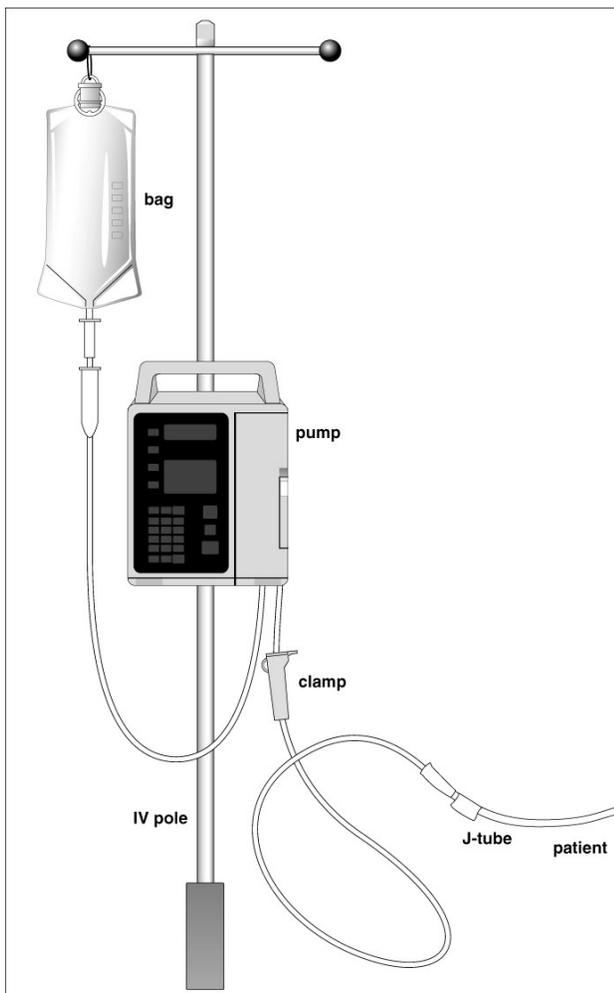


Caring for Your J-tube

What is a jejunostomy?

It is a procedure that creates a small hole through the abdomen into the small intestine (jejunum). A J-tube is a thin tube that we place through this hole. It allows you to get fluids, medicines, and feedings right into the small intestine.



Cleaning the J-tube Site

The J-tube needs to be cleaned **daily** to prevent infection. For the first 3 days, clean the skin around the tube with normal saline and then let air dry. After 3 days, you may shower, let the water run over the skin and use non-scented soap to clean the site.

If you can't shower, keep cleaning with saline or water and Q-tips®.

Supplies

- Q-tips
- Normal saline
- Sterile 4x4 (optional)

Steps

1. Wash hands well with soap and water for 30 seconds.
2. Open the sterile 4x4 (if you are using them due to drainage) and Q-tips®.
3. Remove the old dressing if you had one and place it in a plastic bag and throw away.
4. Check the skin around the tube for signs of infection.
5. Be careful not to twist/rotate your tube. This can cause the tube to get knotted in your intestines or cause a tear in your intestines.
6. Clean the site with the sterile Q-tips® and normal saline. Dry the site.
7. If you are having drainage around the tube. Place the sterile gauze over the bumper (plastic disk) to help collect any drainage.
8. Secure the tube by taping it on your stomach. This helps prevent the tube from being pulled out.

Signs of Infection

- The site is more tender and painful.
- Increased redness or swelling.
- Drainage that is green in color or foul smelling.
- Sutures (stitches) at the J-tube site that have come loose.

J-tube Feedings

Formula name: _____

Name of manufacturer: _____

Name of similar products _____

Total amount of formula per day _____

Total amount of water per day: _____

Vitamins/Minerals/Supplements: _____

Once opened, cover and date cans and keep them in the fridge. After 48 hours, throw away any unused formula.

When to Feed

Give _____ cans/ml at _____ ml _____ times per day.

Flush the tube with _____ ml of water right after each feeding.

If you feel full, have nausea, or have trouble flushing your tube easily, try again in one hour. If this does not help, call your doctor.

Supplies

- Tube feeding formula
- 60 ml ENFit syringe
- Water for flushing before and after feedings
- Pump stand or IV pole
- Feeding pump with feeding bag

Starting the Tube Feeds

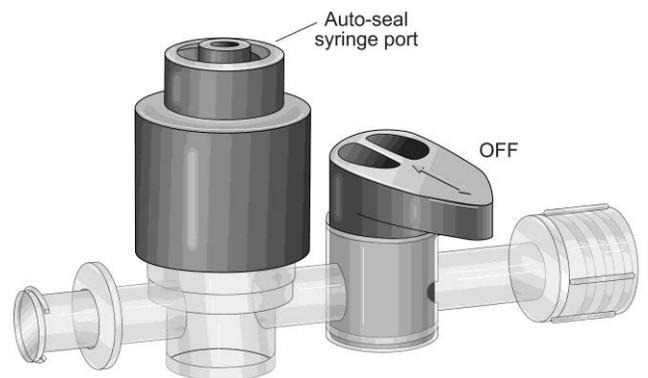
1. Wash hands with soap and warm water for 30 seconds.
2. Flush the tube with 30ml tap water.
3. New feeding should be given at room temperature.
4. Fill feeding bag with formula.
5. Remove air from tubing by unclamping the tube and letting the formula fill the tubing. When it reaches the end of the tubing, re-clamp. Put the tubing into the pump.

6. Connect the tubing to your J-tube and pump.
7. Start the pump and check the rate.
8. Do not lie flat during the feeding or for one hour after. Use a couple of pillows to keep your head up at least 30 degrees.
9. **When feeding is done, flush the tube with 30ml of tap water, as soon as feeding is complete.**
10. Clean your supplies by rinsing the syringe and bag with cool water. Then, swish with warm water and a small amount of liquid dishwashing soap. Rinse well. Hang to dry. Replace the feeding bag every 3 days and the syringe once a week.

Giving Medicines

Only liquid medicines can be placed through your J-tube. Flush the tube with 30 ml of water before and after giving the medicine.

1. Use the plunger syringe and draw back at least 30 ml of water. This is the “flushing stage.” You must flush the J-tube before and after giving any medicines.
2. Turn in the OFF position (if you are receiving tube feeds, if you are not connected to tube feeds it should be in the off position).
3. While holding the ACE Connector® firmly push and twist the plunger syringe into the Auto-Seal Port until tight.



4. Flush the J-tube with the 30 ml of water.
5. Remove the syringe. The auto-seal syringe port will close and no fluid or medicine will leak out.
6. Draw up the liquid medicine you will be giving. If the medicine is thick you may want to add at least 10ml of water to it to make it easier to give.
7. Again, attach the syringe with the medicine in it to the auto-seal port and give the medicine.
8. Remove the syringe and fill it with another 30 ml of warm water. This water will be used to flush the medicine through the J-tube.
9. If there is more medicine to give than the plunger syringe can hold you may repeat steps 3-8 as needed.
10. If you get tube feeds, make sure you put the handle back into the ON position and restart your tube feeds.
11. If you do not get tube feeds, then leave the handle in the off position.

Common Problems

- Blocked tube
- Excessive leakage around the tube
- Redness around the tube
- Bleeding around tube
- Stitches come loose or tube falls out
- Tube is punctured or torn
- Bleeding
- Vomiting
- Diarrhea
- Dehydration
- Constipation

Blocked Tube

Gently flush the tube using 15 ml of warm water. You may need to flush and pull out the water many times until the tube will flush. Prevent blockage by always flushing tube with 30 ml water after feedings, before and after medicines. If you cannot unclog your tube, call your doctor.

Excessive Leakage Around the Tube

Call your nurse or doctor.

Redness Around the Tube

Keep the skin around the tube clean and dry. (Some redness is normal, but moisture can irritate the skin and lead to an infection.)

Clean the skin around the site more often using plain water (soap irritate skin). Keep red areas open to air. Ask a nurse about other ways to hold the tube in place. Call the nurse or doctor if you see signs of infection.

Bleeding Around the Tube

If you notice more than a few drops of blood, call your doctor or nurse. Keep the tube taped or secured tightly to your skin to prevent pulls that might cause injury.

Stitches Come Loose or Tube Falls Out

If the tube falls out partly, or all the way, do not try to push it back in. If you can, secure the tube with tape. Call your doctor right away or go to the closest ER. You will need to have the tube changed or replaced.

Punctured or Torn Tube

Clamp the tube (or seal with tape) close to your skin. Call your doctor right away or go to the closest ER.

Noticing Blood

If you cough up blood or see 50 cent-size blood clots coming from the J- tube, or blood in your stool, call your doctor.

Vomiting

Because vomiting causes the loss of body fluids, salts, and nutrients in the body, call your doctor or nurse if it doesn't stop.

Do feedings in an upright position with the head of the bed raised 45 degrees. Try smaller feedings more often. Make sure total amount for the day is the same. The type of the formula may need to be changed.

Infection may cause you to vomit. Be sure supplies are cleaned well and rinsed between feedings. Wash your hands after contact with persons who are ill. This helps prevent the spread of infection. Other causes might include food intolerance, side effects of medicine, too much formula at one time.

Diarrhea

Diarrhea means frequent, loose, watery stools. Looser stools may be normal with certain types of formula. A few loose stools in 24-hours are not a problem. There are many causes of diarrhea when on tube feeding. To avoid some of these problems:

- Do not hang feedings for longer than 8 hours.
- Give the tube feeding more slowly.
- Call the doctor if the diarrhea does not stop after 2 or 3 days.

Dehydration

Vomiting, diarrhea, fever, and sweating cause the body to lose fluid. You may no longer feel thirsty so you must watch for signs of dehydration. If you have any symptoms listed below, call your doctor to find out how much and what kind of extra fluid you need.

- Decreased or darker colored urine
- Crying with no tears
- Dry skin that has no recoil when squeezed
- Feeling tired or irritable
- Weight loss
- Feeling dizzy
- Dry mouth and lips
- Sunken eyes
- Headache

Constipation

Constipation may be due to lack of fluids, lack of fiber or a side effect of medicine. This is common in the elderly or those who are less active.

If you have chronic constipation, call your nurse or doctor. They may have you give extra water or change your formula. (Always check with your doctor before giving extra water.)

Common Questions

What should I know when I travel?

Pack all the supplies needed for feeding: pump, pole, syringe, formula, tubing, bottled water, tape, etc. You can store opened formula in a cooler in the summer to prevent spoilage.

Can I sleep on my stomach?

Yes. After the tube site has healed, most people are quite comfortable on their stomachs. You should not sleep on your stomach during a feeding or within 1 hour after the feeding.

You will receive supplies for the feedings and care for the J tube through the hospital or home care. You will need to contact the Home Health agency for more supplies when you are at home.

Who to Call

Doctor: _____ Number: _____
Local Doctor: _____ Number: _____
Nurse: _____ Number: _____
Dietician: _____ Number: _____
Vendor: _____ Number: _____

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 7/2020 University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF6102.