You and Your Gastrostomy (Feeding Tube)

What is a gastrostomy tube (feeding tube):
That is a tube that is placed into the stomach through the upper part of the abdomen. It is a soft narrow tube that is used for medicines and as a source for feeding if you cannot swallow. Placement of the tube will be done by your head and neck surgeon in the operating room or in our Interventional Radiology Department by one of our radiologists.

What to expect after the procedure while you are in the hospital:
1. You will be admitted to the hospital overnight for observation by nursing staff and to provide education to you and your family on using and caring for your feeding tube.
2. On the day of your procedure, the feeding tube will not be used and will be connected to a drainage bag.
3. Starting on the first day after your procedure, the nurse will flush the tube with water to make sure it is working properly. Once this is done and no problems are found, clear liquids (except jello) can be put into the tube.
4. The nursing staff will provide education on how to use and care for your feeding tube.
5. Unless something unexpected is found, you should be discharged on the day after your procedure with supplies to use and care for your feeding tube.
6. Let your nurse know if you experience any of the following symptoms:
   • Increased or new abdominal pain, neck, soreness, or shoulder pain
   • Nausea or vomiting
   • Feeling chills or fever
   • Shortness of breath
   • Increased pain at the feeding tube site

How to use your feeding tube once you get home:
1. You will need to gradually increase the amount of feeding you put into the tube as follows:
   • First day after surgery – clear liquids (except jello) into the tube.
   • Second day after surgery – 1/2 strength Prosure and Boost (2 cans Prosure and 2-4 cans Boost Plus per day)
   • Third day after surgery – full strength feedings as outlined in item #4.
2. Wash your hands with soap and water for 30 seconds.
3. Always clamp the feeding tube when you start to prevent contents from leaking out.
4. You will take out the plug from the feeding tube and connect the feeding set. The feeding set is called the nasal feeding NG Maddox set.
5. Twist the tubes to ensure a firm connection.
6. When using the feeding set, make sure you hold the syringe up high and allow water and/or feedings to flow into the tube using gravity.
7. Put 20cc of water in the feeding tube to be sure it is working properly. Always flush the tube with 30-60cc of tap water before and after each feeding.
8. What to use as feedings:

   Formula Name: ____________________________________________________________

   Names of Similar Products: ______________________________________________________

   Total Amount of Formula Per Day: ______________________________________________

   Total Amount of Water Per Day: ______________________________________________

   Additional Vitamins/Supplements: ______________________________________________

   When to for your feedings: (Make sure you sit up for at least 60 minutes after your feeding).
   Put ______________ cans of _____________________________________________ at the times listed below.

   ___________________________        ___________________________        ___________________________
   ___________________________        ___________________________        ___________________________
   ___________________________        ___________________________        ___________________________

   Put in one (1) eight-ounce glass (320cc) of water in your tube at these times:

   ___________________________        ___________________________        ___________________________
   ___________________________        ___________________________        ___________________________
   ___________________________        ___________________________        ___________________________

9. Follow this same procedure in items #2-6 for each of your prescribed feedings.
10. Clean your supplies by rinsing with cool water. Swish with warm water and a small amount of liquid dish washing soap. Rinse fully then set out to dry. Replace the syringe once a week.
How to care for your feeding tube once you get home:

1. Your feeding tube will need to be cleaned daily.
2. Clean around the tube insertion site once a day with soap and water. Dry it and put on a dry bandage. Turn the pivotal bolster or bumper (piece that goes around the tube, next to your skin), 1/4 turn every day.
3. Clean around the tube with hydrogen peroxide and Q-tips twice a day if you see oozing around tube. Dry around the tube and put on a clean bandage. Call your doctor if the skin gets red, swollen, or very sore and tender around the tube site.
4. Change the bandage if it gets wet or dirty.
5. For the first 3 weeks after having the tube placed, try to keep the site as dry as possible. You will need to sponge bathe or take showers carefully. Do not submerge the tube. Make sure you clamp the tube before any baithing. Avoid any overtly warm water that can irritate the skin at the tube site and use only mild soaps and soft wash clothes. If it gets wet, finish what you are doing and dry up around the site. Always watch for infection signs such as pus, redness swelling, local pain at the tube site, or any changes for the worse. Call your doctor’s office when you see the first sign of a problem.
6. A small amount of red, moist tissue may develop around the gastrostomy over time. This bothers you, call your doctor’s office.
7. Make sure the tube is carefully secured under your clothing. A cummerbund (or girdle) made of cloth or BandNet (an elastic, net like material) can help to secure the tube. The hospital may provide one of these. You can also order these through a medical supply store or through your pharmacy.
8. When you can, allow the tube site to be open to air to avoid collection of moisture around the site.
9. Having a gastrostomy should to keep your from returning to work or from most activities after proper healing. Your doctor will tell you when you can go back to your normal activities. If you have questions, ask your doctor.

Potential problems you may encounter with your feeding tube:

1. Sometimes your feeding tube may become clogged. (You can prevent this by always flushing the tube with 30-60cc of water before and after feedings and medications). If this happens, connect the catheter tip syringe and pour in one (1) of the following:
   - 50cc of warm water, coke or Pepsi.
   - Mix 1 teaspoon of meat tenderizer in an 8-ounce glass of water and put 30cc in your feeding tube.
   - If this does not work, call your doctor’s office. Never try to force anything into your tube.
2. Don’t panic if the tube comes out, but call your doctor right away. Do not try to push the tube back into the opening.
3. Check your feeding tube site each day for signs of infection:
   - Increased tenderness or pain
   - Increased redness or swelling
   - Drainage that is green in color or smelly
   - Sutures (stitches) at the skin site that come loose.

4. Other problems that may occur are listed below. Call your doctor if you experience any of these problems.
   - Excess leakage around the tube
   - Bleeding around the tube that is more than a few drops of blood.
   - Tube is torn or has a hole in it
   - Signs of internal bleeding such as coughing up blood or if you see blood in your stool
   - Vomiting and/or diarrhea
   - Dehydration
   - Constipation
   - Gas, bloating, cramping

Additional Information:
1. Your tube will need to stay in a minimum of 6-8 weeks in order for your stomach and tissue to heal properly. One of your doctors will determine when it will be safe to remove your feeding tube.
2. Stitches are used to hold the tube in place until it has settled. The stitches can be removed in 14 days. This can be done by your physician. You will not need to have new stitches if they come loose or fall off. The bandage will help to hold the tube in place.
3. It is important to use tape to secure the tube to your skin even after the stitches have been removed. This helps to avoid tugging on the tube.
4. Having a gastrostomy tube should not limit your opportunity to travel. When traveling, remember to take all your feeding tube supplies and formulas. Opened formula can be stored in a cooler to prevent spoilage.
5. You will be allowed to sleep on your stomach about one to two weeks after your feeding tube has been placed.
6. Home Supply List:
   - 60cc catheter tip syringes (change every week)
   - Nasal feeding NG Maddox set
   - Cleaning supplies and dressings
   - Prescribed formula
7. Patients who are not using their gastrostomy tube should flush the tube daily with 30cc of water after any use.
If you had your tube placed in Interventional Radiology:

1. You may have a T Fastener (button) placed, which is used to hold your stomach to your abdominal wall. This helps prevent leaks and slippage of the tube during the procedure and for the first 10 days. If the T fastener(s) or button(s) do not fall off or dissolve after 3 weeks have them removed by your doctor or call Interventional Radiology to schedule an appointment.

2. You may have a disc around your tube at or near the tube exit site. You should always keep a sterile gauze/sterile pad between the disc and your skin, even after you are healed and the fasteners are removed. This helps prevent irritation to the skin from the disc. Use gauze underneath and on top of this disc followed by taping over the gauze to your skin.

Contact Information:
Please call if you have questions or concerns:

- Head and Neck Surgery (205) 934-9766
- Oral and Maxillofacial Surgery (205) 801-7703
- Medical Oncology (205) 801-8415
- Radiation Oncology (205) 934-5670
- Interventional Radiology (205) 934-0152
- (205) 801-4674 (alternative number)
- Weekends and after hours (205) 934-3411 (someone will be on call from your doctor’s department)
- For emergencies: Call 911.