

Percutaneous Gastrostomy and Gastrojejunostomy Tubes

General information

A Gastrostomy Tube is a narrow plastic tube that is placed through the skin directly into the stomach to provide a means of nutrition. In some cases, your Doctor may request that a longer tube be advanced out of the stomach and into the first part of the small intestine. This is called a Gastrojejunostomy Tube. Your tube will remain in place until you no longer need it.

Preparing for a Gastrostomy

- Do not eat or drink anything after midnight on the day of your procedure.
- Take all your medications with small sips of water unless your Doctor gives you other instructions. Please bring a list of all your medications with you to your appointment.
- On the day of your procedure, please arrive in the Admitting Department 30 minutes prior to the scheduled time of your procedure.
- The Radiologist will explain and discuss the procedure with you and have you sign a consent form.
- You will be staying overnight in the hospital after your procedure.

How is the procedure performed?

Once you arrive in the Radiology Department, you will be escorted into the procedure room. There an IV (intravenous) line will be placed in your arm. This allows us to give you fluids and medications during the procedure. Occasionally, you will have a CT (CAT) scan performed prior to the placement of the tube. Once in the procedure room, you will be placed on monitoring equipment and the radiologist will ultrasound your abdomen to mark the position of your liver. Your skin will be cleaned with a sterile solution and then covered with sterile towels. A local anesthetic (numbing medicine) will be injected into your skin and you may receive pain medication through your IV, if needed. A small tube will be passed down your nose into your stomach and air will be injected into this tube. Using the X-ray equipment as guidance, three special stitches, called retention sutures (or T-fasteners), are placed to secure your stomach to the muscles underneath your skin. The Radiologist then places the tube through your skin into your stomach over a guide wire.

How long will the procedure and recovery take?

The procedure takes about one hour. After it is over, the tube will be removed from your nose. You will be on bed rest for the first hour following your procedure. You will not be

able to eat or drink anything until the next day. When you arrive in your room, your nurse will connect your Gastrostomy tube to suction coming from the wall until the next morning to allow your stomach to rest. (Gastrojejunostomy tubes, however, are frequently used immediately.) In the morning, the suction will be turned off for three hours. Special formula tube feedings will then begin, and if you do well on them, you will be discharged home later in the day.

Discharge instructions

- Your nurse and your physician will arrange for teaching about how to use the tube. Frequently, arrangements are made for a nurse to visit you at your home.
- Flush the tube vigorously with 30 cc of water after each feeding and following administration of medications, or at least once a day.
- Be sure all medications put through the tube have been completely crushed to avoid clogging the tube. Ask your Doctor for liquid medications whenever possible.
- Clean around the tube with mild soap and water daily.
- You may have pain at the insertion site the night of your procedure. This pain should gradually improve over the course of a week.
- Retention Sutures (or T-Fasteners) sit in the skin surrounding the tube and need to be removed in 10 to 14 days. Your home health nurse can cut them or call Interventional Radiology to make an appointment to have them removed.

Notify the Interventional Radiology office if any of the following occurs:

- The tube clogs or becomes dislodged.
- Redness or tenderness around the tube.
- Leakage of fluid around the tube.
- Pain at the insertion site lasting more than 7 days.
- Pain that is not gradually diminishing, but getting worse.

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