

Oral Rehydration Solutions

Oral Rehydration Solutions (ORS, for example Drip Drop or Pedialyte) have the same amount of electrolytes, such as sodium potassium, and sugar as your blood. They are easily absorbed and help replace fluids and electrolytes lost in your stool. If you have high ostomy output, sip on oral rehydration solutions throughout the day. The goal is to drink at least 6 cups of ORS. Limit all other liquids to less than 2 cups per day.

Sip on oral rehydration solutions in between meals throughout the day.

Sports drinks alone such as Gatorade are not good options to replenish fluid and electrolytes. They do not contain the correct amounts of ingredients for proper rehydration.

Do not add ice or dilute ORS. Freeze ORS into ice cubes or popsicles if desired.

Below is a list of both recommended premade ORS products that you can purchase at the store or online and recipes that can be made at home.

Premade Products (ORS)

Oral Rehydration Salts Packet

made by Jianas Brothers

Ceralyte 50, 70, or 90

made by Cera

Drip Drop

made by Elite Hydration Science

Pedialyte

made by Abbott

Homemade Recipes

WHO

- 1/2 teaspoon table salt
- 1/4 teaspoon salt substitute, which is potassium chloride
- 2 tablespoons table sugar
- 1/2 teaspoon baking soda
- Add tap water to make 1 liter

Combine and stir until well-mixed and dissolved.

Crystal Light may be added to improve flavor.

Gatorade G2 Based

- 4 cups (32 oz bottle) G2 Gatorade
- 3/4 teaspoon salt

Combine and stir until well-mixed and dissolved.

Apple Juice Based

- 3/4 cup apple juice
- 3 3/4 cups water
- 3/4 teaspoon salt

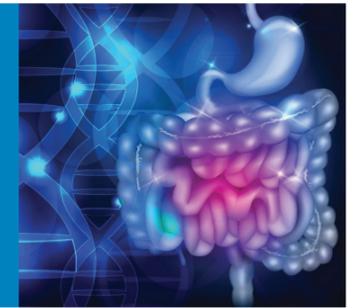
Combine and stir until well mixed and dissolved.

Orange Juice Based

- 4 1/4 cups water
- 1 cup orange juice
- 8 teaspoons sugar
- 3/4 teaspoon baking soda
- 1/2 teaspoon salt

Combine and stir until well-mixed and dissolved.

Monitoring Hydration with an Ostomy



Average output:
3-5 cups/day

Average ileostomy output ranges from 800 - 1,200 milliliters (mL) or 3 - 5 cups per day. Right after surgery, output may be watery. During the first few weeks after surgery the output should thicken to the consistency of applesauce.

It is normal to empty your ileostomy bag 6-8 times per day when it is half full.

Ostomy output of more than 1,500 mL, or about 6 cups of stool in 24 hours, is high ostomy output. High ostomy output can put you at risk for dehydration, poor nutrient absorption, and weight loss.



Measure and log
output (urine and
ostomy). Bring log
to your clinic visit.

After your hospital discharge it is important to measure your urine and ostomy output. Measure your ileostomy and urine output every day until your first clinic appointment. Keep a log of the output to bring to your clinic visit. Your health care providers need this information to help manage your new ostomy. Also let your health care providers know if you have any of the following symptoms of dehydration:

- Dry mouth, increased thirst
- Dizziness or lightheadedness
- Muscle cramping
- Increased fatigue or headache
- Decreased urination or dark urine
- Confusion

How to Measure 24-Hour Ostomy and Urine Output

Before you leave the hospital, your nurse will give you containers to measure your ostomy and urine output at home. Plan to measure and record 24-hour ostomy and urine output every day until your follow up clinic appointment. Goal ostomy output is less than 1,500 milliliters, or 1.5 liters in a 24-hour period. Goal urine output is more than 1,000 milliliters, or 1 liter in a 24-hour period.

When you are ready to empty your ostomy, pour the contents of your bag into the measuring container. Write down the time you emptied the bag, and the amount in milliliters of the output. Collect your urine

every time you use the bathroom during the 24-hour measurement period. Write down the time you urinated and the amount. After each measurement, empty the container into your toilet. Wash the container and your hands.

If your ostomy output is higher than 1,500 mL, or your urine output is less than 1,000 mL in a 24-hour period follow the directions in your discharge paperwork and call the clinic. They may suggest a fiber supplement or medication to help control output. Your discharge instructions include the clinic phone number for your surgeon.

Helpful Tips for High Ostomy Output

Try the following if your ostomy output is more than 1,500 milliliters in 24-hours.

✔ **Avoid Foods that Increase Stool Output**

- Certain foods and drinks can increase stool output, or worsen diarrhea. If you have high ostomy output, limit or avoid these items:
- High sugar foods such as table sugar, syrups, honey, ice cream, and candy.
 - High sugar beverages such as juice, regular sodas, smoothies, milkshakes, and protein shakes such as Ensure or Boost.
 - Alcohol such as beer, wine, and liquor
 - Caffeinated beverages such as coffee, sodas, and tea.
 - Milk or lactose-containing foods may worsen diarrhea.

✔ **Eat Small, Eat Often**

Eat every 2 - 3 hours. Aim for 6 or more small meals per day. Eat slowly and chew food well to help improve digestion. Avoid overeating at meals. Regular meals will help you absorb nutrients from food. An empty stomach can also increase gas production and watery stools.

✔ **Add Foods that Decrease Stool Output**

Certain foods can help to thicken stool and decrease output. Include applesauce, bananas, oatmeal, smooth peanut butter, white bread, peeled potatoes, white rice, pretzels, cheese, and yogurts without seeds or chunks.

✔ **Sip on Fluids**

Drink beverages 30 minutes before or after your meals. Drinking more than 1/2 cup of fluid during meals can cause food to move too fast through your digestive tract. Sip on drinks slowly. Sip on oral rehydration solutions to replace fluid and electrolyte losses.

If your ostomy output is normal, but your urine output is low or is not lemonade color or lighter, drink more fluid until your urine output is greater than 1,000 mL daily and light in color. You do not need to limit the types of fluids you drink when your ostomy output is less than 1,500 mL daily. Do not limit the amount you are eating and drinking to prevent high ostomy output. Limiting your intake can lead to weight loss and dehydration. Select suggested foods and beverages when having high ostomy output and call the clinic.

Tracking your output

Measure your ostomy and urine output for 24-hours, for example from 8:00 am Monday to 8:00 am Tuesday. Use the table below to record your results in milliliters (mL) and as a template for ongoing output measurement.

DAY 1

Time	Urine output	Time	Ostomy output
Example 8 am	200mL	6 am	260mL
①			
②			
③			
④			
⑤			
⑥			
⑦			
⑧			

TOTAL OUTPUT
(FOR THE DAY)

DAY 2

Time	Urine output	Time	Ostomy output
①			
②			
③			
④			
⑤			
⑥			
⑦			
⑧			

TOTAL OUTPUT
(FOR THE DAY)