

Prescribing guidelines for stoma appliances

Appliance	Usual monthly quantity	Prescription directions	Notes
Colostomy bags - one piece systems	30 -90 bags	Remove and discard after use.	Bags are not drainable/ reusable. Usual use: 1-3 bags per day. Flushable bags only to be used on advice of bowel / stoma nurse.
Colostomy bags –two piece systems	30-90 bags + 15 Flanges	Bag – remove and discard after use. Flange – change every 2-3 days.	The flange (base plate for 2 piece systems) is not usually changed at every bag change. Items ordered separately.
Ileostomy bags – one piece systems	15-30 bags	Drain as required throughout the day. Use a new bag every 1-3 days.	Bags are drainable
Ileostomy bags – two piece systems	15-30 bags + 15 flanges	Bag – change every 1-3 days Flange – change every 2-3 days	The flange (base plate for 2 piece systems) is not usually changed at every bag change. Items ordered separately.
Urostomy bags – one piece systems	10-20 bags	Drain as required throughout the day. Generally replace bag every 2 days.	Bags are drainable
Urostomy bags –two piece systems	10-20 bags + 15 flanges	Bag – change every 2 days Flange – change every 2-3 days	The flange (base plate for 2 piece systems) is not usually changed at every bag change. Items ordered separately.

Night drainage bags for urostomy patients

4 bags (1 box of 10 bags every 2-3 months)

Use a new bag every 7 days.

Bags are drainable

Appliance	Usual monthly quantity	Prescription directions	Notes
Flange extenders (for one and two-piece systems)	3 packs per month	Change every time bag is changed. May require 2-3 for each bag change.	Often required for extra security if the patient has a hernia or skin creases as it increases adhesive area. If used as there is leakage around the stoma – refer for review
Belts (for convex pouches)	3 per year	1 to wear, 1 in the wash, 1 for spare	Washable and re-usable.
Support Belts	3 per year	1 to wear, 1 in the wash, 1 for spare	For patients with manual jobs / hernia – require heavy duty belt. Must be measured – refer. For sports – use light weight belt
Adhesive removers	1-3 cans (depending on frequency of bag changes)	Use each time stoma bag is changed	Sprays are more cost effective than wipes. 'Non-sting', silicone based products are recommended. Pelican® - use as adhesive remover and deodorant.
Deodorants	Not routinely required. Maximum 1	Use as needed when changing stoma bag	Should not be required. If correctly fitted, no odour should be apparent except when bag is emptied or changed. Household air freshener is sufficient in most cases. If odour present at times other than changing or emptying – refer for review.
Lubricating deodorant gels	2 bottles	Put one squirt in to stoma bag before use	Only recommended if patients have difficulty with 'pancaking'. Bottles are more cost effective than sachets. A few drops of baby oil or olive oil can be used as an alternative.

Appliance	Usual monthly quantity	Prescription directions	Notes
Skin fillers	Follow directions of bowel / stoma nurse	Change each time bag is changed	Filler pastes/ washers are used to fill creases or dips in the skin to ensure a seal. Alcohol containing products may sting.
Skin protectives (wipes, films, pastes and powders)	Follow directions of bowel / stoma nurse	Apply when bag is changed as directed	SHORT TERM USE ONLY (acute prescription): may be used on skin that is broken, sore or weepy to promote healing. If used for >3 months, refer. Barrier creams are NOT recommended as they reduce adhesiveness of bags/ flanges.
Thickeners for ileostomy	15-30	Use one with every new bag	Useful for Crohn's disease patients



General notes

- If quantities ordered exceed those listed without good reason (e.g. number of bags in times of diarrhoea), refer to stoma specialist
- 'Stoma underwear' is not necessary and should not be prescribed, unless a patient develops a parastomal hernia and has been advised to wear 'support underwear' or a belt.
- Appliances which are listed in Part IXA and IXC of the drug tariff may be prescribed under the NHS.