

BOLUS FEEDING

THE FOLLOWING INFORMATION IS AIMED AT SUPPORTING YOU ON HOW TO DELIVER YOUR ENTERAL NUTRITION IN SMALLER AMOUNTS THROUGHOUT THE DAY/NIGHT USING A 60ML ENTERAL SYRINGE OR A BOLUS FEEDING SET.

IMPORTANT NOTE: It is important that you contact your Nutricia Homeward Nurse if you need additional training on tube feeding.

EQUIPMENT:

- 60ml enteral syringe
- Extension set or bolus feeding set (if required)
- Water (type & volume as recommended by the managing healthcare professional)
- Prescribed enteral nutrition.

IMPORTANT NOTE: Ensure patient is sitting in an upright position of 45° angle during enteral feeding and for one hour post enteral nutrition administration.



HOW TO BOLUS FEED

The managing healthcare professional will instruct the patient which method of bolus feeding to be used — gravity or plunger method.

- Wash hands before and after handling the feeding tube
- Assemble all equipment required for bolus feeding and prepare on a clean tray or table
- Check the label and expiry date of the enteral nutrition to ensure the correct product is being used and position the patient at a 45° angle during enteral feeding and one hour post enteral nutrition administration.

If the patient experiences leakage around the stoma site whilst tube feeding, stop the enteral nutrition and contact the Nutricia Homeward Nurse immediately for instructions on what to do.

If using a nasogastric tube it is important at this stage to check the position of the tube, a pH value must be checked prior to administration as well as confirming external tube cm graduation markings at the nostril remains the same as it was after the tube was placed. *Refer to advice leaflet "Nasogastric Tube Advice Leaflet". Never administer anything down a nasogastric tube and do not start feeding before confirmation of the tube being in the correct position (the stomach). If you think the feeding tube is not in the correct position do not use the tube and contact the healthcare professional that routinely places the tube. If you are unsure of how to confirm the tube position please contact the Nutricia Homeward Nurse for further instructions.

NOTE: If using a Button tube, attach extension set at this stage.

- Confirm the tube is in the correct position, as demonstrated during training by the Nutricia Homeward Nurse
- If requested by the managing healthcare professional, check the pH of gastric aspirate using pH indicator strips to confirm the tube is correctly positioned before enteral nutrition is administered
- Flush the tube using a 60ml enteral syringe with water (type and volume as recommended by the managing healthcare professional)
- Close the clamp on the tube (if present).

GRAVITY METHOD

- Using a 60ml enteral syringe remove the plunger and connect the tip of the enteral syringe to the end of the feeding tube or extension set
- Similarly if using a bolus feeding set you should run the enteral nutrition through this first and then connect set to the end of the feeding tube, as demonstrated during the training by the Nutricia Homeward Nurse. Ensure all clamps are closed
- Slowly pour the required amount of enteral nutrition into the syringe, then open the clamps
- Holding the syringe at a comfortable height above the feeding tube, allow the
 enteral nutrition to slowly run. Never attempt to rush bolus feeding. Ensure
 that the speed of delivery (rate) is as recommended by the prescriber. It is
 important the enteral nutrition does not run through too fast as this can cause
 unpleasant stomach symptoms
- Alter the height of the syringe to adjust the speed of delivery (rate). Increase
 the height of the syringe to run quicker, decrease the height of the syringe
 to run slower. If using a bolus feeding set adjust the roll clamp to enable the
 enteral nutrition to run quicker or slower
- On completion of the enteral nutrition, flush the feeding tube with water (type and volume as recommended by the managing healthcare professional)
- Close the clamp on the feeding tube (if present), disconnect the syringe and remove extension set (if using a Button tube), then replace end cap on feeding tube
- It is important the patient is placed at a 45° angle during enteral feeding and for at least one hour after the enteral nutrition has been delivered.

PLUNGER METHOD

- The prescribed amount of enteral nutrition should be decanted into a clean container. Then draw up into a 60ml enteral syringe. Have dry clean gauze ready to wipe the end of the syringe to prevent dripping
- Attach the filled syringe onto the end of the feeding tube or extension set and open the clamp (if present)
- Push the plunger to gently administer the enteral nutrition using a start stop method
- Close the clamp before removing the syringe
- Refill the syringe and repeat these steps until the prescribed volume of enteral nutrition has been given
- Ensure the speed of delivery (rate) is as recommended by the prescriber
- It is important the enteral nutrition does not run through too fast as this can cause unpleasant stomach symptoms
- On completion of the delivery of correct volume of enteral nutrition, flush the tube with water (type and volume as recommended by the managing healthcare professional)
- Close the clamp (if present), remove the syringe, extension set (if a Button) and replace end cap on the feeding tube
- It is important the patient is placed at a 45° angle during enteral feeding and for at least one hour after enteral nutrition has been delivered.

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 Nutricia 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.

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

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