Abdominal Tubes: Stomach, Intestine, and More

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Intended Audience:
Pediatric emergency care professionals

Objectives:
As a result of this educational regularly scheduled series, learners will be able to:
1. Utilize new skills and guidelines determined to be safe for children when accessing pediatric trauma.
2. Identify proper tools and standardized practices in order to improve the diagnosis and treatment of pediatric patients.
3. Define roles and responsibilities of team members who triage pediatric emergencies in order to identify communication strategies that result in effective patient care.

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2. During the live presentation, and in the follow-up email, you will be provided a code. Text that code to a number we provide you, using a cell phone associated with your account.

   Text **NEMYUC** to 608-260-7097
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3. All done!! Log onto ICEP to view or print your credit letter.
You get called for an unresponsive child

- Airway intact
- Breathing OK
- Pulse steady
- On secondary exam, there’s a tube coming out of the abdomen…
What could it be?

- Gastrostomy or Gastro-jejunostomy
- Cecostomy
- Appendicostomy
- PD Catheter
Gastrostomy or Gastro-jejunostomy
The Old Fashioned Way
Other ways
Cecostomy
Appendicostomy
PD Catheter
What could go wrong?

- Granulation
- Ulceration
- Infection
- Gastric outlet obstruction
- Gastric prolapse
- The tube falls out
- Fistula
What if the gtube falls out?

- Put something in the hole
- When was it placed?
  - Less than 8 weeks: uh-oh
  - More than 8 weeks: meh
- When in doubt, get a radiographic study
- If the tract is durable, aspiration of gastric contents is sufficient.
What could go wrong?