

ENTERAL FEEDING PATIENT

Date _____ Signature _____

This patient has a **Surgical JEJ**

Tube Make: **FREKA** **OTHER** _____

Tube Size 9 Fr Measurement of external tube length _____ cm *

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

- Flush 2hrly with 30ml sterile water to keep tube patent
- Nil **feed** via Surgical JEJ for first 24hrs
- 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**

Day 2-14

- From 24hrs onwards use the Enteral Feeding Regimen provided by the Dietetic Department or the Post Insertion Surgical JEJ regimen or the Oesophagectomy Care Plan Regimen as indicated
- Flush 4hourly with a minimum of 30ml sterile water to keep tube patent
- Inspect site daily
- Clean site with saline/sterile water and dry taking care to not disturb the sutures
- Do NOT rotate or advance the tube
- 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

- Flush the tube with a minimum of 30ml of sterile water before and after feed and/or medication
- Inspect stitches are patent, and ensure that there are 2-3 in situ. Do NOT remove them.
- Always use a 60ml Enteral feeding syringe
- When tube not in use, ensure clamp remains open

DATE FROM _____

LONG TERM NURSING CARE (Day 15+)

Daily

- Flush 4hourly with a minimum of 30ml sterile water to keep tube patent
- Clean around the site with soapy water and dry taking care not to disturb the sutures
- Inspect stitches are patent, and ensure that there are 2-3 in situ. Do NOT remove them
- Inspect the tube length for external movement against the original measurement*

General Care Advice

- Do NOT rotate the tube
- Do NOT advance the tube
- Do NOT remove the sutures
- No dressing should be needed
- Ensure medications are in a suitable form for jejunal feeding and delivery e.g. liquid/dispersible. Discuss with pharmacy
- When tube not in use, ensure clamp remains open

ALERT

If there are any of the following:

- Pain on feeding
- Prolonged or severe pain post-procedure
- Fresh bleeding
- A stitch falls out
- If the external tube length differs after placement by ~5cm
- Concerns about jejunal displacement, e.g. vomiting/abdominal distension
- 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 On-Call Surgical Registrar for urgent advice

Be particularly vigilant with patients who have communication difficulties

If you are concerned about position of jejunal extension, consider a tubogram.