

LOS ANGELES UNIFIED SCHOOL DISTRICT  
Student Health and Human Services District Nursing  
Services

**GASTROSTOMY TUBE REPLACEMENT**

I. GENERAL GUIDELINES

A. PURPOSE

A gastrostomy tube is used to maintain an opening into the stomach. It is replaced in the school setting only when the tube comes out to prevent closure of the stoma.

B. GENERAL INFORMATION

1. The gastrostomy tube should not be replaced at school if the gastrostomy surgery was performed within the last six (6) weeks.
2. The gastrostomy tube must be replaced as soon as possible (within two hours to keep the stoma patent) with an appropriate gastrostomy tube replacement device. **Do not reinsert the used tube.**
3. Gastrostomy Tube Replacement during the school day.

There are generally two possible nursing interventions if the gastrostomy tube comes out while on school campus:

a. **Signed Licensed Healthcare Provider and Parent Authorization on file.**

If there is a current authorization for Gastrostomy Tube Replacement, then the protocol will be followed.

1. The gastrostomy tube replacement kit must be kept at school and labeled with the student's name.
2. Check expiration date and gastrostomy replacement kit.  
Notify parent/guardian within four (4) weeks of expiration for replacement.

b. **No signed Licensed Healthcare Provider and Parent Authorization on file.**

The school nurse will train school staff to provide first aid measures. These measures include: washing hands, putting on gloves, cleaning the stoma, securing a 4x4 gauze dressing, securing with tape, and calling the parent for medical follow-up.

- c. School nurse will document actions to be taken when gastrostomy tube is dislodged: 1) first aid measures or 2) tube replacement protocol per medical authorization, in the student's electronic health record and in the IEP or 504 Plan.

1. **Individualized Education Program (IEP)**

School nurse documents the gastrostomy tube replacement plan on the Health Present Level of Performance under Accommodations/Modifications. If first aid measures are to be implemented by trained staff, this information must be implemented by trained staff, this information must be entered in FAPE 1 under Non-academic supports.

2. **Section 504 Plan**

School nurse documents the gastrostomy tube replacement plan in Part III 504 Meeting Section and in other appropriate sections of the electronic version of the 504 Plan.

4. If designated school personnel have replaced the gastrostomy tube, verification of the correct placement is the responsibility of the parent or school nurse. Feeding will be done only after correct placement is verified.
5. For student with a Jejunostomy tube  
The jejunostomy tube is **ONLY** replaced by the student's Licensed Healthcare Provider. If the jejunostomy tube comes out partially, secure the jejunostomy tube with tape and cover the stoma with gauze. Notify parent immediately. No feeding will be done until the jejunostomy tube is replaced.

C. PERSONNEL

1. School nurse or school physician.
2. Designated school personnel under direct or indirect supervision of the school nurse.

D. EQUIPMENT

1. Provided by parent:
  - a. Gastrostomy tube replacement device ordered by licensed healthcare provider (check expiration date)
  - b. An appropriately sized syringe to inflate the replacement device balloon
  - c. Hypoallergenic tape (paper tape)
  - d. Water soluble lubricant
  - e. Protective skin ointment if ordered by licensed healthcare provider
  - f. Stretch netting (optional)
  - g. Water (sterile, distilled)

2. Provided by the school:
  - a. 2 pairs of disposable non-latex gloves
  - b. 4x4 gauze squares
  - c. Two 2x2 gauze squares
  - d. Mild cleansing soap
  - e. Water
  - f. 2 small plastic bags for return of dislodged tube/button
  - h. Aluminum foil
  - i. Small cup for water
  - j. Plastic bag for waste material

## II. PROCEDURE

ESSENTIAL STEPS	KEY POINTS AND PRECAUTIONS
1. Wash hands.	This is a clean procedure. Explain procedure to student.
2. Place aluminum foil on a clean flat surface and assemble equipment. Open gauze packages. Squeeze lubricant on foil. Fill the small cup with water (sterile or distilled).	Check the student's name and expiration date on the gastrostomy tube replacement package.
3. Remove the gastrostomy tube replacement device from the package.	Avoid touching the tip of the gastrostomy tube replacement device.
4. Fill the syringe with the correct amount of water and inflate the balloon to check for leaks. Withdraw the water from the balloon and set the replacement tube and syringe aside on the foil.	Testing the balloon ensures that the balloon is not defective. Balloon should be symmetrical and have no leaks.
5. Reassure the student. Place the student in supine position.	This allows for easy passage of the catheter into the stoma. Replacing the gastrostomy tube is easier when stomach muscles are relaxed.
6. Put on gloves.	
7. Remove dressing and tape if applicable. Cleanse the stoma area with gauze and cleansing solution in a circular motion from center to outer area.	Discard the soiled dressing in a plastic bag. If soap solution is used to cleanse the stoma area, clean again with water using 4x4 gauze squares.

ESSENTIAL STEPS	KEY POINTS AND PRECAUTIONS
8. Change to a clean pair of gloves.	To maintain a clean technique.
9. Lubricate the tip of the tube.	Use water-soluble lubricant only.
10. Hold the tube at a right angle to the surface of the abdomen. <ol style="list-style-type: none"> <li>a. <b>Mickey button</b>-insert slowly and gently until flat against the skin.</li> <li>b. <b>Cor-Flo</b>- insert it slowly and gently straight into the stoma, 2 to 2 ½ inches.</li> <li>c. Attach the syringe and inflate the balloon with the required amount of water.</li> </ol>	If any resistance is felt, stop the procedure. Do not force the tube into the stoma. Cover the stoma with a 4x4 gauze square and secure with tape. Contact the parent immediately as student will need to be seen by a healthcare provider as soon as possible.
12. Pull back newly inserted gastrostomy tube gently until resistance is met.	This ensures proper placement.
13. Check placement of tube: <ol style="list-style-type: none"> <li>a. Insert extension or feeding tube into the feeding port</li> <li>b. Insert 60cc syringe into tube.</li> <li>c. Slowly lower syringe below level of stomach until gas or stomach contents are observed.</li> </ol>	School nurse or parent will verify placement before feeding resume. Notify school nurse if unable to verify placement.
14. Inspect stoma area for wetness.	If there is leakage of stomach contents, check tube position. Keep skin around stoma dry.
15. Dispose of waste materials.	Universal precautions require that all waste material be double-bagged.
16. Double bag dislodged tube and return to parent.	
17. Remove and discard gloves. Wash hands.	
18. Document procedure in student's electronic health record: include reason for replacement, type, and size of replacement device, and student response.	Notify the parent of the procedure. Remind the parent to replenish the supplies when student returns to school.

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Date



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**REFERENCES:**

California School Nurses Organization. The Green Book: California Guidelines for Specialized Physical Healthcare Procedures in School Settings, Section 3, 2nd Edition (4/11). Sacramento, CA.