



Managing your feeding tube at home

Overview

This guidebook, *Managing Your Feeding Tube at Home*, is designed to help patients and caregivers feel confident and prepared to care for a feeding tube outside the hospital. It provides clear, step-by-step instructions on daily care, troubleshooting common issues and maintaining proper hygiene to prevent infections. Whether you're new to tube feeding or adjusting to life at home, this resource offers practical tips and reassurance to support your health and well-being.

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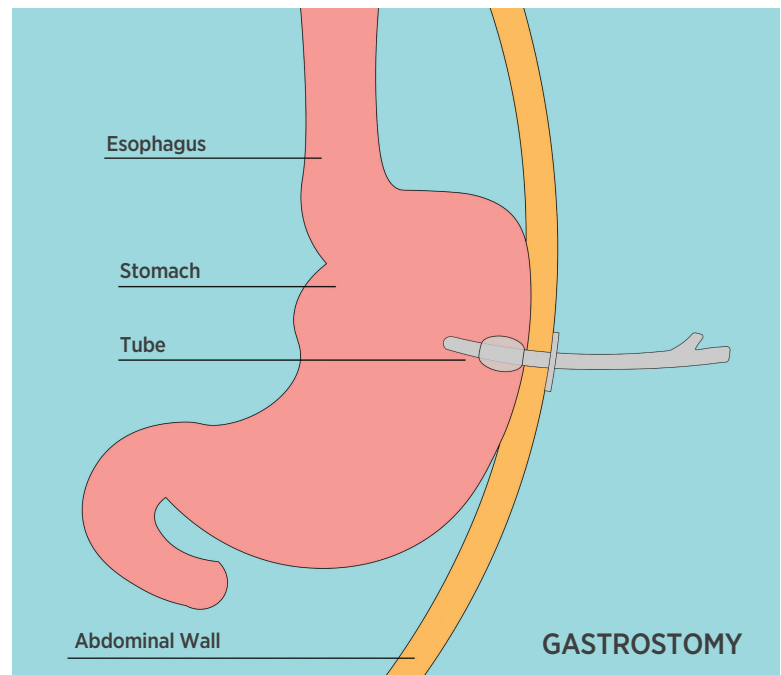
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Types of feeding tubes

With tube feeding, the mouth and esophagus are skipped.

Your feeding goes directly into either:

- **Gastrostomy tube (G-tube):** the stomach
- **Jejunostomy Tube (J-tube):** the jejunum (a section of the small intestine)



Daily care and hygiene

Cleaning the tube site

Helps prevent infection, skin irritation and odor, and ensures proper hygiene and comfort.

1. Work in a clean environment.
2. Wash your hands thoroughly with soap and warm water.
3. Gather the materials:
 - Soap
 - Warm tap water
 - Clean cloth
 - Cotton-tipped swabs
4. Inspect the area around your tube.
 - If your tube begins to drain any fluid or the area becomes swollen, red or irritated, call your nurse or provider immediately.
5. Carefully clean around your tube.
 - Start with the area next to your tube site and work in widening circles using a soapy cloth.
6. If your tube has a disk, use a cotton-tipped swab to clean under the disk.
 - Be careful not to pull your tube.
7. Wipe your skin with warm water and allow the area to air dry.

Dressing the tube site

- Your nurse will instruct you if a dressing or bandage is needed.
- Change your dressing and clean the skin around your tube site daily, or as instructed by your provider.
- Change your dressing if it becomes wet or soiled.



Performing oral care

Helps prevent infection, maintain oral hygiene and promote comfort.

Mouth care is important even if you are not eating or drinking.

1. Brush your teeth thoroughly at least twice a day.
2. Clean all surfaces, including your gums and tongue.
3. Use a toothbrush, toothpaste and mouthwash as needed.
 - If your mouth becomes dry, discuss options with your nurse or provider.
4. Use lip balm for dry lips.
 - Never use petroleum-containing products, such as Vaseline, while on oxygen.

When to flush your tube

Your nurse or provider will instruct you on how much tap water to use for flushing.

Flush your tube:

- Before and after each feeding
 - Before and after medications are given
 - At least once a day
1. Pull up the instructed amount of tap water into the syringe.
 2. Place the tip of the syringe into your feeding tube and push the water in.



Giving feedings or fluid by syringe

Wash your hands thoroughly with soap and warm water.

1. Gather the equipment:
 - Syringe (Remove the plunger from the syringe)
 - Formula
 - Tap water
2. Remove the cap from your feeding tube.
3. Insert the tip of the syringe into your feeding tube.
4. Hold the syringe above your belly button.
5. Pour the prescribed amount of **formula** into the syringe:
 - Let it flow into the tube.
6. Pour the prescribed amount of **water** into the syringe:
 - Let it flow into the tube.
 - Clamp your feeding tube.
7. Rinse the syringe with warm water.
8. Allow the syringe to dry completely.
9. Store the syringe in a clean, covered container or a clean towel until the next use.

Giving feedings with a pump

Wash your hands thoroughly with soap and warm water.

1. Gather the equipment:
 - Feeding bag with tubing
 - Pole
 - Feeding pump
 - Formula
 - Syringe
 - Tap water
2. Flush your feeding tube with the instructed amount of tap water.
3. Close the clamp on the tubing.
4. Pour the formula into your feeding bag.
5. Hang the bag on the pole.
6. Open the clamp.
7. Allow your feeding to flow through the tubing until it reaches the end.
8. Close the clamp.
9. Attach the tubing to the pump.
10. Remove the cap from the tubing.
11. Insert the tip of the tubing into your feeding tube.
12. Open all tubing clamps.
13. Turn on the pump and set the flow rate as instructed by your provider or nurse.
14. Push the start button.

Continuous feedings

1. Rinse your bag and tubing with warm tap water every 8 to 12 hours.
2. Hang or place the new formula into your feeding bag and repeat the feeding procedure.
3. Flush your tube with the instructed amount of tap water using a syringe.

How to stop the pump

1. Push the stop button.
2. Clamp the tubing.
3. Disconnect the tubing from your feeding tube.
4. Open the clamp on your feeding tube.
5. Flush your tube with the instructed amount of tap water.
6. Close the clamp.
7. Place the cap on your feeding tube.

Feeding reminders

For all types of feedings:

- Do not force any fluid through your tube if it is not flushing easily.
- Sit upright 30–45 degrees during your feeding.
- Remain upright for 30–60 minutes after your feeding.
- If you are coughing or choking during a feeding, stop the feeding and call your provider immediately.

Cleaning the ENFit system

Refer to your nurse for clarification if this applies

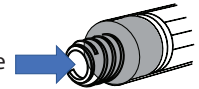
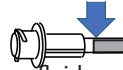
ENFit cleaning procedures required every **12 hours** and after medication administration.

Feeding Tubes with Male ENFit Connectors

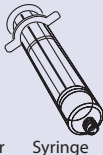
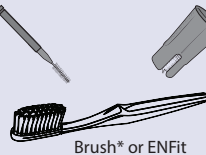
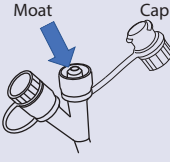
(e.g. Nasogastric, Transpyloric, Orogastric, Percutaneous Endoscopic Gastrostomy Tubes and other ENFit devices)

Tips for keeping ENFit feeding tube ports clean. Inspect before you connect!

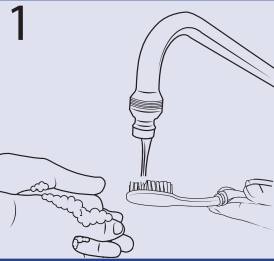
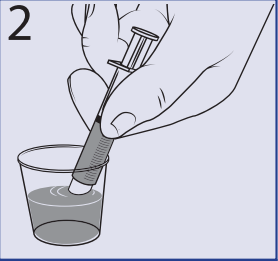
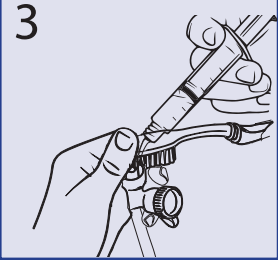
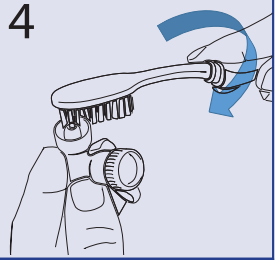
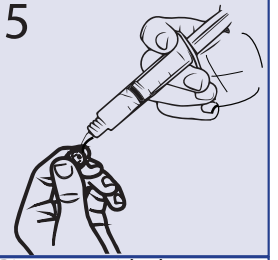
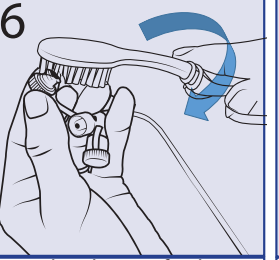
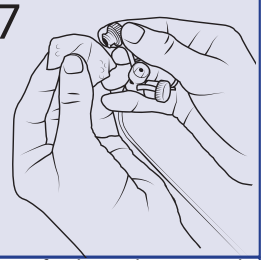
- **Priming Feeding Sets** - Stop priming before fluid reaches the end of the tube.
- **ENFit Syringe Draw Up** - Wipe medication and nutrition from tip/outer threads, keep fluids out of dead space before connecting to feeding tube.



For best results, follow these instructions to clean tubes at least once a day or whenever material is visible.

Tube Cleaning Supplies & Terms				
				
Cup of clean water	Syringe	Gauze	Brush* or ENFit specific cleaning tool	ENFit Feeding Tube

Note: Use a disposable brush or follow manufacturer's instructions if using ENFit specific cleaning brush.

1  Wash hands with soap and water. Rinse brush with tap water.	2  Fill syringe with water.			
3  Plug center hole of feeding tube port with brush bristles. Forcefully flush moat with water.	4  Rotate brush in bottom of moat.	5  Rinse cap with clean tap water.	6  Insert bristles into feeding tube cap and rotate brush in cap to clean.	7  Wipe feeding tube port and cap with gauze. Clean supplies and allow to air dry.

Repeat steps 3 through 6 until cap and tube are thoroughly clean.

* A manual toothbrush is regulated as a medical device intended to remove debris from the teeth in some jurisdictions. Consult your licensed healthcare provider or Risk Manager regarding recommended use for cleaning feeding tube ports. Dispose of single use devices as instructed. Cleaning procedures courtesy of Children's Mercy Kansas City.
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Things to know about giving medications

- Use a syringe to give the medications.
- Give each medication separately.
- Use liquid medications whenever possible.
- Never mix your medications with your tube feeding formula.

How to give medications

1. Your tablets must be crushed into a fine powder.
2. Mix the powder well with a small amount of warm tap water.
3. Draw up the mixture into the syringe.
4. Place the tip of the syringe into your feeding tube and push the plunger.
5. Flush your feeding tube with the instructed amount of tap water before and after each medication.

Questions to ask your pharmacist, provider or nurse

- Does my medication come in a liquid form?
- Can my tablets be crushed?
- Should my medications be given on an empty stomach?
- Can my medication be given through my feeding tube?

Common problems

Problem	Cause	Solution
Upset stomach	Giving the formula too fast	Give your feeding slowly.
	Spoiled formula (Formula that has been open for more than 48 hours or not refrigerated once opened.)	Wash your hands and equipment thoroughly. Store open cans of formula in the refrigerator. Do not use expired formula.
	Incorrect body position	Sit up or raise the head of the bed at least 30 degrees during feeding.
	The formula is too cold	Allow the formula to come to room temperature.
Tube slipping out	Your tube is not held in place properly	Be extra careful when changing your clothing or moving during feeding. Call your provider if your tube slips out of place.
Blocked feeding tube	Poor flushing of the tube	Flush your tube with water after giving formula or medication. For continuous feeds, flush your tube as directed.
	Medication	Do not mix your formula with your medication.
	Kinked feeding tube or clamp on the feeding tube	Check the tube for clamps or kinks.
Leaking feeding tube	Disconnected tubing	Make sure all connections are tight. Call your provider if this does not fix the problem.
Weight gain or loss	Caloric intake does not match needs: • Incorrect fluid intake • Change in activity level • Change in medical condition	Call your provider to adjust the formula, feeding schedule or fluid intake.

When to call your nurse or provider

- Your feeding tube is partially or completely out.
- There is blood in or around your feeding tube.
- Your tube is blocked or slow to flow, and warm water cannot correct the problem.
- You cough, have shortness of breath or have difficulty breathing.
- There is leakage around your tube site.
- There is foul-smelling drainage from your tube site.
- There is swelling, redness, pain or irritation around your tube site.
- You have dark or lesser amounts of urine, you feel very thirsty and have drier skin.
- You gain or lose more than two pounds of weight per week.
- You have dizziness or sudden weakness.
- You have a fever or confusion.
- You feel full or bloated or have cramps in your abdomen.
- You have diarrhea that lasts for two or more days.
- You are constipated.
- You note a change in your eating habits.

Glossary

Constipation	Infrequent bowel movements. Stools may be hard and painful.
Continuous feeding	Formula that slowly drips through the feeding tube all day and/or night.
Diarrhea	Frequent, loose, watery bowel movements.
Feeding tube	A tube in the stomach or intestine through which formula is given.
Flush	A means of washing out a feeding tube using water through a large syringe.
Formula	A special nutritional product that has the same nutrients as regular food.
Gastrostomy (G-tube)	A feeding tube that enters the stomach through an opening placed outside the abdominal area.
Jejunostomy (J-tube)	A feeding tube that enters the jejunum (a section of the small intestine) through an opening placed outside the abdominal area.
Provider	A nurse, doctor, nurse practitioner, physician assistant or office staff member who partners with any of these roles.
Pump	A small machine that helps deliver liquid food into the stomach or intestine.
Syringe	A hollow, plastic tube with a plunger, used to draw in or inject fluid into a feeding tube.
Tubing	Clear plastic material that goes from the bag to a pump and connects the pump to the feeding tube.
Tube feeding	Nourishment in the form of a liquid medical nutritional product that enters the stomach or small intestine directly.

Other information

What type of food do I receive? _____

How much food do I get every day? _____

How often should I change my feeding bag? _____

Which company delivers my supplies? _____

What is the medical equipment company's phone number? _____

When should I reorder my supplies? _____



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