



Patient and Family Education

PEG Feeding Tube Guide

A resource for you and your family

June 2025



My Health Care Team

Name

Phone

Doctor

Nurse

Dietitian

Home care company

Medical supply company

Words to know

Gastrostomy tube

This is another name for a PEG tube. It may also be called a G-tube.

Bumper

A round or straight piece of soft plastic attached to the outside of a PEG tube. It lies loosely between the tube and your skin.

Formula

Liquid food that is used for tube feedings. Formula may come in a carton or can.

Exit site

The part of your skin, under the bumper, where the PEG tube comes out.

Flush

Uses a syringe to push tap water through your PEG tube to help keep it from getting clogged. Also called a free water flush or FWF.

ENFit connectors

A new style of connectors on the end of PEG tubes, syringes and tubing. ENFit connectors are often, but not always, purple.

Feeding port

The end of the PEG tube where you attach a syringe or tubing for tube feeds.

Bolus tube feed

A tube feeding given over a short amount of time, often several times a day.

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This info is a general resource. It is not meant to replace your health care provider's advice.
Ask your doctor or health care team any questions. Always follow their instructions.

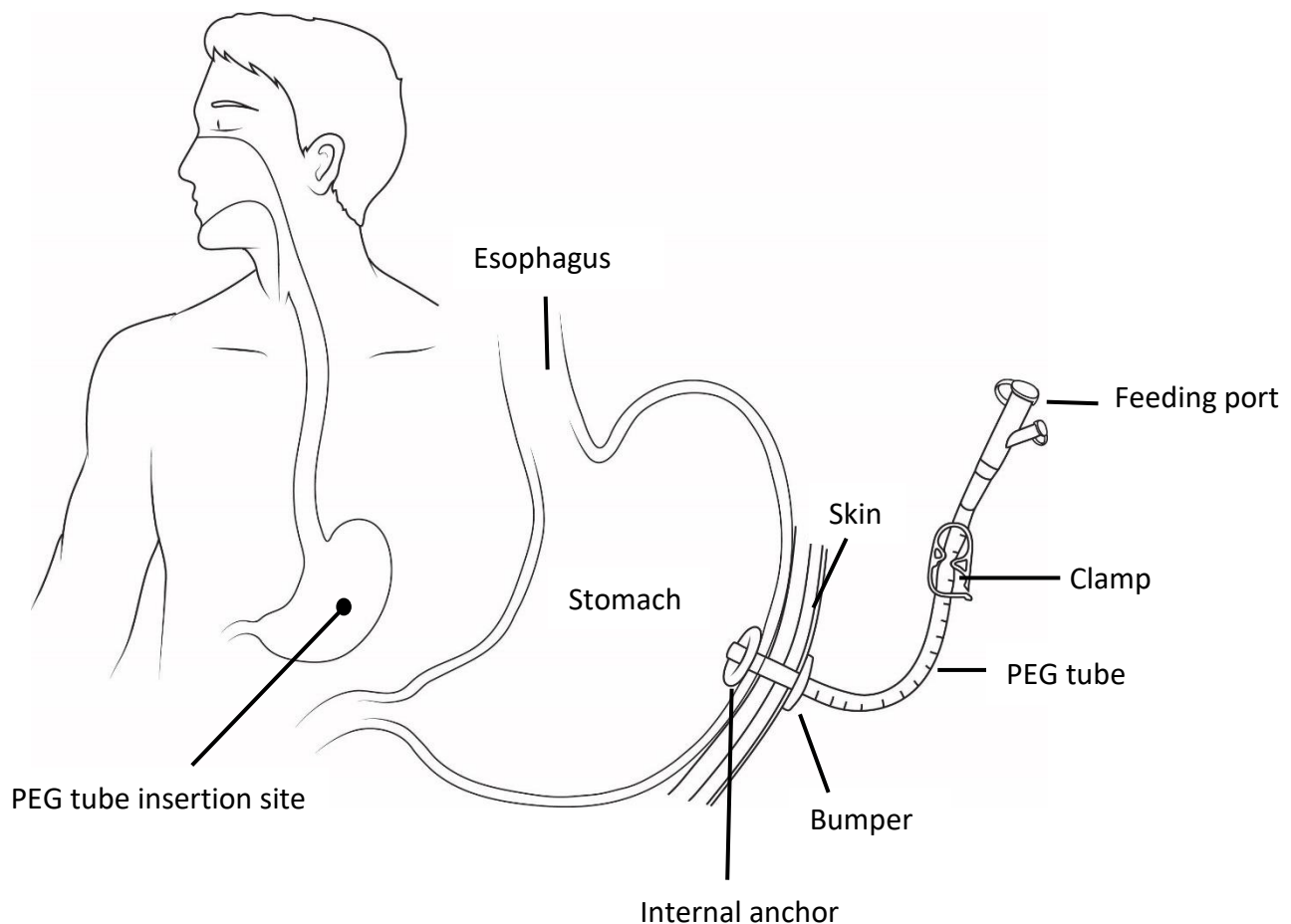
What is a feeding tube?

A feeding tube is a small, flexible tube that is used to give food, fluids and medicines. Feeding tubes are placed in the stomach or small bowel (intestine). They are used if someone cannot eat, drink or swallow safely. They may also be used to give extra nutrition or let air or secretions out of your stomach (called decompression).

Most often, a doctor places a feeding tube in surgery, the GI lab or Interventional Radiology (IR).

There are many types of feeding tubes. **A PEG feeding tube is placed in the stomach.** It may be called a G-tube or gastrostomy (gas-TROS-toh-mee) tube.

A closer look at a PEG feeding tube



What to expect

You may go home the same day as your PEG tube is placed, or your doctor may suggest you stay at least 1 night in the hospital.

Planning ahead

- Do not eat after midnight the night before your PEG tube is placed. Find out from your doctor or pre-admission testing about when to stop drinking fluids.
- You need someone to drive you home.
- **If you are sent home the same day, someone must stay with you overnight in case you need help.**
- We may need to do some teaching about the tube and follow-up care before you leave. If someone is helping you with your feeding tube, bring them with you so they can also learn.

Placement of the feeding tube

You are given medicine to make you sleepy and help you relax when the feeding is placed. The process takes about **20 to 30 minutes** but plan on being here for a few hours. **This allows for the check-in process and gives you time to recover.**

Before you leave

- Ask any questions you have, such as what you can take for pain.
- Make sure you and your caregiver know how to care for your feeding tube.
- Ask if you need any supplies for your tube and feedings. Ask how you will get the supplies and who you should call if you have questions.
- Read pages 18 and 19 to learn what problems you need to call your doctor about.

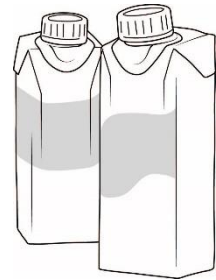


The area around where the tube was placed may be a little tender or sore for the first week. Call your doctor right away if the dressing over your feeding tube site becomes soaked through (saturated) with blood or drainage during the first 24 hours after it is placed. **Read pages 18 and 19 for other problems you need to call your doctor about.**

Liquid food

You must use a special liquid food called formula for your feeding tube. Your dietitian or nurse can teach you how to give the formula.

Don't put solid or blended food in your feeding tube because it will clog. If you want to make your own blended food at home, talk to your dietitian about how to do it safely.



Medicines

Review your medicine list with your doctor, nurse or pharmacist **before** putting any medicines in your feeding tube. It is not safe to crush, dilute, mix or put certain medicines in your feeding tube. Do not mix medicines with your feeding formula. Your nurse can show you how to give medicine through your feeding tube.

Skin care and supplies

Read the section **Caring for your feeding tube** to learn how to care for your skin. Ask your nurse or dietitian if you need any supplies and how you will get them.

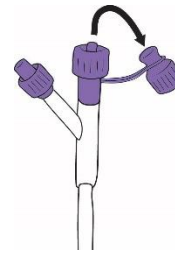


QUICK TIPS

Always wash your hands **before** touching your feeding tube or the skin around it.

ENFit connectors

ENFit connectors are used to connect feeding tubes to syringes, tubing and caps. Clean these ENFit connectors daily so that they twist together properly. See page 20 for details.



Open feeding tube port
with an ENFit connector

Checking for residuals

Some people need to check and measure the contents of their stomach before each tube feeding. This is called checking a residual (said ree-ZID-yoo-ul). Your doctor, nurse or dietitian can tell you if you need to do this and provide teaching.

Learning more

You and/or a caregiver need to learn how to care for your feeding tube at home. Your nurse can teach you about:

- Flushing your feeding tube
- Giving fluids and medicines through your feeding tube
- Knowing what problems to look for and when to call your doctor



QUICK TIPS

Fill out the wallet card on page 21 and keep it in your wallet. Show the card to any health care providers you see.

Caring for a PEG feeding tube

Skin care

After 24 hours, you may remove the dressing and shower. At first, you may see a small amount of redness and yellowish fluid around the site. Keep the skin around your PEG tube clean and dry to prevent infection and help with healing. **Always wash your hands before touching your feeding tube or the skin around it.**

Clean the feeding tube site each day using these steps:

1. Wash your hands for 20 seconds with soap and water. Dry with clean towel.
2. If you have any dry crusty drainage on the skin around the tube, remove it using a Q-tip and a mixture of half water and half hydrogen peroxide.
3. Wet a clean gauze pad or cloth with warm, soapy water. Use it to gently wipe the skin around your tube and the bumper. Rinse the area with clean, warm water and pat dry with a clean cloth.

Do not put creams or ointments on the site because they may cause skin problems.
Do not use alcohol to clean the site or tube.

Turn your PEG tube bumper 90 degrees (a half turn) once a day.

Turning the bumper keeps it from sticking to your skin and causing problems. Don't put anything under the bumper unless your doctor or nurse tells you to.

Shower each day with mild soap.

Ask your doctor when it is ok to take a tub bath, swim or use a hot tub.

Check the skin around the feeding tube daily.

Look for leaking, bleeding, redness or sore skin around where the tube enters your body. If you see any of the problems listed on pages 18 and 19 or have other concerns, call your doctor right away.

Flushing your PEG feeding tube

Flushing your PEG feeding tube with room temperature tap water helps keep it from getting clogged. Your nurse or dietitian can tell you how much water to use.

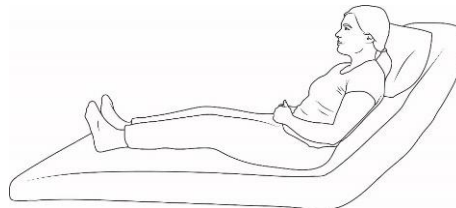
When to flush your feeding tube

- At least once a day - starting the day after it is placed
- Before and after each feeding
- Before and after giving medicines

How to flush your feeding tube

1. Wash hands with soap and water for 20 seconds. Dry with a clean towel.
2. Gather supplies – a 60 ml (milliliter) piston syringe and a clean measuring cup.

3. Sit up or use pillows to prop yourself up to at least a 30 degree angle.



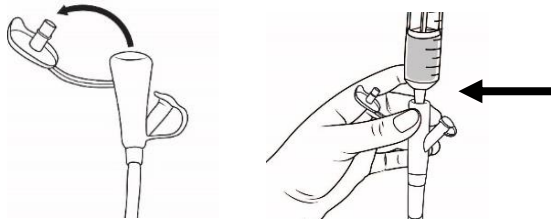
4. Fill a clean cup with the ordered amount of water for your flush.



5. Use a 60 ml piston syringe to draw up the prescribed amount of water for your flush.



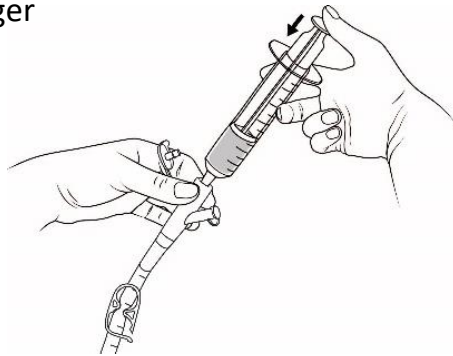
6. Open the feeding port cap and put tip of syringe into feeding port.



7. Open tube clamp.



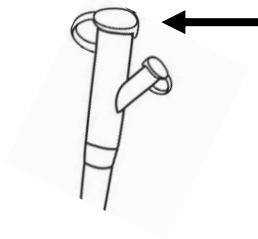
8. Gently push the syringe plunger to flush the tube with water.



9. When done, close tube clamp.



10. Remove syringe and close feeding port cap.



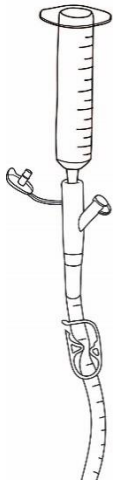
Giving tube feeds

For tube feedings, you receive nutrition through a liquid food called **formula**. The formula gives you calories, protein and nutrients. Your doctor orders the formula and your nurse or dietitian can discuss your tube feeding schedule.

Ways to give tube feedings

Using a syringe

See pages 9-11



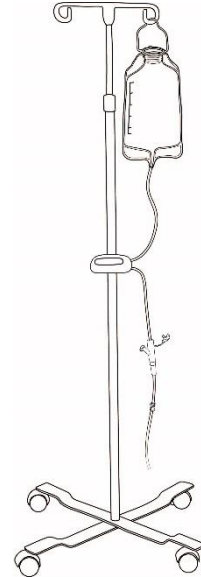
Using a bag

See pages 12-15



Using a pump

From a medical supply company



QUICK TIPS

Read pages 18 and 19 to learn what problems you need to call your doctor about.

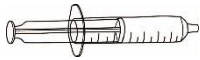
For easy access, put the name and number of your doctor in your phone or write it in a notebook.

Using a syringe for tube feedings

If you are using a syringe for tube feedings, follow these steps for each tube feeding.

Prepare

1. Clean your work surface and gather these supplies:



60 ml syringe

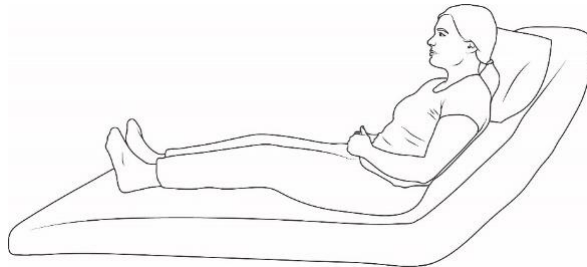


Formula



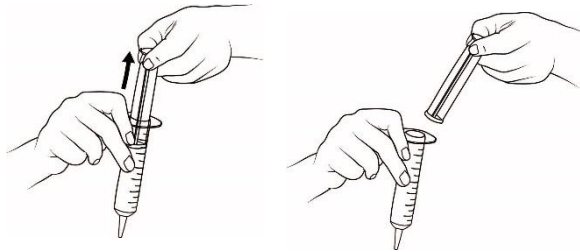
Cup with enough room temperature water for 2 flushes

2. Check the date on your formula to make sure it is not expired. If your formula is in a can, wash the top of the can with warm, soapy water then open it.
3. Wash your hands for at least 20 seconds with soap and water. Dry with clean towel.
4. Sit up or use pillows to prop yourself up to at least a 30 degree angle.

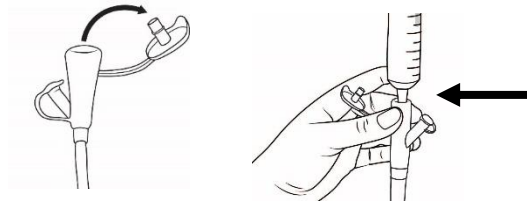


Flush the PEG tube

1. Remove syringe plunger and place it on a clean surface.



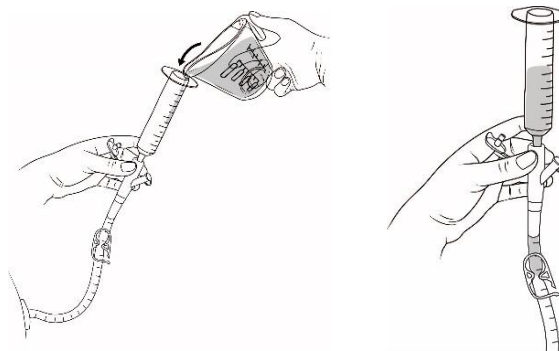
2. Open the feeding port cap and put tip of syringe into feeding port.



3. Open tube clamp.



4. Pour prescribed amount of water into syringe.



5. Lift the syringe above your stomach and let water flush through the tube by gravity.

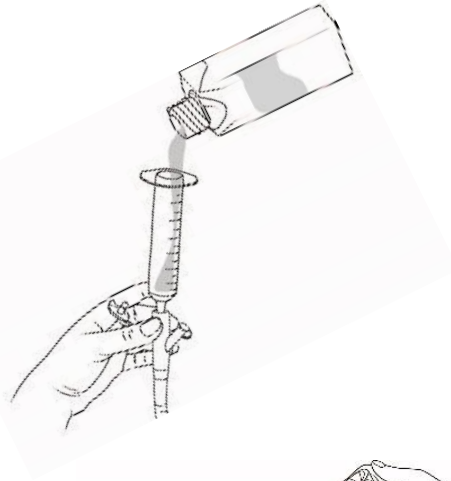


6. When done, close the tube clamp.

Give the feeding and flush the tube

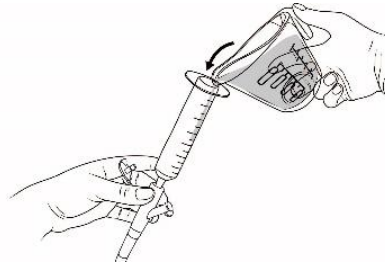
1. Open the tube clamp and pour prescribed amount of formula into the syringe

2. Hold the tube at chest level and let the formula flow freely through the tube. Keep pouring formula until you are done giving the ordered amount.



3. When the formula is done going in, pour the ordered flush amount into the syringe.

4. Let the flush flow through the tube.



5. When the flush is done, close the tube clamp and remove the syringe.

6. Close the feeding port cap.

7. **Stay sitting up for at least 30 minutes after the feeding. Do not lie down.**

This can help you avoid getting an upset stomach and throwing up. It can also keep fluid from going into your lungs – called aspiration.



8. After each feeding, wash syringe and cup in warm, soapy water. Rinse each item in hot water.

9. Store all tube feeding supplies in a clean place.

10. If you have any formula left, write the date and time on the carton. Cover the carton and put it in the refrigerator. If you do not use what's left within 24 hours, throw it away.

Using a bag for tube feedings

If you are using a bag for tube feedings, follow these steps for each tube feeding.

Prepare

1. Clean your work surface and gather these supplies:



60 ml syringe



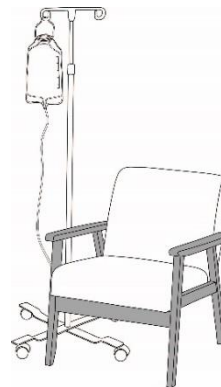
Formula



Empty cup

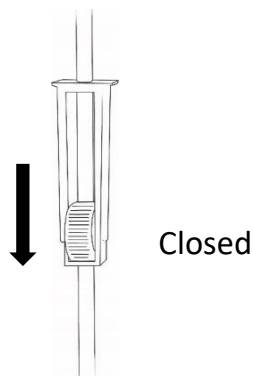


**Cup with enough room
temperature water for 2 flushes**



**Feeding bag, tubing
and IV pole or hook**

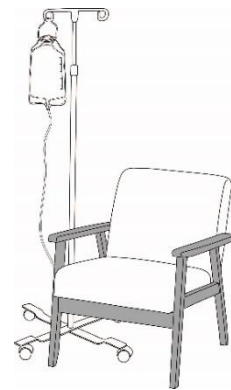
2. Check the date on your formula to make sure it is not expired.
If your formula is in a can, wash the top of the can with warm, soapy water then open it.
3. Wash your hands for at least 20 seconds with soap and water.
Dry with clean towel.
4. Close the roller clamp on the feeding bag tubing.



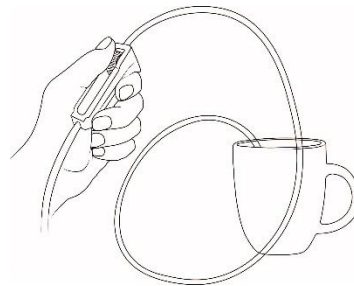
5. Pour the ordered amount of formula into the feeding bag. Close the bag's lid.



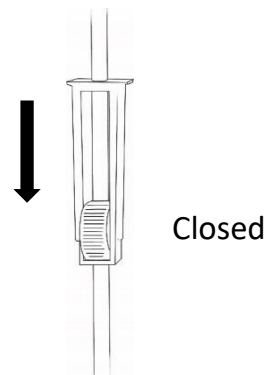
6. Hang the feeding bag above your head on an IV pole or hook.



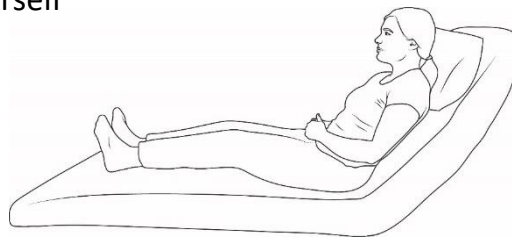
7. Remove cap from the end of the feeding bag tubing and place tip in an empty cup. Slowly open the roller clamp and fill the feeding bag tubing with formula. **Don't leave any air in the tubing.**



8. When formula gets to the end of the feeding tube, close the roller clamp.

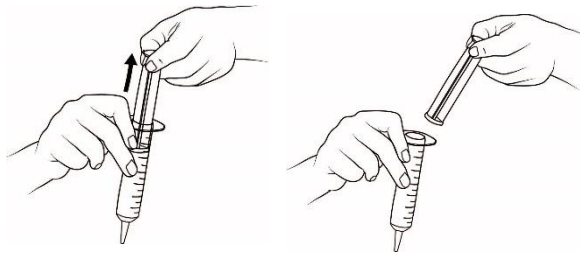


9. Sit up or use pillows to prop yourself up to at least a 30 degree angle.

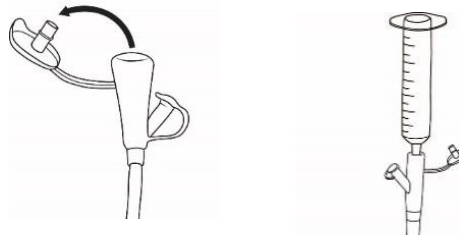


Flush the PEG tube

1. Remove syringe plunger and place it on a clean surface.



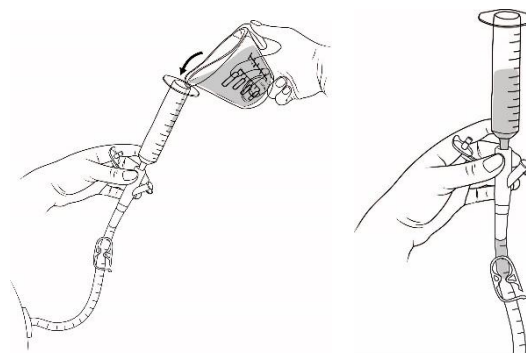
2. Open the feeding port cap and put tip of syringe into feeding port.



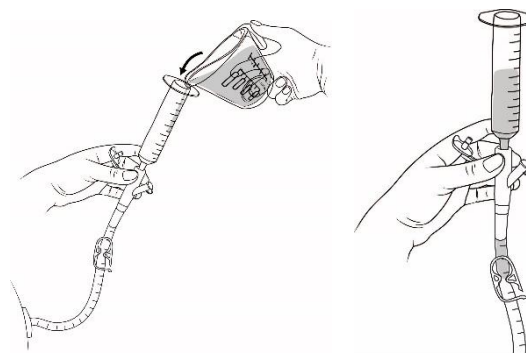
3. Open PEG tube clamp.



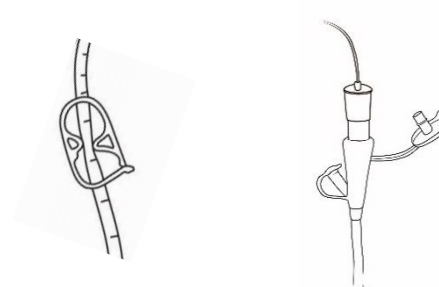
4. Pour prescribed amount of water into syringe.



5. Lift the syringe above your stomach and let water flush through the tube by gravity.



6. When flush is done, close the PEG tube clamp and remove the syringe.



7. Insert the tip of the feeding tubing into the feeding port.

Give the feeding and flush the tube

1. Open the PEG tube clamp.
2. Slowly open the roller clamp on the feeding bag tubing. Adjust the roller clamp so the feeding goes in over 30 to 60 minutes.
3. When the formula is done going in, close the roller clamp.
4. Close the PEG tube clamp.
5. Remove the feeding bag tubing and put the cap on the feeding bag tubing.
6. Close the feeding port cap.
7. Flush the PEG tube using steps on pages 6-7.
8. Close the feeding port cap.
9. **Stay sitting up for at least 30 minutes after the feeding. Do not lie down.**
This can help you avoid getting an upset stomach and throwing up.
It can also keep fluid from going into your lungs – called aspiration.
10. After each feeding, wash syringe and cup in warm, soapy water.
Rinse each item in hot water.
11. Store all tube feeding supplies in a clean place.
12. If you have any formula left, write the date and time on the carton.
Cover the carton and put it in the refrigerator. If you do not use what's left within 24 hours, throw it away.

Ways to help manage common PEG tube problems

Problem	What to do
Diarrhea Loose, watery bowel movements for more than 1 day or more than 3 bowel movements a day	• Give feedings and water flushes slowly. • Always wash your hands for at least 20 seconds with soap and water before each feeding. • Ask your dietitian if you should change your feeding schedule. • Call your doctor right away if: ➤ diarrhea lasts for more than 24 hours ➤ you see blood in bowel movements ➤ you have bad belly pain ➤ you have early signs of dehydration such as dark pee, not peeing for 8 hours, or feeling faint or like you will pass out
Constipation Not having a bowel movement for more than 2 days	• Give all formula and flushes as ordered. • If you've been told to take a stool softener or laxative, take it as directed. • If you can, try to be more active. Walking is a good start. • Ask your health care team if there are medicines that may help. • Call your doctor if: ➤ you don't poop for 2 days ➤ you throw up or have bad belly pain

Problem	What to do
Upset stomach (nausea) or throwing up (vomiting)	• Give the tube feed slower. • Don't lie down during feeding or 30 minutes after. • Wait 2 hours and try the feeding again. Don't give the feeding if you are throwing up or feel like it will make you throw up. • Call your doctor if: ➤ Nausea or throwing up lasts more than 2 hours ➤ you skip 1 feeding ➤ you have early signs of dehydration such as dark pee, not peeing for 8 hours or more, or feeling faint or like you will pass out
Fluid loss (dehydration)	• Give all formula and flushes as ordered. • Call your doctor right away if you have early signs of dehydration, such as dark pee or not peeing for 8 hours, or feeling faint or like you will pass out • Call 911 right away if you have any signs of severe dehydration listed on page 19.
Blocked (clogged) PEG tube	Check tubing for kinks. Make sure clamps are not closed. If tube is still blocked: Attach a syringe with 60 ml of warm water to the tube. Use syringe plunger to push water into the tube while massaging tubing with fingers. Then, pull back on syringe plunger to remove clog. If tube is still blocked, call your nurse or doctor.

Reasons to call your doctor

Call your doctor right away if you have:

- Diarrhea - 3 or more loose watery bowel movements in 24 hours
- Constipation - no bowel movement for 2 days
- An upset stomach (nausea) or throwing up (vomiting) for more than 2 hours
- Blood in bowel movements or bad belly pain
- Gas or bloating for more than 24 hours that keeps you from giving tube feeds
- A lot of coughing during your tube feeding
- Problems reaching your target amount of daily tube feeds
- Stomach pain, fullness, a lot leakage around the tube, or feeling like you will throw up after tube feeds
- Signs of infection, such as:
 - Fever of 100.4°F (38°C) or higher, with or without chills or shaking
 - Redness, swelling, drainage, soreness or pain around PEG tube
 - New pain or pain that does not get better with pain medicine
 - Bad smelling drainage around PEG tube
- Early signs of dehydration, such as:
 - Dark pee or not peeing for 8 hours
 - Feeling faint or like you will pass out
- Other concerns or any of the PEG tube problems listed on the next page

Reasons to call your doctor or 911

Call your doctor right away if you have:

- leaking or damaged PEG tube
- blocked tube and you cannot get it unclogged using the steps on page 17
- bright red blood in tube or leaking or bleeding around tube site
- pain with tube feedings or flushes
- bumper feels too loose or tight, or is making a mark on your skin
- tube falls out or comes out part way. If this happens and your doctor's office is closed, go to the nearest Emergency room (ER). If the tube falls out, cover the tube site with a clean gauze pad.
- bleeding or drainage that soaks the dressing over your PEG tube site during the first 24 hours after it is placed

Call 911 right away if you:

- Are choking or it is hard to breathe
- Have severe bleeding
- Signs of severe fluid loss (dehydration) such as:
 - Passing out
 - Confused, restless or very sleepy for no reason
 - Feeling very tired, weak or dizzy
 - Heart is racing or skipping a beat



Cleaning ENFit® feeding tubes

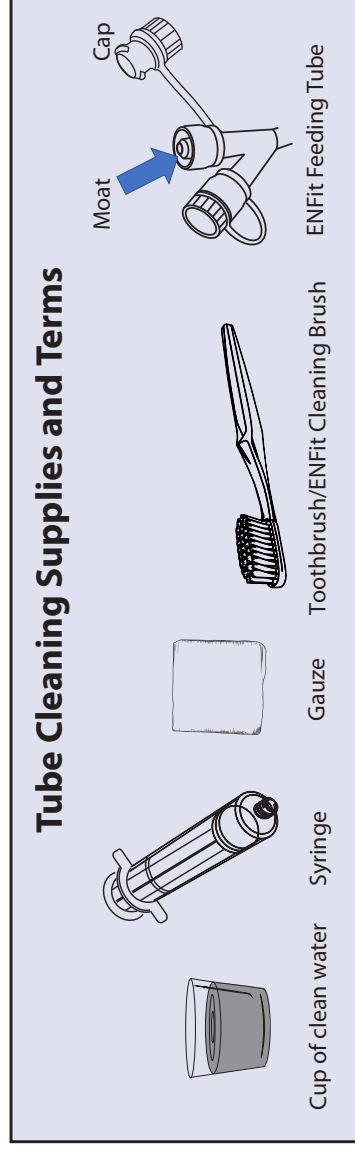
Follow these steps if you have an ENFit feeding tube. Cleaning the connectors helps prevent the tubes from sticking together.

Tips for keeping ENFit feeding tube ports clean. Inspect before you connect!

- **Bag or pump feedings** - Stop formula just before it reaches the end of the tube.
- **ENFit syringe draw up** - Wipe medicine and formula from tip/outer threads, keep fluids out of dead space before connecting to feeding tube.



For best results, **follow these cleaning steps at least once a day and any time you see a build-up of material.**



Note: Only use the brush to clean feeding tube connectors and store it away from other items.

1	2
3	4
5	6
7	8

Repeat steps 3 through 6 until cap and tube are fully cleaned.

Replace cleaning brush at least once a month.

Adapted cleaning procedures courtesy of Children's Mercy Kansas City. © GEDSA 2024 ENFit is a registered trademark of GEDSA. Used with GEDSA's Permission, www.stayconnected.org



Keep a wallet card with you

Fill out the card below and keep it in your wallet.
Show the card to any health care providers you see.

Important Medical Alert!

I have a PEG tube that was
placed at University Hospitals.

For questions or concerns, call:

Dr. _____

Phone: _____