

# Changing a balloon gastrostomy

## **Information for Parents and Carers**



If a gastrostomy becomes displaced, it requires to be replaced within 1-2 hours, as the tract can begin to close. The gastrostomy should be replaced by someone who is trained and competent to do so.

It is important that the child has a spare gastrostomy with them at all times that is the correct size and has a valid expiry date.

#### Reasons for changing balloon device:

- The gastrostomy becomes dislodged or damaged.
- The one way valve in the gastrostomy is damaged or leaks.
- The gastrostomy becomes blocked and cannot be cleared.
- The size of the gastrostomy requires to be changed.
- The gastrostomy is due for routine change normally every 3-6 months or as per manufacturer's guidance.

It is not advised that a routine change of the device is carried out if there is evidence of the following:

- Over granulation raised, red area immediately surrounding stoma site which may bleed easily.
- **Infection** red and inflamed area surrounding stoma site, odour or discoloured discharge from stoma.

#### Equipment required for changing a device:

- Balloon gastrostomy of the correct size and length
- Spare gastrostomy which is within 3 months of expiry date
- Water soluble lubricant
- Two 5/10mls luer slip syringes
- Gauze swabs
- Cool boiled water
- pH paper/strip
- · Extension set primed with cooled, boiled water
- 20ml Enteral (purple) syringe

#### **Procedure:**

- Wash hands.
- Check replacement gastrostomy is correct make, size and length.
- Check that gastrostomy is at least 3 months within expiry date.
- Assemble equipment onto a clean dry surface filling one 5 or 10mls syringe with appropriate amount of cooled, boiled water for balloon inflation as per manufacturer instructions.
- Inflate the balloon (via the appropriate valve) with 3-5mls of air to ensure integrity, and then remove the air to fully deflate the balloon.
- Explain the procedure to child using appropriate language.
- Lie the child flat, assistance may be required to help keep the child calm and still.
- Fully deflate the balloon of the gastrostomy which is in situ, using an empty 5 or 10 ml luer slip syringe.
- With one hand holding the abdomen, gently remove the gastrostomy from the stomach with the other hand
- Clean the stoma site with swabs and cooled, boiled water.
- Moisten the end of the new gastrostomy with water based lubricant and gently, but firmly, insert it into the stoma at a 90 degree angle to the abdomen.
- Inflate balloon using appropriate amount of cooled boiled water.
- Attach the extension set.
- Using a 20ml enteral (purple) syringe, aspirate a small amount of stomach contents.
- Remove extension set from gastrostomy leaving syringe attached.
- Check aspirate with pH indicator strips. The pH should read 5.5 or less indicating that the device is in the stomach.

If there is any doubt about the position of the device, do not feed and seek medical advice.

- If appropriate aspirate is obtained, attach extension set primed with cooled boiled water and flush gastrostomy with 10mls cooled boiled water.
- Clamp and remove extension set.
- Dispose of used equipment as appropriate
- Wash hands.

### **Problem Solving**

PROBLEM	SOLUTION
Difficulty removing	Ensure that all water has been removed from the
existing gastrostomy	balloon (1ml syringe may help facilitate this).
	<ul> <li>Gently pull gastrostomy and lubricate the visible part of the balloon shaft.</li> <li>Gently push gastrostomy into stoma and turn gastrostomy gently 360 degrees then try to remove the gastrostomy again.</li> <li>If still unable to remove, replace water in balloon and seek advice from school/community children's nurse or seek medical advice.</li> </ul>
Bleeding at stoma site	Seek advice from school/community children's nurse or seek medical advice.
Discharge from stoma	Observe colour and amount of discharge and contact school/community children's nurse.
Difficulty inserting new gastrostomy	Cover stoma and seek <b>immediate</b> medical review.

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