

# **BOLUS** FEEDING WITH/WITHOUT PLUNGER

THE FOLLOWING INFORMATION IS AIMED AT SUPPORTING YOU OR THE PERSON YOU CARE FOR ON HOW TO DELIVER ENTERAL NUTRITION IN SMALLER AMOUNTS THROUGHOUT THE DAY/NIGHT USING A 60ML ENTERAL SYRINGE OR A BOLUS FEEDING SET.

**IMPORTANT NOTE:** It is important that you contact the managing healthcare professional (HCP) if additional training on tube feeding is required.

## **EQUIPMENT:**

- 60ml enteral syringe
- Extension set or bolus feeding set (if required)
- Water (type & volume as recommended by the managing HCP)
- Prescribed enteral nutrition.

**IMPORTANT NOTE:** Ensure you are sitting/the patient is sitting in an upright position of 45° angle during enteral feeding and for one hour post enteral nutrition administration.

This information is intended for patients or carers of those who have been prescribed tube feeds by a healthcare professional.

## HOW TO BOLUS FEED

The managing HCP will provide instructions on which method of bolus feeding to be used — plunger or non-plunger method.

- Wash hands before and after handling the tube
- Assemble all equipment required for bolus feeding and prepare on a clean tray or table
- Check the label and expiry date of the enteral nutrition to ensure the correct product is being used and position the patient at a 45° angle during enteral feeding and one hour post enteral nutrition administration.

If using a nasogastric tube it is important at this stage to check the position of the tube. A pH value must be checked prior to administration as well as confirming external tube cm graduation marking at the nostril remains the same as it was after the tube was placed. **Never administer anything down a nasogastric tube and do not start feeding before confirmation of the tube being in the correct position (the stomach).** If you think the tube is not in the correct position do not use the tube and contact the HCP that routinely places the tube. If you are unsure of how to confirm the tube position please contact your HCP for further instructions.

NOTE: If using a Button tube, attach extension set at this stage.

- Confirm the tube is in the correct position, as demonstrated during training by the managing HCP
- If requested by the managing HCP check the pH of gastric aspirate using pH indicator strips to confirm the tube is correctly positioned before enteral nutrition is administered
- Flush the tube using a 60ml enteral syringe with water (type and volume as recommended by the managing HCP)
- Close the clamp on the tube (if present).

# NON-PLUNGER METHOD

- Using a 60ml enteral syringe remove the plunger and connect the tip of the enteral syringe to the end of the feeding tube or extension set
- Similarly if using a bolus feeding set you should flush with water first and then connect the set to the end of the tube, as demonstrated during the training by the managing HCP. Ensure all clamps are closed
- Slowly pour the required amount of enteral nutrition into the syringe, then open the clamps
- Holding the syringe at a comfortable height above the feeding tube, allow the enteral nutrition to slowly run. Never attempt to rush bolus feeding. Ensure that the speed of delivery (rate) is as recommended by the prescriber. It is important the enteral nutrition does not run through too fast as this can cause unpleasant stomach symptoms
- Alter the height of the syringe to adjust the speed of delivery (rate). Increase the height of the syringe to run quicker, decrease the height of the syringe to run slower. If using a bolus feeding set adjust the role clamp to enable the enteral nutrition to run quicker or slower
- On completion of the enteral nutrition, flush the tube with water (type and volume as recommended by the managing HCP)
- Close the clamp on the tube (if present), disconnect the syringe and remove extension set (if using a Button tube), then replace end cap on feeding tube
- It is important that you sit at/the patient is placed at a 45° angle during enteral feeding and for at least one hour after the enteral nutrition has been delivered.

If you/the patient experiences leakage around the stoma site whilst tube feeding, stop the enteral nutrition and contact the managing HCP immediately for instructions on what to do.

### PLUNGER METHOD

- The prescribed amount of enteral nutrition should be decanted into a clean container. Then draw up into a 60ml enteral syringe. Have dry clean gauze ready to wipe the end of the syringe to prevent dripping
- Attach the filled syringe onto the end of the feeding tube or extension set and open the clamp (if present)
- Push the plunger to gently administer the enteral nutrition using a start stop method
- Close the clamp before removing the syringe
- Refill the syringe and repeat these steps until the prescribed volume of enteral nutrition has been given
- Ensure the speed of delivery (rate) is as recommended by the prescriber
- It is important the enteral nutrition does not run through too fast as this can cause unpleasant stomach symptoms
- On completion of the delivery of correct volume of enteral nutrition, flush the tube with water (type and volume as recommended by the managing HCP)
- Close the clamp (if present), remove the syringe, extension set (if a Button) and replace end cap on the feeding tube
- It is important that you sit at/the patient is placed at a 45° angle during enteral feeding and for at least one hour after enteral nutrition has been delivered.

If you/the patient experiences leakage around the stoma site whilst tube feeding, stop the enteral nutrition and contact the managing HCP immediately for instructions on what to do.

This advice literature is provided as guidance and should not be used as a substitute for medical advice. Always contact the managing HCP prior to making any changes to the tube feeding regimen. Please contact the managing HCP for the most up to date advice.

# IMPORTANT: Always seek urgent medical advice if there are any signs of abdominal pain, chest pain or breathing difficulties.

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