



Appliance	Usual monthly quantity	Prescription directions	Notes
Colostomy bags (one piece system)	30-90 bags	Remove and discard after use. Usual use: 1-3 bags per day.	Bags are not drainable. Flushable bags only to be used on advice of bowel/stoma nurse.
Colostomy bags (two piece systems)	30-90 bags + 8-30 flanges	Bag – remove and discard after use. Usual use: 1-3 bags a day. Flange – change every 1-4 days.	The flange (base plate for 2 piece systems) is not usually changed at every bag change. Items ordered separately.
Irrigation	1 kit/year	To wash out colostomy.	
Irrigation sleeves	30	Use once every 1-2 days	Self-adhesive disposable sleeves.
Stoma caps	30	For use on mucous fistulae or colostomy if irrigating.	This may be in addition to original stoma bag.
Ileostomy bags (one piece systems)	10-30 bags	Drain as required throughout the day. Use new bag every 1-3days	Bags are drainable.
Ileostomy bags (two piece systems)	10-30 bags + 10-30 flanges	Bag – change every 1-3 days. Flange – change every 1-3 days.	The flange (base-plate for two piece systems) is not usually changed at every bag change. Items ordered separately.
Urostomy bags (one piece systems)	8-30 bags.	Drain as required throughout the day. Change every 1-4 days.	Bags are drainable
Urostomy bags (two piece systems)	8-30 bags + 8-30 flanges	Bag – change every 1-4 days. Flange – change every 1-4 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	4-5 bags (1 box of 10 bags every 2-3 months)	Use a new bag every 7 days.	Patients are advised to wash this on a daily basis and change at least weekly

Accessory	Usual monthly quantity	Prescription directions	Notes
Flange extenders for one & two piece systems	30-90	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 the adhesive area. If for leakage around the stoma then refer for review.
Belts (for convex pouches)	2 per month	1 to wear, 1 in the wash/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 bag change frequency)	Use each time stoma bag is changed.	Sprays are more cost effective than wipes. 'Non-sting' silicone based products are not recommended.
Deodorants	Not routinely required. Household air-freshener is sufficient in most cases	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. If odour present at times other than changing or emptying then refer for review.
Lubricating deodorant gels	Not routinely required. A few drops of baby oil/olive oil can be used as an alternative. If recommended by Stoma Nurse, 1-2 bottles per month.	Put one squirt into stoma bag before use.	Only recommended if patients have difficulty with 'pancaking' (when the output collects around the stoma and can squeeze between the flange and the skin instead of going into the bag). Bottles are more cost effective than sachets.
Skin fillers	Follow directions of 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 protective wipes, films, pastes and powders	Follow directions of 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 then refer. Barrier creams are NOT recommended as they reduce adhesiveness of bags/flanges.
Thickeners for ileostomy	2 boxes/tubs per month	Use one with every new bag.	Useful for Crohn's disease patients, useful for loose watery output. 1-2 sachets/strips to be used each time appliance is emptied.
Acute sports shield	1-2/year		Use for sporting activities.

General notes

- If quantities ordered exceed those listed without good reason (e.g. number of bags in times of diarrhoea, refer to Stoma Nurse).
- '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 can be prescribed under on NHS FP10.
- There are no set rules for appliances or accessory usage. The products and quantities recommended by the stoma care nurse will depend on the individual patient's circumstances and may change.
- Changes to prescriptions should only be on the recommendation of the Specialist Stoma Care Nurse from a local NHS service. If changes are required to the patient's appliances or accessories a letter will be sent to the GP advising of the changes.