This protocol is for trained CIP Paramedics only. If during assessment, procedure, or treatment the patient is found to have a medical emergency in need of hospital treatment, the CIP visit will be suspended, and local MCA protocols utilized.

Purpose: Provide guidelines for CIP paramedics to change an ostomy bag and/or evaluate efficacy and make a referral for ineffective ostomies.

Aliases: Colostomy, ileostomy.

1. Indications
	1. Need for bag replacement or evaluation for complaints including blockage, damage, or signs of infection.
2. Equipment
	1. One or two-piece ostomy appliance
3. Procedure for bag change
	1. Examine the ostomy site for herniation, bleeding, or signs of infection.
		1. If signs of herniation, bleeding or infection are present contact referring physician for orders.
	2. Identify ostomy appliance as either a one piece or a two-piece appliance.
	3. Measure the ostomy site if it is less than 6 weeks old.
	4. Remove per manufacturer’s directions.
	5. Remove excess stool from skin
	6. Prepare skin/site for replacement of flange/wafer if applicable.
	7. Place following manufacturer’s directions
	8. Concerns that present threats to the patient’s immediate health and well-being must be reported to the referring physician at the conclusion of the visit, all other concerns within 24 hours.
4. Documentation see CIP Documentation protocol