Meet Your ET Nurses

Muriel Larsen, RN, ET
New West Ostomy Care & Supply

It is a privilege to be a part of a person’s life as they “journey” through the surgical experience of having and adjusting to living with an ostomy. I am committed to offering continued support to anyone living with an ostomy.

A 1969 Royal Columbian Hospital School of Nursing graduate and recipient of that year’s George T Wilson Surgical Award, my career in surgical nursing commenced on the RCH surgical ward. Later I took a four year hiatus to raise my four children while working part time at both the Burnaby General and Royal Columbian Hospitals.

In 1984, I began to provide vacation relief for the Enterostomal Therapist Clinic at RCH. The impetus for making a career shift from bedside nursing to the role of the Enterostomal Therapist at RCH in 1994 was the satisfaction of caring for this specific group of patients/clients. It was during this time that I decided to enter the Enterostomal Therapy Nurse Education Program offered by the Albany Medical Center, New York, from where, in 1995, I received my course certification as an Enterostomal Therapist.

As the Royal Columbian Hospital joined with Eagle Ridge, Ridge Meadows and Burnaby Hospitals under the Fraser Health Authority, the continuous population growth in these areas demanded an Enterostomal Therapist at each site.

I developed an outpatient clinic at Ridge Meadows Hospital in 1996 which, at present continues to provide pre and post-operative care at the hospital and ongoing rehabilitative care in the clinic.

In 1997 I expanded the RCH Clinic and began to visit Burnaby Hospital also to provide pre and post-operative care to patients having ostomy surgery. At this time, I was joined by a colleague, another Enterostomal Therapist, on a part time basis.

As an Enterostomal Therapist, I specialize in advanced chronic wound care and fistula management and am a founding member of the Clinical Task Team Skin and Wound Care Team for the Fraser Health Authority. The role of this team is to standardize and regionalize the delivery of chronic wound care using best practice. It has always been a driving principle in my practice to engage every aspect

cont. page 5
From Your President

We had a good turnout of 28 members, newbies and guests at our April 29 meeting. Judy Stephen of SALTS medical products gave a presentation that developed into a lively question and answer session as folks got to see and handle several samples of new products. (The overhead projector was broken so Judy had to wing it, which turned out to be a great discussion!) Thanks to Judy for bringing so many free samples. Thanks and welcome as well to our newest advertiser, Shoppers Home Health, who sent two representatives to the meeting.

You’ve all completed your tax returns for this year, yes? And you included your deduction for the Disability Tax Credit you previously successfully applied for, yes? Many of us have applied for, and received, the Disability Tax Credit but for those of you who have been turned down for any reason, don’t give up. You can re-apply any time and may want to consider having someone else do this for you if you feel the obstacles are too great for you to get past. En-abled Financial Solutions is a Victoria company that specializes in going to bat for folks who are having trouble obtaining their legal disability tax credit. For more information, see the write-up on page 4 of this newsletter. EFS does charge for their services -- there is a processing fee and they take a percentage of whatever refund you are due from the government -- but if you have not been successful in applying on your own these fees might be worthwhile. Check them out.

New federal Not for Profit legislation is coming that will affect the United Ostomy Association of Canada and all of its chapters. This legislation will involve re-registering the chapter as a non-profit organization, updating our bylaws to reflect current trends and realities and updating other literature as required. Your delegates at the national UOAC conference this August will be learning what this new legislation will entail and what changes, if any, may be noticed by members at the local level.

In concert with changes the government will require, current national UOAC Board of Directors has drafted a Strategy Plan that outlines how we, as both a national and local organization can survive and stay relevant in the face of change. Some of the focus areas identified in this outline are: more use of social media to attract new and younger members, more collaboration with the medical community, attracting and retaining more volunteers, more collaboration with like-minded organizations and more equity between provinces for reimbursement of ostomy supplies. As one of your representatives in Toronto this August, I look forward to learning in much more detail how this Strategic Plan can be implemented at the local level. Your delegates will endeavor to keep you all up to date on whatever changes occur.

-Debra

Chapter member Trevor Mendham and Judy Stephen of SALTS Medical products.
Message from UOAC
President, Les Kehoe
from the UOAC Connection,
April 2012

Hello Fellow Ostomates,

The Easter season and Passover are fast approaching and will probably be over prior to you reading this message. It is my hope that everyone enjoyed a happy and healthy holiday weekend. This is always a good time for family and close friends to come together in a time of joy and renewal.

It is expected that our UOAC family will be going through some major changes with its new and inventive strategic plan over the next five years. The Board of Directors has given this road map a great deal of thought and has reached a decision. The Board of Directors thinks that it is in the best interest of UOAC to take the necessary steps that are outlined in this plan. The survival of our organization is important and this plan will drive us in the direction that will ensure the viability of UOAC over the long term. All the steps in the plan will have to be carried out in a timely manner in order for UOAC achieve its mission. It will take some time for all the steps to be completed. This plan is not to be rushed as all steps are important and necessary for further development and continuation of our Association. Please prepare your delegates to make the decision that will further the goals of UOAC in to the future.

The UOAC 13th conference in Toronto is developing under the close watchful eyes of Dianne Garde, UOAC conference administrator and Di Bracken, conference chair for Ostomy Toronto. Please remember the dates are August 16, through August 18, 2012.

All hotel accommodations are made directly to the Delta Chelsea Hotel. Registrations are to be completed and sent to UOAC national office along with the registration fee.

Please be aware that any post conference activities pamphlets will be available through Tourism Toronto in the hospitality room. Most post tours will be arranged by the respective tour companies and not UOAC or Ostomy Toronto. The hospitality room will be manned at all times in order to help anyone who may require assistance.

The conference is a great opportunity for each and everyone to further the knowledge base of their chapters by attending the educational sessions and reporting back to the people in the chapter that could not attend. Please make every effort to attend this educational and social event.

- Les Kehoe, President, UOAC

It’s a Girl!!

Congratulations to chapter member Amy Ridout on the birth of her second child!! Little Phelan joined her brother this January.

Have I got cute kids or what!

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- No pain, even when used on sore or excoriated skin
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The new Canada NPC Act will ultimately repeal and replace the Canada Corporations Act with a system of modern corporate governance for NPCs comparable to that provided by the Canada Business Corporations Act, which regulates federally incorporated business corporations. This new NFP Act was passed October 17, 2011 and not for profit associations have three years to apply for continuance and revise their by-laws to meet the criteria of the new NFP Act. The new legislation will enable NPCs to take advantage of the protections and advantages offered by incorporation, such as predictability and accountability, and will eliminate unnecessary regulation of NPCs. The NPC Act will clarify corporate powers, directors’ liabilities and responsibilities, articulate members’ rights and generally increase fiscal accountability of NPCs. Of the many important provisions that will be cemented by the NPC Act, notable aspects include:

• streamlining of the incorporation process due to incorporation as of right;
• definition of the capacity and powers of an NPC as a natural person;
• definition of duties and standard of care for directors;
• differentiation between soliciting corporations (those that solicit donations from the public) and non-soliciting corporations, with different financial reporting requirements for each;
• requirement for all NPCs to make their financial statements available to their members, directors and officers, as well as to the director of the NPC Act who is appointed to oversee compliance with the legislation;
• articulation of procedures for fundamental changes such as amalgamation, continuance and dissolution; and availability of oppression and derivative action remedies for members of an NPC.

As Directors of a smaller NPC, please take note of a provision of the NPC Act enabling members to enter into a unanimous member agreement. This provision enables the members of smaller NPCs to control or limit the powers of directors or to control the operation of the NPC. Directors should also be aware that under the new legislation, the articles of an NPC must contain a statement of purpose. The NPC may not carry on any activity or exercise any power outside its statement of purpose. Accordingly, directors will want to draft this provision carefully to ensure the corporation is able to operate as required to achieve the objectives for which it was created.

- Ottawa Ostomy News, May 2012

Enabled Financial Solutions Ltd.

When it comes to advocating for people with disabilities or chronic medical conditions, Enabled Financial Solutions Ltd. (EFS) sets the precedent for helping people file for and receive a fair and generous Disability Tax Credit (DTC) refund and future benefits. It is the company’s mission to ensure that people get all the DTC benefits that the law entitles them to.

The DTC is a federal tax credit available to people with disabilities or chronic, life affecting medical conditions. It is based on income tax a person has paid previously, is currently paying, and will pay in the future. The bottom line is that it’s the individual taxpayer’s money, not the government’s money. EFS specializes in “clawing back” some of those hard earned tax dollars back for you as a result of your medical condition.

The company has done so well in providing this much-needed service to people that it won the Small Business of the Year Award in Victoria for 2011, was a finalist for the Better Business Bureau’s Torch Award for 2011 in the “Business Professional” category, and holds an “A” rating with the BBB. The company has been in business since 2006, and has a success rate of 99.9%.

Company CEO and founder Linda Chornobay herself has a disability — and it was that disability that was the seed from which the company grew. About seven years ago, Chornobay, whose background is in administration, medical and legal, did
Bugged by Summer Bugs?

Goodbye Fruit Flies
To get rid of pesky fruit flies, take a small glass, fill it 1/2 with Apple Cider Vinegar
Add 2 drops of dish washing liquid; mix well.
You will find those flies drawn to the cup and gone forever!

Get Rid of Ants
Put small piles of cornmeal where you see ants. They eat it, take it ‘home,’ can’t digest it so it kills them. It may take a week or so, especially if it rains, but it works and you don’t have the worry about pets or small children being harmed!

Our ET Nurses, cont. from page 1

of clinical issues, to promote best practices achieving optimum results for each patient\client under my care.

It has and continues to be a great joy to teach at the many workshop presentations with which I have been involved both while working for the Fraser Health Authority and at the Ostomy Care and Supply Center.

I joined Andrea Manson at the Ostomy Care and Supply Center in August, 2005. I retired from RCH in May 2007 and continue to enjoy and value my contact with clients at the Ostomy Care and Supply Center.
Introducing New

Cohesive Paste

Available Exclusively at NIGHTINGALE MEDICAL SUPPLIES - Eakin Cohesive Paste - an alcohol-free stoma paste which protects skin and manages output from difficult stoma sites.

Alcohol-Free
Cohesive Paste does not sting like traditional pastes, and will not dry out or harden.

Skin Friendly
Promotes skin healing, reduces itchiness and redness, and is comfortable on application.

Easy to Use
No waiting to dry before applying pouch. Adheres to moist skin and fills in deep skin folds, scar lines and uneven surfaces. Can be used with other Eakin products.

Based on the same formula as other Eakin products, Cohesive Paste protects skin in the same way:
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Reduces digestive enzyme activity, stopping them from breaking down the skin.
Maintains natural pH and blocks biological and chemical irritants from contacting skin.

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I'VE GOT WHAT?
(Reader's Digest)
Do you know what your doctor is talking about when he or she says you have a certain condition? Below are listed 20 health conditions. Can you match the disease with the correct part of the body affected it?
ANSWERS UPSIDE DOWN BELOW

1. -otitis  1. lungs
2. -neuritis  2. muscles
3. -carditis  3. eye
4. -dermatitis  4. throat
5. -arthritis  5. blood vessels
6. -conjunctivitis  6. stomach
7. -bronchitis  7. bladder
8. -nephritis  8. heart
9. -colitis  9. large intestine
10. -glossitis  10. kidneys
11. -rhinitis  11. joints
12. -gastritis  12. abdomen
13. -Hepatitis  13. ear
14. -peritonitis  14. brain
15. -cystis  15. tongue
16. -tonsilitis  16. liver
17. -bronchitis  17. nose
18. -encephalitis  18. skin
19. -thrombophlebitis  19. bones
20. -myositis  20. nerves

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24 Hour Ambulatory Blood Pressure Monitoring
Ankle Brachial Pressure Index Testing
Registered Nurse Consultations

All Kinds of Tips & Tricks
• If you drink alcohol shortly after taking a time-release pill you will get a heavy dose of medication all at once!

• Tobacco smoke can interfere with medication taken for unrelated illness. Benzopyrene, an ingredient in smoke, forces some medications to move through your system too quickly.

• Avoid vacuum lock by keeping a little air in your pouch.

• If you like long showers and need to keep your appliance on while doing so, tie a plastic apron around your waist to keep hot water off the flange. You can still get clean and the flange will stay on better when you get out.

• Avoid pants or skirts that are tight overtop a colostomy -- you can wind up with annoying pancaking.

• Psyllium husk capsules, taken daily, can help speed up slow irrigations.

Via: Saskatoon Ostomy Association
Bulletin Aug. 2011
Via: Brantford & District Ostomy News 2012; Brantford & District Ostomy News April 2012

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2—neuritis - nerves
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4—dermatitis - skin
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9—colitis - large intestine
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20. Answers:

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Skin Care
Handling Skin Problems

Caring for your skin and addressing problems promptly if they occur are extremely important for the new and experienced patient alike. Rashes are usually caused by improperly fitting pouches, leakage of stool on the skin, hair follicle irritation, perspiration, or the misuse of skin barriers. An important aspect of avoiding skin problems is keeping a seal. To keep a pouch on irritated skin, it is necessary to have dry skin first. When the skin is irritated, it does not remain dry and cannot be dried with a cloth. A basic method of drying the skin includes a warm heat lamp or hair dryer. “Heat lamp” refers to any type of lamp with a maximum 25-watt bulb placed at least one foot away from the stoma and allowed to shine for only 10 minutes. You will find a desk lamp good to use. You don’t want to dry the stoma itself -- it’s meant to be moist, like the tissues in your mouth -- cover it with a piece of tissue or soft cloth. NEVER USE A SUN LAMP. THIS IS AN ULTRA-VIOLET LIGHT and will bum your skin. If you have had radiation therapy to the skin around your stoma do not use any lamp or light to dry your skin. A hair dryer, of less than 850 watts, may be used if there is a cool setting.

You may be familiar with the use of one or two products from your hospitalization. If you want to try different skin products to remedy a situation, it would be advisable first to call your ET nurse for suggestions. Rashes are one of the most common skin problems and can range from mild and temporary to painful and severe. They can occur under the tape, under the faceplate and on any part of the skin where the pouch comes into contact with the skin. A generalized reddish appearance that covers an entire area, similar to a diaper rash, will be seen. It can be caused by a leaking appliance; perspiration; allergies to tape, and hair follicle irritation. A certain amount of slightly reddened skin around the stoma is not unusual (healthy skin can redden if it’s covered by something such as a bandaide. But if mildly reddened skin becomes constantly itchy, displays spots or weeping areas this needs to be addressed. Skin rashes don’t get better by themselves, so don’t ignore them in the hopes they’ll ‘go away’. To remedy, use a hair dryer to dry the skin, sprinkle a small amount of powder (such as karaya*, or Stomahesive) on the skin, wipe off the excess, then blot with a skin sealant to seal the powder to the skin and apply your faceplate to that. In hot weather you may want to powder the skin under the pouch (not under the faceplate) with baby powder, or make or buy a pouch cover. You can also let the appliance hang out overtop to lessen perspiration discomfort.

If you use a belt, don’t cinch it up too tightly; this can break the seal. If a rash is not responding to home remedies after 2 to 3 days, consult your ET nurse.

Make sure your ET nurse has booked a follow-up appointment with you several weeks after surgery so she or he can assess how your gear is fitting you and make any necessary corrections.

* What is Karaya, anyway?

Karaya, or “Karaya gum” is a vegetable-based all natural product derived from the soft Sterculia urens tree native to India and Pakistan. The karaya gum is produced by collecting the gum by removing bark or drilling holes into the trunk of the tree.

Recognized as safe and non-toxic, Karaya is used in many products ranging from food emulsifiers, adhesives, laxatives, dentures, lotions, and of course, ostomy supplies.

The best, purest medical grade Karaya gum is clear to white in color and can also come in powder form. From a chemistry standpoint, Karaya will absorb water quickly and forms a “gum”. It can absorb as much as 100 times its weight in water. With higher concentrations of water, Karaya forms a gel or paste that can be used to comfortably and safely smooth out rough or uneven skin.

Why is Karaya used in ostomy supplies?

Typically, you’ll find Karaya either as a powder or applied to skin barriers/wafers. This product:

Helps Prevent Bacterial Infections: - Karaya has chemical qualities to help reduce bacterial adhesion, the same reasons that make it great for denture adhesion.
Helps Irritated and Sensitive Skin: - Irritated skin is a common affliction to the skin around a stoma, and Karaya’s unique chemical properties allow it to create a protective gel over the affected skin and absorb excess moisture. This ensures the skin is protected prior to attaching a barrier and ostomy appliance to the skin. This is also good for patients who may have sensitive or fragile skin that does not accept synthetic skin barriers.

What kinds of Karaya ostomy supplies are there?

Karaya Powder - Powder is applied prior to using a skin barrier, commonly for irritated skin to serve as an extra layer of protection against bacteria infections and to keep the skin from further irritation due to the adhesion of the new barrier. When using the powder, it will absorb moisture from the skin to create a sticky and mildly adhesive “gel”. Powder is sold in small puff bottles that make it easy to apply evenly.

Karaya Paste - A karaya paste is applied to the skin to help prevent irritation as well as help smooth out irregular skin surfaces when an ostomy appliance is applied. The skin is protected from leaks by the natural hydrocolloid** Karaya gum. The pastes are commonly sold in squeeze tubes.

Karaya Skin Barriers - Skin barriers with natural Karaya serve many of the same benefits; it helps prevent skin damaging organisms from growing on the skin and offers some flexibility and convexity in the barrier, allowing it to conform to irregular stomas, flush stomas, or skin folds. However, keep in mind that Karaya skin barriers are only mildly adhesive so it’s likely that a tape border is necessary for a strong adhesion.

Soluble vs Insoluble Fiber: What’s the Difference?

If you have an ileostomy, should you eat fibre? How much? What kinds are safest?

The intestine has a remarkable capacity to adapt. Matter/digested food in the small intestine is quite watery, and after it moves into the large intestine, a good portion of the water is reabsorbed into the body. Most fiber is indigestible material from plants that acts like a sponge, soaking up water and increasing the bulk of the intestinal contents making matter move through the system more quickly. In a person with an intact colon, fiber is essential to preventing constipation and keeping a person “regular.” This is the main function of fiber. A person without a large intestine (ileostomy) doesn’t have a problem with constipation and will have loose or watery stool. (Some ileostomates report that over time, their stool becomes less watery as the small bowel adapts and ‘makes up’ for the loss of the large intestine.) This is especially possible if the last section of the small bowel (ileum) is still intact. However, consuming too much “insoluble” fiber may cause a blockage. Avoid or limit your intake of insoluble fiber such as bran, popcorn, seeds, nuts, skin/seeds/stringy membrane parts of the fruits and vegetables. However, another type of fiber (soluble) may be beneficial to the ileostomate. It may seem like a contradiction, but the function of soluble fiber is to make intestinal contents “thicker” and can actually help prevent diarrhea. This fiber is found in oatmeal, barley, dried beans, peas, Metamucil and in the pulp of fruits and vegetables. Most foods have a combination of both types of fiber, but the above examples show the differences. Adding pectin (Certo, used to make jam and jelly) to one’s daily diet can help to minimize diarrhea. Add it to applesauce.

How much of any of this stuff the individual ileostomate can safely eat is, unfortunately, often determined by trial and error (and sometimes, despite knowing better, having just o-n-e more taste of those nuts!) Pay attention to how much, and how fast, you are eating any kind of fibre. It might seem silly to measure one’s intake of certain things by the bite, but it’s best to be ultra-cautious as you resume eating after surgery. Add vegetables and fruits in very small amounts. Chew your chow carefully and thoroughly. Try not to learn your limits the hard way! ☝

** A substance that forms a gel with water. So, technically, Jello is a hydrocolloid!
Your Independence, Our Solutions

• Colostomy  • Ileostomy  • Urostomy

We have your brand

Coloplast

ConvaTec
A Bristol-Myers Squibb Company

Hollister

You do have a choice when it comes to selecting your Ostomy supplier

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(250) 717-1850

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(250) 492-7592

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12080 Nordel Way, Unit 135
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10 Vancouver Ostomy HighLife - May / June 2012
The One Pass Ostomy Draining Device is a hand held tool that allows users to drain the contents of their pouch no matter where they are or what they are doing. Furthermore, it does this in a matter of seconds and the user’s hands barely touch the pouch. On November 29th, 1980, at the age of 18, inventor Phil Rondeau was diagnosed with Crohn’s Disease. Following this diagnosis and over the next 17 years, Phil underwent eight bowel resections surgeries and many hospitalizations. Upon another flare up of the Crohn’s Disease in the summer of 1997, the doctors recommended that he have an ileostomy and in late September of 1997 Phil underwent the surgery. The innovative and durable OPODD™ is manufactured in Canada with high-quality stainless steel components and long-lasting nylon rollers. This medical device is a dual roller, hinged device which includes a locking mechanism at one end that allows the ostomate to secure the dual rollers totally across the width of the pouch. This combined hinged and locking system permits the dual rollers to pass over the entire pouch with ease and removes practically all of the contents in one pass.

The device is only eight inches long and takes up less space than two ball point pens and can easily be carried in a pocket or purse.

For more information or to order call toll-free: 1-855-364-9711

ACTIVE SUPPORT BELT
Inconspicuous Support for Your Colostomy, Ileostomy or Urostomy

Our Ostomy Support Belts protect your urostomy, ileostomy or colostomy bag, securely holding it up and against your body so there is no fear your pouch might get pulled off from your stoma appliance or snagged if it hangs down.

We construct our belts using a flexible material that moves with you and easily expands with your ostomy bag as it fills. Once you’ve recovered from your colectomy, urostomy, or ileostomy surgery, choose the stoma support belts that comfortably hug your bag close to your body.

Bend, stretch, jump – walk, dance, run. Go out and socialize and participate in the activities you truly enjoy!

Our ostomy support belts provide you with peace of mind no matter how active you are, so try one today and start really living with an ostomy.

Designed With Intimacy in Mind

Our Ostomy Support Belt is the perfect choice when you’re concerned about your partner’s reactions. It discretely supports your colostomy bag, holding it up and away from more intimate areas.

Get Affectionate Without Worrying About Your Ostomy

Interact with your partner and get closer with the confidence that comes from knowing your pouch is not moving around but held in place, out of the way and secured against your stoma appliance, behind a soft and attractive fabric. Your partner will barely notice it is there!

http://activesupportbelts.com/

TRAVEL TIP
Change your pouch 24 hours before departure to assure proper complete adherence, especially if you are flying.
Acid Reflux? Try Chewing Gum

A small study found that chewing sugarless gum after a meal increases saliva production, which neutralizes throat acid to provide temporary relief from symptoms of gastroesophageal reflux disease, or GERD. In addition, because repetitive muscle movements can stimulate the production of serotonin -- your brain’s natural anti-depressant -- chewing gum reduces stress. Therefore, next time you’re stuck in traffic, and your heartburn is acting up, try a piece of gum. Just make sure it doesn’t contain oil of peppermint, because peppermint is a known reflux trigger. Also, be careful how much sugarless gum you chew, or you could wind up with excessive intestinal gas, or even diarrhea. Colonic bacteria thrive on sorbitol - a sweetener used in many brands of sugarless gum -- and break it down into gas. However, a piece or two of sugarless gum should abate GERD symptoms for a few hours without consequence.

“You can’t run away from trouble. There ain’t no place that far.”
- Uncle Remus

Ostomy supplies - what vendors are doing to improve supplies and provide solutions to common problems faced by people with ostomies.

How people communicate and use technology to reach out for support - how can the UOAC and local chapters leverage these options that didn’t exist 10 or 15 years ago to provide support in non-traditional ways.

Our local chapters - what local chapters have done to reinvent themselves and attract/retain members, raise funds, promote awareness.

Changing demographics of the ostomy population - Canada’s population is aging and multicultural groups are growing - how do we address these changes yet also remain/become more relevant to young people and parents of children who have ostomy or related surgeries.

The host hotel is the Delta Chelsea in downtown Toronto. Quoted conference rates are Single or Double for $159.00, Triple for $179.00. These rates do not include the harmonized sales tax of 13%.

http://www.deltahotels.com/en/hotels/ontario/delta-chelsea/

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- Custom Ostomy Hernia Belts

Andrea (Andy) Manson and Muriel Larsen
RN, ET (Ostomy) Nurse Specialists

Ostomy Care & Supply Centre
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Central Vancouver Island’s ONLY store based Ostomy Clinic with Colette MacAskill, RN, ET (Ostomy Specialist) on staff.

- Long term accessibility, education and support from ET, Ostomy Specialist
- Free consultations and Appliance Fittings in private clinic
- Expert product information and Sampling Program
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- BC Pharmacare receipt
- Competitive pricing
- Custom Ostomy Hernia Belts

FREE DELIVERY of ostomy products island-wide
Store Open 7 days a week.

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1816 Bowen Rd. (next to Tim Hortons) Phone: 250-740-3880

VISITOR REPORT
Referrals for this reporting period came from Lion’s Gate, Vancouver General, and St. Paul’s hospitals, as well as from independent calls.

<table>
<thead>
<tr>
<th>Ostomy Type</th>
<th>Referrals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Colostomy</td>
<td>4</td>
</tr>
<tr>
<td>Ileostomy</td>
<td>6</td>
</tr>
<tr>
<td>Urostomy</td>
<td>1</td>
</tr>
<tr>
<td>Pre-op</td>
<td>1</td>
</tr>
<tr>
<td>TOTAL</td>
<td>12</td>
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Many thanks to my excellent crew for this round: Norma Primiani, Trevor Mendham, Andrea Kar dos, Joy Jones, Bob Austin, Sandra Morris and Raj Shaw.

A WARM WELCOME IS EXTENDED TO
NEW MEMBER
Kim Robin

THANK YOU TO THE FOLLOWING FOLKS FOR THEIR KIND DONATION TO THE CHAPTER
Janice Balfour, Amy Ridout, AC McNeight

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SERVICES
- Clinic visits by appointment with specialized E.T. Nursing Care.
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- Information and care for various ostomies
- Skin care

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VANCOUVER

Vancouver General Hospital  855 West 12th Avenue  Tel (604) 875-5788
Deb Cutting, RN, ET 
Laura Jean DeVries, RN, ET

St. Paul’s Hospital  1081 Burrard Street  Tel (604) 682-2344
Neal Dunwoody, R.N., WOCN
Susan Holding, RN, BSN, ETN
Local 62917

Children’s Hospital  4480 Oak Street  Tel (604) 875-2345
Local 7658
Amie Nowak, BSN, RN, ET

Macdonald’s Prescriptions  3199 West Broadway  Tel: 604-738-0733
(November 9 - 4, call for appointment)
Neal Dunwoody, RN, ET
(kitsilano)

KEIR SURGICAL & OSTOMY SUPPLIES  Tel 604-879-9101
Lauren Wolfe, RN, ET and
Heather McMurty, RN, ET  -- both by appointment only, call Keir

NORTH VANCOUVER

Lion’s Gate Hospital  231 East 15th Ave., N. Vancouver  Tel (604) 984-6871
Rosemary Hill, RN., ET

Royal Columbian Hospital  Tel (604) 520-4292
Heather McMurty, RN, ET
Susan Andrews, RN, /
Lucy Innes, RN, ET

NEW WESTMINSTER

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Elaine Antifae, RN, ET, CWOCN

OSTOMY CARE and SUPPLY CENTRE
Andrea (Andy) Manson, RN, ET  Tel (604) 522-4265
Muriel Larsen, RN, ET
Christina Kerekes, RN, ET
Laurie Cox, RN, ET
(Saturdays 9 - 1)
Lisa Hegler, RN, ET

SURREY

Surrey Memorial Hospital  TBA  Tel (604) 588-3328

LANGLEY

Langley Memorial Hospital  Tel (604) 534-4121 Local 7422
Katie Jensen, RN, BSN. ET
Margaret Chalk, RN, ET
Ostomy Outpatient Clinic

ABBOTSFORD

Abbotsford Regional Hospital  Tel (604) 851-4700
Extension 642213 (Clarke)
646154 (Yakashiro)

CHILLIWACK

Chilliwack General Hospital  Tel 604-795-4141 Local 614447
Jacqueline Bourdages, RN
Wound Care and Ostomy Resource Nurse

WHITE ROCK

Margaret Chalk, RN, ET

RICHMOND

Richmond General Hospital  TBA  Tel 604-244-5235

THANK YOU to the ET nurses who let me know of staffing changes at their worksite! Keep those updates comin’!

14 Vancouver Ostomy HighLife - May / June 2012
MEMBERSHIP APPLICATION

Vancouver Chapter United Ostomy Association

Membership in the UOA of Canada is open to all persons interested in ostomy rehabilitation and welfare. The following information is kept strictly confidential.

Please enroll me as a ☐ new ☐ renewal member of the Vancouver Chapter of the UOA.

I am enclosing my annual membership dues of $30.00, which I understand is effective from the date application is received. I wish to make an additional contribution of $__________, to support the programs and activities of the United Ostomy Association of Canada. Vancouver Chapter members receive the Vancouver Ostomy Highlife newsletter, become members of the UOA Canada, Inc. and receive the Ostomy Canada magazine.

Name ___________________________________________ Phone ___________________________________________

Address __________________________________________________________________________________________

City __________________________ Postal Code ______________ Year of Birth ______

email (if applicable): ________________________________

Type of surgery: ☐ Colostomy ☐ Urostomy ☐ Ileostomy ☐ Internal Pouch

All additional contributions are tax deductible. Please make cheque payable to the

UOA Vancouver Chapter

and mail to: Membership Coordinator, 3908 Sharon Place, West Vancouver, BC V7V 4T6
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