

INFORMATION LEAFLETS FOR PARENTS / CARERS OF A CHILD

LAPAROSCOPIC ASSISTED GASTROSTOMY BUTTON (MIC-KEY BUTTON) INSERTION

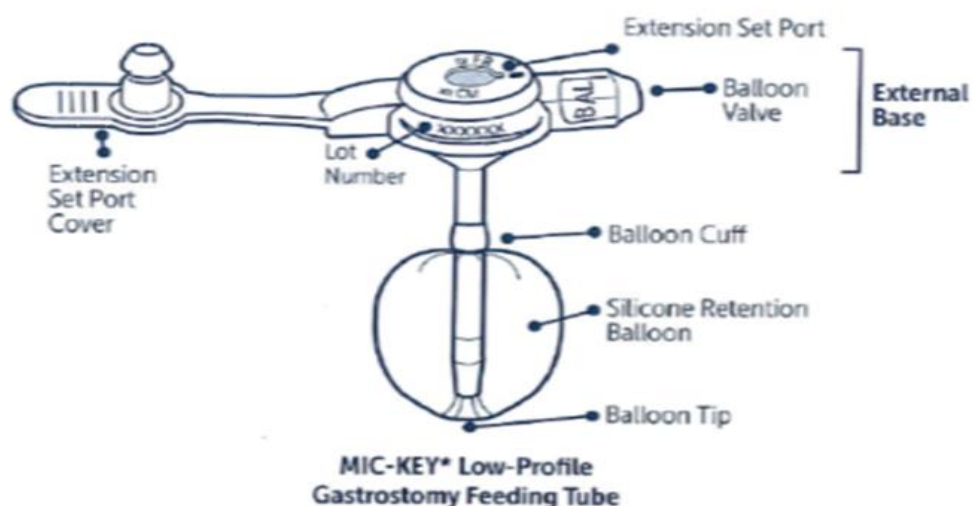


AIM OF THIS ADVICE SHEET

To provide advice for parents / guardians caring for children/infants in hospital and at home, who have a Gastrostomy button placed using laparoscopic technique as a primary feeding tube.

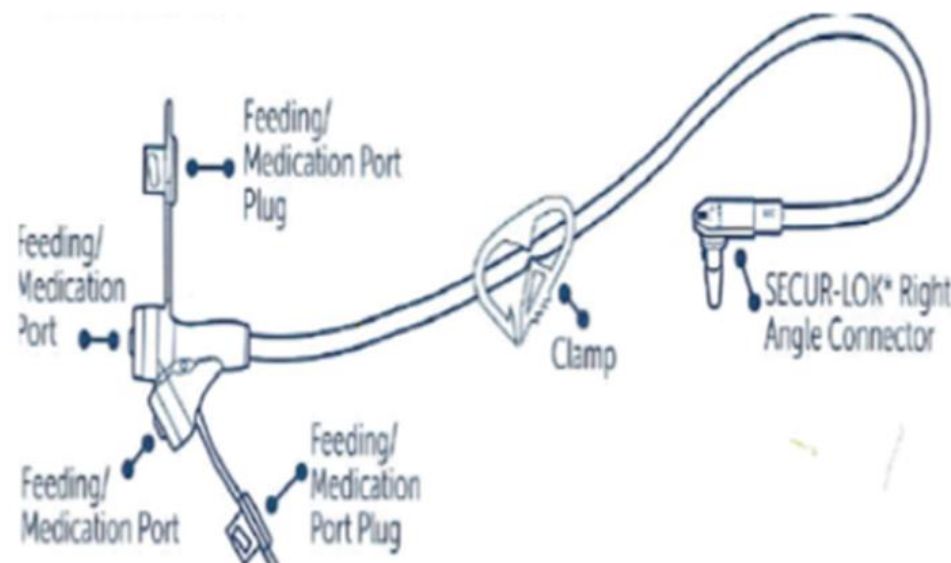
WHAT IS A GASTROSTOMY BUTTON?

The Mic-key button is a device, made from silicone that allows fluid/feeds, and/or medications, to be given directly into the stomach. It is held in place by an internal water filled balloon. Gastrostomy Buttons are commonly placed in lieu of the initial gastrostomy tube after the tract is well established. However, it is also possible for the Gastrostomy button, to be placed using laparoscopic technique as a primary feeding tube.



THE MIC-KEY CONTINUOUS FEED EXTENSION SET

Use for Feeding- to attach align the black line on the SECUR-LOK right angle connector with the black line on the extension set port. Insert the connector into the Extension set port and rotate it ¼ turn clockwise. The extension can rotate and allows change of position during feeding.



HOW IS THE MIC-KEY BUTTON INSERTED?

If your child / infant is going for a planned laparoscopic assisted gastrostomy button insertion it will be performed in theatre under general anesthetic and your child will remain an inpatient in hospital for a number of days post operatively. Your child/infant will have sutures inserted to secure the mic-key button to prevent any twisting or traction on the button and a dressing will be placed over the mic-key button for the first week.

SPECIFIC GASTROSTOMY TUBE CARE (Up To 7 Days Post Insertion of Gastrostomy Button)

On return from theatre your child/infant will have a low profile Mic-key button inserted there will be dressing placed over the mic-key button and sutures to prevent any twisting or traction on the button. A feeding extension set is attached to the Mic-key button and attached to this is a drainage bag. The drainage bag will stay in place until the following day and removed prior to commencing feeds. Your child will be seen by the surgical team day 1 post surgery and enteral feeding commenced following review by the dietician. The dressing is checked regularly by staff on the ward but it remains untouched until day of discharge unless oozing around the site is noted in which case the dressing may be changed.

SPECIFIC GASTROSTOMY TUBE CARE (Approx. Day 7 Post Insertion of Gastrostomy Button)

- You will be given a date and time to attend OPD clinic 1 week post procedure.
- Your child/infant dressing and sutures will be removed.
- You will be shown how to rotate the tube and discuss all aspects of care related to the tube.

SPECIFIC GASTROSTOMY TUBE CARE (Approx. 1 Month Post Insertion of Gastrostomy Button)

- You will be given a date and time to return to Nutrition Support CNSp
- Parents are instructed regarding removing and inserting button and checking the water in the balloon.
- To continue training and adopt the role of routinely changing their child/infants gastrostomy tube a referral can be sent to Techno-path Homecare- homecare@techno-path.com or the family can return to Nutrition Support Unit.

WILL MY CHILD / INFANT BE UNCOMFORTABLE AFTER THE INSERTION OF THE GASTROSTOMY BUTTON?

- Your child / infant may experience some discomfort after the insertion of the gastrostomy button and will require regular pain relief for at least the first 48 hours.
- Distract your child/infant with age appropriate toys to help take their mind off any pain / soreness / discomfort.

WHY DO I NEED TO CHECK THE PH OF THE GASTROSTOMY BUTTON?

The pH of the gastrostomy button, must be checked to make sure the gastrostomy button is in the correct position. The gastrostomy button position is checked, by applying aspirate from the mic-key button feeding extension set on a pH paper, and it should be between 0 – 5.0

HOW OFTEN SHOULD I CHECK THE PH OF THE GASTROSTOMY BUTTON?

The position of the gastrostomy button is checked with pH paper:

- Prior to the gastrostomy button being first used (by nursing staff)
- If the gastrostomy button has been accidentally pulled
- Post each change of the gastrostomy button

WILL I LEARN TO CARE FOR THE MIC-KEY BUTTON?

Day 1-7 post op

Yes, your ward nurse will show you how to care for your child's/infants Mic-key button. You will be encouraged to actively participate, in all aspects of our child / infants care in relation to the gastrostomy button throughout your child / infants admission so you become familiar with the care.

Prior to discharge you will be taught:

- Importance of washing hands with soap and warm water, and dry thoroughly before handling the Mic-key Button.
- Flush Mic-key Button prior to & following a feed or administration of medications.
- Administer feeds via a feeding pump.
- Check dressing for any leakage at regular intervals.
- The dressing may be changed prior to discharge, the tube **MUST NOT** be rotated while these sutures are present.
- If leakage is persistent post discharge, you are advised to contact the responsible surgical team.

Your ward nurse will also arrange an education session for you and your child (age appropriate), with the Nutrition Support Nurse, before going home so you can learn how to care for the Mic-key button and troubleshoot any problems that may arise.

CARE OF MIC-KEY BUTTON FROM 1 WEEK ONWARDS

At you OPD appointment 1 week post insertion of the Mic-key button your child / infant dressing and sutures, will be removed and you will be shown how to rotate the tube and discuss all aspects of care related to the tube following this daily care as outlined below:

- Always wash hands with soap and warm water, and dry thoroughly before handling the Mic-key Button.
- Look at the stoma site and surrounding area daily for signs of infection, oozing, leakage of feed, bleeding, granulation tissue at the stoma site or pain.
- Remove feeding extension set after each feed.
- Many stomas have a small amount of ooze and/or crusts (especially in the morning). This can be normal and is usually due to the silicone material in the Mic-key button.
- Clean the stoma site, surrounding skin and Mic-key button daily with cool boiled water.
- Pat the stoma site with a tissue, surrounding skin and Mic-key button dry.
- **Rotate button 360°C daily to prevent the button sticking to the skin.**
- If any signs of leakage or infection are present, may need to apply a dressing around the stoma site (*Contact the Nutrition Nurse or surgical team or PHN for further advice*).

CARE OF THE EXTENSION SET

- Wash the outside and inside of the extension set with hot water and washing up liquid after each use.
- Rinse with clean warm water.
- Allow to air dry.
- Store in an airtight container.
- Change extension set weekly or more often if feed is lodging in the set.

WHEN CAN MY CHILD / INFANT RETURN TO NORMAL ACTIVITIES AFTER GETTING THE MIC-KEY BUTTON INSERTED?

Your child / infant can return to normal activities after discharge. Bathing is allowed after the sutures have been removed. Use soaps for sensitive skin in the bath water. Swimming is allowed after the first change of the mic-key button, however the stoma and surrounding area must not be infected / excoriated / sore. The stoma site and surrounding area must always be cleaned with cooled boiled water after swimming to prevent any irritation from chlorine or seawater.

HOW OFTEN IS THE MIC-KEY BUTTON CHANGED?

The tube is routinely changed every 3 months. Some children may require more frequent changes but you Nutrition Support Nurse, will advise if more frequent changes are required.

WHO CHANGES THE MIC-KEY BUTTON?

The first change of the gastrostomy button, is done **1 month after surgery**. This will be done by the Nutrition Support Nurse. Routine Mic-key button changes are usually performed every 3-4 months in OLCCH by the Nutrition Support Nurse (in an Out Patient Clinic) or at home by you if you have been educated to do so by the Nutrition Support Nurse or the Techno-path (Company) Nurse. Referral to Homecare Techno-path will be discussed and made at your return 1 month appointment with the Nutrition Support Nurse

IF I DO NOT WANT TO LEARN HOW TO CHANGE THE MIC-KEY BUTTON, WHO WILL DO IT?

Parents / guardians do not have to learn to change their child's/infants Mic-key button, if they do not wish to. The Mic-key button can be changed by the Nutritional Support Nurse, on an appointment basis or at your local hospital. If the Nutrition Support Nurse is not available, this may be carried out locally.

WHAT DO I DO IF THE MIC-KEY BUTTON FALLS OUT OR IS PULLED OUT ACCIDENTLY?

Less than 1 month Post Insertion

A new Mic-key button must be inserted quickly to prevent closure of the stoma. If the button falls out less than 1 month post op, parents are instructed to put the button (or a spare one) back in, cover with a dressing and present to the nearest ED. In this situation a contrast is required to confirm button position (contrast can be done through the gastrostomy button)

WHAT DO I DO IF THE MIC-KEY BUTTON FALLS OUT OR IS PULLED OUT ACCIDENTLY?

After 1 month Post Insertion

If the button dislodges after 1 month post insertion, parents have attended their appointment with the Nutrition Support CNSp and received instruction on how to insert button. Parents are instructed to put the button in and check the position post insertion with pH paper as instructed if parents are unsure of the position they are advised to contact the Nutrition Support CNSp or present to their local emergency department.

MIC-KEY BUTTON BALLOON

Once the Mic-key button balloon is inflated and in the correct position, it stabilises the Mic-key button against the stomach wall and also acts as a plug to prevent leakage of stomach contents. When the Mic-key balloon is deflated, it allows the Mic-key button to be removed.

HOW OFTEN DO I CHECK THE WATER IN THE MIC-KEY BUTTON BALLOON?

You will be shown how to change the water in the Mic-key Button Balloon after the first change of mic-key button with the Nutrition Support CNSp, one month after insertion. From then on, the water in the mic-key button balloon is changed weekly.

HOW DO I CHANGE THE WATER IN THE MIC-KEY BUTTON BALLOON?

This is performed using:

10ml syringe x 1	5ml syringe x 1
5mls cooled boiled water/sterile water	pH Paper

WHAT TO DO:

- Fill a 5mls syringe with 5mls of water
- Attach an empty 10ml syringe to the balloon port
- While holding the Mic-key button firmly in place, withdraw the water in the balloon into the empty 10ml syringe
- Check the colour of the water which should be clear. If the water is discoloured, change the Mic-key button, as this is a sign the balloon may be damaged
- Insert a new 5ml syringe filled with 5mls of water into the balloon
- If there is concern regarding the safe positioning of the feeding tube following change of water in the balloon Aspirate the Mic-key button and check the pH of the aspirated fluid to confirm the position of the Mic-key button (pH should be between 0-5)

WHAT TO DO IF BALLOON WILL NOT DEFLATE?

Contact the responsible Surgical Team or the Nutrition Support Nurse immediately (Do not use the tube or administer medications / feed).

WHAT TO DO IF MIC-KEY BUTTON CANNOT BE REMOVED FROM THE STOMA, ONCE THE BALLOON IS DEFLATED?

Contact the responsible Surgical Team (Do not use the tube or administer medications / feed).

I THINK THE MIC-KEY BUTTON IS INFECTED, WHAT DO I DO?

Observe for the signs and symptoms of infection such as:

- Contact the Surgical team or Nutrition Support Nurse for advice if these signs are present
- A swab may be taken
- If an infection is present, a topical antibiotic may be prescribed

Note: An ooze may also indicate granulation tissue

Skin surrounding the stoma is:	Persistently red (<i>larger than a €1 coin</i>), sore and swollen
Stoma has a:	Bad odour
	Green / yellow discharge / ooze
	Bleeds – more than a small amount
Other observations	High temperature (greater than 38°C)

HOW DO I CHANGE THE MIC-KEY BUTTON?

This is performed using:

5ml or 10ml luer slip syringe x 2	Pack containing New Gastrostomy Feeding tube and extension
5mls cooled boiled water/sterile water	pH Paper
Lubricant	Dash 3 10ml Syringe x2

- Always wash hands with soap and warm water, and dry thoroughly before handling the Mic-key Button
- Prepare the environment and collect all equipment
- Remove the new Mic-key button from the package
- Check the integrity of the new Mic-key button, by inflating the balloon of the new Mic-key button using a leur slip syringe with Sterile Water (cooled boiled at Home), using the recommended fill volume on the balloon port, then deflate balloon
- Attach an empty leur slip syringe to the balloon valve of the old Mic-Key button that is in the child/infant stomach.
- Deflate the balloon of the old Mic-key button gently ensuring all the water is removed
- Gently remove the old Mic-Key button from the child/infants stomach
- Lubricate the tip of the New Mic-key button with gel
- Gently guide the new Mic-key button into the stoma, inserting the new Mic-key button all the way in until the button is flat against the skin
- Hold the button in place and attach a leur slip syringe to the balloon valve. Inflate the balloon of Mic-key button with cooled boiled water using the recommended fill volume on the balloon port or as verified with the Nutrition Support CNSp
- Wipe way fluid or lubricant from the Mic-key button and stoma
- Attach an extension set and using an enfit syringe aspirate 1-2ml of stomach content and close the clamp,
- Check pH using aspirated stomach contents (**pH must be between 0-5.0**). If there is concern regarding the safe positioning of the Mic-Key button following change, check seek medical advice.
- Detach the enfit syringe and close the cap.
- Wash hands with soap and warm water, and dry thoroughly.
- Dispose of all equipment appropriately.
- Ensure the child is reassured and comfortable after the procedure.
- Record Gastrostomy Tube size, Reference number and LOT number

HOW TO ORDER A MIC-KEY BUTTON AND EXTENSION SET SUPPLIES?

Parents / guardian will receive a prescription prior to discharge home for:

PRODUCT	SIZE / QUANTITY	REFERENCE NO	SUPPLIER
Mic-key button (Spare)	(1 in a box)	8140 (?fr size) – (?cm size) e.g 8140-12-2.0	
Extension sets (1 type available) ENFIT	Compatible with DASH 3 Enfit Syringes (5 in a box) Secur-Lok Enfit right angle connector and 2 port Y 12"	0141-12	
DASH 3® ENFit ml Single use syringe	5ml	Ref: 13011050	
	10ml	Ref: 13011100	
	20ml	Ref: 13011200	
	60ml	Ref: 13011610	
DASH 3® REUSABLE syringes Enfit PLUS	5mls	Ref:13021050 DASH 3	
	10mls	Ref:13021100 DASH 3	
	20mls	Ref: 13021200 DASH 3	
	60mls	Ref: 13021600 DASH	
Subject to change based on product availability			
DASH 3 Accessories			
<ul style="list-style-type: none"> • 13031001 Bottle adaptor for DASH 3 ENFit® syringe 10mm-14mm size 1 • 13031002 Bottle adaptor for DASH 3 ENFit® syringe 14mm-16.8mm size 2 • 13031003 Bottle adaptor for DASH 3 ENFit® syringe 16.9mm-20mm size 3 • 13031004 Bottle adaptor for DASH 3 ENFit® syringe 20.2mm-24mm size 4 • 13041001 DASH 3 ENFit® tip caps Syringe caps 			

For more information on please contact **LAPAROSCOPIC ASSISTED GASTROSTOMY BUTTON (MIC-KEY BUTTON) INSERTION** in Our Lady's Children's Hospital, Crumlin, Dublin. **CONTACT DETAILS:** Phone 01 409 6100 - Bleep **xxxx**

REMEMBER: Ask your nurse if you are unsure about anything about your child's care.

Additional instructions

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