Reference:

1. BAPEN. 2017. Administering medicines via enteral feeding tubes. [Online]. Available at: https://www.bapen.org.uk/nutrition-support/enteral-nutrition/medications



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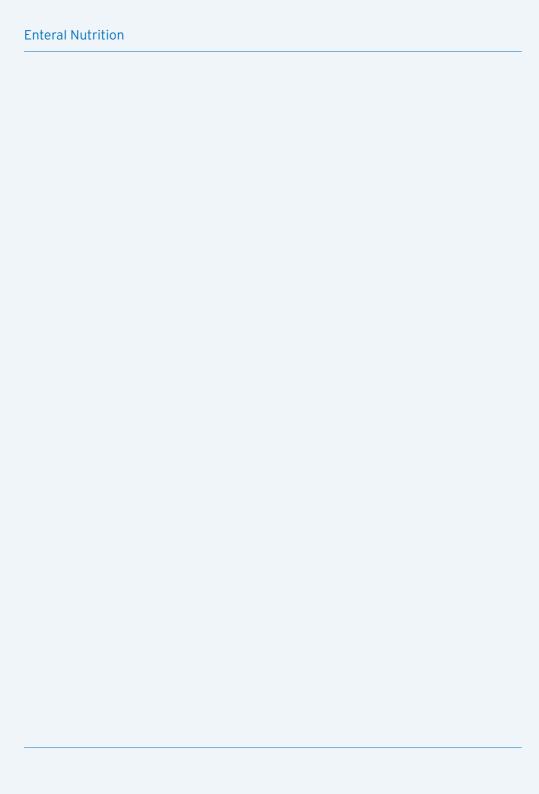
Jejunal Feeding

CARE GUIDELINES

For Patients & Carers







GP

Address

Tel. / Fax / Email

Hospital Dietitian

Address

Tel. / Fax / Email

Community Dietitian

Address

Tel. / Fax / Email

Nutrition Nurse

Address

Tel. / Fax / Email

District Nurse

Address

Tel. / Fax / Email

Nutrition Feed Company/Nurse Advisor

Address

Tel. / Fax / Email

Hospital Consultant

Address

Tel. / Fax / Email

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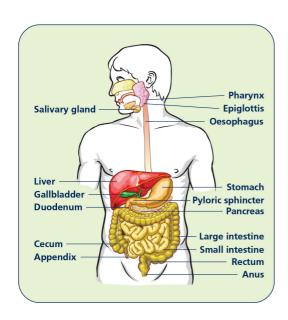
Introduction

This booklet aims to provide you with general information about your jejunal feeding tube and to answer some frequently asked questions. If you have additional questions or would like further explanation, please contact your Nurse or Dietitian who will be able to help you.

Please put this booklet in a safe place as you may wish to refer to it in the future. For additional information regarding your tube type please refer to the specific aftercare sheet.

What is jejunal feeding?

A jejunal feeding tube is a small feeding tube which is placed into the jejunum (small intestine) so that you can have feed, fluid and medication without swallowing. It will provide you with a safe and long-term method of obtaining nutrition.



How is the jejunal tube inserted?

There are different types of jejunal feeding tubes:

Nasojejunal (NJ) - is inserted into the nostril and advanced down the gastro intestinal (GI) tract into the jejunum.

Percutaneous Endoscopic Gastrostomy (PEG) tube with an Intestinal extension - if you have an existing PEG tube, a jejunal extension can be added at a later date (PEG-J).

Freka® Fine-Needle Catheter Jejunostomy (FCJ) is surgically placed via laparoscopy (minimally invasive puncture method) or laparotomy (open method).

Why do I need a jejunal feeding tube?

You are currently unable to take enough food and fluid by mouth to meet all your nutritional needs. The jejunal feeding tube will provide access for feed administration into your jejunum. A jejunal feeding tube can be used when your stomach cannot be used for feeding.

How soon after tube insertion can I begin feeding?

Feeding can start as soon as the tube is in place, but your Doctor, Dietitian or Nurse will advise you when to start feeding. The feed is introduced slowly to begin with, to allow your body to adjust.

What feed will I receive?

Your dietitian will discuss the type of feed to use, usually you will receive a prescribed, commercially produced liquid feed which contains all the essential nutrients you need on a daily basis.

You may receive part or all your daily food via your jejunal feeding tube, depending on your specific medical condition and needs.

You may also need extra fluids through your jejunal feeding tube. Water can be administered using a syringe or administration set.

Feeding regimen

Your Dietitian will prescribe the volume and rate of your feed to suit your needs. You may be fed intermittently, continuously or bolus fed during the day or overnight depending on which is best for you.

Always follow the recommended regimen. If you have any problems with the feed you should inform your

Tube care

The jejunal feeding tube should be flushed with 20ml of water (cooled boiled/ lukewarm water - according to Instructions for Use) before and after feed, medicine administration, or as directed by your local healthcare professional, to prevent tube blockage (Refer to your local hospital/community policy for the type of water recommended).

You should only use the tube to administer feed, water and liquid medicines.

Administration of medicines

All medicines should be administered in liquid form. The same applies to self medication (e.g. for a headache) and your Pharmacist will recommend a liquid form of pain relief.

Do not crush sustained-release tablets/capsules. They are unsuitable for crushing because the whole dose is released at once

Always check with your Pharmacist that your medicine can be given via the jejunal route, for the following reasons¹:

- NJ tubes have greater potential to block
- Some medicines are unsuitable for NJ administration because of how they are absorbed
- Some medicines may interact with enteral feeds

Do not add medicines to your enteral feed as it may cause coagulation of the feed and cause a blockage. Flush your tube before and after administration of each medicine. Medication should be given separately to prevent possible interaction. For further advice, please contact your Pharmacist and Nutrition Nurse.

Positioning during feeding

To prevent heartburn and reflux, feed in an upright position. For overnight feeding use supporting pillows or a backrest, if you find this uncomfortable you can raise the mattress at the head of the bed instead.

Avoid lying flat during feed administration, unless your medical condition contraindicates this.

Skincare

Hygiene is of the utmost importance as your tube is in the small bowel. Here there is no acid barrier, as there is in the stomach.

It is important that the entry site of your jejunal feeding tube remains clean and dry. Refer to your tube specific aftercare sheet for further advice on your tube care.

Frequently asked questions

Can I swim, bath or shower?

After the site is fully healed, you can swim, shower or bathe as normal. Ensure the clamp is closed. Thoroughly dry the area afterwards.

How long will the tube last?

This will depend upon the type of tube you have placed. Your healthcare professional can provide this information. Following the aftercare information will help to prolong the life of the tube.

Who do I contact if the tube gets damaged or I get a problem with the site?

Contact your local healthcare professional.

Can I go on holiday?

Enteral feeding does not stop you going on holiday but it is a good idea to have a letter from your doctor and make sure you have the necessary insurance. Contact your local healthcare professional for advice about replacement tubes and information regarding the supply of your feed.

If I cannot eat what will happen to my mouth?

Plaque can build up very quickly so it is important to brush your teeth at least twice a day. A mouthwash or artificial saliva, may help if your mouth is dry.

Are there any patient support groups available?

PINNT - Patients on Intravenous and Nasogastric Nutrition Therapy

PINNT supports people on enteral and parenteral nutrition, providing advice and local support groups.

PINNT contact information: www.pinnt.com

Accessory items

FREKA® CLICK ADAPTOR FOR FREKA® PEG INTESTINAL

DESCRIPTION

> For Freka® PEG Intestinal CH/FR 9

Pack of 15

Product code: 7981389



FREKA® Y CONNECTOR FOR CH/FR 15 PEG INTESTINAL

DESCRIPTION

> For Freka® PEG Intestinal

Pack of 15

Product code: 7981394



FREKA® REPAIR SET FOR FREKA® SURGICAL JEJUNOSTOMY, ENFIT

DESCRIPTION

> For Freka Surgical Jejunostomy CH/FR9

Pack of 1

Product code: 7981388

