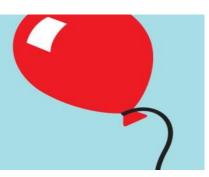
Balloon Notes

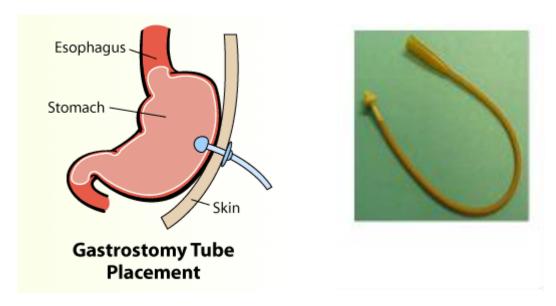
Caring for Your Child





Care of a surgically placed Gastrostomy Tube

Your child is going home with a special feeding tube called a Gastrostomy Tube (G-Tube). This tube is placed for many reasons such as; poor weight gain, trauma, gastroesophageal reflux disease (GERD) and other problems. The G-Tube can be placed with a standard surgical procedure or by using a laparoscope. Standard surgical placement requires an incision made through the abdominal wall into the stomach. Laparoscopic placement uses a special medical tool called a laparoscope and only a small cut is made on the abdomen where the tube is pulled through.



These instructions will give you the information you need to take care of your child at home. The nurses will show you how to care for your child and their G-Tube. Arrangements will be made for home care supplies and any necessary support your child will need. Our goal at Children's Medical Center is to help you feel as comfortable as possible when you care for your child after you leave the hospital.

AFTER SURGERY

Your child will have the G-Tube attached to their skin, outside the stomach on their abdomen. The end of the G-Tube inside the stomach is shaped like a mushroom to hold the G-Tube in place. The G-Tube will be sewn to the skin with a special string called a suture. This helps keep the G-Tube from moving while the stoma (opening) where the G-Tube leaves the stomach heals. It takes 4-6 weeks to completely heal. The incision next to the G-Tube will have steri-strips (white pieces of tape) covering the incision. The steri-strips will fall off over time. **DO NOT** take the strips off; let them fall off by themselves.

DRESSING/TUBE POSITIONING

The G-Tube requires caution with active children. The G-Tube **MUST BE SECURE** at all times. The goal is to keep the G-Tube from moving in and out or back and forth in the stoma. By keeping the G-Tube secure, the site can heal well and prevent complications.

ROUTINE SKIN CARE

The G-Tube site needs to be cleaned every day with mild soap (any soap without heavy perfumes) and water. The goal is to keep "crusts" from forming around the G-Tube. "Crusts" attract germs and lead to infection. When cleaning the site, check the skin for any abnormality: formula leakage, redness, drainage, bleeding, rash, bumps or swelling. If there is any abnormality seen or you have any concern about the tube site, call your child's doctor or the nurse who cares for the G-Tube.

2 WEEK VISIT

At the 2 week postoperative visit, the G-tube site will be cleaned and proper long-term care of the G-Tube will be reviewed. The steri-strips over the incision may still be in place, they will fall off over time. **DO NOT** pull the strips off; let them fall off by themselves. Feel free to ask any questions during this visit.

SECURING THE G-TUBE

The G-Tube can be secured in 2 different ways:

Drain Tube Attachment Device (DTAD)

- 1. Wash hands.
- 2. Remove new DTAD from package.
- 3. Cut a hole in the middle of the device so the gastrostomy site is visible.
- 4. Remove old DTAD and clean the skin.
- 5. Remove paper backing from the new DTAD, position it around the tube and stick it to the skin.
- 6. Place G-Tube in the holding slot and clamp it shut.
- 7. Remove remaining paper backing and make sure the DTAD is smooth on the skin.
- 8. Change the DTAD weekly. The child can bathe with the DTAD in place.



Sausage Roll

- 1. Wash hands.
- 2. Roll a 2x2 gauze pad into a sausage shaped roll and tape together.
- 3. Remove old "sausage roll" and clean the skin.
- 4. Lay the new "sausage roll" Next to the G-Tube and gently position the G-Tube over the roll.
- 5. Secure the G-Tube to the "sausage roll" and stomach with tape.
- 6. Change the "sausage roll" daily when bathing.

FEEDINGS

A dietitian and your child's doctor will plan your child's feeding program (formula and schedule). Feeding through a gastrostomy tube can be done as:

- Bolus feedings with a syringe, feeding bag by gravity or feeding pump
- Continuous feedings on a feeding pump
- Combination of both

Talk to your child while they are being fed through the G-Tube. If possible, hold your child during the feeding, but try to keep the child as calm as possible. For infants, allow the child to suck on a pacifier to help them associate sucking with the feeding and the sensation of a full stomach.

Information will be given to you depending on what type of feeding program your child is placed on and home and equipment will be set up through a Durable Medical Equipment (DME) Company.

MOUTH CARE

Every child needs their gums and any teeth cleaned twice a day whether they eat by mouth or not. For infants use a soft cloth and clean water. For older children, use a toothbrush and toothpaste, after brushing rinse their mouth with clean water.

GIVING MEDICATION THROUGH THE G-TUBE

Give your child their medications as ordered. Some medications are given before a feeding, some are given after a feeding and some are given at other times.

- It is best to use liquid medication whenever possible
- If a tablet is used, it MUST be crushed and mixed with water before giving
- DO NOT give medications that are in sprinkle form as it can clog the G-Tube

REPLACING THE G-TUBE

Most surgically placed G-Tubes are replaced 6-8 weeks after surgery with a balloon gastrostomy button (G-button). Your child's Doctor, Advanced Practice Nurse or Wound-Ostomy Nurse will do this procedure in the Outpatient clinic. Your child will not need sedation. If the G-Tube is accidently removed before the balloon button is placed, cover the site and bring your child to the Emergency Room immediately, as the stoma for the tube closes very quickly.

An x-ray study will be scheduled for your child after the G-Tube is replaced with a G-Button to make sure the new G-Button is in the right place. **DO NOT** use the new G-Button until after you have been told the x-ray study shows the G-Button is in the correct place. For any discomfort after the procedure your child may take Over-the-counter pain medication as directed.

CONTACTS

- For any problems with the surgery site or the G-Tube function contact your child's surgeon, the person who placed the G-Tube: **Surgery Clinic #214-456-6040**
- For any problems with the skin around the G-Tube or general G-Tube care, contact your child's Advanced Practice Nurse or Wound-Ostomy nurse, the nurse who cares for the G-Tube:
 Surgery Clinic #214-456-6040 or Gastroenterology Clinic #214-456-8000
- For well child checkups, immunizations and illnesses, contact your child's Primary Care Provider (PCP)