



# New horizons

Macomb County MI Association & The Ostomy Association of Metro Detroit  
Serving Southeastern Michigan since 1976

VOLUME XXIX NO. 5

FALL 2018

## MISSION STATEMENT

To provide information, peer support, and assistance to our members, their families, caregivers or anyone with an ostomy, diversion or continent surgery.

**Disclaimer:** The articles and information contained in this newsletter are expressly for informational purposes and may not be applicable to everyone. Always check with your doctor or CWOC Nurse if you have any questions or concerns about your condition and what is best for you.

## INSIDE THIS ISSUE

Macomb Chapter Information	2
Metro Detroit Chapter Information	2
Advocacy Ostomy News	3
Bulletin Board	4
World Ostomy Day Run	5
Feature an Ostomate	5
Chapter Chatter	6
CWOC Nurses	7
Featured Ostomate	8
Advocacy Ostomy News (continued)	9
Stoma Names	10
Ostomy Glossary	11
In Memoriam	11
Support Group Application	12
Phoenix Application	12

## EDITOR'S CORNER

For this newsletter, 'change' is the buzzword. There is a change in the time and the meeting place of the Macomb chapter. There is also a change in the format of the newsletter and a change in officers of the Macomb chapter. Additional information is in the newsletters clarifying the changes to the time and location. These changes are necessary for a more informative and productive support group. Please note these changes so that you are well in tune to the happenings occurring in our support groups.

Please note the new column in the newsletter, Feature An Ostomate. If you would like to be featured with your story, please submit your information to me. One ostomate will be featured per newsletter.

This is your newsletter, so if you have an article or other appropriate ostomy information that you would like to have featured in the newsletter, please contact me or one of the other support group officers of your chapter. The deadline for submission for the next newsletter is November 1st.

Marjorie

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We are affiliated support groups of the United Ostomy Associations of America (UOAA) with IRS 501c3 charity status

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<b><u>CWOCN</u></b>		Newsletter
<b>Telephone Hotline</b>	(toll free)	866-678-6698

**MEETING DATE AND TIME**

The meeting is now from 3:00 PM to 4:30 PM on the first Sunday of the month, with the exception of July and August, but we are available for consultations or visitations.

**MEETING PLACE**

The meeting location for the Macomb County chapter has changed. The new location for the meetings is the Owen Jax Recreation Center, 8207 E. Nine Mile Rd., Warren, Michigan. It is one block east of Van Dyke Avenue, next to the fire station.

**MEETING DATE AND TIME**

We meet at 1:30 PM on the second Sunday of the month (the third Sunday if the second Sunday is a holiday). We do not meet in the months of June, August and December. Anyone with an interest in ostomies is welcome.

**MEETING PLACE**

We meet at St. Mary Mercy Hospital, 36475 Five Mile Road, Livonia, MI 48154. The phone number is 734-655-4800. We meet in Classroom #1, Women's Birthing Center, 1st floor, South entrance off Levan Road (south of emergency room entrance). The telephone number is 734-655-4800).

**CALENDAR OF EVENTS**

September 9, 2018	Michelle Bliszack Safe'nSimple
October 6, 2018	World Ostomy Day Inaugural Run for Resilience 5K Harrison Township, MI
October 7, 2018	STOMA Basics and Tricks as an Ostomate Kevin
November 4, 2018	Nicolette Tapert Certified Insurance Agent

**CALENDAR OF EVENTS**

September 9, 2018	Dr. Elizaabeth Borg 10 Natural Ways to Enhance Your Digestion
October 6, 2018	World Ostomy Day Inaugural Run for Resilience 5K Harrison Township, MI
October 14, 2018	Aaron Wooster Partner at Jackson Kennedy Discussion on all things Medicare: Parts A, B, C, D and Medigap
November 14, 2018	Open Discussion

July 16, 2018

**Advocacy, Ostomy News**  
**Study Shows Patients Need More Ostomy Information**

By Leslie Riggle Miller, M.A.

My name is Leslie Miller and I am a 25-year cancer survivor and a former ostomate. I had a partial colectomy at age sixteen in 1993 resulting from a cancerous tumor attached to the rectum. I was given a colostomy, for which I had never heard of before I woke up with one! Nine-reconstructive surgeries later, I received a takedown (reversal of colostomy) in 1997. Now, three lives later I am doctoral student at the University of Oklahoma in the Department of Sociology. My primary research area is Medical Sociology.

I am excited to share with you some preliminary results of a very important study on the lives of ostomates. I began this research project in the summer of 2017 called Peoples' Experiences With Pouches (P.E.W.P.) Study. I am interested in the difficulties ostomates face in their everyday lives, as well as the level of supportive care they receive in current medical practice. Long-term goals include improving hospital processes and nurse training with respect to ostomy care and instruction.

**Background:** An important component of our healthcare system is when patients and providers meet and interact together. During this interaction, patients are able to explain their ailments and tell their story, and providers are able to provide care, instruction, and diagnoses. There are positive and negative outcomes for patients based on this interaction, such as patients feeling heard, respected and cared for, but also there can be patient dissatisfaction, lack of trust, and misdiagnoses. Effective communication from providers is not only critical for all patients, but possibly more so for patients who receive a life-changing surgery, such as an ostomy.

The communication from providers when ostomates first receive their appliance is critical. Provider communication not only needs to be effective for ostomates' ability to go home and take care of their appliance, but also it needs to be efficient given the short turnaround time in release from the hospital. As such, in my study, I examine provider communication and information when ostomates first receive their appliance.

**Study Background and Results:** Currently, there are **391 ostomates** from the U.S. and abroad included in the study. 89% reside in the U.S. with 11% residing outside of the U.S. (predominantly from the United Kingdom and Canada). The research questions that I have addressed are based on ostomates' initial experiences at the hospital when they first

receive their ostomy. **The research question that I will address in this post is, "Do ostomates receive adequate information and communication from providers while at the hospital?"** The answer to this question is "no." I found that **almost half (49%) of the ostomates felt that they received inadequate information and communication from their provider at the hospital.** Below are the areas of provider care that ostomates reported that they either did not receive or an inadequacy in care that they experienced:

**Attitude.** The provider said something that hurt the patient's feelings or acted in a way that dissatisfied the patient, such as the provider was arrogant or rude.

**Ostomy Nurse.** The patient wanted to see an ostomy-specific nurse sooner than they did or have follow-up appointments with an ostomy nurse but did not get to.

**Providers Lacked Knowledge.** Patients felt that providers were not educated enough about ostomy care or were lacking in their knowledge on ostomies.

**Products.** Patients were not told that there were other products on the market that may work better for their type of stoma or situation.

**Preoperative Information.** Patients did not receive pre-op information or wanted more preparation before surgery.

**Fixing Issues.** Patients were not told how to fix issues that arose once at home.

**Supervise Pouch Change.** Patient wanted to be supervised on how to change the pouch or more practice with changing it with an ostomy nurse or more practice changing it, in general, before going home but did not get to.

**Wrong Information.** Patients were told the wrong information from providers.

**Missing Information.** Patients were not told all of the information that they needed or wanted on how to care for their ostomy or other options available.

**Lacked Support Information.** Patient wanted to be told about ostomy support groups or links to support information or meet with a current ostomate, but did not receive this.

**Lacked Emotional Support.** Patient did not receive any emotional support from their provider and they wanted to.

# BULLETIN BOARD

This news letter is printed quarterly Winter, Spring, Summer and Fall. It is issued in February, May, August and November.

Yearly Advertising Rates

Whole page \$400.00  
Half page \$300.00  
1/4 page \$200.00  
1/8 page \$100.00

To place an ad in New Horizons please contact us at:  
(email) [www.ostomy.org](http://www.ostomy.org)  
(phone) 800-826-0826  
Twitter.com/UOAA  
Facebook.com/UOAAinc.

The Macomb County group has added a PayPal link to it's website: [www.ostomysupport-macomb.org](http://www.ostomysupport-macomb.org). On this website one is able to pay dues or make donations online. Scroll down to the bottom of the Homepage and you will see the PayPal logo. It will also receive credit cards.

**REMINDER**  
**DUES ARE DUE**

Yearly dues of \$15.00 are due by September 30th. You may return your dues in the self addressed envelope that is included in your newsletter or you may pay at the time of attendance to your next meeting.

**Visitation Program**

If you have recently had or are considering ostomy surgery, we can arrange for you to talk with a trained ostomy visitor who is living successfully with their ostomy.

Contact us toll free at (877)849-2076 or email at: [ostomyinfo@yahoo.com](mailto:ostomyinfo@yahoo.com).

We do not offer medical advice nor do we actively assist in physical care of the stoma.

**LOCAL HOSPITAL SUPPORT GROUP**  
**McLaren Macomb Ostomy Clinic**

Meetings are held at the Clinton Township and Chesterfield Township Clinics.  
For more information, please contact  
Emory Lowery  
586-421-3080

See Facebook and Twitter

Become a friend of the UOAA on Facebook and interact with thousands of other ostomates at [Facebook.com/UOAAinc](http://Facebook.com/UOAAinc). Or follow them on Twitter, get updates, links to photos or articles and much more at [Twitter.com/UOAA](http://Twitter.com/UOAA).

**????? ADDRESS CHANGE ?????**

If you have an address change, please notify your editor or one of the officers of your support group. Returned newsletters cost in excess of \$1.50 for returned copies. This is an expense that can be avoided if we have your correct address.

**Remember to THINK before you SPEAK, WRITE or ACT?**  
**Is it TRUE, HELPFUL, INSPIRING, NECESSARY and KIND?**

### Deodorant Tips For Ostomates

I have tried many different deodorants over the years. The commercial ones usually do a good job most of the time, however, I find I need to use more than the 6 to 10 drops to get good results. Also, the ones that use hydrogen peroxide are very effective, but they can bleach your clothes if it spills on your clothes. Non-medical deodorants are effective. Mouthwash works well. It does require more than the medical ones, but it can be cheap in comparison. I used to buy the biggest and cheapest bottle without alcohol in a scent that I liked. Alcohol isn't good for our stoma and could possibly be absorbed giving you a positive alcohol reading. Its drawback is that it was impractical to take with me. Tic-tacs and breath strips work well. Often, it takes 2 or 3 strips or tic-tacs to get the desired effect. Their big advantage is that they are so easy to slip into your pocket or purse. Foods can help manage odors too such as fresh parsley sprigs chewed well. I have one friend who swore by alfalfa pills. She took a couple of pills a day and said she rarely had a problem with odor. If you have any other tips, let us know.



World Ostomy Day 2018

October 6

7:00 AM—2:00 PM

\$27.50

Lake St. Clair Metropark

31300 Metro Parkway

Harrison Township, MI 48045

Ready, set, go! It's time to get your walking or running shoes on and plan to participate in UOAA's Inaugural Run for Resilience Ostomy 5k in Harrison Township, Michigan on Saturday, October 6, 2018. This Certified Run/Walk will be held within Lake St. Clair Metropark at the West Playfield Shelter near the Nature Center, taking participants on the scenic board walk along Lake St. Clair. The flat, out-and-back, 5K course will start and finish near the Nature Center. This is a timed race on a certified course for 5K participants. The Fun run will utilize the same course without a timer.

This event is held annually to raise awareness of this life-saving surgery, empower those living with an ostomy or continent diversion, and raise funds to support UOAA's programs and services. We encourage you to invite family, friends, co-workers, caregivers and others to join you at this special event to walk, run or just enjoy the family-friendly festivities.

All proceeds benefit the United Ostomy Associations of America, Inc. (UOAA), a 501(c)(3) organization. Donations are tax deductible.

For more details:  
Phone: 586-463-4581

Website:  
<http://www.metroparks.com/parks/lake-st-clair-metroparks/>

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Proud host and sponsor of the first annual UOAA Run for Resilience 5K/Fun Run/Walk, in Harrison Twp. at Lake St. Clair Metro Park on Saturday Oct. 6th, 2018. Register at [www.ostomy5k.org](http://www.ostomy5k.org).

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### MACOMB CHAPTER CHATTER

We want to thank everyone who came to our June 3<sup>rd</sup> picnic, and with a special thanks to Safe 'n Simple medical supplies, for being there and passing out samples and answering questions. The weather was not ideal, and not as many people came as last year, but those who came were glad they did.

#### IMPORTANT MEETING CHANGES

You should have received a post card and/or a telephone call telling you of our meeting place and time change. But we want to make sure everyone is aware in time for our September 9th meeting.

Due to the renovations taking place at St. John Macomb Hospital, we have lost our long-standing meeting space. But we have found another one in the Owen Jax Recreation Center at 8207 E. Nine Mile Rd. in Warren, a little east of Van Dyke.

We must also change our meeting time from 3:00 to 5:00 since a church is using the facility until 2:00, and we need time to set up for our meeting without being rushed. There is a kitchen at our disposal and plenty of parking space, and it is handicapped accessible and has an elevator (we will be on the lower level).

We have also made some changes of our officers. Joe Boesl is passing the role of Advertising Coordinator to Nancy Woolen, who has already found us a new supporter, Safe'n Simple. See ad on page 5.

Carol Wheatley "came out of retirement" to be our secretary. She couldn't stay away too long, and still wants to be useful.



PARTING SHOT

### METRO DETROIT CHAPTER CHATTER

I hope you all have had a good summer. It has been a bit hotter than many of us like, but it could have been worse when you look at areas of the country where the temp was 100+ for many days in a row. As ostomates, we have to be more careful about getting dehydrated. The best way to check on your status is to check the color of our urine. If it's pale or light yellow, you're probably fine. If it is very dark, you need more fluids as soon as possible. You could easily be on the verge of kidney damage, especially if your stoma isn't putting out fluids as well. Call your doctor or the ER for advice about going to the ER.

We received word this summer that Lavonne Martin died of an aneurysm. It was totally unexpected. Our prayers go out to her family. Please let us know if you hear of a member's death. We don't want to upset the family with newsletters or phone calls that can bring up sad memories.

Our July meeting was a lot of fun. We had open discussion on many topics. I hope that everyone realized that there is no one way to do most things. One topic was how do you change your appliance. Do you stand, sit or lie down when changing? You do what's best for you. When in doubt, ask your stoma therapist or your doctor for help.

Remember, we are not doctors. Always check out anything that sounds like medical advice with your doctor. When I was first diagnosed with a clotting disorder, one doctor asked what over the counter supplements I was taking. At the time, I didn't even take vitamins. So I said, "None." He said good. Never take any supplements without checking with us first as many of them interfere with clotting. I've taken his advice and I don't take anything over the counter without checking all its effects, side effects and interactions with other medicine and then asking my doctor if I still have questions.

Remember your \$15 dues for the 2018-2019 year are due. You can use the enclosed envelop or bring them to any meeting.

**WINTER IS COMING! MEETINGS WILL BE CANCELLED IF THERE IS A WEATHER ADVISORY OR WARNING ON MEETING DAYS.**

We are affiliated support groups of the United Ostomy Associations of America (UOAA) with IRS 501c3 charity status



**Certified Wound Ostomy Continence Nurses (CWOCN)**

If you need assistance in an area not listed, you may find WOC Nurses at 888-224-9626, 888-224-WOCN or wocn.org. At the bottom of the screen, click on 'Patient Care and Information'. Then click in the right hand column 'Find a WOC Nurse in my area'. You can also speak to a WOCN or ET Nurse by calling customer service at Hollister at 800-323-4060, ConvaTec at 800-422-8811 or Coloplast at 800-533-0464.

You may speak to a nurse 24/7 at AARP Nurse Health Line about any subject at 888-543-5630. The



**Beaumont Troy**

Catherine Dzus, RN CWOCN  
Maureen Rosette BSN, RN, CWOCN  
248-964-8882  
Carole Bauer, MSN, RN, ANP-BC, OCN, CWOCN  
Ostomy Nurse Practitioner  
844-259-7340

**Beaumont Grosse Pointe**

Outpatient Wound and Ostomy Treatment Center  
Renee Mende, BSN, RN, CWOCN  
313-473-6960  
Michelle Childs, RN,BSN<CWOCN  
313-473-1968

**Beaumont Royal Oak**

Inpatient Ostomy Assistance  
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Sonia Mae Garcia, BSN, CWOCN  
Deborah Oconnor, BSN, WOCN  
Ruth Ann Pendergrast, MSN, RN, AGPCNP-C, CWOCN  
Ostomy Nurse Practitioner  
248-551-2981  
Outpatient Ostomy Clinic  
248-551-0268

**Garden City Hospital, Westland**

Mary Lou Whalen, RN, BSN, CWOCN  
Jane Kuzak, MS, CWOCN, BC  
734-762-9935

**Karmanos Cancer Center**

Stephanie Kearney, RN, BSN, CWOCN  
Christy Barry, BSN, RN, CWOCN  
586-573-5992

**St. John Macomb-Oakland Hospital**

Sherrie Ingles, RN, BAS, WOCN  
586-573-5992

**St. John Hospital and Medical Center, Detroit**

HoneyLyn L. Lerias, RN, BAS, CWOCN  
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Jessica Kreig, RN, BSN, CWOCN  
313-343-7313  
Patricia Morrish, RN, BS, CWOCN

**Providence Hospital Stoma Clinic**

Sandy Miller, CWOCN  
248-849-3435  
Kathleen Stevens, BSN, RN, WON

**McLaren Medical Center Macomb**

Ostomy and Wound Treatment Center  
Cynthia Krease, RN, CWOCN  
586-493-1760

**Providence Park Stoma Clinic, Novi**

248-465-4859

**Henry Ford Hospital Main Campus**

Judith Kelly, CWOCN  
313-916-5259

**Henry Ford Macomb Hospital**

Ostomy Clinic  
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Joan Van Heck, BSN, RN, CWOCN  
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Emily Lowry, BSN, RN, CWOCN  
586-263-2077

**Henry Ford Fairlane Medical Center**

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Stoma Clinic  
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**St. Mary Mercy Hospital**

Donna Choma, MSA, RN, CWOCN  
734-555-3338

**DMC-Huron Valley Sinai Hospital, Commerce, MI**

Fabiola Jimenez, RN, MSN, ACNS-BC, CWOCN,  
CFCN, WOCN  
248-937-3479

**Harper University Hospital/Hutzel Women's Hospital**

Kathleen Herman, MS, RN, ANP-BC, CWOCN  
313-745-1846  
kglover@dmc.org

**ATTENTION NURSES**  
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### Eastpointe

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### Winter Park

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### Altamonte Springs

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Please be mindful that these are donated supplies and we may not have what you want but I am sure we have what you need "Pouches".

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Office: 877-567-8662

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### FALL'S FEATURED OSTOMATE

**Larry Monette** became an ileostomate as a result of ulcerative colitis. Larry tried several different treatments for the disease for eight years before having his first surgery in 2012 . At that time, eighty percent of his colon had become diseased.



Larry has undergone five surgeries in six years. The first surgery was in 2012 at William Beaumont Hospital in Royal Oak. The second surgery in 2013, was performed to reconstruct his stoma, as the first had been made too long.

In 2015, Larry had another surgery performed at the University of Michigan Hospital to repair a parastomal hernia, and another in 2106 to repair a ventral hernia. After the last two surgeries the abdominal muscles were left untied and Larry was in constant pain, and unable to eat.

In March, 2018, Larry had reconstructive surgery at the Cleveland Clinic. Hernias were repaired and his stoma was moved to the other side. Larry states that he felt better on the day of his last surgery. His health is much improved and is now off all pain medication and able to eat.

Despite the pain, Larry always wore that infectious smile and was eager to help in a heartbeat. He has arranged for his doctor , Dr. Michael J. Rosen from the Cleveland Clinic to visit with the group.

Larry is now smiling even more . He and his wife Norma are Greeters for the Macomb County Chapter. Thank you Larry for your volunteerism.



## In Recognition of Joe Boesl's Service.

Since many of our newer members do not know him, this is a brief summary of his service and support to the chapters. Joe first joined our group about fifteen years ago and took on the lone job of folding, labeling and taking the newsletters to the post office. At that time we were printing monthly newsletters instead of quarterly, and he did the work all by himself! Those of you who have served on our newsletter folding/ mailing team can appreciate how much time that took, and he did that for seven years! When he stopped, we had to replace him with four or five volunteers! Even though he has not attended meetings for several years, he had continued to be our advertising coordinator for the last eight years. So we salute you Joe Boesl, and thank you for your service to us.

Joe still volunteers at St. John Macomb Hospital, and if you ever go to the ER, he just may be the one to greet you.

(continued from page 3)

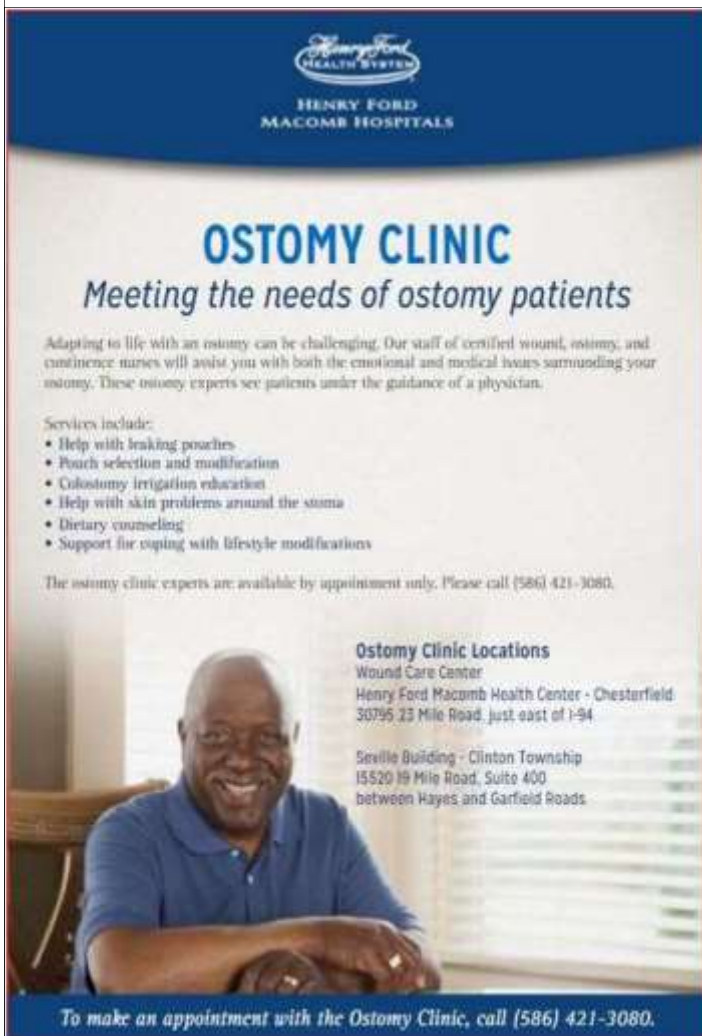
9

**Questions.** Patients had questions that were not answered at the hospital, or they wanted to call to ask questions.

**Hurried/Dismissed.** Patients felt like the nurse was hurried, or the patient did not receive overall basic care, making them feel as if they were dismissed. A majority of ostomates felt that they did not receive all of the information that they wanted or needed, with lacking product information as the second highest category for inadequacy.

Additionally, I examined whether provider communication and information were better or worse for ostomates who received their ostomy years ago versus more recently. The years of ostomy surgery ranged from having had surgery in 1953 to 2017. I found that the further back in years the ostomate had their surgery, the more likely they were to report adequate information and communication. This finding leaves us with additional questions, such as whether the quality of hospital provider care has decreased over time? What is driving this decrease in adequate information and communication for ostomates? I plan on determining the answers to these questions in future studies.

Closing Remarks: The main takeaway is that there is much work to be done with regard to ostomy care when people first receive their pouch. We hope our study (and future studies on this topic) will help in this endeavor. Finally, I encourage all of you to be active participants in your medical encounters when you meet with providers. It is important to ask questions and have an open dialog with your provider. The UOAA offers vast resources for new and seasoned **ostomates**. In particular, the UOAA has a "patient bill of rights" so that ostomates have the tools they need to advocate for their care. Please visit <https://www.ostomy.org/bill-of-rights/> to see this great resource. You are welcome to reach out to me if you have any questions.



The flyer features the Henry Ford Health System logo at the top, followed by the text "HENRY FORD MACOMB HOSPITALS". The main title is "OSTOMY CLINIC" in large blue letters, with the subtitle "Meeting the needs of ostomy patients" below it. A paragraph describes the clinic's services, and a list of services includes help with leaking pouches, pouch selection, colostomy irrigation education, skin problem help, dietary counseling, and support for lifestyle modifications. It notes that experts are available by appointment only. The bottom section lists two clinic locations: Wound Care Center at Henry Ford Macomb Health Center - Chesterfield, and the Seville Building in Clinton Township. A photo of a smiling man is on the left, and the contact information "To make an appointment with the Ostomy Clinic, call (586) 421-3080." is at the bottom.

**OSTOMY CLINIC**  
*Meeting the needs of ostomy patients*

Adapting to life with an ostomy can be challenging. Our staff of certified wound, ostomy, and continence nurses will assist you with both the emotional and medical issues surrounding your ostomy. These ostomy experts see patients under the guidance of a physician.

Services include:

- Help with leaking pouches
- Pouch selection and modification
- Colostomy irrigation education
- Help with skin problems around the stoma
- Dietary counseling
- Support for coping with lifestyle modifications

The ostomy clinic experts are available by appointment only. Please call (586) 421-3080.

**Ostomy Clinic Locations**  
Wound Care Center  
Henry Ford Macomb Health Center - Chesterfield  
30795 23 Mile Road, just east of I-94

Seville Building - Clinton Township  
15520 19 Mile Road, Suite 400  
between Hayes and Garfield Roads

To make an appointment with the Ostomy Clinic, call (586) 421-3080.

**14 hilarious, fitting and fun names ostomates gave to their stomas. Let's be honest, one of the best things about an ostomy is getting to name it.**

- 1. Poopapalooza** “Poopa for short. My doctors think I'm insane when I start telling them about Poopa and how she misbehaves. The way it just starts flowing reminds me of a volcano, I also thought I'd name her LavaLoo.” – Shelley N. Shelley has a colostomy because of rheumatoid arthritis, an autoimmune disorder not in her joints, it affects weakened organs.
- 2. Nope** “When it gets loud and someone says to me, was that you? I say, Nope. That way I'm not lying.” – Tim W. Tim had a temporary colostomy in an emergency surgery due to a ruptured diverticulitis in the descending colon.
- 3. Louis Vuitton** "If you're gonna have a bag, it may as well be a designer!" – Nicki J. Nicki has a permanent ileostomy because of fistulizing Crohn's disease.
- 4. Politician** “I was going to name mine after a specific politician but didn't feel like getting into fights over it, so I just call it 'Politician'... because it's either full of crap or making a lot of noise and not producing a damn thing.” – Pete N. Pete had a colon resection because of diverticulitis. He became septic due to complications and now lives with a Hartman’s colostomy.
- 5. Josephine** “After the old TV commercials with Josephine the plumber. She took care of plumbing problems, and my Josephine takes care of my plumbing problems!” – Midge S. Midge has a urostomy because of bladder cancer.
- 6. Florence** “Flo for short... because the b.... never stops.” – Cheryl F. Cheryl has an ileostomy and short bowel syndrome because of Crohn’s disease.
- 7. Igor** “When I found out my bladder had to be removed, it felt like I was living in a bad 1950s horror movie. In those days, Igor was always the lab assistant to a villain doctor trying to create life.” – Liz. Liz has a urostomy because of bladder cancer.
- 8. Baghdad** “Cos it's a bag and I’m a dad.” – Stuart S. Stuart has a permanent colostomy because of bowel cancer.
- 9. Piter** “Which is shortened from ‘pain in the arse’. Because it has always done the opposite of what it needs to do and misbehaves. Due to being around my son and others I couldn't use the full name, so it was shortened.” – Zoi K. Zoi has an ileostomy because of multiple illnesses including Ehlers Danlos Syndrome, Autonomic Neuropathy and Gastroparesis.
- 10. Margarita** My stoma nurse kept referring to ostomy appliances. Appliances made me think of a blender, and the only good use of a blender is for making margaritas.” – Sherri R. Sherri had a temporary ileostomy because of a bowel resection due to Crohn’s disease.
- 11. Cornholio** “Corn blocks me up, but I'm a redneck and keep eating it.” – Amanda T. Amanda has a colostomy because of bowel function loss from brain damage she suffered in a car accident.
- 12. Little Gremlin** “Since I never know when it will be mischievous.” – Brenda M. Brenda lived with a J-pouch since 1985 because of ulcerative colitis. During her gallbladder surgery in 2014, hernia mesh complications were found which led to a permanent ileostomy.
- 13. Thelma and Louise** "I had two!! They are always on the run. I bid farewell to Thelma, but Louise is my life-long girl." – Brandi T. Brandi was a double ostomate because of stage 3b colon cancer that spread to her rectum. The ileostomy was reversed and she now lives with a colostomy.
- 14. BOSS** “If you’re a newbie, you will soon find out why... hahaha.” – Avis T. Avis has a colostomy because of a perforated bowel that caused sepsis.

**Next quarter we will feature a page of ostomy cartoons. Let’s have FUN with our ostomies.**

**OSTOMY GLOSSARY**  
from [www.veganostomy.ca](http://www.veganostomy.ca)

**Urostomy**

A type of ostomy in which urine is diverted outside of the body.

11

**Retracted Stoma**

Like a recessed stoma, a retracted stoma is one that does not stick out. A retracted stoma may be flush with the skin, recessed, or completely inverted below the skin. This can cause many problems with leaks and convex appliances are often suggested.

**Regular Wear Wafer / Standard Wear Wafer**

The most common type of wafer. These are most often used by ostomates (especially colostomates) who intend to change their appliance frequently (daily, multiple times a day, or every few days). The adhesive on the back of these wafers aren't ideal for absorbing liquid, so ileostomates and urostomates may have better luck with an extended wear product.

**Skin Barrier see Wafer**

**Stoma**

A stoma is an opening on the surface of the skin which has been surgically created, usually to divert either urine or stool.

**Stoma Cap**

Perhaps the smallest type of ostomy appliance you can wear, a stoma cap is designed to be very discreet. It is worn exactly like a usual one or two-piece ostomy appliance. But because it has such a small capacity, it's not recommended for anyone with ongoing output. It is most commonly used by colostomates who irrigate their colon and also to collect mucus from a mucus fistula.

**Stoma Powder**

A special powder designed to help absorb moisture from weepy and damaged skin around the stoma. This is often covered with a barrier wipe or spray in order to create a more appropriate surface for an ostomy wafer to stick to.

**Temporary Ostomy/Stoma**

A temporary ostomy is one that's created with the intention of reversing it later on.

This is common in people who have plans to get an internal pouch (i.e. a "j-pouch") or when bowel rest is desired. This type of ostomy may be converted to a permanent one.

A j-pouch usually involves the complete removal of the colon and rectum and turning a loop ostomy into an end ostomy.

**Two-piece Appliance**

In a two-piece system, the ostomy bag and wafer are separated from one another and need to be attached to work.

**Wafer**

A wafer is the part of an ostomy system that sticks to your skin. Also referred to as a baseplate, skin barrier, or flange. These can be flat on the back or convex.

**Wafer Erosion**

Describes the breakdown of an ostomy wafer. A wafer tends to erode or "melt" around the stoma over time, as it comes in contact with fluids.

**Wear Time**

Wear time refers to the time between appliance changes, more specifically, the time between wafer changes. This can vary between individuals, but the average wear time tends to be around 3-5 days for many ileostomates and colostomates.

**Wet Colostomy**

In this type of ostomy, both urine and stool are being output from a single stoma. It is common for people who have undergone a pelvic exenteration and the output is liquid (as the name suggests).

**IN MEMORIAM**

Kenneth Vanderbeke passed away July 27th. He was our greeter for many years until illness caused him to step down four years ago. We send our deepest sympathies to his wife Virginia.

Joseph Levites, one of the founding members of the Macomb chapter passed at age 91. He continued his membership until his death. Our deepest sympathies go out to his family.

Lavonne Martin passed. Our prayers go out to her family.

**YOU MAY JOIN EITHER GROUP**  
**Annual Dues- \$15.00**

1. Macomb County Michigan Ostomy Association: Send check payable to **MCMOA** along with application to:  
 Suzanne Fleet, 31630 McNamee, Fraser, MI 48026

or

2. Ostomy Association of Metro Detroit: Send check payable to **Metro Detroit**, along with application to:  
 Dawn Kruse, 3349 Sherwood, Trenton, MI 48183

Name _____ Phone: Area Code _____ Number _____ Address _____ City, State, Zip _____ How did you hear about us? Doctor ___ Hospital ___ Medical Supplier ___ Friend ___ Internet ___ Other ___ Email Address: _____ Signature _____ Date _____	Birthdate: Month ___ Day ___ Year ___ Sex: Male ___ Female ___ Type of Ostomy or Affiliation (Please check one) Colostomy ___ Ileostomy ___ J Pouch ___ Urostomy ___ Non-Ostomate ___ Do you have any Special Skills? If so, please list them _____
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Note: All Information Remains Confidential

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