

# MIC\* G and other long balloon Tubes

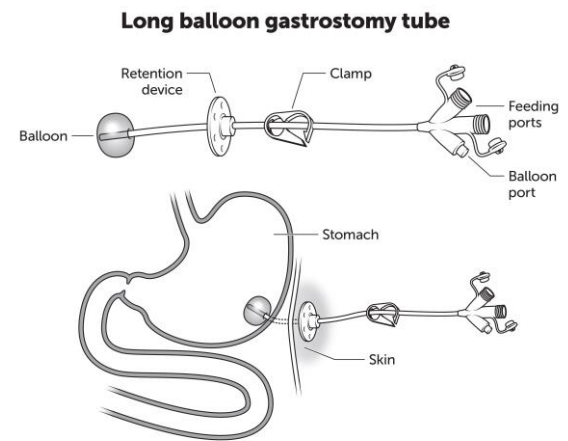
A Mic\* Gastrostomy (Mic G) or other long balloon gastrostomy may be used by the RCH Emergency Department (ED) to replace balloon button gastrostomy tubes. They are a suitable option in the ED to ensure the stoma is maintained with a correctly fitting tube.

Like a balloon button gastrostomy, long balloon tubes are designed to last several months.

It is not a temporary tube, and there is no urgency to have it changed back to a button.

If you have any concerns about the long balloon tube or wish to have it replaced with a balloon button, please call the RCH contact centre on 93456180 to book an appointment with the PEG clinic.

**If you have a spare button, it is always best to bring it with you to the ED, as they can use it to replace your broken or dislodged device, instead of the Mic G**



## Care of long balloon gastrostomy tubes

Long balloon gastrostomy tubes have either 2 or 3 ports: a balloon inflation port, and either 1 or 2 ENFit® feeding/medication ports. **Extension tubes are not required.**

They have an external retention plate similar to the initial gastrostomy that your child may have had. This plate should be adjusted to have a 2-3 mm distance between the plate and the skin, once the balloon is inflated and the device is gently pulled back so that the balloon sits against the stomach wall. This adjustment keeps it secure and prevents leakage.

Like the balloon button tubes, long balloon tubes are also held in place by an internal retention balloon, which rests against the inside of the stomach wall. The maximum fill volume of the balloon is printed on the balloon inflation port.

Care of the long balloon tube is the same as all tubes.

- Ensure you clean the site daily.
- Once a day, gently rotate the tube all the way around, and pull it gently back out of the stoma, until you feel resistance of the internal balloon against the stomach wall. Push the disc down if it is loose.
- Flush the tube after and between each feed or medication administration.
- Keep the area around the tube as dry as possible. Apply a barrier cream and dressing if there is leakage/ooze from the stoma to protect the surrounding skin
- Keep the tube well secured so that it does not get caught or pulled from its own weight.
- The long balloon tube **does not come with a clamp** to prevent backflow when opening and closing the caps, but you can ask the ED to provide one before you go home.
- Make an appointment with the PEG clinic with any concerns