



LETTER FROM THE EDITOR

If errors are noted in your name or address, please bring these to my attention. If you know of someone to add or delete from our mailing list, please notify me. I can be reached at 325-670-4302 or callen@hendrickhealth.org. We are now sending our newsletter electronically to those who request it be sent that way. **Please send me your email address if you would like a link to the newsletter.**

If you know of someone who would be a good speaker at one of our meetings, please contact us.

– Charlotte Allen, MSN, RN-BC, CWOCN



LAST MEETING

For the May 14 meeting, we had a special guest from Abilene's very own Revolution Strings. Matheo Vergara. Matheo, who is also Vina's younger brother, shared his talent playing some selections on the violin, as well as shared his experiences being a member of Revolution. It was a joy listening to this talented young man.

NEXT MEETING

For the June 12 meeting, we have not confirmed plans yet, but we hope to have an interesting speaker for you. So come and join us for a great time of sharing and fellowshiping.

Everyone is welcome. Bring your spouse or a friend or come alone.

Remember, there will be no meeting in July. See you in August.

We meet in the Diabetes Center at 1742 Hickory St. (corner of Hickory St. and N. 18th St.) at 6:30 p.m. Hope to see you there!

CONTACT US

For more information, please contact us at 670-4302.

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That Annoying Pancaking!

What is pancaking?

Pancaking is one of the most common problems that people with a colostomy will complain about. It is caused when output stays at the top of the pouch and does not slide down into the bottom. It can stick around the top of the pouch, causing a bulge. It's really annoying!

What can you do to prevent this?

- Make sure you are drinking enough fluids throughout the day, it is recommended to drink about two liters in 24 hours. This will help to soften stool.
- Something else that has worked for some people with a colostomy is to drink cool boiled water with a dash of lemon first thing in the morning. This can also help to soften stool.
- Try increasing the amount of fiber you are eating—more veggies, fruits, etc.
- If none of the above work, try putting a small amount of lubricating agent into your pouch. Ostomy pouch lubricant made by Hollister, Coloplast and ConvaTec are best for this, but you can also use vegetable oil, Pam spray or even Vaseline. (Note: household lubricants may add to odor.) Smear whatever lubricant you choose around the inside top of the pouch.
- Before you put your new pouch on, put a little bit of tissue paper into the bottom so it's not causing a vacuum when you seal.

Five Foods to Eat If You Have Diarrhea or Chronically Loose Stool

from Vancouver (BC) Ostomy HighLife

- **Bananas.** Bananas are a great food to eat when you have diarrhea. Bananas are easy to digest, and they are high in potassium which is lost through diarrhea. Bananas are soothing, filling and readily available.
- **Rice.** Eat plain rice during bouts of diarrhea. Rice is easy on the digestive system. It is also low in fiber and helps slow down the gastrointestinal tract, which is beneficial for cases of diarrhea.
- **Applesauce.** Incorporate applesauce into your diet when you are suffering with diarrhea. Applesauce contains pectin, a water-soluble fiber, which is known to help reduce diarrhea. Applesauce is also very nutritious, containing an appropriate balance of vitamins and sugar.
- **Boiled Eggs.** The body loses energy during diarrhea. Eggs provide protein which energizes the body and gives it strength. Avoid fatigue by eating well-cooked eggs during periods of diarrhea.
- **Pretzels.** Eat salted pretzels while dealing with diarrhea. This will help your body retain water and keep you from becoming dehydrated from your diarrhea. The salted pretzels will also help soothe and settle your stomach.

Quality of Care Resource at the Centers for Medicare and Medicaid Services (CMS)

By Jeanine Gleba, UOAA Advocacy Manager; via UOAA Newsletter, March 2018 and UOAA blog post

The overall goal of the UOAA Patient Bill of Rights (PBOR) initiative (www.ostomy.org/bill-of-rights/) is to ensure high quality of care for people who had or will have ostomy or continent diversion surgery. To accomplish this, it's important that patients and families actively participate in patient healthcare.

According to CMS, an integral part of the U.S. Department of Health and Human Services' (HHS) National Quality Strategy is the CMS Quality Improvement Organization (QIO) Program. It is one of the largest federal programs dedicated to improving health quality at the community level.

Under the QIO program, there are two Beneficiary and Family Centered Care-QIOs (BFCC-QIOs) who help Medicare beneficiaries and their families exercise their right to high-quality healthcare. The two BFCC-QIOs are KEPRO and Livanta and they serve all 50 states. BFCCQIO services are free-of-charge to Medicare beneficiaries.

Depending on where you live (locate your BFCC-QIO at qioprogram.org/locate-your-qio), they are available to help Medicare beneficiaries and their families or caregivers with questions or concerns such as:

- Am I ready to be discharged from the hospital?
- Should I be receiving needed skilled services such as physical therapy and occupational therapy, from a home health agency, skilled nursing facility or comprehensive outpatient rehabilitation facility? (**Care from a certified ostomy nurse is a skilled service.**)
- I'm concerned about the quality of care I received from my hospital, doctor, nurse or others.

*Examples of quality of care concerns that pertain to our PBOR include, but are not limited to:

- Experiencing a change in condition that was not treated (such as skin infection around stoma)
- Receiving inadequate discharge instructions (such as inadequate individual instruction in ostomy care, including the demonstration of emptying and changing pouch or no instruction on how to order ostomy supplies when you leave the hospital)

Why should Medicare Beneficiaries contact their BFCC-QIO with concerns?

First, BFCC-QIOs can help when you have a concern about the quality of the medical care you are receiving from a healthcare facility (e.g. hospital, nursing home or home health agency) or professional. You can also file a formal

Medicare complaint through your BFCC-QIO. Furthermore, according to CMS, when Medicare beneficiaries share their concerns with their BFCC-QIO, they help identify how the healthcare system can better meet the needs of other patients. Beneficiary experiences, both good and bad, give the QIO Program the perspective to identify opportunities for improvement, develop solutions that address the real needs of patients and inspire action by health professionals. This is what we are working towards achieving with our PBOR initiative. This is a source to help the UOAA community make this happen.

Last, Medicare beneficiaries have the right to file an appeal through their BFCC-QIO, if they disagree with a healthcare provider's decision to discharge them from the hospital, discontinue services or when they have a concern about the quality of the medical care they received from a healthcare professional or facility.

*When and who should Medicare Beneficiaries contact?

A Medicare beneficiary can call 1-800-MEDICARE or your local State Health Insurance Assistance Program (SHIP: www.shiptacenter.org) if he or she:

- Has general questions about Medicare coverage;
- Needs clarification on how to enroll in Medicare;
- Wishes to discuss billing issues.

A beneficiary can contact their BFCC-QIO if he or she:

- Needs to discuss the quality of care received;
- Wants to file a formal quality of care complaint; or
- Needs help to understand his or her Medicare rights.

While BFCC-QIOs are the primary point of contact for Medicare beneficiaries and their families, when necessary, quality of care complaints can also still be made by calling 1-800-MEDICARE.

For those interested in learning more about what to do if you have a concern about the care you received while on Medicare, please refer to the CMS FAQs page at: qioprogram.org/sites/default/files/FAQs_for_Medicare_Beneficiaries.pdf

Be involved in your healthcare and, if you are a Medicare beneficiary, take advantage of this resource to self-advocate and ensure a better outcome for yourself.

* Source qioprogram.org

Summer Hints... Get Back in the Swim of Things

Edited by B. Brewer, UOAA Update, May 2012

EDITOR'S NOTE: This is an article from a previous newsletter, but as we prepare for summer, I feel it might be beneficial to both new and seasoned ostomates.

For extra security during swimming and water sports, use water-proof tape around the barrier. This is called picture framing.

Select a bathing suit made of textured or dark-colored materials that will better hide the outlines of the pouch. Some women prefer bathing suits with skirts and some men prefer boxer-style trunks, but snug-fitting suits can be worn. If you wear a two-piece appliance, you can use several mini-pouches during swim time and they can be washed out when you get home.

A lightweight, two-way stretch garment can be worn under a swim suit for extra support and flatness. And gentlemen, a pair of jockey shorts should do the same for you.

Take precautions against sunburn. Besides being bad for your skin, a very bad sunburn can result in diarrhea and sometimes vomiting, thus depleting electrolytes.

Monilia is a common summer problem. This raised, itchy, red rash on the peristomal skin is uncomfortable and keeps the pouches from holding well. If you suspect a monilia rash, check with your doctor to secure a prescription for anti-monilia powder. This may require an office visit for a consultation and visual examination.

If plastic against your skin is uncomfortable or causes a heat rash, you should purchase your pouches with the cloth-like covering or consider a pouch cover.

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U is for Underneath

I am a reader at the school and read to five classes for 20 minutes at each class. I sit on a chair and the children sit at my feet and are very quiet while they listen. Sometimes I can't help it when the gas comes out and makes a noise. Luckily, it doesn't smell. The children snicker and point at each other, and I stay sober so they never suspect it's me

My daughter made me a picture made out of photos of our family. One photo in particular made me laugh. I had my tongue sticking out posed next to a bowl of punch, and my granddaughter sat next to me with her hands folded pray-like. Underneath it was caption that read, "Come on, Grandma, just one more bowl of Golytely."

Joyce Elza has had a colostomy for 20 years and is a widow and a great-grandmother. She enjoys quilting and sewing, and is active in the local ostomy association.

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