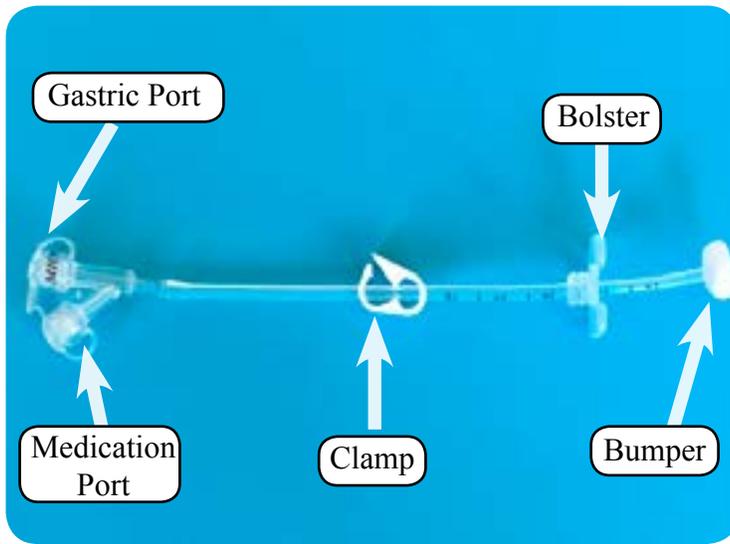


## Percutaneous Endoscopic Gastrostomy Tube (PEG)

The PEG tube has two ports, a gastric port for feeds going into the stomach and a medication port for giving medications. This tube also has a clamp attached which allows you to clamp the tube and stop milk from leaking if the ports open accidentally. An extension tube may be used with this tube if needed to give a little extra length.



### Important facts about this Tube

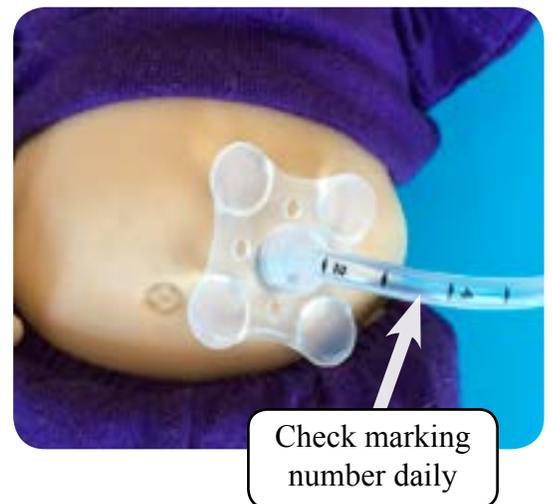
This tube has a small portion of tubing permanently attached which cannot be removed. To prevent the tube from blocking it is important that the tube is flushed with water after every bolus feed or every 3 to 4 hours during the day if your child is on continuous feeding.

Flush amounts:

2-3ml for infants/babies

5 -10 ml for older children.

**It is important that you check the markings on this tube daily to ensure that the tube has not changed position.**



## Attaching/removing PEG feeding bag and tubing.

### To Attach the feeding tube/bag:

1. Ensure all ports are closed



2. Close clamp of PEG Tube



3. Attach feeding tube into gastric (feeding port), gently twist to secure. Open Clamp.



### To Remove feeding tube/bag:

1. Close clamp of PEG Tube



2. Gently twist and remove tubing from feeding port. Close all ports.

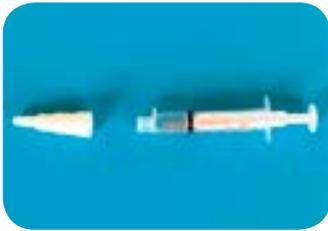


## PEG Tubes

### Attaching & Removing medication/venting syringe and feed tubing.

Non-ENFIT PEG tubes may need an extra connector to attach the feed tubing, medication syringes and venting syringes securely. Gently twist the white connector in a clockwise motion to attach and a counterclockwise motion to remove.

#### Attaching Medication Syringe:



#### Attaching Feed Tubing:

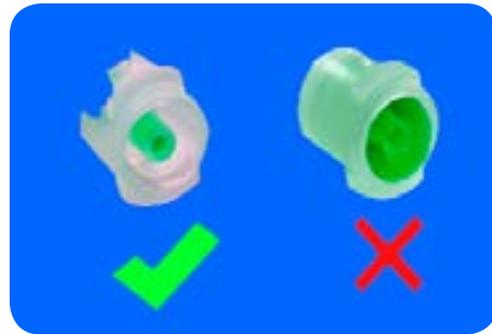


#### Attaching Venting Syringe:



## Drawing up medications

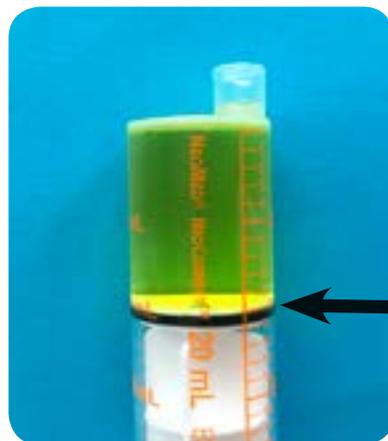
If using a **1ml, 3ml or 6ml syringe** only the inner portion of the tip is filled with medication.



If using a **larger syringe** the tip is completely empty of medication.



Draw medication up to the inner side (side nearest medication) of the **black plunger**.



Medication  
Guide Line

## Drawing up medications with a bottle cap attachment

Remove original bottle cap and gently screw the medication cap to medication bottle. Make sure the cap is securely attached.



Attach medication syringe to bottle cap. Turn the bottle upside down and draw medication into the syringe. If an air bubble appears in syringe move bubble to upper part of syringe and push it back into the bottle.



Turn bottle right way up and remove syringe. Place top on medication cap.

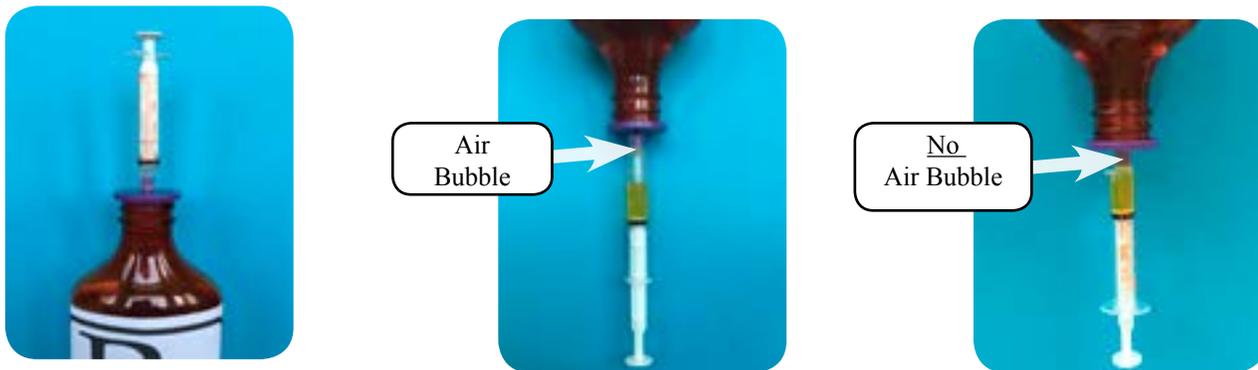


## Drawing up medications with a bottle cap attachment

Remove original bottle cap and **gently** attach the medication cap to medication bottle. Make sure the cap is securely attached.



Attach medication syringe to bottle cap. Turn the bottle upside down and draw medication into the syringe. If an air bubble appears in syringe move bubble to upper part of syringe and push it back into the bottle.

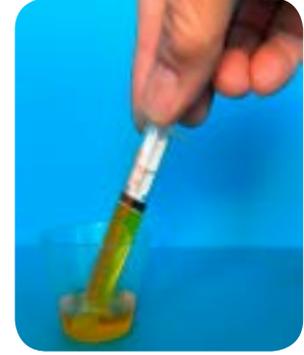


Turn bottle right way up and remove syringe. Remove medication cap and replace original bottle cap.



## Drawing up medications from a medication cup

Pour medication into medication cup. Insert tip of syringe into cup and pull out required amount of medication.



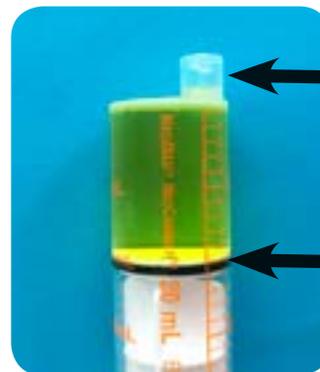
Remove syringe and gently tap syringe to remove any air bubbles. Wipe the syringe with a clean cloth to remove any excess medication.



**Important:** Medication is measured to the inner side of black plunger. 1ml, 3ml and 6ml syringes should only have the inner part of the tip filled with medication. Larger syringes should have the tip completely empty of medication.



Smaller syringes only inner part of tip with medication



Larger Syringes tip empty of medication

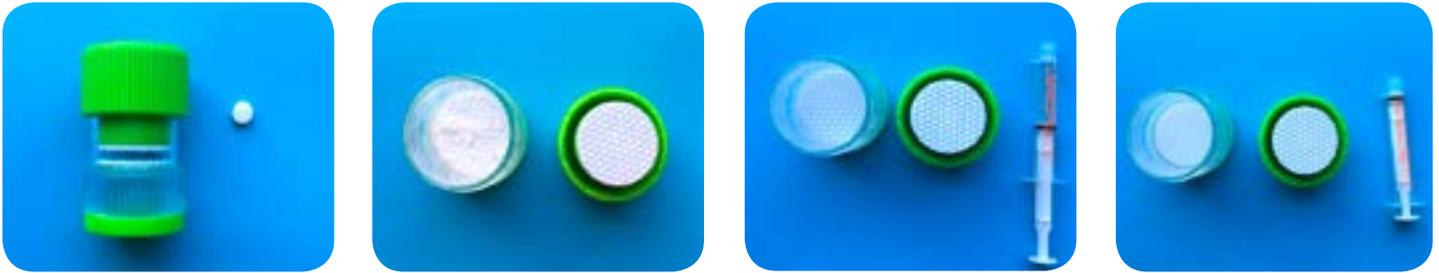
Medication Guide Line

## How to administer crushed medication

**Check with Pharmacist before crushing any medication tablets.**

Crush tablet with a pill crusher until it becomes a fine powder.

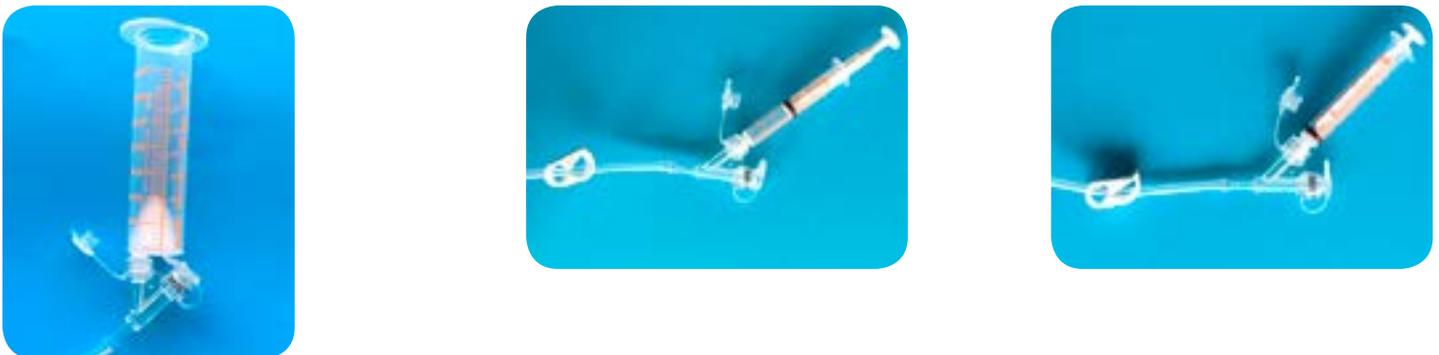
Add water (*2-5ml for infants, 5-10ml for older children*) to powder and mix well until powder is dissolved.



Pull plunger out of 35ml or 60ml syringe. Attach syringe to medication port of g-tube/extension tube (like a funnel).



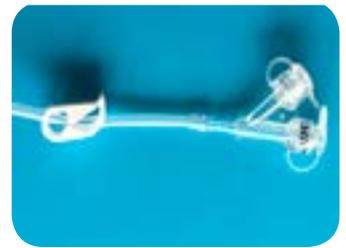
Pour dissolved medication into the syringe and allow it to flow into tube by gravity. Flush the tube with water until completely clear of ALL medication..



## Giving Medications through ENFIT PEG Tube

Medications should be given through the **medication port** on the PEG Tube. It is the smaller port located to the side of the feeding port.

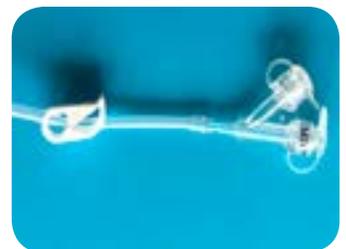
1. Check placement (pg 24). Clamp extension tube. Draw water into a 6 ml or 12 ml syringe. Attach syringe to medication port. Unclamp tube and flush with water to clear. Re-clamp tube and remove syringe.



2. Attach medication syringe to medicine port. Unclamp tube and gently push medication into tube. Re-clamp tube and remove syringe.



3. Draw water into a 6 ml or 12 ml syringe and attach to medication port. Unclamp tube and flush with water until the tube is clear. Clamp extension tube and remove syringe.



**Important:** It is important that you flush the tube with water before and after EACH medication. Use 1 to 3 ml for infants, and 2 to 5 ml for children.

## Giving Medications through Non-ENFIT PEG Tube

Medications should be given through the **medication port** on the PEG Tube. It is the smaller port located to the side of the feeding port.

1. Check placement (pg 24). Clamp extension tube. Draw water into a 5ml or 10 ml syringe, attach connector to syringe. Attach syringe to medication port. Unclamp tube and flush with water to clear. Re-clamp tube and remove syringe and connector.



2. Attach medication syringe and connector to medicine port and unclamp tube. Gently push medication into tube. Re-clamp tube and remove syringe. **Leave connector attached!**



3. Draw more water into a 5 or 10 ml syringe and attach to medication port. Unclamp tube and flush with water until the tube is clear. Clamp extension tube and remove syringe and connector.



**Important:** It is important that you flush the tube with water before and after EACH medication. Use 1 to 3 ml for infants, and 2 to 5 ml for children.

## Checking Placement of Tube

It is advised that you check your child's g-tube to make sure it is in the correct position before you give feeds or medication. This is particularly important if your child is active and tugging on tubing.

**Always** check the placement of a newly inserted g-tube before giving feeds or medication.

**1. Gravity:** Remove the plunger from a 35ml or 60ml syringe. Attach the syringe to your child's clamped g-tube or extension tube. Unclamp tube and place syringe lower than the stomach. Observe for gastric (stomach) secretions.

**2. Aspirate:** Attach a 35ml or 60ml syringe to the end of your child's g-tube or extension tube and pull the plunger back gently checking for gastric (stomach) secretions.



## Venting via the PEG Tube

Children who have a PEG tube may occasionally need help with burping. Venting the PEG tube will allow your child to burp. Every child is different and venting should be adjusted to your child's needs. Venting need only be carried out if your child appears uncomfortable.

1. Remove plunger from a 60 ml syringe and attach to the PEG tube extension or venting tube.
2. Place the syringe at a higher level than your child's stomach.
3. Vent the tube until all gas has been released from your child's stomach or until they feel more comfortable



### Important:

If your child's stomach suddenly distends (gets bigger) and your child is in obvious distress after venting, remove plunger from 60ml syringe and attach to extension/decompression tube. Empty your child's stomach contents into a bowl by placing syringe at a lower level than stomach. Be sure to call your child's physician or surgeon as soon as possible!



## Feedings

### Pump Feeding

1. Prime feeding tube and pump.
2. Clamp the extension tube shut.
3. Attach the extension tube to the feeding port.
4. Check placement of tube (pg 24)
5. Attach the main feeding tube to the feeding port of the extension tube.
6. Unclamp extension tube.
7. Start feeds at ordered rate.
8. Once feed complete clamp extension tube and remove main feeding tube.
9. Vent the tube while cleaning the bag and adding milk.
10. Flush extension tube with water to clear.
11. Remove extension tube and clean. Repeat all steps.



### Gravity Feeding

Completed over 20 to 30 minutes.

1. Prepare feed.
2. Clamp extension tube.
3. Attach extension tube to feeding port.
4. Check for placement of tube (pg 24).
5. Remove plunger from 60 ml syringe
6. Attach 60 ml syringe to feeding port .
7. Unclamp the extension tube and
8. Slowly raise the syringe above the level of the stomach.
9. Control the flow of milk by raising or lowering the syringe level.
10. Vent until all stomach gas has been removed.
11. Flush with water to clear tube.
12. Remove extension tube and clean.
13. Close feeding port.



Keep child's head  
above level of stomach

**Remember:** The higher you hold the syringe, the faster the feed will flow. If you feed your child too quickly, it may cause your child to vomit or experience discomfort.

## Replacing a Mic-Key Low Profile G-Tube

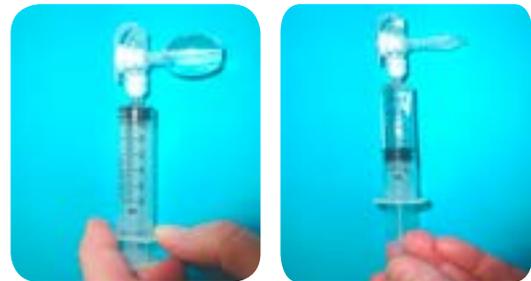
If the PEG tube falls out more than **6 weeks after tube placement**, and you have been trained, you can place a new mic-key low profile g-tube. If you feel any resistance while trying to insert the tube: stop, remove the tube and place a gauze swab over stoma. Call your child's GI Physician and go to the Emergency Department (*remember to take your child's travel kit*).

**Important: Never force tube into the stoma (hole).**

1. Collect all your supplies. Put gauze swabs over the hole and tape in place. Pull 3 to 5ml of sterile water into 5 ml syringe.



2. Take new mic-key button tube and check the balloon is intact. Place syringe with sterile water onto balloon port. Gently push water until you see balloon inflate. Remove water from balloon. Keep syringe attached



3. Place some lubrication on a swab and dip the tip of the mic-key button into the lubrication. Place child on their back and expose belly. Gently push tube into stoma at a **90 degree angle** to the tummy.

4. Slowly inflate balloon with sterile water. Remove syringe from balloon port



5. Check the tube is in the correct place by watching for stomach secretions from tube.



### Important:

If it is less than 12 weeks after tube placement:

- \* Call GI Physician for follow up instructions
- \* **Never** give feed or medication through the new tube until your child's GI Physician has given you permission to do so.