



Oregon  
Interventional  
Radiology

## **G-J tube Exchange / Conversion**

### **Discharge Instructions**

#### Information:

- You have a gastrojejunostomy tube (G-J tube)
- Held in place by a balloon on the inside and a plastic ring (bolster) on the outside
- Look at the tube every day to see if the tube is clogged, cracked, leaking, or loose
- DO NOT use the tube (port) on your tube marked “balloon” – it could make the tube fall out or not work
- The bolster should be about 3mm (less than 1/8 inch) from your skin
- If the bolster is too tight you can loosen it by gently holding the tube upright with one hand and gently wiggling the ring up with the other hand
- If the bolster is too loose you can tighten it by holding the tube upright with one hand and gently pushing the ring down with the other hand
- A tube that is too loose will leak and cause skin irritation and infection – keep it snug
- A replacement tube is put in the same opening about every 3 to 6 months

#### Feeding and Flushing:

- You can use your tube right away
- You can take food by mouth if you usually do, unless you have been told not to
- Use the jejunostomy port for enteral nutrition unless you have been told differently by your doctor
- Always use the gastrostomy port for medications
- Flush your tube 2 to 3 times every day with 30mls (1 ounce or 2 tablespoons) of water
- Always flush your tube with 60mls (2 ounces or 4 tablespoons) of water after you put anything through your tube
- Talk with your doctor about giving you medications as liquids instead of pills
- Don't put crushed pills in the tube if possible
- Talk with your doctor if you have any questions about putting enteral nutrition (tube feeding) or medication in the tube

#### Skin Care:

- Mucous at your skin around the tube entry site is normal
- A small amount of extra skin may develop at the tube entry site - this is normal
- Dried mucous can cause skin irritation

- Clean the tube and skin with warm water 2 to 3 times every day until healed (7-10 days)
- After the skin has healed, clean at least 1 time daily with mild soap and water
- A skin protectant can be used for sensitive skin – talk with your doctor about this if needed
- You can shower
- Don't sit in a tub if the site is draining
- After 48 hours you can sit in a tub if your doctor says it's okay
- Keep your skin at the tube site as dry as you can
- DO NOT USE mineral oil or petroleum based ointments (Vaseline) on or around your tube

Bandages:

- Keep the gauze bandage clean and dry
- Change the gauze bandage at the tube site daily if your site is draining
- If your skin around the tube is healed and not draining, a dressing is not needed
- If you use gauze around the tube, make sure the plastic ring (bolster) is in the right place

**Occasionally, a situation will require prompt attention and a call to your doctor or emergency room visit is necessary:**

- Your tube gets clogged or is not working well in any way
- There is leaking of fluid around your tube – especially if this is new for you
- Leaking fluid is bloody, smells bad, is green or yellow
- Your skin around the tube becomes cracked, sore, red, swollen, blistered, has an open wound
- You have abdominal pain that is worse when food or fluid is put through the tube
- You have vomiting that won't stop
- The tube falls out – this will need to be put back in as soon as possible
- Increasing pain or new symptoms
- Any shaking, chills and/or a temperature over 100.3F

**For any questions please contact Oregon Interventional Radiology clinic at 541-618-5801**

**In all emergency situations call 911**