

JUSTIFYING THE NEED FOR A HOSPITAL-BASED OUTPATIENT OSTOMY CLINIC

Jackson Madison County General Hospital (JMGH), a 600 bed facility, has four Wound Ostomy & Continence (WOC) nurses. One of the WOC nurses has certification as a Nurse Practitioner. In addition to their in-patient consults, these WOC nurses presently see a limited number of ostomy out-patients as a free service. Resources for the out-patient clinic are limited because no revenue is being generated.



1

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6

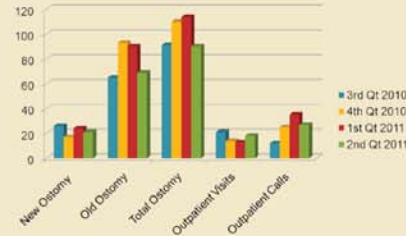
Preoperative education offered in an out-patient setting helps to decrease fears and anxieties and provides an opportunity for answering questions. The assessment and management of an ostomy during the early postoperative period are critical to successful adaptation to a new ostomy. The primary goals of WOC nursing management includes supporting ostomy viability and function, maintaining pouching integrity, preventing complications and providing patient education. Duchesne and colleagues noted, "nearly 95% of the patients were cared for by an enterostomal therapist, (and this) was associated with a sixfold decrease in stoma complications."



There is a potential revenue from out-patient visits for the hospital. Use of existing facility space, current equipment and supplies would limit capital requirements. According to Sheehan and Zeigler, payer sources would resemble the scenario at a primary care specialty clinic, with 40% Medicare and 45% Medicaid distributions. The WOC nurses plan to follow up with an ostomy patient visit 2-4 weeks after discharge from JMGH to assess for education needs, problems with pouch application, and peristomal skin issues. In addition, revenue could be generated from the patients that we are currently seeing from other area hospitals at no charge for pre and post-operative education.



2



4



Follow-up with a WOC nurse has a positive impact on quality life.

Developing a relationship between the WOC nurse and the ostomy patient is life changing and provides for:

- Positive influence on quality of life
- Self confidence and independence in ostomy care
- Successful adaptation to life style change

7

Data collected by the WOC nurses in the past 12 months reveals that 88 ostomy surgeries were performed at JMGH. The average number of teaching sessions for the new ostomy patients are 4.6 visits, which gives little time for education of the patient and family by the WOC nurses. Patients are often overwhelmed by the information they need to learn while recovering from a major surgical procedure. Much of the information received is not retained due to psychological, emotional and medication issues. Even though the majority of the patients do receive home health services, WOC nurses are rarely employed by Home Health Agencies in the West Tennessee area to provide the additional education needed.



3

The WOC nurses at JMGH received 99 ostomy related phone calls from patients in the past 12 months. Many of these calls resulted in future out-patient visits for ostomy related problems. 66 out-patient visits were made by the WOC nurses in the past 12 months. The majority of these consults were not recent surgery patients at JMGH, but patients whose surgeries were performed at other area hospitals.



5

Quality of life data, collected by 600 Enterostomal Therapist from more than 4000 patients in 16 countries in Europe, provides evidence that the first 3-6 months after surgery is a critical time period. This supports the idea that ostomy clinic visits should be an integral part of the comprehensive care provided to anyone who has ostomy surgery.



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8