

# A SITING TOOL FOR NEWLY QUALIFIED STOMA NURSES

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## INTRODUCTION

Siting marks the start of a patient's life with a stoma; the process ensures the stoma is placed in the optimal location, accessible and visible to the patient. However evidence suggests that the long term effects of stoma formation are profound; a poorly sited stoma affects the patient's quality of life as well as their psychological, physical and emotional wellbeing (Black, 2000; Rust 2009).

I recently undertook a degree module in stoma care with a focus on siting, giving me the theoretical and practical knowledge to deem me 'safe and qualified' to site. In order to provide holistic patient care it is a skill that I believe the stoma nurse should be proficient in. Nevertheless siting is challenging as each abdomen is different and presents peculiarities and problems; this prompted me to develop an assessment tool to help newly qualified stoma nurses undertake a thorough abdominal assessment as part of the siting process.

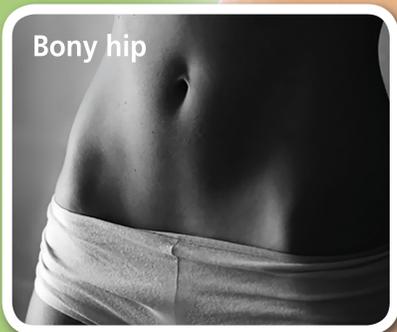
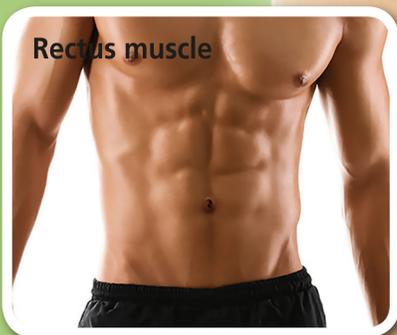
## OBJECTIVES

- To enhance stoma siting through thorough abdominal assessment
- To create a reflective tool for newly qualified stoma nurses to facilitate their practice.

## METHODOLOGY

I wanted to turn a thought into reality by presenting stoma siting for the newly qualified stoma nurse in a poster format. So I set about producing a visual aid to allow a newly qualified stoma nurse to conceptualise and execute stoma siting time and time again in the clinical setting.

The tool highlights the word **ABDOMEN**, each letter in turn depicting what the nurse ought to know about each specific letter. Thus facilitating competence in stoma siting, serving as an aid and evidence that the act was performed.



**A**

scertain the rectus muscle

**B**

ony prominence of hip and groin flexure must be avoided

**D**

o you see a pre-existing skin condition?

**O**

peration – old and new

**M**

iss skin folds, deep creases and umbilicus

**E**

ssential not to site under pendulous breasts

**N**

atural waistline



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## CONCLUSION

It is hoped that this assessment tool will facilitate newly qualified stoma nurses to gain further confidence in the act of siting. It will also promote greater understanding of the different abdomens they are presented with, tummy shapes and contours and allow the nurse to ponder their chosen location.

## REFERENCES

- Black, P K (2000) Holistic Stoma Care. London Balliere Tindall  
Rust, J A (2009) Understanding the complexities of the clinical nurse specialist: A focus on stoma siting. Gastrointestinal Nursing 7 (4) p18-26