Assignment 1 Ostomy- Surgical Procedures Purpose: The purposes of this assignment are for the student to define and describe the common surgical procedures that result in a stoma and to develop introductory patient teaching skills. In addition, you will be demonstrating your understanding of common continent urinary diversions. Length and Value of Assignment: This is an individual assignment worth 15% of your final mark. Limit the assignment to a total of 13 pages excluding the cover page and the reference list. Assignments longer than 13 pages may be returned unmarked and given a 0%. Assignments must follow the recommendations in the WOC-EP Guideline for Preparing Assignments and use APA formatting for citations and references. This assignment has specific directions as to how to format a table, follow these for the specific question applicable. For all remaining questions (# 2-5) use a subtitle identifying the question you are answering for example: Three Types of Continent Urinary Diversions and write your answers in a sentence or short paragraph as needed. Knowledge Acquisition Focus: Gain in-depth knowledge about the common surgical procedures that result in a stoma and how this impacts output. Gain an understanding of continent urinary diversions. Expand your understanding of end and loop type stomas. Knowledge to Practice Focus: Develop a patient oriented vocabulary to explain surgical procedures during pre-op teaching. For the six surgical procedures listed below, briefly describe in point form, single space, table format the following: a. The surgical procedure: The description of the surgical procedure should be as you would explain it to the patient when doing pre-op teaching. (5 marks x 6 = 30 marks) b. The indications for the surgery. (2.5 marks x 6 = 15 marks) c. The specific risks/complications associated with the particular surgery. Include how this surgery will affect the patient. (2. 5 marks x 6 =15 marks) (Please note: Not general surgical risks such as PE, DVT, MI, stroke or pneumonia). d. The diversion type, type of stoma (end, loop) and location resulting from the surgery. (1.5 mark x 6 = 9 marks) 1 -Abdominoperineal Resection 2 -Low Anterior Resection 3-Proctocolectomy Total and Restorative 4 -Hartmann’s Procedure 5 - Cystectomy and Radical Cystectomy 6 -Pelvic Exenteration (anterior, posterior, and total) An example of a table format: Surgical Procedure: 1 a) Description of surgery (5 marks x 6= 30) Be concise but thorough. Include the details the person needs to know about their procedure. Use layman's terms for this question as you would when explaining it to a person during pre-op teaching. 1 b) Indications (2.5 marks x 6= 15) Citations should occur with items listed, if multiple items come from the same source you only need to list it once after the last item. 1 c) Specific risks, complications and the effect on the patient’s life (2.5 x 5=15 marks) Citations as above. Consider all aspects of the effect on the patient not just the physical. 1 d) Type of Diversion Type of stoma (end or loop) Location (1.5 marks x 6 = 9) 2. Identify the immediate post op (initial few days) and the long-term characteristics of the output for an ileostomy, a colostomy and an ileal conduit. (2 marks for each (total of 4 /diversion) =12 marks) 3. Provide a short description of how a loop stoma and an end stoma are made and why. Explain the difference between the two (Please note do not explain what a loop-end stoma is.) (2 marks each = 4 marks) 4. Give a brief description of the following continent urinary diversions: the Indiana pouch, the Koch (Kock) pouch and the Mitrofanoff. (2 marks each = 6 marks). 5. Identify the key points of the immediate care and long-term care of an Indiana pouch. (4 marks) Presentation: Grammar, spelling, length and format, (cover page, introduction, conclusion, citations and reference list). (5 marks) MARKING RUBRIC Criteria Unsatisfactory 0-59% Mediocre 60-74% Satisfactory 75-89% Exemplary 90-100% Mark Table (1-4) 1.a) Surgical procedure (5 marks per surgery= 30 marks) Describe less than 6 of the surgical procedures.

Description does not describe procedures in detail, does not demonstrate understanding of the procedures, does not include information that a person needs to know about their procedure and is not written in layman’s terms. Describes 6 surgical procedures using either medical terminology or overly simplistic language. Demonstrates limited understanding of the surgeries. Information is not thorough or concise. Includes some information that the person needs to know about their procedure. Describes all 6 surgical procedures using language consistent with patient education. Demonstrates moderate understanding of the surgeries. Information lacks clarity and is not complete Includes some but not all details a patient needs to know about their procedure. Describes all 6 surgeries in detail using language consistent with thorough patient education. Demonstrates in-depth understanding of the surgeries. Is concise and inclusive. Includes details the person needs to know about their procedure. /30 1.b) The indications for the surgery. (2.5 marks x 6 = 15 marks) Does not describe indications for all 6 surgical procedures. Information is incomplete and lacks detail. Describes indications for 6 of the surgical procedures but is incomplete. Information is not thorough or concise. Demonstrates moderate understanding of all 6 of the surgeries. Information lacks clarity and is not complete Demonstrates in-depth knowledge and understanding of the indications for each of the 6 surgical procedures. /15 1.c) The specific risks, complications and effect on patients associated with each surgery. (2. 5 marks x 6 =15 marks) Identifies some risks for surgical procedures. Risks are not specific to the surgical procedure and includes general surgical risks/complication s. Identifies specific risks for each surgical procedure. Does not demonstrate understanding of the unique risks/complications for each surgery. Demonstrates moderate knowledge of some of the specific risks associated with each of the 6 surgical procedures. Demonstrates in-depth knowledge and understanding of risks specific to each of the 6 surgical procedures. Is concise but complete. /15 1.d) The diversion type, type of stoma Does not Identify the type of diversion, or type Identifies the type of diversion, type of stoma & stoma Demonstrates moderate knowledge of each type of diversion, or type of Demonstrates in-depth knowledge and understanding of the /9 Rev July 2015 WOC-EP Ostomy Assignment 1 Criteria Unsatisfactory 0-59% Mediocre 60-74% Satisfactory 75-89% Exemplary 90-100% Mark (end, loop) and location resulting from the surgery. (1.5 mark x 6 = 9 marks) of stoma or stoma location for all 6 of the surgical procedures or information is inaccurate in 3 or more surgeries location. Some information lacking or is incorrect for 2 or more surgeries. stoma or stoma location resulting from each of the surgical procedures. type of diversion, type of stoma and stoma location resulting from each of the 6 surgical procedures without any errors. 2. Identifies the immediate post op (initial few days) and the long term characteristics of the output for an ileostomy, a colostomy and an ileal conduit. (2 marks for each (total of 4 /diversion) =12 marks) Information about output is inaccurate for the post-operative period and long term for an ileostomy, or colostomy or ileal conduit. Description is incomplete. Provides minimal information about the output immediately post operatively and long term for an ileostomy, colostomy and ileal conduit. Demonstrates moderate knowledge about characteristics of output expected immediately post operatively and long term for an ileostomy, colostomy and ileal conduit. Demonstrates in-depth knowledge and understanding of characteristics of expected output during the immediate and long term for an ileostomy, colostomy and ileal conduit. /12 3. Provide a short description of how a loop stoma and an end stoma are made and why. (Please note we are not talking about a loop-end stoma.) (2 marks each = 4 marks)

Does not demonstrate understanding of the procedures to construct a loop stoma and an end stoma. Demonstrates minimal understanding of the procedures to construct a loop stoma, and an end stoma. Rationales for type of stoma not included Demonstrates moderate understanding of the procedures to construct a loop stoma and an end stoma. Rationales are included. Demonstrates in-depth knowledge and understanding of the procedures to construct a loop stoma and an end stoma including rationales for each. /4 4. Give a brief description of the following continent urinary diversions: the Indiana pouch, the Koch (Kock) pouch and the Mitrofanoff. (2 Demonstrates minimal knowledge of the 3 continent urinary diversions: Indiana pouch, Koch/Koch pouch and Mitrofanoff Descriptions are incomplete and/or Demonstrates some knowledge of 2 of the 3 continent urinary diversions: Indiana pouch, Koch/Kock pouch, and Mitrofanoff. Descriptions not clear and some information is missing. Demonstrates knowledge of the 3 continent urinary diversions: Indiana pouch, Koch/Kock pouch, and Mitrofanoff. Descriptions are not thorough. Demonstrates in-depth knowledge and understanding of the 3 continent urinary diversions: Indiana pouch, Koch/Kock pouch, and Mitrofanoff Descriptions of each are clearly and accurately described. /6 Rev July 2015 WOC-EP Ostomy Assignment 1 Criteria Unsatisfactory 0-59% Mediocre 60-74% Satisfactory 75-89% Exemplary 90-100% Mark marks each = 6 marks). inaccurate or very superficial 5. Identify the key points of the immediate care and long term care of an Indiana pouch. (4 marks) Does not demonstrate accurate knowledge of care for an Indiana pouch. Does not mention tubes, volumes or routine. Demonstrates minimal knowledge regarding care of an Indiana pouch in either the immediate post op period or long term care. Does not explain the role of the patient and that of the health care provider. Demonstrates some knowledge of immediate and long term care of an Indiana pouch. Demonstrates in-depth knowledge and understanding of the key points for the immediate and long term care of an Indiana pouch. /4 Style and Clarity (5 marks) Writing is incomprehensible . Not edited. Does not fit in the stylistic requirements of the assignment regarding citations and bibliography Writing is somewhat clear. Significant number of mistakes including spelling, citations and bibliography Writing is clear, concise; there are a very few mistakes in spelling, citations and bibliography Writing is clear, concise, and without any mistakes. No spelling or citation mistakes. Bibliography is complete and without mistakes. /5 Deduction of 5% per calendar day for late assignments unless extension was given. Total score /100 Additional Comments