

Let's Talk About...

Gastrostomy Tube, Emergency Care



It is important to take action right away if the tube from your child's gastrostomy surgery comes out (also called "dislodged"). Serious problems can occur if the tube accidentally comes out before the site is healed. If the tube is not put back in place within twenty to thirty minutes, the stoma can become very narrow or close up, and it can be difficult to reinsert the tube.

What emergency kit should I have?

You must always have supplies readily available in case the tube comes out. Put together an emergency kit (you will receive one in the hospital when the tube is placed) and keep it with your child. The kit should include the following:

- A replacement tube – same as your child's tube
- A Foley catheter one size smaller than your child's tube
- A catheter plug
- Water-soluble lubrication jelly
- A 60-cc catheter-tipped syringe

- A 10-cc slip-tipped syringe
- Medical tape
- Gauze dressings (2-inch by 2-inch and 4-inch by 4-inch)
- Water

What should I do if the tube comes out before the site heals?

A surgical gastrostomy site takes about six weeks to heal. A PEG placement heals in about two months. If the tube comes out before the gastrostomy site has healed, **follow these steps immediately:**

- 1 Wash your hands thoroughly with soap and water.
- 2 Wash the tube that came out with soap and water. Rinse well. Use the 10 cc syringe to put water in the tube's balloon. Check for any leaks. If there are no leaks, remove the water from the balloon and put this tube back in the gastrostomy opening. If the balloon leaks, use the new tube from your child's emergency kit.
- 3 Have someone help you by holding your child's hands.
- 4 Lubricate the tube with a water-soluble lubricant and gently insert it about 2 to 3 inches into the opening. Never force the tube into the stomach.
- 5 If you cannot get the tube through the gastrostomy opening, use the Foley catheter. Lubricate the catheter with water-soluble lubricant and gently insert it about 2 to 3 inches into the opening. Do not force the tube into the stomach.
- 6 Tape the tube in place.

7 Call the physician who placed the tube immediately for instructions on what to do next. Your doctor may want you to take your child for an x-ray to make sure the tube is in the proper place.

Physician

Phone number

If you need to contact the doctor on call, use the following phone numbers:

Surgeon 801.662.2950

Gastroenterologist 801.662.2900

Radiologist 801.662.1801

After office hours, call the hospital operator at 801.662.1000 and ask for the doctor on call.

When can I start using the tube again?

Do not use the tube for feeding until its position is checked according to the doctor's directions.

Are there any complications from putting the tube back in?

Occasionally, when the tube is put back in, the stomach may be pushed away from the abdominal wall, allowing the tube to enter the abdominal cavity. This creates a dangerous situation in which stomach contents can leak into the cavity. Your doctor will look for that when he examines your child.

What should I do if the tube comes out after the site has healed?

After your child's gastrostomy site has healed, it is still important to act promptly, before the stoma begins to close. The booklet that you receive will contain instruction on how to replace the tube.

How can I prevent this from happening?

- Always remember: know where the end of the tube is before you move your child.
- The best way to guard against the tube coming out is to keep it taped securely to the skin at all times, especially during feedings.
- Make sure you have an emergency kit with your child at all times.