

**General protocol for Xray G-button check:**

1. One view supine abdomen prior to injection, if not already obtained during same visit.
2. Place patient in left lateral position for injection of contrast material (patient lying on their left side).
3. Left lateral image immediately following injection of contrast material (patient lying on their left side).
4. Next, turn patient prone and obtain prone x-ray — this is essential in determining if the balloon is intragastric.
  - a. If the patient is small and G-button site is tender/painful, “levitate“ them for prone image.
  - b. If patient is large and unable/unwilling to be prone or left side down, obtain best images possible, and document reason for not getting a prone image.

**Contrast material for G-button check:**

Premature: consult radiologist.

0–12 months: 5 mL water soluble contrast, unless contraindicated by allergies (use whatever contrast material is used locally for diagnostic CT scans)

1–4 years: 10 mL water soluble contrast.

Five years old and older: 20 mL water soluble contrast.

Tube checks for other tube types (ACE, jejunostomy, GJ, etc.) **require discussion with pediatric radiologist prior to exam.** Before reaching out to the radiologist, please gather this information:

- Current history (what happened/what the symptoms are);
- How long since surgery to place the tube in question;
- If tube is dislodged, how long it's been out;
- Age and weight of patient, and
- Any other relevant history.