down toward your feet.
- There are 2 types of pouch connections to the wafer barrier:
 - › The first type has a ring on the pouch that connects to a ring on the wafer. Start at the bottom and align the ring on the pouch to the ring on the skin barrier. Press the 2 rings together, beginning at the bottom to the top of the ring.
 - › The other type uses an adhesive coupling to get a seal. Align the adhesive ring on the pouch with the outer rim of the wafer barrier. Gently press around the barrier to secure.
- Some brands have a second ring to lock after the pouch is applied. You will hear a “click” when it is locked.



Ku xidh kiishka

- Kiishka waa inuu si siman u jiifaa oo u jeedaa xagga cagahaaga.
- Waxaa jira 2 nooc oo xirmooyinka kiishka ah ee warqada ilaalinta:
 - › Nooca kowaad wuxuu leeyahay giraan ku yaal shandad oo ku xidha giraanta warqad. Ka bilow xagga hoose oo ku toosi giraanta boorsada ku taal giraanta ku taal warqada ilaalinta. Isku dheji labada siddo, ka bilaabaya xagga hoose ilaa sare ee giraanta.
 - › Nooca kale wuxuu isticmaalaa isku-xidhka dhejiska si uu u helo shaabad. Ku toosi giraanta dhejiska ee kiishka iyo cidhifka dibadda ee xannibaadda waferka/warqada. Si tartiib ah u cadaadi agagaarka xannibaadda si aad u sugto.
- Noocyada qaarkood waxay leeyihiin giraan labaad oo ay ku xiraan ka dib markii shandada la mariyo. Waxaad maqli doontaa “gujin” marka la xiro.

Furitaanka, faaruqinta, iyo xidhitaanka

Opening, Emptying, and Closing

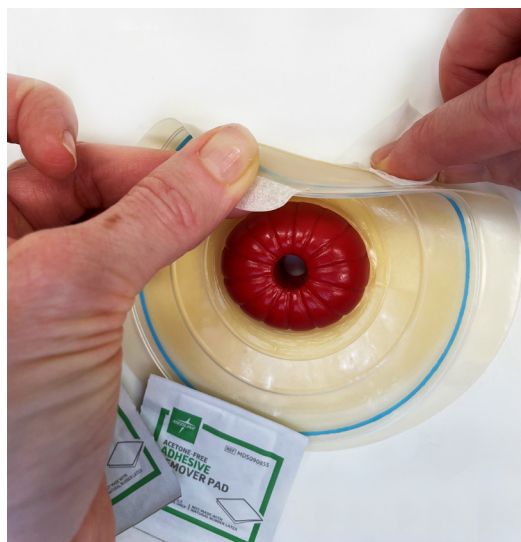
- Empty your pouch when it is 1/3 to 1/2 full of gas or stool.
- Always empty it into the toilet. Do not empty the pouch into the sink.
- Stand in front of the toilet leaning down, or sit on the toilet (facing forward or backward). It may help to put toilet tissue into the toilet to prevent splashing.
- Undo the Velcro on the end of the pouch. Hold up the end to prevent leakage.
- Hold the end of the pouch open like a spigot and empty it into the toilet. Wipe off the end of the pouch with toilet tissue.
- Roll the pouch back up after. Secure the Velcro closure by pressing along the edge with your fingers to make sure it is closed.
- Faaruqi shandadaada marka ay tahay 1/3 ilaa 1/2 ka buuxa gaas ama saxaro.
- Had iyo jeer ku faaruqi musqusha. Ha ku faaruqin kiishka waji-dhaqa.
- Istaag musqusha horteeda adigoo ku foorarsan, ama fadhiiso musqusha (oo u jeedda horay ama gadaal). Waxaa laga yaabaa in ay ku caawiso in la geliyo warqaha musqusha si looga hortago in ay firdhisanto.
- Fur Velcro-ga xagga dambe ee kiishka. Kor ugu qaad dhamaadka si aad uga hortagto daadinta.
- Ku qabo dhammaadka shandad sida candhuuf oo kale oo ku faaruqi musqusha. Ku masax dhamaadka shandada warqada musqusha.
- Kiishka dib u rogo ka dib. Ku hubso xidhitaanka Velcro adiga oo ku cadaadinaya cidhifka farahaaga si aad u hubiso inuu xidhan yahay.



Ka saarida

Removing

- The pouch can be removed a few ways. You can:
 - › Remove it dry
 - › Use adhesive remover
 - › Use water on a towel
- Use a push-pull technique to remove the pouch. From the top, push down on the skin while pulling the pouch wafer barrier from the skin in a downward motion.
- Place the used supplies in a plastic bag and throw it away with your regular trash. Do not flush supplies down the toilet.
- Kiishka waxaa loo saari karaa dhowr siyaabood. Waxaad awoodaa:
 - › Inaad u saarto qalajin
 - › Isticmaal wax ka saara xabagta
 - › Biyo ku isticmaal shukumaan
- Isticmaal farsamada riix-jiid si aad u saarto kiishka. Xagga sare, hoos u riix maqaarka markaad ka soo jiidanayso xannibaadda waferka ee maqaarka adigoo hoos u socda.
- Ku rid alaabta la isticmaalay bac oo ku tuur qashinkaaga caadiga ah. Ha ku daadin agabka musqusha.



Output

- Make sure to empty your pouch when it is $\frac{1}{3}$ to $\frac{1}{2}$ full.
- It is normal to see mucus coming from the stoma, as well as from your rectum. The thick, creamy substance can be white, yellow, brown, gray, or red.
- If you do not have any stool in your pouch for 3 days, call your doctor or ostomy nurse.
- If the stool is hard to drain, add a few drops of lubricant, such as mineral oil, baby oil, or liquid soap to coat the inside of the bag the next time it is changed.
- Drink more fluids if you are having diarrhea, at least 8 to 10 glasses a day. If this continues to be a problem, call your doctor or ostomy nurse.

Ordering Supplies

- Ostomy supplies are durable medical equipment (DME), like wheelchairs or hospital beds. Call your insurance company to see if DME is covered under your insurance plan.
- If your pharmacy does not have DME, you may need to order your ostomy supplies from a medical supply company.
- Ask your insurance company where you should get your supplies. They may use a local or a national medical supply company.

Wax soo saarka

- Hubi inaad faaruqiso kiishkaaga marka ay $\frac{1}{3}$ ilaa $\frac{1}{2}$ buuxsanto.
- Waa caadi in la arko xab ka imaanaya stoma, iyo sidoo kale malawadkaaga. Walaxda qaro weyn, kareemku waxay noqon kartaa caddaan, jaalle, bunny, cawl, ama casaan.
- Haddii aadan wax saxaro ah ku haysan kiishkaaga muddo 3 maalmood ah, wac dhakhtarkaaga ama kalkaalisada qalliinka.
- Haddii saxaradu ay adag tahay in la daadiyo, ku dar dhawr dhibcood oo saliid ah, sida saliidda macdanta, saliidda ilmaha, ama saabuunta dareeraha ah si aad ugu dabooشو gudaha bacda marka xigta ee la beddelo.
- Cab cabitaanno badan haddii aad shubmayso, ugu yaraan 8 ilaa 10 koob maalintii. Haddii tani ay sii ahaanayso dhibaato, wac dhakhtarkaaga ama kalkaalisada qalliinka.

Dalbashada Alaabaha

- Qalabka Ostomy waa qalab caafimaad oo waara (durable medical equipment, DME), sida kuraasta curyaanka ama sariiraha isbitaalka. Wac shirkaddaada caymiska si aad u aragto in DME ay ku hoos jirto qorshahaaga caymiska.
- Haddii farmashiyahaagu aanu lahayn DME, waxaa laga yaabaa inaad u baahato inaad agabyadaada ostomy ka dalbato shirkad agab caafimaad ah.
- Waydii shirkaddaada caymiska meesha aad ka heli lahayd alaabtaada. Waxaa laga yaabaa inay isticmaalaan shirkad caafimaad oo maxalli ah ama mid qaran.

- Below are phone numbers for national medical supply companies:
 - › Edgepark: 1-800-321-0591
 - › Comfort Medical: 1-800-719-1663
 - › Byram: 1-877-902-9726
 - › CCS Medical: 1-800-722-2604
 - › 180 Medical (Convatec only): 1-877-688-2729

- Hoos waxaa ku yaal lambarrada taleefannada shirkadaha agabyada caafimaadka qaranka:
 - › Edgepark: 1-800-321-0591
 - › Comfort Medical: 1-800-719-1663
 - › Byram: 1-877-902-9726
 - › CCS Medical: 1-800-722-2604
 - › 180 Medical (Convatec kaliya): 1-877-688-2729

Sida Loo Maareeyo Soosaarka Ostomy Sare

How to Manage High Ostomy Output

High ostomy output, more than 1200 mL a day, may cause you to be unable to absorb fluids and nutrients and can cause dehydration. Normal output for your ostomy is 600 to 800 mL each day. It is important to check the output of your ostomy each day and watch for signs of dehydration.

Signs of dehydration may include:

- Feeling dizzy, weak, or light headed
- Headaches
- Thirst or dry mouth
- Dark colored urine
- Decrease in urine output
- Nausea
- Muscle cramps

Call your doctor or ostomy nurse if you have any signs of dehydration. It is important to check your weight and the output from your ostomy each day. Use the Ostomy Output Log on page 27 and 28.

Call your doctor if your daily output is more than 1200 mL or if you lose more than 2.2 pounds in a week.

Wax soo saarka duleelka sare, in ka badan 1200 ml maalintii, ayaa laga yaabaa inay kuu keento inaad awoodi waydo inay nuugto dareeraha iyo nafaqooyinka waxayna sababi kartaa fuuqbax. Wax soo saarka caadiga ah ee calooshaada waa 600 ilaa 800 ml maalin kasta. Waa muhiim inaad hubiso wax soo saarka duleelkaaga maalin kasta oo aad u fiirsato calaamadaha fuuq-baxa.

Calaamadaha fuuq-baxa waxaa ka mid noqon kara:

- Dareen dawakhaad, daciifnimo, ama fudeyd madaxeed
- Madax xanuunada
- Harraad ama af qalalan
- Kaadi midab madow
- Hoos u dhaca soo saarista kaadida
- Lalabbo
- Murqo xanuun

Wac dhakhtarkaaga ama kalkaalisada ostomy haddii aad leedahay calaamado fuuq bax ah. Waa muhiim inaad hubiso miisaankaaga iyo waxa ka soo baxa duleelkaaga maalin kasta. Isticmaal Diiwaanka Wax soo saarka Ostomy ee bogga 27 iyo 28.

Wac dhakhtarkaaga haddii wax soo saarkaaga maalin kasta uu ka badan yahay 1200 mL ama haddii aad lumiso in ka badan 2.2 rodol toddobaadkii.

Medicine to help manage high ostomy output

Your doctor may have ordered medicine (Loperamide) to help reduce your ostomy output and help increase your absorption of fluid and nutrients. It is important to take this medicine as ordered by your doctor. Talk to your doctor before you change your dose or stop taking this medicine. Take this medicine 30 minutes before each meal or snack and before you go to bed.

Diet to help manage high ostomy output

To manage your ostomy output, it may help to make changes to your diet. Talk to your doctor, nurse, or dietitian about your diet and fluid needs. The following diet guidelines may help to lower your ostomy output:

- Eat small meals or snacks during the day.
- Eat high salt foods and add salt to your meals and snacks.
- Eat foods with more soluble fiber such as oatmeal, barley, applesauce, and sweet potatoes. It may help to use products such as Benefiber or Metamucil.
- Stay away from high sugar foods and sugar-sweetened drinks.
- Stay away from alcohol and caffeine.

Daawo si ay gacan uga geysato maareynta wax soo saarka duleelka ee sare

Waxaa laga yaabaa in dhakhtarkaagu kuu dalbaday daawo (Loperamide) si ay kaaga caawiso dhimista wax soo saarka duleelka iyo inay kordhiso nuugista dareeraha iyo nafaqooyinka. Waa muhiim inaad u qaadato dawadan sida uu ku amray dhakhtarkaagu. La hadal dhakhtarkaaga ka hor intaadan beddelin qiyaastaada ama aadan joojin qaadashada daawadan. Qaado dawadan 30 daqiiqo ka hor cunto kasta ama cunto fudud iyo ka hor intaadan seexan.

Cunto si ay gacan uga geysato maareynta wax soo saarka duleelka ee sare

Si loo maareeyo wax soo saarka duleelka qalliinka, waxaa laga yaabaa inay ku caawiso inaad isbedel ku sameyso cuntadaada. Kala hadal dhakhtarkaaga, kalkaalisada, ama cunto yaqaanka cuntadaada iyo baahiyahaaga dareeraha. Tilmaamaha cuntada ee soo socda ayaa kaa caawin kara inaad hoos u dhigto wax soo saarka duleelkaaga:

- Cun cunto yaryar ama cunto fudud inta lagu jiro maalinta.
- Cun cuntooyinka milixdu ku badan tahay oo ku dar milix cuntadaada iyo cuntooyinkaaga fudud.
- Cun cuntooyinka leh faybar milmay sida boorash, shaciir, suugo tufaaxa, iyo baradhada macaan. Waxaa laga yaabaa inay ku caawiso isticmaalka alaabta sida Benefiber ama Metamucil.
- Ka fogow cuntooyinka sonkortu ku badan tahay iyo cabitaannada sonkorta-macaanku ku badan tahay.
- Ka fogow aalkolada iyo caffeine.

Other tips to help manage high ostomy output

Normal output for your ostomy is 600 to 800 mL each day. With normal output, you will need to empty your pouch 5 to 7 times each day.

If you have had watery output for more than 12 hours, the following tips may help:

- Eat certain foods, such as applesauce, bananas, cheese, mashed potatoes, peanut butter, and soda crackers, to thicken stools and control output.
- **Do not** drink fluids with your meals. Drink fluids 30 minutes before or after meals.
- Drink liquid electrolyte solutions, such as Pedialyte.
- If prescribed, take Loperamide (1 to 2 caplets) 30 minutes before each meal and snack, and before you go to bed.
- Check the color of your urine. If you are hydrated, your urine should be light yellow in color.

If you have had watery output for more than 24 hours, choose 1 of the recipes below and follow the directions to make a rehydration solution at home. Drink 1 liter of the solution over the next 24 hours. After you mix the solution, refrigerate any leftovers.

Talooyin kale oo kaa caawinaya maareynta wax soo saarka duleelka ee sare

Wax soo saarka caadiga ah ee calooshaada waa 600 ilaa 800 ml maalin kasta. Wax soo saarka caadiga ah, waxaad u baahan doontaa inaad faaruqiso kiishkaaga 5 ilaa 7 jeer maalin kasta.

Haddii aad heshay wax soosaar biyo-biyo ah wax ka badan 12 saacadood, talooyinka soo socda ayaa ku caawin kara:

- Cun cuntooyinka qaarkood, sida suubada tufaaxa, muuska, farmaajada, baradhada shiidan, subagga lawska, iyo buskudka soodhaha, si aad u adkeyso saxarada oo aad u xakamayso wax soo saarka.
- **Ha** ku cabbin cabitaannada cuntadaada. Cab cabitaanno 30 daqiiqo ka hor ama ka dib cuntada.
- Cab isku-qaska dareeraha ah ee elektrolytka, sida Pedialyte.
- Haddii lagu qoro, qaado Loperamide (1 ilaa 2 caplets) 30 daqiiqo ka hor cunto kasta iyo cunto fudud, iyo ka hor intaadan seexan.
- Hubi midabka kaadidaada. Haddii aad fuuqbaxdo, kaadidaadu waa inay noqotaa midab huruud khafiif ah.

Haddii aad heshay wax soosaar biyo-biyo ah wax ka badan 24 saacadood, dooro 1 ka mid ah cuntooyinka hoose oo raac tilmaamaha si aad guriga ugu samayso isku-qas fuuq-celinta. Cab 1 litir oo isku-qaska 24 saac ee soo socota. Ka dib markaad isku darto qaska, qabooji wixii haraaga ah.

Rehydration Solution Recipes

Sugar and Salt Water

- 1 quart water
- $\frac{3}{4}$ teaspoon salt
- 6 teaspoons sugar
- You can add low-sugar, powdered drink mixes (such as Crystal Light) to help improve the taste.

Gatorade G2

- 4 cups (32 ounces) Gatorade G2
- $\frac{3}{4}$ teaspoon salt

Chicken Broth - Option 1

- 4 cups water
- 1 dry chicken broth cube
- $\frac{1}{4}$ teaspoon salt
- 2 tablespoons sugar

Chicken Broth - Option 2

- 2 cups water
- 2 cups liquid broth
- 2 tablespoons sugar

Tomato Juice

- $1\frac{1}{2}$ cups water
- $2\frac{1}{2}$ cups tomato juice

Cereal-based

Mix ingredients until dissolved and smooth. The solution will be thick, but you will be able to pour and drink it.

- 2 cups water
- $\frac{1}{2}$ cup dry, precooked baby rice cereal
- $\frac{1}{4}$ teaspoon salt

Cuntooyinka Isku-qaska fuuq-celinta

Biyo Sonkor iyo Milix ah

- 1 rubuc biyo ah
- $\frac{3}{4}$ qaado oo cusbo ah
- 6 qaado oo sonkor ah
- Waxaad ku dari kartaa isku darka cabitaanka budada ah ee sonkorta yar (sida Crystal Light) si ay kaaga caawiso hagaajinta dhadhanka.

Gatorade G2

- 4 koob (32 wiiqiyadood) Gatorade G2
- $\frac{3}{4}$ qaado oo cusbo ah

Maraq Digaag - Dooqa 1

- 4 koob oo biyo ah
- 1 kiyuub maraq digaag qallalan
- $\frac{1}{4}$ qaado oo milix ah
- 2 qaado oo sonkor ah

Maraq Digaag - Dooqa 2

- 2 koob oo biyo ah
- 2 koob oo maraq dareere ah
- 2 qaado oo sonkor ah

Casiirka Yaanyada

- $1\frac{1}{2}$ koob oo biyo ah
- $2\frac{1}{2}$ koob oo casiir yaanyo ah

badarka ku salaysan

Isku qas maaddooyinka ilaa ay isku milmaan si fiican. Isku-qasku wuxuu noqon doonaa mid dhumuc weyn, laakiin waxaad awoodi doontaa inaad shubto oo aad cabto.

- 2 koob oo biyo ah
- $\frac{1}{2}$ koob oo qallalan, oo badar bariis caruur hore loo kariyey ah
- $\frac{1}{4}$ qaado oo milix ah

Kahortagga Fuuqbaxa: Nidaamka Qoyaanka Ileostomy

Prevent Dehydration: Ileostomy Hydration Protocol

Use these guidelines to adjust the amount of fluids you drink and the amount of Imodium (loperamide) you take to control your stool output from your ileostomy.

Supplies you will need

You will need the following supplies at home after your ileostomy surgery:

- A fiber supplement (use 1 of the options listed below). Talk to your pharmacist if you are not sure which supplement to use.
 - Metamucil powder – normal dose is 1 to 2 tablespoons, 1 or 2 times a day
 - Benefiber powder – normal dose is 2 tablespoons, 4 times a day
 - FiberCon – normal dose is 1 to 2 tablets, 2 times a day
- A container to measure how much urine and stool output you have each day (you will be given 1 at the hospital)
- Low sugar electrolyte drinks such as Powerade Zero, G2, or Pedialyte

Measure your urine and stool output each day

Use the container you were given to measure the urine and stool output you have each day.

The goal each day is for you to have a:

- Urine output of more than 1200 mL
- Stool output of less than 1200 mL

Isticmaal tilmaamahan si aad u hagaajisid qadarka dareeraha aad cabto iyo qadarka Imodium (loperamide) ee aad qaadato si aad u xakamayso saxaradaada ka soo baxa ileostomy.

Alaabta aad u baahan doonto

Waxaad ugu baahan doontaa agabyada soo socda guriga ka dib qalitaankaaga ileostomy:

- Kabka buunshaha (isticmaal 1 ee xulashooyinka hoos ku taxan). La hadal farmashiistahaaga haddii aadan hubin kabista aad isticmaalayso.
 - Budada Metamucil - qiyaasta caadiga ah waa 1 ilaa 2 qaado, 1 ama 2 jeer maalintii
 - Budada benefiber - qiyaasta caadiga ah waa 2 qaado, 4 jeer maalintii
 - FiberCon - qiyaasta caadiga ah waa 1 ilaa 2 kiniin, 2 jeer maalintii
- Weel lagu cabbiro inta ay le'eg tahay kaadida iyo saxarada aad soo saarto maalin kasta (waxaa laguugu siin doonaa 1 isbitaalka)
- Cabbitaannada elektrolayt sonkorta yar sida Powerade Zero, G2, ama Pedialyte

Cabbir kaadidaada iyo saxaradaada maalin kasta

Isticmaal weelka lagu siiyay si aad u cabbirto kaadida iyo saxarada aad maalin kasta soo saarto.

Hadafka maalin kasta waa inaad leedahay:

- Soosaarka kaadida oo ka badan 1200 ml
- Wax soo saarka saxarada oo ka yar 1200 ml

- Use the chart at the end of this handout to record your daily output. Make copies as needed.

If you meet the goals for urine and stool each day, you do not need to change anything that you are doing. Keep taking your medicines and drinking fluids.

If you do not meet the goal, follow the guidelines below based on your urine and stool output.

Action steps

When your urine is less than 1200 mL and stool is less than 1200 mL

- If your stool output is good but your urine output is low, **you are at risk for dehydration.**

What to do:

- Drink an extra 1000 mL or four 8-ounce cups of fluid over the next 24 hours. It is best to drink sugar free sports drinks like Gatorade or Powerade to replace electrolytes in your body. Keep up your normal eating and drinking and take your medicines as ordered.

When your urine is more than 1200 mL and stool is more than 1200 mL

- If your urine output is okay but your stool output is high, **you are at risk for dehydration.**

What to do:

- Start or adjust your Imodium (loperamide).
 - If you are already taking Imodium, increase your dose by 2 tablets (4 mg) in 24 hours. If you are already taking 12 tablets (24 mg) in 24 hours, call the office right away. **Do not take more than 12 tablets in 24 hours.**
 - If you have not been taking Imodium, start taking 1 tablet, 3 times a day, for a total of 6 mg a day. **This medicine should be taken 30 minutes before eating.**

- Isticmaal shaxda dhamaadka qoraalkan si aad u duwangeliso wax soo saarkaaga maalinlaha ah. Koobiyo u samee sida loogu baahdo.

Haddii aad la kulanto yoolalka kaadida iyo saxarada maalin kasta, uma baahnid inaad bedesho wax kasta oo aad sameyneyso. Sii wad qaadashada daawooyinkaaga iyo cabitaanka dareeraha.

Haddii aadan gaarin yoolka, raac tilmaamaha hoose ee ku saleysan wax soo saarka kaadidaada iyo saxaradaada.

Tallaabooyinka ficil

Marka kaadidaadu ay ka yar tahay 1200 mL, saxaradaaduna ay ka yar tahay 1200 ml

- Haddii soosaarka saxaradaadu ay wanaagsan tahay laakiin kaadidaadu yar tahay, **waxaad halis ugu jirtaa fuuqbax.**

Waxa la sameeyo:

- Cab 1000 ml oo dheeraad ah ama afar 8-wiqiyadood oo dareere ah 24ka saacadood ee soo socda. Way fiicantahay inaad cabto cabitaanada isboortiga ee bilaa sonkorta ah sida Gatorade ama Powerade si aad ugu badasho elektroytka jirkaaga. Sii wad cunistaada iyo cabitaanka caadiga ah oo u qaado daawooyinkaaga sida lagu amray.

Marka kaadidaadu ka badan tahay 1200 mL saxaroduna ay ka badan tahay 1200 ml

- Haddii soo saarka kaadidaadu ay caadi tahay laakiin saxaradaadu ay sarreyso, **waxaad halis ugu jirtaa fuuqbax.**

Waxa la sameeyo:

- Bilow ama hagaaji Imodium (loperamide).
 - Haddii aad horeba u qaadanaysay Imodium, ku kordhi qiyaastaada 2 kaniini (4 mg) 24 saacadood gudahood. Haddii aad hore u qaadanaysay 12 kaniini (24 mg) 24 saac gudahood, wac xafiiska isla markaaba. **Ha qaadan wax ka badan 12 kaniini 24 saac gudahood.**
 - Haddii aadan qaadanin Imodium, bilow qaadashada 1 kaniini, 3 jeer maalintii, wadar ahaan 6 mg maalintii. **Dawadan waa in la qaataa 30 daqiiqo ka hor cuntada.**

- Keep up your normal eating and drinking and take your medicines as ordered.

When your urine is less than 1200 mL and stool is more than 1200 mL

- If your urine output is too low and your stool output is too high, **you are at high risk for dehydration.**

What to do:

- **Drink an extra 1000 mL** or four 8-ounce cups of fluid over the next 24 hours. It is best to drink sugar free sports drinks like Gatorade or Powerade to replace the electrolytes in your body.
- Start or adjust your Imodium (loperamide).
 - If you are already taking Imodium, increase your dose by 2 tablets (4 mg) in 24 hours. If you are already taking 12 tablets (24 mg) in 24 hours, call the office today. **Do not take more than 12 tablets in 24 hours.**
 - If you have not been taking Imodium, start taking 1 tablet, 3 times a day, for a total of 6 mg a day. **This medicine should be taken 30 minutes before eating.**
- Keep up your normal eating and drinking and take your medicines as ordered.

Your nurse will put a check (✓) by the directions to follow if you are **unable to increase your fluids, you are vomiting or if you feel worse:**

For Colorectal patients:

- Call 614-293-3230 Monday through Friday between 8 a.m. and 5 p.m. Tell them you are on the hydration protocol. Someone will call you back soon.

- Sii wad cunistaada iyo cabitaanka caadiga ah oo u qaado daawooyinkaaga sida lagu amray.

Marka kaadidaadu ay ka yar tahay 1200 ml saxaroduna ay ka badan tahay 1200 ml

- Haddii kaadidu aad u yar tahay oo saxaradaadu aad u badan tahay, **waxaad halis sare ugu jirtaa fuuqbax.**

Waxa la sameeyo:

- **Cab 1000 ml** oo dheeraad ah ama afar 8-wiqiyadood oo dareere ah 24 ka saacadood ee soo socda. Way fiicantahay inaad cabto cabitaanada isboortiga ee bilaa sonkorta ah sida Gatorade ama Powerade si aad ugu badasho electrolytes-ka jirkaaga.
- Bilow ama hagaaji Imodium (loperamide).
 - Haddii aad horeba u qaadanaysay Imodium, ku kordhi qiyaastaada 2 kaniini (4 mg) 24 saacadood gudahood. Haddii aad hore u qaadanaysay 12 kaniini (24 mg) 24 saacadood gudahood, wac xafiiska maanta. **Ha qaadan wax ka badan 12 kaniin 24 saac gudahood.**
 - Haddii aadan qaadanin Imodium, bilow qaadashada 1 kaniini, 3 jeer maalintii, wadar ahaan 6 mg maalintii. **Dawadan waa in la qaataa 30 daqiiqo ka hor cuntada.**
- Sii wad cunistaada iyo cabitaanka caadiga ah oo u qaado daawooyinkaaga sida lagu amray.

Kalkaalisadaadu waxay hubin doontaa (✓) tilmaamaha la raacayo haddii aadan **awoodin inaad kordhiso dareerahaaga, aad matagayso ama haddii aad dareento ka sii daran:**

Loogu talagalay bukaanada Mindhicir Waynaha:

- Wac 614-293-3230 Isniinta ilaa Jimcaha inta u dhaxaysa 8 subaxnimo iyo 5 galabnimo U sheeg inaad ku jirto borotokoolka fuuqbaxa. Qof ayaa ku soo wici doona waxyar kadib.

- **After hours, weekends and holidays,** call 614-293-8000 and ask for the Colorectal resident on call.
- If you are unable to call, go to the nearest emergency department to be checked.

☐ **For Surgical Oncology:**

- Call 614-293-7171 Monday through Friday between 8 a.m. and 5 p.m. Tell them you are on the hydration protocol. Someone will call you back soon.
- **After hours, weekends, and holidays,** call 614-293-8000 and ask for the Surgical Oncology/HPB resident on call.
- If you are unable to call, go to the nearest emergency department to be checked.

- **Saacadaha ka bacdi, asbuuc-dhamaadyada iyo maalmaha fasaxyada,** wac 614-293-8000 oo weydii dhakhtarka Mindhicir waynaha oo shaqo kujira.
- Haddii aadan awoodin inaad wacdo, u tag qaybta gargaarka degdega ah ee kuugu dhow si lagu eego.

☐ **Qalliinka Qalliinka:**

- Wac 614-293-7171 Isniinta ilaa Jimcaha inta u dhaxaysa 8 subaxnimo iyo 5 galabnimo U sheeg inaad ku jirto borotokoolka fuuqbaxa. Qof ayaa ku soo wici doona waxyar kadib.
- **Saacadaha ka bacdi, asbuuc-dhamaadyada iyo maalmaha fasaxyada** wac 614-293-8000 oo weydii dhakhtarka Qalliinka Kansarka/HPB oo shaqo kujira.
- Haddii aadan awoodin inaad wacdo, u tag qaybta gargaarka degdega ah ee kuugu dhow si lagu eego.

Cuntada Ostomy: Tilmaamaha Daryeelka

Ostomy Diet: Care Instructions

The foods you eat pass more quickly through your body and out into the ostomy pouch. This means that some foods may cause smells, gas, or diarrhea. You may want to avoid these foods, along with foods that might block the intestine.

Always talk with your doctor before you make changes in your diet.



Cuntooyinka aad cuntid waxay si degdeg ah ugu gudbaan jirkaaga waxayna u soo baxaan kiishka duleelka. Tani waxay ka dhigan tahay in cuntooyinka qaarkood ay keeni karaan ur, gaas, ama shuban. Waxaa laga yaabaa inaad rabto inaad iska ilaaliso cuntooyinkan, oo ay la socdaan cuntooyinka xannibaya mindhicirka.

Had iyo jeer la hadal dhakhtarkaaga ka hor intaadan isbeddel ku samayn cuntadaada.

How can you care for yourself at home?

- Eat a balanced diet that includes a variety of foods from the basic food groups: grains, vegetables, fruits, dairy, and protein foods.
- Eat 3 to 4 meals a day at regular times. It may help to avoid big meals in the evening, so that you do not pass a big amount of waste into the ostomy pouch during the night. You can add snacks during the day.
- If you notice bad odors from your ostomy pouch, note which foods cause odors so that you can limit them. See the list on the next page for common causes.

Sideed naftaada ugu daryeeli kartaa guriga?

- Cun cunto dheellitiran oo ay ku jiraan cuntooyin kala duwan oo ka socda kooxaha cuntada aasaasiga ah: badarka, khudaarta, miraha, caanaha, iyo cuntooyinka borotiinka.
- Cun 3 ilaa 4 cunto maalintii wakhtiyada caadiga ah. Waxaa laga yaabaa inay ku caawiso inaad iska ilaaliso cuntooyinka waaweyn ee fiidkii, si aadan ugu gudbinin xaddi badan oo qashin ah kiishka ostomyka inta lagu jiro habeenkii. Waxaad ku dari kartaa cunto fudud inta lagu jiro maalinta.
- Haddii aad ka aragto ur xun oo ka soo baxay shandadaada duleelka, u firso cuntooyinka keena ur si aad u xaddiddo. Ka eeg liiska ku yaal bogga xiga sababaha caadiga ah.

- If gas or diarrhea is a problem, limit or avoid beans, cabbage, onions, beer, carbonated drinks, cheese, coffee, spinach, raw fruits, and sprouts.
- Chew slowly and take your time eating. That will help your body digest the food.
- If you eat seeds and kernels, take the time to chew them well, because they can block or get stuck in the intestine. Other foods that can block the intestine include raisins, raw vegetables, and corn.
- Some foods will pass through your body without being completely digested. And some foods may change the color of your stools. You may see corn kernels, bright red beet juice, red pepper pieces, and other bits of your meals in the pouch. This is normal.
- Drink plenty of water and other fluids. Your doctor may recommend that you drink 2 to 3 quarts of water each day. Your large intestine is no longer absorbing liquids from what you eat and drink, and your body still needs those fluids. If you have to limit fluids because of another health problem, talk with your doctor before increasing the fluids you drink.
- Your doctor may recommend that you drink liquid that contains electrolytes to help replace lost fluids and minerals. These include drinks like Gatorade, Powerade, or other rehydration drinks that your doctor suggests.
- Talk to your doctor about taking vitamin and mineral supplements.
- Haddii dhuusta ama shubanku uu yahay dhibaato, xaddid ama iska ilaali digirta, kaabajka, basasha, biirka, cabitaannada kaarboonaysan, farmaajo, kafeega, isbinaajka, miraha ceeriin, iyo biqilka.
- Si tartiib ah u calaali oo waqti ku qaado cunida. Taasi waxay jidhkaaga ka caawin doontaa inuu dheefshiido cuntada.
- Haddii aad cuntid abuurka iyo miraha, qaado wakhti aad si fiican u calashid, sababtoo ah waxay xannibi karaan ama ku dhegi karaan mindhicirka. Cuntooyinka kale ee xannibi kara xiidmaha waxaa ka mid ah sabiib, khudaar ceeriin, iyo galley.
- Cuntooyinka qaar ayaa jidhkaaga sii dhex mara iyaga oo aan si buuxda loo dheefshiidin. Cuntooyinka qaarna waxaa laga yaabaa inay beddelaan midabka saxaradaada. Waxaa laga yaabaa inaad ku aragto galleyda, casiirka dabocase cas ee dhalaalaya, xabbado basbaaska cas, iyo qaybo kale oo cuntadaada ah oo ku jira kiishka. Tani waa caadi.
- Cab biyo badan iyo cabitaanno kale. Waxaa laga yaabaa in dhakhtarkaagu kugula taliyo inaad cabto 2 ilaa 3 quarts oo biyo ah maalin kasta. Mindhicirkaaga weyni hadda kama soo baxayo dareeraha waxaad cunayso iyo waxaad cabto, jidhkaaguna weli wuu u baahan yahay dareerahaas. Haddii ay tahay inaad xaddido dareeraha sababtoo ah dhibaato kale oo caafimaad, la hadal dhakhtarkaaga ka hor intaadan kordhin cabitaannada aad cabto.
- Waxaa laga yaabaa in dhakhtarkaagu kugula taliyo inaad cabto dareere ay ku jiraan electrolytes si ay kaaga caawiyaan beddelka dareeraha iyo macdanta lumay. Kuwaas waxaa ka mid ah cabitaannada sida Gatorade, Powerade, ama cabitaannada fuuq-celinta kale ee dhakhtarkaagu kuu soo jeediyo.
- Kala hadal dhakhtarkaaga wax ku saabsan qaadashada fitamiinada iyo macdanta.

Tilmaamaha Cuntada iyo Dareeraha

Diet and Fluid Guidelines

Ostomy surgery may affect the way your body digests and absorbs food. What you eat and drink may need to change based on the type of surgery you had. Your doctor, nurse or dietitian will talk with you about your diet and fluid needs. This will give you information about your diet and fluid needs after your ostomy surgery.

Your diet after surgery: short-term

After your ostomy surgery, your doctor, nurse, or dietitian will talk with you about any special diet you need to follow. They may tell you to eat a low-residue diet. A low-residue diet limits the amount of fiber and dairy products you eat. This diet slows down digestion and decreases your bowel movements to let your bowels heal.

You may be asked to follow these diet guidelines for about 6 weeks after your surgery:

- Eat small meals or snacks during the day.
- Drink 8 to 10 cups of non-caffeinated fluid during the day.

Qaliinka duleelinta waxaa laga yaabaa inuu saameeyo habka jidhkaagu u dheefshiido oo u nuugo cuntada. Waxa aad cunayso iyo waxa aad cabto waxaa laga yaabaa in ay u baahdaan in la bedelo iyadoo lagu salaynayo nooca qalliinka lagugu sameeyay. Takhtarkaaga, kalkaalisada ama dhakhtarkaaga cuntada ayaa kaala hadli doona cuntadaada iyo baahiyahaaga dareeraha. Tani waxay ku siin doontaa macluumaadka ku saabsan cuntadaada iyo baahida dareerahaaga qalliinka duleelinta ka dib.

Cuntadaada qalliinka ka dib: waqti gaaban

Qalitaanka duleelinta ka dib, dhakhtarkaaga, kalkaalisada, ama cunto-yaqaanka ayaa kaala hadli doona cunto kasta oo gaar ah oo aad u baahan tahay inaad raacdo. Waxaa laga yaabaa inay kuu sheegaan inaad cunto cunto hadhaaga hoose ah. Cunto hadhaaga yar ayaa xaddidaysa xaddiga buunshaha iyo waxyaabaha caanaha laga sameeyo ee aad cunto. Cuntadani waxay hoos u dhigtaa dheefshiidka waxayna yaraynaysaa dhaqdhaqaaqa mindhicirka si ay u ogolaato in mindhicirku bogsado.

Waxaa laga yaabaa in lagu weydiiyo inaad raacdo tilmaamahan cuntada ilaa 6 toddobaad qalliinka ka dib:

- Cun cunto yaryar ama cunto fudud inta lagu jiro maalinta.
- Cab 8 ilaa 10 koob oo dareere ah oo aan kafeeyn lahayn maalintii.

- Chew your food well to help with digestion.
- To decrease gas, it may help to do the following:
 - Do not drink carbonated beverages.
 - Do not use a straw when you drink.
 - Do not smoke.
 - Do not eat foods that cause gas
- Si fiican u calaji cuntadaada si ay kaaga caawiso dheefshiidka.
- Si loo dhimo dhuusta, waxa ay ku caawin kartaa in la sameeyo waxyaabaha soo socda:
 - Ha cabbin cabitaannada kaarboonaysan.
 - Ha isticmaalin tuubo marka aad cabeyso.
 - Sigaar ha cabbin.
 - Ha cunin cuntooyinka gaaska/dhuusta keena.

Your diet after surgery: long-term

Once you have healed from your surgery, your doctor, nurse, or dietitian will talk to you about any special diet you need to follow. Often your diet and fluid intake may feel back to normal about 6 weeks after your surgery. Your diet and fluid needs will be based on your type of ostomy surgery.

The following are long-term diet and fluid guidelines for ileostomy:

- Eat small meals or snacks during the day.
- Drink 8 to 10 cups of non-caffeinated fluid during the day to stay hydrated.
- Chew your food well to help with digestion and decrease your risk of a blockage.
- It may help to eat certain foods, such as bananas, applesauce, and peanut butter, to help thicken stools and control diarrhea.

Cuntadaada qalliinka kadib: muddo dheer

Marka aad ka bogsato qalliinka, dhakhtarkaaga, kalkaalisada, ama cunto-yaqaanka ayaa kaala hadli doona cunto kasta oo gaar ah oo aad u baahan tahay inaad raacdo. Badanaa cuntadaada iyo qaadashada dareeraha ayaa laga yaabaa inay caadi ku soo noqdaan ilaa 6 toddobaad ka dib qalliinka. Cuntadaada iyo baahida dareerahaagu waxay ku salaysnaan doonaan nooca qalliinka duleelkaaga.

Kuwa soo socda waa cunto-cunno waqti-dheer ah iyo tilmaamaha dareeraha ee ileostomy:

- Cun cunto yaryar ama cunto fudud inta lagu jiro maalinta.
- Cab 8 ilaa 10 koob oo dareere ah oo aan lahayn kafeein inta lagu jiro maalinta si aadan u fuuqbixin.
- Si fiican u calaaji cuntadaada si ay kaaga caawiso dheefshiidka oo aad hoos u dhigto khatartaada xannibaad.
- Waxaa laga yaabaa in ay ku caawiso in la cuno cuntooyinka qaarkood, sida muuska, tufaaxa, iyo subagga lawska, si ay u caawiso saxarada dhumucda iyo xakamaynta shubanka.

- Foods that are spicy, fried, greasy, acidic, or high in sugar can cause you to have more stools.
- Check the output and call your doctor right away if there is more than 1200 mL in 24 hours.
- Your stool will become thick like pudding over time.
- It is important to talk with your doctor or pharmacist about any medicines you take. Your ileostomy may change your ability to absorb certain medicines.

It is important to know how certain foods may affect the output. You may find it helpful to eat foods in smaller amounts, until you know how your body may respond.

- Cuntooyinka basbaaska leh, shiilan, dufan leh, aashitada leh, ama sonkorta ku badan tahay waxay kuu keeni karaan saxaro badan.
- Hubi wax soo saarka oo wac dhakhtarkaaga isla markiiba haddii ay jirto wax ka badan 1200 ml 24 saacadood gudahood.
- Saxaradaadu waxay noqon doontaa mid dhumuc weyn leh sida soorta oo kale waqti ka dib.
- Waa muhiim inaad kala hadasho dhakhtarkaaga ama farmashiistaha wixii daawooyin ah oo aad qaadato. Ileostomy-gaaga ayaa laga yaabaa inuu beddelo awooddaada inaad nuugto daawooyinka qaarkood.

Waa muhiim in la ogaado sida cuntooyinka qaarkood ay u saameyn karaan wax soo saarka. Waxaa laga yaabaa inaad ku caawiso inaad cunto cunto qadar yar, ilaa aad ogaato sida jidhkaagu uga jawaabi karo.

Jaantuska Cunnada Ileostomy/Qalliinka Kaadi/Saxaro-saaraha

Ileostomy Food Chart

It is important to know how certain foods may affect the output from your ostomy. You may find it helpful to eat food in smaller amounts until you know how your body may respond. This list may help.

Cause Food Blockage

- Apple peels
- Cabbage, raw
- Celery
- Chinese vegetables
- Corn, whole kernel
- Coconuts
- Dried fruit
- Mushrooms
- Nuts
- Oranges
- Pineapple
- Popcorn
- Seeds

Odor Producing

- Asparagus
- Baked beans
- Broccoli
- Cabbage
- Cod liver oil
- Eggs
- Fish
- Garlic
- Onions
- Peanut butter

Waa muhiim in la ogaado sida cuntooyinka qaarkood ay u saameyn karaan wax soo saarka duleelkaaga. Waxaa laga yaabaa inaad ku caawiso inaad cunto cunto qadar yar ilaa aad ka ogaato sida jidhkaagu uga jawaabi karo. Liiskan ayaa laga yaabaa inuu ku caawiyo.

Sababa Cuntadu Xannibanta

- Diirka tufaax
- Kaabashka, ceeriin
- Selery
- Khudaarta Shiinaha
- Galley, qub dhan
- Qumbaha
- Miro la qalajiyey
- Likuhu
- Iowska
- Liinta
- Cananaaska
- Salool
- Abuurka

Soo Saara ur

- Asparagus
- Digir la dubay
- Brokoli
- Kaabash
- Saliida beerka dhogorta
- Ukun
- Kalluunka
- Toonta
- Basasha
- Subagga Iowska

- Some vitamins
- Strong Cheese

Gas Producing

- Alcoholic beverages
- Beans
- Soy
- Cabbage
- Carbonated beverages
- Cucumbers
- Dairy products
- Chewing gum
- Milk
- Nuts
- Onions
- Radishes

Color Changes

- Asparagus
- Beets
- Food colors
- Iron pills
- Licorice
- Red Jell-O
- Strawberries
- Tomato sauces

Cause High Output

- Alcoholic beverages
- Whole grains
- Bran cereals
- Cooked cabbage
- Fresh fruits
- Greens, leafy
- Milk
- Prunes
- Raisins
- Raw vegetables
- Spices

- Fiitamiinada qaar
- Jiis xoog leh

Soo Saara Gaaska/dhuus

- Cabitaanka khamriga
- Digir
- Soy
- Kaabash
- Cabbitaannada kaarboonaysan
- Qajaarka
- Waxyaabo laga sameeyay caanaha
- Xanjada
- Caanaha
- Iowska
- Basasha
- Radishes

Isbedelka Midabka

- Asparagus
- Beets
- Midabada cuntada
- Kiniinnada birta
- Licorice
- Casaan Jell-O
- Strawberries
- Maraqa yaanyada

Sababa Wax-soo-saarka Sare

- Cabitaanka khamriga
- Miraha xuubka leh
- Badarka bran
- Kaabashka la kariyey
- Miraha fareeshka ah
- Cagaar, caleen
- Caanaha
- Manjooyin
- Sabiib
- Khudaarta ceeriin
- Xawaash

Output Control

- Applesauce
- Bananas
- Boiled rice
- Marshmallows
- Peanut butter
- Pectin supplement (fiber)
- Tapioca
- Toast

Odor Control

- Buttermilk
- Cranberry juice
- Orange juice
- Parsley
- Tomato juice
- Yogurt

Xakamaynta wax soo saarka

- Tufaaxa
- Muuska
- Bariis la kariyey
- Iacun
- Subagga lawska
- Kaabista pectin (fiber)
- Tapioca
- Toast

Xakamaynta Urta

- Caano subag
- Casiirka karamberriga
- Cabitaanka liinta
- Dhir
- Casiirka Yaanyada
- Garoor

Qaadashada Buunsho ee Ileostomy

Ileostomy Fiber Intake

If you have an ileostomy you may have been told not to eat high fiber foods. In some cases, you may also have been told to take fiber supplements. It is important to understand that there are 2 kinds of fiber and how each 1 may affect how your ileostomy works.

Soluble fiber

- Soluble fiber is found in the soft parts of many fruits and vegetables, such as the white, fleshy part of an apple.
- Soluble fiber absorbs water, turns into a gel, and slows the digestive system. It also helps keep stool soft to help it move more easily through your body.
- Things with soluble fiber include: psyllium products such as FiberCon or Metamucil and foods such as applesauce and bananas.
- People with ileostomies can benefit from taking soluble fiber. Your healthcare team may tell you to take fiber tablets or fiber supplements, such as Benefiber, to help slow your digestion and prevent dehydration.

Haddii aad leedahay ileostomy waxaa laga yaabaa in lagu sheegay inaad cunin cuntooyinka faybarku/buunshadu ku badan tahay. Xaaladaha qaarkood, waxaa laga yaabaa in sidoo kale lagu sheegay inaad qaadato kabka buunshada ah. Waa muhiim in la fahmo in ay jiraan 2 nooc oo fiber ah iyo sida mid kasta uu u saameyn karo sida uu u shaqeeyo ileostomygaaga.

Fiber milmi kara

- Fiberka milma waxa laga helaa qaybaha jilicsan ee miro iyo khudaar badan, sida qaybta cad, jidhka tufaaxa.
- Fiberka milma wuxuu nuugaa biyaha, wuxuuna isu beddelaa xabag, wuxuuna hoos u dhigaa habka dheefshiidka. Waxaa kale oo ay kaa caawinaysaa in ay saxaradu jilicsanaato si ay uga caawiso in ay si fudud ugu dhex socoto jidhkaaga.
- Waxyaabaha ay ku jirto fiber-ka milma waxaa ka mid ah: waxyaabaha psyllium-ka ah sida FiberCon ama Metamucil iyo cuntooyinka ay ka midka yihiin tufaaxa iyo muuska.
- Dadka qaba ileostomies waxay ka faa'iideysan karaan qaadashada fiber-ka milmaya. Kooxdaada daryeelka caafimaadka ayaa laga yaabaa inay kuu sheegaan inaad qaadato kiniinnada fiber-ka ah ama waxyaabaha dheeraadka ah ee fiber-ka, sida Benefiber, si ay kaaga caawiso inay hoos u dhigto dheefshiidkaaga oo ay uga hortagto fuuqbaxa.

Insoluble fiber

- Insoluble fiber is found in the rinds or stringy parts of fruits and vegetables, such as the outer peel or the skin of an apple.
- Insoluble fiber is called insoluble because it does not change when water is added to it. Insoluble fiber helps people who do not have an ileostomy to have regular bowel movements and firm stools.
- Examples of foods with a lot of insoluble fiber include broccoli, corn, celery, cashews, pineapple, and raisins. Foods with a lot of insoluble fiber are sometimes called “high residue” or “roughage.”
- People with ileostomies are at risk for a problem called food blockage of the stoma. They must use care when eating foods with a large amount of insoluble fiber.
- People with ileostomies should limit the amount of insoluble foods they eat at 1 time.
- Chew these types of foods really well to reduce your risk of a blockage.

Fluids

- Fluid intake is always important for digestion and helps prevent dehydration.
- Water works together with soluble fiber to help food move smoothly through the digestive system.
- It is very important for patients using fiber supplements to be well hydrated. Drink 8 to 10 cups of non-caffeinated fluid each day to stay hydrated.

Fiber aan milmin

- Fiber aan milmi karin ayaa laga helaa lafaha ama qaybaha xadhkaha leh ee miraha iyo khudaarta, sida diirka sare ama maqaarka tufaaxa.
- Fiberka aan milmin waxaa loo yaqaannaa mid aan milmi karin, sababtoo ah ma isbeddelo marka biyaha lagu daro. Fiberka aan milmi karin wuxuu caawiyaa dadka aan lahayn ileostomy si ay u yeeshaan saxaro joogto ah iyo saxaro adag.
- Tusaalooyinka cuntooyinka leh fiber badan oo aan milmi karin waxaa ka mid ah brokoli, galley, celery, cashews, cananaaska, iyo sabiib. Cuntooyinka leh fiber badan oo aan milmi karin ayaa mararka qaarkood loo yaqaan “hadhaaga sare” ama “roughage.”
- Dadka qaba ileostomies waxay halis ugu jiraan dhibaato loo yaqaan xannibaadda cunnada ee duleelka. Waa inay isticmaalaan daryeel marka ay cunayaan cuntooyin leh xaddi badan oo fiber aan milmi karin.
- Dadka qaba ileostomies waa inay xaddidaan tirada cuntooyinka aan milmi karin ee ay cunaan 1 mar.
- Cunnooyinka noocan ah si fiican u calalin si aad u yarayso halista xannibaadda.

Dheecaannada

- Qaadashada dareeraha ayaa had iyo jeer muhiim u ah dheefshiidka waxayna ka caawisaa ka hortagga fuuq-baxa.
- Biyuhu waxay la shaqeeyaan fiber milmi kara si ay cuntada uga caawiyaan inay si habsami leh u dhex maraan habka dheefshiidka.
- Aad bay muhiim ugu tahay bukaanada isticmaalaya dheellitirka fiber-ka inay si fiican u qoynaadaan. Cab 8 ilaa 10 koob oo dareere ah oo aan kafeeyn lahayn maalin kasta si aad u fuuqbixin.

Khayraadka loogu talagalay dadka qaba Ostomies

Resources for People With Ostomies

You will need supplies for your new ostomy. When you are discharged from the hospital these supplies must be ordered through a **durable medical equipment (DME)** company. These items are not available over-the-counter at local pharmacies. You may have a “specialty” pharmacy in your area that can order these supplies for you.

It is important to check with your insurance company to see what your plan covers and if any deductibles apply. DME companies accept most insurances. You can also pay out of pocket for your supplies from a company that makes these supplies, a specialty pharmacy, or an online company (such as Amazon), if you wish to do so.

Most ostomy supply companies will send some free samples to trial if you are interested in or need to change your supplies.

- Before you leave the hospital, arrangements will be made for a DME company to provide your ostomy supplies.

DME Company Name:

Phone Number:

Waxaad ugu baahan doontaa agabyo duleelkaaga cusub. Marka lagaa saaro isbitaalka agabyadan waa in laga dalbadaa shirkad **qalab caafimaad oo waara (DME)**. Alaabooyinkan lagama heli karo dukaamada ama farmashiyaha maxaliga. Waxaa laga yaabaa inaad deegaankaaga ku yaalo farmashiye “gaar ah” kaasoo kuu dalbi kara alaabtan.

Waa muhiim inaad ka hubiso shirkaddaada caymiska si aad u aragto waxa qorshahaagu daboolayo iyo haddii wax laga jari karo ay khusayso. Shirkadaha DME waxay aqbalaan caymisyada intooda badan. Waxaa kale oo aad jeebka ka bixin kartaa agabyadaada shirkad samaysa agabyadan, farmashiye khaas ah, ama shirkad online ah (sida Amazon), haddii aad rabto inaad sidaas samayso.

Badi shirkadaha agabka ostomy-ga ayaa soo diri doona xoogaa muunado bilaash ah si tijaabo ah haddii aad xiisaynayso ama aad u baahan tahay inaad beddesho sahaydaada.

- Kahor intaadan ka bixin isbitaalka, waxaa loo diyaarin doonaa shirkad DME ah inay ku siiso agabyadaada ostomy.

Magaca Shirkadda DME:

Lambarka Taleefanka:

- It will take 5 to 7 business days after you leave the hospital for the DME company to ship the supplies to you. The DME company will call you to confirm your personal information and the address where the items should be sent. The hospital will provide you with a 2 week supply of items to use until the delivery arrives. You will need to re-order your ostomy supplies each month. Most DME companies do not automatically ship the supplies to you each month.
- If you go home from the hospital with home healthcare services and only have Medicare coverage (no supplement or managed Medicare insurance plan), the home healthcare agency will arrange for the DME company to provide your ostomy supplies during the time you receive their services. If the home healthcare agency is unable to make this arrangement, call your surgeon's office for help with a referral to a DME company. Be sure to update DME information when your home health services end.

Home Healthcare Agency Name:

Phone Number:

- If you are discharged from the hospital to an extended care facility, such as a skilled nursing or inpatient rehab facility, the facility will provide your ostomy supplies. When you are ready for discharge from the facility, the discharge planner will help arrange home healthcare services and/or a DME company to provide your ostomy supplies once you are home.

- Waxay qaadan doontaa 5 ilaa 7 maalmood oo shaqo kadib markaad ka baxdo isbitaalka si ay shirkadda DME kuugu soo dirto alaabta. Shirkadda DME ayaa ku soo wici doonta si ay u xaqiijiso macluumaadkaaga gaarka ah iyo ciwaanka meesha alaabta lagu diri karo. Cisbitaalku wuxuu ku siin doonaa 2 toddobaad oo agab ah oo aad isticmaasho ilaa dalabka ka yimaado. Waxaad u baahan doontaa inaad dib u dalbato sahaydaada ostomy bil kasta. Inta badan shirkadaha DME si toos ah kuuguma soo dejiyaan agab bil kasta.
- Haddii aad isbitaalka uga tagto guriga adeegyada daryeelka caafimaadka oo aad haysato caymiska Medicare oo qura (aan jirin wax kabis ah ama qorshe caymis oo Medicare maareyso), hay'adda daryeelka caafimaadka guriga ayaa kuu diyaarin doonta shirkadda DME in ay ku siiso agabyada ostomy inta lagu jiro wakhtiga aad heleyso adeegyadooda. Haddii hay'adda daryeelka caafimaadka gurigu ay awoodi waydo in ay samayso qabanqaabadan, wac xafiiska dhakhtarkaaga qalliinka si aad uga caawiso u gudbinta shirkadda DME. Hubi inaad cusboonaysiiso macluumaadka DME marka adeegyada caafimaadka gurigaagu dhammaado.

Magaca Wakaaladda Daryeelka Caafimaadka Guriga:

Lambarka Taleefanka:

- Haddii lagaa saaro cusbitaalka laguna geeyo goob daryeel oo fidsan, sida kalkaaliye xirfad leh ama xarunta baxnaaninta bukaan-jiif, xaruntu waxay ku siin doontaa agabyada daloolka. Marka aad diyaar u tahay in laga saaro xarunta, qorshayeeyaha ka saarida ayaa kaa caawin doona diyaarinta adeegyada daryeelka caafimaadka guriga iyo/ama shirkadda DME si ay u bixiso sahaydaada ostomy marka aad guriga joogto.

Frequently asked questions and answers

Why haven't I received any supplies yet?

If you have been home for more than 1 week and have not received a call from a DME company or home healthcare agency about your supplies, call the company or agency to ask about your shipment. The DME company or home healthcare agency phone numbers can be found on your discharge paperwork. These companies often need to talk with you before the order can be shipped. If you are not sure who to call or are unable to get what you need, please call your surgeon's office.

Who should I call if I have questions about my ostomy supplies?

Questions about your ostomy supplies can be answered by your home healthcare agency or your DME company. If they are unable to answer your questions, please call your surgeon's office.

What DME company will provide my ostomy supplies and what is their phone number?

Please review the ostomy folder you received when you were in the hospital and look for the "How to Obtain Ostomy Supplies After Hospital Discharge" form for information on the company who will provide your ostomy supplies. If you have already received a shipment from the DME company, you can find their phone number on the booklet or the packing slip that came in the box with your supplies.

Su'aalaha iyo jawaabaha inta badan la is weyddiyo

Waa maxay sababta aan weli wax agab ah u helin?

Haddii aad guriga joogtay in ka badan 1 todobaad oo aadan ka helin wicida shirkadda DME ama wakaalada daryeelka caafimaadka guriga ee ku saabsan alaabtaada, wac shirkada ama wakaalada si aad u waydiiso shixnadaada. Shirkadda DME ama namborada wakaalada daryeelka caafimaadka guriga waxaa laga heli karaa warqada saaristaada. Shirkadahani waxay inta badan u baahan yihiin inay kula hadlaan ka hor inta aan dalabka la soo dejin. Haddii aadan hubin cidda aad wacdo ama aadan awoodin inaad hesho waxaad u baahan tahay, fadlan wac xafiiska dhakhtarkaaga qalliinka.

Yaan waci karaa haddii aan qabo su'aalo ku saabsan agabkayga ostomy?

Su'aalaha ku saabsan agabkaaga ostomy waxaa ka jawaabi kara hay'adda daryeelka caafimaadka gurigaaga ama shirkadda DME. Haddii aysan awoodin inay ka jawaabaan su'aalahaaga, fadlan wac xafiiska dhakhtarkaaga qalliinka.

Waa maxay shirkadda DME oo bixin doonta agabkeyga ostomy-ga oo waa maxay taleefon lambarkoodu?

Fadlan dib u eeg galka ostomy-ga ee aad heshay markii aad isbitaalka ku jirtay oo raadi foomka "Sida loo Helo Alaabta Ostomy Ka Dib ka Bixida Isbitaalka" wixii macluumaad ah ee ku saabsan shirkadda bixin doonta agabyadaada ostomy-ga. Haddii aad shixnad ka heshay shirkadda DME, waxaad ka heli kartaa lambarkooda buug-yaraha ama xaashida baakadka ee ku dhex jirta sanduuqa alaabtaada.

What am I supposed to do if I run out of supplies?

If you are running low on supplies, call your DME company to request more supplies. Most insurance companies will cover 1 shipment of supplies each month that includes a certain amount of each item. If you are unable to get more supplies from your DME company for any reason, call your surgeon's office.

How can I get ostomy supplies after my hospital discharge if I do not have medical insurance?

A few samples can be requested from companies that make these supplies for a short time period until you are able to order supplies. If you are paying out of pocket for your supplies, the prescription you were given at the hospital has the list of recommended supplies that you can use when you call an ostomy supplier.

Maxaan sameeyaa haddii agabku iga dhamaado?

Haddii agabku kaa dhamaanayo, wac shirkaddaada DME si aad u codsato agab dheeraad ah. Inta badan shirkadaha caymisku waxay dabooli doonaan 1 shixnadaha agabka ah bil kasta oo ay ku jirto qaddar go'an oo shay kasta ah. Haddii aadan awoodin inaad agab dheeraad ah ka hesho shirkaddaada DME sabab kasta ha ahaatee, wac xafiiska dhakhtarkaaga qaliinka.

Sideen ku heli karaa agabka ostomy ka dib marka isbitaalka la iga saaro haddaan lahayn caymis caafimaad?

Dhowr muunado ayaa laga codsan karaa shirkadaha sameeya agabkan muddo gaaban ilaa aad ka dalban karto agabyada. Haddii aad jeebkaaga ka bixinayso sahaydaada, qoraal-daweedka lagugu soo qoray ee cisbitaalka ayaa leh liiska agabka lagu taliyay ee aad isticmaali karto marka aad wacdo alaab-qeybiye ostomy ah.

Resources to help with ostomy supplies

If you have trouble getting your ostomy supplies or your health insurance does not cover the cost of your supplies, the following resources may be able to help you:

Coloplast – coloplast.us/ostomy

Email: info-us@coloplast.com

Phone: 877-858-2656

May provide a 3 to 6 month supply of some ostomy supplies. You will need to submit an application.

Columbus Cancer Clinic

lifecarealliance.org/programs/cancer-clinic

Phone: (614) 263-5006

Convatec Patient Assistance

meplus.convatec.com/articles/patient-assistance-program

Phone: 800-422-8811

May provide a 3-month supply of some supplies, 1 time a year.

Hollister – hollister.com/en/ostomycare

Phone: 888-808-7456

Marlen – marlenmfg.com

Email: info@marlenmfg.com

Phone: 216-292-7060

Nu-Hope – nu-hope.com

Email: info@nu-hope.com

Phone: 800-899-5017

Ostogroup – ostogroup.org

Phone: 561-203-5886

Gives donated ostomy products to people without health insurance, you pay shipping and handling.

Kheyradyada kaa caawiya agabyada ostomy

Haddii ay dhibaato kaa haysato helitaanka agabyadaada ostomy ama caymiskaaga caafimaad aanu daboolin kharashka agabyada, kheyradyada soo socda ayaa laga yaabaa inay ku caawiyaan:

Coloplast - coloplast.us/ostomy

limayl: info-us@coloplast.com

Taleefanka: 877-858-2656

Waxa laga yaabaa inay bixiso agabka 3 ilaa 6 bilood ee agabyada ostomy ee qaarkood. Waxaad u baahan doontaa inaad soo gudbiso codsi.

Columbus Cancer Clinic

lifecarealliance.org/programs/cancer-clinic

Taleefanka: (614) 263-5006

Convatec Patient Assistance

meplus.convatec.com/articles/patient-assistance-program

Taleefanka: 800-422-8811

Waxa laga yaabaa inay bixiso agabka 3-bilood ee agabyada qaarkood, 1 mar sannadkii.

Hollister - hollister.com/en/ostomycare

Taleefanka: 888-808-7456

Marlen - marlenmfg.com

Ema il: info@marlenmfg.com

Taleefanka: 216-292-7060

Nu-Hope - nu-hope.com

limayl: info@nu-hope.com

Taleefanka: 800-899-5017

Ostogroup - ostogroup.org

Taleefanka: 561-203-5886

Waxay siisaa alaabada ostomy ee loogu deeqay dadka aan lahayn caymis caafimaad, waxaad bixisaa soo-rarida iyo maaraynta.

Parthenon Medical Supply

parthenoninc.com/ostomy-supplies

Phone: 800-453-8898

Help with supplies for people without health insurance. May be able to offer reduced-price ostomy supplies.

Perma-Type – perma-type.com

Email: reachus@emailptusa.com

Phone: 800-243-4234

Torbot – torbot.com

Email: contactus@torbot.com

Phone: 800-545-4254

Ostomy Association of America (UOAA)

ostomy.org

Phone: 800-826-0826

Offers a list of resources that may offer assistance on a short-term basis.

Parthenon Medical Supply

parthenoninc.com/ostomy-supplies

Taleefanka: 800-453-8898

Caawimada agabka dadka aan lahayn caymis caafimaad. Waxa laga yaabaa in ay awoodaan in ay bixiyaan agabyada ostomy-ga qiimo-jaban.

Perma-Type – perma-type.com

limayl: reachus@emailptusa.com

Taleefanka: 800-243-4234

Torbot - torbot.com

limayl: contactus@torbot.com

Taleefanka: 800-545-4254

Ostomy Association of America (UOAA)

ostomy.org

Taleefanka: 800-826-0826

Waxay bixisaa liis agab ah oo laga yaabo inay ku siiyaan caawimo ku salaysan muddo gaaban.

Other helpful resources

Wound, Ostomy, and Continence Nurses Society

Phone: 888-224-9626

Society can provide the location of the nearest ostomy nurse at wocn.org/learning-center/patient-resources

American Cancer Society – cancer.org

Phone: 800-ACS-2345 / (800) 227-2345

Crohn's and Colitis Foundation –

crohnscolitisfoundation.org

Email: info@crohnscolitisfoundation.org

Phone: 800-932-2423

Interstitial Cystitis Association

ichelp.com

Email: ICAMail@ichelp.org

Phone: 703-442-2070

Ilaaha kale ee waxtarka leh

Wound, Ostomy, and Continence Nurses Society

Taleefanka: 888-224-9626

Society waxay ku siin kartaa goobta kalkaaliyaha ostomy-ga ee kuugu dhow wocn.org/learning-center/patient-resources

Bulshada Kansarka Maraykanka -

cancer.org

Taleefanka: 800-ACS-2345 / (800) 227-2345

Crohn's and Colitis Foundation –

crohnscolitisfoundation.org

limayl: info@crohnscolitisfoundation.org

Taleefanka: 800-932-2423

Interstitial Cystitis Association

ichelp.com

Emayl: ICAMail@ichelp.org

Taleefanka: 703-442-2070

National Association for Continence

nafc.org

Phone: 800-252-3337

**National Institute of Diabetes and Digestive
and Kidney Diseases**

niddk.nih.gov

Email: healthinfo@niddk.nih.gov

Phone: (800) 860-8747

National Association for Continence

nafc.org

Taleefanka: 800-252-3337

**National Institute of Diabetes and Digestive
and Kidney Diseases**

niddk.nih.gov

limayl: healthinfo@niddk.nih.gov

Taleefanka: (800) 860-8747

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