

PEDIATRIC SURGERY

Gastrocutaneous fistula closure

Preference Card

1. Outline a vertically-oriented ellipse around the site about 4x1.5 cm with a pen.
2. Incise through skin and fat down to rectus fascia, pick up the site with an Allis or two.
3. Incise cleared-off fascia in vertical line with gastrostomy inferiorly and split rectus muscle with hemostats, put in S-retractors and open peritoneal cavity.
4. Continue to open in this plane up to the gastrostomy site then around it (incising both layers of fascia and muscle).
5. When fascia cleared from gastrostomy, staple off the stomach with a TA-30.
6. Close fascia in 2 layers with 3-0 then 2-0 PDS.
7. Close sub-q with vicryl and subcuticular with monocryl.
8. Start feeds the same day.