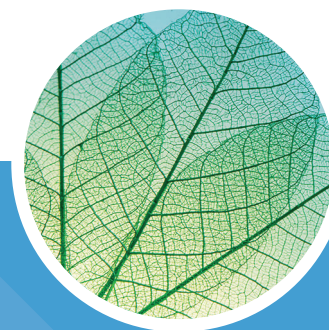


# Home Tube Feeding



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## How To Use This Booklet

This booklet will help you better understand and manage your tube feeding at home. This booklet is meant to be a general guide and is not a substitute for medical advice.

Talk with your health care provider if you have questions about your care.

Order tube feeding supplies 3 to 4 business days before your supply runs out.

Call your Allina Health Home Care dietitian at 612-262-7044 if you have questions about your nutrition and tube feeding needs.



[allinahealth.org](http://allinahealth.org)

## My Care Plan

Feeding tube manufacturer \_\_\_\_\_

Product number \_\_\_\_\_

Home care nurse \_\_\_\_\_

### Tube Type:

- G (gastrostomy or PEG)       J (jejunostomy)  
 GJ (gastrojejunostomy)       nasogastric/nasojejunal

### Feeding Method:

- gravity drip       pump       syringe (bolus)

### Feeding Schedule:

Formula name \_\_\_\_\_

Amount of formula/day \_\_\_\_\_

Feeding schedule \_\_\_\_\_

\_\_\_\_\_

Amount of each feeding \_\_\_\_\_

## Symptom Log

Use this key to mark any time you have the symptom:

D = diarrhea C = constipation N = nausea V = vomiting.

Month: \_\_\_\_\_

1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31	Call your dietitian, home care nurse or health care provider if you have any concerns or questions about tube feeding.			

## Flush Amounts

Use a 30 mL (milliliter) or larger syringe:

\_\_\_\_ mL before and after a feeding

\_\_\_\_ mL before and after medicine given.

During continuous feeding \_\_\_\_ mL every \_\_\_\_ hours.

## Storing Formula

- Keep the liquid formula in a cool, dry place. Open cartons of formula may be kept at room temperature for 8 to 12 hours or in the refrigerator for up to 24 hours.
- Check the expiration date on your formula. Throw it away if it is past the expiration date.

## Formula Hang Time

- For sterile liquid formulas from a carton, a 12-hour hang time is recommended.
  - Keep the formula at room temperature and handle as little as possible.
  - Change the tubing sets and bags every 24 hours.

## Tube Site Care

### Tube clogs

- If the tube becomes clogged, switch between flushing with warm water and pulling back the plunger on the syringe while it is connected to the feeding tube (called aspirating the syringe).
  - Do not give pureed foods or liquids through the tube.
  - Do not mix anything new into your formula without asking your health care provider.
- If your tube is still clogged after 4 to 6 hours, call your health care provider. You may need to go to your clinic or the Emergency Department to get your tube unclogged or replaced.

### If the PEG or GJ falls out

- Cover the abdominal gastrostomy site with a clean gauze pad. A new tube should be placed by a qualified health care provider within a few hours. The opening into the stomach starts to shrink right away.
- **If a replacement cannot be arranged quickly at home, call your health care provider or go to the nearest Emergency Department.**

## Constipation

Constipation means having bowel movements less often and stools that are very hard and difficult to pass. Each person has his or her own normal pattern. Constipation may cause diarrhea if a hard lump of stool blocks the lower bowel.

### When to call your dietitian

- constipation becomes uncomfortable
- you have not had a bowel movement in several days.

## Commonly Asked Questions

### How often should I change feeding bags?

Use a new feeding bag or bolus feeding syringe every day. Irrigation syringes can be used for 5 to 7 days before being replaced.

### What should I do if I have problems tolerating the tube feeding (nausea, vomiting, diarrhea or constipation)?

Call your home care nurse, health care provider or dietitian.

### What should I do if my health changes or there are issues getting formula?

Give the tube feeding as recommended by your dietitian or health care provider.

Call your dietitian at 612-262-7044. You may be asked to get an updated prescription from your provider if your tube feeding routine needs changes.

## Diarrhea and Constipation

It is normal to have changes in bowel movements when on tube feeding formulas. These changes include diarrhea and constipation. In general, changes are mild and last only a couple of days.

### Diarrhea

Diarrhea means lots of watery bowel movements or stools.

### What to do if you have diarrhea

- For adults, call your home care nurse if you have more than 5 watery bowel movements for more than 2 days.
- For infants or children, call your home care nurse after 1 day of diarrhea.
- Give the tube feeding more slowly if possible.
- Check the feeding tube for correct position.
- Keep track each day of the number of bowel movements and other symptoms (such as cramping) and when they occur.
- Record your weight each day.
- Ask your dietitian if any medicine you are taking could cause diarrhea or if a change in your type of formula or method of feeding might help.

## Connection problems

- **The tip of the feeding set does not stay securely in place in the feeding tube (becomes disconnected):**
  - Use a cotton-tipped swab moistened with water to “scrub” the inside of the feeding tube adapter. This helps to remove the oils that build up. Make sure the tip of the feeding set is also clean.
  - Check the feeding tube adapter for wear and replace if necessary. You may also try taping where the feeding tube adapter and feeding set join. Call your home care nurse if this does not help.
- **Feeding tube adapter starts to show signs of wear (stretching or cracking):**
  - For PEG tubes and balloon gastrostomy tubes with a removable adapter, replace the old adapter with a new one.
  - For nasogastric and balloon gastrostomy tubes with built-in adapters, insert a new adapter. This is a temporary solution. Replace the feeding tube when possible. Call your home care nurse to ask what to do next.

## Bolus or Syringe Feeding

### Using a bolus or syringe to feed

In bolus or syringe feeding, the syringe is a funnel which directs formula into the feeding tube.

1. Clean the work area.
2. Gather all equipment, formula and syringe and check cleanliness.
3. Wash and rinse your hands well.
4. Check the position of feeding tube.
5. Use the syringe to flush the feeding tube with lukewarm water.
6. Shake the carton well. Wipe off the top of the formula carton with a clean damp paper towel. Check the bottom of the carton for expiration date.
7. Remove the plunger from the syringe.
8. Place the tip of the syringe into the feeding tube.
9. Hold the syringe and feeding tube straight up.
10. Using the syringe as a funnel, slowly pour formula into it.
11. Slowly push the syringe into your feeding tube until all of the formula has been given.
12. At the end of the feeding, disconnect the syringe from the feeding tube. Use the syringe to flush the feeding tube with lukewarm water.
13. Cover and refrigerate opened cartons.  
Use or throw away any opened formula within 24 hours.
14. Wash all equipment after the feeding.

**Tip:**

Do not give a tube feeding if you have an upset stomach or if you are vomiting.

To reduce the chance of aspiration of tube feeding formula:

- Check the feeding tube for correct position during site care and before each feeding.
- Sit upright in a chair, propped up in bed, or on a couch in a half-sitting position during the feeding and for at least 30 minutes after a feeding.
- Elevate your head to with 1 to 2 pillows if you have a feeding when you are sleeping.

## Nausea and Vomiting

Nausea (feel like throwing up) and vomiting (throwing up) are rarely caused by tube feeding. They are usually caused by changes in your health, medicines or treatment.

### If you have nausea or vomiting

- **Do not** give the formula. Never force a feeding if your stomach is upset.
- **Call your health care provider or go to the Emergency Department if nausea or vomiting does not stop after 24 hours.**

### When to call your home care nurse

Call your home care nurse if you have:

- unusual weakness, fever or other symptoms
- symptoms of dehydration such as:
  - weight loss of more than 2 pounds per week
  - smaller than normal amounts of urine throughout the day (Urine may be darker in color and smell stronger.)
  - thirst
  - dry mouth, dry cracked lips.



## Mouth Care

### Why mouth care is important

Regular mouth care will keep your breath fresh and reduce dental problems. Mouth care prevents build-up of bacteria that can cause infections in the mouth and throat.

Follow the steps below.

1. Brush your teeth, gums and tongue (or clean your dentures) at least twice a day.
2. Use a mouthwash to freshen your breath if you wish.
3. Chew gum or suck on hard candy or ice chips to help keep your mouth moist. Check first with your home care nurse.
4. Apply a lanolin or petroleum jelly moisturizer to your lips.

## Aspiration

### Aspiration during tube feeding

Aspiration of tube feeding means that the formula is accidentally inhaled into your lungs.

**It is a dangerous situation that needs medical attention right away.**

Vomiting (throwing up) can increase the chance of aspiration and needs to be treated right away.

**If you suddenly have unusual choking, trouble breathing or think you have aspiration of tube feeding formula, stop the tube feeding and call your doctor right away.**

## Gravity or Intermittent Feeding

Gravity feeding uses a feeding set with an attached bag that holds the formula. Gravity pulls the formula through the feeding set. Intermittent feeding is given in short periods of time during the day.

### If using the gravity syringe method

- Connect the syringe to the feeding tube and remove the plunger from the syringe.
- Pour the formula into the syringe and wait while gravity helps to empty the syringe.
- You may adjust the height of the syringe to your feeding tube to speed up or slow down how fast gravity pulls the formula into your tube.

1. Clean the work area.
2. Gather all equipment and check each for cleanliness.
  - feeding set with attached bag or container
  - bolus feeding syringe
  - IV pole
  - \_\_\_\_\_
3. Wash your hands.
4. Check feeding tube position.
5. Using a syringe, flush feeding tube with lukewarm water.
6. Shake formula well. Wipe off the top of the formula carton with a clean damp paper towel. Check the bottom of the carton for the expiration date.
7. Close the roller clamp on the feeding set (roll down).

8. Pour the formula into the bag and hang it on the IV pole.
9. Remove the plastic cover from the tip of the feeding set.
10. Hold the tip over a waste container.  
Open the roller clamp (roll up).
11. Fill the feeding set with formula, then close (roll down) the roller clamp.
12. Insert the tip of the feeding set adapter into the feeding tube. Tape in place.
13. Open the roller clamp and start the feeding. Allow about 30 minutes for the feeding. Opening the roller clamp makes the formula run faster. Closing the roller clamp slows it down.
14. Always sit upright in a chair, propped up in bed or on a couch in a half-sitting position. Standing or walking during the tube feeding is also OK if your dietitian approves.
15. At the end of the feeding, close the roller clamp and disconnect the feeding set from the feeding tube. Use the syringe to flush the feeding tube with lukewarm water.
17. Cover and refrigerate open cartons. Use or throw away any opened formula within 24 hours.
18. Wash all equipment used after each feeding.

**Tip:**

Do not fill entire drip chamber.

**Tip:**

If you have a feeling of fullness that is uncomfortable, slow down the feeding or wait 1 hour before giving more feeding and disconnect the feeding set from the feeding tube. Use the syringe to flush the feeding tube with lukewarm water. Close the feeding tube.

## Pump Feeding

In pump feeding, a pump moves the formula through the feeding tube and into the stomach or small intestine.

### Before each pump feeding

1. Wash your hands.
2. Check tube placement.
3. Flush your feeding tube with lukewarm water.

These steps are general guidelines. Check the manufacturer's instructions for details about your feeding pump.

### How to pump feed

1. Hang the filled feeding container on an IV pole or place it in a carrier.
2. Load the feeding set into the pump.
3. Remove the cap from the end of the feeding set.
4. If your feeding set has a clamp, open it completely.
5. Prime the feeding set.
6. Insert the tip of the feeding set into the feeding tube.
7. Turn on the pump and set the flow rate and dose if needed.
8. Start the pump.
9. When the feeding container is empty or the dose has been fed, stop the pump.
10. Flush your feeding tube with lukewarm water. When the water is gone, stop the pump.

Throw away the container and feeding set every 24 hours. Ask your health care provider about care of the container and feeding set between feedings.