

Checklist: Empty/Change Ostomy Bag

Empty/Change Ostomy Bag	Able to Perform	Unable to Perform
1. Carry out initial procedure actions according to facility policy, including hand hygiene, patient identification, explanation of the procedure, privacy, and patient safety.	<input type="checkbox"/>	<input type="checkbox"/>
2. Review the patient's care plan and observe for ostomy-related precautions, skin concerns, or infection risks before beginning care.	<input type="checkbox"/>	<input type="checkbox"/>
3. Gather necessary supplies including gloves, clean ostomy pouch or appliance if changing, washcloths, towels, disposal bag, skin barrier supplies if indicated, and PPE if required.	<input type="checkbox"/>	<input type="checkbox"/>
4. Provide privacy by closing doors, curtains, or privacy screens.	<input type="checkbox"/>	<input type="checkbox"/>
5. Position the patient comfortably while maintaining dignity and proper body alignment.	<input type="checkbox"/>	<input type="checkbox"/>
6. Perform hand hygiene and apply clean gloves before providing ostomy care.	<input type="checkbox"/>	<input type="checkbox"/>
7. Place a waterproof pad or towel under the ostomy site as needed to protect linens and clothing.	<input type="checkbox"/>	<input type="checkbox"/>
8. Empty the ostomy pouch into an appropriate container or toilet when the pouch is one-third to one-half full according to facility policy.	<input type="checkbox"/>	<input type="checkbox"/>
9. Avoid contaminating the drainage outlet or surrounding surfaces during emptying.	<input type="checkbox"/>	<input type="checkbox"/>
10. Clean the drainage outlet with toilet tissue or approved cleansing material before reclosing the pouch.	<input type="checkbox"/>	<input type="checkbox"/>
11. Remove the ostomy appliance gently from top to bottom if changing the pouch while supporting the surrounding skin to prevent irritation or injury.	<input type="checkbox"/>	<input type="checkbox"/>
12. Dispose of soiled supplies and pouch according to infection prevention and OSHA guidelines.	<input type="checkbox"/>	<input type="checkbox"/>
13. Observe the stoma for color, size, moisture, swelling, bleeding, irritation, or abnormal appearance.	<input type="checkbox"/>	<input type="checkbox"/>
14. Assess surrounding skin for redness, breakdown, rash, drainage, odor, leakage, or signs of infection.	<input type="checkbox"/>	<input type="checkbox"/>
15. Clean the stoma and surrounding skin gently with warm water and a soft washcloth according to facility policy.	<input type="checkbox"/>	<input type="checkbox"/>
16. Avoid using harsh soaps, alcohol-based products, or lotions not approved for ostomy care.	<input type="checkbox"/>	<input type="checkbox"/>
17. Pat the skin dry thoroughly with a clean towel to promote skin integrity and appliance adherence.	<input type="checkbox"/>	<input type="checkbox"/>
18. Measure the stoma if indicated and prepare the pouch opening to fit properly around the stoma.	<input type="checkbox"/>	<input type="checkbox"/>
19. Apply skin barrier products or protective products as ordered or according to facility policy.	<input type="checkbox"/>	<input type="checkbox"/>
20. Apply the clean ostomy pouch securely without excessive pressure on the skin or stoma.	<input type="checkbox"/>	<input type="checkbox"/>
21. Ensure the pouch seal is secure and free of gaps or leakage.	<input type="checkbox"/>	<input type="checkbox"/>
22. Perform hand hygiene after completing the procedure. Ensure the patient is comfortable and clothing or linens are clean and dry after the procedure.	<input type="checkbox"/>	<input type="checkbox"/>
23. Remove gloves and dispose of supplies according to infection prevention guidelines.	<input type="checkbox"/>	<input type="checkbox"/>
24. Perform hand hygiene after completing the procedure.	<input type="checkbox"/>	<input type="checkbox"/>

25.	Clean and store reusable equipment according to facility infection control policy.	<input type="checkbox"/>	<input type="checkbox"/>
26.	Report abnormal findings including skin breakdown, unusual drainage, bleeding, severe irritation, leakage, or signs of infection to the supervising nurse promptly.	<input type="checkbox"/>	<input type="checkbox"/>
27.	Document ostomy care provided, observations of the stoma and surrounding skin, pouch emptying or change, patient tolerance, and abnormal findings according to Oregon standards and facility policy.	<input type="checkbox"/>	<input type="checkbox"/>