

File within 3rd spine

NHS number: _____
 Name: _____
 Address: _____

 Date of birth: _____
 CR number: _____

Affix patient label



Royal Cornwall Hospitals
 NHS Trust

Gastrostomy tube and stoma site complications - Gastric leakage

| | |
|---|---|
| Care Plan commencement date | Care Plan completion date |
| Problem | |
| Patient has gastric leakage from Gastrostomy tube stoma site symptoms identified by pain and / or Redness / excoriation (Exclude infection – see care plan Stoma site infection) | |
| Goals | |
| To treat and protect Gastrostomy stoma site from gastric leakage Possible Causes may include Fixation device too loose; Tube too small for the stoma; Delayed gastric emptying / constipation; Patient weight loss; Too little / excessive tension on the tube; Insufficient water in replacement Gastrostomy balloon. | |
| Interventions | |
| Gastrostomy type: | External fixation device at: _____ cm |
| cm: | Fr Gauge: |
| Date inserted: | Surgically <input type="checkbox"/> Endoscopy <input type="checkbox"/> Radiology <input type="checkbox"/> |
| Confirm leakage of gastric contents by pH 5.5 or below (note a small amount of mucus discharge is normal). Document pH in the nursing notes | |
| Identify possible cause and document | |
| <ul style="list-style-type: none"> Check for constipation and treat as prescribed monitor and record on Bristol stool chart Consider Prokinetic to promote gastric emptying if appropriate Consider P.P.I Proton Pump Inhibitor to reduce acid content of leakage and prevent skin excoriation If placing absorbent keyhole dressing be careful that acid is not tracking under the dressing and damaging the surrounding skin Apply barrier film around the stoma site to protect the skin-contact tissue viability if required Ensure that the patient is in the correct feeding position sat semi upright 30-45c to prevent reflux and aspiration and that the Gastrostomy tube is positioned above the stoma. Ensure that the external fixation plates are correctly positioned. It should be 2-3mm away from the skin when gently pulled upwards. If it is too slack the tube may migrate into the stomach allowing leakage of gastric contents If a replacement Balloon Gastrostomy tube is in place check that the correct amount of water is in the balloon. Replace the water and instil the correct amount weekly (as per manufacturer’s instructions). Document in nursing evaluation if tension adjusted Contact the Nutrition Nurse for further advice if required 3089 / 3087 bleep or Head and Neck CNS on extension 3475 | |

affix patient label

Personalised Care Interventions

Sign, Designation
Date and Time

Other individual interventions

Sign, Designation
Date and Time

Care Plan
activated by

Sign
Print
Designation

Care Plan shared
with patient

Sign
Print
Designation