



Gastrostomy Tube Dislodgement

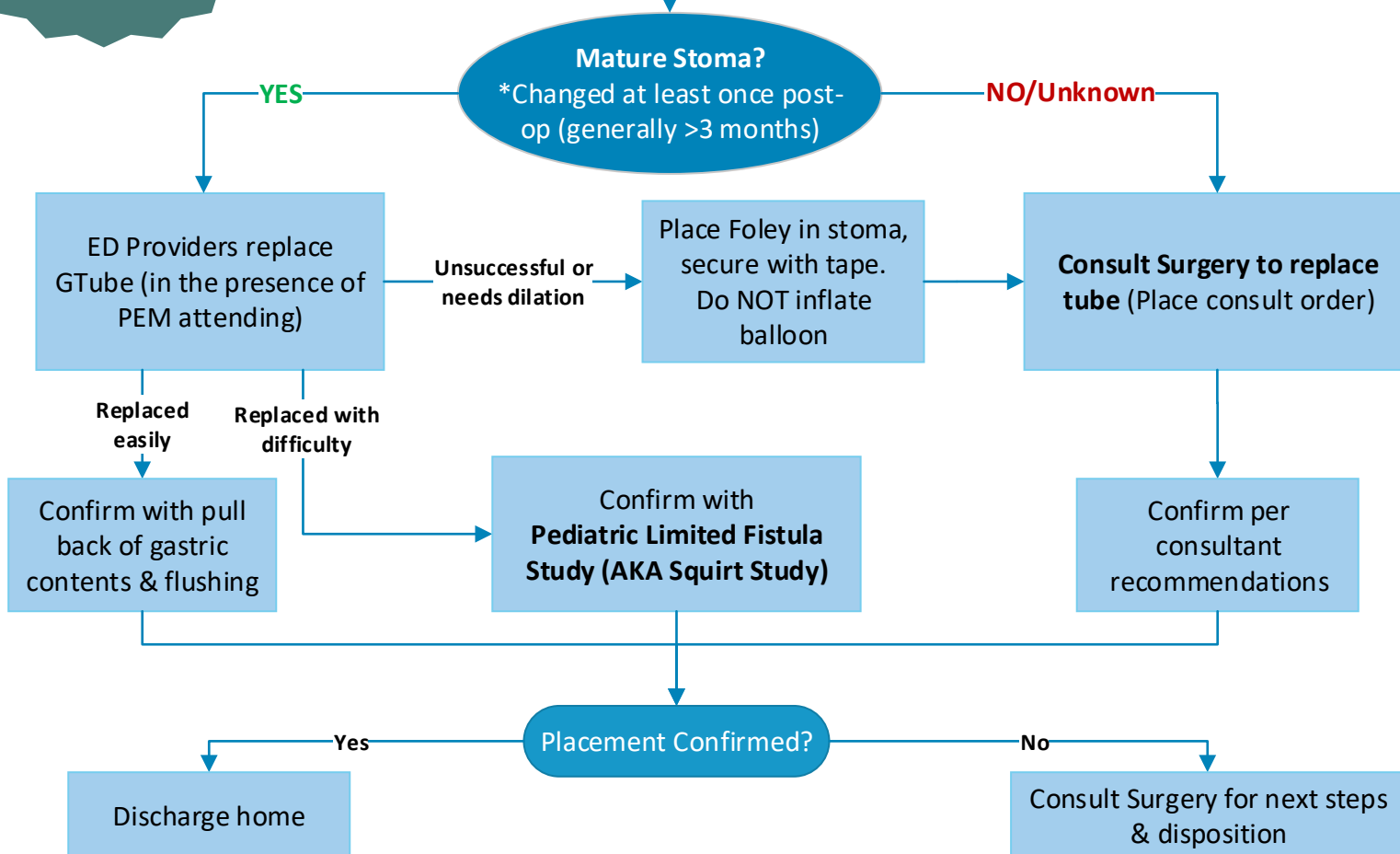
Triage RN: ESI 2, room immediately. Ask parent/guardian GTube size information and ask UA to obtain replacement GTube

Charge RN or Room RN to place Foley (same size as Gtube ideally) in mature stoma immediately and use umbilical clamp to prevent drainage. Tape to patient's abdomen.

Provider: Ensure Foley in mature stoma while awaiting Gtube.

***Mature Stoma:**
Changed at least once post-op (generally >3 months)

If guardian brings replacement GTube from home, use it & obtain a replacement from ED.



- If unknown/prolonged (> 4hrs) open stoma time, place foley and consult Surgery.
- **Squirt Study:** ED provider instills contrast (30-60mL) for quick check, Contrast = Omnipaque 240, do NOT use Gastrografin
- **Fluoroscopy study (Fistulogram):** increases sensitivity for leakage - performed by Radiologist, order per consultant request
- Gastrostomy-jejunostomy (GJ) tubes require Interventional Radiology (IR) replacement. If same-day replacement unavailable, replace Gtube per above to keep stoma open & use for meds if needed. Arrange for IR replacement.
- MIC-key button and MiniONE buttons are interchangeable.
- If GI placed the Gtube, can send staff message to inserting provider as FYI. If replacement unsuccessful and patient will be admitted, can discuss with GI on call regarding admission vs admitting to surgery