Nutrition & dietetic Services
Brighton & Sussex University Hospital

Brighton and Sussex University Hospitals
NHS Trust
NHS

# RENAL LOW VOLUME OUT OF HOURS GASTROSTOMY FEEDING REGIMEN (in a formed stoma tract)

Ward_____

Patient's Name_____

Hospital Number_____

Before starting Gastrostomy feed:

*Tick when completed*

1. Refer to the patient's Lead Clinical team to assess refeeding syndrome risk and implement plan, as per Trust refeeding protocol ☐

2. Refer to the dietitian using the online referral form on the intranet ☐

3. **Identify Feeding Tube** PEG  RIG  BGT  Button *(circle)* ☐

| Date/Day | Feed | Volume of feed (ml) | Rate (ml/hr) | No. of Hours | Rest Period | Comments (additional fluid/flushes) |
|---|---|---|---|---|---|---|
| **Day 1** | Nutrison Concentrated | 250 | 13 | ~20 | 4 hours | Flush the tube with 30mls sterile water before and after feed |
| **Day 2** | Nutrison Concentrated | 500 | 25 | 20 | 4 hours | Flush the tube with 30mls sterile water before and after feed |
| **Day 3** | CONTINUE AS PER PLAN ON DAY 2 UNTIL REVIEWED BY A DIETITIAN (unless patient weighs less than 40Kg, then remain on Day 1) | | | | | |

## Use alongside the correct Enteral Feeding Tube After Care Form (download from dietetic intranet site)

- Monitor fluid balance **daily.** You may need to consider additional water flushes or I/V fluids
- Many Nutrison feeds contain Fish Oils. If this patient is a vegetarian or vegan please use Nutrison Soya unless contraindicated and inform the ward dietitian
- If a patient does not tolerate the feed please decrease the feed to a rate that was previously tolerated and contact your ward dietitian
- Raise the head of the bed to 30 degrees during feeding and for ½-1 hour after feeding
- Use a new giving set, bag of feed or water container every 24 hours
- Use a 60 ml enteral syringe and sterile water for all water flushes
- Flush with a minimum of 30mls sterile water pre and post all medications

Name and signature of nurse starting regimen:                    Date:

**IF THERE IS:**
- **PAIN ON FEEDING**
- **PROLONGED OR SEVERE PAIN POST-PROCEDURE**
- **FRESH BLEEDING**
- **EXTERNAL LEAKAGE OF GASTRIC CONTENTS**
- **CONCERNS ABOUT TUBE DISPLACEMENT**

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**STOP FEED/MEDICATION DELIVERY IMMEDIATELY AND CONTACT THE LEAD TEAM OR GASTRONTEROLOGY REGISTRAR  FOR URGENT ADVICE**