Introduction
This leaflet provides information to help you and your child to prepare for the elective removal of a PEG Feeding Tube. The decision to remove the PEG tube will have been a combined decision with your child’s doctor, dietician and possibility speech and language therapist. It is a minor surgical procedure which is performed under anaesthetic in theatre. The PEG is removed and the opening (stoma) is allowed close by itself.

Pre procedural preparation:
Your child must fast prior to the procedure and you will receive specific times. FASTING means that your child must not eat or drink for prior to the procedure

Post procedural care
Once the operation is complete, your child will spend some time in the Recovery Room, where they will wake up after the general anaesthetic. Once your child is awake and stable, he/she will be transferred back to the day ward.

Eating and drinking
The surgical team will advise when your child can eat post the procedure
Your child should be given a Light Diet such toast/jelly/yogurt/small portions of regular meals for at least 48 hours after the procedure.
DO NOT GIVE FIZZY DRINKS) for at least 48 hour (avoid feeling of fullness)

Discomfort or Pain
Your child may feel some pressure at the stoma site when the PEG is being removed initially but should not experience any ongoing pain or discomfort.
Avoid constipation and straining as this can put pressure on the stoma site and may facilitate persistent leakage of stomach contents.

Dressing
Your child will have a mepore/meplix borderlite dressing applied immediately following the procedure. This can be left in place and removed after 48hours or as instructed by the surgical team.
Stoma Site Leakage
A small amount of leakage can occur on the stoma site dressing for up to 3-5 days. If this occurs change dressing daily.

If your child requires more than 2 dressing changes a day and stomach contents are leaking onto your clothes and bedding, be mindful your child could become dehydrated/unwell. The stoma site may become excoriated (red and sore) and painful if this occurs, seek medical advice.

If leakage of stomach contents is present on the dressing the acidity of the stomach contents can cause the stoma site to become excoriated (red and sore) and painful an oral antacid (prescribed by your child’s doctor/GP) maybe required to reduce the acidity of stomach contents.

7-10 Days after the procedure: If there is a persistent amount of stomach leakage, please contact CNS (Enteral Nutrition) 014092656.

1 month after the procedure: If there is still a small amount of leakage, contact the CNS (Enteral Nutrition) as your child may be referred back to the surgical team for review in OPD.

Bathing
Avoid submerging your child’s stoma site in a bath for the first 48-72 hours. Once you are confident there is no leakage bath as normal.

Bleeding
If bleeding occurs you should apply gentle pressure to the stoma site for approximately 15 minutes. If bleeding persists please seek medical attention/advice.

General After-Care
Your child may return to school/normal daily activities when they are comfortable. Most children require a few days to recover after surgery. He should avoid cycling or active sports as instructed by your doctor.

If you have any concerns please do not hesitate to contact the hospital:

Tel. (Main Switch): 01 409 6100 or
CNS (Enteral Nutrition): 01 428 2656
After Hours: Seek medical attention/advice from your nearest hospital
Remember:

Ask your nurse if you are unsure about anything about your child’s care.

Additional instructions

Developed by GI Unit

Date issued: December 2016
Date of review: December 2018

Disclaimer & Copyright ©2016, Our Lady's Children's Hospital Crumlin, Dublin 12. All rights reserved. No part of this publication may be reproduced, stored in a retrieval system or transmitted in any form or by any means without the prior written permission of the copyright holder. Every effort has been made to ensure that the information provided is accurate and in accord with standards accepted at the time of printing.