# Gastrostomy Tube/Button: Slow Drip Feeding Method or Pump

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.
- F. The maintenance of an adequately Functioning and properly placed gastrostomy tube is the responsibility of the parent under the direction of the prescribing physician. Dislodged tubes will be reinserted only to provide patency (openness) (refer to "Gastrostomy Tube Reinsertion").
- G. Pupils who receive gastrostomy feedings usually have special health needs because of increased nutritional risk. Nutrition screening is recommended each time the authorization or reauthorization for feeding is due (see "Nutrition Screening" on page 11-60). A letter that can be used to obtain a physician's authorization and share results of nutrition screening is on page 11-40.

#### 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
  - 4. Catheter plug and/or clamp
  - 5. Administration set (bag and tube with medication or feeding) and hanging apparatus (a hanger to suspend the bag so that the substance drips in)
  - 6. Air-releasing tool (for gastrostomy button only)

## Gastrostomy Tube/Button: Slow Drip Feeding Method or Pump-Procedure

Essential steps	Key points and precautions	Child specific
Assemble equipment and supplies.		
2. Place the pupil in a semi-sitting	Report unusual observations of the	
position or in a position specified	GTT site to the school nurse before	
by the physician to facilitate	feeding begins.	
digestion and prevent vomiting.	recard regime.	
Arrange the pupil's clothing to		
expose the gastrointestinal tube		
(GTT) site for continual		
monitoring during feeding.		
3. Wash hands.		
4. Shake the liquid to be fed if	The liquid to be fed should be at room	
required and measure a prescribed	temperature. Refrigerate the contents	
amount into a clean container.	after opening the container. Discard	
	outdated formula	
5. Measure the required amount of		
water into another container for		
flushing the tube after the feeding.		
6. Prepare the medication and		
administer it as ordered.		
7. Follow these steps in preparing the		
administration set:		
	Use one administration set for no more	
a. Clamp the tubing of the		
administration set.	than three days. Clean it well after each	
	use and allow it to drip dry.	
b. Pour the formula into the		
administration set and suspend the		
set from a hanging apparatus, or		
hang a prepared bag.		
c. Squeeze the drip chamber until it is		
half full.		
d. Unclamp the administration set		
tubing until the tubing is filled and		
reclamp.		
Proceed to step 10 if the button is		
not used.		
If the button is used, follow steps 8		
and 9; omit steps 10 through 14.		
Proceed with steps 15 through 18.		
8. Introduce die air-releasing tool into		
the button to check for aspirate		
(stomach contents). (This step		
ensures patency).		
9. A clamp is not necessary because		
the button operates on a one-way		
valve system. Unplug the button.		
Attach the tubing on the		
administration set to the unplugged		
button and tape the connection		
securely.		
Use of the Gastrostomy Tube		
10. Attach the syringe to the end of		
the gastrostomy tube. Unclamp the		
tubing and lower the syringe until		
contents of the stomach can be		
seen.		
11. Raise the syringe slowly to		
replace gastric juices in the		
stomach		

<ul><li>12. Clamp the tubing and remove the syringe from the gastrostomy tube.</li></ul>	Set the rate according to the manufacturer's directions if you are using an infusion pump. The rate at which the machine needs to be set should be specified by the physician.	
13. Attach the administration tubing to the gastrostomy tube, securing the connection with tape.		
14. Open the clamp and regulate the fluid drip manually or with the infusion pump to the prescribed rate.		
15. Check the pupil frequently.	Observe the pupil for regurgitation, vomiting, or abdominal distention. If any of these problems occurs, stop feeding immediately, and leave the tube open to relieve pressure and allow the feeding to drain out. Inform the school nurse and document the incident.	
16. Give the pupil a prescribed amount of water when the feeding has been completed.		
<ul><li>17. Clamp the administration set and gastrostomy tube and disconnect it. Secure the gastrostomy tube. If using a button, detach the tubing and plug the button.</li><li>18. Wash hands.</li></ul>	Flushing the tubing with water will prevent a buildup of food particles from adhering to the tube, thus obstructing it. An unsecured tube can catch on something and be pulled out.	
<ul> <li>Postfeeding Care</li> <li>1. Check for any drainage around the tube.</li> <li>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 step also facilitates digestion.</li> <li>3. Clean the equipment</li> <li>4. Record the procedure on the SPHCS log.</li> </ul>	Report bleeding or drainage to the school nurse. If restlessness, color change, or abdominal distention occurs, immediately inform the school nurse.	