

Are there any risks or complication?

As with any medical procedure, there is a chance of a complication. We reduce the chances by using special X-rays to closely watch the procedure and by watching your health during and following the procedure.

Possible complications include:

- bleeding where the tube goes into the skin
- infection around the tube
- trouble breathing usually caused by the pain or relaxing medicine given
- puncture of nearby body organs such as the liver or large bowel
- infection in the abdominal cavity (peritonitis) - most severe but rarest

When to get help

Arrange to see your doctor right away if you notice any of these:

- Fever above 38.5°C (101°F)
- Flu-like symptoms such as fever, aches, and chills
- Increased pain or redness at the tube site
- Leaking around the tube
- The tube is blocked

HealthLinkBC

8-1-1

Call any time you have any questions or concerns. HealthLinkBC is open 24 hours.

Available in 130 languages. For an interpreter, say your language in English. Wait until an interpreter comes on the phone.

Locations

Abbotsford-Regional Hospital

Medical Imaging 2nd Floor, Fraser Wing
32900 Marshall Road, Abbotsford 604-851-4866

Burnaby Hospital

Medical Imaging, 3rd Floor
3935 Kincaid St. Burnaby 604-434-4211

Lions Gate Hospital

Medical Imaging, Lower Level
231 East 15th Street, North Vancouver 604-984-5775

Royal Columbian Hospital

Medical Imaging, Columbia Tower
330 E. Columbia St., New Westminster 604-520-4640

St. Paul's Hospital

Medical Imaging, 2nd Floor, Providence Building
1081 Burrard Street, Vancouver 604-806-8006

Surrey Memorial Hospital

Medical Imaging, 1st Floor, Lower Level
13750 96th Avenue, Surrey 604-588-3308

UBC Hospital

Medical Imaging, Main Floor
2211 Westbrook Mall, Vancouver 604-822-7076

Vancouver General Hospital

GI/GU Department, Jim Pattison Pavilion
Station 5, Ground Floor
855 West 12th Avenue, Vancouver 604-875-4111 Ext 68612

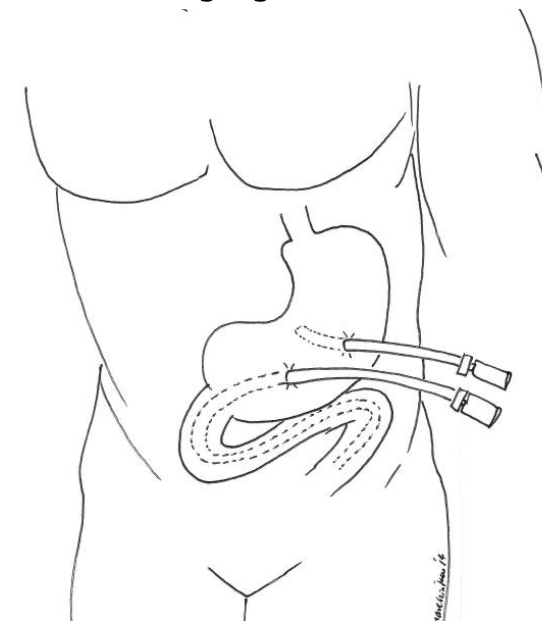
www.fraserhealth.ca – www.vch.ca

This information does not replace the advice given to you by your healthcare provider.

February 2023 FH Catalogue #264368
VCH Catalogue # BB.210.R33



Radiologic Percutaneous Gastrostomy/ Gastrojejunostomy



Follow-up Instructions/Appointment:

What is a Radiologic Percutaneous Gastrostomy?

Radiologic Percutaneous Gastrostomy is a procedure where a special tube called a gastrostomy tube (G tube) is put into the stomach by going through the skin of the abdomen using X-ray to guide the procedure.

The tube is put in for one or more reasons:

- To give medicines or liquid diets directly into the stomach.
- To drain excess stomach juices or fluids caused by a block.

What is a Radiologic Percutaneous Gastrojejunostomy?

Radiologic Percutaneous Gastrojejunostomy is similar, except that the tube (called a gastrojejunostomy tube or GJ tube) is put into the small bowel (small intestine), instead of the stomach.

A gastrojejunostomy tube is put in when there is a concern about a backward flow of stomach fluids up the esophagus or breathing in stomach fluids.

Who does this procedure?

It is done by a radiologist (a doctor who specializes in image guided procedures).

Can I bring a relative or friend?

Yes, they can stay with you before and after the procedure. However, for reasons of safety and regulations, they cannot be in the room during the procedure. We will tell you where family members can wait.

What happens before the procedure?

Our Medical Imaging Department contacts you with specific instructions on how to prepare for this procedure.

You must arrange for a 'responsible adult' to drive or accompany you home after this procedure.

How long will it take?

Every person is different, but generally it takes about 1 to 1½ hours and up to 2 hours to recover.

What happens during the procedure?

First, we place a small tube called a nasogastric tube (or NG tube) through your nose into your stomach.

We gently push air through the tube into the stomach. The air helps us to see on fluoroscopy (and sometimes ultrasound) the area to best place the tube.

Once the best site is selected, we clean the skin on your abdomen. The radiologist injects numbing medicine to 'freeze' the skin where the tube goes in.

The radiologist makes a small cut in the skin and passes the tube through the skin into the stomach. If you are having a GJ tube, the tube is advanced into the small bowel.

Once in the correct place, we remove the NG tube.

The G tube or the GJ tube is held in place by a special device that locks the tube against your skin. No stitches are required.

Will it hurt?

It might sting or burn as the numbing medicine is injected. If needed, we can give pain medicine or relaxing medicine. We usually give this through an intravenous in your arm. Tell us if you are having pain so we can give you pain medicine.

What happens afterwards?

We move you to our recovery area where you are looked after by a nurse.

Before you leave, we give you information about how to care for your tube. We will also give you instructions on when to follow-up with the radiologist or your family doctor.