

Replacing the Gastrostomy Tube **SKILL**

Watch and Review

- ▶ Watch the video, then just follow each of the steps.

Overview

It is possible for the gastrostomy tube to accidentally come out. **DO NOT PANIC.** The site may bleed a little, stomach contents may leak out of the stoma, and there may be some pain or discomfort. Cover the stoma with a clean, dry cloth.

- ▶ A replacement tube should be reinserted within 3 hours. If nothing is placed back in the tract, it will close over and may require an operation to replace the gastrostomy.
- ▶ If the gastrostomy/G-tube has been in place for less than 2 months, it will have to be replaced by a medical professional. This is to make sure the tube has entered the correct location.
- ▶ If the gastrostomy has been in place for more than 2 months, replacement can be safely attempted if the caregiver has been trained to do so.
- ▶ Do not attempt to change your device without proper training from your health care provider.

SKILL: GATHER YOUR SUPPLIES

1. The tube that has fallen out (if it is a balloon-type tube) or a replacement gastrostomy tube
2. A 5 or 10 mL syringe
3. A feeding or irrigation syringe
4. A cup of water or surgical lubricant for moistening the gastrostomy tube
5. pH paper

SKILL: REPLACE THE GASTROSTOMY TUBE

Preparing the patient

- ▶ Wash your hands with soap and water. The procedure does not have to be sterile because the stoma tract is not a sterile body cavity.
- ▶ Replacement of the tube may be painful. Your doctor may have prescribed pain medication or topical gel for around the stoma site. Placing some topical gel that provides anesthesia around the G-tube site may also be helpful.

Tube replacement

- ▶ Before re-inserting a tube, inspect the new device and balloon at the end of the tube for easy inflation by injecting the recommended amount of water for the balloon device size with a small syringe (usually 5 or 10 mL). There are two ports on the tube: one is for feeding and the other is for inflating the balloon.
- ▶ Withdraw the water back out to deflate the balloon. With the balloon deflated, apply water-based lubricant to the balloon part of the tube.
- ▶ Deflate the balloon from the current tube by withdrawing the water from the balloon and remove the tube.
- ▶ Insert the lubricated end of the new gastrostomy tube smoothly into the stoma tract. It should be a snug fit. But if it does not pass smoothly, it may be at a wrong angle and lead to the wrong cavity.
- ▶ Once the device is through the stoma site, inflate the balloon by inserting a syringe into the balloon valve with the recommended amount of water.
- ▶ Gently pull back on the tube to make sure it is firmly in place.



Testing the balloon before inserting in the tube



Lubricating the tube



Replacing a low-profile gastrostomy tube

- ▶ You may check the tube position if directed by your physician. Attach a syringe and extension/feed set to the feeding port, and pull back on the syringe to see if any stomach contents come back through the tube.
- ▶ Check the fluid with the pH paper. Stomach contents should look clear to yellow and slightly creamy and have a pH between 1 and 5.
- ▶ If the contents are green or clear and the pH is 6 to 8, the tube may be in the small intestine.



Testing gastric pH

If there is any doubt about the placement of the tube, do not give the feeding. Call the nurse or physician for instructions.

SKILL: JEJUNOSTOMY TUBE REINSERTION

Patients and families do not reinsert the jejunostomy tube themselves. It should be done by a medical professional who will take X-ray photos to show that the tube is inserted at the right point in the small intestine before feedings are begun. Contact your physician or staff for advice on what to do if the jejunostomy tube needs to be replaced. Your doctor may have you insert a soft rubber tube or gastrostomy tube to keep the stoma site open until the jejunostomy can be replaced. Do not feed through the soft tube unless your doctor directs you to do so.

