

NASO-JEJUNAL (NJ) TUBE

THE FOLLOWING INFORMATION IS AIMED AT SUPPORTING YOU AND YOUR CHILD ON HOW TO CARE FOR THEIR NJ TUBE.

IMPORTANT NOTE: It is important that you contact your Homeward Nurse if you need additional training on the Flocare pump (if applicable) or tube feeding.



DAILY CARE OF YOUR CHILD'S NASOJEJUNAL TUBE

It is important to keep the feeding tube in good condition to avoid unnecessary replacement of the feeding tube. Regular care and flushing of the feeding tube will help to prevent the feeding tube becoming blocked.

- Wash hands before and after handling the feeding tube
- Confirm the position of the feeding tube by checking the cm graduation marking at the nostril remains the same cm marking made after initial placement in hospital. Position must be checked before administration of any water, enteral nutrition or medication
- Flush your child's feeding tube as per training provided by Homeward Nurse
 using a 60ml enteral syringe with water (type and volume as recommended
 for jejunal use by the managing healthcare professional) to prevent the feeding
 tube from blocking. Water should be administered before and after enteral
 nutrition/medication administration or every 4-6 hours if feeding is not in
 progress (except during the night) or as recommended by the managing
 healthcare professional
- Care of the nose: fixation tape should be changed weekly, but more frequently if
 it loosens or becomes dirty. When changing the tape, clean skin thoroughly and
 try to alter the position of the tape from where it was last fixed. If the skin or
 nostril becomes sore or red contact a healthcare professional for instructions
 on how to proceed. Avoid the use of cream or powders as they can damage the
 feeding tube
- Never attempt to replace the tube as this type of feeding tube can only be replaced by a healthcare professional in the hospital
- Check the feeding tube daily to ensure it is intact and that the tube is not kinked or blocked and remains securely fixed to the face.

HOW DO I CHECK THE POSITION OF MY CHILD'S NASOJEJUNAL TUBE?

It is important to check your child's feeding tube position prior to administering anything via the feeding tube, after a coughing fit or following a vomiting episode.

- Confirm the position of the feeding tube by checking the cm graduation marking at the nostril remains the same as noted after initial placement in the hospital
- Position must be checked before administration of any water, enteral nutrition or medication
- If there is any doubt about the position of your child's feeding tube, do not use
 the tube and contact the managing healthcare professional immediately for
 instructions on how to proceed.

IMPORTANT NOTES

It is important your child is sitting at a 45° angle during enteral feeding and for at least one hour after enteral nutrition has been administered.

You are advised to contact your managing healthcare professional immediately if there is any reason that medication or enteral nutrition needs to be delayed or omitted due to no available enteral or oral route.

TROUBLESHOOTING NASO-JEJUNAL TUBES

MY CHILD'S NASOJEJUNAL TUBE HAS BECOME BLOCKED

If there is resistance when flushing the naso-jejunal tube, do not force water into the tube:

- Confirm the feeding tube remains in correct position before administering anything down the tube
- Using a gentle pull and push technique, flush the tube using a 60ml enteral syringe with warm water (type and volume as recommended by the managing healthcare professional). Do not use acidic solutions such as fruit juices or cola as they can curdle the enteral nutrition product
- If unable to clear the blockage contact the Homeward Nurse for further instructions.

MY CHILD'S NASOJEJUNAL TUBE HAS COME OUT

It is important that your child has a new NJ tube placed in time for their next delivery of enteral nutrition or medication administration.

A nasojejunal tube must always be replaced in a hospital setting therefore do not attempt to replace a new tube at home.

Follow the steps below:

- Remain calm
- Contact the managing healthcare professional and explain that the nasojejunal tube has come out
- If the managing healthcare professional is unavailable contact your GP or hospital emergency department to let them know the nasojejunal tube will need to be replaced. This will give the department time to ensure a member of staff is available to replace the nasojejunal tube
- Take the tube that has fallen out with you in a clean plastic bag so that the staff can identify which type of tube is required.

IMPORTANT: Always seek urgent medical advice if there are any signs of abdominal pain, chest pain or breathing difficulties.

The Nutricia Homeward Nursing Service advice literature is provided as guidance following Nutricia Homeward Nursing Service training, and should not be used as a substitute for medical advice. Always contact your healthcare professional prior to making any changes to your tube feeding regimen.

Please contact the Homeward Nurse or managing healthcare professional for the most up to date version every year. Provided on behalf of Nutricia Ltd at the request of the NHS managing healthcare professional.

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