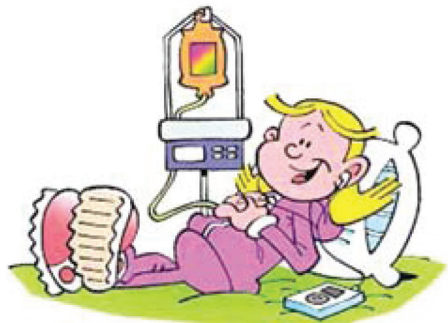


PERCUTANEOUS ENDOSCOPIC GASTROSTOMY (PEG TUBE)

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

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





IMMEDIATE ACTION REQUIRED

It is important that you are aware of the signs and symptoms which may occur up to 72 hours following the insertion of a PEG tube.

The following signs require **IMMEDIATE** urgent medical attention.

1. Pain during feeding (including medication delivery and water flushes)
2. Any pain or distress after procedure
3. New bleeding from the stoma site
4. Leakage of fluid around the tube.

In the event of any one of these symptoms, the following actions **MUST** be taken:

1. Stop feeding/medication delivery immediately.
2. Seek immediate medical advice in order that the patient is examined and their symptoms assessed immediately.

Messages must not be left on a telephone answering machine.

Contact the emergency number provided by the hospital.

Messages must not be left on a telephone answering machine.

Contact the emergency number provided by the hospital.

Tel No: _____

IMMEDIATE POST PLACEMENT CARE (UP TO 10 DAYS) OF YOUR CHILD'S PEG TUBE

Careful cleaning around the stoma site will reduce the possibility of soreness or infection.

- Wash hands before and after handling the PEG tube
- Leave the external fixation device in place for 10 days or as recommended during training provided by the Nutricia Homeward Nurse. If the device is digging into the skin contact the managing healthcare professional for review immediately
- Clean the skin around the stoma site and under the external fixation device with sterile water or saline using sterile gauze (that does not shed fibres) and should continue daily for the first 7 days. Ensure the skin is then dried thoroughly.
- From day 7 onwards, clean the skin around the stoma site and under the external fixation device with a mild soap solution and fresh tap water, using a clean cloth for this purpose only. Ensure the skin and external fixation device are dried thoroughly.
- Turn the gastrostomy tube through 360° after 10 days or as recommended during the training provided by the Nutricia Homeward Nurse, as manufacturers guidance varies depending on the type of tube your Consultant has used, to help prevent the tube adhering to the stoma tract and becoming embedded in the stomach wall
- Report any inflammation, oozing or any changes to the stoma site to the managing healthcare professional immediately. It is important not to use the tube until it has been reviewed.

DAILY CARE OF YOUR CHILD'S PEG TUBE

After 10 days post placement it is advised to care for the skin and PEG tube as follows:

- Wash hands before and after handling the tube
- Open the external fixation device daily in order for the skin around the stoma site to be cleaned, note the tube position by observing the cm graduation mark
- Clean the skin around the stoma site, the tube and the external fixation device with mild soap solution and fresh tap water using a clean cloth for this purpose only and rinse thoroughly. Ensure the skin and external fixation device are thoroughly dried and check the tube remains in the original position. If there is a change in position of the tube do not use and contact the managing healthcare professional immediately to confirm PEG tube is in the correct position
- From day 10 or as recommended during training provided by the Nutricia Homeward Nurse (as manufacturers instructions varies depending on the type of tube the consultant has used), at least once per week, but no more frequently than once a day, open and move the external fixation device away from the skin surface. Clean the PEG tube, note the cm graduation marking at the skin surface, then gently insert the PEG tube into the stomach by a minimum of 2-3cm and rotate the tube 360° to prevent the tube adhering to the stoma tract and becoming embedded in the stomach wall. Gently withdraw the PEG tube back until slight resistance is felt and confirm the cm graduation marking at skin surface is the same as before moving the tube
- If the cm graduation marking has changed, then do not use the tube and contact the managing healthcare professional immediately for instructions
- If there is any discomfort, or you are unable to advance or rotate the PEG tube, do not use and contact the managing healthcare professional or Nutricia Homeward Nurse for instructions
- Following care **always** replace and close the external fixation device so it lies approximately 2-5mm from the skin surface (the external fixation device may need to be loosened or tightened dependent on weight loss/gain)
- Flush the tube as per training provided by Nutricia Homeward Nurse, with water (type and volume as recommended by the managing healthcare professional) before and after the administration of enteral nutrition or medication or 4-6 hourly if feeding is not in progress (except during the night) or as recommended by the managing healthcare professional, to prevent tube blockage.

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

It is important to check the position of your child's tube by observing the cm graduation markings at the skin surface, as per training provided by the Nutricia Homeward Nurse, to make sure the enteral nutrition goes directly where it should in the body (the stomach). Check the position of the PEG tube prior to administering enteral nutrition, medication or water by observing the cm graduation markings at the skin surface remains unchanged since initial insertion in the hospital. If your child's PEG tube appears to have moved, (if the tube appears longer or shorter or the cm graduation marking at skin surface is different) do not use the tube and contact the managing healthcare professional or Nutricia Homeward Nurse immediately.

If advised by the managing healthcare professional check the position of the tube by pH measurement before starting tube feeding. ***Refer to advice leaflet "How do I measure the pH of gastric aspirate".**

Measuring the pH should not be used in isolation and you should consider all relevant factors as advised during training provided by the Nutricia Homeward Nurse, to be confident the PEG tube is in the correct position.

IMPORTANT NOTES

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

Avoid using creams and talcum powders as they can damage the tube material and may lead to irritation of the skin and give rise to infection. Creams can also reduce the effectiveness of the external fixation device.

If the skin around the site becomes red or sore, or there is oozing or bleeding from the site, contact the managing healthcare professional for advice. Only apply a dressing if advised to do so by a healthcare professional.

Your child can shower, bath and swim as normal if the stoma tract has been fully formed. As healing is dependent on your child's medical condition please check with the managing healthcare professional for advice.

Always ensure the tube end is closed and any clamp on the tube is applied during these activities. Always dry the site and tube thoroughly after bathing and swimming.

TROUBLESHOOTING THE PEG TUBE

YOUR CHILD'S PEG TUBE HAS BECOME BLOCKED

If there is resistance when flushing the PEG tube, do not force water into the tube:

- Check PEG tube advances and rotates easily as per training provided by the Nutricia Homeward Nurse
- If the PEG tube does not advance or rotate easily there should be no attempt to unblock the tube until you have received instructions from the managing healthcare professional. If you have not been trained to advance and rotate your child's tube, then contact the Nutricia Homeward Nurse immediately for training and instructions on how to proceed
- Check the tube cm graduation marking at the skin surface remains unchanged. If the tube position has changed, then do not attempt to unblock the tube until you have received instructions on how to proceed from the managing healthcare professional
- If the tube advances and rotates easily, using a gentle pull and push technique, flush the tube using a 60ml enteral syringe with warm water or soda 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 a blockage still exists, gently squeeze the tube between the fingers along the length of the tube as far as possible
- If the blockage persists contact the managing healthcare professional or Nutricia Homeward Nurse for further instructions.

IMPORTANT NOTE

You are advised to contact the 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.

YOUR CHILD'S PEG TUBE HAS COME OUT

Important: If the tube has been removed or there are any signs of trauma to the stoma tract (such as bleeding), or if there are any signs of pain or distress, please seek urgent medical review.

- Your child will need to have a new tube inserted as soon as possible, otherwise the stoma tract will start to heal and may completely close soon after the tube has come out
- A PEG tube cannot be replaced at home. Contact the managing healthcare professional or local hospital immediately. A doctor will need to replace the PEG tube in hospital.

Follow the steps below:

- Remain calm
- Place a clean dry dressing over the stoma site to prevent stomach contents leaking onto the skin or clothes
- If your child is in pain and it is safe to have oral medication they should take their prescribed pain relief
- Contact the managing healthcare professional and explain that the PEG tube has come out
- If the managing healthcare professional is unavailable, contact the GP or local hospital emergency department to let them know the tube will need to be replaced. This will give the department time to find the medical notes and to ensure a member of staff is available to reinsert a new tube. Inform the emergency department what type of tube it is (if you know) and take the old tube that has fallen out in a clean plastic bag with you
- Emphasise that the new tube will need to be replaced as soon as possible as the stoma tract may heal over.

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.

Nutricia Ltd
White Horse Business Park, Trowbridge
Wiltshire BA14 0XQ
nutriciaflocare.com
SCC3657-03/19



HOMEWARD
NURSING SERVICE