



Welcome Inland Northwest Ostomate Communities!



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WHAZZ UP



As I mentioned in the last quarterly issue of "InSider" Newsletter - *Crazy Weather!*

But I wish all of you in Eastern Washington, Northern Idaho, and

Western Montana Communities – Ostomates, Family Members & Caretakers, our Healthcare Professionals, and our friends, **HAPPY SPRING!** First off, April 12-18, 2026 is **WOC Nurse Week** (see page 6) so reach out to those wonderful WOCNs to thank them for their dedication to making our lives easier!! And be sure to review the **National Spotlight** for important news about UOAA's work and advocacy (page 2) on our behalf!!

Join us to learn the latest in the ostomy world! This issue of "**InSider**" **Newsletter** includes important reports on local and national ostomy-related activities plus articles of importance to your life needs and growth. Posts about each of our regional support groups are also presented. Of particular interest is an article on "*New Technologies for Ostomy Care.*" Other articles include "*Abdominal Surgery Impacts on Your Body,*" "*Cutting Down on Senior Prescriptions,*" and "*10 Tips for Intimacy with an Ostomy.*"

REGIONAL OSG MEETINGS

Spring 2026

See Page 12 for Support Group Contacts and Meeting Dates, Times, & Places

Coeur d'Alene Ostomy Association, ID

- Apr. 18: UOAA website deep dive – Nancy Lucky
- May 20: Topic/Speaker - TBD
- Jun. 17: Ostopaix (stoma) virtual w/ Justin Baker

Lewiston-Clarkston Ostomy Support Group, ID-WA

- Apr. 06: Topic/Speaker - TBD
- May 11: Topic/Speaker - TBD
- Jun. 08: Topic/Speaker - TBD

Missoula Ostomy Support Group, MT

- Apr. 08: Topic/Speaker - TBD
- May 13: Topic/Speaker - TBD
- Jun. 10: Topic/Speaker - TBD

Spokane Ostomy Support Group, WA

- Apr. 07: "Ask a WOCN" by Michelle Best (SHMC)
- May 05: "Convatec" by Ian Harrington (SHMC)
- Jun. 02: "Share Your Ostomy Story" or UOAA Webinar – TBD (SHMC)
- July 07: Susie's Ice Cream Social in Manito Park

Tri-Cities / Mid-Columbia Ostomy Support Group, WA

- May 21: Topic/Speaker - TBD
- Aug. 20: Topic/Speaker - TBD
- Nov. 19: Topic/Speaker - TBD

Wenatchee/Confluence Ostomy Support Group, WA

- >> Regular ostomy support meetings cancelled until further notice.

Yakima Ostomy Support Group, WA

- May 13: Michelle Montgomery from Coloplast.

Continued next page.

Our regional website - inlandnwostomy.org – continues to be updated with additional information and photos added. Please visit the website to discover additional local, regional, and national resources. Finally, please remember that we at the “InSider” welcome your ideas and input! All ostomates, family & caregivers, and medical staff in our communities are welcome to submit suggestions, questions, articles, and letters! ■

NATIONAL SPOTLIGHT Selected Highlights

UOAA has important news of interest to share with all U.S. ostomates!

>> Medicare/Medicaid Update on Low Bid Ostomy Supplies in 2028:

The Centers for Medicare and Medicaid Services (CMS) is moving forward with a policy to add ostomy and urological supplies to Medicare Competitive Bidding. Unlike many Durable Medical Equipment (DME) items, ostomy supplies must be individualized. Forcing them into a lowest-cost model risks limiting patients to inferior products. The WOCN Society is actively opposing this policy and working with Congress to delay or stop implementation. Note that at this time, **the actual change that affects how you order supplies will not begin until January 1, 2028.** Check with UOAA for updates about Low-bid action on the part of CMS that will impact many ostomates! Join UOAA Advocacy for the webinar on April 21, Protecting Access to Ostomy and Catheter Supplies – “What CMS Competitive Bidding Could Mean for You.” (Follow the link embedded in the Advocacy image.)

>> UOAA’s 2026 Run for Resilience Ostomy 5k Event Series:

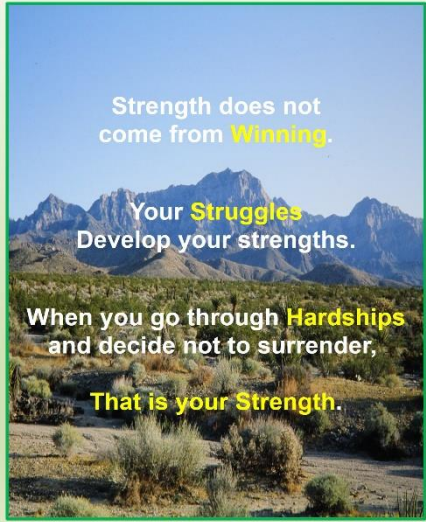
Eleven cities across the US will host formal, timed [UOAA Run for Resilience Ostomy 5k events](https://www.ostomy.org/5k/) on or about October 3, 2026, plus virtual participation (more info available at <https://www.ostomy.org/5k/>). As usual, an early bird registration discount will be available, and several fundraising benefits, awards, and gifts will be offered.

Spokane Ostomy Support Group (SOSG) will again host an “informal” [Run/Walk/Stroll for Resilience Ostomy 5k event](#) and social gathering at the North Shelter in Manito Park, Spokane. On October 3, we’ll assemble at the shelter from 10-11 am for a meet and greet plus games, hold our [Run/Walk/Stroll or sit by the fire](#) event from 11 am to noon, and follow that with participant awards, drawings, and a bring-your-own picnic lunch and social. We will also revive our fundraising team, “**Lilac City Pouchers**” to help out UOAA! All are welcome to join our team plus donate!

>> **UOAA’s Annual Impact Report** was recently released (see adjacent graphic with link to PDF on the UOAA website). See UOAA’s accomplishments that benefit all of us!

>> **UOAA’s Young Ostomate Outreach** group has planned its first Four-Night Cruise for Ostomates this summer! *SeaPlex on Quantum of the Seas*, a Royal Caribbean Ship, will leave Los Angeles, CA on Monday, June 15, 2026, with stops on Catalina Island and Ensenada, Mexico, before returning to LA on Friday, June 19, 2026. Open to all, but exclusive events are set aside for those roughly around the ages 18-45 while on ship. [Learn more here](#) or book your Stateroom [here!](#) If you have any questions, contact Cristine Miller, UOAA’s Young Ostomate Outreach Director at cristine.miller@ostomy.org. ■

**DIVERSION INSPIRATION
& HUMOR**
(Submissions & ideas welcome)





**UOAA ADVOCACY
WEBINAR**

**PROTECTING ACCESS TO OSTOMY AND CATHETER SUPPLIES:
WHAT CMS COMPETITIVE BIDDING COULD MEAN FOR YOU**

12:00 PM (ET) TUESDAY, APRIL 21



The graphic displays the UOAA Annual Impact Report with various icons and text boxes highlighting achievements in areas like Donor Support, Engagement, Raising Awareness, Advocacy, and Education.



**Many Thanks to Lynn Brink and Anne Peasley for Their
Helpful Contributions to and Editorial Reviews of This Newsletter**





REGIONAL-LOCAL OSTOMY SUPPORT GROUPS

Activities & Announcements

Following are brief reports from each of the ostomy support groups in our Inland Northwest Region. Feedback from some groups may be limited depending on their individual circumstance and group leadership.

Contact your support group coordinator/leader for up-to-date information!

- **Coeur D’Alene Ostomy Association, ID:** 03/19/2026 – Reported by Nancy Lucky, RN BSN CWON - We hold meetings at regularly scheduled dates and times, on the 3rd Wednesday each month at 3 pm. Please note that our meeting place has changed. We now meet in the Kootenai Health Resource Center 2003 Kootenai Health Way Coeur D’Alene ID. April 15 I will provide a deep dive into using UOAA’s website. May 20 is still in planning, and June 17 we’ll have Ian Harrington, ConvaTec Area Manager, as our speaker. Feel free to call if you have questions - Nancy Luckey, RN CWON at 208-625-3582.
- **Lewiston, ID-Clarkston, WA United Ostomy Support Group:** 03/11/2026 – Reported by Adrian Wilson, President, - Our support group continues to hold monthly in-person meetings, January-December, 12:30 to 1:30 on the 2nd Monday of every month, at Canyon’s Church, 717 15th St. in Clarkston, WA. In January we had 6 new people and opened up for questions and answers. Judy Reid graced us with her presence and advice for our discussion in March. I’m making an ostomy apron for April. It’s so people can know what they have in types of ostomies Ellen and Louisa continue to do a ton of giving of themselves. I’m trying to get to see our shut ins in rehabilitation homes. Ellen still makes new patient packets for Tri State hospital. It’s a real service. All are welcome. Schedule TBA.
- **Spokane Ostomy Support Group - Spokane, WA:** 03/22/2026 - Report by Carol Nelson, Coordinator/Facilitator ([509-601-3892](tel:509-601-3892)) – **Welcome to Spring!** It feels like we missed winter completely- except for the one week in February. The Spokane Ostomy Support Group enjoyed several Zoom sessions.

In January, **Joy Hopper**, who showed us A LOT of new products that are available for all types of ostomates. **Dawnette Meredith** shared her website, Ostomy 101 (<https://www.ostomy101.com/>), in February. The site has all types of resources available for ostomates, on one website. March found us at Providence Sacred Heart Medical Center for a **Shop and Share** meeting where we put out all the donated supplies we have collected over the year. Attendees could sort through them and take home anything that they use or would like to test out before ordering. We capped it off with a group discussion, the first time we’ve been able to meet together in four months!



Joy Hopper, CWON
Anatomical Aprons by Joy

Spring meetings - Meetings will be held in the Avista room of Sacred Heart Medical Center on the first Tuesday of every month from 6:00-7:30pm.

1 - **April 7th** - One of our favorite meetings!! **Michelle Best**, our CWON for Spokane OSG will be presenting and answering questions about issues you may be having with your pouching system. At our last meeting, the group gave her some topics they would like to discuss.

2 - **May 5th** - **Ian Harrington** from ConvaTec will be sharing some new products and the Me+ program. There will also be time for any questions about ConvaTec.

3 - **June 2nd** - Share Your Ostomy Story or UOAA webinar – TBD.

- **Mid-Columbia Ostomy Support Group - Tri-Cities, WA:** 03/11/2026 – Reported by Nancy Serna, RN, BSN, WOCN. Meetings held Quarterly (Feb., May, Aug., Nov.) on the third Thursday of the month, excluding holidays; at 3:30 PM -4:30 PM in the Maple Conference Room at the Healthplex 1268 Lee Blvd, Richland WA 99352.
- **Missoula Ostomy Support Group – Missoula, MT:** 03/11/2026 - Reported by Hannah Peterson, BSN, RN, CWON (406)-327-4347) -Thank you for checking in. Our monthly ostomy support group continues on

Continued



the 2nd Wednesday each month from 1530-1630 at the main Community Medical Center hospital. We are most frequently in Conference Room J, and I always place signs with cartoon ostomy pouches to lead the way! As always, low-fiber snacks will be provided by the hospital's nutrition team! On March 11 a physical therapist spoke about abdominal exercises in the post-operative period and beyond. Unfortunately, I cannot get speakers lined up too many months in advance, so there is an element of surprise for our attendees. I can promise, however, that there will always be snacks. Because our group is most often less than 10 folks, I have enjoyed tailoring the discussion topics to the concerns of the attendees. I am very open to suggestions from ostomates and encourage folks to email me with their specific needs! Best contact information for me is my work email at hpeterson@communitymed.org and my desk phone (406) 327-4347.

- **Confluence Health Ostomy Support Group - Wenatchee, WA:** 03/06/2026 – Report by Tyree Fender, CWOCN –The support group is still not meeting, primarily due to staff shortages. We don't have a primary person to run it. Thanks to all, Tyree.
- **Yakima Ostomy Support Group - Yakima, WA:** 03/25/2026 – Kanista Masovero, CWOCN – May 13 we have Michelle Montgomery from Coloplast. July 8 is TBA. All support group meetings are held from 10-11 at Wellness House 6006 Summitview Ave. in Yakima. Thanks to all, , , Kanista and Nicole. ■

QUARTERLY ARTICLES & TIPS

New Technologies for Ostomy Care

Via Vancouver Ostomy High Life - March / April 2026; ComFizz - Innovative Medical Clothing blog

Do you ever dream about a perfect bag that never leaks, or even a day when bags will be a thing of the past? Well, keep those dreams alive because some amazing innovations are happening. Some developments are already here, and you may already be benefiting from them, whilst others are still being tested, but will be well worth the wait. So, let's take a look at some of the most exciting innovations happening in the ostomy appliance space. Some innovations are already here such as:



Biocompatible Adhesives: These adhesives are gentler on the skin, reducing the risk of irritation and allergic reactions.

Extended Wear Adhesives: Adhesives that keep the pouch securely in place for longer periods, offering greater peace of mind.

Flexible base plate ostomy bags that contour to irregular stomas and abdomens to reduce leaks. Examples include: Esteem+ Flewx Convex system by **Convatec**; Ceraplus skin barrier bags by **Hollister**; **Coloplast** has launched multiple products, including the petal-shaped Sensura Mio bags.

Science Fiction? In Development . . .

Sensors that Speak: Wearable Tech Enters the Game. The rise of wearable technology is making its way into ostomy care with the development of sensor-equipped devices:

The Alfred Smart Bag: This smart ostomy bag tracks output, monitors stoma irritation, and detects output state with wireless connectivity to alert the wearer. The volume and output readings can also be shared with your nurse.

Leak Detectors: Imagine a sensor that can detect a leak before it happens! These wearable devices could provide early warnings, allowing for a quick change and preventing skin irritation. A sensor device incorporated into the base plate to monitor for leakage, which connects to a smartphone.



Ostomy Alert prototype

Continued



Thermoresponsive skin barrier appliances that not only sense a leakage but respond to it by deploying an amount of sealant from a miniature pump system, thus preventing any further leakage. Discreet sensors could monitor the fill level of the pouch, taking the guesswork out of pouch changes and promoting a more personalized routine. The **Ostom-I Alert Sensor** clips across the bottom of the bag, and as the bag fills, it relays data back to a smartphone. The phone can then send alerts to prevent the bag from overflowing. This data could also be shared via a hospital ward dashboard to help nurses manage patients' ostomy bags.

Future Innovations??

Self-Sealing Stomas: Imagine a stoma that automatically seals itself after emptying waste, eliminating the need for external pouches altogether. This technology is under research and exploration.

Automated Irrigation Systems: This concept involves devices that can automate the process of stoma irrigation, offering a more convenient experience.

TIES®System (Transcutaneous Implant Evacuation System): This is a revolutionary idea developed by a Norwegian company, OstomyCure, which consists of an implant and a lid that contains the stoma. When the user wishes to empty, they attach a disposable bag to the device, drain and remove the bag, and replace the lid, so giving complete control over their bowel motions. Check out their website here: <https://ostomysecure.com/ties-information/>

SphinX – A product of Crimson Healthcare, is a soft, pliable device that is inserted into the stoma to provide a port that can be plugged, which recreates continence

StomaLife: A valve system that is implanted around the stoma to provide a controlled flow of waste and gas release without the need for a stoma bag. A magnetic retention system secures it to the stoma without the need for adhesives.

Editor's Note (*Vancouver Ostomy High Life*): Some of these innovations sound downright crazy and in the realm of science fiction but then again . . . decades ago people would have said that the products we are lucky to use now were impossible. So, who knows what lies in the future? ■

Understanding How Abdominal Surgery Impacts Your Body

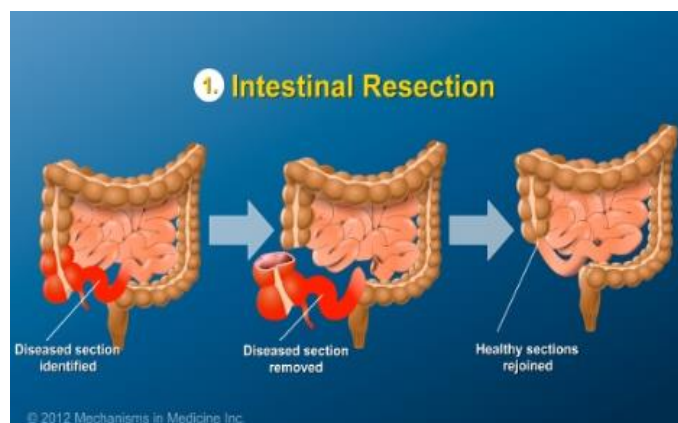
UOAA Articles to Share ... February 2026 E-Mail

The effects of abdominal surgery extend far beyond the incision site. Understanding these impacts helps explain why comprehensive rehabilitation is so important for your recovery.

Adhesion Formation: The Hidden Challenge

One of the most significant and often overlooked consequences of abdominal surgery is adhesion formation. Adhesions are internal scars that form naturally as the body heals from tissue damage caused by surgery, infection, injury, or radiation. While they're a normal part of healing, they can become a source of pain and dysfunction.

The statistics are sobering: 90% of abdominal surgeries and nearly 100% of open pelvic surgeries cause adhesions. What makes adhesions particularly challenging is that they cannot be diagnosed through standard imaging or diagnostic testing. Diagnosis is only possible through direct observation during surgery, but this is typically avoided to prevent further adhesive processes.



Continued



Adhesions can lead to:

- Chronic abdominal or pelvic pain
- Bowel obstruction requiring emergency surgery
- Reduced organ mobility affecting digestive function
- Fertility issues in reproductive-aged individuals
- Need for additional surgical procedures



Changes in Posture, Breathing, and Movement Patterns

After abdominal surgery, your body naturally adopts protective postures and movement strategies. While these serve an important purpose during early healing, they often persist longer than necessary, leading to:

- Postural changes: Forward trunk lean, rounded shoulders, and protective guarding
- Breathing alterations: Shallow breathing patterns that reduce diaphragm excursion
- Movement compensation: Altered lifting mechanics and transfer strategies
- Core system dysfunction: Disruption of the coordinated system involving your diaphragm, pelvic floor, abdominal muscles, and spine stabilizers

The Comprehensive Benefits of Physical Therapy after Abdominal Surgery

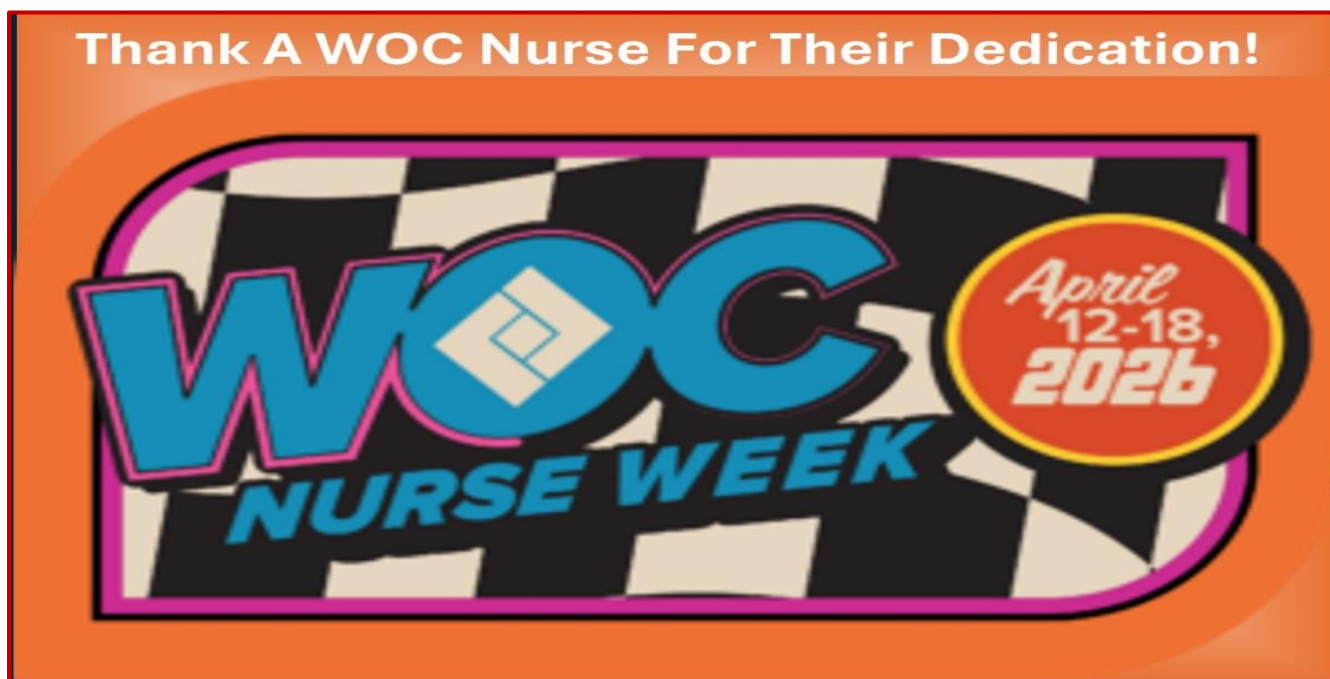
Evidence-based abdominal rehabilitation offers numerous benefits that can significantly improve your recovery and long-term outcomes:

Physical Benefits

- Decreased pain through targeted interventions and movement optimization
- Improved muscle recruitment in abdominal, spine, and pelvic muscles
- Enhanced range of motion in affected areas
- Reduced excessive scarring through manual techniques and scar management
- Prevention of ileus (intestinal blockage) through early mobility strategies
- Less noticeable scars through specialized scar treatment techniques .

Functional Benefits

- Restored visceral mobility improving organ function and digestive health
- Improved peristalsis supporting healthy bowel function
- Faster return to prior activity levels with reduced risk of re-injury
- Enhanced quality of life through comprehensive symptom management. ■



Over Medication: Tips on How to Cut Down on Senior Prescriptions:

Via Vancouver Ostomy High Life - March / April 2026

Tip #1 - Regularly Assess Your Medications: To ensure your loved one’s well-being, it is important to have their medications, including vitamins, herbs, and over-the-counter medicines, regularly assessed by their primary care doctor. Schedule an appointment with a physician if more than four medications have not been reviewed within the past year. Be sure to bring all pill bottles for the doctor’s reference and accuracy.



Tip #2 - Be Proactive About Knowing the “Why” Behind the Prescription: When discussing medication with the doctor, it’s important to be proactive. Make sure to ask if your loved one still needs to take each drug and the reason behind it. Additionally, seniors can inquire about the possibility of lowering dosages.

Tip #3 - Inform Your Physician About Lifestyle Changes: Inquire with the doctor about potential lifestyle adjustments, like dietary modifications or increased physical activity, that may allow your elderly loved one to decrease their reliance on medications. Additionally, explore the possibility of alternative remedies such as acupuncture, yoga, or meditation.

Tip #4 - Do Your Research: Don’t just rely on the doctor to know details about drug-drug interactions. Do your online research. Reliable websites such as The DIR (Drug Information Resources) <https://www.dal.ca/diff/druginfo.html> and [medscape.com](https://www.medscape.com) list potential interactions and provide explanations.

Tip #5 - Inform Your Physician of New Side Effects: If you experience any new side effects, such as stomach upset or nausea, dizziness, sedation, or loss of balance, it is important to inform your doctor immediately.

Tip #6 - Ensure That Your Dose is Still Effective: As medications accumulate in the body, their strength may increase and they may also interact with each other to cause new side effects. Similarly, over time some drugs may lose their efficacy, leading to a reemergence of symptoms that were previously managed.

Tip #7 - Choose One Pharmacist and Pharmacy: It’s important to stick with a single pharmacy and pharmacist. Ensure that seniors know all medications being used, including any herbal supplements from other prescriptions. Pharmacists typically have more expertise in identifying potential drug interactions compared to doctors. ■

30–40% of people age 65 or more take 5 or more medications regularly. Of that group, about 10% of them take 10 or more drugs.

10 Tips for Intimacy with an Ostomy

UOAA 2026 – February E-News

Life with an ostomy can stir up deeply vulnerable questions: *Will anyone love me like this? Does my ostomy bag make me unattractive? How can I be intimate while managing it?* These anxieties often settle in the quieter corners of ostomy life, where many ostomates fear their bodies may never be chosen or desired.

Chloe Olsen has spent her whole life learning what it means to live with an ostomy. In this blog, she draws on more than 20 years of lived experience to share an honest perspective on connection, communication, and confidence. Her insights offer reassurance, perspective, and a reminder to fellow ostomates that they are worthy of love without conditions.



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10 tips for intimacy with an ostomy (from a 20+ year ostomate)

Unlike most other ostomates, I never had a “before my ostomy.” I didn’t have to relearn intimacy because I’ve had an ostomy my whole life. This means I learned intimacy with an ostomy bag—first crushes, first touch, first relationships. For me, there was no “before my ostomy” to mourn—just figuring things out in real time like everyone else. This is the only body in which I’ve ever been intimate. Every version of intimacy I’ve ever known has included my ostomy bag. And that’s why I know you don’t owe anyone everything.

This topic in particular is especially important to me because I didn’t grow up seeing bodies like mine being desired or sexualized. I had no idea what intimacy would look like for me because there wasn’t anyone like me out there talking about it. After a lifetime of trial and error, of tender moments and of ones I’d rather forget, I’m sharing my tried and tested intimacy tips for any ostomate who needs straightforward honesty—not sugarcoating.

1. You don’t owe anyone your medical history.

When meeting someone new, we can sometimes feel obligated to share our medical past. Don’t forget—you get to decide when and how much you share. There were times I would over-explain out of fear, thinking clarity would protect me. It didn’t—boundaries did. You are not obligated to provide any details you don’t want to share, and this includes any questions you don’t feel comfortable with. A simple explanation is enough.

2. You get to decide when to tell someone about your ostomy.

The pressure of this used to weigh on me a lot. If I didn’t tell someone soon enough, I would feel as if I were lying to them somehow, like keeping this secret from them was a form of deception. But if I told them right away, it would sometimes change their view of me—or even the way they treated me. My advice: if you really like someone, tell them about your ostomy bag as soon as possible, as soon as you feel comfortable. Personally, I would always tell them right away, because I find it to be an excellent detector of who *isn’t* meant to be.

3. Phrasing is important. Confidence is everything.

If you do decide to tell your intimate partner about your ostomy, your own attitude can make the biggest difference. If you frame it as something positive, like that it gave you your life back, they probably will too! But if you say, “Now I’m forced to live with this for the rest of my life!” it gives your ostomy a negative connotation, and they may be more likely to react negatively as well. I know it’s easier said than done, but confidence really is everything! If you go in with no fear, as if your ostomy is no big deal, it likely won’t be a big deal to them either.

4. If someone is uncomfortable, it’s not a reflection of your self-worth.

Not everyone handles it well, and learning not to internalize those reactions took time. But over time, you learn the difference between curiosity and discomfort—and you stop internalizing reactions that don’t belong to you. Discomfort doesn’t mean you’re undesirable. It means they’re not equipped for your body or your honesty—and that’s not yours to fix.

5. One-night stands are NOT off the table.

This is one of the biggest things I *wish* someone had told me! Having only known ostomy life, I let the stigma surrounding it convince me that one-night stands weren’t possible for me—but that’s actually the furthest thing from the truth. Hearing from my close ostomate friends who are a little bit older than myself, I learned that it’s actually not a big deal. Although it can be scary at first (*how would this random stranger react?*), one-night stands with an ostomy are not harder, just more intentional. Only share what’s necessary, and prep more so you can think less. Most importantly, make sure you feel safe. Believe it or not, your ostomy will likely not be their primary focus—in fact, they may not even notice it at all.

6. Communication is key.

Intimacy isn’t mind-reading, it’s communication—and that goes both ways. At first, I didn’t know how to communicate effectively during intimacy. Partners would assume they could accidentally “break” my bag or hurt me somehow. I learned to speak up for myself through trial, error, and a lot of unlearning silence. Don’t be

Continued



afraid to just tell them, “I’m not fragile,” or educate them in the moment so they feel comfortable. Communication doesn’t ruin the moment—it makes it possible, and more enjoyable when they better understand your body. And if they don’t want to take that extra moment of care, then maybe they aren’t worth your time and energy, and that’s your choice to make. Remember—you can always back out or say no.

7. Prep is *not* unsexy.

Emptying your ostomy bag beforehand, wearing something that makes you feel secure, maybe even putting on a fresh bag—all these extra steps we take are just taking care of your body, an important part of intimacy. I know it can detract from the spontaneity, but take it from me, you don’t want to risk having a leak during an intimate moment—major mood killer. Trust me, it’s worth taking the extra time—having peace of mind changes everything.

8. The right intimacy doesn’t make you feel like your body is a problem.

I’ve felt the difference between being accommodated and being wanted. And once you feel the latter, you stop settling for the former. For too long, I stayed in unhealthy relationships because I didn’t think I deserved better. I believed I was “defective” or “damaged,” and therefore not in a position to be picky or stand up for myself. It took a while, but once I let myself believe that I was worthy to be loved the way I wanted, I never looked back. You’re not something to tolerate, work around, or “get past.” You’re not less deserving because of your ostomy. You’re the body someone gets to be close to.

9. Desire without shame.

I grew up feeling a lot of shame around my body, not because of my ostomy, but because of what I was taught to believe about it. In navigating intimacy, I’ve learned that it’s okay to crave it, and it’s okay to communicate your needs. Desire doesn’t disappear because you have an ostomy or disability—it adapts, like everything else.

10. There’s no “right” way to do this.

Reminder: You don’t owe intimacy to prove confidence, healing, or normalcy. There’s no timeline for feeling ready. Confidence with intimacy isn’t a finish line. It shifts with age, partners, energy, and life. And that’s normal—ostomy or not. It comes with time and learning to be comfortable in your own body before you can be comfortable with someone else. If you’re just learning intimacy in your body—you’re not behind, you’re doing it.

Find more support for intimacy with an ostomy on [Instagram](#) and in Coloplast’s free e-book, [The Ostomate’s Guide to Intimacy](#). ■

Editor’s Note: Several companies produce specialized ostomy-related clothing. One of those is an on-line provider named “Siil Ostomy”. If interested, follow the link imbedded in the adjacent image.

SIIL
ostomy line


Life changing Ostomy Clothing.

- Leak-proof Inner pocket
- Hernia Prevention Support
- Actually comfortable (and sexy)



<https://www.siilostomy.com/en/siil-l-ostomy-underwear/>

Spokane Ostomy



SUPPLY CLOSET

For Emergency Assistance, Call 509-601-3892
and Leave a Message
(Limited Supplies)
This is NOT a Substitute for Good Planning!



I thought my stoma had gone mad this morning and was making windy noises. I turned the Tv down so that I could listen properly. I discovered that my phone was vibrating in my pocket. It really gave me a belly laugh.



Stoma Care Forum

<https://www.facebook.com/groups/824637962996480>

the **StomaGenie**® experience

INSTRUCTIONS

- Captures stoma output
- Control pouch change
- Hygiene-friendly process
- Reduce anxiety and stress
- Restore dignity
- Create independence



SCAN for
instructional
videos



Place StomaGenie under or over the stoma to capture output, clean and prepare skin.



Once skin is dry, apply new pouch, insert black plug and throw away with used supplies.



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CeraRing™ Barrier Ring

The confidence of a secure seal

“I started using the CeraRing™ barrier rings as a part of my Hollister set-up not long after getting my ostomy, and they immediately helped reduce the likelihood that I’d have a leak and it keeps my skin healthy and clear!”

- Collin, CeraRing™ barrier ring user

Scan to learn more

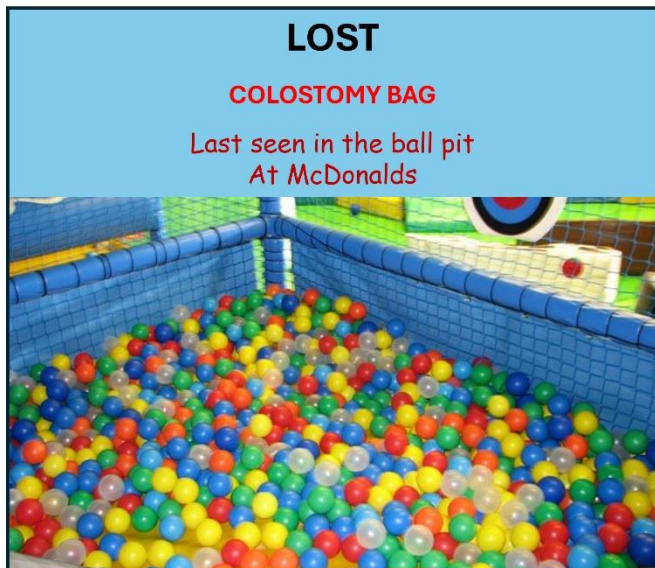
**Try the CeraRing™ barrier ring for
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The testimonials, statements, and opinions presented are applicable to the people depicted. These testimonials are representative of their experiences, but the exact results and experience will be unique and individual to each person. Prior to use, be sure to read the instructions for use for information regarding intended use, Contraindications, Warnings, Precautions, and Instructions for Use.
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Ostomy Care
 Healthy Skin. Positive Outcomes.



IMPORTANT OSTOMATE SUPPORT CONTACTS & LINKS

Providence Sacred Heart Outpatient Ostomy Clinic - M-F 8:00-2:00 (509-474-4950). Appointments and MD referral is required; no walk ins. Patients can be seen for follow up, checkup, questions, problems. Leave a message if you don't reach someone live. Sacred Heart MC located at 101 W Eighth Ave, Spokane, WA. New clinic location – report to radiology on L-1 and a nurse will walk you to the ostomy clinic on L-2 East.

MultiCare Deaconess Hospital - Wound & Ostomy Clinic – Ostomy patients seen Wednesdays & Thursdays 11:00 am-3:45 pm (509-603-7005). MD referral preferred for appointments, although patients can self-refer and/or call for urgent needs. Help received depends on staff availability. Located on 1st floor of the hospital located at 800 W. 5th Ave., Spokane, WA.

Spokane Ostomy Visitor Program - If you would like to speak to someone who has lived experience as an ostomate, contact Carol Nelson (509-601-3892); carol@nelsonwheat.com) to arrange a call or visit.

Kootenai Health Medical Center – Outpatient Wound/Ostomy Care – (208-625-3582) - 2003 Kootenai Health Way, Coeur d'Alene, ID.

Gritman Medical Center – Ostomy Services - 700 S. Main Street in Moscow, Idaho (208-882-4325); appointment needed.

Kadlec Medical Center - Outpatient Ostomy Clinic- M-Th 8:00-4:00 (509-946-4611 ext.: 1365562); appointments & MD/provider referral required.

Lewis-Clark Valley - Ostomy Support Facilities –

St. Joseph Wound Care/Ostomy Dept., Lewiston, ID - Seeing inpatient and outpatient ostomates, M-F with appointment - Call 208-750-7379

United Ostomy Associations of America (UOAA) - (800-826-0826); P.O. Box 2293, Biddeford, ME 04005-2293.

Link: <https://www.ostomy.org/>.

Phoenix Magazine - (800-750-9311); The Phoenix Magazine, P.O. Box 3605, Mission Viejo, CA 92690.

Link: <http://www.phoenixuoaa.org/> (get a free sample copy).

Ostomy Appliance Producer Customer Assist Programs:

> **Coloplast Care Program** 1-855-430-9500 <https://www.coloplastcare.com/en-US/ostomy/>

> **ConvaTec Me+ Program** 1-800-422-8811 <https://www.convatec.com/ostomy-care/>

> **Hollister Secure Start Services** 1-888-808-7456 <https://www.hollister.com/en/consumerservices>

INLAND NORTHWEST OSTOMY SUPPORT GROUPS Contacts and Regular Support Group Meeting Schedules* Eastern Washington & Northern Idaho

(Also, check the “Inland Northwest Ostomy Support Groups” website: <http://inlandnwostomy.org>)

Coeur d'Alene Ostomy Association, ID (# 409):

- Contact: Nancy Luckey or Sarah Jenicek BSN, RN, CWOCN at 208-625-6944 - Kootenai Outpatient Wound Clinic.
- Meetings: Support group meetings are held in person on the 3rd Wednesday each month at 3 pm; Kootenai Health Resource Center, 2003 Kootenai Health Way Coeur D’Alene ID.

Lewiston-Clarkston Ostomy Support Group, WA/ID (# 134):

- Contacts: Adrian Wilson, President at 509-254-3404.
- Meetings: Held monthly in person, January-December, 12:30 to 1:30 on the 2nd Monday of every month; Canyon’s Church, 717 15th St. in Clarkston, WA.

Spokane Ostomy Support Group, WA (# 349):

- Contact: Carol Nelson - Facilitator, Visitation Program at 509-601-3892, carol@nelsonwheat.com.
- Meetings: Spokane OSG meets on the first Tuesday of each month; the new meeting time will be 6:00-7:30 pm. Meeting schedule: November-February via Zoom; March-June in-person in the Mother Joseph Room off the east end of the cafeteria dining area at Sacred Heart Hospital; and July-October* in-person at Manito Park. *The October meet will be held on *Ostomy Awareness Day*, the first Saturday in October, time TBD. Monthly meeting announcements are sent via email a week prior to each meeting. Call 509-601-3892 with questions.

Mid-Columbia (Richland) Ostomy Support Group, (TriCities), WA:

- Contacts: Nancy Serna, CWON at 509-942-2660 (ext. 6).
- Meetings: Quarterly meetings (Feb., May, Aug., Nov.) are held on the last Monday of the month excluding holidays, 3:30-4:30 pm; at Healthplex at 1268 Lee Blvd Richland WA Check online at <https://education.kadlec.org/registration/11-wellness/94-support-group-ostomy>.

Missoula, Montana:

- Contact: Hannah Peterson, BSN, RN, CWON at 406-327-4347; hpeterson@communitymed.org
- Meetings: Held monthly on the second Wednesday from 3:30-4:30 pm, refreshments served; Community Medical Center, 2835 Fort Missoula Road Building - 3 Suite 101 conference room I.

Confluence Health (Wenatchee) Ostomy Support Group, WA (# 398):

- Contact: Tyree Fender, RN, BSN, CWOCN at 509-433-3212.
- Confluence Health Central Washington Hospital, 1201 S. Miller St., Wenatchee, WA. Currently no meetings.

Yakima Ostomy Support Group, WA:

- Contact: Kanista Masovero, RN, CWOCN at 509-575-8266, MultiCare Yakima Memorial Ostomy/Wound Care Services.
- Meetings: Usually held second Wednesday bimonthly; 10:00-11:00 am; Wellness House 6006 Summitview Ave., Yakima, WA.

>> Please let us know of errors that need to be corrected or of changes need to be made to the ABOVE information:
(SOSG.Input@gmail.com).