About the Placement of Your Percutaneous Endoscopic Gastrostomy (PEG) or Jejunostomy (PEJ) Tube for Feeding

This information will help you prepare for your procedure to have a percutaneous endoscopic gastrostomy (PEG) feeding tube or a percutaneous endoscopic jejunostomy (PEJ) feeding tube placed at Memorial Sloan Kettering (MSK).

A PEG is a feeding tube that is placed into your stomach (see Figure 1, left). If the tube can’t be placed into your stomach, you may have a PEJ tube placed instead (see Figure 1, right). A PEJ tube is placed in your jejunum, which is the second part of your small intestine. The tube is placed during a procedure called an endoscopy, which is described in the “What to expect” section in this resource.
The feeding tube will give you nutrients if you’re not able to get enough through eating and drinking. If you’re able to eat, you can continue to do so after the PEG or PEJ tube is inserted. You will use the tube to give yourself enough nutrition to meet your needs.

If you need long-term nutrition support, your doctor may convert your PEG into a low-profile gastrostomy button into your stomach (see Figure 2). Your doctor may convert your PEJ into a low-profile jejunostomy button into your small intestine. With both of these buttons, you will attach the feeding adapter to get nutrition.
1 Week Before Your Procedure

Ask about your medications
You may need to stop taking some of your medications before your procedure. We have included some common examples below.

- If you take medication to thin your blood, ask the doctor who prescribes it for you when to stop taking it. Some examples are warfarin (Coumadin®), dalteparin (Fragmin®), heparin, tinzaparin (Innohep®), enoxaparin (Lovenox®), clopidogrel (Plavix®), and cilostazol (Pletal®).

- If you take insulin or other medications for diabetes, you may need to change the dose. Ask the doctor who prescribes your diabetes medication what you should do the morning of your procedure.

Get a letter from your doctor, if necessary
If you have an automatic implantable cardioverter-defibrillator (AICD), you will need to get a clearance letter from your cardiologist before your procedure.
Arrange for someone to take you home
You must have someone 18 years or older take you home after your procedure. If you don’t have someone to do this, call one of the agencies below. They will send someone to go home with you. There’s usually a charge for this service, and you will need to provide transportation.

Agencies in New York
Partners in Care: 888-735-8913
Caring People: 877-227-4649

Agencies in New Jersey
Caring People: 877-227-4649

3 Days Before Your Procedure
You will receive a telephone call from an endoscopy nurse. They will review the instructions in this guide with you and ask you questions about your medical history. The nurse will also review your medications and tell you which ones to take the morning of your procedure.

The Day Before Your Procedure
A clerk from the Admitting Office will call you after 2:00 PM the day before your procedure. They will tell you what time you should arrive at the hospital for your procedure. If you are scheduled for your procedure on a Monday, you will be called on the Friday before. If you do not receive a call by 7:00 PM, please call 212-639-5014.

If you need to cancel your procedure for any reason please call the doctor who scheduled it for you.
Instructions for eating and drinking before your procedure

- Do not eat anything after midnight the night before your procedure. This includes hard candy and gum.
- Between midnight and up until 2 hours before your scheduled arrival time, you may drink a total of 12 ounces of water (see figure).
- Starting 2 hours before your scheduled arrival time, do not eat or drink anything. This includes water.

The Day of Your Procedure

Things to remember

- Take the medications you were instructed to take the morning of your procedure with a few sips of water.
- Don’t put on any lotion, cream, powder, deodorant, make-up, or perfume.
- Remove all jewelry, including body piercings.
- Leave all valuables such as credit cards and jewelry at home.
- If you wear contacts wear your glasses instead.

What to bring with you

- A list of the medications you take at home, including patches and creams
• Medications for breathing problems (such as inhalers), medications for chest pain, or both
• A case for your glasses
• Your Health Care Proxy form, if you have completed one

Where to park
Parking at MSK is available in the garage on East 66th Street between York and First Avenues. For questions about prices, call 212-639-2338.

To reach the garage, enter East 66th Street from York Avenue. The garage is located about a quarter of a block in from York Avenue, on the right-hand (north) side of the street. There is a pedestrian tunnel that goes from the garage into the hospital.

There are also garages located on East 69th Street between First and Second Avenues, East 67th Street between York and First Avenues, and East 65th Street between First and Second Avenues.

Where to go
Please arrive at the Presurgical Center at 1275 York Avenue (between East 67th and East 68th Streets). This is the main building of MSK. Take the M elevator to the 2nd floor.

What to expect
Once you arrive at the hospital, doctors, nurses, and other staff members will ask you to state and spell your name and date of birth many times. This is for your safety. People with the same or
similar name may be having procedures on the same day.

Your doctor will explain the procedure to you and answer any questions you may have. They will ask you to sign a consent form.

When it’s time for your procedure, you will be brought into the procedure room and helped onto an exam table. You will be attached to equipment to monitor your heart rate, breathing, and blood pressure. You will also receive oxygen through your nose. A mouth guard will be placed over your teeth to protect them.

You will receive anesthesia (medication to make you sleepy) through your IV. Once you’re asleep, your doctor will pass the endoscope (a tube with a camera on it) through your mouth, down your esophagus (food pipe), into your stomach, and into the first part of your small intestine. Your doctor will inspect your stomach and small intestine before placing your PEG or PEJ tube.

Your doctor will make a tiny incision (surgical cut) on the skin of your abdominal (belly) wall and pass a feeding tube through the incision. The feeding tube will come out about 8 to 12 inches outside your body and will be covered by a small dressing to keep it in place. When your doctor has finished the procedure, they will take out the endoscope.

After Your Procedure

In the hospital

You will be taken to the Post Anesthesia Care Unit (PACU),
where your nurse will monitor your temperature, heart rate, breathing, and blood pressure. They will also check the bandage around your tube. You will stay in the PACU until you’re fully awake.

When you’re fully awake, your nutrition nurse practitioner (NP) will show you and your caregiver how to give yourself the feedings and care for your PEG or PEJ tube. It’s very important to have your caregiver with you during the teaching session. You’ll also receive a resource that explains how to give yourself feedings with your PEG or PEJ tube.

Your nutrition NP will go over possible side effects that you may experience with your feeding tube and will give you the Oley Complication Chart as a reference. This chart provides guidelines on how to treat possible complications. To view the chart online, go to c.ymcdn.com/sites/oley.org/resource/resmgr/Docs/newHPN.pdf. However, we encourage you to call your doctor or NP if you’re experiencing any problems.

You will also receive supplies for your feeding tube for the first few days before you leave the hospital. After that, your nurse will explain how you can order these from the company. The supplies include:

- Supplies for dressing change:
  - 4 x 4 gauze
  - Tape or Cath-Secure®
- Zinc oxide (Desitin®) ointment
- Iodine (Betadine®) swab sticks
- Syringe for flushing your tube with water

Your doctor or NP may also prescribe pain medication for discomfort at your incision site.

At home

- You may feel some soreness in your throat. This is normal and will get better in 1 or 2 days.
- You may have some discomfort at your incision site for the first 24 to 48 hours. If so, take your pain medication as instructed.
- You can shower 48 hours after your procedure. Don’t take tub baths or go swimming for 2 weeks after your procedure.
- You may see dark green or yellow drainage around your PEG or PEJ site. A small amount of green or yellow drainage is normal.

Caring for the Skin Around Your PEG or PEJ Tube

You will need to care for the skin around your PEG or PEJ tube. Follow the steps below.

Every day, inspect the skin around your feeding tube for any redness, swelling, or pus. Tell your doctor or NP if you’re having any of these symptoms.
Follow these instructions for the first 2 days after your procedure.

1. Remove the old dressing.
2. Clean the skin around the tube with iodine swab sticks once a day.
3. Apply zinc oxide ointment.
4. Cover the incision site with a 4 x 4 gauze.
5. Loop the tube (see Figure 4) and secure it with tape or use a Cath-Secure tab to hold it in place.

Figure 4. Looping the tube

On the third day after your procedure, begin a daily routine of caring for the skin around your tube while showering.

1. Before you shower, remove the old dressing around your tube.
2. Wash the area with soap and water. Gently pat it dry.
3. After you get out of the shower, apply zinc oxide ointment.
4. Cover your insertion site with a 4 x 4 gauze pad.
5. Loop the tube and secure it with tape or with a Cath-Secure tab.

**Flushing Your Tube or Button**

**Flushing your PEG or PEJ tube**
Flush your PEG or PEJ tube once a day or as directed by your doctor.

1. Gather your supplies:
   - 60 mL syringe, either one with catheter tip or an ENFit syringe
   - 60 mL of water (room-temperature or warm, plain tap water) in a cup
   - Paper towels
2. Wash your hands with warm water and soap or use an alcohol based hand sanitizer.
3. Draw up 60 mL of water into the syringe.
4. Place the paper towels under the Y-port at the end of the tube to absorb any drainage.
5. Clamp the tube.
6. Insert the syringe into the Y-port of the PEG or PEJ tube.
7. Unclamp the tube and gently push the plunger to inject the water.
8. Re-clamp the tube.
9. Remove the syringe from the Y-Port of the PEG or PEJ tube.

10. You can reuse your syringe. Rinse it in warm water and dry it with clean paper towels after each time you flush your tube.

If you are having trouble flushing your tube, call your doctor or nurse.

**Flushing your gastrostomy or jejunostomy button**

Flush your gastrostomy or jejunostomy button once a day or as directed by your doctor.

1. Gather your supplies:
   - 60 mL syringe, either one with catheter tip or an ENFit syringe
   - 60 mL of water (room-temperature or warm, plain tap water), in a cup
   - Feeding tube adapter

2. Wash your hands with warm water and soap or use an alcohol based hand sanitizer.

3. Draw up 60 mL of water into the syringe.

4. Clamp the feeding tube adapter.

5. Connect the adapter to your gastrostomy or jejunostomy button.

6. Insert the syringe into the Y-port of the adapter.

7. Unclamp adapter and gently push the plunger to inject the water.
8. Re-clamp the adapter.

9. Remove the syringe from the Y-port of your adapter.

10. Disconnect the adapter from your gastrostomy or jejunostomy button.

11. You can reuse your syringe. Rinse it in warm water and dry it with clean paper towels after each time you flush your button.

If you are having trouble flushing your button, call your doctor or nurse.

**Call Your Doctor or NP if You Have:**

- Chest pain or shortness of breath
- Severe abdominal (belly) pain, diarrhea, nausea, or vomiting
- A temperature of 100.4° F (38° C) or higher
- Any dizziness or weakness
- Bleeding that doesn’t stop, such as bright red oozing from your insertion site
- Pain at your incision site that doesn’t get better with medication
- Trouble flushing your PEG or PEJ tube or button
- Drainage around your insertion site that soaks 5 or more gauze pads per day
- Any sign of redness, swelling, or pus around the tube
If you have any questions or concerns, talk with a member of your healthcare team. You can reach them Monday through Friday from 9:00 AM to 5:00 PM at _______________________. After 5:00 PM, during the weekend, and on holidays, please call_____________________. If there’s no number listed, or you’re not sure, call 212-639-2000.

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