

Nursing consultation tools for people with elimination stomas in Brazil: a scoping review

Daniely Maillard^{1,2,*} , Euzeli da Silva Brandão¹ , Patrícia Britto Ribeiro de Jesus³ , Flávia da Silva Gatto¹ 

ABSTRACT

Objective: To map the proposals and validity of instruments in Brazil to guide nursing consultations with adults in the pre- and post-operative stages of elimination stomas. **Method:** A scoping review recommended by JBI. The search took place without time or language limitations in the MEDLINE, IBECs, LILACS, CINAHL, Academic Search Premier and Scopus databases, using descriptors indexed in the Medical Subject Headings, such as Nursing, Ostomy, Colostomy, Ileostomy, Patients, Practice guidelines, Preoperative Care, Postoperative Care, Validation studies, and the free term Urostomy, including gray literature. **Results:** of the 828 studies found, five were selected which aimed to: construct and validate an instrument (03); carry out cross-cultural adaptation and validate content (1); and analyze theoretical validity (1). All were the product of theses and dissertations published between 2013 and 2021. Dorothea Orem's and Callista Roy's theories guided four instruments. The postoperative phase was the only one addressed in all the instruments. **Conclusion:** the mapping showed Brazilian researchers' interest in instrumentalizing nursing consultation for stoma patient, starting with instrument content validity. The results point to the need for studies aimed at clinical validity.

DESCRIPTORS: Nursing. Ostomy. Validation Study. Nursing in Office. Enterostomal Therapy.

Instrumentos para consulta de enfermagem no Brasil às pessoas com estomias eliminatórias: revisão de escopo

RESUMO

Objetivo: Mapear as proposições e validações de instrumentos no Brasil para nortear a consulta de enfermagem junto às pessoas adultas em pré e pós-operatório de estomias de eliminação. **Método:** Revisão de Escopo preconizada pelo JBI. A busca ocorreu sem limitação temporal e de idioma nas bases de dados MEDLINE, IBECs, LILACS, CINAHL, Academic Search Premier e Scopus, utilizando descritores indexados no Medical Subject Headings: Nursing, Ostomy, Colostomy, Ileostomy, Patients, Practice guidelines, Preoperative Care, Postoperative Care, Validation studies e o termo livre Urostomy, incluindo literatura cinzenta. **Resultados:** Dos 828 estudos encontrados, somente cinco atenderam os critérios estabelecidos e tiveram como objetivos: construir e validar instrumento (3); realizar a adaptação transcultural e validar o conteúdo (1); e analisar a validade teórica (1). Todos produtos de teses e/ou dissertações de cursos de pós-graduação *Stricto sensu* e publicados entre 2013 e 2021. As teorias de Dorothea Orem e Callista Roy nortearam quatro instrumentos. A fase pós-operatória foi a única abordada em todos os instrumentos. **Conclusão:** O mapeamento demonstrou o interesse dos pesquisadores brasileiros

¹Universidade Federal Fluminense – Rio de Janeiro (RJ), Brasil.

²Prefeitura Municipal da Cidade do Rio de Janeiro, Centro Municipal de Reabilitação Oscar Clark – Rio de Janeiro (RJ), Brasil.

³Universidade Estadual do Rio de Janeiro – Rio de Janeiro (RJ), Brasil.

*Corresponding author: danielymaillard@id.uff.br

Section Editor: Manuela de Mendonça F Coelho 

Submitted: September 17, 2023 / Accepted: March 15, 2024.

How to cite: Maillard D, Brandão ES, Jesus PBR, Gatto FS. Nursing consultation tools for people with elimination stomas in Brazil: a scoping review. ESTIMA, Braz J Enterostomal Ther. 2024;22:e1483. https://doi.org/10.30886/estima.v22.1483_IN

em instrumentalizar a consulta de enfermagem à pessoa com estomia, a começar pela validação de conteúdo dos instrumentos. Os resultados apontam para a necessidade de realizar estudos objetivando a validação clínica.

DESCRITORES: Enfermagem. Estomia. Estudo de validação. Enfermagem em consultório. Estomaterapia.

Instrumentos para consulta de enfermería en Brasil a personas con estomías eliminativas: revisión de alcance

RESUMEN

Objetivo: Mapear las propuestas y validaciones de instrumentos en Brasil para orientar las consultas de enfermería con adultos en el pre y postoperatorio de estomas de eliminación. **Método:** Revisión de alcance recomendada por el JBI. La búsqueda se realizó sin limitaciones de tiempo o idioma en las siguientes bases de datos: MEDLINE, IBECs, LILACS, CINAHL, Academic Search Premier y Scopus, utilizando descriptores indexados en los *Medical Subject Headings: Nursing, Ostomy, Colostomy, Ileostomy, Patients, Practice guidelines, Preoperative Care, Postoperative Care, Validation studies* y el término libre: *Urostomy*, incluyendo literatura gris. **Resultados:** De los 828 estudios encontrados, se seleccionaron 05 cuyo objetivo era: construir y validar un instrumento (03); realizar una adaptación transcultural y validar el contenido (1); y analizar la validez teórica (1). Todos fueron producto de tesis y/o disertaciones de cursos de posgrado *Stricto sensu* y publicados entre 2013 y 2021. Las teorías de Dorothea Orem y Callista Roy guiaron cuatro instrumentos. La fase postoperatoria fue la única abordada en todos los instrumentos. **Conclusión:** El mapeo mostró el interés de los investigadores brasileños en instrumentalizar la consulta de enfermería con el paciente estomático, a partir de la validación de contenido de los instrumentos. Los resultados apuntan a la necesidad de realizar estudios dirigidos a la validación clínica.

DESCRIPTORES: Enfermería. Estomía. Estudio de validación. enfermería en la oficina. Estomaterapia.

INTRODUCTION

Defined as a means of communication between an organ and the external environment, urinary and intestinal stoma are classified as elimination, as they promote the excretion of effluents through the abdominal wall¹.

In Brazil, health units are responsible for comprehensive and interdisciplinary care for ostomized patients, which begins with the decision on the need to create a stoma. It is a surgical approach procedure in a hospital environment, and continuity of care is carried out in reference centers, offering reception and guaranteeing the right to education, rehabilitation and collection equipment and adjuvants².

Urinary or intestinal transit diversion for elimination through the abdominal wall is a factor that commonly generates disorders of acceptance of the new body condition, aversion to personal image, harm to interpersonal relationships, confinement at home, feelings of anxiety, depression, insecurity and low self esteem³. Added to these social and emotional disorders are complications in the stoma and peristomal area, identified as factors that require intervention from healthcare professionals and, consequently, a greater number of consultations in healthcare institutions⁴.

Therefore, in order to meet the specific demands of this population, arising from clinical, nutritional, emotional and social needs, multidisciplinary team care is necessary². In this context, the nursing consultation serves as an important technological tool for comprehensive care for individuals, as it is guided by scientific methods that allow approaching health/disease issues from diagnosis, intervention to the assessment of the response induced by the care provided⁵.

Considering the organization of professional work in terms of method, staff and instruments, as determined by the Federal Nursing Council (COFEN - *Conselho de Federal de Enfermagem*), authors⁶ point to the nursing process application as a means of qualifying the nursing care provided to individuals with a stoma and meeting the demands arising from

basic human needs affected.

Instrument construction and validity for nursing consultations with people with a stoma, guided by scientific methodology, is of significant relevance as it promotes comprehensive and humanized care, bringing benefits to users as well as professional satisfaction when observing the results obtained from using the instrument⁷.

Thus, it is understood that nursing consultation guided by a specific instrument for this population favors the clinical assessment and understanding of the emotional and social influences imposed by the new condition and susceptibilities to which this group of people is exposed.

In an attempt to recognize research on the subject, whose results could be applied in Brazilian healthcare services for people with a stoma, in September 2022, the international review databases, such as International Prospective Register of Systematic Reviews (PROSPERO), Open Science Framework (OSF) and FIGSHARE repository, were investigated, highlighting the lack of research records with a similar objective to this review.

Considering the above, the following objective was established: to map the propositions and validity of instruments in Brazil to guide nursing consultations with adults in the pre- and post-operative periods of elimination ostomy.

METHOD

This is a scoping review, which consists of a study design with the purpose of guiding the identification and mapping of the main scientific evidence on a given area/topic⁸. It is believed that this research design was chosen because it offers a “scope” that will serve as a consistent discussion about the instruments available in the literature to guide nursing consultations with adults in the pre- and post-operative periods of elimination ostomy.

The protocol for this scoping review was developed considering the five stages recommended by the JBI methodology:

1. Research question establishment;
2. Relevant study identification;
3. Study selection and inclusion;
4. Data mapping, extraction and organization;
5. Grouping and interpretation of results.

In order to guarantee study and methodological rigor integrity, the Preferred Reporting Items for Systematic reviews and Meta-Analyses extension for Scoping Reviews (PRISMA-ScR)⁸ checklist was used. The protocol for this scoping review was registered in the Open Science Framework, according to the link https://osf.io/7gxzn/?view_only=7ea1edd389c1402a9ca4d86364cec401.

In order to establish the research question and identify the key elements for conducting the review, the mnemonic PCC (Population, Concept and Context) was used. Thus, the review question “which instruments are validated in Brazil (Concept) to guide nursing consultations with adults in the pre- and post-operative periods (Population) of elimination ostomy (Context)?” was created, according to Chart 1.

Research strategy/selection of source of evidence: the preliminary survey of descriptors and keywords was carried out with the librarian of the *Escola de Enfermagem Aurora de Afonso Costa – Universidade Federal Fluminense*. Thus, to search and identify relevant studies, the descriptors indexed in DeCS/MeSH (Descriptors in Health Sciences/Medical Subject Headings) were used, such as “Nursing”, “Ostomy”, “Colostomy”, “Ileostomy”, “Patients”, “Practice guidelines”, “Preoperative Care”, “Postoperative Care”, “Validation studies” and the free term “Urostomy”, using combinations of terms according to the databases accessed.

Chart 1. Mnemonic used to establish the research question and identify the key elements for conducting the review. Brazil, 2022

Population	Concept	Context
Pre- and post-operative adults with elimination ostomy	Instruments validated in Brazil to guide nursing consultations for adults in the pre- and post-operative periods of elimination ostomy	Pre- and post-operative consultation for this population, including outpatient and hospital levels

Source: Prepared by the authors.

The Boolean operators AND and OR were applied, in a restrictive and additive manner, respectively, as shown in Chart 2⁹.

To survey and identify studies, the Medical Literature Online Search and Analysis System (MEDLINE), Spanish Bibliographic Index in Health Sciences (IBECS), Latin American and Caribbean Literature in Health Sciences (LILACS), Cumulative Index to Nursing and Allied Health Literature (CINAHL), Academic Search Premier, Scopus SciVerse (Scopus), US National Library of Medicine National Institutes of Health (PubMed). Study search was carried out on the Coordination for the Improvement of Higher Education Personnel (CAPES - *Coordenação de Aperfeiçoamento de Pessoal de Nível Superior*) Journal Portal, through remote access to the Federated Academic Community (CAFe - *Comunidade Acadêmica Federada*) content. To contemplate gray literature, the Brazilian Digital Library of Theses and Dissertations (BDTD - *Biblioteca Digital Brasileira de Teses e Dissertações*) and the CAPES Theses Catalog were accessed.

Studies available in full, with different methodological designs, which presented as their main theme instruments validated in Brazil to guide nursing consultations with adults in the pre- and post-operative periods of elimination ostomy, were included. Dissertations, theses and guidelines from expert societies, without a time frame, published in any language, were also considered.

Studies that were in the validity process and those that only dealt with the exclusive stoma assessment, i.e., that did not include the full assessment of people with a stoma, in addition to duplicates, were excluded.

The screening process was carried out simultaneously and blindly by two independent reviewers, using different electronic devices. After searching for texts in databases, studies were exported to software EndNote Clarivate Analytics on October 12, 2022, through which they were grouped into a single chunk and removed when in duplicate. On the same date, the remaining records were exported to software Rayyan and, subsequently, two reviewers independently screened the material found (reading the title and abstract), with the double-blind option activated. The results found were analyzed and discussed between them after reading the studies in full. Disagreements were analyzed by a third reviewer. To identify other relevant studies, a reverse search of selected studies was carried out, but no results were found to be included. Aiming to compile the selected data, a data extraction instrument was prepared by the authors themselves in an Excel[®] spreadsheet with the following information: publication/journal, study title, author(s), year and location in which the study was carried out, method, number of participants, and content/characteristics of the instrument proposed and/or validated in Brazil to guide nursing consultations with adults in the pre- and post-operative periods of elimination ostomy. The instrument was

Chart 2. Search strategy. Brazil, 2022

Database	Search strategy
CINAHL	"patients" AND "nursing care" AND ostomy OR colostomy OR ileostomy OR urostomy AND "practice guidelines" (Using SmartText)
MEDLINE	"patients" AND "nursing care" AND ostomy OR colostomy OR ileostomy OR urostomy AND "practice guidelines"
Academic Search Premier	"patients" AND "nursing care" AND ostomy OR colostomy OR ileostomy OR urostomy AND "practice guidelines" (Using Smart Text)
SCOPUS	"patients" AND "nursing care" AND ostomy OR colostomy OR ileostomy OR urostomy AND "practice guidelines"
PubMed	"patients" AND "nursing care" AND ostomy OR colostomy OR ileostomy OR ureterostomy AND "practice guidelines"
BDTD	"Enfermagem" AND "Estomia" AND "Estudos de validação"
CAPES Thesis Catalog	"Enfermagem" AND "Estomia" AND "Estudos de validação"
IBECS	(Enfermagem) OR (Nursing) OR (Enfermería) OR (CuidadosPré-Operatórios) OR (CuidadosPreoperatorios) OR (Preoperative Care) OR (Cuidados Pós-Operatórios) OR (Postoperative Care) OR (CuidadosPosoperatorios) AND (Estomia) OR (Ostomy) OR (Estomía) OR (Colostomia) OR (Colostomy) OR (Ileostomia) OR (Ileostomy) OR (Ureterostomia) OR (Ureterostomy) AND (Protocolo) OR (Diretrizes) OR (Diretivas) OR (Guidelines) OR (Processo de Enfermagem) OR (NursingProcess) OR (Proceso de Enfermería)
LILACS	(Enfermagem) OR (Nursing) OR (Enfermería) OR (CuidadosPré-Operatórios) OR (CuidadosPreoperatorios) OR (Preoperative Care) OR (Cuidados Pós-Operatórios) OR (Postoperative Care) OR (CuidadosPosoperatorios) AND (Estomia) OR (Ostomy) OR (Estomía) OR (Colostomia) OR (Colostomy) OR (Ileostomia) OR (Ileostomy) OR (Ureterostomia) OR (Ureterostomy) AND (Protocolo) OR (Diretrizes) OR (Diretivas) OR (Guidelines) OR (Processo de Enfermagem) OR (NursingProcess) OR (Proceso de Enfermería)

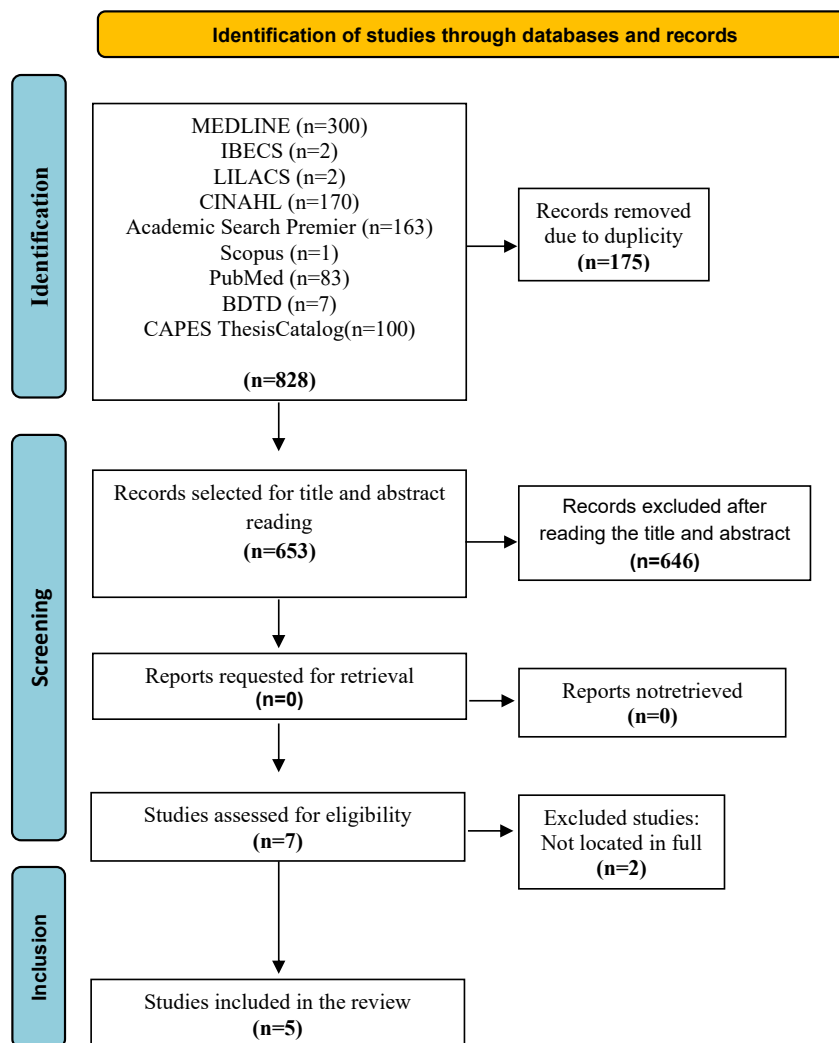
Source: Prepared by the authors.

kept in its entirety, as it did not require changes during data compilation.

A total of 828 studies were found. Of these, 175 duplicate studies were removed, leaving 653 possibly eligible studies. After reading the titles and abstracts, 646 studies were excluded because they did not meet the established inclusion criteria (637 by criteria related to concept, seven by criteria related to population and two by criteria related to concept + population), leaving seven potentially eligible studies. After reading the seven studies in full, two were excluded for not presenting the instrument in full for consideration in selected studies, justified by the fact that they are still in the validity process. Given the above, the final sample of this review was composed of five studies, which were again subjected to a careful reading process in full and discussed among the researchers, aiming to complete the data extraction spreadsheet and answer the research question. Figure 1 represents the study search and selection process.

RESULTS

After data collection, mapping was carried out in a schematic manner in charts, aligned with the proposed research question and the established objective. In order to characterize the selected studies, it is noteworthy that although no time frame was established during the search, all were published less than ten years ago, such as 2021 (n=1), 2019 (n=1), 2017 (n=2) and 2013 (n=1). The studies come from the South, Southeast and Northeast regions of Brazil. Among the objectives of the studies, three proposed building and validating instruments for nursing consultations with ostomized patients, one carrying



Source: Adaptation of PRISMA 2020 flow diagram for new systematic reviews which included searches of databases and records only⁹.

Figure 1. Flowchart for identification, selection, eligibility and inclusion of studies in the scoping review. Brazil, 2022

out cross-cultural adaptation and validating the instrument content and one analyzing the instrument theoretical validity for pre- and post-operative data collection of ostomized people. Regarding the application of instruments to people with ostomy or absorption by the healthcare service, only one study describes that the instrument was inserted into the electronic medical record system of the institution where the research was carried out. As for study design, all are methodological studies, four of which were carried out during master's dissertations and one during a doctoral thesis. Concerning the Nursing Theories used, three used Dorothea Orem's Self-Care Nursing Theory and one used Callista Roy's Adaptation Theory. Regarding the period of instrument applicability, one addressed the pre- and postoperative period and four addressed the postoperative period. It is noteworthy that none of the instruments were subjected to clinical validity. Selected studies were identified as P1, P2, P3, P4 and P5. The profile and synthesis of analyzed studies are presented in Charts 3 and 4¹⁰⁻¹⁴.

DISCUSSION

The results of this review showed that all the instruments found are products of dissertations and theses from *strict sensu* graduate courses. This fact draws attention to the lack of an instrument recommended/made available in studies from national public health bodies.

Likewise, it is noteworthy that no studies of propositions or validity of instruments prepared in the North and Midwest regions of Brazil were found, with the Northeast region having the largest number of mapped instruments (n=3). It is understood that the proposition or validity of instruments in the five Brazilian regions would contribute to achieving the characteristics specific to each population according to their cultural diversities.

It is understood that instrumentalizing the clinical and physical assessment of people with elimination ostomy, whether in the physical or electronic medical record model, offers these individuals the possibility of being covered by nursing consultations guided by scientific criteria, based not only on the researcher's knowledge, but also the entire range of experts involved in the process of constructing and validating these products. Hence, the process of instrument construction, validity or transcultural adaptation for use during nursing consultations results in benefits for promoting the health of people with a stoma as well as benefits for nurses through the possibility of providing assistance based on rigorously defined criteria methodological approach that is necessary for the care provided to this clientele.

Although important international and national bodies such as the World Council of Enterostomal Therapists, the Brazilian Association of Stomatherapy and Ordinance 400 of the Ministry of Health recommend comprehensive care for people with a stoma, considering the pre-, trans- and post-operative periods, it is observed that four^{10-12,14} of the five instruments found in this review favor assessment during consultation only in the postoperative period. Consequently, important assessments and behaviors that need to be carried out preoperatively from a prevention perspective, such as educational actions, emotional support and stoma insertion sitedemarcation, are no longer carried out, revealing a gap in care practice with this clientele.

Therefore, only a single instrument mapped in this review includes the assessment of people with a stoma holistically and addresses the pre- and post-operative periods¹³. In relation to the preoperative period, the author presents questions regarding the current illness, clinical history, medications used, presence of allergies and use of legal and illicit substances. Still in this part of the instrument, questions related to individual/family's knowledge and desire to learn about surgery, the anesthetic process and doubts regarding the pre- and post-operative periods are listed.

Another relevant item refers to anatomical stoma demarcation and indication of colonic preparation. This is inserted in the first part of the form in the form of questions to be filled out by the nurse with two possible closed answers of yes or no. Concerning the prior demarcation of the correct place for stoma insertion, it is worth highlighting the importance of including this information in the assessment instruments in the period prior to surgery, as this is a procedure to be carried out preferably by a stoma therapist nurse and/or surgical team member, which contributed to reducing postoperative complications, in addition to favoring the recovery and rehabilitation processes^{15,16}. Since four studies^{10-12,14} developed and adapted instruments for people to be approached in the post-operative period, the exact moment in which demarcation was carried out (before surgery) and the setting (hospital, outpatient or home environment) were not considered.

Chart 3. Profile of selected studies on the topic. Brazil, 2022

N	Type of publication/study	Title	Author(s)	Objective	Place/year	Theoretical foundation	Applied to the public or service
P1	Dissertation/methodological study	<i>Adaptação transcultural e validação do conteúdo do "formulário de avaliação do desenvolvimento da competência de autocuidado de pessoas com ostomias de eliminação intestinal" para o contexto brasileiro</i>	Alonso ¹⁰	Carry out cross-cultural adaptation and validity of assessment form content for developing self-care competence of people with intestinal elimination ostomy for the Brazilian context.	Belo Horizonte, 2021	Orem's Self-Care Nursing Theory	No
P2	Dissertation/methodological study	<i>Construção e validação do instrumento para avaliação clínica do paciente oncológico com estomia intestinal</i>	Demétrio ¹¹	Construct and validate an instrument for clinical assessment of patients with intestinal stoma.	Santa Catarina, 2019	The theoretical foundation in nursing used is not described in the study.	Yes
P3	Thesis/methodological study	<i>Construção e validação de instrumentos para consulta de enfermagem à pessoa idosa estomizada fundamentados na teoria do autocuidado</i>	Alexandre ¹²	Construct and validate an instrument for Nursing Consultation for older adults with a stoma.	Ceará, 2017	Orem's Self-Care Nursing Theory	No
P4	Dissertation/methodological study	<i>Evidências de validade de instrumento para coleta de dados no pré e pós-operatório de estomizados intestinais</i>	Queiroz ¹³	Analyze the theoretical validity of an instrument for collecting data in the pre- and postoperative period of people with intestinal ostomy in light of the Roy Adaptation Model.	Rio Grande do Norte, 2017	Roy Adaptation Model	No
P5	Dissertation/methodological study	<i>Consulta de enfermagem às pessoas em situação de estomia intestinal: construção de um instrumento e validação de seu conteúdo</i>	Santos ¹⁴	Construct and validate the content of an instrument for nursing consultation aimed at people with an intestinal ostomy based on Orem's Self-Care Nursing Theory	Ceará, 2013	Orem's Self-Care Nursing Theory	No

Source: Prepared by the authors.

In relation to the postoperative period, the aforementioned instrument¹³ covers broad aspects of investigation into the respiratory system: cardiac changes; nutritional status, diet and complications after the diet; bladder and intestinal elimination; activity and rest; body protection; senses; fluids and electrolytes; neurological and endocrine function. The search for this information aims to meet the nursing assessment following the precepts of Callista Roy's Adaptation Model regarding physiological modes, self-concept, real-life function and interdependence. It should also be noted that the instrument was developed focusing only on the first stage of the nursing process (nursing history). Thus, it does not include the following stages related to identified nursing diagnoses: planning, implementation and nursing assessment.

With regard to the theoretical foundation of nursing for the elaboration of instruments for an exploratory and descriptive study, carried out in Portugal, on nursing practice supported by theoretical frameworks, the premise emerged that "No nursing care can exist without a theoretical framework". Based on this argument, the study authors interpret

Chart 4. Synthesis of the process of elaboration and validity of instruments identified for nursing consultations for people with a stoma available in the literature. Brazil, 2022

N	Methodological aspects of construction	Cross-cultural validity or adaptation process
P1	The original instrument that served as the basis for cross-cultural adaptation was developed in Portugal by a total of 47 researchers.	Cross-cultural adaptation followed the stages of translation, synthesis, back-translation, analysis by a committee of judges, pre-test and adaptation review committee. The psychometric property of content validity was achieved after assessment cycles with experts from all Brazilian regions, which led to creating a translation that met the regionality criteria ¹⁰ .
P2	Prepared from an integrative literature review, followed by interviews with 24 nurses working in the research setting, in addition to searching websites, societies, classic literature and the author's own experience.	An adaptation of the Psychometrics Theory was carried out to validate the content. The final content of the instrument, consisting of nine domains and 45 items, was considered validated through analysis carried out by experts on the subject. Sequentially, the instrument was made available for use in the electronic medical record of a research reference center for oncology patients ¹¹ .
P3	Prepared in stages: 1. Identification of empirical health indicators related to self-care deficit of older adults with ostomy and construction of the first version of the instrument. 2. Testing the instrument with older adults and preparing the second version. 3. Assessment by judges and construction of the third version after the proposed adjustments. 4. Operationality assessment and preparation of the final version. In the fifth stage, a serial album was created to guide those with a stoma.	Instrument content and appearance validity was carried out by 32 judges, indicating high homogeneity between answers in relation to items, being subjected to an operationality assessment, resulting in the final version of the instrument ¹² .
P4	Study developed in two stages: construction of the preliminary version of the nursing consultation guiding instrument, with applicability for pre- and post-stoma surgery and instrument submission to validate its content to experts.	The validated instrument focuses on the first stage of the nursing process: data collection. To support instrument construction and validity, an adaptation of the Psychometric Theory was carried out, which is based on theoretical, experimental and analytical poles ¹³ .
P5	The instrument was constructed based on literature, Orem's Theory and the researcher's experience.	To validate the content, the instrument content analysis methodology proposed by Pasquali was used, which defines the validity carried out by experts. It was developed in four stages: literature review; construction of instruments necessary to conduct the study; choice of judges; data collection through a questionnaire for judges' assessment, analysis of data obtained from the questionnaires answered by judges; and instrument construction in its final version ¹⁴ .

Source: Prepared by the authors, 2022.

that nursing theories help to understand the information obtained and relate it to the interventions to be carried out¹⁷. Likewise, in NANDA-I (NANDA International), in order to support nurses' clinical reasoning, it is recommended that an initial assessment of patients as well as the subsequent stages of the nursing process be based on theoretical structures that include nursing theories¹⁸. These assumptions materialize in the elaboration of four^{10,12-14} of the five instruments analyzed, as the authors used the Dorothea Orem's and Callista Roy's theories as a framework. However, in one of the studies¹³, the lack of knowledge of some of the judges about Roy's Theory, chosen to support the study, was cited as a limitation of this study, a fact that raised questions about whether the instrument broadly addresses individuals and not just stoma assessment.

The Self-Care Nursing Theory, the Self-Care Deficit Nursing Theory and the Nursing Care Systems Theory, developed by Dorothea Elizabeth Orem, sequentially describe nursing's role in recognizing individuals' capabilities in being the authors of their own care. When observing this inability to act, due to different factors, nursing is present mediating the teaching and education of individuals and their families. By realizing the capacity for self-care, nursing reinforces these behaviors, offering support and security based on the scientific knowledge inherent to the profession¹⁹.

To provide assistance to people with a stoma, it is essential to recognize that they are not simply sick patients, but rather individuals who face a specific disability and who require support in the rehabilitation process, whether temporarily

or definitively¹⁴. Comparing to the mapped studies^{10,12,14}, when addressing the theories developed by Orem, which value encouraging self-care, the authors believe that nurses can enable people with stoma to take an active role in their own care, providing them with the skills and the support needed to face the challenges associated with ostomy and facilitate their transition back to their daily life. This theory is described among the main nursing theories to support nursing care provided to people with a stoma¹⁴.

Differing from other instruments, one¹³ presents the person with a stoma from another perspective by addressing the adaptive needs to assimilate the transformation determined by the creation of a stoma.

As previously mentioned, a stoma causes disorders related to body acceptance, social interaction, insecurity, low self-esteem, among others³. Such disorders are also demonstrated in a qualitative and descriptive study, carried out with colostomized women, where it was suggested that the adaptation process is linked to the environment, relationships and how this colostomized person lives. In this regard, the authors draw a parallel with Callista Roy's Adaptation Theory, which observes the person as a being that seeks adaptive balance in the face of internal and external stimuli. Hence, the theory contributed to nurses understanding and responding to these adaptive needs in their physiological aspect, self-concept, role function and interdependence²⁰. Similarly, this subject was explored in one of the studies mapped¹³.

Thus, it is confirmed that nursing theories enrich practice by favoring the use of reflections that produce meaning in the actions developed in the care process²¹.

An instrument¹¹ designed and validated for the postoperative period emphasizes the clinical assessment of people with an intestinal elimination stoma. It includes questions for investigation regarding sociodemographic data, clinical data, stoma construction, stoma characteristics, peristomal skin characteristics, stoma/effluent functioning, equipment used and self-care profile with stoma. After the validity process, this instrument was transformed into the electronic medical record version, enabling its application in an oncology research center, the institution where the study was developed.

Regarding the Electronic Patient Record (PEP – *Prontuário Eletrônico do Paciente*), it is an innovative tool that makes a significant contribution to the dissemination of elements necessary for planning comprehensive care aimed at individuals²². A systematic review that aimed to construct the categories to be used in assessment for implementing medical records in primary care, from the perspective of the Brazilian National Humanization Policy (PNH - *Política Nacional de Humanização*) principles and guidelines, adds that using PEP also favors comprehensiveness among professionals involved in care, promoting changes in the form of management and care, without separating management and care, following PNH principles²³.

This review highlighted self-care as a relevant topic to be addressed in the assessment of people with an elimination stoma, as this topic was present in all studies included for analysis. The instruments present questions that investigate the degree of dependence, manual dexterity, visual acuity, possible learning limitations, psychomotor skills, the ability to perform hygiene/change collection equipment, the presence of a caregiver/family member and sensory changes. As an example, we highlight the instrument focused on assessing individuals' self-care capacity called "*Formulário de avaliação do desenvolvimento da competência de autocuidado de pessoas com ostomias de eliminação intestinal*" (Form for assessing the development of self-care competence of people with intestinal elimination ostomy), developed in Portugal and cross-culturally adapted to Brazil, which contributes to strengthening the nursing process by emphasizing individual and systematized assessment with a focus on engaging in self-care for people with intestinal elimination ostomy¹⁰.

Another item addressed in mapped instruments is related to stoma and abdomen characteristics. This information helps nurses make decisions regarding the best approach to adapt collection equipment and prevent complications. International instruments for assessing and prescribing equipment such as the *Studio Alterazioni Cutanee Stomali* (SACS) and the Canadian Ostomy Assessment Guide (COAG)²⁴ are available in the literature to assist professional decision-making; however, the instruments mapped in this review include questions that are beyond the stoma/collection equipment focus, approaching persons with a stoma broadly and comprehensively.

This mapping showed that, despite the review question investigating validated instruments to guide nursing consultations with people with elimination stomas and including the free term "Urostomy" in the search, in order to find instruments that assist people with stomas of urinary and intestinal elimination, only one mapped study¹² also addressed urostomy in

its instrument. All others exclusively address issues relating to intestinal ostomy. Thus, there is a lack of studies that include the assessment of people with a urinary elimination ostomy.

Limitations

This study had as a limitation the impossibility of analyzing all the instruments created in studies potentially eligible for review, because, due to the need to comply with the stages of the validity process, two instruments were not yet available for full assessment, which is one of the criteria established in this study.

CONCLUSION

This review mapped five studies that demonstrated the existence of validated instruments in Brazil to guide nursing consultations with adults in the pre- and post-operative periods of elimination ostomy.

Among the five validated instruments, only one was readily available for application to the target audience, being inserted into the electronic medical record system of the hospital where it was developed, yet its use in care practice for people with a stoma was not described.

Through study mapping, it was evident that not all of them address all the different needs inherent to the pre-, trans- and post-operative periods.

The results revealed that the pre- and intra-operative assessment of a person who will undergo the creation of an intestinal elimination stoma is less instrumented than the postoperative phase. Therefore, it is suggested to expand studies that cover the three phases experienced by these individuals, aiming to fully meet their needs.

It was also observed that there are fewer instruments for assessing people with urostomy than for people with intestinal stoma, revealing the need for an increase in studies and studies that include such people.

Likewise, it is believed that the greater participation of government health bodies in the process of building and providing access to instruments for comprehensive and systematized assessment of this clientele will bring improvements to their care areas as well as assist healthcare institutions in planning and applying nursing care to this population.

Mapping also demonstrated the relevance of a careful assessment during nursing care practice; therefore, it is recommended that other studies validate the instruments mapped with the target audience.

Conflict of interest: None.

Authors' contributions: Maillard D: project administration, formal analysis, conceptualization, data curation, writing – first draft, writing – review and editing, investigation, methodology, visualization. Brandão ES: project administration, formal analysis, conceptualization, data curation, writing – review and editing, methodology, supervision, visualization. Jesus PBR: investigation, methodology, visualization. Gatto FS: investigation, methodology, visualization.

Research data availability: All data were generated or analyzed in the present study.

Funding: Not applicable.

Acknowledgements: We would like to thank the Institutional Qualification Program (IQP), *Universidade Federal Fluminense* (UFF), for encouraging the training of its employees; CAPES, Brazil, for support for teaching and research; and the Nursing School Library (BENF - *Biblioteca da Escola de Enfermagem*), UFF, for their support in carrying out this study.

REFERENCES

1. Matsubara MGS, Villela DL, Hashimoto SY, Reis HCS, Sconato RA, Denardi UA, Bandeira RC, Bozza VCC. Feridas e estomias em oncologia: uma abordagem interdisciplinar. São Paulo: Lemar; 2011.

2. Brasil. Ministério da Saúde. Secretaria de Atenção à Saúde. Portaria nº 400, de 16 de novembro de 2009. Estabelece Diretrizes Nacionais para a Atenção à Saúde das Pessoas Ostomizadas no âmbito do Sistema Único de Saúde – SUS [Inter net]. Brasília: Ministério da Saúde; 2009 [Accessed on 15 Jul. 2022]. Available from: https://bvsmms.saude.gov.br/bvs/saudelegis/sas/2009/prt0400_16_11_2009.html
3. Silva AL, Vieira ABD, Moraes RHG, Mazoni SR, Kamada I. Subjectivities and challenges of people living with an intestinal ostomy. *Estima*. 2021 Jul 15;19:e1721. https://doi.org/10.30886/estima.v19.1034_PT
4. Pinto IES, Queirós SMM, Queirós CDR, Silva CRR, Santos CSVB, Brito MAC. Risk factors associated with the development of elimination stoma and peristomal skin complications. *Referência*. 2017 Out/Nov/Dez;4(15):155-66. <https://doi.org/10.12707/RIV17071>
5. Crivelaro PMS, Posso MBS, Gomes PC, Papini SJ. Consulta de enfermagem: uma ferramenta de cuidado integral na atenção primária à saúde. *Braz J Dev*. 2020 Jul;6(7):49310-21. <https://doi.org/10.34117/bjdv6n7-542>
6. Leite MS, Aguiar LC. Diagnósticos de enfermagem em pacientes submetidos à colostomia. *Enferm Foco*. 2017;8(2):72-6.
7. Paczek RS, Oliveira TK, Passberg LZ, Tanaka AKSR, Lana LD. Instrumento para implementação do processo de enfermagem na consulta à pessoa com estomia: um relato de experiência. *CiêncCuidSaúde*. 2022;21:e59744. <https://doi.org/10.4025/cienc-cuidsaude.v21i0.59744>
8. Peters MDJ, Godfrey C, McInerney P, Munn Z, Tricco AC, Khalil, H. Chapter 11: scoping reviews. In: Aromataris E, Munn Z, eds. *JBIR Reviewer's Manual*. Adelaide: JBI; 2020. p.407-52. <https://doi.org/10.46658/JBIMES-20-12>
9. Page MJ, McKenzie JE, Bossuyt PM, Boutron I, Hoffmann TC, Mulrow CD, Shamseer L, Tetzlaff JM, Akl EA, Brennan SE, Chou R, Glanville J, Grimshaw JM, Hróbjartsson A, Lalu MM, Li T, Loder EW, Mayo-Wilson E, McDonald S, McGuinness LA, Stewart LA, Thomas J, Tricco AC, Welch VA, Whiting P, Moher D. The PRISMA 2020 statement: an updated guideline for reporting systematic reviews. *BMJ*. 2021 Mar;372:n71. <https://doi.org/10.1136/bmj.n71>
10. Alonso CS. Adaptação transcultural e validação do conteúdo do “formulário de avaliação do desenvolvimento da competência de autocuidado de pessoas com ostomias de eliminação intestinal” para o contexto brasileiro [dissertação]. Belo Horizonte: Universidade Federal de Minas Gerais; 2021.
11. Demetrio MV. Construção e validação do instrumento para avaliação clínica do paciente oncológico com estomia intestinal [Dissertação]. Florianópolis: Universidade Federal de Santa Catarina; 2019.
12. Alexandre SG. Construção e validação de instrumentos para consulta de enfermagem à pessoa idosa estomizada fundamentados na teoria do autocuidado [Tese]. Fortaleza: Universidade Estadual do Ceará; 2016.
13. Queiroz CG. Evidências de validade de instrumento para coleta de dados no pré e pós-operatório de estomizados intestinais a luz do Modelo de Adaptação de Roy [Dissertação]. Natal: Universidade Federal do Rio Grande do Norte; 2017.
14. Santos JC. Consulta de enfermagem à pessoas em situação de estomia intestinal: construção de um instrumento e validação de seu conteúdo [Dissertação]. Fortaleza: Universidade Federal do Ceará; 2013.
15. Cirino GAR, Oliveira JKS, Paiva DFF. Como a abordagem prévia do enfermeiro favorece a prevenção de complicações perioperatórias das estomias?: Revisão integrativa da literatura. In: Martins MN, Brandão VP, Souza DG, eds. *Enfermagem na promoção e prevenção da saúde*. São Paulo: Científica digital; 2022. p. 65-79. <https://doi.org/10.37885/220709626>
16. Paula MAB, Moraes JT, Santos VLGC. *Consenso brasileiro de cuidados às pessoas adultas com estomias de eliminação*. São Paulo: Segmento Farma Editores; 2021.
17. Ribeiro O, Martins MMFPS, Tronchin DMR, Silva JMAV. Exercício profissional dos enfermeiros sustentados nos referenciais teóricos da disciplina: realidade ou utopia. *Referência*. 2018 Out/Nov/Dez;4(19):39-48. <https://doi.org/10.12707/RIV18040>
18. Herdman HT, Kamitsuru S, Lopes CT. *Diagnósticos de enfermagem da NANDA-I: definições e classificação 2021-2023*. 12ª ed. Porto Alegre: Artmed; 2021. p. 52-7.
19. Silva KPS, Silva AC, Santos AMS, Cordeiro CF, Soares DAM, Santos FF, Silva MA, Oliveira BKF. Autocuidado à luz da teoria de Dorothea Orem: panorama da produção científica brasileira. *Braz J Dev*. 2021;7(4):34043-60. <https://doi.org/10.34117/bjdv7n4-047>
20. Barros RJMLF, Rêgo ACS, Nogueira CMCS, Fialho AVM, Morais FRR, Freitas JS, Costa HMGs, Carlos CVO. Mulheres portadoras de colostomia e o câncer colorretal: fatores/estímulos que interferem no processo adaptativo durante o tratamento. *Contribuciones a Las Ciencias Sociales*. 2024;17(1):5341-54. <https://doi.org/10.55905/revconv.17n.1-318>
21. Santos BP, Sá FM, Pessan JE, Crivelaro LR, Bergamo LN, Gimenez VCA, Fontes CMB, Plantier GM. Plantier The training and praxis of the nurse in the light of nursing theories. *Rev Bras Enferm*. 2019 Mar-Apr;72(2):566-70. <https://doi.org/10.1590/0034-7167-2018-0394>

22. Barbosa KH, Oliveira LC, Costa ED, Hosoume LZ, Yagi MCN, Baricati CCA, Kreling MCGD, Karino ME. O uso do prontuário eletrônico como ferramenta no exercício da Enfermagem. *Braz J Hea Rev.* 2020 nov/dez;3(6):15803-11. <https://doi.org/10.34119/bjhrv3n6-015>
23. Toledo PPS, Santos EM, Cardoso GCP, Abreu DMF, Oliveira AB. Electronic Health Record: a systematic review of the implementation under the National Humanization Policy guidelines. *Cien Saude Colet.* 2021;26(6):2131-40. <https://doi.org/10.1590/1413-81232021266.39872020>
24. Seifert SKM, Morais F, Pereira LA, Sponton ES. Algoritmo de indicação de equipamento coletor para estomias. *ESTIMA.* 2023;21:e1311. https://doi.org/10.30886/estima.v21.1311_PT