Gastrostomy Tube/Button: Syringe Feeding

An opening is surgically created from the abdominal wall into the stomach. A tube is placed through this opening to provide hydration, feeding, or administration of medications.

I. Personnel Involved

A. School nurse
B. Designated school personnel under direct or indirect supervision
C. School nurse as procedural supervisor

II. General Information

A. This procedure requires a physician’s authorization. The service must be reauthorized yearly by the prescribing physician and parent. Authorization must include the following:
   1. The name of the prescribed feeding and/or medications (Designate whether oral and/or tube methods will be used.)
   2. Amount and/or dosage
   3. Scheduled time for administration at school
   4. Amount of water for flushing the tube
B. Any changes in the procedure will require a physician's written orders.
C. The parent will provide prescribed feeding and/or medications and any necessary equipment for performing the procedures at school.
D. Feeding by mouth will be done only if ordered by the prescribing physician and included in the individualized education program (IEP). If oral feedings are contraindicated, this situation must be documented.
E. The parent will be responsible for adequately securing the tube with an appropriate dressing to prevent inadvertent removal or contamination unless the physician has requested no dressing. Under the direction of the prescribing physician, the parent is responsible for maintaining an adequately functioning and properly placed gastrostomy tube. Dislodged tubes will be reinserted only to provide patency (openness) (refer to "Gastrostomy Tube Reinsertion").

III. Guidelines

A. Purpose
   To provide adequate fluids, nutrition, and/or medications for a person who is unable to swallow safely
B. Equipment
   1. Syringe
   2. Prescribed feeding and/or medication at room temperature
   3. Container for water and formula
   4. Catheter plug, clamp, and rubber band
   5. Air-releasing tool (for gastrostomy button only)
   6. Stand or hook to suspend the substance for feeding if necessary
# Gastrostomy Tube/Button: Syringe Feeding - Procedure

<table>
<thead>
<tr>
<th><strong>Essential steps</strong></th>
<th><strong>Key points and precautions</strong></th>
<th><strong>Child specific</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Assemble equipment and supplies.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Place the pupil in a semi-sitting position or in a position specified by the physician to facilitate digestion and prevent vomiting. Arrange the pupil's clothing to expose the gastrointestinal tube (GTT) site for continual monitoring during feeding.</td>
<td>Report unusual observations of the GTT site to the school nurse before feeding begins.</td>
<td></td>
</tr>
<tr>
<td>3. Wash hands.</td>
<td>The substance to be fed should be at room temperature. Refrigerate the formula after opening the container. Discard outdated formula and formula that has been opened after 48 hours.</td>
<td></td>
</tr>
<tr>
<td>4. Shake the liquid to be fed if required and measure a prescribed amount into a clean container.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Measure the required amount of water into another container for flushing the tube after the feeding.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Prepare the medication and administer them as ordered.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Procede to step 11 if the button is not used</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>NOTE:</strong> If the button is used, follow steps 7 through 10; exclude steps 11 through 17.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Introduce the air releasing tool into the button to check for gastric contents (this step ensures patency).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. A clamp is not necessary because the button operates on a one-way valve system. Unplug the button. Attach the syringe barrel to the button tubing and snap the tubing into the button opening. Pour the formula or medications into the barrel. Hold the syringe 3 to 6 inches (8 to 15 cm) above the stomach level (gravity pressure opens the valve and allows the formula to enter). Give the formula slowly to reduce chances of regurgitation or distention. If the button malfunctions or if bleeding or drainage occurs, inform the school nurse.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. After feeding has been completed, flush the device with the prescribed amount of water and detach the tubing from the button opening. Plug the button.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. <strong>Stop immediately if signs of regurgitation occur.</strong> Detach the tubing from the button and introduce the air-releasing tool to decompress the stomach (the tool is necessary to open the one-way valve).</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Use of the Gastrostomy Tube</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Attach the syringe barrel (without plunger) to the GTT. Unclamp and lower the barrel until gas is released or gastric contents are obtained.</td>
<td>Inform the school nurse if no gas or gastric contents are obtained.</td>
<td></td>
</tr>
</tbody>
</table>
visualized. This ensures proper tube placement in the stomach and checks patency of the tube.

12. Clamp the tubing.
13. Pour the formula or medication into the barrel.
14. Unclamp the tube and hold the syringe 3 to 6 inches (8 to 15 cm) above stomach level.

The flow is regulated by gravity. Give the formula slowly to reduce chances of regurgitation or distention. If needed, occasionally hold the syringe below the level of the stomach to allow any gas buildup to escape. If the formula will not go in by gravity, try rotating the tube slightly or applying gentle pressure with the plunger on the syringe. Notify the nurse if the tube cannot be cleared by any of these means.

15. Keep adding formula and/or medications without introducing air. After the feeding has been completed, let the amount drain to the bottom of the syringe and clamp the tube.
16. Flush the gastrostomy tube with the prescribed amount of water to prevent buildup of formula.
17. Clamp the tubing, remove the syringe, replace the plug, and secure the tube.
18. Wash hands.

**Postfeeding Care**

1. Check for any drainage around the tube.
2. Keep the pupil in an upright position or on his or her right side for approximately 30 minutes to prevent vomiting and aspiration. This position also facilitates digestion.
3. Clean the equipment.
4. Record the procedure on the SPHCS log.

An unsecured tube can catch on something and be pulled out.

Report bleeding or excessive drainage to the school nurse.
If restlessness, color change, or abdominal distention occurs, immediately inform the school nurse.