

Enterprise Care Management Community – Quick Reference

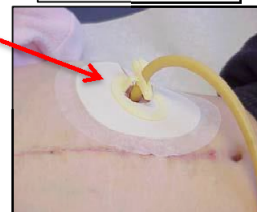
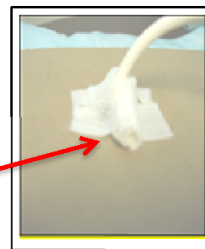
Created by ECM Project Team, GN, 6/2020

Gastrostomy Complications: a Nurses' Guide

The information below can be used by nurses to troubleshoot the following complication related to gastrostomy tubes and buttons. Leakage, skin irritation, granulation tissue, and obstruction are all complications reviewed in this guide.

Leakage:

1. Check to make sure there is 5 ml water in the gastrostomy device balloon.
 - Place one hand on the gastrostomy device
 - With the other hand, access the balloon port on the G-button with a 6 or 10 ml slip-tip syringe and withdraw the water in the balloon
 - Note the volume present, then re-instill the water into the balloon
 - If less than 5 ml, add sterile water to equal 5 ml **(Exception: 12 FR G-buttons usually use 3-4 ml water in the balloon)**
2. Evaluate to see if the patient has abdominal distension and needs decompression.
3. Make sure the gastrostomy device is **stabilized** appropriately (G-tubes should have a DTAD or "sausage-roll" for support).
4. For a G-J Button contact the provider for possible evaluation under fluoroscopy.



Granulation Tissue:

1. Make sure the gastrostomy device is stabilized and fits properly. It is recommended that feeding extension sets are secured to the abdomen when in use to decrease tension on the gastrostomy device.
2. Cleanse the skin of the gastrostomy exit site. Keeping the site clean and dry helps decrease granulation tissue formation.
3. Notify WOC nurse for further evaluation. (Chemical cauterization with Silver nitrate may be performed by WOCN). Keep the treated tissue dry for 24 hours-no cleansing of the site.

Granulation Tissue



Obstruction:

1. Attempt to flush the gastrostomy with warm water using a gentle push-pull method with a 30-60 ml syringe. **DO NOT** warm the water in the microwave.
2. A G-tube may be "milked" by rolling the tube between the thumb and forefinger to help clear the obstruction, but **DO NOT** stretch the tubing.
3. If the obstruction persists, notify the provider

Skin Irritation:

1. Evaluate the external bolster of the gastrostomy device for proper fit. If it appears too tight or too loose, notify the WOC nurse for evaluation and possible change in button size
2. Discontinue using any irritating soaps/cleansers
3. Build a skin barrier
 - If skin is intact-place Stoma Powder and Skin Protectant spray on the site
 - If skin is not intact-place Stoma Powder, Skin Protectant spray and Zinc based paste on the site
4. Use absorbent dressings: split gauze or foam dressings (Polymem)

