



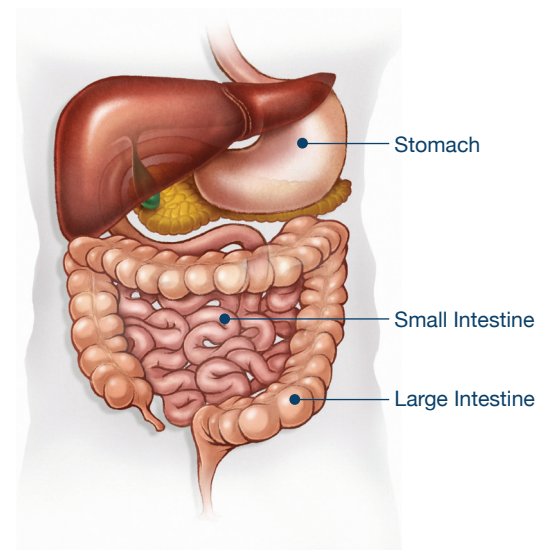
Enteral Nutrition

ARE YOU NEW TO ENTERAL FEEDING?

Proper nutrition is essential to maintaining our bodies' health, growth, and ability to heal. It is important to understand how the gastrointestinal (GI) or digestive system works in order to understand Enteral Nutrition (EN). The digestive system is made up of several hollow organs joined as a long tube or pathway through your body.

Digestion begins in the mouth, through chewing the food you intake into smaller pieces, these pieces are then swallowed and passed down the esophagus. The esophagus carries the food from your mouth to your stomach. Once in the stomach, the food gets broken down into its main nutrients. These nutrients then pass into the small intestine where they are absorbed into the blood stream. Once through the small intestine, the remaining material passes into the large intestine where excess liquid is absorbed leaving solid waste product behind to be passed out of the body.

Various medical conditions may make it difficult or impossible for a person to eat orally, denying the body of essential nutrients. In such cases, your physician will select the best type of alternative feeding for your situation.



A **Gastrostomy Tube**, also known as a G-tube, may be inserted through the abdominal wall to provide direct access to the stomach for feeding.

A **Gastric-Jejunal Tube**, also known as a G-J tube, may be inserted through the abdominal wall into and through the stomach to provide direct access to the jejunum, which is the second part of the small intestine.

A **G-tube** or a **GJ-tube** is a convenient and effective means for delivering nutritional formulas to the body. These nutritional formulas are either commercially available or homemade using a food processor. A physician will prescribe the proper feeding procedure, formula, and amount of water to most effectively meet your nutritional needs.

G-tubes and G-J tubes are available as a “Low Profile” device or a “Traditional Length” device.

- **Low Profile:** AMT offers a wide variety of Low Profile G-tubes, also known as “buttons,” for both children and adults. These devices are designed to sit flush against the skin and can be easily concealed under garments, allowing the patient a wide range of motion. The MiniONE® Family of low profile devices are available as: Balloon, Non-Balloon, and Capsule Non-Balloon devices.

- The MiniONE® Balloon button has an internal retention balloon with a unique apple shape, which helps keep the device in place. For insertion and removal, the balloon can be inflated and deflated using a slip tip syringe.

- The MiniONE® Non-Balloon and Capsule Non-Balloon buttons have an internal retention bolster, which helps keep the device in place. The retention bolster needs to be inserted and removed by a qualified physician, with the use of an obturator rod or traction removal.

- **Traditional Length:** AMT offers three main Traditional Length G-tubes: Balloon, Capsule Dome, and Capsule Monarch®. These devices are placed through the abdominal wall and have an adjustable external bolster. This adjustable external bolsters minimizes surface contact with the skin, allowing tissue to breathe and can be adjusted up to 10 cm in length. Traditional length devices extend from the abdominal wall up to 10 cm and are not flush with the skin.

- The Balloon G-tube has an internal retention balloon with a unique apple shape, which helps keep the device in place. For insertion and removal, the balloon can be inflated and deflated using a slip tip syringe.

- The Capsule Dome and Capsule Monarch® G-tubes have an internal retention bolster, which helps keep the device in place. The retention bolster needs to be inserted and removed by a qualified physician.



Enteral Nutrition

ARE YOU NEW TO ENTERAL FEEDING?

Introduction To Tube Feeding

A feeding tube, like the **MiniONE**[®] line of buttons and **G-JET**[®] button, is used for people who cannot take food through the mouth, or are unable to intake the proper amount of nutrients to meet their current needs. The **MiniONE**[®] buttons deliver a liquid food (called formula) directly into the stomach by bypassing the mouth and esophagus. The **G-JET**[®] button delivers formula directly into the small intestine by bypassing the mouth, the esophagus and the stomach. Once the formula enters the body through either the **MiniONE**[®] or **G-JET**[®], digestion works the same as when food begins in the mouth. You receive the same nutrients delivered to your body through a feeding tube as you would receive by mouth.

Tube feeding with the **MiniONE**[®] line of buttons and **G-JET**[®] button provides you a complete and healthy diet so you can continue to grow and develop. It will take time to adjust to tube feeding at home, but with the help of your health care professionals and some practice, you will gain the confidence to take care of your AMT device.

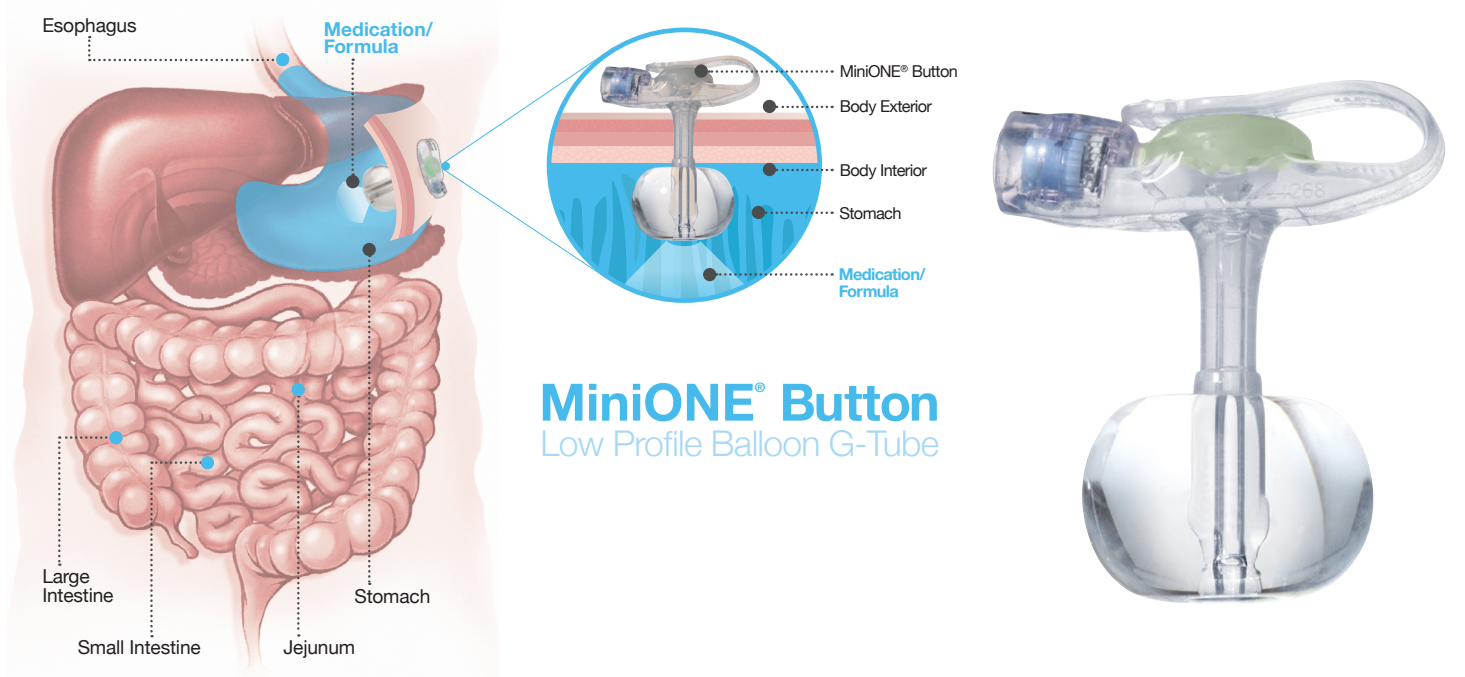
Comfort & Confidence are Important, Too

As a caregiver or patient, we believe you have a right to the most comfortable and reliable gastrostomy tubes. That's why we developed the **MiniONE**[®] and **G-JET**[®] line of buttons. Whether you use our Balloon or Non-Balloon design, we hope to provide the comfort and confidence you deserve.

There's Lots of Support for Your Feeding Tube Issues

You are not alone. There are many helpful individuals and organizations to assist you with your enteral feeding questions. Of course, you should always start with your physician when you have any g-tube-related issues, but these groups can provide additional comfort and confidence:

- www.oley.org The Oley Foundation is for people who feed by tube or IV at home
- www.feedingmatters.org A unique support system focusing on pediatric feeding disorders
- www.feedingtubeawareness.com A group of parents of children with feeding tubes
- www.foodfortubies.com An organization that helps people with feeding tubes use "real" food





AMT has provided this information as an educational resource tool. This is not intended as a substitute for professional medical care. Your **FIRST** source of information should be your healthcare provider.

Call your doctor if any of the following are observed:

- Fever, vomiting or diarrhea
- Skin around the stoma site is red, discolored or raw
- Drainage around the stoma site is white, yellow or green and may smell bad
- Crusting is noted at the stoma site
- Large amount of tissue build up, such as granulation tissue
- Swollen skin or tissue at the stoma site
- Repetitive leakage of food or gastric contents
- Leakage, the G-tube may be too loose or too tight and should be remeasured
- Possible tube migration:
 - Low Profile Device is no longer fitting properly/flush against the skin and either has a distinct indentation at the G-tube site or a distinct gap between the device and skin
 - Traditional Length Device external bolster has moved from original position (refer to cm markings)
- The G-tube falls out and you are unable to replace it easily
- Pain at the G-tube site
- Bleeding, pus or inflammation at the G-tube site
- Distended stomach, a possible indication for a gastric blockage

Stoma Site General Care

Cleaning: The stoma site should be kept clean and dry at all times. It is important to clean the stoma site daily. Use a cotton swab or terry cloth to clean the skin around the G-tube with mild soap and water, or as directed by your doctor.

Circulation: Turn the G-tube daily, stopping at different points each time to allow for air circulation.*

***Do NOT fully rotate a GJ-tube device.**

Bath Time: Patients fitted with a G-tube are allowed to bathe and swim (make sure the safety plug is in place). A good time for routine cleaning of the G-tube and stoma site is during a bath.

After Cleaning: Always allow the stoma site to air dry after cleaning.

Inspect: Always check the stoma site for redness, pain/soreness, swelling, or unusual drainage. If any of these signs or symptoms are observed, contact your doctor.

Gauze or pads are not necessary: If there is leakage, the G-tube may be too loose or too tight and should be remeasured. Call your doctor to have the stoma site remeasured. You may need a longer/shorter replacement device.

Device Related Concerns

Leakage around the device:

- Make sure the balloon is filled to the prescribed volume. Resistance should be felt when gently pulling on the tube.
- Check that the G-tube corresponds to the prescribed French (F) size and stoma length (cm). If the incorrect device is in place, call your doctor.
- The G-tube may be too tight or too loose. Call your doctor to have the stoma remeasured.
- For new placements, it may take time for the stoma tract to naturally heal, firm up around the tube, and conform to the balloon. If leaking persists contact your healthcare provider.

Causes for Leakage:

- Incorrect size
- Weight change (increase or decrease)
- Volume of water in balloon (high or low)
- Tension at the stoma site (from extension or feeding sets)
- Stomach may need to be decompressed



Enteral Nutrition + Troubleshooting Guide

Troubleshooting Guide

Balloon Failure:

A balloon may leak or burst over time due to medications, balloon inflation volume, stomach acid, G-tube care, or natural wear. Always keep an extra G-tube on hand in case of an incident.

Prior to any device change, consult your doctor first. Do NOT remove the G-tube until a replacement device is available in order to prevent the stoma from closing.

Balloon Will Not Deflate:

Clean the balloon port with a cotton swab to make sure formula/medication or other contaminants are not blocking balloon port. Insert a slip tip syringe, push and twist one-quarter turn, and pull back on the plunger. If the problem persists call your doctor.

Stomach Contents Leak Around the Tube: Check stomach for residual (the gastric fluid and formula left within the stomach cavity between feeds). If excessive residual occurs often it may be caused by:

- The patient may be receiving too much formula at a time
- The stomach may not be emptying normally
- The G-tube may be too loose or too tight, call your doctor to have the stoma remeasured

Feeding Tube Becomes Disconnected: Stop the feeding pump and, if possible, estimate the amount of formula lost. Wipe tube connections thoroughly with soap and water. Clean the inside of the feed port with a cotton swab, soap, and water. Dry the connectors and then reconnect feed set to the G-tube. Add the estimated lost formula and resume feeding.

Preventing Tube Blockage: Flush the G-tube with 5 ml (10-20 ml for adults) warm water before and after administering food or medicine, after every 3-4 hours of continuous feeding, and after checking for stomach content residual. Do NOT place foreign objects down the center of the G-tube; doing so may cause damage or malfunction.

G-tube is Too Tight Against the Patient's Skin: The G-tube should be able to turn easily without resistance from the patient's skin. If the G-tube does not turn easily, or redness or bleeding occurs, call your doctor. The patient may need to be remeasured for a longer G-tube.*

***Do NOT fully rotate a GJ-tube device.**

G-tube is Pulled Out of the Patient: Although the internal balloon or bolster is designed to decrease the number of pull-outs, G-tubes can accidentally become dislodged. If this happens, replace the device immediately or call your doctor. **STOMA SITES MAY BEGIN TO CLOSE WITHIN THE FIRST HOUR AFTER A DEVICE IS REMOVED.** Refer to the device Directions for Use and always be sure to have a replacement G-tube on hand for immediate replacement.

Vomiting: Aspiration (inhalation of food or stomach contents into the lungs) may occur while vomiting, causing difficulty in breathing or other serious medical conditions. Stop feeding and decompress the stomach immediately if this occurs.

Diarrhea: Diarrhea may occur if formula is spoiled or delivered too quickly. Mix new formula before each feeding. Deliver formula at a slower rate. All caregivers should wash their hands thoroughly prior to preparing the formula and handling the feeding sets. After washing, ensure the feeding sets are rinsed thoroughly to avoid soap in the formula. Call your doctor if diarrhea continues.

Constipation or Upset Stomach: Constipation or upset stomach may occur due to insufficient amounts of water in addition to: formula, inactivity, a change in formula or medication, or a change in feeding routine. Upset stomach may occur if too much formula is administered or if the formula is delivered too quickly. Call your doctor if constipation or upset stomach continues.

Contact emergency care immediately if difficulty in breathing occurs or aspiration is suspected.
Do not feed the stomach while the patient is laying flat.

Our team of Enteral Product Specialists are available to help:
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Enteral Nutrition + Troubleshooting Guide



Innovating. Educating. Changing Lives.™



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AMT Family



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