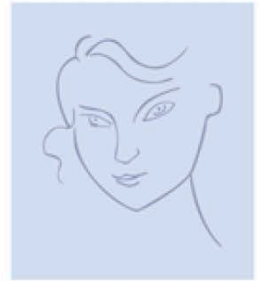


# Care of a Feeding Tube Site



If you are unable to swallow or are expected to be unable to take enough food or medications by mouth during radiation treatment, a feeding tube may be placed. A feeding tube can go into the nose or through the skin in the *abdomen* (belly) and into the stomach or small bowel. It is important that you try to eat as much as you can via your mouth if it is safe to do (only use your PEG for supplementation) so that you don't lose the use of your muscles of swallowing after your treatment is complete.

Most patients will use specially designed feeding supplements prescribed by the speech therapist and dietician down the PEG tubes. Other liquid and food that has been *pureed* (made into a thick, smooth soup), along with medications, may also be given through the tube.

## EQUIPMENT NEEDED FOR TUBE-FEEDING

- A 60 cc syringe should be available to give food.
- Add the liquid food suggested by your caregiver from a clean container.
- You should have a clamp to adjust the rate of giving the food.
- You will have a cap for the feeding tube between feeds.
- It is convenient to have a place to hang your food container (a pole or a wall hook) so it can operate by gravity while you are getting your feedings.

## PROCEDURE FOR TUBE FEEDING

- Wash your hands before touching the site (where the tube enters your body), your food or medications.
- Check the tube placement before starting feeding by attaching your syringe to your 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 150cc, hold off on feeding or taking medications for a while because your stomach has not completely emptied from the previous feeding. Put the stomach contents you removed 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 the distance from the site to the end of your feeding tube is different than it was when the tube was placed, contact your doctor.
- If everything with the tube seems to be OK, insert the tip of the tube from your food container into your feeding tube.
- While sitting up or with your head propped up, open your clamp slowly to adjust the rate of the feeding. If you develop choking or have difficulty breathing, stop the feeding immediately.
- Time the feeding to last about one hour or as instructed.
- Following the feeding, flush the tube with water to keep it open and replace the plug at the end of the feeding tube.
- 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.
- If the feeding tube becomes 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.
- Call your caregiver if none of these methods work, as it is important not to miss your medications, food or water.

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## GIVING YOUR MEDICATIONS THROUGH THE TUBE

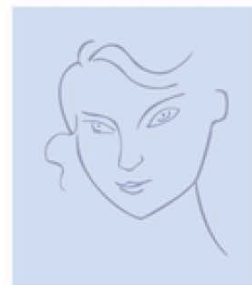
- Use liquid forms of your medications, if available.
- Pills or tablets may be crushed and put into warm water. Do not use hot water, which could affect the contents.
- Do not crush pills that have SR (sustained release) on them unless your caregiver or pharmacist says it is OK.
- After you have crushed 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 30cc 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 baby's zinc cream around the site, if the site gets red or irritated.
- 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.

## SEEK MEDICAL ATTENTION IF:

- You develop choking or difficulty breathing during a feeding. Stop the feeding and go to your nearest emergency room 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 becomes plugged and you are unable to get water through the tube.
- There is food leaking from around the tube.
- The tube falls out go into the nearest emergency room.



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