
Discharge Instructions: Caring for Your Gastrostomy Tube (G-Tube)

You have been discharged with a gastrostomy tube, or G-tube. The G-tube was inserted through your belly (abdominal) wall and into your stomach. The tube will provide you with food, fluids, and medicine. Your G-tube may move in and out slightly. If the tube comes out all the way in the first few weeks after placement, don't put it back in. Call your healthcare provider right away. Don't wait until the next day. This is important because the G-tube tract through the skin may close very quickly, often in 24 hours. After the first few weeks, if the tube comes out, ask your provider what to do next. In some cases, you may be told to replace the tube at home. Or you may need to see your provider to replace it.

General guidelines for use

- Wash your hands thoroughly with soap and clean, running water before starting your feeding.
- During the feeding and for one hour after, sit in a chair or sit up in bed.
- Before feeding begins, your healthcare provider may have you check to see that your stomach is empty. Follow your healthcare team's specific instructions if you are advised to check residuals. If you are instructed to check residuals, you will need a syringe for the following steps:
 - Put the tip of an empty syringe into the end of the G-tube.
 - Pull back on the syringe to withdraw your stomach contents.
 - In some cases, your provider will ask you to check how much feeding remains from the previous time. If so, your provider will tell you how much fluid is safe to have in your stomach before you start your feeding.
- Clean the area around the tube with mild soap and water.
- Pat the area dry after bathing and as needed.
- Clean the area more often if it gets wet. Or if it's leaking some discharge (weeping).
- Keep the disk (flange) a few millimeters off the skin. This should leave just enough room for a gauze sponge if your provider advises keeping gauze on the site. Pulling the flange too tightly can damage the skin. But leaving the flange too loose leads to leaking around the G-tube. Your healthcare team will go over these guidelines before you leave the hospital.

The name of my feeding supplement/formula is:

Amount per feeding:

Times per day:

Amount of water used to flush tube:

My healthcare provider's name and phone number are:

Gravity feeding method

- Fill the feeding bag with the prescribed amount of formula. Run the fluid to the end of the tube to clear out any air. Clamp the tube.
- Connect the end of the feeding bag tubing to the G-tube.
- Hang the bag at least 18 inches above the level of your G-tube.
- Open the clamp and allow the formula to flow into the G-tube.
- Follow with the prescribed amount of water.
- Follow your healthcare team's instructions on when to clean your bag and tubing and when to use a new bag and tubing.

Pump feeding method

- Fill the feeding bag with the prescribed amount of formula. Run the fluid to the end of the tube to clear out any air. Clamp the tube.
- Connect the end of the feeding bag tubing to the G-tube. Set the pump rate of flow to the prescribed rate per hour.
- Open the clamp on the tubing. Press the start button on your pump.
- When feeding is done, disconnect the feeding set.
- Connect the tip of an empty syringe to the feeding tube. Slowly push in the prescribed amount of water.
- Follow your healthcare team's instructions on when to clean your bag and tubing and when to use a new bag and tubing.

Syringe feeding method

- Remove the plunger from a syringe and connect the syringe to the G-tube.
- Hold the syringe upright and pour the formula into the syringe.
- Refill the syringe as the formula reaches the bottom of the syringe.
- Repeat the process until the prescribed amount of formula is given.
- Follow the feeding with the prescribed amount of water.

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- Follow your healthcare team's instructions on when to clean your syringe and tubing and when to use a new syringe and tubing.

Routine follow-up care

Follow your healthcare provider's specific instructions on what to do if the tube comes out by accident. If the tube comes out all the way in the first few weeks after placement, don't put it back in. Call your provider right away. Don't wait until the next day. This is important because the G-tube tract through the skin may close very quickly, often in 24 hours. After the first few weeks, if the tube comes out, ask your provider about what to do next. In some cases, you may be told to replace the tube at home. Or you may need to see your provider to replace it.

Otherwise, follow up with your provider, or as advised. If your tube is scheduled to be removed, your provider will tell you when this needs to happen and what you need to do.

When to call your healthcare provider

Call your healthcare provider right away if you have any of the following:

- The tube comes out
- The tube is blocked
- Vomiting
- Fever above 100.4°F (38.0°C) or higher
- Diarrhea that lasts more than 2 days
- Signs of infection (redness, swelling, or warmth at the tube site)
- Drainage from the tube site