

# Tube Feeding General Information

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# Tube Feeding General Information

## Contacts

Health Care Provider	Name	Location	Phone #
Dietitian			
GI Doctor/Endoscopist			
Emergency Department			
Community Health Centre			
Pharmacist			
Other/Surgeon			

### Contact your dietitian if you have questions about:

- Ordering formula and tube feeding supplies
- Weight loss or weight gain
- When you may start eating again and how to start eating again
- Diarrhea (loose stools) or constipation (not being able to poop)

### Contact your family health care provider or GI doctor if you have:

- Questions about:
  - › care of the tube site
  - › placement of the tube (GI doctor)
  - › replacing the tube (GI doctor/surgeon)
  - › medications
- Moderate diarrhea for more than 5 days or severe (very bad) diarrhea for more than 12 to 24 hours
- Nausea (feeling sick to your stomach) or vomiting (throwing up)
- Fever (temperature that is 38 °C or 100.4 °F, or higher)
- Abdominal (stomach area) discomfort or pain
- Constipation (fewer than 3 bowel movements in a week, or stool that is hard and difficult to pass)

### Contact your pharmacist if you have questions about:

- Medications

## My feeding tube information

Type of tube: \_\_\_\_\_ Tube size: \_\_\_\_\_

Adapter size: \_\_\_\_\_ External bolster position: \_\_\_\_\_

Inserted by: \_\_\_\_\_ Date inserted: \_\_\_\_\_

Doctor's phone: \_\_\_\_\_

My tube should be replaced: \_\_\_\_\_

### To replace a broken adapter:

Call Shoppers Drug Mart at 902-473-7096 at the Halifax Infirmary site of the QEII, and ask for Home Health Care. You can also call the office of the doctor who placed your feeding tube.

Call your dietitian if you have any questions about the choice of formula.

### Your tube feeding is given by either:

#### Gravity/intermittent:

- › Feedings are usually taken as 3 or 4 meals a day, about 4 hours apart.
- › You will need \_\_\_\_\_ cans of formula given \_\_\_\_\_ times a day.
- › Formula: \_\_\_\_\_
- › Each feeding will take \_\_\_\_\_ minutes.
- › Flush with \_\_\_\_\_ ml of water after each feeding to keep the tube from clogging.
- › Your dietitian may suggest giving more water to meet your fluid needs.

**OR**

#### Pump:

- › Give \_\_\_\_\_ ml an hour for \_\_\_\_\_ hours a day.
- › Formula: \_\_\_\_\_
- › Start time: \_\_\_\_\_ End time: \_\_\_\_\_
- › Flush with \_\_\_\_\_ ml of water \_\_\_\_\_ times a day.
- › **Your dietitian suggests you can have \_\_\_\_\_ by mouth.**

## Skin care

The skin around your feeding tube (exit site) should be cleaned once a day. You should clean it more often if there is any drainage or weeping. This will help to prevent skin irritation.

- Gather the supplies you need for cleaning with Method A **OR** Method B:

Method A (for first week or until healed)	Method B (for routine care after the site has healed)
Saline solution	Mild soap
Q-tips®	Warm water
4 pieces of 2-inch x 2-inch gauze	Clean facecloth and towel

- Wash your hands.
- Check the exit site for any drainage, redness, tenderness, swelling, skin breakdown, or a hard lump. If you notice more drainage, a break in your skin, or other changes, call your family health care provider for advice.



Some feeding tubes have a stitch holding them in place. If your tube has a stitch and it gets loose, call your family health care provider or surgeon.

### To clean your skin using Method A:

- Use a Q-tip® or piece of gauze to clean around the tube with saline.
- Start at the exit site and move outward to clean an area of about 4 inches.
- Repeat this 2 or 3 times, using a clean Q-tip® or piece of gauze each time.
- Use a Q-tip® or gauze to clean the outside of the tube with saline. Start at the exit site and wipe outward about 3 inches.

### To clean your skin using Method B:

- Clean around the tube with warm, soapy water and a clean facecloth.
- Start at the exit site and move outward to clean an area of about 4 inches. Repeat this 2 or 3 times, rinsing the facecloth each time.
- Use a facecloth to clean the outside of the tube with warm soapy water.
- Start at the exit site and wipe outward about 3 inches.

## Notes:

- Always remember to wash your hands before touching your tube.
- Your initial tube will have a dressing on it for 24 to 48 hours (1 to 2 days), then the area where the tube is placed should be **left open to air** which helps the stoma (opening) to heal well and stay healthy.
- Some people use tape to help hold their tube in place. Your nurse will go over the types of tape you can use.
- Some tubes should be gently turned every day to prevent damage to the skin around the tube. Your nurse will tell you if you need to do this. This starts 24 hours (1 day) after your tube placement. Unless you have sutures (stitches), “G” tubes are to be turned but “GJ/J” tubes are not to be turned (rotated).
- Measure the length of your tube before using it. If your tube looks longer than usual or falls out, call your doctor or go to the nearest Emergency Department. If the tube falls out, cover the exit site with a clean towel or dressing.
- Some tubes have an external bolster that may need to be repositioned if your weight changes. Your nurse will tell you if you need to do this.
- You can shower the day after your tube was placed but do not spray water directly on the exit site until it has healed. You can bathe and swim once the exit site has healed. When bathing and swimming, cover the exit site with a clear plastic dressing or Saran™ Wrap and tape. Always dry the area after a shower, bath, or swim.
- Make sure the tube/device is supported and sealed appropriately.
- Make sure to flush the tube before and after medications, enteral tube feeds, and as prescribed. Use an appropriate volume of water to use as a start/stop flush action to create a turbulent flow.
- Keep the stoma clean and dry.
- Make sure there is a distance of 2 to 5 mm from the external flange to the skin level. Readjust (if shown), if needed. Check both lying and sitting.

## **Flushing your feeding tube**

- Flushing your feeding tube regularly with water will help to keep it from clogging (“GJ/J” tubes are to be flushed more frequently).
- You will usually start flushing with clean drinking water on the day the tube is inserted. You should continue flushing at least twice a day until you are regularly giving formula through the tube.
- If your feeding tube is being used for feedings, it should be flushed before and after every feeding.
- Feeding tubes are not usually used for feedings for the first 24 hours after they have been inserted.
- Flush your tube at: \_\_\_\_\_ morning \_\_\_\_\_ evening

### **To flush the tube:**

- Put \_\_\_\_\_ ml of room temperature water in a 60 ml syringe.
- Clamp or pinch the feeding tube so fluids do not spill in the tube.
- Open the tube by opening the tab on the adapter or removing the plug.
- Attach the syringe to the feeding tube.
- Unclamp or stop pinching the feeding tube.
- Push on the plunger of the syringe.
- Clamp or pinch the feeding tube.
- Remove the syringe from the tube.
- Close the feeding tube by closing the tab on the adapter or replacing the plug.
- Rinse the syringe well with clean, cool water and let it air dry.
- Use the syringe for 2 weeks, then replace it.

### **To care for your extension tubing and feeding bags:**

- Wash with warm, soapy water after each use.
- Put them in the fridge when not in use.
- Change out once a month.

**If you have problems flushing your tube, call your GI doctor, family health care provider.**

# Home Tube Feeding Record (“G” or “J” tubes)

Fill this record in each day so you can follow your progress and note any problems.

Try to weigh yourself once a week.

Your weight at discharge was \_\_\_\_\_ kilograms/\_\_\_\_\_ pounds

The length of the tube from the exit site is \_\_\_\_\_ cm/\_\_\_\_\_ inches

Date	Amount of formula	Food record (if this applies to you)	Weight	Tube placement checked	Length of tube from exit site	Concerns



## Giving medications through a feeding tube

Your pharmacist or nurse will tell you which medications can be crushed, and whether capsules can be opened and the contents mixed with water. If a liquid medication is available, it should be ordered instead. **Do not add medications with tube feeding formula.**

**To give medication, gather the supplies you need:**

- › 2 - 60-ml Luer-Lok™ syringes with adapters

**OR**

- › 2 - 60-ml catheter tip syringes

**AND**

- › 1 cup water at room temperature (use safe drinking water)
  - › cup for mixing medication
  - › equipment for crushing medication (such as a cup and spoon)
  - › medication
- Wash your hands.
  - Mix medication with \_\_\_\_\_ ml of water. Stir well until dissolved.
  - Draw up medication into one syringe. Draw \_\_\_\_\_ ml water into second syringe.
  - Sit upright or raise the head of the bed to at least 30 degrees. **Do not lie flat for 30 to 60 minutes after giving the medication.**
  - Check for placement of the feeding tube by measuring the length of your tube.
  - Clamp or pinch the feeding tube, and open the tab on the adapter or remove the plug.
  - Flush the feeding tube with \_\_\_\_\_ ml of water.
  - Give medication into the feeding tube.
  - After giving the medication, flush with \_\_\_\_\_ ml of water.
  - Clamp or pinch the feeding tube, remove the syringe, and close the adapter or replace the plug.
  - Rinse the syringes well with clean, cool water and let air dry. Use the syringes for 2 weeks, then replace them.

**\*If more than one medication is given at the same time, flush the tube with 10 to 30 ml of water between medications.**

**\*Liquid medications should be mixed with water to prevent clogging and/or a laxative effect.**

# Medication Record

(Medications should be ordered in liquid form if possible.)

<b>Name of medication</b>	<b>Dose</b>	<b>Form (liquid, capsule, crushed)</b>	<b>Reason for taking medication</b>	<b>Time(s) to take medication</b>

## What if I have a problem?

Problem	What does this mean?	What should I do?
Bloating, cramping, gas, upset stomach	<ul style="list-style-type: none"> <li>• Air was in the tube before feeding started.</li> <li>• You may be taking the formula too fast or too much in one sitting.</li> <li>• Cold formula. Slow emptying of the stomach.</li> </ul>	<ul style="list-style-type: none"> <li>• Remove air from the tube before feeding. “Vent” your feeding tube (as shown by your nurse or doctor) to help relieve gas.</li> <li>• Slow the rate of feeding. Try taking a smaller amount of formula more often.</li> <li>• Walking, if you are able, can help relieve gas. Stay sitting or keep your head at a 30 to 45 degree angle during feedings and for 30 minutes after. If the problem continues for more than 2 days, talk to your dietitian or doctor.</li> </ul>
Drainage (pus), redness, tenderness, or a hard, painful lump around the exit site.	<ul style="list-style-type: none"> <li>• You may have an infection.</li> </ul>	<ul style="list-style-type: none"> <li>• Contact your GI doctor or family health care provider. If you are not able to contact either your GI doctor or your family health care provider, go directly to the nearest Emergency Department.</li> </ul>

Problem	What does this mean?	What should I do?
Leaking around the feeding tube.	<ul style="list-style-type: none"> <li>• The bolster on the tube may be loose.</li> <li>• You may need a larger tube.</li> <li>• One way valve may have broken.</li> <li>• You may have lost or gained weight.</li> <li>• You may have constipation.</li> <li>• Running feeds may be too fast.</li> </ul>	<ul style="list-style-type: none"> <li>• If you have been shown how, tighten the bolster.</li> <li>• Contact your GI doctor or family health care provider.</li> <li>• Tape your tube to avoid pulling.</li> <li>• Clean the exit site more often. (A small amount of drainage can be normal.)</li> <li>• If leaking continues or gets worse, call your GI doctor or family health care provider.</li> </ul>
Tube falls out.		<ul style="list-style-type: none"> <li>• Cover the exit site with gauze or a clean towel. Within the hour, call your GI doctor, family health care provider, or go to the nearest Emergency Department.</li> </ul>
Adapter leaks.	<ul style="list-style-type: none"> <li>• Adapter or cap may be loose or broken.</li> </ul>	<ul style="list-style-type: none"> <li>• Replace the adapter (see page 2). Secure cap with tape and call the office of the doctor who placed your feeding tube.</li> </ul>
Coughing or choking during or soon after feeding.	<ul style="list-style-type: none"> <li>• Lying flat in bed during or immediately after feeding.</li> <li>• Slow emptying of the stomach.</li> </ul>	<ul style="list-style-type: none"> <li>• Do not lie flat during feeding and for at least 30 minutes after. Sit up or raise head of bed to 30 to 45 degrees.</li> <li>• Slow the rate of feeding.</li> </ul>

**Supplies available at:**

Shoppers Simply Pharmacy™ (QEII)

Victoria General (VG) site:

› 902-473-7210

Halifax Infirmary (HI) site:

› 902-473-7096

Lawtons - Spring Garden Road:

› 902-422-3806 extension 5

Shoppers - Joseph Howe Drive:

› 902-443-6084 extension 4 or 5

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For more information, go to <http://library.novascotia.ca>

Connect with a registered nurse in Nova Scotia any time: call 811 or visit <https://811.novascotia.ca>

Learn about other programs and services in your community: call 211 or visit <http://ns.211.ca>

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*Prepared by: GI Clinic*

*Designed by: NSHA Library Services*

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WI85-1189 © June 2023 Nova Scotia Health Authority

The information in this pamphlet is to be updated every 3 years or as needed.

