

# ENTERAL

## MIC Surgical Jejunostomy Feeding Tube

PATIENT GUIDE

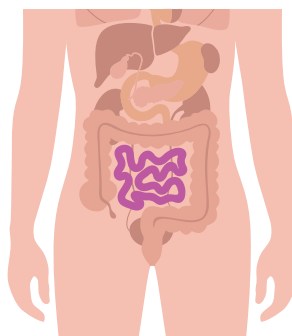


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This guide has been created and produced to help you care for and use your MIC Surgical Jejunostomy Feeding Tube. If you have any questions or queries please contact our support team [info@vygon.co.uk](mailto:info@vygon.co.uk).

## What is a MIC Surgical Jejunostomy Feeding Tube?

A MIC Surgical Jejunostomy (Jejunal or Jej) Feeding Tube is a soft tube which is inserted into a section of your small bowel, below your stomach called the jejunum. This will be completed by a trained specialist in a hospital theatre.



## Use

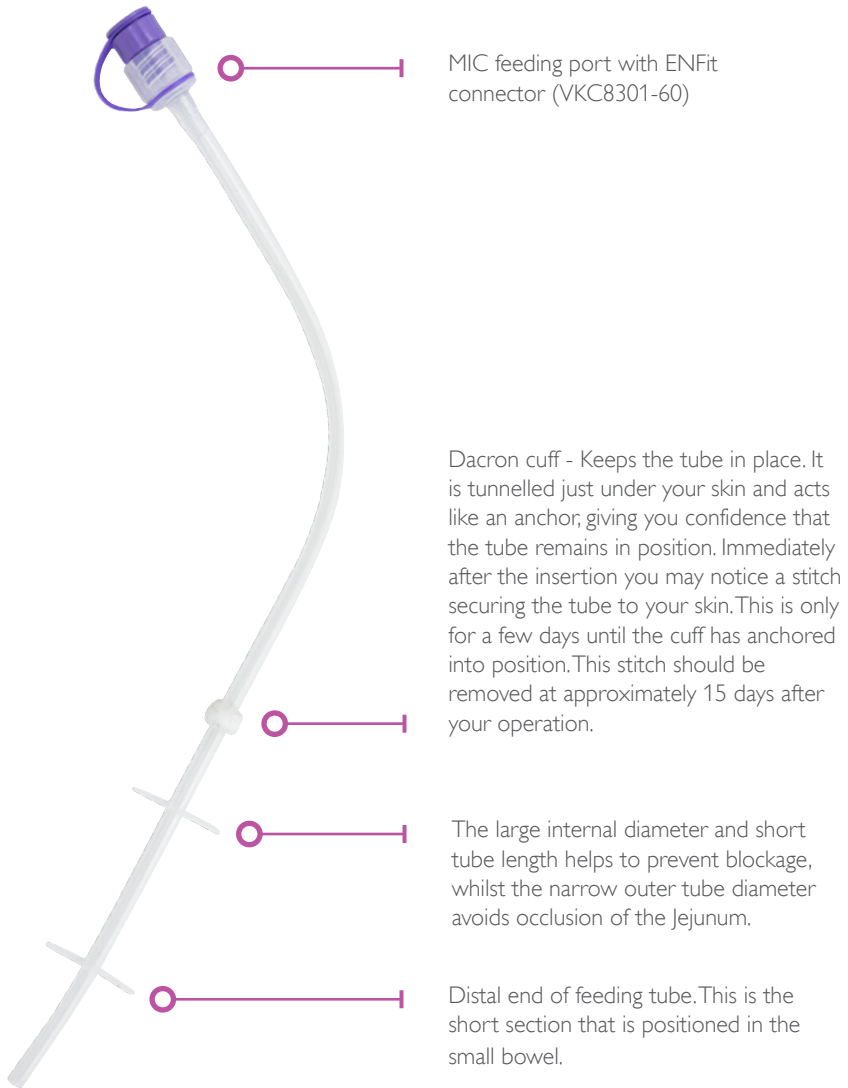
The placement of this tube enables feeding directly into your small bowel.

Reasons you may have had a tube placed include:

- Feeding into your stomach is not a viable option
- You are unable to swallow enough food or fluid to meet your nutritional requirements
- Future treatments may cause temporary loss of appetite or swallowing difficulties.

A MIC Surgical Jejunostomy Feeding Tube can be used with all types of liquid enteral feeding formulas, including elemental and polymeric diets.

It is important that you care for your MIC Surgical Jejunostomy Feeding Tube properly to prevent soreness and infection.



MIC feeding port with ENFit connector (VKC8301-60)

Dacron cuff - Keeps the tube in place. It is tunnelled just under your skin and acts like an anchor; giving you confidence that the tube remains in position. Immediately after the insertion you may notice a stitch securing the tube to your skin. This is only for a few days until the cuff has anchored into position. This stitch should be removed at approximately 15 days after your operation.

The large internal diameter and short tube length helps to prevent blockage, whilst the narrow outer tube diameter avoids occlusion of the jejunum.

Distal end of feeding tube. This is the short section that is positioned in the small bowel.

## Care during the first five to seven days

For the first five to seven days your site will be cleaned using an aseptic technique.

Please check your stoma site daily and check for any redness, inflammation or bleeding. A small amount of discharge from the stoma site is normal within the first few days. Dressings may be used in the first few days.

## Care after the first five to seven days

Your site still needs to be kept clean. Clean the site, using non-perfumed soap and warm water and allowing adequate drying of the tube entry site.

Typically after five to seven days dressings are no longer required and the site should air to heal.

Baths are not recommended until the tube has been in place for over 14 days and the stoma tract has had time to heal. In the meantime, showering is acceptable. Once the wound is fully healed you can bath or shower as normal.

Tube feeds contain all the necessary energy and nutrients normally provided by a balanced diet.

## Pump feeding

Your Dietitian will discuss with you the most suitable way for you to be fed. Exactly how much feed you need will also be calculated.

An enteral feeding pump is usually required to administer feed, unless otherwise directed by your Dietitian.

Your Dietitian will make arrangements for you to receive the equipment you may require before discharge including training on how to use it.

This training usually takes place in hospital until you gain confidence and skill to undertake these procedures. Ongoing support will be available when you are discharged home.



Do not allow the feeding solution to stand in the tube long enough for solids to settle out and form clogs. If the tube becomes clogged, do not attempt to clear it. To prevent clogging and maintain the tube in proper working order, please follow these instructions carefully.

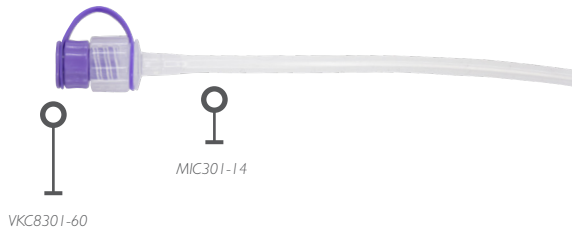
### Medicine administration

- Medicines should be in liquid form wherever possible.
- Flush the tube before and after each medicine is administered.
- Draw-up each medication separately (dilute medication if necessary) using a purple syringe (enteral syringe).
- Flush with at least 10mls of sterile water between each medication.
- After your last medication, flush using a push-pause technique. Creating turbulence within the tube when flushing will help to remove particles within the tube. (Your nurse will show you how to do this).

### Standard flushing procedure

Flush the tube before and after each use with warm sterile water. For continuous, round-the-clock feeding, flush the tube at least three times daily between feeds. Even when the tube is not in use it should be flushed at least three times daily, to help avoid occlusion. Use a 60ml enteral syringe.

For connection with ENFit syringes and ENFit administration sets you will need a supply of ENFit adaptors, codes VKC8301-60 and VKC8135-14, from your provider.



Should an occlusion occur, please consult your clinician for help in clearing the tube.

*Remember:* if you need help, consult your named healthcare professional.

# Dos and Don'ts

- Do** wash your hands before handling your tube.
- Do** keep the fluid flowing at all times.
- Do** flush the tube before and after each use
  - at least three times a day.
- Do** use only medications that have been supplied in liquid form from the manufacturer.
- Do** flush in between and after each medication.
- Do** remove residue from the tube once a week, using a prescribed digesting solution. *Contact your doctor or nurse for help if the tube becomes blocked.*
- Do not** rotate the tube.
- Do not** use blended diets.
- Do not** use the tube for bolus feeds.
- Do not** use medication that has been crushed, or has particulate matter in it, or is so thick that it will not flow.
- Do not** use pressure to clear the blockage. It may damage the tube.
- Do not** use sharp pins or stiff utensils to dislodge a blockage. The tube may rupture.
- Do not** let feeding solutions stand in the tube.

## NATIONAL PATIENT SAFETY ALERTS (NPSA) GUIDELINES

### 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.

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

1. Pain during feeding (including medication delivery and water flushes)
2. Any pain or distress after the procedure
3. New bleeding from the procedure 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 to be examined and the symptoms assessed immediately

Contact your healthcare professional for further advice.

### Things to remember

Report unusual symptoms such as abdominal pain, abdominal discomfort, abdominal tenderness, abdominal distension, unexplained fever or an unusual amount of bleeding through, or around the tube, to your named healthcare professional.

Avoid the use of creams, lotions or powders at the Jejunostomy site, unless advised to do so by your nurse or doctor.

### Mouth care

It is important that whilst you are receiving feed via your tube, regular attention should be given to your oral hygiene to reduce the risk of oral thrush and other mouth infections from occurring.

To be completed by the Ward Nurse or Dietitian responsible for your discharge patient

Name: \_\_\_\_\_

has been fitted with a MIC Surgical Jejunostomy Feeding Tube size Fr (OD/ID) 14-9.

Lot number: \_\_\_\_\_

Date of Insertion: \_\_\_\_/\_\_\_\_/\_\_\_\_ Skin sutures:  Yes  No

Name of Community Nurse informed: \_\_\_\_\_

## Type of feeding

Type of feed: \_\_\_\_\_

Continuous: \_\_\_\_\_ mL per hour over \_\_\_\_\_ hours

Flush with \_\_\_\_\_ mL of water pre and post-feed and pre and post medication

Extra water flushes can be given as \_\_\_\_\_ mls every \_\_\_\_\_ hours

## Contact details

Monday to Friday - 9am to 5pm

Name: \_\_\_\_\_

Contact Telephone Number: \_\_\_\_\_

For urgent advice outside the hours stated above

Name: \_\_\_\_\_

Contact Telephone Number: \_\_\_\_\_

In an emergency: Ring 999 or go to your local Emergency Department.

**For further information, please contact: [info@vygon.co.uk](mailto:info@vygon.co.uk)**

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GATEWAY NORTH, LATHAM ROAD, SWINDON, WILTSHIRE SN25 4DL  
RECEPTION: +44 (0)1793 748800

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