



Gather with the Ostomy Community at UOAA's National Conference!



Registration Opens Jan. 1, 2019
Visit www.ostomy.org for more information

All are Welcome
Share, Learn, Connect
August 6-10, 2019 in
Philadelphia, PA

- * Education Sessions with Top Medical Professionals
- * Inspirational Stories
- * Free Stoma Clinic with WOC Nurses
- * Product Exhibit Hall with 25+ Vendors
- * Dedicated Sessions for Caregivers and Family
- * Sessions for New and Experienced Ostomates
- * Pediatrics Track
- * Young Adults Track and Networking
- * Social Events such as a Fashion Show, Casino Night
- * Support Group Leader Networking
- * Vacation Destination in Historic Philadelphia

Jacksonville Contact Information:

Patti Langenbach
(800) 741-0110
(904) 733-8500

patti@ostomymcp.com

Support group meets the 3rd Sunday of each month 3 p.m.
4836 Victor Street
Next Meeting: **Apr 21st**

Gainesville Support Group Contact info:

Brinda Watson (352) 373-1266
Jean Haskins (352) 495-2626

Meets the 1st Sunday of each month (except Holidays)
at Hope Lodge 2121 SW 16th St
Gainesville, FL
Next meeting: **Apr 7th**

Ocala Support Contact info:

Lynn Parsons 252 337-5097

www.ostomyocala.com

Meets the 2nd Sunday of each month (except July & Aug) at 2 p.m. at the Sheriff's Station 3260 SE 80th Street between Ocala and Belleview.
Next Meeting: **Apr 14th**

Citrus County Support Group

Meets third Sunday of each month at 2:00 PM in the Seven Rivers Regional Medical Center, 6201 N. Suncoast Blvd., Crystal River, FL 34428, in the Community Room of the Medical Office Building
Next Meeting: **Apr 21st**

Amelia Island Area Ostomy Support Group

(904) 310-9054

Meets second Monday of each month at 6:30pm UF North Campus
UF Health North 15255 Max Leggett Parkway Jacksonville, FL 32218 (Meeting Room 3-4)
Free parking
Next Meeting: **Apr 8th**



SenSura[®] Mio Convex Flip

SenSura Mio Convex Flip is the first pouching system that's specially designed for stomas on bulges, curves and hernias.

If a stoma is sitting on a bulge, it might be hard to fit a flat product without getting creases and folds, which may increase risk of leakage. That's why a good fit is so important.

BodyFit Technology and the built-in stability ring within the curved, star-shaped SenSura Mio Convex Flip barrier enables the barrier to "hug" the body and increases the area of contact between the adhesive and outward area, resulting in better skin adherence.

The flip-to-fit system makes it easy for your patients to put on.

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“Gutsy’s FAB Gab-About: Stories of Ostomy ‘Glories/Gories!’”

“Speak Out and YOUR WORDS WILL Be Heard!”

By Linda Blumberg AKA “Mrs. Lips”

Gutsy again proudly presents Wild Bill/“Vesuvio’s” update to his articles that were featured in the March and April 2016 MailBags. These issues can be accessed online in the Jacksonville Chapter Newsletter Archive at www.ostomymcp.com. If you prefer a hard copy sent – please contact Patti @ 904-733-8500 and she will email or mail you out the newsletters!

More from Wild Bill/“Vesuvio 2018 : TAMING “VESUVIO”

“Hi, All; This is “Wild” Bill Caruso here, bringing new ideas to Ostomates; Urostomates, to be specific.

Back in March, 2016 I told my story of misadventures and the learning process associated with living with an ostomy. The simple matter of taking control of my appliance behavior was a revelation to me at the time. That is to, change the device on a schedule rather than waiting for it to fail. [and April 2016]

Oh, there have been some issues since then along the path; not all is sugar & spice & everything nice. A big help has been this age of instant communication we now are swept along in our lives. Information like never before!

I didn’t mention it at that time but due to the habit of my stoma erupting urine on a very erratic basis, even a scheduled appliance change had issues. The main one, of course, is to stop the discharge of urine when the appliance area has been dried prior to applying the new one. Believe me, there have been some very trying, frustrating moments. How do I keep “Vesuvio” quiet for the few seconds it takes to align the new appliance and stick it on?

Then one day a voice from above said, “DRAIN THE SOURCE TO STOP THE FLOW ”.

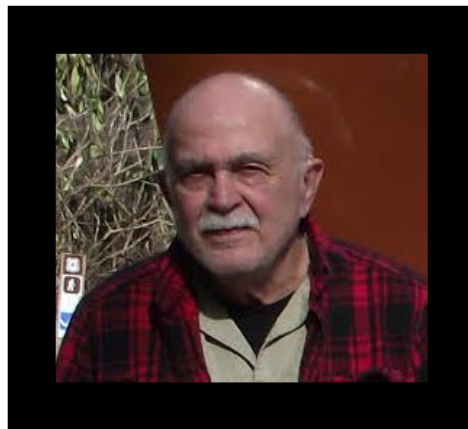
I thought about that for a bit and discovered I could force urine out by taking a deep breath and sort of applying tension to my abdomen; sort of like blowing up a balloon! When I did that, urine squirted out, almost on demand!

I played with that and learned if I forced urine out, I could get a quiet space when no urine would flow. Eureka!

Whoa there tiger. Take it easy! This is not a reprise of the three pigs and the bad wolf!

Steady as she goes. Puff too fast and you’ll make yourself dizzy. Give it a try. Kinda sneak up on it and get a feel for the process. You may be surprised.

Oh, and there’s another thing I probably should mention. To speed up the changing process, I have a hair dryer set up to blow warm, dry air at my stoma area. It is of a size which will lie on the counter rim around my bathroom sink. I also use it after bathing to dry the area around the wafer before getting dressed.”



_____ WILD BILL/“VESUVIO”... THEN, AND NOW!... _____

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10 QUESTIONS To Ask Before You Choose a Health Plan

Whether you are reviewing the different plans offered by your employer annually or looking for a supplemental Medicare plan or purchasing your own insurance on the marketplace, think of it like comparison shopping for a new car. You need an affordable plan that fits your budget. Warning: just because the sticker price is a great deal (low premiums) doesn't mean it is a good plan for you. What bells and whistles (coverage) do you need? Does the dealer (insurance broker) measure up?

Consider what is important to you and how you might have to make some concessions. For example is the priority to have coverage for your ostomy supplies or be able to go to your preferred doctor? In other words, depending on the plan you may have to decide to pay out-of-pocket for one service so that you get coverage of another more expensive service.

As you shop around ask questions like the following so that you can choose a plan confidently:

1. What type of plan is it?
2. Is your trusted medical provider that you want to keep visiting participate with the plan (i.e., are there limits on choosing your doctors or medical facilities; in-network vs. out-of-network)?
3. Does the plan have any restrictions on pre-existing conditions? (Be cautious with new short-term plans.)
4. Does the plan provide coverage for all of your ostomy supply products (and not just ostomy supplies, what are all the benefits covered (e.g., vision, routine exams, ambulance etc.) and what is excluded?)?
5. Does the plan have a formulary for ostomy supply coverage (i.e., restrict you to use only certain manufacturer brands or a particular supplier)?
6. Does the plan provide coverage for specialized visits with a certified ostomy nurse or have limits to the number of visits for specialized care (e.g., physical therapy)?
7. Do you need referrals or prior authorizations?
8. If you are on any medications, is your prescription on your insurer's formulary/preferred drug list (or does the plan cover your prescription drugs?) Plans handle prescription costs differently.
9. How much will you pay out-of-pocket before your health plan starts covering your health care services (premium, deductible, coinsurance, copay)?
10. Does the plan offer any financial assistance to help offset out-of-pocket costs?

LET'S GET PERSONAL Intimacy with an Ostomy

By Lindsay Adcock
B. Braun Medical Inc. Consultant



Everyone deserves to be loved exactly as they are, but it's natural to be nervous about intimacy with a new ostomy. The good news is that for those who have been living with an ostomy for some time and are in a healthy relationship, many say their partners don't mind their stoma and appliance.

When being intimate, I use the same pouch I typically wear. Initially, I covered my pouch, but my partner became used to it, so now I leave it uncovered.

I recommend telling a new partner about your ostomy in advance. It helps avoid an awkward situation and can help develop trust. If you find yourself in a relationship where your partner has an issue with your ostomy, you may want to rethink the relationship.

My best advice for an ostomate regarding intimacy is be confident. Your ostomy is life giving! A loving partner should adjust with you.

Three of my fellow ostomates have their own tips for intimacy:

Terri Stecher:

During intimacy, I usually wear a cover over my pouch. While my husband says the appliance does not bother him, I feel more comfortable with the cover on.

Mark Clark:

I use a mini-pouch with a filter sticker and an ostomy band for intimacy. I always inform my partner in advance about my ostomy. My current partner has become acclimated to my colostomy, and she is very open-minded. She is an amputee (right leg) and I am a paraplegic with an ostomy. So far, it has been a pleasant "ordeal" for both of us. We laugh at ourselves and get creative, as you can imagine!

Evan Dyer:

Intimacy is a big deal for my wife and me, but I was so sick before my surgery that intimacy really was not an option. We both were worried that having "a bag of poop" on my side would hinder spontaneity and romance. However, once I was feeling better after my surgery, my ostomy allowed us to be intimate again. I remember asking my wife if the bag bothered her, and she would reply, "Absolutely not! I love your bag because it kept you here!" I look at my ostomy as a gift and know that my life situation could be worse.

As for logistics, I wear a stealth belt every day and some nights, and I sometimes wear a simple ostomy wrap at night. Other times, I go "ostomy cover commando" and wear no cover of any kind. Each ostomate's personal situation is different, and so will his or her approach to intimacy.

To request B.Braun Samples visit https://www.bbraunsamples.com/e/intake/myosto_patient

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Pouch Changes – How Often

via Green Bay (WI) *GB News Review* and Seattle (WA) *Ostomist*

This question is among those most frequently asked, particularly by ileostomates and urostomy patients. Like many other questions, there is no one answer that applies to all ostomates.

An informal survey revealed that people change their appliances as much as 3 times a day, and as infrequently as every 2 to 4 weeks. Obviously, there must be reasons for this great variation. After pointing out that the great majority of ileostomy and urostomy patients change in the range of once daily to once a week, let us explore some of the reasons. People on either side of this spectrum can have a skin problem or skin which is nearly indestructible. Some of the reasons for the variation in time between changes include:

Stoma length: A short stoma exposes the adhesive material to moisture which decreases wearing time.

Amount or consistency of effluent: Profuse effluent tends to loosen the seal.

Skin Type: Moist or oily skin tends to decrease adhesion time.

Skin Irritation: Decreases adhesion. The appliance should be changed more frequently to evaluate the success of your attempts to heal the skin.

Experience: Good technique, such as allowing glue (adhesive) to dry well, increases adhesion.

Personal Experience: Preferences, convenience and odor control.



UOAA's 7th National Conference

Philadelphia

AUGUST 6, 2019 @ 2:00 PM - AUGUST 10, 2019 @ 11:00 PM

<https://www.ostomy.org/2019-uoa-national-conference/>



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