GUIDE TO TUBE FEEDING FOR PATIENTS AND FAMILIES



Contact Information:

Doctor's Name:
Doctor's Number:
Hospital number:
Floor extension:
CCAC contact number:
Community Dietitian's Name:
Dietitian's Number:
Homecare Nurse:
Name of Formula:
Rate of Feed:

Contents:	Page
Patient Teaching Check List	3
Checklist for Patients and Families	
Questions for Your Doctor	7
Weight Chart	8
What is tube feeding?	9
Where does feeding tube go?	10
Caring for Feeding Tube	12
Feeding Tube Procedure	13
Preparing Your Feed or Flush	14
Starting Your Feed	
Taking Medication	21
Cleaning up	23
Positioning During Feeding	
How to Prevent and Unclog a Feeding Tube.	25
Buying Your Formula	26
Life with A Feeding Tube	
Call Your Doctor When	20

TEACHING CHECKLIST – ENTERAL FEEDS	Date Teaching Done	Date Teaching Done
1.Review of supplies and how to obtain and cleaning of supplies		
2. Review rate and type of feeding formula		
3. Review of diet and fluid replacement		
4.Review of proper positioning for feeds		
5. Management and prevention of clogged tubes		
6. Review when to call doctor/home care nurse		
Management of Enteral Feeds		
1. Gathers supplies and equipment		
2. Checks expiration date on formula		
3. Draws up appropriate amount of water to flush feeding tube		
4. Flushes Feeding tube before and after medication		
5.Closes roller clamp on feeding tube		
6. Pours formula into feeding bag		
7. Hangs feed bag on pole higher then head		
8. Set pump		
9. Opens roller clamp; primes tube		
10. Connects feed bag to feeding tube; starts feed; disconnects when feed done		
11. Cleans all equipment		

Date	Date	Date	Date	Date
Practiced	Practiced	Practiced	Practiced	Independent
		(4)	1	

CHECKLIST FOR PATIENTS AND THEIR FAMILIES

Before leaving the hospital use this checklist to make sure you have the information you will need at home to manage your feeding tube.

☐ Type of feeding formula I will need and how
much do I use each day
☐ Do I know what time of day I should be giving
myself my amount of formula
☐ Where do I get the feeding formula and how
much should I have on hand
☐ How much extra water should I give myself
and are there any times when I should give
myself extra water
☐ Have I/ my family members been shown how
to start and stop feeds, and have I been given
the opportunity to practice
☐ Have I/my family members been shown how
to give medication through the feeding tube-
can my medications be crushed or be
provided in liquid form
☐ Do I know what position is best for me while
being fed through the feeding tube
☐ Do I know how to clean and care for the
equipment I will use to give myself formula

☐ Do I know how to care for the skin around the	
feeding tube and what to observe about	
the skin	
☐ Do I know how to keep my feeding tube	
from becoming clogged	QUESTIONS FOR YOUR DOCTOR:
☐ Do I know what to do if the feeding tube	Gozonono i on room boorom
is blocked and I am unable to push in any	
water or formula	
☐ What do I do if my tube comes out	
☐ Do I know if my doctor/dietitian needs me to	
monitor my weight and how often	
☐ If I am able to eat or drink by mouth, do	
I know if my doctor/dietitian needs me to	
monitor the amount and /or type of foods	
and drinks I consume	
☐ Do I know what I should do about routine	
mouth care- whether I am able to eat and	
drink or not	
☐ Do I have any concerns about my activities	
that I will be doing, and managing my feeding	
tube- for example bathing, swimming, sports,	
traveling etc.	
☐ Do I know when I need to be concerned and	
call my doctor and do I have the phone	
number I would call	
☐ Do I know how to get in contact with my	
Community Care Access Centre if I have	
questions/concerns/supply of equipment	
issues	(7)

WEIGHT:

• Weigh self weekly

 If you are gaining or losing weight call your dietitian



WEIGHT CHART

DATE	WEIGHT	DATE	WEIGHT

The information presented is for educational purposes only. It is not intended to replace advice from your health care provider.

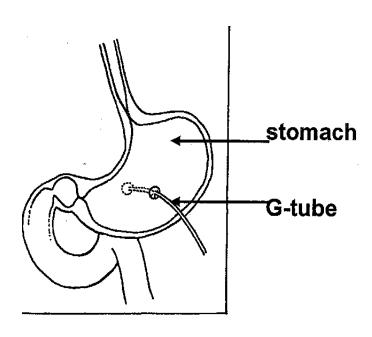
WHAT IS A FEEDING TUBE?

- Tube feeding is used to provide liquid food (nutrition), water (hydration) and medications
- Some reasons for a feeding tube are:
 - 1. Difficulty swallowing
 - 2. Having a type of surgery after which you cannot eat
 - 3. A way of providing extra calories to keep your strength
 - 4. Treatments like radiation which make it difficult to eat
- Tube feeding can provide extra nutrition and hydration even if you are able to eat and drink
- The length of time you may require tube feeding can vary from weeks to many months or years

TYPES OF FEEDING TUBES:

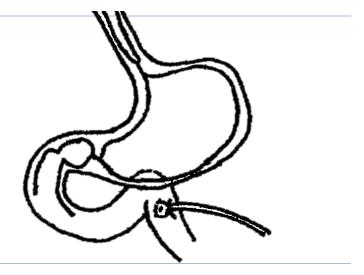
GASTROSTOMY TUBE (known as G-TUBE or PEG-TUBE)

• In which the tube goes through the stomach wall and the tip of the tube is in the stomach



JEJUNOSTOMY TUBE (known as J-TUBE)

 The tube goes through an opening in the skin of the abdomen and the tip of the tube is in the first part of the small intestine called the jejunum



WHERE IS THE TUBE IN MY BODY?

☐ JEJUNOSTOMY (J-TUBE)

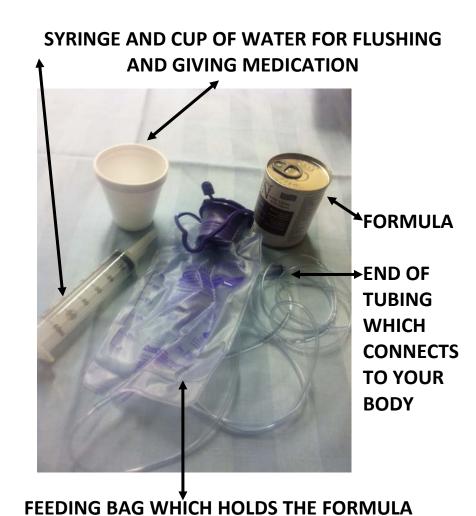
YOU HAVE A: (nurse to √ box)

CARING FOR FEEDING TUBE:

- Tube is marked at skin level for baseline for later comparison
- Monitor length of tube; notify doctor or call your home care nurse if the tube has become longer or shorter
- If tube slips out a little or completely, DO
 NOT EAT BY MOUTH OR USE TUBE
- DO NOT TRY TO PUSH OR PUT TUBE BACK IN STOMACH
- If tube starts to leak, stop using it and call your surgeon or home care nurse
- Check insertion site for skin breakdown, irritation, redness
- Flush feeding tube with warm tap
 water every ____hours. This will help keep
 the tube patent
- Flush feeding tube before starting your feeds and when your feeds are done.
- Flush feeding tube before and after medication
- DO NOT LET CONNECTOR TOUCH ANY DIRTY SURFACE

FEEDING TUBE PROCEDURE:

Before you start, gather all the equipment you will need. The picture shows the supplies and equipment you will need.



(13)

PREPARING FOR YOUR FEED OR FLUSH:

1. Ensure all equipment is clean. Your feeding bag can be reused for _____ days if you clean it carefully after each use



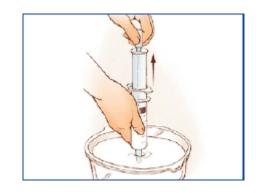
2. Wash your hands with soap and water

3. Formula should be at room temperature. Unopened formula does not need to be



refrigerated. However, open cans may be kept in the fridge for 24 hours. Allow refrigerated formula to warm to room

temperature for ½ hour before using. After the 24 hours, any remaining formula <u>must</u> be thrown in garbage



4. Draw up _____ ml of warm water in your syringe

5. Close the clamp or bend feeding tube

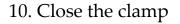


- 6. Open the cap on the feeding tube
- 7. Insert the end of the syringe into the end of the feeding tube

8. Open the clamp or unbend feeding tube



9. Push water into the tube. Be careful – avoid excessive force as this may tear the tube



11. Remove the syringe and reclose tube

Important to give yourself extra water flushes during hot and humid conditions

(16)

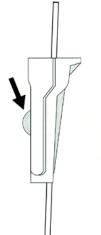


STARTING YOUR FEED:

1. Check the expiry date on can of formula



2. Shake the formula well to mix



3. Close the roller clamp on feeding tube to prevent formula from dripping out of feeding bag

(17)



4. Pour formula into feeding bag



5. Close lid on feeding bag



6. Hang the feeding bag on an IV pole which is higher than your head



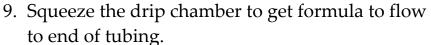
*Go to #8 if not using a pump

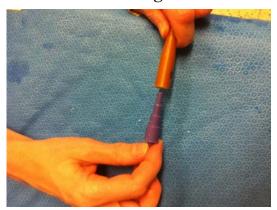
7. Set pump up according to your manual. The manual will show you how to fill drip chamber, set the flow rate

Rate is



8. Open the roller clamp. Let the formula flow through the tip





10. Open the cap of your feeding tube and connect the tip of the delivery set to your tube (19)

(18)

11. Start feed: if using a pump push the start button

For Gravity feed open the roller clamp and adjust the rate of flow by opening or closing the roller lamp

12. Stop pump when feed is finished

or for

Gravity feed; close roller clamp when finished

13. After feed is finished, flush your feeding tube with warm water

Follow steps 4-11 on page 15 and 16 for flushing feeding tube

14. Disconnect the tip from your feeding tube and replace the cap at the end of the feeding tube

Go to cleaning up on Page 23



TAKING YOUR MEDICATION THROUGH YOUR FEEDING TUBE

ALWAYS TAKE MEDICATION BY MOUTH IF ALLOWED

SUPPLIES:

- CLEAN SYRINGE 60ML
- LUKEWARM WATER IN CLEAN GLASS
- MEDICATIONS
- CUP FOR MEDICATION AND CRUSHER

HOW TO GIVE MEDICATION THROUGH FEEDING TUBE:

FLUSH FEEDING TUBE WELL WITH
WARM WATER BEFORE AND AFTER
MEDICATION.
ASK YOUR PHARMACIST IF
MEDICATION COMES IN LIQUID FORM.

LIQUID MEDICATION

- Draw up dose in syringe
- Push medication through feeding tube

TABLET

- Crush tablet into fine powder
- Mix with warm water
- Push medication through feeding tube

CAPSULE WITH POWDER

- Pull capsule apart
- Place powder in cup and mix with warm water
- Push medication through feeding tube

REMEMBER:

- DO NOT PUT MEDICATION IN THE FEEDING BAG
- DO NOT MIX ANY MEDICATION WITH THE FORMULA

CLEANING UP:

- 1. Wash equipment with warm water and vinegar mixture; * See Below*
- 2. Close the feeding bag and shake well
- 3. Open the roller clamp and let the water drain out
- 5. Repeat until feed bag looks clean
- 6. Wipe down with clean towel and hang to air dry
- 7. Store equipment in a covered container until next feed
- 8. Wipe feeding pump down regularly to keep it clean

Once a day you should clean your feeding set with vinegar and water.

- Mix ¼ cup vinegar with 1 cup warm water
- Pour into feeding bag
- Run it through to the end of the tubing and close clamp
- Let it sit for ½ hour in the sink
- Empty bag out and rinse with warm water as above

CLEANING SYRINGE:

- Remove plunger from the syringe and wash both parts in warm soapy water
- Rinse well with warm water
- Air dry on clean towel
- Clean daily and after each time medication given

Feeding container and its tubing should be replaced with a clean set every 24 hours

Syringes should be changed every 2 weeks if giving medication through it or monthly if only flushing feeding tube

POSITIONING DURING FEEDING:

- DO NOT lie flat when feeding
- For night feeds minimum 30 degrees propped up if sleeping (2 pillows)
- You may sit up in a chair or propped up in bed at 45°
- Stay upright for at least 30 minutes after feed is finished
- If you start coughing, choking or have difficulty breathing, stop your feed and call your doctor

HOW TO PREVENT A BLOCKED TUBE:

- Always crush medication well before giving through your feeding tube
- Always flush your feeding tube before and after your feeds. This will help keep the tube clean and prevent formula buildup
- Always flush your feeding tube before and after medication
- Always flush your feeding tube every 4 hours or 8 hours over night

UNCLOGGING A FEEDING TUBE:

- Check to see if feeding tube is kinked
- Try flushing your tube with warm water two or three times. Use a syringe when flushing
- Push water gently and then increase pressure for a few 5 seconds
- Pull back a few times for a few minutes
- If unable to clear wait 15 minutes and try again
- Pancrelipase (Creon 10) or Sodium Bicarbonate
 Crush 1 tablet, mix with water and syringe through clogged tube slowly
- Maximum 3 tablets per day
- If you cannot clear the blockage, call your home care nurse, family doctor or go to the nearest hospital

DO NOT PUT ANY OBJECT INTO THE TUBE TO TRY AND CLEAR BLOCKAGE

BUYING YOUR FORMULA:

The enteral feed and supplies ordered by the hospital dietitian may be provided

for you by your local Community Care Access Centre (CCAC). Your hospital CCAC case manager will assess your case and inform you of this situation.

The enteral feed can be obtained through local pharmacies if not covered by CCAC.

Call your pharmacy ahead of time to ensure they have your formula in stock.

LIFE WITH A FEEDING TUBE:

MOUTH CARE:

- Mouth care is very important
- Don't forget to brush your teeth and tongue at least 3 times a day

ACTIVITY:

- Slowly increase your activity; Start by taking short walks to help build up your strength, improve circulation
- No strenuous activity or sports until cleared by your doctor
- No heavy lifting for 4 to 6 weeks. Nothing more than a bag of groceries: 10 pounds or 4 kg

SHOWER/BATHING:

- You may shower or bathe.
- Use mild soap to prevent irritation
- Ensure tube feeding end is closed/clamped
- Remove your dressing from around tube first, bath, dry area well and apply new dressing if required

TRAVELING:

Short, Long or Local Trips:

- Make a list of items you will require ahead of time
- Pack formula and supplies
- Take extra supplies with you



Out of Country Trips:

- Plan a few weeks ahead
- Make a list of items you will require
- If travelling overseas you will require an adapter; you will have to purchase an adapter especially for your pump
- Easiest method is to run your pump on a battery. While you are still home run your infusions on battery to see how long they will last and then pack accordingly.
 (9V batteries can be purchased in most countries)
- Another option would be to infuse feed by gravity feeding
- Pack 2 days of enteral supplies and keep this bag with you
- Pack remaining supplies in suitcase
- Always pack extra supplies for emergencies
- Extra weight of luggage for pump, formula and supplies
- Travel letter indicating medical needs
- Travel insurance

Double check with Airport security regarding restrictions with liquids in your carry-on luggage

Important Information:

- Speak with your home care nurse about how you can purchase supplies if needed
- Doctor's number for emergencies
- Place a copy of your doctor's letter in your supplies and have one with you
- Pharmacy phone number
- List of medications
- Know where the nearest hospital is

SWIMMING:

Once area around the tube site is well healed;
 speak with your doctor first



- Only if water is safe; salt water or ocean is considered the safest; then pool water
- Least safe place to swim is pond or lake due to high bacterial content
- Cover feed tube site with tegaderm or special pouch which you can get from an Enterostomal Nurse

CHECK WITH YOUR DOCTOR FOR CARE OF TUBE PRIOR TO SWIMMING

You can read more about travel and swimming at the Oley Foundation: www.oley.org

CALLYOUR DOCTOR IF ANY OF THE FOLLOWING OCCURS:

- YOUR TUBE FALLS OUT, PLACE A CLEAN DRY GAUZE OVER AREA AND GO TO EMERGENCY. IT IS NOT LIFE THREATENING.
- Your tube is clogged and you cannot unclog it
- Your tube is longer or shorter than usual
- Your feeding tube site changes in color, is warm to touch, or is oozing liquid
- You have any abdominal pain
- You have nausea and vomiting for 1 day
- You have diarrhea for more than 2 days
- You are constipated for more than 3 days
- You have a temperature of more than 38.5°C or 101°F
- You have difficulty breathing

If you have any questions regarding your surgery, please contact your surgeon

Michael Garron Hospital | Toronto East Health Network

825 Coxwell Avenue, Toronto, Ontario, M4C 3E7

www.tehn.ca

Developed by Anita Brown RPN, IBCLC, Denise Roberts RN, Chris Saby RN.

Consulted with Jessica Quan Registered Dietician; Irene Smith RN CCAC Copyright 2012

Photographs included in pamphlet are owned by the clinicians who provided them. They may not be copied or reproduced.

References:

Brunner & Suddath's Text Book of Medical Surgical Nursing Oley Foundation www.oley.org

BC Home Parenteral & Enteral Nutrition (BCHPEN) Program www.bchomenutrition.org

Dietitian's Guide to Tube Feeding for Patients and Families; TEGH Community Care Access