

Nasally Inserted Feeding Tube

A nasally inserted feeding tube is a small tube that is placed in your nose, passed through your esophagus, and extends into your stomach or small intestine. This tube is temporary and is meant to be a bridge to either improved oral nutrition or surgical tube placement into the stomach or small intestine. This feeding tube can provide either total or supplemental nutrition. To lower the risk of tube clogging, avoid putting medications through the tube if your doctor said you can take them by mouth. A Proper Medication Delivery via a Feeding Tube brochure is available if needed.

Daily care of the nasally inserted feeding tube:

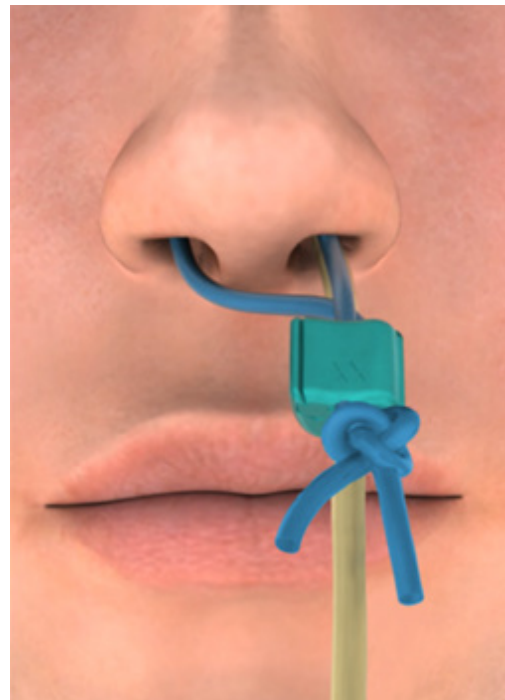
- Wash hands before and after caring for the feeding tube.
- Do not pull on the feeding tube, it will be secured with a nasal bridge (see photo to right), or tape.
- Wash nose daily using a soft cloth with soap and water, water rinse and pat dry. If nasal bridge present, wash the parts you can see. Apply a small amount of ointment on skin near the bridge clip 1 – 2 times daily (i.e Aquahor or CeraVe healing ointment).
- Check your nose daily for skin sores, nose bleeds, and yellow or green discharge, or sinus pain.
- Keep correct position of feeding tube: Measure length of tube from nose to end of tube then measure daily to note any movement.
- Replacement schedule: Every 30 days recommended

Flushing the feeding tube:

- If the feeding tube is not in use, flush it with 30 mL of tap water three times per day.
- Flush the tube with at least 30 mL of tap water before and after tube feedings.
- Follow the guidelines you were given to meet daily water needs.

What does the tube feel like?

You may have some mild discomfort at first. You could feel like something is tickling your nose, stuck in your throat, or cause as gagging sensation. This will improve as your body gets used to the tube, usually in 2- 3 days.



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If you are going home with tube feedings:

- An RN will spend time teaching you the care of the nasally inserted feeding tube. You must demonstrate skills prior to discharge.
- You might have mild cramping when you first start the tube feeding. Do not be alarmed.
- If you have >3 episodes of diarrhea per day, call your dietitian. You may need your tube feeding adjusted.

When to call the Nutrition Support Clinic:

- If the tube is partially out or falls out, please call the NS clinic ASAP to schedule tube replacement. If outside normal business hours, still call this number to be directed to the provider on call.
- Skin sores, nose bleeds, yellow or green discharge or sinus pain.
- Tube has moved more than 2 inches in or out.
- The tube is clogged. Please refer to the **Clearing a Clogged Feeding Tube** brochure.

IMPORTANT INFORMATION:

Home care nursing agency:

Pharmacy vendor for formula/supplies:

Tube feeding formula:

Tube feeding amount per day:

Tube feeding schedule:

Free water amount per day:

Free water flush schedule:

DISCHARGE CHECKLIST:

- Tube feeding formula
- 60 ml ENFit syringes
- Feeding bag and tubing, if used
- Enteral feeding pump (if unable to tolerate gravity feedings)
- Dressing supplies
- Drainage bag or Farrel bag (for stomach venting), if needed

For additional support for home tube feedings and feeding tubes, please visit the Oley Foundation at Oley.org

Adult Nutrition Support Clinic

(585) 275-3995



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