Choosing Wisely
Feeding tube selection basics and complication prevention strategies

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Financial Disclosures

Avanos Medical
Learning Objectives

Identify considerations in feeding tube selection

Review the various types of access devices used in long term tube feeding

Understand the anatomy of gastric tube (GT) placement

Review best practices for prevention of tube site complications
Considerations in Feeding Tube Selection

Functional purpose of the tube
Physical ability
Mental capacity and age
Socioeconomic factors
Ethical considerations

French (Fr) Size

- Larger Fr = larger outer diameter (OD)
- Fr = OD (in mm) x 3
- Inner diameter (ID) is variable and not 100% dependent on Fr size
Gastrostomy Tube Placement

Common techniques:
• Endoscopic
• Radiologic
• Surgical

https://www.cookmedical.com/patient-resources/entuit-feeding-tubes/understanding-your-feeding-tube/
Gastropexy Techniques

<table>
<thead>
<tr>
<th><strong>T-fastener</strong></th>
<th><strong>Suture</strong></th>
<th><strong>Bumper-bolster combination</strong></th>
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</thead>
<tbody>
<tr>
<td>T-fasteners come in a variety of styles depending on tube brand. Suture is advanced from the small metal T bar placed in the anterior gastric wall to the anterior abdominal wall externally.</td>
<td>Two sutures are placed approx. 1.5 cm apart which secure the stomach to the anterior abdominal wall and then the GT will be placed between them. In this example, the sutures are threaded through the external bolster of the GT.</td>
<td>The tube is pulled gently until resistance is felt from the internal retention bolster or balloon, then the external bolster is adjusted to slide down the tube until it rests gently against the skin, though not too tight, while allowing for airflow underneath the bolster</td>
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</tbody>
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Common Tube Types
Standard Profile Gastrostomy Tube
Non balloon
Standard Profile Gastrostomy Tube
Non balloon

24 Fr

20 Fr
Standard Profile Gastrostomy Tube

Balloon
Standard Profile Gastrostomy Tube
Balloon
Balloon vs Non Balloon Gastrostomy Tube
24 Fr
Balloon vs Non Balloon Gastrostomy Tube
Gastro-Jejunostomy (GJ) Tube

Non-balloon

Ballooning
Low Profile Gastrostomy Tube
Non-balloon
Low Profile Gastrostomy Tube

Balloons
Low Profile Gastrostomy Tube

internal retention variations
Identifying Feeding Tube Types

<table>
<thead>
<tr>
<th>Standard-profile gastrostomy</th>
<th>Low-profile gastrostomy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Balloon GT</td>
<td>Balloon GT</td>
</tr>
<tr>
<td>PEG</td>
<td>Non-balloon GT</td>
</tr>
</tbody>
</table>

**Externally identifiable features**

| Balloon port | No balloon port | Balloon port | No balloon port |

Case Example

Tube Site Complication
Prevention and Management Strategies
Enteral Nutrition Monitoring
and complication management

1. Digestive

2. Tube Related

Tube Related Tolerance

- Leakage
- Obstruction
- Displacement
- Stoma complications
Leaky Tube

**PREVENTION**
- Proper placement of internal and external bolster
- Proper sizing of low profile device
- Adequate and symmetrical inflation of internal balloon
- Avoid ‘power feeding’

**INTERVENTION**
- Protect skin with barrier cream
- Adjust bolster and balloon fill volume
Clogged Tube

PREVENTION
- Flush tube before and after feeding and before restarting feeds after a break (30 ml)
- Administer medications one at a time
- Flush small bore tubes more frequently during waking hours (q 3 hours)
- For home blended tube feeding (BTF) users, blend food with high quality blender and adequate blending time

INTERVENTION
› Manual massage of tube
› Push, pull technique with 60 ml syringe
› Use 6 ml medication syringe in ancillary port

Tube Displacement

**PREVENTION**
- Ensure adequate balloon inflation with balloon gastrostomy tubes
- Secure dangler tubes and extension sets as necessary
- Choose the right tube for the patient lifestyle and circumstances

**INTERVENTION**
- Bedside/blind replacement
- Gastroenterology/Interventional Radiology/Emergency Department replacement


Stoma Complications
identify and intervene promptly

Hypergranulation

Secure tube
Adjust bolster for proper fit
Ensure proper sizing of low profile device/button
Hydrocortisone cream BID x 2 weeks and reassess
Silver nitrate in severe/resistant cases

Yeast Infection

Resolve leaking and keep site dry
Protect skin from moisture with barrier cream
Topical antifungal BID x 2 weeks and reassess
Treat erythema with hydrocortisone cream BID until resolved

Bacterial Infection

Topical antibiotic for minor infection
System antibiotic for severe infection
Do Not Overfill

Warning

Exhaust Fumes May Be Deadly
Feeding Tube Information Card

**Feeding Tube Information**

**Placement Date:**

Name: ____________________________

Facility: ____________________________

Department: [ ] GI/Endo [ ] IR [ ] ED [ ] Other: ________________

Tube Manufacturer: ________________

Model #: __________________________

Length: ____________________________

French Size (Fr): __________________

Access: [ ] Naso [ ] Gastric [ ] Jejunal [ ] Other: ________________

**ENFit™? [ ] YES [ ] NO**

If 6 or 8 Fr, list Tube Material:
[ ] PVC [ ] Polyurethane [ ] Other: ________________

Tube Type: [ ] NE/NG/NJ [ ] GJ [ ] G [ ] J [ ] PEG/PEG-J [ ] Foley [ ] Balloon Standard Profile [ ] Balloon Low Profile [ ] Other: ________________

https://oley.org/page/HEN_LandingPage
answer