Feeding Tube Care and Use
(Gastrostomy Tube & PEG Line)

People who have trouble swallowing or cannot take food or medication by mouth are sometimes given feeding tubes. A feeding tube can go into the nose and down to the stomach or through the skin in the *abdomen* (belly) and into the stomach or small bowel. Some of the names of these feeding tubes are: gastrostomy tubes, PEG lines, nasogastric tubes and gastrojejunostomy tubes.

Liquid or food that has been *pureed* (made into a thick, smooth soup), along with medications, may be given through the tube. There are several ways to give the liquid food, and there are several kinds of prescribed foods. Your caregiver will arrange for you to get a liquid food in the right amounts for you.

EQUIPMENT NEEDED FOR TUBE-FEEDING

- A 60 ml syringe.
- Liquid food suggested by your.
- Clamp to adjust the rate of giving the food.
- Specific plug to put into the feeding tube tip during the times when you are not getting food or medications.
- A place to hang your food container (an IV pole or a wall hook) so it can operate by gravity while you are getting your feedings. You attach the tube from the food container to the end of the feeding tube. Your caregivers will help you with these supplies or tell you where to get them.
- You will also need to ask the doctor or nurse (or measure yourself) the length of the feeding tube from the *stoma site* (the opening in your body made for feeding) to the end of the feeding tube.

PROCEDURE FOR TUBE FEEDING

1. Wash your hands before touching the equipment, food, medicines, or the site (where the tube enters your body).
2. Check the tube placement before starting feeding by removing the plug in the end of the feeding tube, attaching syringe to feeding tube. Pull the plunger back and you will usually see some yellowish or greenish fluid, which is fluid from the stomach. This tells you the tube is in the right place, your stomach.
   - If you are able to draw back more than 150 ml, hold off on feeding or taking medications for a while because your stomach has not completely emptied from the previous feeding. Push the stomach contents in the syringe back into the tube.
   - If stomach content does not show when you pull back on the plunger, measure the length from the *stoma site* (the opening in your body made for feeding) to the end of your feeding tube. If this different than it was when the tube was placed, you should call your caregiver.
   - If at any point the feeding tube seems blocked, use your syringe and pull back on the plunger. If this does not work, try to gently force some warm cola or water through the tube. If none of these methods work, call your caregiver. It is important not to miss your medicines, food, or water.
3. If everything with the tube seems to be OK, insert the tip of the tube from the food container into your feeding tube.
4. While sitting up or with your head propped up, open your clamp slowly to adjust the rate of the feeding. If you develop coughing or have trouble breathing, stop the feeding immediately.
5. Time the feeding to last about one hour or as instructed by your doctor or nurse.
6. To keep the tube open, following the feeding, flush the tube with 30 cc of water using the syringe or container and replace the plug at the end of the feeding tube.
7. Wash out the food container with dishwashing liquid and water as you would your dishes. Rinse completely and use a clean container for each feeding. Do not leave unused food out between feedings. Refrigerate or store it as directed.

GIVING YOUR MEDICATIONS THROUGH THE TUBE

- Use liquid forms of your medications, if available.
- Some pills or tablets may be crushed and put into warm water. Do not use hot water, which could affect the contents.
- Ask the pharmacist if you can crush your pills. Do not crush capsules that have SR (sustained release) on them unless your caregiver or pharmacist says it is OK.
- After you have crushed your pills into small pieces or a powder, let the pieces dissolve in warm (**not** hot) water so that no pieces will clog your tube. Draw medication up into your syringe by pulling back on the plunger.
- Attach the syringe to the end of the feeding tube and push on the plunger to give your medication.
- Flush the tube with 30 ml of water after giving your medication. This makes sure you have received all of your medications.

CARE OF THE SKIN AROUND THE ENTRANCE OF THE TUBE

- Check the skin daily where the tube enters the abdomen for redness, *irritation* (inflammation), drainage or tenderness.
- Clean around the tube daily with soap and water or hydrogen peroxide using cotton-tipped applicators or gauze squares. Dry well following cleaning.
- Change the dressing around the tube-entry site daily or as instructed.
- Apply antibiotic ointment around the site, if directed by your caregiver.
- If the dressing becomes wet or soiled, change it as soon as convenient.
- You may use tape to fasten your feeding tube to your stomach for comfort or do as directed.

SEEK IMMEDIATE MEDICAL CARE IF:

- You develop coughing or have trouble breathing during a feeding. Stop the feeding and call your caregiver immediately.
- You notice swelling, redness, drainage or tenderness at the tube-entry site.
- You develop pain, *nausea* (feeling sick to your stomach), vomiting, diarrhea or constipation or have bleeding from around the tube site.
- The tube seems plugged and you are unable to get water through the tube.
- There is food leaking from around the tube.
- The tube falls out.

Document Released: 12/18/2006 Document Re-Released: 04/03/2008
ExitCare® Patient Information ©2011 ExitCare, LLC.