Giving an Enteral Feeding in a Gastrostomy Tube (for children)

If your child is unable to eat, or unable to eat enough food to meet their body's needs, a **gastrostomy feeding tube** (also called a **GT** or **G-tube**) is a way to provide nutrients to their body. A low-profile or button tube is a type of gastrostomy tube that is almost flush with your child's skin. A button G-tube requires extension set tubing to be able to feed your child.

Preparing for a G-tube feeding

Before working with the G-tube:

- Clean your hands with soap and water.
- Flush (clear) the feeding tube with warm water to keep it from clogging.
- For a button G-tube, first insert the extension set, then flush the extension set and feeding tube with warm water.

Flushing the G-tube

Your child's G-tube may become clogged. Frequent flushing with warm water is the best way to keep it from clogging. Be sure to flush:

- Before and after each bolus feeding.
- Before attaching your child to the feeding pump, after disconnecting your child from the feeding pump, and any time the feeding pump is turned off for any reason.
- Every 4 to 6 hours for continuous feeding.
- Before, between, and after giving medications.

Use the following recommended flush amounts unless your doctor tells you differently:

- Children younger than 1 year: 1 to 2 mL
- Children 1 year and older: 3 to 5 mL

Check a box below next to the type of feeding your child will use. Then, find and follow the appropriate instructions in this handout.

☐ **Bolus, gavage, or syringe feeding**

☐ **Gravity bag feeding**

☐ **Continuous feeding (uses a pump)**

Steps for giving a bolus, gavage, or syringe feeding

1. Position your child comfortably during the feeding. Whenever possible, hold your child during the feeding. If this is not possible, place your baby on their right side with the head of the bed elevated. **Never leave your child alone during a feeding.**
2. Flush the tube with the amount of warm water as listed under the **Flushing the G-tube** section.

Two ways to feed using a syringe:

Option 1: Gravity syringe method with removal of syringe plunger

1. Remove the plunger from the 60 mL syringe.
2. Attach the syringe to the feeding tube.
3. Pour formula into the syringe.
4. If a clamp is present, open it. Let the feeding run in by gravity, by raising the syringe above your child's stomach. The feeding takes about 15 to 20 minutes.

Option 2: Push method with syringe plunger kept in syringe

1. Pour the formula into a container that is easy to access with the tip of the syringe.
2. With the plunger of the syringe all the way inserted into the syringe, place the tip of the syringe into the formula.
3. Draw up the desired amount of formula into the syringe by pulling the plunger of the syringe back toward you.
4. Attach the syringe to the feeding tube.
5. If the clamp is present, open it. Gently push the syringe plunger down to administer the formula.
6. Repeat steps until desired amount of formula given.

When the feeding is complete, flush the tube with the amount of warm water as listed under the **Flushing the G-tube** section. Try not to put extra air into the stomach.

Steps for a gravity bag feeding

After checking that the dressing (sterile pad) and tube are taped in place, proceed with the following steps:

1. Position your child comfortably during the feeding. Whenever possible, hold your child during the feeding. If this is not possible, place your baby on their right side with the head of the bed elevated. **Never leave your child alone during a feeding.**
2. Flush the tube with amount of warm water as listed under the **Flushing the G-tube** section.
3. Pour the formula into the gravity bag, and prime the tubing with formula by opening the roller clamp.
4. Attach the gravity bag tubing to the feeding tube.
5. If a clamp is present on the feeding tube, open it. Let the feeding run in by gravity by raising the bag. The feeding takes about 20 to 30 minutes.
6. When the feeding is complete, flush the tube with amount of warm water as listed under the **Flushing the G-tube** section. Try not to put extra air into the stomach.
7. The feeding bag should be rinsed with warm water and used again for up to 24 hours.

Steps for giving a continuous feeding

1. Set up the feeding pump according to the manufacturer's directions, or separately provided pump handout, and feed as instructed.
2. Place the amount of formula in the bag according to hang time:
   - ☐ 8 hours for any ready-to-feed formula
   - ☐ 4 hours for any powdered formula
   - ☐ 4 hours for breastmilk
   - ☐ 2 hours for home-blended formula
3. Flush the feeding tube every 3 to 4 hours with the amount of warm water as listed under the **Flushing the G-tube** section.
4. Change the feeding bag/burette every 24 hours. Fresh or new formula should not be added to old formula.
5. The feeding bag/burette can be rinsed out and used again for up to 24 hours.

De-clogging the tube

The G-tube may become clogged. Frequent flushing with warm water is the best way to prevent clogging. Always flush the tube before and after feeding, and before, between, and after each medication. If your child's feeding tube clogs, first check if the tube is kinked. If it is not, follow 1 of these 2 methods to "de-clog" (unclog) the tube:

Method 1: Flushing

1. Fill a syringe with the amount of warm water listed under the **Flushing the G-tube** section.
2. Flush the tube, working the plunger in and out.
3. Repeat 4 to 5 times until the tube flushes easily.
4. If you are unable to de-clog the tube, call the Enteral Team.

Method 2: Using a de-clogging enzyme

1. Use the "De-clogging Enzyme Kit"provided by the Enteral Team. Follow the instructions on the package for preparation of the enzyme solution.
2. Slowly push this solution into the tube with a syringe.
3. Let it sit for 1 to 2 hours.
4. Flush with the amount of warm water listed under the **Flushing the G-tube** section. You may need to work the plunger in and out gently.
5. If you are unable to de-clog the tube, call the Enteral Team or your doctor.

Giving medication

Speak with your pharmacist if you are unsure which medications can be given through the feeding tube. Try to use liquid medication whenever possible. If needed, use a small amount of warm water to thin thick medications. Follow these steps to give the medication:

- Flush the tube with warm water before, between, and after **each** medication.
- Crush tablets into a fine powder, then mix with the amounts of warm water according to the **Flushing the G-tube** section. Let it dissolve as much as possible. Then, draw up the solution into the syringe.
- Flush with warm water.
- Attach the syringe containing the medication and give it.
- Flush with warm water.
- Repeat with each medication.

Do not give these medications through your child's feeding tube (discuss alternatives with your pharmacist):

- Time-released capsules
- Enteric-coated tablets
- Digestive enzymes
- Biaxin (antibiotic)

Cleaning the extension set

You need to clean the extension set with soapy water after each use. Rinse it well and air dry. You may use a "PEG brush" for the 12-inch extension.

Need help or have questions?

Enteral Team
(385) 887-7356

Intermountain Homecare Main Number
(385) 887-6000 | (800) 527-1118 (Toll Free)

Venting

Venting through the tube will help stop leakage around the tube and relieve bloating. This is done by placing an empty syringe, without the plunger, on the end of the tube to release the air. It is possible that stomach contents may be released.

What should I do if the tube comes out?

Follow your doctor's orders. If the tube comes all the way out, and you cannot see the doctor within a ½ hour, wash the tube off with soap and water, deflate the balloon or cut off the end of the tube if needed, and place it back in the hole (stoma) in your child's abdomen (belly) as soon as possible. Tape the tube in place. **Do not use it until your doctor has checked it.**

Care of the area around the feeding tube

Your doctor will tell you how to clean the skin around the tube. Follow these guidelines:

- Remove the dressing for bathing.
- Change the tube dressing when it gets wet or soiled. (A small amount of drainage around the tube is normal. The skin around the tube will normally look pink or red. **If the redness gets larger, has pus drainage, or feels hot, call your doctor.**)
- Taping the tube will help prevent complications in the area. Call the Enteral Team for instructions.

After the site has healed, your doctor will tell you how often to care for the skin near the tube (usually you'll clean with soap and water, and then rinse and pat the skin dry). Once the site is healed your child may not need further dressings.

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