

Gastrostomy Tube Replacement: How Do You Replace A G-Tube?

What is a Gastrostomy Tube?

A **Gastrostomy Tube (G-tube)** is a feeding tube inserted into the abdomen through the belly to provide nutrition or medication to patients who are unable to feed themselves. It is one of the ways the doctors make sure that the patients who have trouble swallowing the fluid & eating the food take the calories they need.

A G-tube feeding insertion is the placement of a feeding tube through the skin and the stomach wall into the abdomen. A surgeon puts a G-tube during a procedure called a Gastrostomy which can stay in place for as long as a patient needs it. Once the G-tube is removed, the tract narrows down or closes within hours.

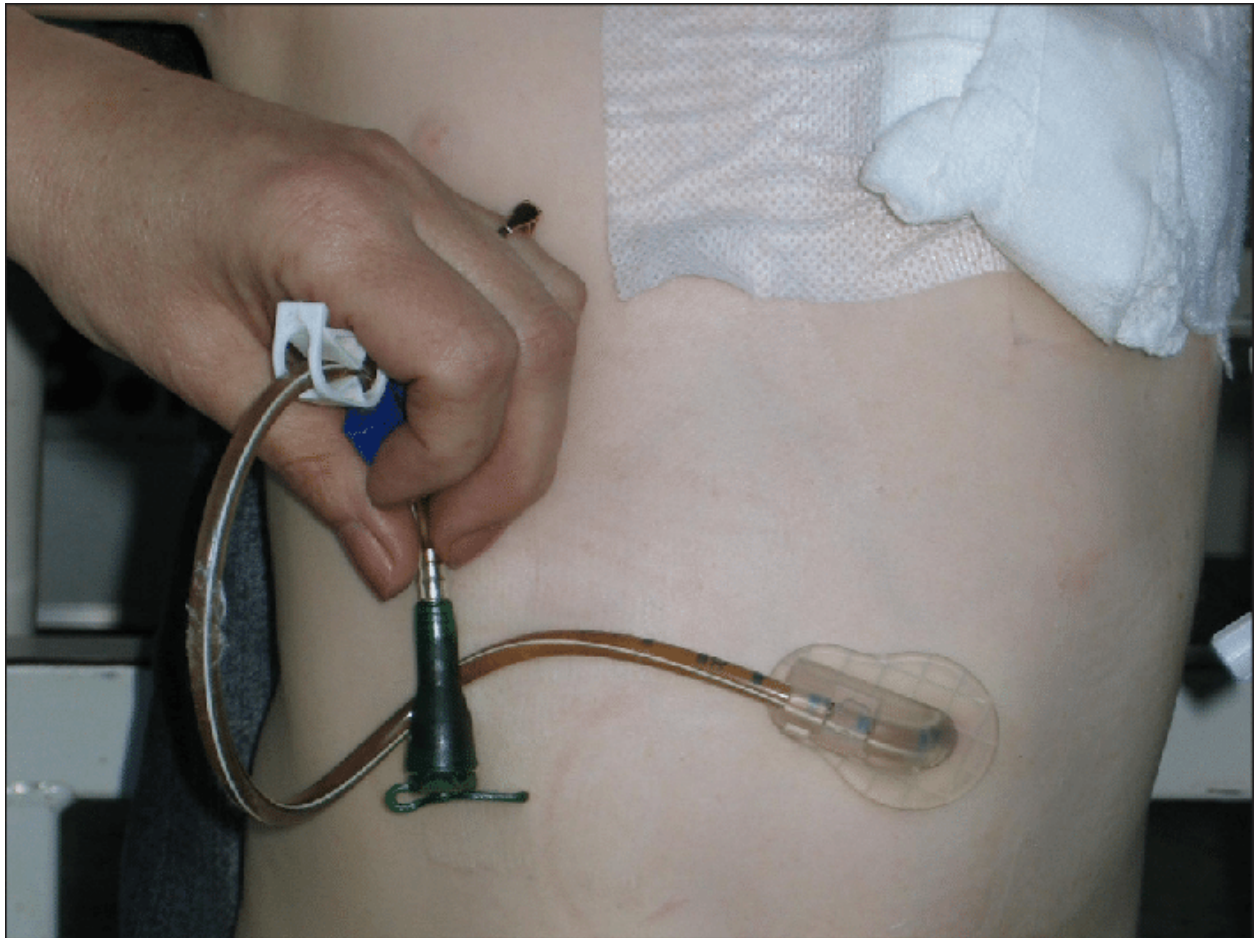
A doctor or healthcare physician can recommend a patient to get a [G Tube replacement service](#) for a variety of medical conditions, but the most common is to enable patients to get essential nutrients through a tube replacement.

When Is The Feeding Tube Replacement Service Recommended?

Only the patients who have any of these below-mentioned conditions are recommended to have a G-tube insertion. For example:

- Who are unable to eat food by their mouth
- Who is suffering from cancer of the oral cavities
- Alzheimer's disease
- With stroke
- Congenital issues of the mouth by birth

- Sucking or swallowing disorders due to any injury etc.



When Should A G-Tube Replacement Need To Be Avoided?

The replacement of a G-tube is avoided in the case of:

- Infections around the G-tube
- Immatured tract due to previous gastrostomy etc.

What Is The Procedure Of Replacing A G-Tube?

Before the Replacement:

First of all, the surgeons at [feeding tube replacement San Diego](#) perform an X-ray of the upper gastrointestinal systems of the patient to see the upper part of the digestive system. Additionally, the anesthesiology team will ask about the patient's medical history and other essential questions.

Before the procedure begins, the doctors keep a track of the patient's vital signs such as blood pressure or oxygen level and put in an intravenous line to provide medicines and anaesthesia.

During G-Tube Placement:

The doctors or physicians usually avoid using anaesthesia in this procedure. The patient is lying on a flatbed or reclining chair. Afterwards, there are three ways the doctors can perform a G-tube insertion:

- **Laparoscopic Technique** - In this procedure, the surgeon makes two small incisions in the belly to insert the tube and another is to insert a tiny telescope called a laparoscope. Through this laparoscope, the surgeon can see the stomach and other organs to place a G-tube.
- **Open Surgery** - This method is applied when other methods aren't recommended. The surgeons make larger incisions to position the G-tube in its right place.
- **PEG Procedure** - It stands for percutaneous (through the skin) endoscopic gastrostomy where the surgeons insert an endoscope through the mouth and into the stomach to guide the G-tube in its place.

After G-Tube Placement:

Once the [feeding tube replacement service](#) has been performed on a patient, feeding must be started and the fluid status of the patient must be examined.



Risks Of A G-Tube Insertion

If a patient is going through a G-tube replacement, they should consult the risks & medical complexities of the surgery with [wound care doctors near me](#).. The possible complications of surgery include:

- Leakage of fluid into the abdominal wall
- Extra tissue forming at the tube site
- Bleeding
- Infection
- Misplacement of a tube
- Pain & vomiting etc.

When to Call the Doctor?

Call the doctor in case of:

- A blocked tube
- A dislodged tube
- Any signs of infection

- Yellow, green discharge from the tube site
- A foul odour
- Severe belly pain
- Vomiting or diarrhoea etc.

A visit to **wound care treatment California** is vital to keep a check on whether everything is on the track or not. They are [venous ulcer specialists](#) also. Book a bedside appointment now!!!

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