

ENTERAL FEEDING PATIENT

Date _____

This patient has a **CORFLO PEG**

Tube Size _____ Fr

Date placed _____

Replacement Life span varies patient to patient. To be changed as indicated



Name:
Date of Birth:
Trust ID:
Address:

DATE FROM _____ UNTIL _____

IMMEDIATE NURSING CARE (DAY 1-14)

Day 1

- Nil by mouth for first 2hrs
- Nil by PEG for first 4hrs
- Monitor temp, BP, respiration rate, pulse, pain score and site every **15 min for the first 1hr** and then every **30 min for the next 3hrs**
- At 4 hours post insertion flush with 10ml sterile water and if patient is pain free commence the Enteral Feeding Regimen provided by the Dietetic Department (starts with a 50ml water flush hourly for 4 hours before feeding)

Day 2-14

- Inspect site daily
- Clean site with saline/sterile water and dry
- Do NOT rotate the tube
- Do NOT move fixation plate
- Do NOT remove "Y-adaptor"
- The stoma should be healed and not need a dressing. However if still healing, use a dry keyhole dressing over the site

General Care Advice

- To connect/disconnect from the Y-adaptor firmly hold the solid ENFit port NOT the flexible tubing
- Flush the tube with 50ml of sterile water before and after feed and/or medication
- Always use a 60ml Enteral syringe for giving feed, fluid and medication
- When tube not in use, ensure clamp remains open

DATE FROM _____

LONG TERM NURSING CARE (Day 15+)

Daily

Open the fixation plate:

- Clean around the site with soapy water and dry
- Rotate the tube 360°
- Replace the fixation plate 2-5mm to the skin

Weekly

Open the fixation plate:

- Clean around the site with soapy water and dry
- Advance the tube 2-3cm and rotate 360°
- Gently pull back fixation plate until light resistance is felt and secure the fixation plate 2-5mm away from skin

General Care Advice

- A dressing should not be needed
- To connect/disconnect from the Y-adaptor firmly hold the solid ENFit port NOT the flexible tubing
- DO NOT remove "Y-adaptor" as removing this will deflate the internal fixation device. This needs changing 3 monthly BUT should only be replaced by a trained Healthcare Professional
- When tube not in use, ensure clamp remains open
- If this tube was surgically placed and has stitches bleep the Surgical Registrar at Day 15 to discuss removal of stitches

ALERT

If there are any of the following:

- Pain on feeding
- Prolonged or severe pain post-procedure
- Fresh bleeding
- External leakage of gastric content
- 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 Endoscopy Nurses on 64570 for troubleshooting tube problems (Mon-Fri 8am – 4pm)

Be particularly vigilant with patients who have communication difficulties

If you are concerned about tube position, take an aspirate. If the pH is >5.0 check for medications which could affect pH & wait for 1hr. Recheck pH, if still >5.0 do NOT feed and bleep the Gastroenterology Registrar or Out of Hours the On-Call Medical Registrar for advice