

NJ Feeding Tube for Adults: Home instructions

What is an NJ feeding tube?

A **nasojejunal** [nay-zo-jeh-JOO-null] or **NJ tube** carries food through the nose to the **jejunum** [je-JOO-num] — the upper part of the small intestine.

The NJ tube is soft and flexible so it can pass through the nose and stomach comfortably. In the jejunum, food and medication can be quickly absorbed into your body. The jejunum is small, so it can only take a small amount of food at a time. With an NJ tube, food is given at a slow, continuous rate.

In most cases, an NJ tube can be used for as long as it is needed. Your healthcare providers will replace it when it becomes clogged or moves out of place.

Why do I need an NJ tube?

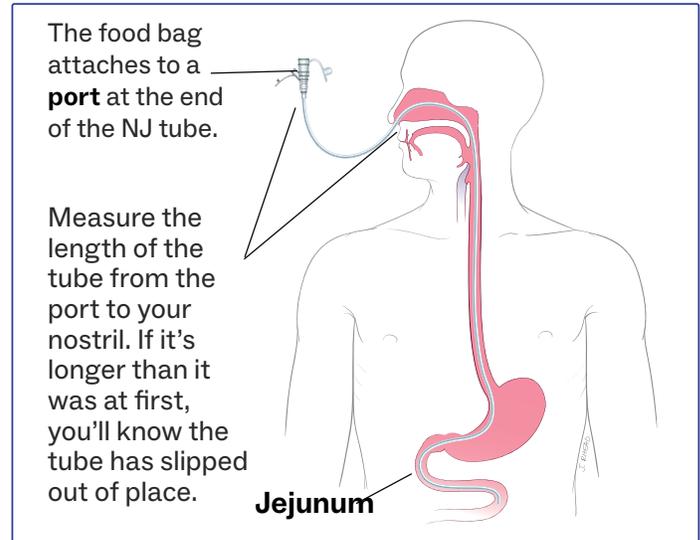
You may need an NJ tube if you can't tolerate food in your stomach. You may have this problem if your stomach does not empty fast enough, or you:

- Have severe reflux or vomiting
- Have difficulty absorbing food
- Cannot swallow safely
- Have problems in your **gastrointestinal** [gas-trow-in-TESS-tin-uhl] (or GI) **tract**

How is an NJ tube put in place?

An NJ tube is put in place at a hospital. It's done either in the medical imaging department or at the bedside. An x-ray is taken to make sure it's in the right place. Then, the tube is taped securely to your cheek or nose.

It's important to make sure the tube stays in the right place. A pen mark will be drawn on the tube at the point where it enters your nose. This will make it easier to see if the tube has moved in or out of position.



Preparing for an NJ tube feeding

Gather your supplies, including:

- Feeding pump, formula, and feeding bags. The pump supplier will give you the bags and teach you how to use the pump.
- Tubing.
- A syringe to flush the tubing and give medication.

Get set up for the feeding by:

- 1 Following the directions for the pump and prime the tubing.
- 2 Placing the correct amount of formula in the bag according to hang time:
 - **12 hours** for any **ready-to-feed formula**
 - **4 hours** for any **powdered formula**
 - **2 hours** for any **home-blended formula**
- 3 Making sure the type of formula is correct and checking the expiration date. If something is incorrect, call the Enteral Team and do not use the formula.
- 4 Flushing (clearing) the feeding tube with warm water to keep it from clogging.

Steps for giving a continuous feed

- 1 Follow the directions** to set up the pump and prime the tubing.
- 2 Place the correct amount of formula in the bag** according to hang time:
 - **12 hours** for any **ready-to-feed formula**
 - **4 hours** for any **powdered formula**
 - **2 hours** for any **home-blended formula**
- 3 Flush the feeding tube** with 30 to 60 mL (milliliters) of warm water every 4 to 6 hours (or as often as is recommended).
 - 1 Attach the feeding bag to the tube.**
 - 4 Start pump according to manufacturer's directions** and give your feeding as instructed. Giving the feeding faster than recommended can cause diarrhea.
 - 5 Change the feeding bag every 24 hours.**
 - 6 Before adding fresh formula,** pour out any remaining formula and rinse the bag with warm water. Do not add new formula to old formula.
 - 7 Flush feeding tube with 30 to 60 mL (milliliters) of warm water anytime the pump is turned off** and at the completion of the feeding.

Giving medication through your NJ tube

Medication is put in the tube with a syringe — do not add it to the feeding bag. Do not use time-release capsules or enteric-coated tablets. Follow these steps:



- 1 Wash your hands** before and after giving the medication.
- 2 Change the pump setting to the “on hold” position.**
- 3 Flush the tube with at least 20 mL of water.** Do not mix medications and formula together. Do not mix different medications together. If the medication mixes with small amounts of formula — or another medication — in the tube, the tube could clog.

4 Prepare the medication in the syringe.

- If a liquid medication is thick, add a small amount water to it.
- Liquids should be room temperature or warmer. If they're cold, they can cause cramping.
- If you must use a medication that comes in tablets, crush the tablet in a bowl or with a mortar and pestle. Add 5 to 10 mL (1 to 2 teaspoons) of warm water and crush the tablet again to dissolve it completely. Draw up the medication in a syringe.

5 If giving more than one medication, give each one separately. Flush the tube with water between each one.

6 Be sure the tube is in its correct position. Look for the pen mark where the tube enters the nose.

7 Give the medication:

- If the tube has a separate medication port, attach the syringe to it and give the medication.
- If the tube doesn't have a separate medication port, disconnect the feeding bag tubing from the NJ tube. Then, attach the syringe with the medication to the NJ tube and give the medicine.

8 Flush the NJ tube with at least 20 mL of water after each medication has been given.

9 After the last medication, flush the NJ tube again with 30 mL to 60 mL of warm water. After flushing, reattach the feeding bag tubing to the NJ tube (if disconnected).

10 Turn the pump back to the feeding position.

What if I have a problem?

The most common problem is an NJ tube that has moved out of place. If this happens, call the Enteral Team or your healthcare provider. Other common problems and solutions are listed below.

- **If the tube becomes clogged or flushes sluggishly:**
 - Use a small syringe to try to flush the tube with warm water. Mild pressure may be needed, and it may take a few tries.
 - If warm water doesn't work, gently flush the tube with warm water again while working the plunger in and out. (Don't pull on the feeding tube.)
 - The Enteral Team may provide you with enzymes to unclog your tube. If so, follow their instructions.
 - If the water passes through, flush more water to make sure it's completely clear. If the tube is still clogged, call the Enteral Team or your healthcare provider.
- **If you begin to cough, vomit, or gag during feeding, your tube may have come out of place:**
 - Stop the feeding.
 - Cough several times.
- If you continue to cough, vomit, or gag, call your healthcare provider.
- **If the NJ tube comes out, or moves more than 4 to 5 inches out of place:**
 - Stop feedings.
 - Call your healthcare provider to arrange for the NJ tube tip to be checked. The tube may need to be moved or replaced.
- **If you have ongoing diarrhea, constipation, nausea, vomiting, or bloating, contact the Enteral Team or your healthcare provider. Note that because all your food is liquid, some liquid stool is common.**
- **If breathing becomes especially difficult, call 911.**
- **If you are caring for someone with an NJ tube and the patient has bluish skin or is not breathing:**
 - Call 911.
 - Stop the feeding.
 - Begin CPR or rescue breathing if appropriate and you are trained in it.

Questions for my doctor

Content created and approved by Intermountain Homecare & Hospice