Ostomy Association of Greater Chicago

The New Outlook

October 2014



NEXT MEETING Wednesday, October 15, 7:30 pm

Lutheran General Hospital 1775 Dempster St., Park Ridge, IL Sasser Conference Room 10th Floor by Cafeteria

Last Months' Meeting (our 443rd)

We were very fortunate to be visited by prominent Gastroenterologist Dr. Eugene Northshore University Health System. He led a rap session which included a myriad of subjects covering the entire GI tract. He told us about all the advances made in diagnostic testing, medications and surgery, in just the last 20 years. We talked about probiotics, which haven't actually been studied in patients to determine efficacy; antacids, which alleviate some symptoms, but do not heal underlying causes, such as inflammation; GERD which is not caused by acid but by slow emptying of the esophagus; blockages caused by scar tissue and peristomal hernias (a smaller hernia may be more cause for concern than a larger one) and when surgery may be indicated; IBD treatments with the goal of healing tissue to decrease risk of cancer; small intestine absorption and so much more. Dr. Yen answered all of our general questions and members' specific questions. We thanked him profusely for the generous gifts of his time, his knowledge and his support.

Don't forget to let us know if your physical address or email address has changed. Our member list is private, never shared or sold. Our next meeting, October 15, will feature our WOCN, Mary McCarthy with information on getting ready for winter, as well as other issues. Do you have a question for the nurse?

We occasionally use a different meeting room at the hospital. This month we will be in the Sasser Conference room by the cafeteria. Take elevater C to the 10th floor and enter the cafeteria. There are always supportive ostomy veterans to chat with you.

We're going GREEN! Paper is so 20th century! Thanks to everyone who volunteered to receive this newsletter via email. If you have Internet access, you can save us money by joining our electronic distribution list. To try the electronic version, send e-mail request to: uoachicago@comcast.net

Be sure to add us to your safe sender's list and check your email inbox.



www.uoachicago.org

Ostomy Association of Greater Chicago (OAGC)

Established 1975

President		
Judy Svoboda	uoachicago@comcast.net	847-942-3809
Treasurer		
Tim Traznik	tim.traznik@brunbowl.com	630-736-1889
Secretary/Program	m Director	
Nancy Cassai	cassainancy@gmail.com	847-767-1447
Director/GLO		
Fred Shulak	thadbear@sbcglobal.net	773-286-4005
Visiting Chairper	son	
Peggy Bassrawi, I	RN <u>pbassrawi@gmail.com</u>	847-251-1626
Ways and Means	sallyschinberg@yahoo.com	
Jerry & Sally Sch	inberg	847-364-4547
Chapter WOCN	_	
Mary McCarthy	marysean@comcast.net	847-231-5485

Wound Ostomy Continence Nurses (WOCN)

Bernie auf dem Graben	773-774-8000
Resurrection Hospital	
Nancy Chaiken	773-878-8200
Swedish Covenant Hospital	
Teri Coha	773-880-8198
Lurie Children's Hospital	
Jan Colwell, Maria De Ocampo,	773-702-9371 & 2851
Michele Kaplon-Jones	
University of Chicago	
Jennifer Dore	847-570-2417
Evanston Hospital	
Karen Blum	312-942-7088
Rush University Surgeons	
Robert Maurer, Laura Crawford	312-942-5031
Rush University Medical Center	
Madelene Grimm	847-933-6091
Skokie Hospital-Glenbrook Hospital	
North Shore University Health System	
Connie Kelly, Mary Kirby	312-926-6421
Northwestern Memorial Hospital	
Kathy Krenz & Gail Meyers	815-338-2500
Centegra-Northern Illinois Medical	
Marina Makovetskaia	847-723-8815
Lutheran General Hospital	
Diane Zeek, Carol Stanley	847-618-3125
Northwest Community Hospital	
Nancy Olsen, Mary Rohan	708-229-6060
Little Company of Mary Hospital	
Kathy Garcia, Jola Papiez	708-684-3294
Advocate Christ Medical Center	, 00 00 . 525 .
Sandy Fahmy	847-316-6106
Saint Francis Hospital	017 510 0100
Nancy Spillo	847-493-4922
Presence Home Care	0.7.35.322
Colleen Drolshagen, Becky Strilko,	630-933-6562
Barb Stadler	000 700 0002
Central DuPage Hospital	
Kathy Thiesse, Nancy Stark	708-216-8554
(Ginger Lewis-Urology only 708-216-5112)	, 00 210 000 1
Loyola University Medical Center	
Alyce Barnicle (available on as needed basis only)	708-245-2920
LaGrange Hospital	700 213 2720

National UOAA Virtual Networks

Pull Thru Network: Lori Parker	309-262 6786
UOAA Teen Network: Jude Ebbinghaus	860-445-8224
GLO Network: Fred Shulak	773-286-4005
YODAA: Esten Gose	206-919-6478
Teen Network: Jude Ebbinghaus	860-445-8224
Thirty Plus: Kathy DiPonio	586-219-1876
Continent Diversion Network: Lynne Kramer	215-637-2409
FOW-USA: Jan Colwell	773-702-9371

2014 Meeting Dates at Lutheran General Hospital

October 15- WOCN Mary McCarthy
winterizing and "Ask the Nurse"
November 8- Midwest Regional Ostomy Education
Conference in Arlington Heights
November- No general meeting
December 10- Annual Holiday Gala

More area support groups:

Northwest Community Hospital

Arlington Heights. Oct. 9, Dec. 11, at 1:00pm, level B1 of the Busse Center. Contact Diane Zeek 847-618-3215, dzeek@nch.org

Southwest Suburban Chicago

The third Monday at 7:30pm, Little Company of Mary Hospital, Evergreen Park. Contact Edna Wooding 773-253-3726, swscost@gmail.com

Sherman Hospital, Elgin

The second Wednesday of each month at 2 pm. Lower level Conference B. Contact Heather LaCoco 224-783-2458,

Heather.Lacoco@Advocatehealth.com or Tom Wright, tomwright122@att.com

DuPage County

The fourth Wednesday at 7:00pm, Good Samaritan Hospital, Downer's Grove in the Red and Black Oak Rooms by the cafeteria. Contact Bret Cromer 630-479-3101, bret.cromer@sbcglobal.net

Aurora

The second Tuesday at 7:00pm, Provena Mercy Center. Contact John Balint 630-898-4049, balint.john@yahoo.com

Will County

Charlie Grotevant 815-842-3710 charliegrtvnt@gmail.com

Lake County Illinois

Hollister in Libertyville, 10:00am the 3rd Saturday, every other month. Meetings are in January, March, May, July, September and November. Contact Barb Canter 847-394-1586, barb1234@sbcglobal.net

Here & Now with Patricia Johnson



Shadow Buddies

Imagine being a child waking up in the hospital after a long surgery, feeling bad and seeing a red lump, much like a

strawberry, sticking out of your abdomen. Then told that this thing is a stoma. It will be there for a long time. Possibly forever. This is the new way you will go to the bathroom. And hopefully there will be no more pain, no more sickness. It must be terrifying and curious at the same time. You feel different and alone.

Then someone, mom or dad or a nurse pushes into your hand a stuffed object. You look at it, turning it over and see that it is a doll. A boy doll or a girl doll, just like you. Upon closer examination you see that the doll has a stoma too. It even has a pouch. You are surprised. You examine it closely, touching the stoma, removing and attaching the pouch. This doll is like you. You have a new friend, to talk to, hug, tell secrets to. You like this doll. You don't feel so alone anymore.

Shadow Buddies are given to children for free. Hollister sends them to patients through WOCNs. The Hollister web site states that the Shadow Buddies are designed to be a teaching tool to educate a child about what they now have. Children learning to live with an ostomy can find it tricky at first, but with the help of their Buddy they quickly begin to adapt. The Buddies can also be used by someone to explain their own situation to children, such as parents or grandparents.

How wonderful that there is something so simple yet so helpful for children with ostomies.

Life is good.

Shadow Buddies Foundation

Inspired by her son who wanted a friend "just like me," Marty Postlethwait founded the Shadow Buddies Foundation in September of 1995. Miles, her son, was born with multiple congenital birth



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defects that had him in and out of the hospital since he was born. During one of his many hospital stays, Miles told his mom and dad that he wanted a "buddy" that had defects similar to his that could help ease his feelings of loneliness and fear. So Marty took action and with the help of Miles, developed the first Shadow Buddy.

The mission of the Shadow Buddies Foundation is to provide emotional support through education regarding illness, disability, or medical treatments. The Buddy can help increase compassion and understanding while spanning the gap between treatment and awareness.

To date, they have distributed more than 840,000 condition-specific buddies to children and families in all 50 states and in 16 countries.

For more information on the Shadow Buddies Foundation and the 25 buddies and accessories, go to www.shadowbuddies.org

The New Ostomate at Senior Age UOAA Update

Because the population as a whole is living longer, greater numbers of people are suffering illness that requires ostomy surgery. Problems the senior new ostomate may face (which all of us can help with) include:

- 1. Fear of increasing dependence and non-acceptance by family. Family acceptance and support are essential for complete rehabilitation.
- 2. Unpreparedness for a stoma. Surgery may often be done as an emergency procedure, and there has been little time for an older person to adjust to this change in body image. Often the older person is confused after surgery because the hospital routine is foreign; side rails are up and he/she is confined as though a child. It is in this condition that he/she first gets acquainted with his/her ostomy.
- 3. A hard-to-manage stoma. Particularly if created in emergency surgery, the stoma may be adjacent to a wound or done in haste and poorly positioned. Experienced ostomates and caregivers can and should work to teach new senior ostomate acceptance and self-care. It might take extra patience.

Ability to learn does not diminish with age, but speed of performance and reaction time decline and it takes longer to learn new tasks. A word of advice to those working with new ostomates in a senior category: allow your student to learn one task well before proceeding to the next one.

Do what you can, with what you have, where you are.

-Theodore Roosevelt

Irrigation

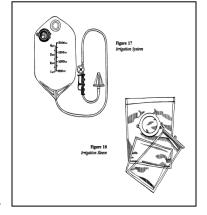
(for descending and sigmoid colostomies only)

American Cancer Society

Irrigating to have regular, controlled bowel movements is up to each person, but you should fully discuss it with your doctor or ostomy nurse before a decision is made. Your doctor or nurse will teach you how to irrigate your colostomy. The

procedure may be a little different than what we describe here, depending on the experience of the person teaching you.

Needed equipment includes a plastic irrigating container with a long tube and a cone or tip. (The plastic coneshaped piece at end of



the tubing fits snugly against the stoma to run water into the colostomy.) An irrigation sleeve is worn to take the irrigation output into the toilet. You can use a tail closure clip and a belt for extra irrigation sleeve support, too.

Basic irrigation tips

- Choose a time in the day when you know you will have the bathroom to yourself.
- Irrigation may work better if it is done after a
 meal or a hot or warm drink. Also, consider
 irrigating at about the same time of day you
 usually moved your bowels before you had
 the colostomy.
- Clamp the tubing and put 1000 cc (about 1 quart) of lukewarm (not hot) water in your irrigating container. You may need a little less. NEVER connect the tube directly to the faucet.
- Hang the container at a height that makes the bottom of it level with your shoulder when you are seated.
- Sit on the toilet or on a chair next to it. Sit up straight.
- Seal the plastic irrigation sleeve onto your faceplate and place the bottom end of the sleeve in the toilet bowl.

- Wet or lubricate the end of the cone with water-soluble lubricant.
- To remove air bubbles from the tubing, open the clamp on the tubing and let a small amount of water run into the sleeve. Reclamp the tubing and put the cone into the stoma as far as it will go, but not beyond its widest point. Slowly open the clamp on the tubing and allow the water to gently flow into your bowel.
- The water must go in slowly. You may shut the clamp or squeeze the tube to slow or stop the water flow. It takes about 5 minutes to drip in 1000 cc (about 1 quart) of water. Hold the cone in place for 10 seconds after all the water has gone in.
- The amount of water you need depends on your own body. You may need less, but do not use more than 1000 cc (1 quart). The purpose of irrigating is to remove stool, not to be strict about the amount of water used.
- You should not have cramps or nausea while the water flows in. These are signs that the water is running in too fast, you are using too much water, or the water is too cold. After the water has been put in, a bowel movement-type cramp may happen as the stool comes out.
- After the water has run in, remove the cone. Output or "returns" will come in spurts over the next 45 minutes or so. As soon as most of it has come out, you may clip the bottom of the irrigating sleeve to the top with a tail closure clip. This allows you to move around, bathe, or do anything you wish to pass the time.
- Over time you will know when all the water and stool have come out. A squirt of gas may be a sign that the process is done, or the stoma may look quiet or inactive.
- If the complete irrigation process always takes much more than an hour, talk to your doctor or ostomy nurse.

Whether you will irrigate your colostomy and how you will do it depends on many factors, such as:

- The amount of active bowel you have left.
- Your lifelong bowel habits.

- Your skill and comfort level with irrigation.
- Your personal feelings about the colostomy.
- Your talks with your doctor or your ostomy nurse.

Try to find a method, or combination of methods, that most closely matches your body's normal bowel habit or pattern. At first, you may need to try different things under a doctor or nurse's guidance. Just remember, it will take time to set up a new system. Having regular daily habits will help. If you find certain foods or irrigation procedures let you regulate your bowel movements, keep doing those things at the same time every day. Regular habits will promote regular bowel functions, but occasional changes routine will not harm (Last Medical Review: 03/17/2011)

Happy Halloween!



If you are still receiving the black and white printed version of the newsletter, go to our website www.uoachicago.org/the-new-outlook to see what you are missing.

MIDWEST REGIONAL OSTOMY EDUCATION CONFERENCE

You will not want to miss this opportunity to learn all about ostomies, focusing on both medical and lifestyle issues. The all day conference, presented by the Ostomy Association of Greater Chicago and Hollister, Inc., is on Saturday, November 8th at the Double Tree Hotel in Arlington Heights, IL. Medical experts include Colon and Rectal Surgeon, Urologist, Psychologist, Gynecologist, Physical Therapist, Dietician, Pharmacist, and numerous WOCNs. Lifestyle sessions with Brenda Elsagher and Laura Cox. Also UOAA President Susan Burns.

A Stoma Clinic organized by Diane Zeek, NP, CWOCN. You will need to bring an appliance change. To make an appointment call 847-618-4968 and mention Nov. 8th Ostomy event.

We especially want to thank our event sponsors-Hollister, Northwest Community Hospital, Stoma Guard, Mark Drug Medical Supply and Ostomy Association of Aurora.

Doors open at 8:00am with continental breakfast and Vendor Fair. Parking is free. See pages 9 and 10 for more details and registration. Check the website and your email inbox for updated information.

In planning this day, we realized with so much to learn there is little time to socialize with each other. Talking, sharing and laughing with others is essential. So, we're getting together at 6:00pm for a Hawaiian Pa'ina (party). Dress is casual! Feel free to dig out your flowered shirts, but not necessary. We'll have light bites, and of course you know what light bites are called in Hawaii......

Pu Pu's and yes, the pun is intended!

There's a cash bar. In addition to her daytime communiqué, the evening entertainment features Brenda Elsagher. If you've never seen Brenda in action, you're in for quite a treat. Brenda is a comedian, author, and national speaker who brings a joyful message in the face of adversity. She combines comedy and her experiences with colostomy surgery to encourage hope and healing through laughter.

Ostomy ~ The New Normal

Brenda has written 4 books, and during the evening Pa'ina, will sign complementary copies, thanks to the generosity of **Hollister**.









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Proud sponsor of the Midwest Regional Ostomy Education Conference November 8th

Text message

Wife: Windows frozen

Husband: Pour lukewarm water on and

try to open.

Wife: Computer really messed up

now!

Who should I tell?

Mayo Clinic Ostomy Care

It's up to you to decide who to tell about your ostomy surgery. It may make sense to tell the people closest to you. These people may be worried about your recovery, and explaining your ostomy may ease their fears. Talking with loved ones is also a healthy way to cope with your emotions.

Acquaintances may be curious about why you've been away from work or know that you were in the hospital and ask about your illness. Think ahead about what to say when questions arise. You could say you've had abdominal surgery or use another basic description without going into details if you're uncomfortable discussing your ostomy with people you don't know well.

Other people will need to know about your ostomy for practical purposes. If you don't have a desk or locker at work to store extra ostomy supplies, for instance, you might need to reveal some details of your ostomy to someone at work so that such arrangements can be made.

Some people keep their ostomy surgery private, and others prefer to tell anyone who asks. Who you tell is up to you, but you may find you're more willing to discuss the details as you become more comfortable caring for your ostomy.



Everyone needs a friend to act silly with!

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It's a Matter of Sharing

Ostomy News Review, Green Bay, WI reprinted by The New Outlook

I know a man, a colostomate, (who) when asked why he didn't join the ostomy chapter said, "I've adjusted just fine. I don't need the group." His complacency set me back a bit. I thought it over.

So, maybe he doesn't need the chapter—whatever that means. But the group needs him and others like him—well adjusted ostomates who walk around flat-tummied and non-odorous. Of course, I'm not talking about after-shave or perfume.

An ostomy chapter is not a "half-way house" sort of thing. We don't get together to feel sorry for ourselves, to talk exclusively about the "fun and games" of our various operations. We get together because we want to help each other or maybe to get some help with some little problem that's been bugging us. Something our doctors can't answer but another ostomate may. We want to prove to all those non-believers—oops, guess I'd better call them skeptics—and non-ostomates who may think an ostomy is the end of the world—well, it's not. In most cases, it's the beginning. We are alive because we are ostomates.

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How to Walk with an Ostomy*

Vancouver Ostomy Highlife

If your mother was here she'd tell you to straighten your shoulders, hold your head up and quit slouching. Good posture in other words. Actually, the straighten up part holds true for when you begin walking again after surgery. You'll be sore and wary of being bumped by others, but don't let that get you into the habit of hunching over when you walk. There is a natural tendency to want to guard the abdomen after ostomy surgery so you need to remind yourself to practice good posture. You needn't go far on those first few walks outside the home, but hold your head up, straighten those shoulders and look the world in the eye.

*the same way you did before you got the ostomy



What Thanksgiving Means To An Ostomate,

by Marjorie Kauffman

When the frost is on the punkin' and the chill is in the air, you know Thanksgiving's comin' and it's time to say a prayer, to thank the lord above for the miracles He has wrought. "cause you're still among the livin" in spite of what you've got. Sure, it cost a heap in learnin' and the best is none too good; and that same old appliance isn't stickin' like it should, or it's leakin' when it shouldn't; or the changing time's not right, or you find yourself in trouble in the middle of the night. It's quiet when you're all alone, then acts up in a crowd; and fills up like a toy balloon or rumbles long and loud; and when you least expect it, it can ruin your best clothes, or maybe you get worried wonderin' if it really shows. When bathroom locks are missin' you can sure feel insecure; and sometimes when you're braggin' it's your smelling' that's poor. All the cleanin' and fussin' and the airin' is a bore: and affordin' what you're needin' might just become a chore. Yes, these problems will beset you, and some more, but some less. Some day you'll laugh about 'em and you'll honestly confess that life IS worth livin', so stop a bit and pray, and give your Thanks and Blessin' EVERY DAY IS THANKSGIVING DAY!

Reprinted from Baltimore (MD) Ostomy Association "Friends Together" via Greater Seattle (WA) The Ostomist

MIDWEST REGIONAL OSTOMY EDUCATION CONFERENCE Presented by OAGC and Hollister

Saturday, November 8, 2014 The Double Tree Hotel

75 W. Algonquin Road, Arlington Heights, IL 60005 Arlington Heights Rd exit off I-90

Join us for this one-day Ostomy Educational Conference filled with information for and about ostomies.

<u>Sponsors</u>: Hollister, OA Greater Chicago, Northwest Community Hospital, OA Aurora, OA Arlington Heights, Mark Drug Medical Supply, Stoma Guard

Medical Advisor:

Bruce A. Orkin, MD Vice Chair for Academic Affairs, Department of General Surgery Chief, Section of Colon and Rectal Surgery Rush University Medical Center

Speakers:

Dr. Bruce Orkin, Colon and Rectal Surgeon Dr. Tiffany Taft, Psychologist Dr. Renjie Chang, OB-GYN Stephanie Horgan, Clinical Social Worker Dr. Leslie Deane, Urologist Karen Blum, APN, CWOCN Madelene Grimm, CWOCN Kesuri Sethurama, Physical Therapist Brenda Elsagher, Author I Want to Buy a Bowel Linda Laurenz, Dietician Pharmacist TBA Ally Bain, Law Student, drafted Restroom Access Law (Ally's Law) Susan Burns, President UOAA Laura Cox, Ostomy Lifestyle Sessions for family/spouses

Stoma Clinic:

Organized by Diane Zeek, NP, CWOCN

You will need to bring an appliance change. **Call 847-618-6948** to make an appointment. This is the Northwest Community Hospital appointment line, so **mention the Nov. 8 Ostomy event**.

Schedule:

8:00am - Registration/Continental Breakfast

8:00am - 4:30pm - Vendor Fair

9:00am - 5:30pm - Sessions with lunch break

8:30am - 4:00pm - Stoma Clinic

6:00pm - 9:00pm - Casual Hawaiian **Pa'ina** (party) with **Pu Pu's** (pun intended)

Vendor Fair Exhibitors: Hollister, Convatec, Coloplast, Mark Drug Medical, Edgepark Medical, Northwest Community Hospital, MPM Medical, ABBVIE, Shield Healthcare, Oak Park Behavioral Medicine, Stomastifler, Nascent, Byram Healthcare, Stoma Guard, Safe n Simple, FOW, Youth Rally, and more. Our website www.uoachicago.org/events is continually updated as Speakers and Vendors are confirmed. Since this is the last newsletter before the conference by sure to check our website and your email in box for conference updates from the Ostomy Association of Greater Chicago.

If any attendee wants to stay over night, in addition to the Double Tree, there are a variety of options; a Courtyard (right across the street), a Red Roof Inn and a Motel 6 on Algonquin Rd, and a Holiday Inn Express, Wingate Inn and Jameson Inn on Arlington Heights Rd.

MIDWEST REGIONAL OSTOMY EDUCATION CONFERENCE

Saturday November 8, 2014 Arlington Heights, Illinois

REGISTRATION

NAME				
ADDRESS				
EMAIL				
TYPE OF SURG	GERY (check what you have o	or will have)		
□ Colostomy □ Ileostomy □Urosto	omy J-Pouch Continent	Urostomy [Other	
Are you a member of a support group	? Name of group			
Name of Attendees (for badge)	Relationship	Cost	Box lunch	
1	Self	\$25	Turkey	Beef
2	Spouse	\$20	Turkey	Beef
3		\$20	Turkey	Beef
4	Family/Friend	\$20	Turkey	Beef
	Children under 12			
1 2			Turkey Turkey	Beef Beef
Total: Adults (12+)	Children(<12)	_ Total Cos	st \$	
Will you attend the evening social eventhere is no additional charge, but we Check sessions that would interest you Physical Therapist Psychology Physical Therapist Psychology Physical Therapist Ask Other	e need a count for catering. ou: □Colo-rectal Surgeon ogist (patient) □ Psychologist the Nurse (panel of WOCNs)	□Urologis (family/care □ Meet othe	egiver) 🗖 Die r spouses/care	etician egivers
purposes only.	ered for any specific sessions.		on is for senec	-uning
Please send this form with chec	k payable to:			
Ostor	my Association of Greater Chicag	go		
	Judy Svoboda/President			
	605 Chatham Circle			
	Algonquin, IL 60102			
Or register online: www.uoachicago.c	org/event/midwest-regional-osto	<u>my-educatio</u>	n-conference	

Ostomy Association of Greater Chicago

Confidential Membership Application

We invite you to join our association. You are especially welcome if you have an ostomy, are preparing for surgery, are a healthcare professional and/or have a loved one who has had surgery. We are a completely volunteer-operated ostomy support group. Our mission is to support, educate and advocate for people with ostomies.

Name					
Address					
City			State_		Zip
E-mail				Phone	·
Type of Ostomy:	Colostomy	lleostomy	Urostomy	Continent Proce	dure
Date of surgery			_ Age Group	<21 22–36 37–50	51–65 66–80 80<
	sociation's leader	rship. We alwa	ys need talent	ed people to share i	You may even want to nour good work. Membership is

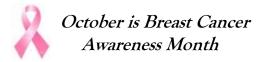
Judy Svoboda, President 605 Chatham Circle, Algonquin, IL 60102 Or sign up online at: www.uoachicago.org/membership

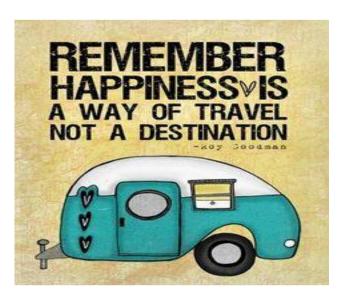
▶ A very special thank you to everyone who donates to our association. Our largest expense, the cost of printing and mailing this newsletter, is continually increasing and is only made possible through the generous donations of our members.

To make a tax-deductible donation, please make check payable to Ostomy Association of Greater Chicago or OAGC and bring to a meeting, or send to

> Tim Traznik Treasurer/OAGC 40 Fallstone Drive Streamwood, IL 60107

Donations can also be made online using a credit card: www.uoachicago.org/donations/





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The New Outlook 514 Knox St. Wilmette, IL 60091

Return Service Requested



We invite you to attend our general meetings. Relatives, friends, doctors, and nurses, as well as our members—any interested people—are invited and welcome. Our association has a team of trained volunteer listeners available to discuss the concerns of patients. Healthcare professionals and families are urged to use this free benefit. When you know of a patient who would like to talk to a person who has been there and done that, please call the visiting chairperson (see page 2).