



UltraMax DEEP™ One-Piece Ostomy System

Unique petal design creates a flexible, comfortable fit for all abdominal contours. Now available with pre-cut or cut-to-fit flange and XL flange (drainable pouch only). Available for drainable, closed and urostomy pouches.

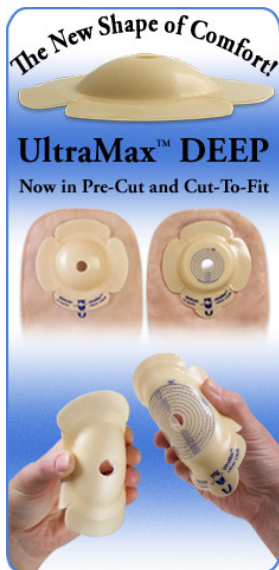
FEATURES:

- Advantages of a one-piece system
- Ease of a disposable system
- Odor-proof pouch material
- Quiet, built-in comfort cover facing the body
- Leak-proof for added protection and security

Closed End and Drainable pouches are available with either the Opaque with Kwick-View™ or Transparent feature. Urostomy pouches are available with Transparent ONLY.

with AquaTack™ Hydrocolloid Barrier

- Covers entire flange for maximum skin protection
- Absorbs skin moisture
- Adheres to moist skin
- Controlled adhesion
(seals securely and removes easily from sensitive skin)



Medical Care Products, Inc.
(904) 733-8500
(800) 741-0110

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: **Aug 19h**

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: **Aug 5th at 2pm**

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: **Sept 9th**

Guest Speaker
Patti Langenbach
Medical Care Products

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: **Aug 19th**

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: **Aug 13th**

Check Out The MailBag Now On Facebook

https://www.facebook.com/JaxUOAA/?ref=aymt_homepage_panel



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

“Speak Out and YOUR WORDS WILL Be Heard!”

By Linda Blumberg AKA “Mrs. Lips”

“A Stranger Came Into My Life...”

One day, a person came into my life. A person and a day that changed everything. They did not change the way I think about the world. Instead, through their professional expertise and commitment, they changed and altered in all ways imaginable the way I view myself, and they confirmed how I view everyone else around me.

Sitting in the examination room at the Ottawa Hospital, I anticipated seeing her again. Like the dawn, she had given me the shimmering glow of the hope of survival, and that a new day was possible. She who was there at the rising of my new beginning, my new normal, my renewed awakening. She was once a stranger that I met on my journey to another destination. Perhaps it was fate that she would be the one who would create the masterpiece I call, “Percy”, my life-sustaining stoma.

Right here in this tiny room, during this tiny moment, I am reminded that my mortal body will not last forever, and yet every day since July, 2011, I have lived my gratitude for survival from the brink of death. Then suddenly, with a vortex of rushing air from the hallway, mixed with the combination of antiseptic gasses and dust particles of my tiny room, the door opened and there she was. “Hello Jo-Ann, and hellooo Percy”, she blurted. In that instant a kaleidoscope of emotions took hold of me. Joy, excitement, trust, and once again an overwhelming feeling of gratitude. She was the one, she had been there at my lowest of low. The stranger who played a major role in saving me.

My gratitude is held treasured within me for Dr. Rebecca Auer, MD, MSc, FRCSC. She the capable surgeon, the stranger that came into my life that fateful day. She who is committed to saving life if at all possible. She who led the team of experts who repaired the many parts of my diseased and injured body. She who worked with nature's original colon design, and fashioned an outstanding work of art, my ostomy.

I was delighted to see her and have the opportunity to once again express my gratitude, and to share the ripple effects and flow of her and her team's accomplishments. For me, gratitude is a multifaceted gem. One facet is the inner acknowledgement and acceptance of the truth of something dearly received. The second facet is the explicit and voiced declaration of gratitude that amplifies the inner voice out to the giver to be heard in the outer world. The third facet is the action of gratitude. Action is custom-designed to fit the experience. There are a myriad of actions that can be taken, for example; returning the kindness, paying it forward, or creating an enduring and long-lasting legacy.

During the few minutes we had together, Dr. Auer and I chatted about life. I was able to let her know that due to her and her teams' culmination of study, practiced expertise, and commitment, I have taken my bonus years seriously. Three more grandchildren have been born since 2011, and I live the joy of my now seven grandchildren with the desire for more. I have been able to continue my travels to the far reaches of our beautiful planet with my husband, Mark. I have solidified my commitment (as my act of gratitude), to becoming ostomy knowledgeable, and applying this knowledge and attendant experiences, to awareness and advocacy projects. In support of awareness and advocacy I have written 3 books on the subject of ostomy, ostomates, the life of the ostomate, and their caregivers. I am a member of the Canadian Ostomy Society – Medical Advisory Committee (MAC), holding the title and responsibilities of, “Ostomy Lifestyle Expert”, I write ostomy/life related articles for ostomy magazines in Canada, United States, and the United Kingdom.

I expressed my gratitude to her for doing everything professionally possible for her patients.

I told her the reality for me, are the following core facts as I believe them to be:

1. Because of her commitment to saving lives, her consistent desire to research/find solutions to life destroying diseases/circumstances, and her dedication to assist in ways possible as a surgeon, oncologist, professor, and researcher, she positively impacts the lives of her patients.

2. The work she and her team(s) perform on a daily basis creates ripple effects, that expand ever outwards across and throughout not only the lives of her patients, but also the people they touch. Every moment longer a patient survives, another level of quality of life that is experienced, is a testament to their dedication which incrementally builds as their patients live their future. Their good works become our shared legacy.

3.As one of her patients, I am in gratitude that I am alive and so, I am living my life to the fullest in spite of it all, and committed to ostomy awareness and advocacy.

A stranger came into my life and the world took on a different light. This person, this perfect stranger to me, saved my life, created my ostomy, and each day that I attend to my stoma, I glimpse the beauty of nature's amazing design that is inside of us. I marvel at the creation I call Percy. I didn't know this stranger but one thing is for sure, I am forever changed. Thank you.

Authored by:

Jo-Ann L. Tremblay

Percy Stoma "Everyone you meet has a story to tell."

www.jo-annltremblay.com THE OSTOMY FACTOR – joannltremblay.wordpress.com"

Summertime...and the Living is Easy

by Bobbie Brewer, Greater Atlanta Ostomy Association, July 2011

Summertime fun may include many outdoor activities and travel, but may also lead to some concerns about ostomy management. Let's review:

Swimming is an excellent exercise and activity you can enjoy with family and friends. So, why are so many of us afraid to get back into the water? Check out these tips:

- Don't go swimming immediately after you have put on a new pouching system.
- Make sure your pouch is empty and has a secure seal.
- Picture framing your wafer with water-proof tape isn't necessary, but may give you the extra confidence you need.
- Take precautions against sunburn. Besides being bad for your skin; a bad sunburn can result in diarrhea and sometimes vomiting, thus depleting electrolytes.
- When sitting and soaking up the sun, protect/shade your pouching system by placing some covering across the outside area (e.g., hat, towel, magazine).
- Monilia is a common summer problem. This raised, itchy, red rash on the peristomal skin is uncomfortable and keeps the pouches from holding well. If you suspect a monilia rash, consult an ostomy nurse.

Fluids and More Fluids are needed during the hot summer months.

Review the following:

- Water is an essential nutrient needed by each and every body cell. Up to 75% of the body's mass is made up of water. Water controls body temperature, serves as building material and solvent, and transports nutrients. Thirst is a signal that the body needs fluids. Daily losses must be replaced. Encourage fluid intake of eight to ten (8 oz) glasses of liquids each day.
- Any liquid containing water (soda, milk, juice, etc.) helps to meet your daily requirement. You can also get water from the food you eat (e.g., tomatoes have a total of 94% water content). [North Central OK Ed. note: And don't worry if liquids contain some caffeine. It's a myth that caffeinated drinks are dehydrating.]
- Water is an excellent natural beverage; however, over-consumption of water can wash away electrolytes in the body. Drink a combination of water and electrolyte beverages. The glucose ingredient in electrolyte drinks aids in the absorption of electrolytes. [North Central OK Ed. note: To emphasize this point, runners in marathon races have collapsed, and sometimes even died, due to hyponatremia—low blood sodium caused by drinking too much plain water.]

Summer Diets

- Remember the fiber content of those fresh fruits and vegetables—enjoy but chew, chew [ileostomates, especially].
- Add only one new food at a time to determine the effect (if any) on your output.

Tips for Traveling with Medications and/or Ostomy Supplies

- Keep your medicines (and emergency pouches) with you—not in the checked luggage.
 - Bring more than enough medicine and/or ostomy supplies for your trip.
 - Keep a list of all your medicines and/or ostomy supplies with you.
 - Do not store ostomy supplies in your car, especially under the hot summer sun.
-

Incidentally...

by Marjorie Kaufman, Los Ileos News, Los Angeles; via Northern Virginia The Pouch

No one can tell me at a glance that I have an ostomy. Only those close to me know it for sure. Perhaps that is why it is difficult for me to recognize a curious fact; some people do not realize it's a BLESSING, not a DOOM!

One wonders whether this knowledge might have some value to the human race—at least that part of the human race that tends to look upon an ostomy as a disaster.

Acceptance is part of being happy. People need happiness as much as they need food; without it they're devoured by restlessness and discontent.

How many people who think they resent an ostomy would, if they were truthful, recognize it as the thing they most needed to enjoy life again? How many could, with a simple change in mental outlook, admit it's a BLESSING?

Many people never learn; they never achieve the peace of mind and contentment this knowledge brings. They spend their lives in a prison where an ostomy is the eternal punishment. An ostomy is not DOOM—that's a mental attitude.

Nothing is a joy or a burden; only thinking makes it so. How can we avoid that feeling of compulsion that makes an ostomy a burden? We don't disclaim it. There's no use kidding ourselves about that.

Nevertheless, there are things we can do to take the edge off the feeling of compulsion and make things more pleasant. We need to expend our mental and physical energies.

If these energies are not expended in a constructive fashion, they turn inward and poison our minds and bodies with resentment and dissatisfaction. We need that warm sense of accomplishment, to be needed, wanted and useful. We need it to give balance to our lives.

Contentment depends not so much on the BLESSING as on the attitude of the person who has it.

What's Normal... Answers from Your Stoma to You

by Liz O'Connor, RN, CETN, Metro Maryland; via Fairfield (CA) Solano Ostomy News

What is normal for my stoma? This is a frequently asked question. Here are some answers from your stoma to you.

My color should be a healthy red. I am the same color as the inside of your intestine. If my color darkens, the blood supply might be pinched off. First make sure your skin barrier/wafer is not too tight (this can vary according to the barrier type, as some require a small gap between your stoma and the barrier material, while others are intended for a snug fit where the wafer material actually touches your stoma). If I should turn black (very unlikely – but it happens occasionally), seek treatment AT ONCE. Go to an Emergency Room if you cannot readily locate your doctor. (Be sure to TAKE AN EXTRA POUCH ALONG so you can remove the pouch for doctors to examine the stoma.)

I might bleed a little when cleaned. This is to be expected. Do not be alarmed. Just be gentle please, when you handle me.

If I am an ileostomy, I will run intermittently and stool will be semi-solid. If you should notice that I am not functioning after several hours and if you develop pain, I might be slightly clogged. Try sipping warm tea and try getting in a knee-chest position on the bed or on the floor. (Have your shoulders on the floor and your hips in the air. Rock back and forth in an attempt to dislodge any food that might be caught.) If I do not begin to function after about an hour of this, call your physician. If you cannot locate him/her readily, go to an emergency room. In the meantime, I might have begun to swell. Remove any pouch with a tight wafer and replace it with a flexible one with slightly larger stoma opening.

If I am a colostomy located in the descending or sigmoid colon, I should function according to what your bowel habits were before surgery (daily, twice daily, three times weekly, etc.). I can be controlled in most cases with diet and/or irrigation. This is a personal choice. There is no right or wrong to it, as long as I am working well. My stool will be fairly solid.

If I am a colostomy in the transverse colon, I will have a more loose stool than a descending or sigmoid colostomy. Because there is less remaining colon in this case to absorb water and solidify the stool, its consistency will be closer to that of an ileostomy.

If I am a urinary diversion, I should work almost constantly. My urine should be yellow, adequate in volume and will contain some mucus. If my urine becomes too concentrated or dark, try increasing your fluid intake. If my mucus becomes more excessive than usual, I might have an infection. I will probably also have an odor and you may have a fever. Consult your physician if this happens.

If at any time, you doubt that your stoma is functioning normally, please seek help. The cause needs to be evaluated. If your problem is a serious one, it needs to be corrected. If it isn't serious, you will be relieved to know that your stoma is alive and well.

World Ostomy Day 2018 OCTOBER 6



<https://www.ostomy.org/event/world-ostomy-day-2018/>



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Medical Care Products, Inc
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