

A hairy situation

See Page 3 StomaGenie, a perfect tool for skin-care and hair control during pouch changes



Managing hair with a stoma on your tummy is a challenge for ostomates. Hair can hurt proper pouch adhesion and comfort.

According to [Coloplast Care](#), problems often come when people use too much force to removing a barrier around the stoma. They recommend gentle peeling to remove barriers to avoid problems like an infection of hair follicles near the stoma called folliculitis.

Ostomates are encouraged to prevent such problems by clipping hairs on peristomal skin. Coloplast suggests an electric shaver can be used. For razors, a clean, sharp razor with non-moisturizing gel is recommended.

The [WOCN skin care guide](#) suggests removing a barrier gently in the

direction the hair grows.

According to articles in UOAA, excessive hair around the stoma can make pouch adhesion tough. Hair can cause discomfort or pain when removing the pouch, especially if adhesive is involved.

A more permanent, although more expensive option, is laser hair removal. One 2006 study published in [Clinical and Experimental Journal](#) followed the case of a 28-year-old man who responded very well to peristomal laser hair removal, although it noted that multiple treatments are needed for better results. This case study

described the man as getting 11 treatments with no side effects.

Best practices when removing hair around the peristomal skin include:

- > Protect the stoma - always cover it with tissue, gauze or a cardboard roll to prevent damage from slips.
- > Use gentle products - avoid harsh soap or cream and thoroughly rinse after shaving.
- > Don't overshave - avoid shaving too frequently to avoid irritation or folliculitis.
- > Consult an ostomy nurse - for personalized advice.

Back to Basics: Changing a pouch

Those visiting Lincoln Ostomy Association continue to visit because of friendship and knowledge, but just as importantly to learn from each other.

Many times meetings reveal best practices on products and practices that seemed to be bullet-proof to individuals.

In a basic sense, changing your ostomy appliance is an evolving practice.

Pouch changes can be less routine when signs of leakage, odor, or skin irritation come into play.

Contact your ostomy nurse or health care worker if you are suddenly changing the pouching system more often than normal; or, if the skin is red, sore, or itchy; or if an ostomy nurse is not available.

Pouch changing stress? Don't worry! It gets easier with practice.

1. Wash your hands!
2. Gather osto-stuff: old towel, tissues, plastic bags, washcloth, clean towel, measuring guide, scissors (if needed), barrier wafer, paste or seals, new pouch, closure clip (if needed), and a mirror.
3. Empty. Don't rinse it out - that's old advice and actually makes things worse! Put toilet paper in the bowl first to prevent splashing.
4. To remove the old appliance, push your skin inward instead of pulling outward - much gentler! Only use adhesive remover if necessary. Toss the old stuff in a plastic bag.
5. Clean around your stoma with warm water - no scented soaps! Pat dry with tissues or use a hairdryer on low. The drier your skin, the better the seal.
6. Measure your stoma with the guide. For most barriers, measure right next to the stoma. Cut the hole to match, or try the new moldable wafers that don't need cutting.
7. Apply paste or seals around the opening if needed. Fill in any dimples in your skin for a better seal.
8. Lean back slightly, apply the barrier carefully over your stoma, and smooth out the tape. For two-piece systems, snap on the pouch and check the seal with your finger.
9. Hold the appliance in place for five minutes - your body heat improves adhesion. If your stoma sits flush with your skin, try a wafer with convexity to help it protrude more.
10. Some bleeding when touching your stoma is normal, but report anything unusual to your ostomy nurse. Try different products until you find what works - you should barely notice your appliance, like underwear.



For ileostomates: Change in the morning when \ output is slowest. Some find eating marshmallows temporarily stops output (avoid if diabetic). Don't delay changing if you feel itching or burning - that caustic output can damage skin quickly!

Impossible

NOTHING IS IMPOSSIBLE. THE WORD ITSELF SAYS 'I'M POSSIBLE.'" - AUDREY HEPBURN



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Ostomy resources in Lincoln and surrounding

LINCOLN OSTOMY ASSOCIATION

- > <https://ostomynebraska.com/lincoln/>
- > Sparrow news
- > Education & Networking

SUPPLIES

- Triumph Health Supplies
- > <https://triumphhomehealth.com/>
- > Local ostomy supplies

CHI Health St. Elizabeth

- Home Medical Equipment
- > <https://stander.com/store/chi-health-st-elizabeth-home-medical-equipment/>
- > Local ostomy supplies

MEDICAL FACILITIES

- Bryan Health Wound & Ostomy
- > <https://www.bryanhealth.com/services/specialty-clinic/wound-clinic/>
- > Ostomy nurses & clinic

Beatrice Community Hospital

- > <https://beatricecommunityhospital.com/woundostomy-services>
- > Ostomy nurses & clinic

CHI Health St. Elizabeth Ostomy Outpatient Clinic

- > <https://www.chihealth.com/services/wound-care>
- > Ostomy nurses & clinic

Columbus Community Hospital

- > <https://www.columbushosp.org/>
- > Ostomy nurses & clinic

York General Specialty Clinic

- > <https://www.yorkgeneral.org/york-general-hospital/specialty-clinic/>
- > Wound & ostomy clinic

MEDICAL OFFICES

- Gasteronology Specialties PC
- > <https://www.gidocs.net/>
- > Gastroenterologists

Nebraska Surgery Center

- > <https://www.nebraskasurgery.com/>
- > Surgery
- General Surgery Associates
- > <https://www.gsalincn.com/>
- > Stomach/Gastric surgery

OSTOMY NURSES

- Beatrice Community Hospital
- Makayla Wiese, APRN, COWCN

Bryan Medical Center 402-481-2018

- Cindy Skinner RN, BSN, CWOCN

CHI Health St. Elizabeth

- Rhonda R. Soucek, RN BSN CWOCN
- Deb Bussey, RN BSN, CWOCN
- Nicole Carmine, RN BSN, CWOCN
- rhonda.soucek@commonspirit.org

General Surgery Associates

- Amanda Paprocki, RN, BSN, CWOCN

Who did we miss? Come to the LOA meetings listed at ostomynebraska.com/lincoln and let us know!



Yokes

What did Joe Frey at Triumph Home Health say when he jumped out of the closet? "Supplies!"

I wasn't originally going to get a brain transplant, but then I changed my mind.

What happens when you go to the hospital for a bladder infection? Urine trouble!

Lincoln Ostomy Association President Amy is so organized that even her to-do lists have to-do lists.



INSTRUCTIONS

- Captures stoma output
- Control pouch change
- Hygiene-friendly process
- Reduce anxiety and stress
- Restore dignity
- Create independence



Place StomaGenie under or over the stoma to capture output, clean and prepare skin.



Once skin is dry, apply new pouch, insert black plug and throw away with used supplies.



SCAN for instructional videos



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Convatec covers digestion, diet

Numerous ostomy manufacturers offer ostomy advice on their websites. Convatec [broke it down](#) into some easily digestible “bites.”



1, Drink up. “Hydration will always be an issue, so drink lots of water. I like to toss in a slice of lemon for a little extra flavor.”



2. Chew and chew some more. “If it looks the same coming out as it did going in, you need to chew those foods better.”



3. Start slow and build up. “If you’re right out of surgery, you might be more sensitive to foods than you will be six months down the road. Use trial and error to see how foods work for you. If you’ve had ileostomy surgery, add high-fiber foods back into your diet gradually to make sure you can digest them well. These include raw fruits and veggies (especially with skins), nuts, seeds and popcorn.”



4. Input always makes output. “With an ileostomy, your stoma is going pretty much all the time. If I was going on a job interview, for example, I would not eat a big meal right before, because my stoma may create output and my pouch would fill up—and you don’t want that.”



5. Do what you love! “I go on bike rides, I go boogie boarding. It may take a little time, but you can do all those things and keep your stoma safe.”

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Go Easy on the Gas

Certain foods are notorious for causing gas and odor for people living with an ostomy. Broccoli, for example. Here are a few more that may surprise you.

Chewing gum. You swallow air when chewing gum, which goes into your digestive tract and can cause gas. Drinking with a straw. You also swallow air when you drink through a straw. Soy milk. Sure, it's healthy, but it can also be gassy.

TSA NOTIFICATION CARD: INDIVIDUALS WITH DISABILITIES AND MEDICAL CONDITIONS

I have the following health condition, disability or medical device that may affect my screening:

I understand that alternate procedures providing an equivalent level of security screening are available and can be done in private. I also understand that presenting this card does not exempt me from screening.

Information • Assistance Requests • Compliments • Complaints

TSA Cares
1-855-787-2227 (Federal Relay 711)
Weekdays: 8 a.m. to 11 p.m. ET
TSA-ContactCenter@tsa.dhs.gov
Weekends/Holidays: 9 a.m. to 8 p.m. ET

Hablamos Español
Automated information offered in 12 languages

Call 72 hours prior to traveling to request the assistance of a Passenger Support Specialist (PSS) at the checkpoint. If a PSS is not available, you may ask for a Supervisory TSA Officer at the checkpoint.

SHOW THIS SIDE - for use during screening before boarding.
Intended for the passenger to inform the TSA at the beginning of personal screening - before being patted-down or entering a full-body scanner.

JUST PRINT IN COLOR, CUT OUT, FOLD, AND PUT WITH TRAVEL DOCUMENTS

TSA Travel Communication Card

This is provided to travelers in order to simplify communication with federal Transportation Security personnel and airline flight attendants, at those times when you wish or need to communicate in a non-verbal way, as is your legal right. This is not a certificate and it is not a pass to help you avoid screening. Please print out on any weight of paper you wish, trim to wallet-size and laminate if desired. The blue color is important, as it is a “flash-card” developed by the TSA so their own officers will recognize it and be guided to treat the traveler with discretion and sensitivity

NOTES: You may always have a travel companion with you during a private screening.

- TSA officers should NOT ask you to show your pouch—you may be asked to rub over your pouch outside your clothing so they can test your hand to rule out explosive residue.
- To file a complaint, go to <https://www.tsa.gov/contact-center/form/complaints>

Please copy UOAA in your correspondence with the TSA at info@ostomy.org.



Hernias and your ostomy

Living with an ostomy brings many changes to daily life. One concern many of our members ask about is hernias. The Lincoln Ostomy Association wants to help you understand what parastomal hernias are, how to prevent them, and what to do if you have one.

What is a Parastomal Hernia?

When you have ostomy surgery, doctors create an opening (stoma) in your abdomen. This can create a weak spot in your abdominal wall. Sometimes, part of your intestine can push through this weak spot, creating a bulge under your skin. This is called a parastomal hernia. You might notice:

A bulge around your stoma

Have you noticed skin around your stoma changing shape? Problems with your ostomy appliance fitting properly? Discomfort or pain around your stoma?

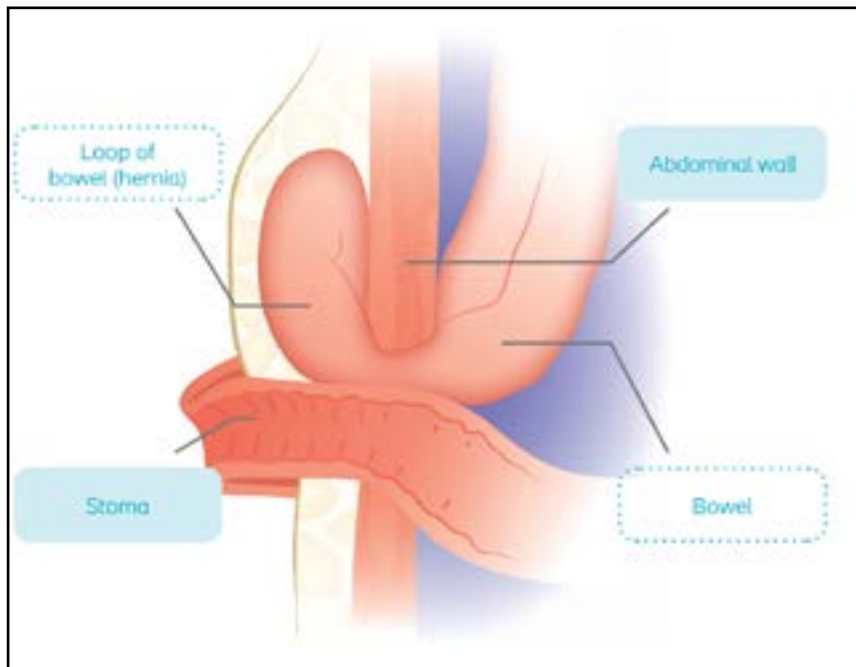
Many people develop parastomal hernias after ostomy surgery. In fact, they're quite common. Having a hernia can affect how you feel about yourself and may cause physical discomfort.

Preventing Hernias

According to research, there are three main ways to help prevent hernias:

- > Education: Understanding the risk of hernias is the first step in prevention. That's why we're sharing this information with you!
- > Sport Belts: Wearing a hernia belt during heavy activity provides extra protection for your stoma.

Image courtesy [Coloplast Guide](#) to managing a hernia.



> Abdominal Exercises: Strengthening your abdominal muscles helps support your stoma and prevents hernias. Some helpful exercises include:

- Pelvic tilts
- Gentle sit-ups
- Lying knee raises
- Walking
- Swimming

After Your Surgery

For the first three months after surgery:

- > Avoid lifting anything heavier than 10 pounds
- > Talk to your doctor before starting any exercise program
- > Begin with gentle walks to build strength
- > Maintain good posture to strengthen your core muscles
- > Gradually increase your activity level - don't rush!

A large advertisement for H2ORS Oral Rehydration Solution. The background is a blue and white splash of water. On the left, there is a box of H2ORS Citrus Flavor, 50 packets. The box is white with blue and yellow accents. The text on the box includes 'CITRUS FLAVOR', 'Electrolyte Drink Mix', 'H2ORS', 'ORAL REHYDRATION SOLUTION', '50 PACK', and 'Fast. Effective. Reliable.' On the right, the H2ORS logo is displayed in large blue letters, with 'ORAL REHYDRATION SOLUTION' underneath. To the right of the logo, it says 'Fast. Effective. Hydration.' Below the logo, it says 'Lincoln Ostomy Association! Stop by for a visit to: www.h2ors.com'. In the center, there is a red and white coupon that says 'Get 10% off and free shipping on 50-count boxes of citrus flavor Coupon code SPARROW50'. At the bottom right, it says 'We love to serve you!'.

Hernia Support Belts

Hernia support belts are special garments that provide compression and support around your stoma area. According to information from Nu-Hope and the Ostomy Association, these belts:

- > Give extra support to your abdominal wall
- > Can prevent hernias from forming
- > Help manage existing hernias
- > Are easy to put on and take off
- > Can be worn during exercise or daily activities

You can find ostomy hernia belts online or at medical supply stores. Some people wear them all day, while others only use them during physical activity.

When to Seek Help

If you think you might have developed a hernia, contact your healthcare team right away. They can:

- > Confirm whether you have a hernia
- > Recommend custom-fit support garments
- > Discuss treatment options
- > Help you manage any problems with your ostomy appliance

Remember, prevention is easier than treatment. Starting abdominal exercises early and using support when needed can significantly reduce your risk of developing a parastomal hernia.

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Ostomy Hernia Resources

- > Coloplast – [Managing A Parastomal Hernia \(Guide\)](#)
- > Celebration Ostomy Support Belt
- > Nu-Hope Laboratories, Inc.
- > Ostomy Armor
- > Safe n' Simple
- > Stomaplex
- > Convatec – [Your Guide To Parastomal Hernia & Physical Activity](#)
- > NWSOC Canada – [Parastomal Hernia: Incidence, Prevention and Treatment Strategies](#)

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President Amy 620-341-3811
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Visitation Marie 402-750-5621
Communications John 402-310-3496

Lincoln Ostomy Home
LOA welcomes calls from ostomates, especially new people, with questions on everything from, "how do I shower?" to "what about clothes?"

Meetings (Let's meet, shall we?)
In person meetings are at a church at 8230 South St., starting at 1:30 p.m. updates at ostomynebraska.com/lincoln
May 4 - Mental Health for Ostomates presented by Michaela Mueller.
June & July - No meetings. Enjoy your summer. Try a staycation. Paint a pinecone. Fish for...fish. Read your Sparrow!

Contact, Advertise
Contact or visit LOA to learn more about support group meetings, ostomy products and educational opportunities. Sparrow is a quarterly publication for the Lincoln Ostomy Association. If you'd like to advertise or to submit an article, email lincolnostomy@gmail.com

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At twenty-nine, I wasn't prepared for an ostomy. After my inflammatory bowel disease reached its breaking point, surgery became my only option. Post-surgery, I felt lost. The stack of supplies in my bathroom seemed like a mountain I couldn't climb. Then my nurse mentioned the Lincoln Ostomy Association.

I walked into my first meeting expecting gloom. Instead, I found joy. There was Dave planning his retirement adventures, and Maria showing vacation photos from her recent scuba trip. These weren't people defined by medical conditions—they were living full lives.

The practical guidance proved invaluable. They taught me how to manage leaks, recommended clothing options, and shared travel tips no medical pamphlet covered. When I worried about dating, three couples in the group openly shared their experiences, dissolving my fears with their candid stories.

Jack, a member for fifteen years, became my mentor. "This isn't what defines you," he'd remind me, "it's just part of your story now."

Six months later, I returned to hiking. By my one-year "stomaversary," I was helping newcomers navigate their own journeys.

Today, my ostomy isn't the limitation I feared—it's the connection that introduced me to an extraordinary community who showed me that life's detours often lead to unexpected strength.

Names changed per Sparrow tradition