Information for patients, families and carers

Paediatric Gastroscopy for insertion or change of Percutaneous Endoscopic Gastrostomy (PEG)

Who is this information for?

This information is for patients and families planning to attend Monash Health Endoscopy Services

Paediatric Gastroscopy for insertion or change of PEG

A Gastroscopy is a procedure where a gastroenterologist looks inside the oesophagus (food pipe), the stomach and first part of the small bowel, also known as the duodenum. This is done by using a long flexible tube that has a light and a camera on the end, known as a gastroscope.

A PEG is a type of feeding tube. It is inserted through a small hole created by the gastroenterologist into your child's abdomen.

PEGs are performed to bypass the mouth. The PEG will provide your child with nutrition when your child is unable to take adequate oral intake.

On the day of procedure

Your child must fast for this procedure

Morning Procedures

Children 6 months of age and under:

Breast feed or formula to be completed by 4.00am

Clear, non-fizzy fluids may be given to your child up until 6.00am

Children over 6 months of age:

No milk or food after 2.00am

Clear, non-fizzy fluids can be given to your child up to 6.00am

Afternoon Procedures

Children 6 months of age and under:

Breast feed or formula to be completed by 9.00am

Clear, non-fizzy fluids may be given to your child up until 11.00am

Children over 6 months of age:

No milk or food after 7.00am

Clear, non-fizzy fluids can be given to your child up to 11.00am

- Most medications can be taken as usual, however if you are unsure please discuss this with your Gastroenterologist
- Bring feeds and all the equipment to feed your child with you. You will need to give your child a feed before he/she leaves the endoscopy suite.

Information for patients, families and carers

- Your child will receive sedation for the procedure, so they will be asleep. A local
 anaesthetic cream may be applied on the back of your child's hands before the
 procedure to make the skin feel numb. They will not feel the insertion of the needle
 while going off to sleep. Sometimes the anaesthetist may choose to sedate your
 child using a breathable gas, and this will be explained to you.
- Sometimes mum or dad are asked to accompany their child into the suite to help keep them calm until they drift off to sleep.
- On rare occasions the anaesthetist may need to insert a breathing tube into your child's mouth to ensure their breathing is not compromised while they sleep.

Post Procedure

- Your child will be drowsy; sometimes they thrash about as they are waking up. You
 will be called into recover y to be with your child while they wake.
- Your child may experience abdominal discomfort. Analgesia will be administered by anaesthetic or nursing staff while in recovery.
- You and your child will be visited by the PEG Outreach team either in endoscopy recovery or on the ward when only
 - 1. It is an initial tube or
 - 2. If the tube is changing from an initial PEG to a low profile or balloon device.
 - 3. If requested
- Your child will be admitted to a Monash Children's ward for observation after an initial PEG insertion for 2 nights. This is so the nursing staff, PEG Outreach and Dietitian can assist you with establishing feeds and provide education.

You will receive your booking time and date in the mail from Paediatric Endoscopy Bookings once the Request for Elective Admission (Consent to procedure) is received from the Paediatric Gastroenterology Team

This will be 3-4 weeks prior to procedure

Please take the time to read the letter and preparation instructions at least 7 days prior to procedure.

You must confirm your booking to keep it

For information



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