

Care Gram

Gastrostomy Tube Feeding

What Is a Feeding Tube?

A feeding tube is inserted directly into the stomach through a hole in the abdomen. It may be called a PEG tube or a G-tube. It is used to give you a complete formula when you are unable to eat and drink enough for adequate nutrition. The formula contains protein, carbohydrates, fat, minerals, vitamins, and water. You also can take liquid or crushed medications through the tube if you are unable to swallow well.

The formula is given through a big syringe. This means that a certain number of times a day, you will give yourself the formula through the tube. You will be told the amount of formula and the number of times a day by your doctor.

These are the general steps to follow when giving yourself a feeding. The details are described in this instruction sheet.

1. Check the tube
2. Check the residual
3. Flush the tube
4. Give the feeding and/or the medication

Before the Feeding

- Always wash your hands and the top of the formula can (if using a can).
- Sit in a chair in an upright position or prop yourself up in a half-sitting position (at least a 30-degree angle).
- Do not feed yourself while lying flat.
- Stay sitting up or at a 30-degree angle for at least 1 hour after the feeding or after taking medicine through the tube.

Gather and place your supplies on a small table, and make sure all are clean.

For a bolus feeding, gather these supplies:

- Formula
- A clean, large syringe
- A bowl of warm water
- Medical tape
- A measuring cup or small bowl

For a continuous feeding, gather these supplies:

- Formula
- A clean, large syringe
- A bowl of warm water
- Medical tape
- A clean feeding bag, tubing, and pump
- A measuring cup or small bowl

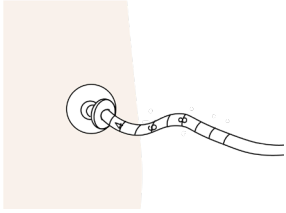


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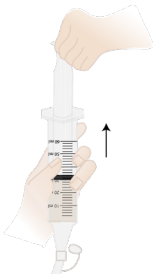
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Checking the Tube



- Measure the tube or look at the mark on the tube where the tube enters the skin. Do this when you first get the tube and then every week. If the measurement is different, call your doctor.



- Remove the plug at the end of the tube. Insert a syringe. Pull back on the plunger. The fluid you get back should look like formula or stomach contents. It may be clear or yellow. This tells you the tube is in the stomach.

Checking for Residual

Always check for residual before a feeding. This is a different step than checking the tube.

1. Remove the plug at the end of the tube.
2. Insert the syringe into the tube.
3. Pull back on the plunger and pull out the fluid in your stomach.
 - If you get between 60 and 100 mL, stop and gently replace the residual fluid that was pulled out. You should wait for 1 hour after replacing the fluid and then try again.
 - If you get less than 60 mL, you can give yourself the feeding.
4. Flush with 20 to 30 mL of warm water.

Flushing the Tube

Always flush the tube with 20 to 30 mL of warm water once a day. Also, flush with at least 5 mL of warm water between medications. This is to prevent clogging of the tube.

Bolus (Syringe) Feeding

Before this, you should have already washed your hands, checked for tube placement and residual, and flushed the tube. If you have an upset stomach or a full feeling, wait 30 to 60 minutes before giving the feeding.

1. Remove the plunger from the syringe.
2. Insert the tip of the syringe into the end of the tube.
3. Hold the syringe above your stomach.
4. Pour formula into the syringe.
5. Raise or lower the syringe to control the speed of the fluid that goes into your stomach. It should take 15 to 30 minutes for a feeding.
6. Rinse the tube with 20 to 30 mL of warm water.



Call your doctor if you have any problems with the feeding.

Giving Medications

- Use liquid medications whenever possible to prevent clogging the tube.
- Ask your doctor if you can have your medications in a liquid form.
- If the medicine only comes in a tablet, crush the tablet into a fine powder and mix with water. Do not crush enteric-coated tablets, timed-release tablets, or capsules.
- Flush the tube with 5 mL of warm water between medications.
- Flush with 20 to 30 mL of warm water before and after all medications.
- Do not mix medications together.
- Do not put medication in the formula.

Skin Care

You should clean the skin around your tube at least once a day. If possible, do not cover or place gauze between the skin and the bumper. You may want to tape the tube to your abdomen to prevent pulling on the tube. Use a skin barrier wipe on the skin where the tape will be placed.

1. Wash your hands first.
2. Use soap and water on a clean cloth and wash around the tube.
 - If you have a disk around the tube, use cotton swabs to clean the skin under and around the disk. The disk should not be tight against the skin. It can be pulled up slightly to allow about 1/4 inch space from the skin. This lets the tube move up and down slightly.
3. Rinse well with water on another clean cloth. Allow to dry completely.
4. Gently twist the tube daily to prevent scab formation.

Mouth Care

- Even though you are not able to eat, you still need to brush your teeth, gums, and tongue at least twice a day.
- You can always rinse your mouth with mouthwash or water as needed.
- If your mouth or lips are dry, ask your doctor about a lip balm or moisturizer.

Mealtimes

Even if you are not able to eat, you may still want to join your family at mealtimes. Some people take their tube feedings at meal times while others prefer to be alone – it is up to you.

Call Your Doctor if You Have:

- Redness or rash around the tube
- Swelling around the tube
- Pain or soreness at the tube insertion site
- Unusual drainage around the tube insertion site
- Problems with feeding or flushing the tube
- Any other concerns or questions