



### Welcome Inland Northwest Ostomates!



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### WHAZZ UP

By Phillip Moyle, Editor

**Welcome to SPRING?!** Greetings to all of our regional readers: ostomates, family members and caregivers, and the health care community, especially those wonderful WOCNs! As I write this, the sky is overcast and snow covers the landscape where I live north of Spokane. May spring-like weather visit us all by the time you read our newsletter!

The UOAA theme for 2018 was “**Speaking Out Changes Lives!**,” so I hope that each of you found ways to raise awareness about the ostomy community! I am not sure what their 2019 theme is, but a bold statement on the Liberty Bell in their announcement (p. 4) of the UOAA’s 2019 National Conference reads, “**Celebrate Your Independence!**”

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### REGIONAL OSG MEETINGS \*

#### Spring –2019



**Coeur d’Alene, ID:** Third Thursday, February – November, 6:30-8:30 pm at Kootenai Health Medical Center, Coeur d’Alene, ID:

- April 18: UOAA Visitation Training
- May 16: Pre/Pro Biotic Food as Medicine
- June 20: Tina Greenwood / Hollister
- July 18: Randy Gaub / Anacapa Tech

**Lewiston-Clarkston:** Second Monday, January-December, 12:30-1:30 pm at Tri-State Memorial Hospital, Clarkston, WA:

- April 8: Ostomate Support
- May 13: Ostomate Support
- June 10: Ostomate Support

**Spokane:** First Tuesday each month; February – November; 6:30-8:00 pm at Sacred Heart Medical Center, Sacred Heart Women’s Center, Avista A & B Room, Spokane, WA:

- April 2: Peer Support Mentors
- May 7: Brian Gates, RPH - Pharmacist
- June 4: Ostomate Support - TBA
- July 2: Summer Social / Picnic

**Tri-Cities:** Third Thursday five months each year at Kadlec Healthplex, 1268 Lee Blvd; except July 12, Ice Cream Social will be at main Kadlec campus, 888 Swift Blvd, Richland, WA:

- May 16, 4:30-6:00 pm: Travel with an ostomy.

**Wenatchee:** Quarterly 2:00-4:00 pm at Confluence Health - Central Washington Hospital, Wenatchee, WA:

- Quarterly: Ostomy Support; TBA

**Yakima:** Third Wednesday bimonthly; 10:00-11:00 am at Virginia Mason Memorial in Yakima, WA:

- May 15: Ostomy Support; Hollister
- September 18: Ostomy Support; Convatec
- November 20: Rich Judd, Byram Healthcare

\* *Speakers / topics shown if provided*

**NOTE:** See page 10 for additional info about support group meetings & contacts.



Now that is a concept we should all embrace! Each of us followed a unique path to our life today, but we are alive, no longer suffering chronic pain nor tethered to a porcelain throne. So let us ALL celebrate! One way I will celebrate this year, the 34<sup>th</sup> year since my ileostomy surgery, is to attend UOAA’s National Conference in Philadelphia, August 6-10, 2019. I am looking forward to meeting many other ostomates from around the country, learning as much as possible, and thanking the UOAA leadership and staff for their hard work. I plan to share my experiences with you in the fall newsletter.

Each of the support groups in our region has considerable information and support to offer ostomates in our communities, but please remember that most of us are volunteers. Your life experiences can benefit the lives of other ostomates, family members, and caregivers. Is this is the year you will sign up to become a peer mentor for new ostomates? Maybe you can reach out to homebound ostomates. Each support group needs more phone volunteers to encourage new ostomates—both those with a temporary, as well as a permanent ostomy. Contact your support group facilitators to let them know that you would like to help!

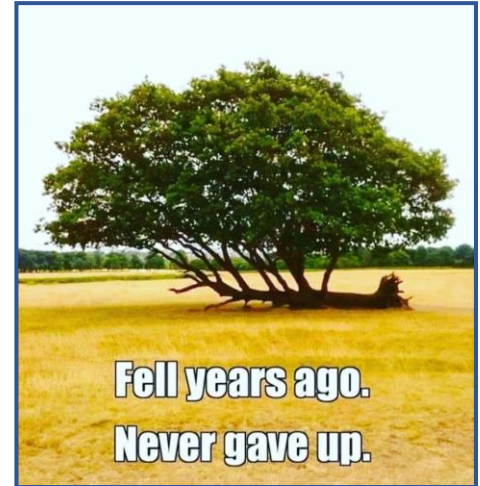
The spring 2019 issue of “*InSider*” Newsletter covers several important topics. We have added a new section to highlight the lives of individuals in our extended ostomate community, “*I Am an Ostomate and I Can Do!*” Highlighted in this issue is Maggie Herrett, a very active 10-year-old ostomate in Boise, ID. “*We’ve Come a Long Way*” offers an interesting and graphic historical flashback to the earliest ostomy appliances. Aren’t we lucky to be the beneficiaries of decades of research and technical advancements! In addition, one of the most valuable resources for ostomates, our Caregivers, are addressed in “*Caregiver’s Seven Knows*,” a must read for us all to better understand the challenging relationship between ostomates and caregivers!

**KUDOS** to the Coeur d’Alene Ostomy Association and President Sherron West for their contribution toward Internet domain fees and maintenance costs needed to support our website: [inlandnwostomy.org](http://inlandnwostomy.org)!! Visit the website to discover additional local, regional and national resources. **Please** note that we do incur annual domain and maintenance fees, so we appreciate any financial assistance that your support group can contribute to assist with our website and outreach efforts! Contact Phil Moyle if can help us out ([SOSG.Input@gmail.com](mailto:SOSG.Input@gmail.com))! **Note** that the UOAA has packed their newly revised national website at [www.ostomy.org](http://www.ostomy.org) with new educational materials and great tips!

**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 articles, letters, and ideas!** **THANK YOU!**

## DIVERSION INSPIRATION & HUMOR

(Submissions & ideas welcome)



Fell years ago.  
Never gave up.



### Ostomates in the Inland Northwest

Please consider sharing your own story for our new section,  
“*I Am an Ostomate and I Can!*”

Contact your Support Group leader or the editor at: [SOSG.Input@gmail.com](mailto:SOSG.Input@gmail.com)





## REGIONAL-OSG ACTIVITY REPORTS, ANNOUNCEMENTS, & LETTERS

### “Ostomy Supply Donations and UOAA’s Revised Website Highlighted at Spokane Ostomy Support Group in February”

Spokane Ostomy Support Group’s February meeting, their first of 2019, included presentations about donating ostomy supplies by Rich Judd, Byram Healthcare, and a tour of UOAA’s revised and expanded website by Phil Moyle. Rich discussed how to donate unneeded ostomy supplies to a variety of organizations. Supplies must be in good condition with boxes unopened and not be outdated. The most effective organization is Friends of Ostomates Worldwide FOW-USA (<https://www.fowusa.org/>). FOW is a volunteer-run, non-profit that provides ostomy supplies and educational resources at no cost to ostomates in need around the world. They need all types and sizes of new supplies, including pediatric ones. Please send them to their warehouse: FOW-USA, 4018 Bishop Lane, Louisville, KY 40218-4539. For additional information about donating ostomy supplies, contact Rich Judd, Byram Healthcare, or FOW-USA directly (Tel: 502.909.6669; Email: [info@fowusa.org](mailto:info@fowusa.org)).

Phil’s brief Power Point tour of UOAA’s new website (<https://www.ostomy.org/>) provided a sampling of the abundant content as well as guidance on how to navigate through the website to reach the desired information. Besides being loaded with important resources, “how to” guides, and moving success stories, the site has numerous downloadable PDFs with important information for ostomates, caregivers and family members. The UOAA posted Phil’s Power Point presentation to their “ASG In A Box,” a comprehensive manual for ASG leaders who can download it as a Power Point file or as a PDF. Contact Phil Moyle if you would like a copy.

### “Coeur d’Alene Ostomy Association Off to Great Start”

By Sherron West, President

Our 2019 year got off to a great start with Doctor Ed DeTar, Surgeon, speaking at our February support group meeting. Using a Power Point presentation, Dr. DeTar discussed the reasons stomas are placed on certain areas of the anatomy and causes and care for hernias. We also discussed the importance of exercise in moderation through the healing process. Attendance was high, and Dr. DeTar willingly answered many questions. A huge debt of gratitude to our WOCN’s for attending our meetings and being so willing to answer questions. They are an amazing group of special people.

### “UPDATE: Lewis-Clark United Ostomy Support Group”

By Janet Scheelke, President

Tami Wilson, Social Services Director for St Joe's Cancer Center in Lewiston, contacted our support group to refer a patient who is to have an ostomy and wants to meet our group. Tami is excited to work with us. This may enhance communications with St. Joe's patients!

We also have a newly reconnected Ostomate who said he had received so much good information and encouragement from attending our meetings that he came back to thank us. He plans to come regularly to support our efforts and even be a visitor to new patients. He was very inspiring to our group. We look forward to his participation.

In addition, the Lewis-Clark Support Group is considering a visitor training class; schedule is pending. We are also sending boxes of supplies to Friends of Ostomates Worldwide FOW-USA.



**“Chief Dietitian at SHMC WOWs Spokane Ostomy Support Group”**

Spokane Ostomy Support Group, WA

The Spokane Ostomy Support Group sought a dietitian to speak about nutrition for ostomates at their March meeting at Providence Sacred Heart Medical Center, and boy-oh-boy did the WOCN corps at the hospital deliver! Michele Vickerman, (RD, CNSC), a Registered Dietitian as well as being the Clinical Nutrition Manager for SHMC, manages 26 Registered Dietitians and 10 Diet Technicians at the hospital. She impressed the group with an engaging and informative presentation covering the width, breadth, and depth of nutrition for ostomates. Her interest was even more evident because her mother had a colostomy. Utilizing her personal background and vast experience in dietary science, Michele conducted considerable additional research before her presentation regarding nutrition specifically for ostomates. She also reviewed a handy UOAA product, “Ostomy Nutrition Guide,” (see link # 1 below), which was distributed to those attending, and recommended that every ostomate read it cover-to-cover. Also discussed and distributed were the UOAA’s “Food Reference Chart for People with an Ostomy” (see link # 2 below) and a University of Virginia Health System guide, “Home Oral Rehydration Solutions” (see link # 3 below). The presence of our home spun pre- and pro-biotics expert Vicki Jo Henry as well as Teresa Patterson, WOCN from SHMC, enhanced the discussion, as did the numerous questions. Michele emphasized the importance of soluble vs insoluble fibers in foods and the use of home oral rehydration solutions for maintaining good hydration and a healthy salt and sugar balance. Thank you Michele contributing your time and for providing us with a great learning experience!



Michele Vickerman (L), Dietitian, & Teresa Patterson ®, WOCN, at SOSG meeting

**Mark Your Calendar for UOAA's 2019 National Conference!**

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

- \* 25+ Educational Sessions with Top Medical Professionals
- \* Inspirational Stories
- \* Free Stoma Clinic Appointments with WOCNs
- \* Ostomy Product Exhibit Hall with 25+ Vendors
- \* Social Events On and Off-site
- \* ASG Leader Networking
- \* Dedicated Sessions for Caregivers and Family

Visit [www.ostomy.org](http://www.ostomy.org) for Upcoming Information

United Ostomy Associations of America  
800.826.0826  
oa@ostomy.org

- Link # 1: <https://www.ostomy.org/wp-content/uploads/2018/01/OstoyNutritionGuide.pdf>
- Link # 2: [https://www.ostomy.org/wp-content/uploads/2018/01/FoodRefChart\\_2018.pdf](https://www.ostomy.org/wp-content/uploads/2018/01/FoodRefChart_2018.pdf)
- Link # 3: <https://med.virginia.edu/ginutrition/wp-content/uploads/sites/199/2018/09/Homemade-Oral-Rehydration-Solutions-9-2018.pdf>



**Check out the UOAA 2019 National Conference Announcement**  
<https://www.ostomy.org/event/uoa-national-conference/>



\*\*\*\*\* “I AM AN OSTOMATE AND I CAN!” \*\*\*\*\*

**“I Am an Ostomate and I Can Do Gymnastics!”**

*By Megan Herrett – Boise, Idaho*

We’d like to introduce you to Maggie Herrett, a 10-year-old gymnast from Boise, Idaho who has an ostomy. Maggie was born with a rare liver disease, which necessitated an ostomy to eliminate bile from her body. When Maggie was 7-years-old, she enrolled in a recreational gymnastics program and shortly after, was asked to try out for a competitive gymnastics team. Initially, the gym was concerned about her ostomy – would it prevent her from doing required skills? Maggie’s parents, Megan and Matt, reached out to national UOAA staff who were able to provide emotional support, advice on how to protect her stoma, and suggestions for helpful supplies.

Through trial and error, Maggie learned some tips and tricks to keep her ostomy from interfering with the sport she loves so much. Because gymnastics can be a high impact sport, especially on her abdomen, she makes sure to empty her pouch multiple times during practice to avoid it from “popping.” To stay hydrated, she uses *Hydralyte* tabs in her water – she loves the effervescence! She also recently discovered closed-bottom pouches – because there is no spigot or rolled closure, her pouch is seamless and you can hardly even notice it under her leotard!



Maggie Herrett

Maggie leaps high above the Beam at a gymnastics meet in Coeur d’Alene, ID!



Spending twelve to sixteen hours per week in the gym has paid off for Maggie. At the 2019 Idaho State Junior Olympics Gymnastics Championship, Maggie placed 4th on Vault, 3rd on Beam, 1<sup>st</sup> on Bars and Floor, and 1<sup>st</sup> place All-Around in her age group! WOW!!

And for the last three years, Maggie and her younger brother Winnie, also an ostomate, participated in the UOAA-sponsored Run for Resilience Ostomy event in Boise which was started and has been managed by their mother, Megan, with help from their father Matt. Lastly, Maggie will attend the 2019 Youth Rally ([www.youthrally.org](http://www.youthrally.org)), a weeklong youth camp for children with ostomies, to be held in Seattle.

**Kudos** to Maggie, truly a “*Can Do*” person who just happens to have an ostomy!!

**UOAA 2019 Run for Resilience  
Ostomy 5K**

Boise, ID ~~~~~ Saturday, October 12, 2019  
Portland, OR ~~~ Saturday, October 5, 2019



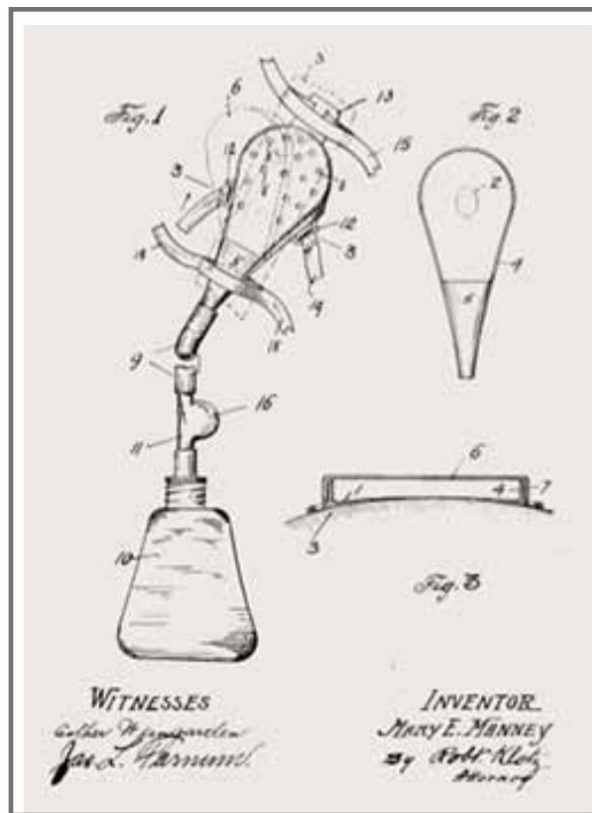


\*\*\*\*\* QUARTERLY ARTICLES & TIPS \*\*\*\*\*

**“We’ve Come a Long Way  
A look at ostomy pouching systems from a historical perspective”**

By Thom R. Nichols, Research Fellow: Biostatistics and Health Economics, Hollister Incorporated  
(Appeared in “*Vancouver Ostomy High Life*” - January-February 2019)

Today, people with ostomies have a variety of pouching systems to choose from, but this certainly was not the case in the past. Let’s take a look at how the pouching system has evolved through the years. The year is 1706 and historical records recount a battlefield wound resulting in a prolapsed colostomy. This instance, perhaps, is the first stoma ever recorded. In a mid-1700s surgical textbook, there is an etching of a woman looking down at her abdomen. She has a colostomy and in her lap are rags and moss to absorb the output of the stoma. Then, in 1776, there is a record of a French physician constructing a stoma due to intestinal blockage. A sponge held tightly to the abdomen by an elastic band absorbed the output. While stoma construction was rare at this time, there are other reports of stoma formations, and of stoma output managed through a variety of mechanisms such as leather pouches with drawstrings. Along with regular stoma enemas, these are the first records of attempts at creating ostomy appliances. In 1912, Mary Manney, of Chicago, Illinois, filed a patent (granted in 1913) for a “surgical appliance, which may be secured to the body of a person upon whom a surgical operation has been performed; the device being particularly useful in operations of that character in which an incision has been made in the abdominal wall of the patient”(see ). In the 1920s, Dr. Alfred Strauss, a Chicago physician, came up with the idea of a rubber pouch that could be held in place on the abdomen by adhesives and belts. Numerous other ostomy appliance patents were to be filed in the coming decades. In the 1950s, innovation in products, patient care and surgical techniques evolved. This decade would provide the roots for a new healthcare profession; that of the Enterostomal Therapist, created by a tenacious ostomate from Ohio by the name of Norma Gill. At the same time, developments in surgical techniques were being explored at the Cleveland Clinic by Dr. Rupert Turnbull and Dr. George Crile, and plastics began to make their way into the manufacturing process. However, many of the manufacturers of ostomy appliances continued to use heavy rubber pouches and rubber or plastic face plates developed in the previous decades.



1913 Ostomy Appliance Patent

By the 1960s, there were approximately 25 manufacturers of ostomy products in the U.S. The '60s saw progressive manufacturers of ostomy appliances turning away from bulky rubber bags to more aesthetic plastic films. This decade introduced Karaya, a major discovery in ostomy care. Karaya, originally a denture adhesive,

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is a vegetable gum produced as an exudate from trees of the genus Sterculia. As the story goes, Dr. Rupert Turnbull, while cleaning out a colleague’s lab, accidentally spilled some Karaya denture powder on his wet hands. He noticed that the Karaya had the ability to swell and cling to his wet skin and linked this to the needs of his ileostomy patients. In the 1960s, Karaya became the standard of use as a skin adhesive and protective barrier until the introduction of synthetic hydrocolloid barriers. In the early ’70s the ostomy industry began to explore the needs of the ostomate. The philosophy changed from “we can provide what you need” to “what do you need that we can provide?” Developers recognized that a pouching system must be more than safe and effective; it must also consider quality of life. The pouching system we know today is a disposable product made of a skin-friendly, water-repellent, cloth-like material covering film laminates. Qualities include pouch films that help mask odor; noise-reducing pouch material; filters to help reduce ballooning of the pouch due to gas; flexible and thin skin barriers that are designed to stick to the skin with or without the use of belts; and integrated closures eliminating the need for separate clamps. All this is contained within a system that may weigh between 12 and 20 grams. Modern systems are low in profile, and designed for comfort, confidence and discretion; with a goal to get people with ostomies back into everyday life. And the rest is history.

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“Caregiver’s Seven ‘Knows’”

*Modified from a article by Sharon Householder, Pittsburgh Ostomy Society, Nov 2018*

**Caregivers** can be family, friends, professionals or facility staff. You may have a spouse, partner, or child who is able to help you, but depending on circumstances, you may also find yourself relying on someone with whom you have not had the opportunity to develop that kind of a relationship. What will you do then? Do we ‘assume’ they will know what to do? It is important for us, as ostomates, to make sure we have our information documented and shared. What happens if we find ourselves alone and unable to care for our needs or even to quickly ‘teach’ someone all that is required? We want and expect the person tasked with our care to know everything they require to take care of us properly. To that end, here are 7 ‘knows’ that will help them and you.



So be sure to share this with the people who will support you!

- 1 Know my ostomy:** To be a good caregiver, you must be familiar with the terminology. Do I have a urostomy (urine), Ileostomy (soft stool) or colostomy (formed stool). Each of us is different and each has different needs. Does it drain into an appliance or must it be emptied manually? What about these terms: stoma, appliance, wafer, pouch, effluent or output, etc.? Because I have an ostomy, my nutritional and hydration needs may be different. I might have restrictions on types of food that I can eat and may require additional specialized hydration due to my revised system.
- 2 Know my Supplies:** What supplies do I use? There are a myriad of supplies out there, multiple brands, many styles, and many extras. Several factors determine the supplies that I use, including personal preference, what insurance will cover and what I can afford, skin issues, stoma type, etc. As my caregiver, you should also know the type of appliance I use so you know how to empty it. Is it a one piece or a two-piece; is it open or closed; does it have a spout, rollup Velcro or roll up clip opening? Of course, the easiest

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way is to keep track of what I currently use so you are able to reorder it when needed. The UOAA has a handy checklist for this purpose. You can find it at:

[https://www.ostomy.org/wp-content/uploads/2018/08/Ostomy\\_Supply\\_Checklist.pdf](https://www.ostomy.org/wp-content/uploads/2018/08/Ostomy_Supply_Checklist.pdf).

Supplies are generally ordered through distributors who typically send them via mail. If I have insurance, make sure the vendor you choose is covered. Most items require a doctor’s prescription that must be renewed annually. My distributor should be able to help with that process, but it may require a doctor visit. As with any prescription, there are quantity allowances and limits on how often you can order. Since there is no automatic ordering (at least with Medicare), put a note on the last box or last few pouches as a reminder that it is time to reorder. Neither of us wants to run out!

- 3 Know my Providers:** It is important to have contact numbers for emergencies. Keep a current list of my PCP (primary care physician) and Specialists. If I have a CWOCN (*certified wound ostomy continent nurse*) that I like, keep that number handy for questions along with my supplier’s number since most have knowledgeable people available to help as well.

Go to <https://www.ostomy.org/wp-content/uploads/2018/09/Checklist-for-Physician-Visit-Blog-4-.pdf> for a doctor visit checklist to ensure we cover everything needed. Also, make sure you are listed as an authorized contact (for HIPAA purposes) so that medical information may be discussed with you if I have a need and am unable to speak for myself.

*Note:* If I attend school, make sure the teachers, school medical team and administrators understand what my particular ostomy surgery entails and the specifics about my daily and emergency needs. Do NOT assume they will know.

- 4 Know how to care for me:** Caring for an ostomy is very personal and may not be comfortable for either you or me. Use kindness and some gentle humor to ease tensions that can occur until we both get used to the idea. Most pouches should be emptied when they are about half full or less. That may or may not follow a schedule. I definitely do not want it to fill completely or both of us will be in real trouble. How often it requires draining depends on my type of ostomy, general health, and eating/drinking habits. You will also need to know how to clean the opening when you drain the pouch so there is no odor. Finally, you should know about how often the whole thing should be changed for a new appliance, if there is something different used during the night, and what options are available if I become bedridden.

When changing the appliance, it is important to inspect my skin and the stoma itself to look for problems. The UOAA has a checklist available to help you describe it better especially if you suspect there may be an issue: <https://www.ostomy.org/wp-content/uploads/2018/07/Know-Your-Ostomy-Checklist.pdf>. Use that information to contact the nurse or doctor who cares for my ostomy.

I am obviously the best source for answers, but you can also find out how to do many of these tasks by watching YouTube videos, , , just type ‘ostomy’ into the search bar. You will be surprised by the amount of information people are willing to share. The UOAA website ([www.ostomy.org](http://www.ostomy.org)) is also a valuable tool for you to use. Key your question into their search tool. Colostomy UK also has a pamphlet that gives basic information designed for caregivers of ostomates with dementia (*if that is an issue*): <http://www.colostomyuk.org/wp-content/uploads/2018/01/CUK056-01v00r00-Caring-for-a-person-with-a-stoma-and-dementia.pdf>. (*Just know that most of the contact information is not applicable to those of us in the US.*)

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- 5 **Know when to seek advice:** There are times when it is necessary to seek help. If I suddenly have no output for a period of time or if I am in pain, you will need to reach out for help. This could be sign of a blockage, which might require a trip to the ER. You will want to contact a nurse if the skin around my stoma becomes inflamed, if my stoma changes color, or if there is leakage. You do not want to ignore these signs. The ‘fix’ could be as easy as trying other types of wafers or skin protectants, but it could also be a sign of more serious problems. *(See #4 above for a list of signs to look for.)*

If I am struggling emotionally, it will be harder for you. I am usually self-sufficient and do not want to have to rely on someone to do what I used to do myself, so I might become depressed. Please contact my spiritual counselor/pastor or a healthcare professional if needed. Having another person involved is best to ensure that I do not become frustrated or angry.

- 6 **Know where you can get support:** Support Groups like the Spokane Ostomy Support Group (SOSG) and several others in our region near you (*see page 10*) provide opportunities to talk to other caregivers, ostomates and/or medical professionals. Come to our monthly meetings and get to know other ostomates, caregivers, and specialists who know and understand our unique needs. Your local support group or ostomy clinic may also provide certified visitors either in person or via phone for more personal encouragement. Specialized ostomy Facebook forums may provide the opportunity post questions or comments and receive feedback from people across the globe. Web sites such as [www.ostomy.org](http://www.ostomy.org) have great information to help you – just type in your question, and of course, make use of my Physician, Mental Health Provider, or Nurse. *(see note above in #3 about getting HIPAA paperwork in place to ensure you can speak for me.)*

- 7 **Know yourself and your limitations:** Finally, I need you! Please take care of yourself. Make sure you take some time off away from me to have fun and pursue other interests. Find a back-up caregiver and make sure they are educated *before* the need arises. You have your own life and you will need time for yourself. Find someone to support *you* whether it is through a group meeting, online, or with other friends. Please do not burn out, as you are very important to me! <https://www.healthcentral.com/article/dealing-with-caregiver-burnout?ap=2003>.

## IMPORTANT OSTOMATE SUPPORT CONTACTS & LINKS

Providence Sacred Heart Outpatient Ostomy Clinic - M-F 8:00-2:30 (509-474-4950), leave a message if you don't reach someone live); appointments & MD referral required; No walk ins; Can be seen for follow up, checkup, questions, problems.

Deaconess Medical Center - Wound Center - M-F 9:00-3:00 (509- 473-7290); appointments & MD referral required.

Spokane Ostomy Visitor Program - Those who have an ostomy or face potential ostomy surgery should contact Carol Nelson (509-443-1242; [carol@nelsonwheat.com](mailto:carol@nelsonwheat.com)) to arrange contact with or a visit from an experienced and trained Ostomate Visitor.

Inland Northwest Bladder Cancer Support Group - A support group for urostomates and bladder cancer patients. Members meet the first Tuesday of the month at 5:00 p.m., Perkins Restaurant, on 12 E. Olive, in downtown Spokane. Contact Keith Alloway (509) 847-5999, or email him at [KI.alloway@comcast.net](mailto:KI.alloway@comcast.net).

Ostomy Support in Lewis-Clark Valley –

Tri-State Wound Healing (Ostomy Clinic), Clarkston, WA – Call 509-758-1119 – referral not required.

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

United Ostomy Associations of America (UOAA) - (800-826-0826); P.O. Box 525, Kennebunk, ME 04043-0525; Link: <http://www.ostomy.org/Home.html>.

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).

Primary Producers of Ostomy Products:

Hollister 1-888-808-74556

Coloplast 1-888-726-7872

Convatec 1-800-422-8811

<http://www.hollister.com/>

<http://www.coloplast.us/Ostomy>

<http://www.convatec.com/ostomy/>



## INLAND NORTHWEST OSTOMY SUPPORT GROUPS & MEETINGS\* EASTERN WASHINGTON & NORTHERN IDAHO

(We recommend that you call the support group contacts to verify meeting times, agendas, & locations)  
(Also, check the “**Inland Northwest Ostomy Support Groups**” website: <http://inlandnwostomy.org>)

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

- Meetings held from 6:30—8:30 pm on the 3rd Thursday of each month (February-November);
- Kootenai Health & Medical Center, 2003 Kootenai Health Way, Coeur d'Alene, ID.
- Resource Center / Cedar Room.
- Contacts: Shari Gabourie RN, BSN, CWON at 208- 625-6944 or Sherron West, CDA OSG President, at 208-719-0776 for more information.

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

- Meetings held monthly at 12:30-1:30 pm on the 2nd Monday each month (January-December);
- Tri-State Memorial Hospital, 1221 Highland Ave, Clarkston, WA; hospital conference room on main floor.
- Contact: Janet Scheelke, President at 208-305-1723.

### **Spokane Ostomy Support Group, WA (# 349):**

- Meetings held from 6:30-8:00 pm on the first Tuesday each month (February-November);
- Providence Sacred Heart Medical Center, 101 W 8th Ave, Spokane, WA. Currently, we will meet in the Avista A & B Room in the SHMC Women’s Center (west end of complex).
- Contacts: Susie Leonard Weller at 509-499-1423 or Carol Nelson (Visitation Program) at 509-443-1242.

### **Mid-Columbia (Richland) Ostomy Support Group, (TriCities), WA (# 278):**

- Meetings currently held January & March at 12:00-1:30 pm, May & September at 4:30-6:00 pm, and November at 12:00-1:30 pm (<https://education.kadlec.org/registration/11-wellness/94-support-group-ostomy>).
- Kadlec Healthplex, 1268 Lee Blvd, or main Kadlec Campus 888 Swift Blvd. Richland WA; room varies.
- Contacts: Lisa Bartholomew, RN, BSN, CWOCN at 509- 946-4611 Ext 1365562; or Wayne Pelly (Visitation Chairperson) at 509-943-3223.

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

- Meetings held quarterly at 2:00 to 4:00 pm (see contacts for meeting schedules and agendas.)
- Confluence Health Central Washington Hospital 1201 S. Miller St., Wenatchee, WA; Conference rooms F & G.
- Contact: Tyree Fender, RN, BSN, CWOCN at 509-665-6156.

### **Yakima Ostomy Support Group, WA:**

- Meetings held bimonthly at 10:00 to 11:00 am, generally on the third Wednesday of January, March, May, September, & November (check with the inpatient Wound/Ostomy Care Department for details);
- Virginia Mason Memorial, 2811 Tieton Drive, Yakima, WA, usually in basement – Classroom C;
- Contacts: Virginia Mason Memorial Ostomy/Wound Care Services – Karen Aal, RN, MS, CWON; Lois Engel, RN; or Allyson Uhlman, RN, CWOCN, at 509-575-8266.

\* Please let us know if errors need to be corrected or changes made to the ABOVE information:  
([SOSG.Input@gmail.com](mailto:SOSG.Input@gmail.com)).