

# Going home after your Radiologically Inserted Gastrostomy (RIG) Tube

## Interventional Radiology in Diagnostic Imaging

---

Today you have had a gastrostomy tube (also called a feeding tube) inserted through a small incision in your abdominal wall directly into your stomach. The end of the tube is located in your stomach.

The tube can be used to give you:

- liquid food (nutrition),
- water (hydration) and
- medications.

The Interventional Radiologist, Dr. \_\_\_\_\_ inserted your tube.

You will stay in the hospital for 3 to 4 hours after your procedure.

### What do I do once I get home?

- Once you are home, rest for the remainder of the day. **Do not** do strenuous exercise or heavy lifting.
  - Avoid any activity that causes pulling or pain around the tube.
  - Take your usual medications except blood thinners (anticoagulants). Check with the doctor who inserted the tube or your family doctor or specialist before starting blood thinners.
-

## Eating and drinking after your tube insertion

Your throat was frozen with a local anesthetic to reduce your gag reflex. The freezing makes it hard to swallow and to tell hot from cold. Before you start to drink try a few sips of water at room temperature. The diet instructions below will allow your stomach to heal from the small incision made in the stomach wall.

### Today

Nothing to eat or drink until	_____ am/pm
Then, water <b>only</b> after	_____ am/pm
Then, clear fluids/water only after	_____ am/pm

Clear fluids	Recommended Choices	Avoid
Fruit juice	Clear fruit juice and juice popsicles with no pulp. This includes: <ul style="list-style-type: none"> <li>• apple</li> <li>• cranberry</li> <li>• grape</li> </ul>	All others including nectars, fruit juice with pulp, prune juice, tomato and vegetable juice.
Soups	Bouillon, consommé.	All others.
Desserts	Clear gelatin desserts, popsicles.	All others.
Beverages	Low-residue, lactose free nutritional supplements such as Boost Fruit Beverage®. Carbonated beverages, coffee, tea, crystal fruit drinks and sport drinks.	All others including milk, cream, cocoa, and chocolate popsicles.
Sweets	Honey, plain sugar and hard candy.	All others.
Milk & Milk Products	None.	All.

### Tomorrow

Return to your normal diet after \_\_\_\_\_ am/pm

## Using your gastrostomy tube

Do not use your gastrostomy tube for \_\_\_\_\_ hours.

The interventional radiologist will write a home care order for the community nurse to show you how to flush and use your tube for feeding.

**The community nurse should contact you within 24 hours of your tube insertion to arrange an appointment to check your tube.**

## Sedation

If you were given sedation you must not do the following for the next 24 hours:

- drive any type of car, bike or other vehicle
- operate machinery or power tools
- drink alcohol and/or take mind altering substances
- make important decisions or sign a legal document

## Stomach or chest discomfort

Following insertion of the feeding tube you may feel some discomfort. This discomfort can be due to the air that was put into your stomach during the procedure and usually does not last long. You may have pain around your incision and/or in your shoulder.

You may take Tylenol (if you are not allergic) as needed or your regular pain medication as ordered by your doctor. The pain should go away within 2 to 3 days. If the pain gets worse or does not go away, talk with your community nurse, family doctor, or specialist.

## Taking care of your tube

Your tube will have an anchoring device taped over it to secure it to your skin. You will also have a dressing covering the incision when you leave the hospital. Leave the dressing on. A community nurse will show you how to care for your dressing.

Your tube will be attached to your skin surface with a visible black stitch. This stitch does not need to be removed and over time it may eventually break on its own. Do not worry if this stitch breaks, your tube is also secured from inside your stomach.

If the interventional radiologist used a fastening device to fasten the stomach to the abdominal wall during the procedure, you will see 1 or 2 blue/green small stitches at skin level. The community nurse has medical orders to cut these small stitches at skin level in several weeks or this may be done by your specialist.

You may have a shower one day after the tube is put in **if your community nurse tells you it is okay**. They can teach you how to keep your dressing dry during showering. If your dressing gets wet, it needs to be changed.



## Tube site care

- Your tube will have a dressing covering it for 5 days. After this your community nurse will leave it **open to air** unless there is drainage around your tube.
  - Keep the tube site clean and dry to prevent infection.
  - Check the skin around the tube each day. If the skin is red, painful and weepy, call your community nurse, family doctor or specialist.
  - Always have your tube taped securely to your skin with an anchoring device such as Flexi-Track. Do not let the end of the tube hang loose, as it may get pulled out. Ask your community nurse about using an anchoring device. **If the tube falls out, it must be put back in as soon as possible, as the opening will close within 24 hours. See your family doctor or specialist right away.**
  - When you are not using your tube for feeding, make sure the cap on the end is closed.
-

## How can I prevent and manage problems?

- ✓ Keep the site clean and dry.
- ✓ Make sure the tube is well secured to the skin with an anchoring device.
- ✓ Flush your tube before and after each feeding and medication.
- ✓ If you take all your medications through the tube, you will need to tell this to your doctors, dental surgeons and dentists. This will make sure you are prescribed medication in a form (such as liquid or crushed) that can be used in a tube.
- ✓ Avoid any activity that causes pulling or pain around the tube.

Below are some common problems and how to manage them at home.  
**If you are unsure of what to do or have concerns, please call your community nurse.**

Problem	Description	What to do
Skin around the opening is red, swollen, weeping and/or painful.	Leaking around the tube site may irritate the skin and cause redness.	Cover the site with a dressing to keep it dry and clean. Change the dressing often.
	The tube may be rubbing on your skin. Pain, swelling and redness can be signs infection.	Call your community nurse, family doctor or specialist.
Leaking around the tube.	Leaking around the tube can irritate skin and cause a burning feeling. Leaking might be caused by: <ul style="list-style-type: none"> <li>• the tube has become displaced and has been pulled out slightly.</li> <li>• the tube does not fit the opening properly.</li> </ul>	Cover the site with a dressing and change the dressing when it is wet. Check the tube to see if it is not being pulled and is secured with an anchoring device. If leaking continues, call your community nurse, family doctor or specialist.

Problem	Description	What to do
<p>The formula does not run through the tube.</p>	<p>The tube is blocked.</p> <p>This can happen gradually over time, from a build-up of formula inside the tube.</p> <p>Or it can happen suddenly, when crushed medication blocks the tube.</p>	<p>Make sure all medications given through the tube are liquid or have been very finely crushed and mixed in water.</p> <p>Make sure you flush your tube before and after each feeding and medication.</p> <p>When the tube is blocked flush the tube with warm water to remove the blockage and clear the tube.</p> <ul style="list-style-type: none"> <li>• Using a 60 ml syringe, remove fluid from the tube by pulling back slowly on syringe.</li> <li>• Discard this fluid.</li> <li>• Draw up 25 to 30 ml of warm water in the syringe. Attach the syringe to the feeding tube. Push the water in gently and pull back slowly.</li> <li>• Repeat several times.</li> <li>• <b>Do not apply force to flush the tube. If resistance is met, stop the flushing.</b></li> <li>• If blockage is not cleared, call your community nurse, family doctor or specialist.</li> </ul>

Problem	Description	What to do
The tube falls out.	The tube has come out accidentally.	<p>The tube must be put back in as soon as possible or the opening will close within about 24 hours.</p> <p>Cover the opening with clean gauze. Call your family doctor or specialist.</p> <p>If you cannot reach them, go the Emergency Department and bring the tube with you.</p>

## When to get help

Call your family doctor or specialist who ordered the insertion of the gastrostomy tube if you have:

- fever and/or chills
- nausea and vomiting
- abdominal pain that is severe and does not go away and/or gets worse
- bloating or feeling of swelling in abdomen
- any face, neck, throat, or chest swelling
- hard time breathing or swallowing
- feeling dizzy or lightheaded
- bleeding from the tube site that increases from when you left the hospital and soaks your dressing covering the tube
- your tube falls out



**If you cannot reach your doctor or specialist,  
go to the Emergency Department.**

**Bring these instructions with you to show  
what procedure you had done and by whom.**

## Follow up

Your follow-up care has been arranged with the Community Care Access Centre (CCAC). A community nurse will come to your home or you may go to a Nursing Care Centre. If you have had no contact within 24 hours, call CCAC at 1-800-810-0000.

## Notes



---

---

---

---

---

---

---

---

---

---