

# Freka® PEG-J

## Aftercare Sheet

Name	
Tube Size	
Batch Number	
Date of Placement	

### > General Information:

- The tube in situ is a Freka® PEG with a jejunal extension tube passed through it.
- The area where the tube enters the stomach is called the stoma site.
- The jejunal extension port will be marked on the outside with a letter "J".
- The gastric port will be marked on the outside with a letter "G" - this port may be used for aspiration of gastric contents.
- Feed, medication and water for flushing can be administered into either port.
- Your healthcare professional will advise which port you should use.

### > Initial Care:\*

- A keyhole dressing may be applied, as per local/hospital policy. The stoma site can be cleaned using a saline solution.
- If the external fixator requires adjusting then this should be undertaken by the healthcare professional.
- Water/feeding is usually commenced 6-12 hours after placement. Refer to individual feeding regimen.

If you/the patient, experiences any of the symptoms below, immediate medical advice should be sought (within first 72 hours of placement).

- Complaints of severe abdominal pain/ distress with possible abdominal bloating.
- Raised temperature.
- Breathlessness or increased respiratory distress.
- Bleeding/leakage of gastric contents at stoma site.
- Pain when feeding or when flushing.

\* until stoma site is healed, approximately 7-10 days

If there is any doubt about the correct placement of the tube **DO NOT USE**. Immediately contact the relevant medical team or attend your local Accident and Emergency department taking this sheet with you containing your tube details.

- Flush tube 4-6 hourly with water (as per local/hospital policy). This does not need to be done through the night.

### > Daily Care:

- Hygiene is of the utmost importance as the tube is in the small bowel; here there is no acid barrier as protection.
- Observe the stoma site daily for any leakage, swelling, redness or irritation; report any problems to your healthcare professional.
- Some clear fluid may be present - this is normal. Clean stoma site using mild soap and water and ensure adequate drying.
- Flush with water (as per local policy) before, during and after enteral feed and medications.
- If the gastric port is not being used regularly flush once a day using water (as per local/hospital policy). **Check with healthcare professional before doing this to ensure patient safety.**
- Do not rotate the tube as this may dislodge the jejunal extension. Once the stoma tract has healed, the fixation device can be moved for cleaning. However, it should be returned back to its original position (approx 1cm away from skin) to prevent migration/movement.
- Advance (push) 1-2cm of tube into stomach and gently pull back tube to feel resistance at least once a day (no more than once a day) and no less than once a week.

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