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G Tube Feeding and Dysfunction Plan

Student Name:	Birthdate:	Effective	e School Year:			
School:	Teacher:	_	Grade:			
Parent/Guardian Name:		Phone:				
Emergency Contact:	Relatio	onship:	Phone:			
A Gastrostomy (G Tube) is stomach. It is necessary when a stu			tion, and fluids directly into the ishment by mouth.			
A gastrostomy is a surgical tube) is inserted into the surgical o water-filled balloon. The tube is cl	pening. It is held in place fr	rom the inside of the	e stomach with a sterile			
There are many different ty all have the same purpose: to provi	*		They look slightly different, but ne stomach.			
G Tube Brand:						
G Tube Size:	Balloon Fill Volume:					
Venting of G Tube should be done (when):					
Gravity feeding of	oz. of	a	at (times):			
Water flush in the amount of	oz. should follow each	h gravity feeding.				
Additional water bolus of	oz. should be given at (times)				
Tube feeding via pump of	should	d be started at (time	s):			
Tube feeding via pump should be at	a rate of:	over (run tin	ne):			
Problem: G Tube dysfunction						
 Bleeding and/or drainage G Tube/button falls out or is per 	ulled out					
Goal: Early recognition and intervention	on of G Tube dysfunction					

1. Bleeding and/or drainage

Action:

- a. Check to be sure the tube is not being pulled on
- b. Check that the cap or clamp is properly secured
- c. Check for leaks at the incision site
- d. Ensure the balloon is filled and secure according to the order
- e. Add drain gauze as a skin protectant and tape in place
- f. If leaking or bleeding continues, contact the parent/guardian



2. G Tube falls out or is pulled out

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	a.					
h		Should	's G Tube must be replaced within'	minutes of becoming dislodged.		
	b.	b. Should's G Tube dislodge, follow the following procedure for insertion/replacement. (Parent/Guardian select 1 of the appropriate procedures below)				
		 Notify the R RN or other Replace G T Notify parer If no repla 	RN or trained delegate trained delegate: gather supplies Tube provided by parent/guardian per n nt/guardian that the G Tube dislodged a cement tube is available, wash the	ursing procedure		
		2. Notify the p3. Do not atten	te with a dry dressing or bandage parent/guardian immediately apply to replace the tube yourself guardian or other emergency contact is	unavailable, call 9-1-1.		
Please add a	ny a	dditional inform	nation in the space below:			
	·		•			
Physician Na	ame l	Printed:				
Physician Sig	gnatı	ıre:		Date:		
Parent/Guardian Signature:			Date:			
School Nurse	e Sig	nature:		Date:		