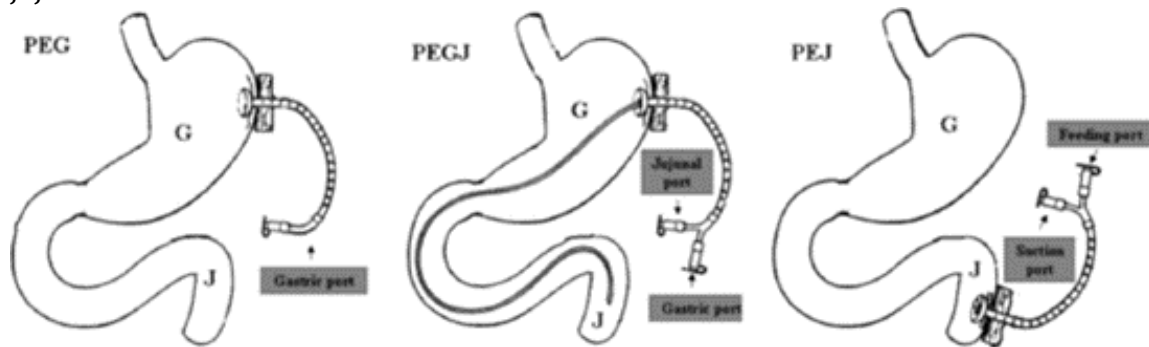


Jejunostomy Feeding

Gastro-jejunal feeding

Placement of a Percutaneous Endoscopic Jejunostomy or PEJ is placed as a PEG would be however the tube is placed into the jejunum or intestine instead of the stomach, essentially bypassing the stomach. Meanwhile, a Percutaneous Endoscopic Gastrojejunostomy or PEG-J is a tube that is placed through the stomach and into the jejunum and contains two tubes in one.



It is important to note that managing jejunal feeding is quite different to tube feeding into the stomach.

These tubes are:

- More difficult to put in position – they must go beyond the stomach and are placed with assistance of x-ray or endoscopy. An anaesthetic may be required to replace a tube that has fallen out or become dislodged.
- More easily obstructed, both from kinking and blocking as they are much longer and thinner.

Gastro-jejunal feeding tube types

There are different types of gastro-jejunal feeding tubes:

- *Percutaneous Endoscopic Jejunostomy (PEJ)* – a feeding tube which is inserted through the abdominal wall into the stomach and then extends to the jejunum.
- *Gastro-jejunal Jejunostomy (G-J)*- a feeding tube which is inserted through the abdominal wall, containing two entry points (ports) – a gastric port which opens into the stomach, and a jejunal port which opens into the jejunum.

Flushing

To help prevent blockage of the tubes, it is important to flush the tube with cooled, boiled water:

- After every feed
- Before and after giving any medication
- As directed by your dietitian



Recommended volumes for flushing:

- Neonatal patients: 1-3ml
- Paediatric patients: 3-5ml
- *Note:* recommendations can be 5-10ml depending on the child's fluid balance and size.

Check with your dietitian for recommendations regarding appropriate flush volumes.

Administering medications

Always check with your doctor or pharmacist prior to putting any medications down the PEJ extension set. Use liquid medications where possible or crush tablets and mix them with cooled, boiled water or feed as directed by the pharmacist.

Routine Replacement of PEG-J/PEJ

PEJ tube changes occur in interventional radiology.

The PEG Clinic which runs Monday -Friday 9am-12pm in the Day Medical Unit on Level 2 is available to ensure regular review of PEJ tubes and stoma sites. A referral to this clinic is required, preferably from the GP as this is referral will be indefinite.

Appointments can be made to coincide with other appointments on the same day for convenience, and an appointment with the dietitian may be arranged the same day if requested. Appointments can be made by contacting the PEG clinic on (03) 9345 5673.

Equipment Allocations

Equipment allocation through the HEN program is generally to last 2 months. In some circumstances, equipment can be provided on a monthly basis.

The HEN equipment allocation for PEJ feeding is:

- 2 X feeding tube extension sets – (right angle or straight) for button / low profile devices.
- 4 x 500ml or 1000ml Flexitainers (8x Flexitainers for immunocompromised and under 12 months only)

Baby bottles – parent /carer to obtain

<u>Feeds using only</u> <u>Giving sets</u>	<u>OR</u>	<u>Feeds using</u> <u>Both</u>
60 x Pump/Gravity		60 x Pump/Gravity
8 x ENFit Syringes (10ml/20ml/60ml)		8 x ENFit Syringes (10ml/20ml/60ml)

Note: If you access HEN supplies through NDIS, provided your plan accommodates, you can access additional supplies beyond these entitlements within reason. If you are on the HEN program and would like equipment above these allocations, you can purchase these at your own expense.