Home Care of the Child/Infant with a Gastrostomy Tube (G-Tube)

What is a G-Tube?
- A gastrostomy tube (G-Tube) is a tube inserted into the stomach. It can be of different sizes and types. It depends on the child's size and medical needs.
- The end of the G-Tube will be closed with an end piece, clamp or adapter.

Why is a G-Tube Needed?
- A G-Tube is placed for different reasons. Your child’s doctor or nurse can tell you why your child needs the G-Tube and answer any questions you may have.
- The tube may be needed to give nutrition to your child. It also can add to your child’s diet when they are not getting enough nutrition.
- Medicines that your child needs to take can be given through the G-Tube.

How is a G-Tube Placed?
- To place a G-Tube, an operation with general anesthesia is required.
- The child will spend at least one to two days in the hospital.
- It is placed through the skin directly into the stomach.
- There may be one small incision or more if the G-Tube is done with another operation.
- The G-Tube will come out of the stomach through the incision.
- The G-Tube will be held in the stomach with either a small balloon or disc or mushroom type end piece. This depends on the type of G-Tube used.
- There may be stitches holding the tube in place for a short time. These are often taken out 2-3 days after surgery.
- There may be a small dressing around the tube to help absorb any drainage. A dressing can stay on the G-Tube until the drainage has decreased.

When can you take a bath?
- The child may be immersed in a bath or pool 2-3 days after surgery following a laparoscopic procedure.
How Do You Care for a G-Tube?

- The day after surgery you may begin to clean the G-Tube site and change the dressing. Your nurse will teach you how to do this so you will feel at ease caring for your child's G-Tube.
- To care for the G-Tube, follow these steps:
  - Be very careful not to pull out the tube or stitches.
  - Check the dressing and the G-Tube site for redness, swelling or bad smell. A small amount of tan or clear drainage is normal.
  - Clean around the G-Tube daily with a mild soap and water. Many parents find that a Q-tip soaked in soap and water helps remove crusty drainage.
  - Be sure to rinse with water and dry the site when you are finished cleaning.
  - You doctor may instruct you to apply Bacitracin ointment to the site three times a day for the first few days after surgery.
  - Do not use a 2 x 2 gauze unless there is drainage.
    - The gauze promotes warmth and moisture, which may lead to bacteria growth. However, some G-Tubes may leak for a longer period of time and the gauze is needed. If gauze if needed, make sure to change it frequently.

Troubleshooting G-Tube Problems

Bleeding
- Bleeding may happen with granulation tissue buildup or irritation from the G-Tube. Call your pediatric surgery office if there is bleeding around the G-Tube.

"Clogged" G-Tubes
- G-tubes may become "clogged" or sluggish.
- Flushing the tube with 15-20mL of warm water will usually take care of this.
- If there is still a problem, call the pediatric surgery office.
- If the "clog" still continues, the tube may need to be replaced.
**Granulation Tissue**
- Granulation tissue is pinkish-reddish fleshy tissue around the G-Tube.
- There may be drainage, soreness, bleeding and sometimes a foul smell associated with the granulation tissue.
- Its buildup is a result of G-Tube movement and the body's way of trying to "heal" around the tube.
- **You need to call the pediatric surgery office.** It can be treated by putting medicine called silver nitrate on the G-Tube site. This gets rid of the tissue. It may need to be treated for several days.
- Your doctor may teach you how to do this at home and instruct you to do this at home.

**Leakage**
- Some G-Tubes leak and others never do.
- A small amount of tan or clear drainage is normal.
- A large amount of drainage may indicate that the tube is not the proper size or the balloon is not fully inflated.
- The G-Tube may need to be resized and replaced at the child grows.
- If there is a hole, crack or split in the tube, the tube/button will need to be replaced.
- Infection at the G-Tube site can cause drainage.
- If there is redness or pain at the site with the "leakage", please call the pediatric surgery office. There may be an infection around the tube.
- If it has been 2 months since the initially G-tube placement surgery you may check the balloon.
  - To check the amount of water, you will need to connect a syringe to the balloon port lumen and suck out the water. While holding the G-Tube in place to ensure that it is not accidentally removed, refill the balloon with 5mL's of tap water. The total amount of water in the balloon should be 5mL's.
  - The nurse or the Pediatric Surgery practitioner will show you how to check the amount of water in the balloon at your 2 month post-op clinic visit.
When to call the Pediatric Surgeon:

- Pinkish-reddish fleshy tissue around the G-Tube site
- Redness or pain at the G-Tube site with leakage
- Bleeding around the G-Tube site
- If there is a "clog" in your child's G-Tube after flushing with warm water
- If your child's G-Tube comes out:
  - If the G-tube falls out in the first 2 months after surgery
    1) Deflate the balloon completely by attaching a syringe to the balloon port
    2) Put the tube back in the hole. You may use KY jelly to help the tube slide in easily.
    3) Tape the tube down to the child skin
    4) Do not inflate the balloon
    5) DO NOT USE THE TUBE
    6) GO TO THE EMERGENCY ROOM

You can reach Pediatric Surgery by calling 843-792-3851 during the day (8am to 5pm) Monday - Friday. In the evening or on the weekend please call 843-792-2123 and ask the Operator to page the Pediatric Surgery Resident on call.