

Type of procedure	PEG insertion – acute / high-risk
Airway	Endotracheal intubation recommended. High aspiration risk.
Anesthesia model	General anesthesia or deep sedation depending on airway risk.
Premedication	Ondansetron ± Betamethasone.
Postoperative analgesia	Paracetamol ± IV opioids if needed.
Notes	Often fragile patient with limited physiological reserve. High aspiration risk and full stomach common. Close cooperation with endoscopist. Low threshold for postoperative monitoring.
Recommended vascular access	Peripheral IV ×2 (≥18G). Consider arterial line if unstable.