

# Your PEG Tube Guide

# Table of Contents

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This booklet is a guide to help you care for and use your PEG feeding tube. As always, if you have any questions or concerns, please speak with your doctor, nurse or dietitian.

Planning for a PEG feeding tube.....	1
Caring for your PEG tube.....	6
Tube feedings using a PEG tube.....	8
Important info about PEG tube safety changes.....	10
Using the bag method for tube feedings.....	11
Using the syringe method for tube feedings.....	16
Other things you need to know about tube feedings.....	20
Checking for stomach contents (also called Residuals).....	21
Ways to prevent and manage common PEG tube problems.....	24
When to call your doctor.....	28
My questions and notes.....	30

This info is a general resource. It is not meant to replace your doctor's advice. Ask your doctor or health care team any questions. Always follow their instructions.

# Planning for a PEG Feeding Tube

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## What is a feeding tube?

Feeding tubes are used to give food, fluids and medicines. You may need a feeding tube if you:

- cannot eat or drink
- cannot swallow safely
- need extra nutrition

There are many types of feeding tubes. One of the more common types is a **PEG tube**.

## What does PEG stand for?

PEG stands for **P**ercutaneous **E**ndoscopic **G**astrostomy tube.

**Percutaneous** refers to something that is placed or passed through the skin

**Endoscopic** is a procedure using a thin, tube-like device that has a light and lens for viewing. This device is called an endoscope and it's used to place the feeding tube.

**Gastrostomy** is an opening in the stomach

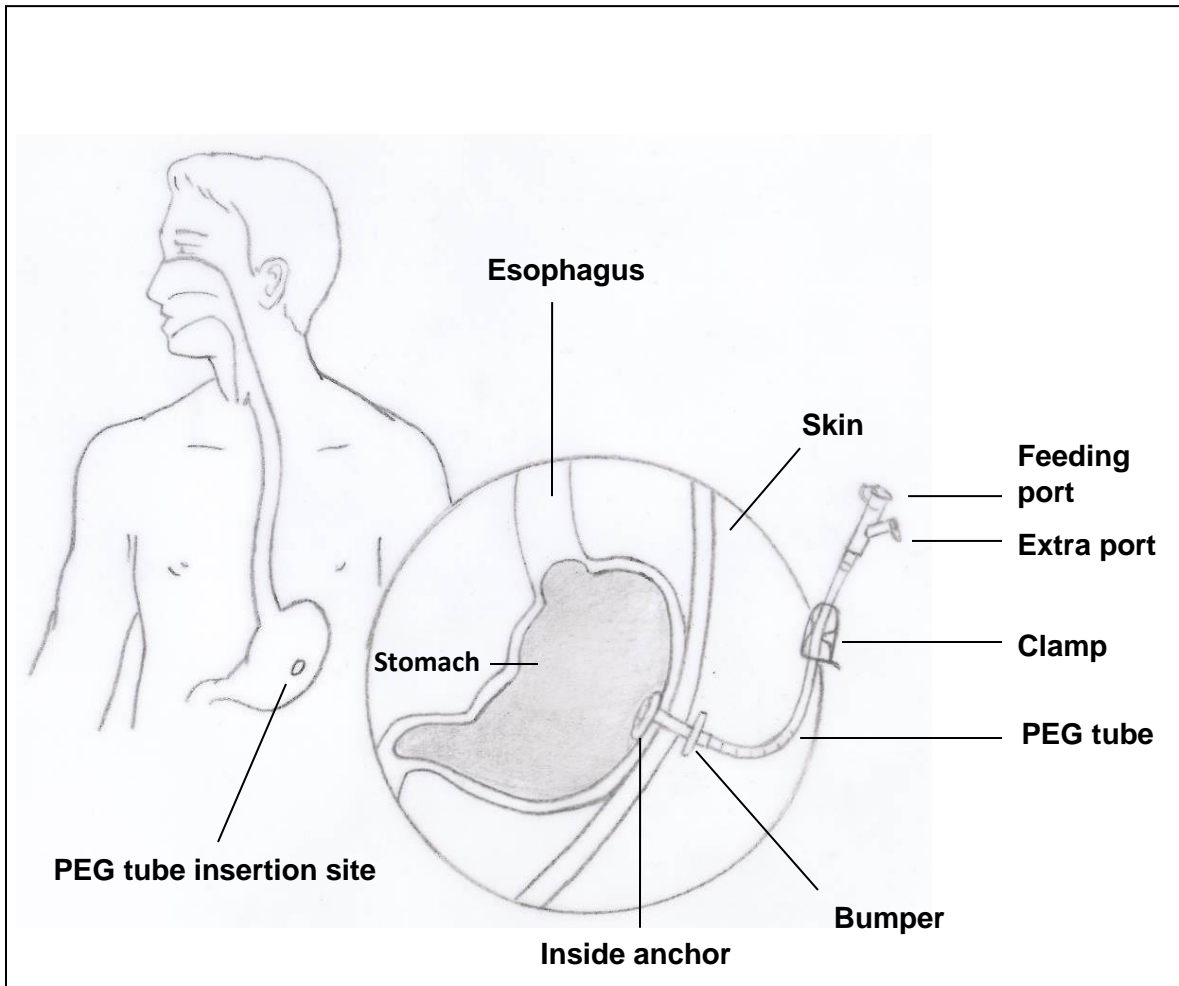
## Who places PEG tubes?

Most often a doctor places a PEG feeding tube in surgery or the GI lab.

# A Closer Look at a PEG Tube

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A PEG feeding tube is placed in your stomach, most often during an outpatient procedure.



## What do I need to know about the placement of my PEG?

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### Planning ahead

- **Do not eat or drink anything after midnight before your PEG tube placement.**
- You need someone to drive you home after your PEG tube is placed.
- If needed, your doctor may suggest you stay overnight in the hospital.
- **If you are sent home the same day, someone must stay with you overnight in case you need help.**
- We may need to do some teaching about the PEG tube and follow-up care before you leave. If someone will be helping you with your PEG tube care, bring them with you so they can be part of the teaching.

### Placement of the PEG tube

- You will be given a medicine to make you sleepy and help you relax for the placement of the PEG tube.
- The PEG tube placement takes about 20 to 30 minutes **but plan on being here for a few hours.** This allows for the check-in process and gives you time to recover.

## What else do I need to know about the placement of my PEG?

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### Going home

**Before** you leave the hospital:

- Ask any questions you have, such as what you can take for pain.
- Make sure you and your caregiver know how to care for your PEG tube.
- Ask if you need any supplies for your PEG tube and feedings. Ask how you will get the supplies and who you should call if you have any questions about them.
- Read pages 28 and 29 to learn what problems you need to call your doctor about.
- Find out who and what number to call if you have any problems or questions.

### What can I expect after my PEG tube is placed?

The area around where the PEG tube was placed may be a little tender or sore for the first week. Call your doctor right away if the dressing over your PEG tube site becomes soaked through (saturated) with blood or drainage during the first 24 hours after your tube is placed. **Read pages 28 and 29 for other problems you need to call your doctor about.**



**Read pages 28 and 29 to learn what problems you need to call your doctor about.**

## What else do I need to know about my PEG Tube?

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### Medicines

Review your medicine (med) list with your doctor, nurse or pharmacist **before** putting any meds in your feeding tube. It is not safe to crush, dilute, mix or put certain meds in your feeding tube.

### Nutrition

You cannot put solid or blended food in your PEG tube because it will get clogged. Instead, you must use a special liquid food called **formula** in your PEG tube. Your dietitian or nurse will teach you how to give yourself the formula through your PEG tube.

### Skin care

Read the next section, **Caring for Your PEG Tube**, to learn how to care for the skin around your PEG tube.

### Supplies

Ask your nurse or dietitian if you will need any supplies for your PEG tube care and feedings and how you will get any needed items.

### Learning more

You and/or a caregiver will need to learn how to care for your PEG tube. Your nurse and/or dietitian will provide teaching about:

- Flushing your PEG tube
- Giving fluids and medicines through your PEG tube when needed
- Knowing what problems to look for and when to report them to your doctor

# Caring for Your PEG Tube

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Most often PEG tubes are placed so you can receive feedings and/or medicines. PEG tubes may also be used to let air or secretions out of your stomach (called decompression).

Be sure to follow these basic self care guidelines. Call your doctor's office if you have any questions or concerns after reading this section.

## Skin Care

You may notice a small amount of redness around the PEG tube after it is placed. The tube site may also drain a small amount of yellowish fluid at first. This fluid will dry and crust around the site. Keep the skin around your PEG tube clean and dry to prevent infection and to help with healing. **Always wash your hands before touching your PEG tube or the skin around it.**

- **After 24 hours, you may remove the dressing and shower.**
- **Clean the PEG tube site each day using these steps:**
  - **Always** wash your hands before caring for the PEG tube site
  - Follow these steps if you have any dry, crusty drainage on the skin around the PEG tube:

**Step 1:** Gently remove any dry crusty drainage from the skin around your PEG tube using a Q-tip and a mixture of half water and half hydrogen peroxide.

**Step 2:** Wet a clean gauze pad or cloth with warm, soapy water. Use it to gently wipe the skin around your PEG tube and the bumper. Rinse the areas with clean, warm water and pat dry with a clean cloth.
  - If you do not have any dry, crusty drainage on the skin around your PEG tube, only follow Step 2 listed above.
  - **Do not** put creams or ointments on the site because they may cause skin problems. **Do not** use alcohol to clean the site or tube.
- **Turn your PEG tube bumper 90 degrees (a half turn) once a day.** Turning the bumper keeps it from sticking to your skin and causing problems.
- **Shower each day with mild soap.** Ask your doctor when you are allowed to take a tub bath, swim or use a hot tub.



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## Skin Care (continued)

- **Check the area around the PEG tube daily for problems.** Look for leaking, bleeding, redness or sore skin around the area where the PEG tube enters your body. If you see any of the problems listed on pages 28 or 29 or have any other concerns, call your doctor right away.

## Flushing Your PEG Tube

**Always flush your PEG tube with a syringe filled with room temperature tap water daily.** Start doing these flushes the day after your PEG tube is placed.

If you are using your PEG tube for medicines or feedings, you will need to do extra flushes to prevent the tube from getting blocked. Your nurse or dietitian will tell you if these are needed and how much water to use.

## If Your PEG Tube is Blocked (Clogged)

Follow the steps on page 27 if your PEG tube is blocked or clogged.



**Always wash your hands before touching your PEG tube or the skin around it.**

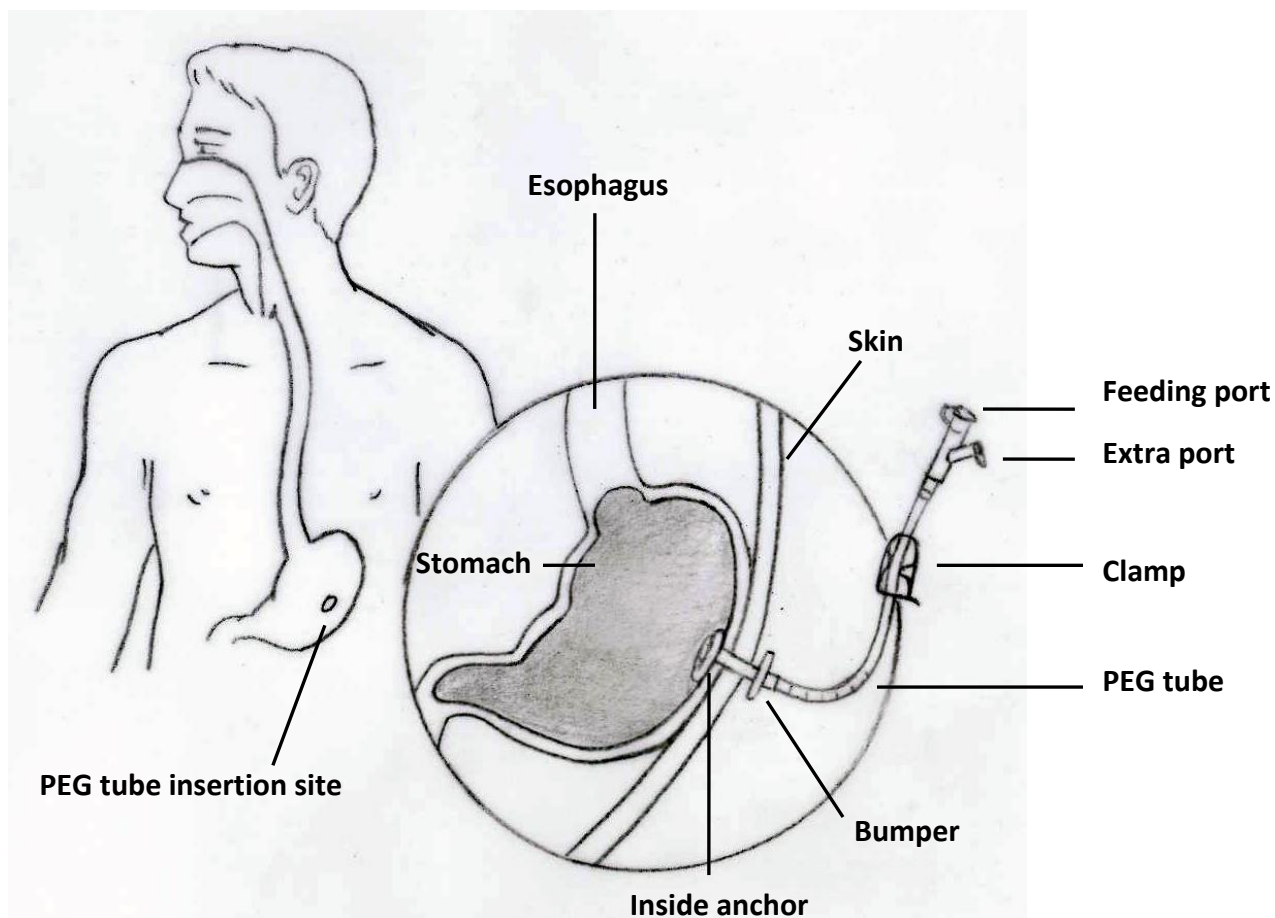
# Tube Feedings Using a PEG Tube

Your feeding tube is called a PEG tube. This type of feeding tube goes right into your stomach. It may also be called a G-tube or gastrostomy (gas-TROS-toh-mee) tube. Tube feedings are most often used when someone can't eat by mouth or if they need more calories. If you have any questions after reading this section, talk with your doctor, nurse or dietitian.

This section explains:

- your tube feeding plan
- how to give tube feedings using a PEG tube and care for supplies
- problems to call your doctor about
- how to prevent and manage common PEG tube problems

## A closer look at a PEG tube



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## Before you start your tube feeding

To receive nutrition each day, you need to follow a tube feeding plan. The type of liquid nutrition your doctor has ordered is called a **formula**. The formula gives you calories, protein and nutrients. Your nurse or dietitian can write down your tube feeding plan below.

### Your tube feeding plan

<b>Tube feeding method (syringe or bag)</b>	
<b>Name of formula</b>	
<b>Amount of formula for each feeding</b>	
<b>Number of feedings each day</b>	
<b>Total amount of formula you need each day</b> <b>This is your goal. This amount of formula gives _____ calories each day.</b>	

## Flushing your feeding tube with water

Using the syringe given to you:

Flush the tube with \_\_\_\_\_ml of tap water before and after each feeding.

Flush the tube with \_\_\_\_\_ml of tap water between feedings \_\_\_\_\_ times a day.

- Use room temperature tap water to flush the tube. **Do not warm the water before putting it in the feeding tube.**
- **Some people need to check and measure the contents of their stomach before each tube feeding. This is called checking a residual** (said ree-ZID-yoo-ul). **Your doctor will tell you if you need to do this.** To learn more, see page 21.

# Important Info about PEG Tube Safety Changes

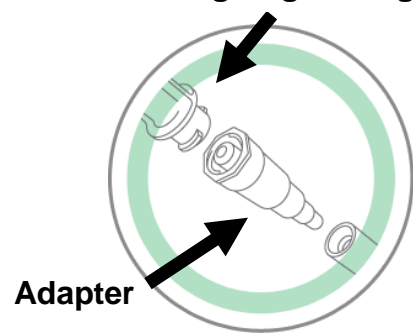
A series of design changes are being done to improve PEG tube safety for patients across the country. The goal is to lower the risk of feeding tubes being hooked to the wrong medical devices by accident. These safety changes will start in 2015 and take place in 3 phases. Over time, the ends of feeding bag tubing, syringes and feeding tubes will change to new connectors called **ENFit connectors**. The goal is to complete all changes by the end of 2016.

If you have questions after reading this handout, please speak with your dietitian or medical supply company. To learn more about the safety changes, visit [www.stayconnected.org](http://www.stayconnected.org).

## Phase 1 – changes to feeding bag tubing/sets

For phase 1, the new ENFit connector will be on the end of all feeding bag tubing. You must use an adapter to hook the new feeding bag tubing to your PEG tube. The adapter twists onto the end of the feeding bag tubing. The adapter is then placed into the feeding port of your PEG tube. Each feeding bag tubing set will come with an adapter. If needed, you can get extra adapters from your medical supply company.

ENFit Connector on Feeding Bag Tubing

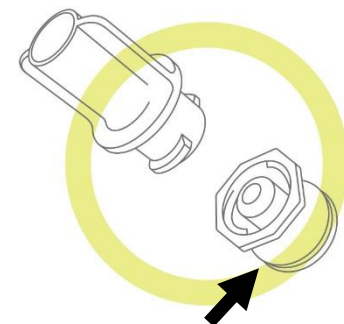


## Phase 2 – changes to syringes

For phase 2, the syringes used with PEG tubes will change. The new syringes will come with an adapter. You must use an adapter to connect the new syringes to your PEG tube.

## Phase 3 – changes to PEG tubes

During phase 3, PEG tubes will have new ENFit connectors. At some point, your doctor may replace your PEG tube with an ENFit PEG tube. If this happens, you will no longer need adapters. This is because ENFit PEG tubes are designed to fit the new tubing and syringes from phases 1 and 2. As more people get ENFit PEG tubes, the adapters will be phased out.



New ENFit PEG tube

# Using the Bag Method for Tube Feedings

If you have been told to use the bag method for tube feedings, follow the steps listed in this section with each tube feeding you give. **If your doctor tells you to check the contents of your stomach before each feeding, follow the steps on page 21 before giving your tube feeding.**

## Get ready for your tube feeding

Gather your clean supplies **before** starting your tube feeding. You will need:

- Feeding bag and tubing
- 60ml syringe
- IV pole or hook
- Empty cup
- Formula
- Cup with enough room temperature water for 2 flushes

1. Prepare your tube feeding on a surface that you have cleaned well with soap and water.
2. Check the date on your formula to make sure it is not expired. If your formula is in a can, wash the top of the can with warm, soapy water then open it.
3. Wash your hands for at least 20 seconds with soap and water and dry well.
4. Close the roller clamp on the feeding bag tubing. See figure 1.

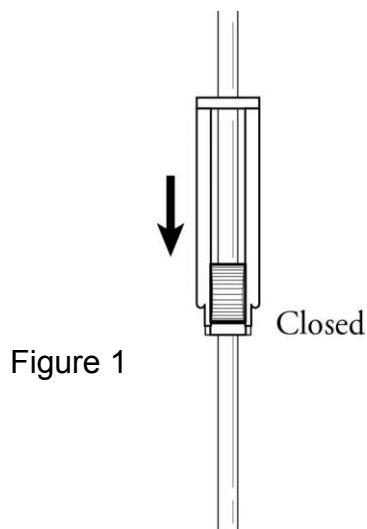


Figure 1

# Using the Bag Method for Tube Feedings

## Get ready for your tube feeding (continued)

5. Pour the ordered amount of formula into the feeding bag. See figure 2. Then close the lid on the bag. Hang the feeding bag above your head on the IV pole or hook. See figure 3.

Figure 2

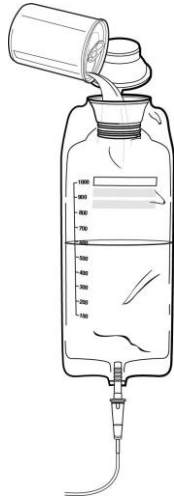
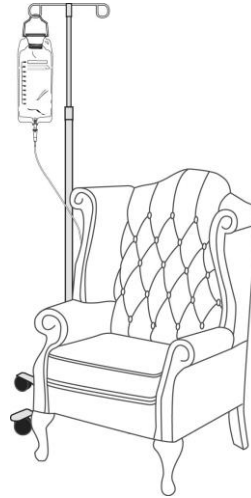
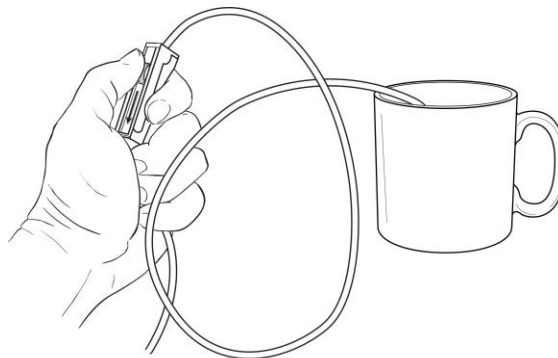


Figure 3



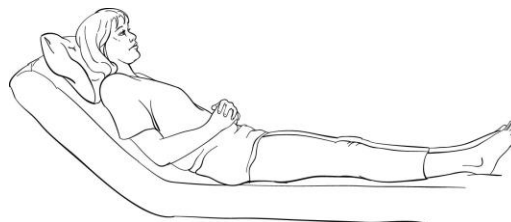
6. Remove the cap from the end of the feeding bag tubing and place the tip in an empty cup. Slowly open the roller clamp and fill all of the feeding bag tubing with formula. See figure 4. Do not leave any air in the tubing.

Figure 4



7. When the feeding bag tubing is filled with formula, close the roller clamp. See figure 1.
8. Sit up for the feeding. If you take the feeding in bed, raise your head and chest with 2 or 3 pillows to at least 45 degrees, which is halfway between flat and sitting straight up. See figure 5.

Figure 5



# Using the Bag Method for Tube Feedings

## Flush the PEG Tube

1. Draw up water in the syringe using the ordered amount. See figure 6.

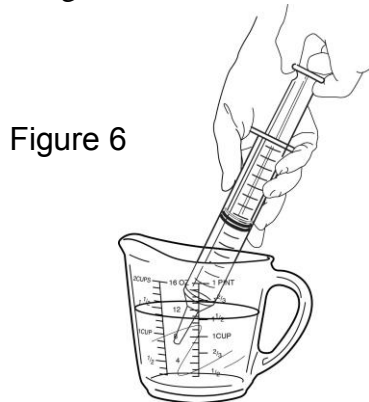


Figure 6

2. Open the feeding port cap. See figure 7.

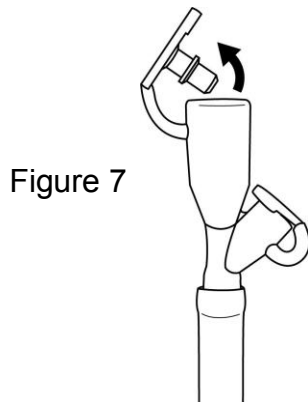


Figure 7

3. Put the tip of the syringe into the feeding port.

4. Open the PEG tube clamp. See figure 8.



Figure 8

5. Gently push the plunger of the syringe to flush the PEG with water. See figure 9.



Figure 9

6. When the flush is done, close the PEG tube clamp and remove the syringe.

7. Insert the tip of the feeding tubing into the feeding port. See figure 10.

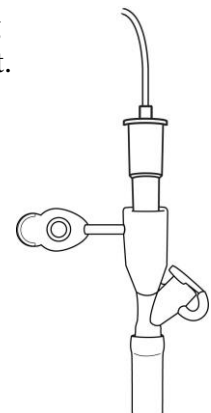


Figure 10

# Using the Bag Method for Tube Feedings

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## Give the Feeding

1. Open the PEG tube clamp. See figure 8.
2. Slowly open the roller clamp on the feeding bag tubing. Adjust the roller clamp so the feeding goes in slowly over 30 to 60 minutes. See figure 11.
3. When the formula is done going in, close the roller clamp. See figure 1.
4. Close the PEG tube clamp.
5. Remove the feeding bag tubing and put the cap on the feeding bag tubing.
6. Close the feeding port cap.

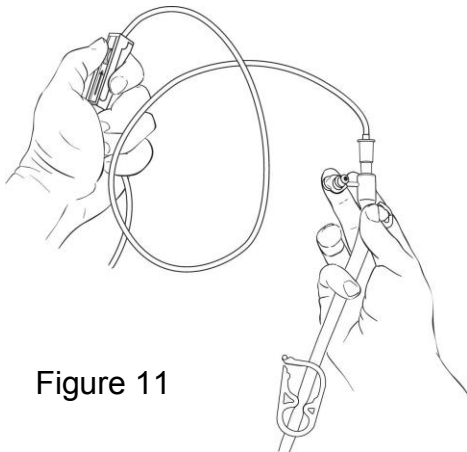


Figure 11

## Flush the PEG Tube Again

1. Draw up water in the syringe using the ordered amount. See figure 6.
2. Open the feeding port cap and put the tip of the syringe into the feeding port.
3. Open the PEG tube clamp. See figure 8.
4. Gently push the plunger of the syringe to flush the PEG tube with water. This helps keep the tube from getting clogged. See figure 9.
5. When the flush is done, close the PEG tube clamp and remove the syringe.
6. Close the feeding port cap.
7. **Stay sitting upright for at least 30 minutes after the feeding. Do not lie down during this time.** This can help avoid getting an upset stomach and possibly throwing up. It can also keep fluid from going into your lungs (called aspiration).



# Using the Bag Method for Tube Feedings

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## Clean Up

1. After each feeding, wash the syringe and cups in warm, soapy water. Rinse each item well with hot water.
2. Rinse the feeding bag and tubing well in warm water after each feeding. **Do not clean the feeding bag with soap.**
3. Allow the feeding bag and tubing to air-dry fully.
4. Store all your tube feeding supplies in a clean place when not in use.
5. Use only one new feeding bag and tubing each day. **Throw away the bag and tubing if it cracks.**
6. If you have any formula left in the can, write the date and time on the can. Cover the can and put it in the refrigerator. If you do not use what's left within 24 hours, throw it away.

# Using the Syringe Method for Tube Feedings

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If you have been told to use the syringe method, follow these steps with each tube feeding you give. **If your doctor tells you to check the contents of your stomach before each feeding, follow the steps on page 21 before giving your tube feeding.**

## Get ready for your tube feeding

- Gather your clean supplies **before** you start your tube feeding. You will need:
  - 60ml syringe
  - Formula
  - Cup with enough room temperature water for 2 flushes.
- Prepare your tube feeding on a surface that you have cleaned well with soap and water.
- Check the date on your formula to make sure it is not expired. If your formula is in a can, wash the top of the can with warm, soapy water then open it.
- Wash your hands for at least 20 seconds with soap and water and dry well.
- Sit up for the feeding. If you take the feeding while in bed, raise your head and chest with 2 or 3 pillows to at least 45 degrees, which is halfway between flat and sitting straight up. See figure 1.

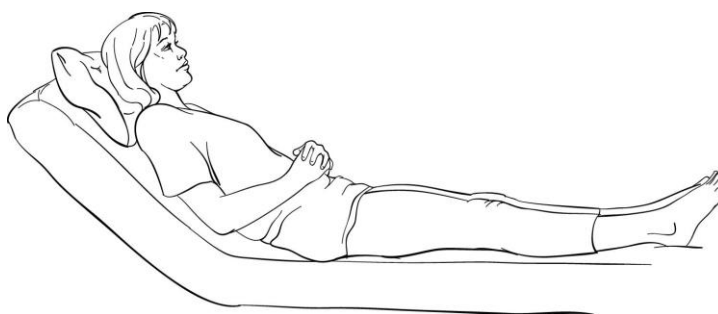


Figure 1

# Using the Syringe Method for Tube Feedings

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## Flush the PEG Tube

1. Draw up water in the syringe using the ordered amount. See figure 2.

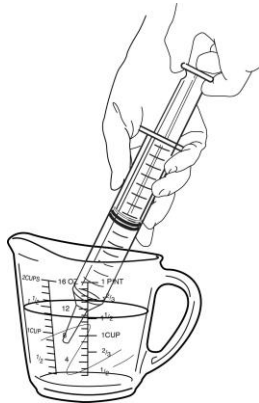


Figure 2

2. Open the feeding port cap. See figure 3.

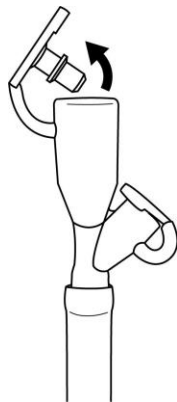


Figure 3

3. Put the tip of the syringe into the feeding port.

4. Open the PEG tube clamp. See figure 4.



Figure 4

5. Gently push the plunger of the syringe to flush the PEG with water. See figure 5.

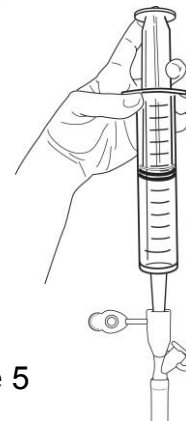


Figure 5

6. When the flush is done, close the PEG tube clamp and remove the syringe.
7. Close the feeding port cap.
8. Take the plunger out of the syringe and set it on a clean surface.

# Using the Syringe Method for Tube Feedings

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## Give the Feeding

1. Open the feeding port cap and put the syringe into the PEG tube.
2. Pour your formula into the syringe. See figure 6.
3. Open the PEG tube clamp. See figure 4.
4. Hold the PEG tube at chest level and let the formula flow freely through the PEG tube. Keep pouring formula into the syringe until you are done giving the ordered amount.
5. When the formula is done going in, close the PEG tube clamp.
6. Remove the syringe and close the feeding port cap.

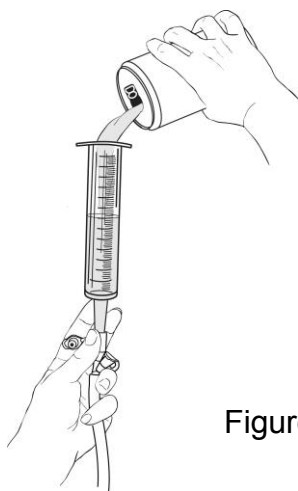


Figure 6

## Flush the PEG Tube Again

1. Put the plunger back in the syringe.
2. Draw up water in the syringe using the ordered flush amount. See figure 2.
3. Open the feeding port cap and put the tip of the syringe into the feeding port.
4. Open the PEG tube clamp. See figure 4.
5. Gently push the plunger of the syringe to flush the PEG tube with water. This helps keep the tube from getting clogged. See figure 5.
6. When the flush is done, close the PEG tube clamp and remove the syringe.
7. Close the feeding port cap.
8. **Stay sitting upright for at least 30 minutes after the feeding. Do not lie down during this time.** This can help avoid getting an upset stomach and possibly throwing up. It can also keep fluid from going into your lungs (called aspiration).

# Using the Syringe Method for Tube Feedings

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## Clean Up

1. After each feeding, wash the syringe and water cup in warm, soapy water. Rinse each item well with hot water.
2. Store all your tube feeding supplies in a clean place when not in use.
3. If you have any formula left in the can, write the date and time on the can. Cover the can and put it in the refrigerator. If you do not use what's left within 24 hours, throw it away.

# Other Things You Need to Know About Tube Feedings

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- **Stop** the feeding and wait 1 hour if you have any of these problems:
  - You start throwing up
  - You have discomfort or pain
  - Your stomach becomes swollen and firm

**If any of these problems last for more than one hour, call your doctor.**

- **Stop** the feeding and call your doctor right away if the formula is leaking around the tube.
- **Stop** the feeding and call 911 right away if you start choking and or it is hard for you to breathe.
- If the PEG tube falls out or comes out part-way, call your doctor right away. If you can't reach your doctor, go to the nearest Emergency Room (ER). Do not use the tube until a doctor tells you it is okay to use.
- Review your medicine (med) list with your doctor, nurse or pharmacist before putting any meds in your feeding tube. It is not safe to crush, dilute, mix or put certain meds in your feeding tube.
- Make sure you know how to reach your health care team and what problems you need to call your doctor about. Read pages 28 and 29. Write down the names and contact numbers for your health care team on page 29.

# Checking for Stomach Contents (Residuals) When You Have a PEG Tube

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Sometimes the food in your stomach stays there too long before moving to your intestine. This is called a **residual**.

If your doctor tells you to, use the steps below to check and measure the contents of your stomach **before** each tube feeding. Ask your doctor, nurse or dietitian when you can stop checking your stomach contents (residuals).

## Gather supplies:

- A 60 ml syringe
- A clean measuring cup marked with milliliters (ml)
- A cup with enough room temperature tap water for one flush
- A piece of paper and pen to record your residual amounts

## How to check your residuals

1. Wash your hands for at least 20 seconds with soap and water. Dry hands with a clean towel.
2. Make sure the syringe plunger is pushed all the way down.
3. Open the feeding port cap.
4. Put the tip of the syringe into the feeding port.
5. Open the PEG tube clamp.
6. Slowly and gently pull back on the syringe plunger until you can't pull any further, or until the syringe is full of stomach fluid. Do not pull strongly on the syringe if it resists.

### If the syringe is only partly filled with stomach fluid

- Check the marks on the syringe to see how much stomach fluid has come out.
- Gently push the syringe plunger so all of the fluid goes back into your stomach.
- Close the PEG tube clamp.
- Take the syringe out of the feeding port.
- Use the syringe to draw up a \_\_\_\_\_ ml tap water flush.
- Put the syringe into the feeding port.
- Open the PEG tube clamp.

# Checking for Stomach Contents (Residuals) When You Have a PEG Tube

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- Gently push on the syringe plunger to flush the tube with water.
- When the flush is done, close the PEG tube clamp.
- Remove the syringe and put the cap back on the feeding port.
- Write down how much fluid came out of your stomach.
- Wash the measuring cup, syringe and plunger with soap and water. Let all items air dry.

## **If the syringe is full of 60 ml of stomach fluid**

- Close the PEG tube clamp.
- Remove the syringe.
- Empty the syringe into the measuring cup. **Do not throw this fluid away.**
- Put the syringe back into the feeding port.
- Open the PEG tube clamp.
- Slowly and gently pull back on the syringe plunger until you can't pull any further, or until the syringe is filled with 60ml of stomach fluid again. **Do not pull strongly on the syringe if it resists.**
- Close the PEG tube clamp.
- Remove the syringe.
- Empty the syringe into the measuring cup. **Do not throw this fluid away.**
- Repeat the steps above until no more fluid comes out of your stomach.
- Check the marks on the measuring cup to see how much fluid has come out.
- Follow the steps below to put the fluid back into your stomach and flush your PEG tube:
  - Remove the syringe plunger and set it on a clean surface.
  - Put the syringe into the feeding port.
  - Open the PEG tube clamp.
  - Hold the syringe and feeding tube upright. Pour the stomach fluid from the measuring cup into the syringe until it is full. Allow the fluid to go into your stomach. Repeat these steps until all of the fluid is put back in your stomach.
  - Close the PEG tube clamp.



# Checking for Stomach Contents (Residuals) When You Have a PEG Tube

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- Put the plunger back into the syringe and make sure the syringe plunger is pushed all the way down.
- Use the syringe to draw up a \_\_\_\_\_ ml tap water flush.
- Put the syringe into the feeding port.
- Open the PEG tube clamp.
- Gently push on the syringe plunger to flush the tube with water.
- When the flush is done, close the PEG tube clamp.
- Remove the syringe and put the cap back on the feeding port.
- Write down how much came out of your stomach.
- Wash the measuring cup, syringe and plunger and measuring cup with soap and water. Let all items air dry.

## What to do next based on how much stomach fluid you withdraw

If you withdraw less than \_\_\_\_\_ ml of fluid, push it back into your stomach and give the feeding.

If you withdraw more than \_\_\_\_\_ ml of fluid:

- Put the fluid back into your stomach and flush the tube with \_\_\_\_\_ ml of tap water.
- Wait 1 hour and check your stomach contents again.
  - If you withdraw less than \_\_\_\_\_ ml of fluid, push it back in and give your tube feeding.
  - If you still withdraw more than \_\_\_\_\_ ml of fluid, push it back in and flush the tube with \_\_\_\_\_ ml of tap water. Do not give the feeding and call your doctor's office.

Always speak with your doctor, nurse or dietitian if you have any questions or concerns.

# Ways to Prevent and Manage Common PEG Tube Problems

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This section explains ways to prevent and handle some common problems with PEG feeding tubes. Always call your doctor, nurse or dietitian if you have any questions.

## Diarrhea

Having loose, watery bowel movements for more than 1 day or more than 5 bowel movements a day.

### Ways to Prevent Diarrhea

- Do not give formula too fast. Talk with your nurse or dietitian if you have questions about how much time it should take for each tube feeding.
- **Always** wash your hands for at least 20 seconds with soap and water before each feeding.
- Clean, store and replace feeding bag and supplies as directed.
- Keep opened formula covered in the fridge. Use it within 24 hours.
- **Do not use your formula if it has been opened and left out of the fridge for 6 hours or longer.**

### If You Have Diarrhea

- Give feedings and water flushes more slowly.
- Call your dietitian to discuss possible changes to your feeding schedule.
- Call your doctor right away if diarrhea lasts for more than 24 hours.

# Ways to Prevent and Manage Common PEG Tube Problems (continued)

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## Fluid Loss (also called dehydration)

Signs of dehydration may include:

- Being very thirsty
- Sunken eyes
- Having small amounts of urine or very dark urine
- Breathing or heart beating faster than normal
- Losing 2 or more pounds in a week
- Dry lips and tongue or tongue looks cracked
- Feeling weak, very tired, dizzy or confused

**If you have any of the problems listed above, call your doctor right away.**

## Ways to Prevent Fluid Loss

- Give all the formula and water flushes that have been ordered for your feeding tube.
- Ask your doctor or nurse if you need to take in more fluids during hot weather or if you are throwing up or having diarrhea.

# Ways to Prevent and Manage Common PEG Tube Problems (continued)

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## Constipation

Not having a bowel movement for more than 2 days.

### Ways to Prevent Constipation

- Give all the formula and water flushes that have been ordered for your feeding tube.
- If you've been told to take a stool softener and/or a laxative, take it as directed.
- Remain active by doing things such as walking.

If you already have problems with constipation, speak with your health care team. Ask them about other ways to prevent constipation.

### If You Have Constipation

Call your doctor if you do not have a bowel movement in 2 days.

## Upset Stomach (also called Nausea)

### Ways to Prevent an Upset Stomach

- Avoid giving tube feedings too fast.
- Give formula that is at room temperature.
- Do not lie down during feeding and for 30 minutes after feeding.
- If you have anti-nausea medicine, ask your doctor or nurse when the best time is to take it. Anti-nausea medicine may work better if you take it before your tube feeding.

### If You Have an Upset Stomach

Do not give the feeding if you feel like it will make you throw up. If you have to skip two feedings, call your doctor or nurse.

# Ways to Prevent and Manage Common PEG Tube Problems (continued)

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## Blocked (Clogged) PEG Tube

PEG tubes can sometimes become clogged or blocked.

### Ways to Prevent a Blocked PEG Tube

Do not allow formula to stop or sit in tube. Flush your tubing with water as directed before and after giving tube feedings and medicines.

### If Your PEG Tube is Blocked or Clogged

Check the tubing for kinks. Make sure clamps are not closed. If there are no kinks and clamps are not closed, follow these steps:

**Step 1:** Gently roll the tube between your thumb and finger. Start at the top of the tube and work your way down.

**Step 2:** If Step 1 does not unblock your PEG tube, try pushing warm water into the tube with the syringe and plunger. Push and pull back on the plunger on the syringe until the tube is no longer blocked.

**Step 3:** If PEG tube is still blocked after trying Steps 1 and 2, call your doctor or nurse.

## Other Things You Need to Know

- Do not lie down during feeding or for 30 minutes after feeding. If you are in bed, make sure the head of the bed is at a 45 degree (45°) angle.
- Do not give the feeding if you feel bloated, nauseated or you are throwing up.
- **If you are choking or it is hard to breathe, call 911 right away.**



# When to Call Your Doctor

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The next 2 pages list problems you need to call your doctor about.

## Call your doctor right away if you have:



- Diarrhea: loose, watery bowel movements for more than 1 day or more than 5 bowel movements a day
- Constipation: not having a bowel movement in 2 days
- An upset stomach that won't go away (nausea) or throwing up (vomiting)
- Weight loss or weight gain of 2 pounds or more in one week
- Gas or bloating for more than 24 hours that keeps you from giving tube feeds
- A lot of coughing during your tube feeding
- Signs of fluid loss (dehydration), such as:
  - Being very thirsty
  - Sunken eyes
  - Having small amounts of urine or very dark urine
  - Breathing or heart beating faster than normal
  - Losing 2 or more pounds in a week
  - Dry lips and tongue or tongue looks cracked
  - Feeling weak, very tired, dizzy or confused
- Signs of infection such as:
  - Fever of 100.4°F (38°C) or higher
  - Redness, swelling, drainage, soreness or pain around PEG tube
  - New pain or pain that does not get better with pain medicine
  - Bad smelling drainage around PEG tube
- Any of the problems listed on the next page or any other problems or concerns

## When to Call Your Doctor (continued)

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**Call your doctor right away if you have any of these problems:**



- PEG tube is leaking or damaged
- PEG tube is blocked and you cannot get it unclogged using the steps on page 27
- Bright red blood in your PEG tube or leaking or bleeding around PEG tube
- Pain when you flush or put a feeding through your PEG tube
- Bumper around PEG tube feels tight or is making a mark on your skin
- PEG tube falls out or comes out part way. If this happens and your doctor's office is closed, go to the nearest ER (Emergency Room).
- Dressing over your PEG tube site becomes soaked through (saturated) with blood or drainage during the first 24 hours after your tube is placed

**If you are choking or it is hard to breathe, call 911 right away.**

### Names and phone numbers for my health care team

	Name	Phone number
<b>My doctor</b>		
<b>My nurse</b>		
<b>My dietitian</b>		
<b>Home care company</b>		
<b>Medical supply company</b>		





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## Tell Us What You Think

If you would like to share any feedback or comments about this booklet, please call 216-844-5432 or 1-800-641-2422.

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