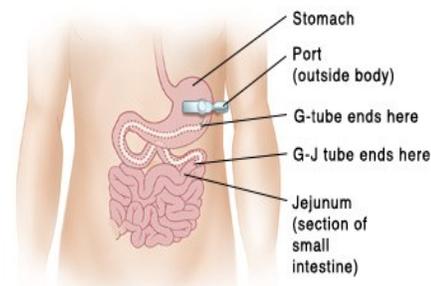


Factsheet: Feeding Tubes

What is it?

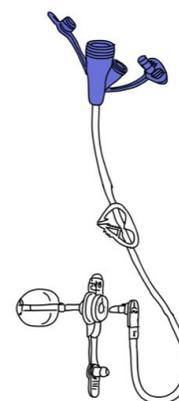
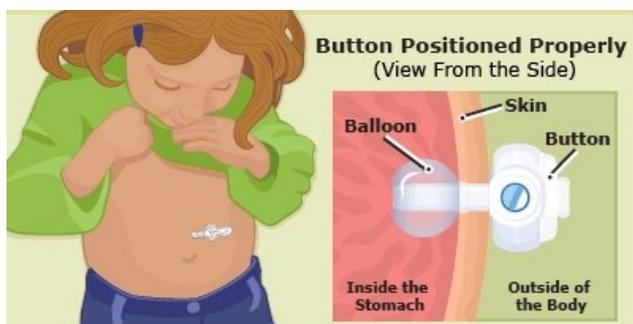
Several types of feeding tubes exist to help children tolerate the nutrition they need. Types of feeding tubes that you may see in the school setting include a gastrostomy tube (G-tube), a jejunostomy tube (J-tube), and a combination GJ tube. With a G-tube, a surgical procedure creates an opening directly into the stomach. A J-tube may be created the same way but directly into the child's small intestine. This is more common when a child cannot tolerate feeds in the stomach. Some students may have both a G-tube and a J-tube that are separate and each surgically placed in their individual locations. Some students may have a combination GJ tube; a G-tube placed in the stomach, with a smaller tube threaded from the ostomy in the stomach down to the intestine. It is important to know which type of tube the student has in order to know where to give feeds, medication, flushes, and what to do in the event that the tube needs to be replaced.



What are different types of tubes?

- ⇒ **PEG tube:** A percutaneous endoscopic gastrostomy. It is held in place by a plastic bumper inside the stomach.
- ⇒ **MIC G-tube:** A tube that is held in place by a water filled balloon inside the stomach.
- ⇒ **MIC-KEY GT Button:** Known as a custom, skin level device that lays flat against the skin and is held in place by a water filled balloon. *(A similar skin-level device, also with a water filled balloon, is known as a "Mini" button. A device with a mushroom shaped dome is called a "BARD.")*

How does the "button" work?



An adapter, called an extension tube, is connected to give feeds and medications and should be removed when not in use.

Preparing for feedings

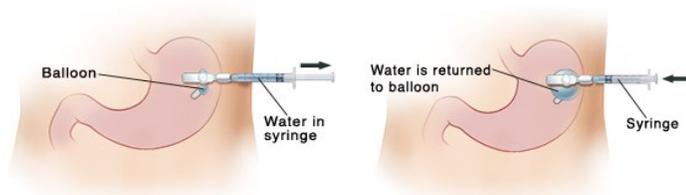
- Common feeding pumps seen in school are the Kangaroo Joey and Infinity pump
- Bolus feedings are given over a short period of time, like 1 hour via a pump
- If given by gravity, try to extend the feeding over 20 minutes to help the child tolerate
- Continuous feedings are done via a pump at a slow, steady rate
- Volume is the quantity, or how much the child is getting
- Rate is how fast the formula is running each hour
- Water flushes should be ordered

*Flush GT and JT's after each feed,
GJ tubes should be flushed every 2-3 hours, via the JT*



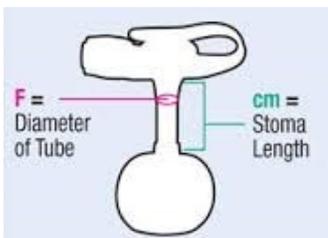
Replacing a feeding tube

If a feeding tube falls out or is pulled out, cover the site with gauze and gently apply pressure. Follow your school district's policy for replacing the tube, if applicable with a doctor's order. See *SHNIC's competency checklist for feeding tube replacement*.



The first tube change should be completed by the surgeon. Caregivers should then be changing the skin level feeding tube device every 3 months at home.

Sizing & balloon volume



Type of tube:

GT JT GJ

French size of tube: _____

Length of tube: _____

Mic-Key Buttons Balloon fill volumes

- 12 Fr: 3 ml, max 5ml
- 14-24 Fr: 5 ml, max 10ml

For Mini-Buttons, follow volume table in patient education guide (page 11)

Skin care

Monitor the site for tenderness, redness, bleeding, and any formula leakage. Excess tissue can grow around the healing tube site, called granulation tissue. It can be pink, red or beefy and can sometimes even bleed. Monitor the site for change or treatment. If formula leaking, check the balloon size to ensure there is a snug fit. If skin drainage is increased, yellow to green or smells bad, notify the caregiver that healthcare provider follow-up is necessary.

SHNIC school nurses information:

Specific health issues for individual health care plans

- Diagnosis; including why child requires tube feeding
- Type and size of tube feeding device, including balloon size
- Orders to replace tube, if applicable per county policy
- Nutrition orders for formula and method of delivery (continuous, intermittent, rate, volume)
- Clear and visible label for formula that is prepared at home, signed by the healthcare provider
- Flush orders including amount and frequency
- Positioning during and after the feed (head elevated >45 degrees)
- Amount of oral stimulation during the feed
- Assessment of child's tolerance during feed (pain, abdominal distention, etc.)
- Method and frequency for venting or checking gastric residuals, if applicable
- Back up supplies at school including tube, formula, etc.
- Orders for back up formula in event of spill or lock down

Resources & Manuals

Feeding Tube Awareness Foundation

<http://www.feedingtubeawareness.org/navigating-life/on-the-go/feeding-at-school/>

GT: A Guide for Parents

<http://www.childrensmn.org/manuals/pfs/homecare/196854.pdf>

Mic-Key feeding tube

<http://www.mic-key.com/home.aspx>

GJ: A Guide for Parents

<http://www.childrensmn.org/manuals/pfs/homecare/196857.pdf>

Mini One feeding tube

<http://www.appliedmedical.net/gi-products/minione/>