

PATIENT AND FAMILY INFORMATION SHEET

Gastrostomy Tube

What is a gastrostomy tube?

A gastrostomy (gas-tros-toe-me) is an opening from the outside of the skin to the inside of the stomach. It can be used to provide:

- Liquid food for nutrition
- Water for hydration
- Medications
- Another method of burping or "venting" the stomach
- Drainage opening for patients with poor stomach emptying

How do I know if my child needs a gastrostomy tube?

There are many reasons children need a gastrostomy tube.

- It may be necessary when your child cannot take in enough calories by mouth to gain adequate weight and grow normally.
- Other reasons may include:
 - Prematurity
 - Respiratory illness
 - o Birth defects
 - Genetic syndromes
 - \circ Certain cancers
 - o Failure to thrive
 - Feeding difficulties
 - Difficulty or unable to swallow (it is not safe for your child to take liquids by mouth)
 - o Certain injuries (trauma) that affect your child being able to eat by mouth

What happens before surgery?

Several tests may be performed before surgery which may include:

- Modified Barium Swallow- Assesses ability to swallow and protect airway from food.
- Upper Gastrointestinal Series- Looks at your child's anatomy and may detect acid reflux.
- Gastric Emptying Scan- Measures how quickly your child's stomach empties and detects acid reflux.
- pH probe study- Measures the amount of acid in your child's esophagus when they have reflux.
- **Chest X-Ray-** Looks at whether feeds by mouth or stomach contents are spilling into lungs or if there is an infection.
- Nutritional consult- Review of calories/ nutrients needed for optimal growth and development .





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How are gastrostomy tubes placed?

- Gastrostomy tubes are placed by Pediatric Surgery as surgically placed tubes or Pediatric Gastroenterology as PEG's (percutaneous endoscopic gastrostomy).
- A PEG is a procedure where a flexible lighted tube is used to guide the creation of a small opening through the skin and directly into the stomach, where a feeding tube is placed.
- The pediatric surgeon places a gastrostomy tube in the operating room under general anesthesia. The procedure is done through one or more small cuts on the belly laparoscopically or through an open incision.

Types of Tubes

- A Standard Gastrostomy Tube is a long tube which is held in place with a balloon inside the stomach and is connected to the outside with a flexible disk. Parents can be taught how to change this.
- A Low Profile Gastrostomy Tube is a skin level device. It rests just above the skin and is held in place with a balloon in the stomach or a silicone bumper. It may be called a balloon button or non balloon button. Parents can be taught how to change the low profile balloon button. The non balloon button is changed by the provider.
- A PEG Tube is a long tube which is held in place with a bolster inside the stomach and is connected to the outside of the skin with a flexible disk. This tube is changed by the provider.
- A Gastrojejunostomy Tube (G-J) is a special tube placed through a small opening in the skin which is placed through the stomach into the small intestine when children cannot tolerate feedings into the stomach. There are three ports on the outside. One port goes into the stomach, one port goes into the small intestine and the other port goes to the balloon which keeps the tube in the stomach. This tube is changed by the provider, with radiology.





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What happens after surgery?

Your hospital stay can vary from a few days or longer.

- After surgery your child will slowly resume feedings. Your care team will discuss your child's individualized feeding plan with you.
- Pain medication will be given as needed.

When can we go home?

Before you leave the hospital, you should be able to:

- Care for the gastrostomy (g-tube) and the skin around it.
- Feed your child with the gastrostomy tube.
- Connect and disconnect the extension set.
- Burp or "vent" your child's tube.
- Give medications through the tube.
- Know what to do if the tube falls out and needs replacing (practice replacing tube with a doll).
- Know who to call with questions .

How do I care for my child at home?

- Daily tube care: Follow the instructions given to you by your surgery team.
- Feedings should be given as ordered by your child's team (surgeon, GI doctor, and dietician).
- Remove the feeding set and rinse after each feeding unless instructed otherwise.
- Secure the button or tube with netting, ace wrap, tape or other device to prevent excessive movement.
- Burp or "vent" the tube during or after the feeding as instructed.
- Flush before and after medications with ______ml's water. Do not mix with feedings.
- If the tube falls out, follow instructions given to you by your surgeon (see next page).

When should I call the office?

If your child experiences any of the following:

- Not tolerating feedings as ordered.
- Leakage of food around the gastrostomy tube.
- There is red, raw skin around the gastrostomy.
- There is white, yellow or green drainage around the gastrostomy site (It may also smell bad).
- The tube falls out (see below for what to do if this happens).

What should I do if I haven't received my child's formula or supplies?

- Call your supply company.
- If you need help, please don't hesitate to call our office.



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What should I do if my child's tube comes out?

- If it has been less than _____ weeks since the tube was placed, call our office or go to the emergency department immediately.
- If it has been more than _____ weeks since the tube was placed and you have been shown how to replace the tube, please do so as soon as possible. Call the surgery office with questions.
- If you are not able to replace the tube, call our office as soon as possible. It only takes a short period of time for the gastrostomy opening to close.

Important information about your child's gtube:

Type of tube	(circle one):		
Mic-K	ey button		
Mini-One button			
Stand	ard gastrostomy	tube	
Gastr	ojejunostomy tuk	oe (GJ Tube)	
Size of tube:	Fr	cm, with	ml's of water in the balloon.
Date placed:			
Surgeon who	placed the tube:	·	
Supply comp	any name:		
Supply comp	any phone numb	er:	

Your child will need to follow up with the surgeon's office. You will receive specific instructions for follow up when your child is discharged.

Please don't hesitate to call our office if you have any problems or concerns.

Surgical provider:	
Nurse Practitioner/Nurse:	
Dietician:	
Office Number:	
After hours number, if applicable:	

Thank you for allowing us to care for your child.