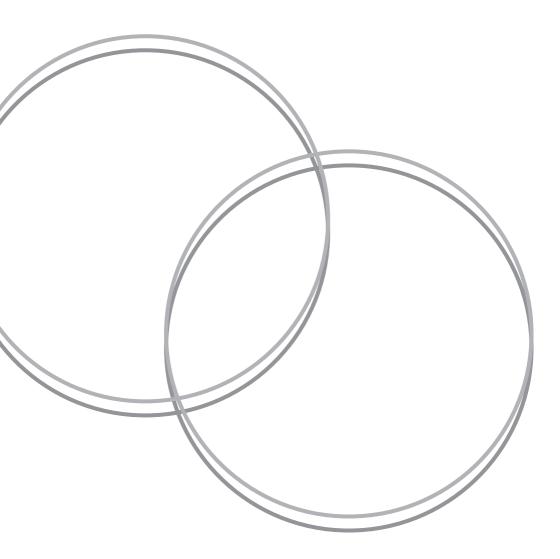


Caring for your Nasojejunal (NJ) Tube

A guide for patients and carers

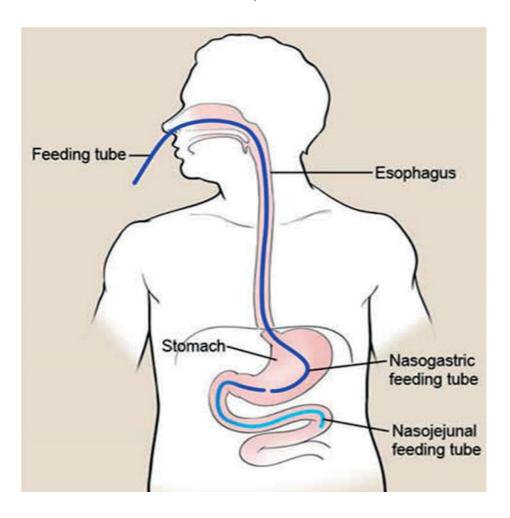


Introduction

This booklet provides basic information on how to care for your NJ tube and also includes your feeding plan. Your Dietitian, Ward Nurse, Nutrition Nurse Specialist or Feed Company Nurse will be able to help you if you have further queries or concerns.

What is an NJ tube?

A nasojejunal (NJ) tube is placed through the nose down into the jejunum (small bowel). This allows delivery of nutritionally complete feed directly into the jejunum. There may also be a second tube inside it which travels down into the stomach. (If you do have a second tube this must not be used for feeding and you will be advised what this is to be used for).



How do I check the position of my tube?

It is important to check that the tube position has not changed before putting anything down the tube.

Following insertion, check the measurement on the tube where it exits the nose and re-check this daily and this measurement should not change.

It is a good idea to use a permanent marker on the tube where it enters the nostril so you can see if the tube has moved.

Nasojejunal Tube Fixation

You should also keep the end of the NJ clean and you will be advised on the best way of doing this.

The fixation tape should be changed at least weekly but may require changing more regularly if it becomes dirty or loose.

When changing the fixation tape, clean the skin thoroughly and try to alter the position of the tape so that the skin avoids becoming sore or damaged from continued pressure.

Be careful when replacing the fixation tape to the tube as it may become accidentally dislodged.

If the skin or the nostril area becomes sore or red contact the Feed Company Nurse, Nutrition Support Specialist Nurse or the hospital department you have been advised to contact for advice.

Avoid the use of thick creams or powders underneath the tape, as they can affect the tape's stickiness and ability to keep your tube securely in place.

Flushing the NJ Tube

To flush the tube attach a 60ml enteral syringe containing 30-60mls of sterile or cooled, boiled water and gently push this through the tube. It is important to flush the tube regularly to prevent it blocking.

The NJ tube MUST be flushed:

- before and after each feed
- before and after each medication
- at least once a day if you are not using the tube for medication or feed

Remember **not** to put anything down the tube other than **feed**, water or liquid medication.

What is my feeding plan?

Your Dietitian has prescribed the volume of feed and water that meets your needs and a suitable method for you to administer this. This is called your feeding plan.

Try to keep to the recommendations and if you are experiencing any problems with the feed plan or are losing weight please discuss these with your Dietitian.

Feed

You should be given at least a 2 weeks supply of feed when you are discharged from hospital. Ongoing supplies will be arranged for you by your hospital or community Dietitian.

- Feed should be stored at room temperature and it does not need to be refrigerated.
- If you have an opened bottle of feed and wish to have a break and feed later in the day, store the feed at room temperature and keep it away from heat sources and direct sunlight. There is no need to refrigerate feed once opened. Leave the giving set attached to the feed and place the dust cap on.
- Any unused open feed bottles should be discarded 24 hours after opening.

Empty feed bottles can be disposed of with household recycling.

Syringes

Syringes are used to flush the tube with water and to give medications. At home the syringes can be reused and should be washed in warm soapy water using washing up liquid and left to air dry. Please refer to syringe manufacturer's washing instructions.

The syringes used for connecting to nasojejunal tubes and all other feeding tubes now have an international standard for connection called ENFit. They have a screw type connection that will only connect to a feeding tube.



Giving sets

A giving set links the bottle of feed, via a pump to the feeding tube. Giving sets must be changed every 24 hours and the used set discarded.

Used syringes and giving sets are considered as "clean clinical waste" and can be disposed of with general household waste. Please check with your local council whether they will accept them for recycling.

What to do if the feeding tube is blocked?

First check that the tube is not kinked or that there is no external reason why the tube appears to be blocked.

If the NJ tube is blocked, the following may be helpful:

- Gently squeeze the external visible tube up and down its length
- Attach an empty 20mls syringe to the end of the tube and gently push and pull on the plunger of the syringe, creating a gentle pumping action
- If you have any doubt on the position of the tube do not attempt to flush anything down the tube
- Do not poke anything down the tube to unblock it
- If the tube remains blocked, contact the Feed Company Nurse, the Nutrition Nurse Specialist or hospital department you have been advised to contact, as a replacement tube maybe necessary.

What should I do if my NJ feeding tube falls out or dislodges?

Sometimes violent coughing or vomiting can increase the risk of dislodging the feeding tube.

If the NJ falls out or you have any concerns that your tube is not in the correct position, please contact the Nutrition Nurse Specialist or the hospital department you were advised to contact. During out of hours, you may need to attend your local Accident and Emergency Department.

If you experience persistent nausea, vomiting, cramps, diarrhoea or constipation, please contact your Dietitian, Nutrition Nurse Specialist or GP.

Who should I contact for help?

If you have any pump or feed related problems such as difficulty setting up, running the feed or curdled feed contact the pump manufacturer on the helpline number or contact the Feed Company Nurse.

If you have a problem with the tube, please contact your Dietitian, Nutrition Nurse Specialist, Feed Company Nurse or the hospital department you have been advised to contact.

Will I be able to eat and drink?

This will depend on your medical condition. Discuss this with your Dietitian, Speech and Language Therapist or Doctor.

Oral Hygiene/mouth care

Dental plaque can still build up quickly in your mouth even if all your nutrition is given through the feeding tube.

It is important to clean your teeth daily and at least twice a day to protect you from gum infections and dental decay.

Non foaming toothpastes are available and artificial saliva or mouth wash may help if your mouth is dry. Check with your nurse or doctor about these products if you need them instead of your normal products.

If your mouth feels sticky, steam inhalation using water without essential oils may help also.

Feeding Plan

Patient Name:
Start date:
Feed name and total daily volume:
Rate to set the feeding pump:
Water:
This feeding plan will provide:
kcal
g protein
mL of fluid

Notes:

- Flush tube with a 30mL to 60mL water before and after feeding and between bottles
- Flush tube with water before and after EACH medication administered via the tube
- Change giving sets and feed containers EVERY 24 HOURS

Your NJ Tube

This should be completed prior to your discharge home

Date NJ tube inserted:
How placed? e.g. Bedside, Endscopically, Radiologically?
Type of tube inserted
Brand of tube used
Site place (left or right nostril)
NEX Measurement (cm) (NEX: Nose, Ear, Xiphisternum is the measurement from the nose, to the earlobe and then to the lowest part of the sternum)
Measurement at nostril (cm)
Securement device
Problems or difficulties when tube placed?
Date tube is due to be changed
Arrangements for tube changes

Nasojejunal checks record

Date	Time	Position check (cm) marking	Comments

Notes

Please use this page to write down any useful notes that will help you manage your tube feed.

Useful contact numbers

Hospital Dietitians:
Hospital Department:
Community Dietitians:
Nutrition Nurse Specialists (8am-4pm): Tel: 01865 740378 Bleep: 4132 via the Oxford University Hospitals switchboard on 0300 304 7777
Feed Delivery Company and Pump Helpline:
Abbott Nutrition 0800 0183 799
District Nurse:
Feed Company Nurse:
PINNT Support Group – Patients on Intravenous and Nasogastric Nutrition Therapy www.pinnt.com

Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

This leaflet has been produced by Registered Dietitians in conjunction with Nutrition Support Nurse Specialists. Pictures and text used with kind permission of Oxford Health NHS Foundation Trust.

May 2022 Review: May 2025 Oxford University Hospitals NHS Foundation Trust www.ouh.nhs.uk/information



Making a difference across our hospitals

charity@ouh.nhs.uk | 01865 743 444 | hospitalcharity.co.uk

OXFORD HOSPITALS CHARITY (REGISTERED CHARITY NUMBER 1175809)



Leaflet reference number: OMI 69130