

## Gastrostomy Tube Reinsertion (Chronic) - Action/Rationale

**Prior to reinsertion of a gastrostomy tube the nurse is required to complete the Standardized Procedures or an organized program of study.**

	<b>Action</b>		<b>Rationale</b>
1.	Confirm physician's order for gastrostomy tube change; verify ordered tube size and type.	1.	Assures that the nurse is following physician requested orders.
2.	Explain the physician's orders and procedure for gastrostomy tube change.	2.	Informs the client.
3.	Wash your hands/provide hand hygiene.	3.	Reduces microorganisms.
4.	Assemble equipment as follows: <ul style="list-style-type: none"> <li>• Obtain the correct size and type of replacement tube.</li> <li>• Inspect the new gastrostomy tube.</li> <li>• Make sure the balloon is intact and will inflate and deflate properly. Instill 2-3 cc water/saline or air into the balloon, check the balloon for leaks, and then remove the water/saline or air.</li> <li>• Assemble the equipment (fill syringe with the ordered amount of water/saline and attach to balloon port or place nearby.)</li> <li>• An additional empty syringe will be required to remove the tube that is currently in place.</li> <li>• Position equipment at bedside.</li> </ul>	4.	Organizes care.
5.	Provide privacy for client.	5.	Respects client's rights.
6.	Put on apron and gloves.	6.	Provides protective barrier for employee.
7.	Drape a towel over client's abdomen.	7.	Protects clients from moisture.
8.	Assist the client to lie down in a comfortable position, while maintaining privacy, expose the tube.	8.	Provides comfort for client while protecting their privacy.

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9.	Some tubes have a bumper type device to secure and do not require step 10. Be certain of the type of tube/device before performing Steps 10. The device will have specific instructions for removal and usually can be removed at bedside, but others may require the physician to remove.	9.	Verifies the type of tube and specific instructions.  There are different types of bumpers-internal and external. Some internal are collapsible / deflatable others are hard and fixed.
10.	<p>Balloon type tube is removed as follows:</p> <ul style="list-style-type: none"> <li>• Deflate the balloon by inserting a Luer-lock syringe into the balloon port of the existing tube.</li> <li>• Once the fluid is removed from the balloon. Gently twist and rotate the tube to assess if it will come out.</li> <li>• Remove the existing tube.</li> </ul>	10.	Assists in easily removing tube.
11.	Once the tube has been removed, clean the peristomal area with soap and water, using a spiral pattern beginning at the stoma and moving outward. Rinse and pat dry. Soap may be optional follow physician's orders.	11.	Reduces microorganisms.
12.	Lubricate the end of the gastrostomy tube with a water soluble lubricant. DO NOT USE petroleum-based lubricant.	12.	Lubricates tube without the use of petroleum. Petroleum has been shown to damage tubing.
13.	Insert the deflated balloon end of the gastrostomy tube into the ostomy site using a slight twisting motion about 2-3 inches and stop. Minimal bleeding during a tube change is insignificant.	13.	Assures proper insertion.
14.	Inflate the balloon with 10 cc's (or physician specified amount) of water/saline and detach the syringe. NEVER use air to inflate the balloon.	14.	Inflates balloon properly.
15.	Slowly and gently pull the gastrostomy tube until it stops, which should be the correct position.	15.	Properly positions tube.
16.	Aspirate stomach contents with a catheter-tipped syringe to assess placement. Re-instill	16.	Assess placement. Maintains electrolyte

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	the aspirate to prevent electrolyte imbalance.		balance.
17.	Flush the gastrostomy tube with 30-50cc of tap water. For pediatric clients – verify with physician flush amount.	17.	Flushes tube.
18.	Clamp or plug the gastrostomy tube before it is completely empty to prevent air from entering the stomach.	18.	Prevents air getting into stomach.
19.	Dressings are not recommended, but if used, the dressing should be changed immediately if soiled.	19.	Clean dressings help to prevent skin breakdown.
20.	Secure the tube per manufacturer's instructions. Some tubes come with bumpers which can be positioned near the stoma to secure tubing or tape if necessary. Movement of the tube can cause stomal tract erosion.	20.	Following instructions assures that the tube is secured properly.
21.	Clean and replace equipment.	21.	Reduces microorganisms.
22.	Discard disposable equipment.	22.	Cleans area.
23.	Assist the client with comfort measures.	23.	Provides client with comfort.
24.	Remove and properly dispose of gloves and apron.	24.	Properly disposes of equipment.
25.	Wash your hands/provide hand hygiene.	25.	Reduces microorganisms.
26.	Document procedure in the client's medical record to include date, time of tubing change, condition of the tube removed, type and size of replacement tube and amount of water instilled into balloon. Method used to check placement, amount water flushed, and how client tolerated procedure.	26.	Provides documentation of procedure and continuity of care.
	<b>Special Considerations</b>		<b>Special Considerations</b>
1.	There are many different types of gastrostomy tubes in use. Before attempting this procedure, verify the specific type of tube in place and follow manufacturer's instructions for removal and reinsertion. The first gastrostomy tube placed usually does not have a balloon and may be sutured in place.	1.	Verifies type of tube and assures that manufacturer's instructions are read.

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2.	The first tube should not be changed for the first 14-21 days after placement and should be changed only by a physician. If this first tube should come out, the physician should be notified immediately. If the tube comes out after 21 days, it must be replaced immediately or access may be lost. The client and care giver should be instructed on procedures to follow when the gastrostomy tube comes out.	2.	The client and care person education will assist them in knowing how to react if tube comes out.
3.	Instruct the client to notify the nurse immediately if the tube comes out. The best time to change the tube is before a feeding so that the stomach will be empty. Be sure to correctly identify the type of tube in use before beginning this procedure.	3.	Knowledge of the tube helps to assure correct procedures are followed.