ENTERAL FEEDING PATIENT

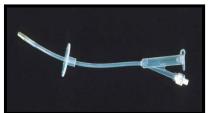
Date	Signature	





This patient has a BALLOON GASTROSTOMY TUBE (BGT) IN A FORMED STOMA TRACT

Tube Make: ENTRAL (Avanos) \Box	OTHER
Tube SizeFr	
Balloon water volumemi*	Level at skin cm
Date placed Due	for removal/replacement



Name:
Date of Birth:
Trust ID:
Address:

REPLACEMENT TUBE AFTERCARE IN A FORMED STOMA TRACT

Daily

Move the fixation plate:

- Clean around the site with soapy water and dry
- Rotate tube 360°
- Replace the fixation plate 2-5mm from the skin
- If an extension set is being used wash in warm soapy water. Store in a clean plastic box when not in use

Weekly

- Move external fixation device whilst holding tube next to abdominal wall
- Advance tube 2-3cm, then withdraw the water in the balloon and note the amount taken out
- Replace with amount of sterile water specified above * (dependant on balloon size) using a 10ml luer slip syringe
- Pull back tube until light resistance is felt. Replace external fixation device 2-5mm from the skin
- Discard extension set and replace if being used

General Care advice

- A dressing should not be needed
- Test pH of gastric aspirate if there are any concerns about tube position. Only use tube if pH ≤5.0
- Do NOT use the balloon inflation port for anything other than checking the water volume and inflating the balloon
- Flush with a minimum of 30ml of sterile water before and after feed and/or medication
- Always use a 60ml Enteral syringe for giving feed, fluid and medication

ALERT

If there are any of the following:

- Pain on feeding
- Prolonged or severe pain post-procedure
- Fresh bleeding
- External leakage of gastric content
- Balloon is empty (tape tube to skin immediately)
- Balloon water is not clear e.g. gastric content/feed/medication
- Balloon has 1ml more or less of water than was inserted
- If the tube comes out the stoma will start closing in 30mins and may be fully closed in 4hrs

Then

- STOP the feed immediately
- Bleep the Gastroenterology Registrar or Out of Hours the On-Call Medical Registrar for urgent advice
- Contact Interventional Radiology on 4240 if the tube has come out (Mon-Fri 8am – 4pm)

Be particularly vigilant with patients who have communication difficulties