Aftercare following a Radiologically Inserted Gastrostomy (RIG)

Nutrition and Dietetics

S Cole /Jul14/review Jul16

Useful information
(Clinical staff to complete)
Type of Tube: _____________________
Date of Placement: _____________________
Tube Change Due: _____________________
Volume in Balloon: _____________________
cm marking on the tube at skin: ________

Looking after the tube
Before you go home the Nutrition Nurse will show you and your relative/carer how to take care of the tube. In Somerset Nutricia Nurses are also available to offer support Monday to Friday over the telephone or by home visits. At all other times the Nutricia Nurse Helpline can offer advice and information.

Contact details
Musgrove Park Nutrition Nurses
01823 342 390
Community Dietitian
01749 836 555
Nutricia Nurses
0800 542 4726
When calling the Nutricia Nurses you will have to leave a message and the Nurse will get back to you.
Out of Hours Nutricia Helpline
0845 762 3664

Additional Useful Contact
_________________________________________________

Please note: If you are discharged home less than 72 hours after the RIG placement it is vital that you follow this advice:

Within the first 72 hours of the RIG placement if there is pain on feeding, or external leakage of gastric contents, or fresh bleeding; stop the feed and contact your GP or Accident and Emergency Department immediately.
Feeding

While using the RIG tube for feeding, you must sit upright to a minimum of 30° (about 2 plump pillows). This will reduce the risk of stomach contents running up the gullet leading possibly to chest infections or pneumonia. Before returning home you will receive training on the care and use of the tube from the hospital Nutrition Nurses or the community Nutricia Nurse. Tube feed can be given to you continuously (via a pump) or in several portions during the day (bolus feeding). How you receive your feed will depend on the advice given in hospital, your personal situation, and, where possible, your personal preferences.

We will work out the speed and frequency best suited to your lifestyle and nutritional needs. With continuous feeding the feed is normally started at a slow rate and increased gradually. You must inform your nurse or doctor if you experience discomfort in your abdomen while the feed is running. With bolus feeding you will be fed several portions throughout the day using a 50 ml syringe, timed, where possible, to fit in with your lifestyle. The RIG tube must be flushed with water before and after each bottle of feed. This is to prevent blockage.

Some medications can be put down the RIG tube. You must discuss this with your doctor or pharmacist as some types of medication cannot be given in this way and may need to be changed for a liquid preparation. If the RIG tube becomes blocked try to clear it with warm water or soda water. If the blockage does not clear easily, then contact your Nutricia Nurse or District Nurses.

Care of the RIG tube

If there is a clamp on the tube, it must not be left closed when the end of the tube is secured.

14 days after the RIG insertion the water inside the retaining balloon must be changed weekly. This is to check the condition of the balloon. If it is beginning to perish it will be either drawing back less water than expected and/or the water will be discoloured. Please contact the Nutricia Nurses if this occurs.

Procedure for changing the water in the retaining balloon (Nutricia Nurses will teach this when you go home):

1. Equipment required: two 10 ml syringes, sterile water.
2. Wash hands.
3. Draw up 5 ml of the water into one of the syringes.
4. Put the empty syringe into the balloon valve (marked ‘BAL’) and remove all water from the balloon.
5. Check the water from the syringe for volume and colour, and discard.
6. Take the second syringe, insert into the balloon valve and gently push the syringe so that the water is injected into the device.
7. Once the correct volume has been inserted, remove the syringe by using a slight twisting motion. You must keep your thumb on the end of the syringe whilst removing it to prevent water flowing back.

If you are not using the tube for feeding it must be flushed at least once a day with water.

Can I go swimming?

Yes, once the tube has been in place for 4-6 weeks. You must cover the site with a waterproof dressing when swimming.

Will I be able to move around freely?

Yes. The RIG tube should not affect or restrict normal activities.

Mouth care

Plaque can build up quickly if you cannot eat so you must brush your teeth at least twice a day. A mouthwash or artificial saliva may help if your mouth is dry.

If the tube becomes blocked

If you are unable to flush the tube you may try the following:

- Ensure all clamps are open and the tube is not kinked.
- Connect the 50 ml syringe to the end of the