Colostomy irrigation
Patient education

A colostomy irrigation stimulates your bowel to empty. Routine irrigations may establish regular bowel movements, which gives you control over your elimination patterns. To encourage a regular bowel pattern, always irrigate at the same time of day. Consult with your WOC Nurse prior to beginning an irrigation program.

**You will probably be advised not to irrigate if:**
- You have a parastomal hernia
- You have a stomal prolapse
- You are undergoing abdominal radiation*
- You are undergoing chemotherapy*

*After treatments are complete, your physician may approve resumption of regular irrigations.

**Supplies needed**
- Coloplast® irrigation bag with cone tip
  - Order #: __________  Other: ______________________
- Belt
  - Order #: __________  Other: ______________________
- Coloplast® irrigation sleeve
  - Order #: __________  Other: ______________________
- Plastic bag
  - Order #: __________  Other: ______________________
- Water-based lubricant
  - Order #: __________  Other: ______________________
- New pouching system
  - Order #: __________  Other: ______________________

**Things to remember**
Cramping during irrigation may mean the water is too cold, the irrigation bag is too high or the water is going in too fast. If cramping starts during your irrigation, clamp off the tubing, but do not remove the cone tip from the stoma. When the cramping has stopped, re-open the clamp and allow the remainder of the water to flow.
Directions *(The entire process generally takes 60 minutes.)*

1. Fill the irrigation bag with lukewarm tap water (never hot or cold) and hang the bag at shoulder level. Water should run through the tubing to clear any air in the tubing, once the tubing is clear clamp off the tubing. Begin with 250 ml of water the first day and increase the amount each day by 250 ml up to 1000 ml. Later, you can use the smallest amount that makes you regular.

2. Position the irrigation bag on the hook with the bottom of the bag level with your shoulder.

3. Apply the irrigation sleeve to the skin barrier flange if a two-piece system is used or attach the sleeve to the baseplate that comes with the system and hold in place using an ostomy belt. There are also disposable adhesive sleeves that may be attached directly to the skin.

4. Sit on the toilet or on a chair facing the toilet. Place the bottom of the irrigation sleeve into the toilet to drain, or if you prefer to move about, close the bottom of the bag with a clamp.

5. Lubricate the cone tip. Unclamp irrigation tubing and establish a rate of water flow. It should take 5-10 minutes for the water to go into your bowel.

6. Gently insert cone tip into your stoma. Hold cone in place. If water leaks around the cone tip during your irrigation, reposition the cone or gently rotate the cone.

7. When the desired amount of water has been used, clamp the tubing and remove the cone tip. Wait 10-15 minutes for initial stool and water to be expelled.

8. For the next 15-30 minutes you have the option of clamping the bottom of the irrigation sleeve and moving around.

9. When your fecal output has stopped, remove and rinse the irrigation sleeve. Clean your irrigation equipment using a mild soap and lukewarm water. Hot water may damage the plastic sleeve. Then continue with the usual pouch application procedure.

Additional information

WOC Nurse: ____________________________________________

Physician: ____________________________________________

Ostomy supplier: ______________________________________

Phone number: ________________________________________

Address: _____________________________________________

Special instructions

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The recommendations and information in this material should not be considered a substitute for personal medical advice or diagnosis.