**Jejunostomy Tube Feeding – Continuous Drip**

**Things to consider:**

* Be sure to take steps to ensure patient privacy when performing procedure
* The unlikely risk with jejunostomy tube feedings is aspiration of formula into the lungs, be sure the student is positioned properly with head elevated at least 30 degrees
* Encourage the student to assist in the procedure as much as he/she is able to help student learn self-care skills

**Needed supplies:**

Adaptor with tubing and clamp

Feeding solution in container (bag) at room temperature

60 ml catheter-tipped syringe

Pump

Warm tap water, if prescribed

Pole to hold feeding container

Student’s Individualized Health Plan (IHP) and/or healthcare provider’s orders

**Procedure:**

1. Review healthcare provider’s order including:
	1. the type of formula
	2. amount of formula
	3. infusion type and rate
	4. frequency and timing of administration
	5. amount of water used to flush the tube
2. Explain the procedure to child at his/her level of understanding
3. Wash hands
4. Assemble equipment and place on a clean surface
5. Position child either sitting or supine with head up at least 30 degrees
6. Ensure that the clamp is not resting on the student’s skin
7. Put on gloves
8. Observe abdomen for signs of tube malposition or obstruction/clogging of jejunostomy tube such as difference in external tube length compared to baseline measurements or abdominal distention
	1. If student has abdominal distention do not administer feeding and contact parent/guardian and healthcare provider
9. Pour feeding/fluids into feeding container, run feeding through tubing to the tip and clamp tubing
10. Hang container on pole at height required to deliver prescribed flow
	1. If pump is used, place tubing into pump and set flow rate
11. Open safety plug and insert tubing into the J-tube
12. Open clamp on tubing
	1. Turn on pump to prescribed rate
13. When prescribed volume of feeding is completed, clamp feeding bag tubing and remove
14. Attach catheter-tipped syringe and flush tubing with 5ml of water or prescribed amount
15. Disconnect syringe
16. Connect cap or plug to J-tube
17. Keep the child in a feeding position for at least 30 minutes after completing feeding, if required
18. Wash syringe and tubing with soap and warm water and put in home container
	1. Catheter tip syringe and feeding extension tubing can be used repeated times for up to 24 hours
19. Remove gloves
20. Wash hands
21. Document assessment, interventions, and outcomes in student’s healthcare record
22. Follow up with parents/guardian and healthcare provider, as needed

**Resources:**

MIC Transgastric-Jejunal Feeding Tubes <http://www.kchealthcare.com/media/2886713/u5918_brochure.pdf>

MIC Enteral Feeding Tubes and Accessories
<http://www.kchealthcare.com/media/2886710/u4850_mic_enteral_tubes.pdf>

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