AVANOS*

MIC* GASTRIC-JEJUNAL FEEDING TUBE
PATIENT INFORMATION LEAFLET

What is in this leaflet?

This leaflet will answer some questions about the MIC* Gastric-Jejunal Feeding Tube (MIC* GJ-tube). It does not contain all available information about these products, and it does not take the place of talking to your healthcare professional. Your healthcare professional has more information and can answer any questions you may have. Follow your healthcare professional's advice even if it differs from what is contained within this leaflet.

Product Codes:

MIC* Gastric-Jejunal Feeding Tubes with Non-ENFit® Connectors:

0650-16-15, 0650-16-22, 0650-16-30, 0650-16, 0650-18-22, 0650-18-30, 0650-18, 0650-22, 0660-16, 0660-18, 0660-22

MIC* Gastric-Jejunal Feeding Tubes with ENFit® Connectors:

8650-16-15, 8650-16-22, 8650-16-30, 8650-16, 8650-18-22, 8650-18-30, 8650-18, 8650-22, 8660-16, 8660-18, 8660-22

What is the MIC* Gastric-Jejunal Feeding Tube?

The MIC* GJ-Tube is a feeding tube that goes into your stomach and small intestine through an opening in your abdominal wall, known as a "stoma." There is a balloon on the tube which is inflated with water and sits on the inside of your stomach. The feeding tube passes through your stomach and terminates in the small bowel. There is also an adjustable disc on the tube which sits outside of the abdominal wall close to your skin. Both the internal balloon and the external disc help to keep your feeding tube in place and prevent it from falling out. The tube is available in multiple sizes to make sure it can meet your needs.

The MIC* GJ-tube is made of silicone that is safe for use in humans. The tube also contains a stripe down the side so that it is visible on x-ray.

What is a MIC* Gastric-Jejunal Feeding Tube used for?

The MIC* GJ-tube is intended to be used in a person who cannot absorb adequate nutrition through the stomach. This tube can be used to deliver prescribed food, medicine, and water that your body requires directly into your small intestine. It also allows for gas in the stomach to be released.

Fig. 1

MIC* Gastric-Jejunal Feeding Tube with ENFit® Connectors (product codes 8650-XX & 8660-XX)

How do you use a MIC* Gastric-Jejunal Feeding Tube after it has been placed?

Always wash your hands with warm soapy water before touching your tube.

Flushing: The tube should be flushed every 4-6 hours while it is being used for feeding, anytime feeding is stopped, at least every 8 hours if the tube is not being used, or according to your healthcare professional's instructions. The tube should be flushed before and after giving medicine. To flush, use a 30-60 ml syringe with room temperature water or sterile water where municipal water supplies is of concern. Always flush the tube with the amount of water prescribed by your healthcare professional. Do not use acidic juices or sodas to flush. Do not use excessive force to flush, as this can damage the tube and cause injury.

Feeding: Open the cap to the jejunal access port (labeled "Jejunal") and connect the feed set to the tube. Deliver nutrition according to your healthcare professional's instructions. Make sure not to over-tighten the connection to the tube and ensure any clamps on the feed set are opened before starting to feed. If you see formula in the gastric drainage, stop feeding and notify your healthcare professional.

Medication Delivery: Use liquid medication if possible. If your pharmacist says it's safe, crush solid medication to a fine powder and dissolve in warm water before putting it through the tube. Follow your pharmacist's instructions. Do not mix medication with formula. Always remember to flush your tube with water before, between, and after medication administration. The amount of water that you flush with will be determined by your healthcare professional.

Gastric Decompression: Your healthcare professional may instruct you to decompress (release air or fluid from the stomach) before or after feedings. Never connect the Jejunal access port to suction. Do not use continuous or high-pressure suction. High pressure could collapse the tube or injure the stomach tissue and cause bleeding. Decompression helps to alleviate discomfort by relieving pressure in the stomach. Your healthcare professional will provide you with instructions on how to manage this process.

How do you take care of your MIC* Gastric-Jejunal Feeding Tube after it has been placed?

Tube Care: Follow your healthcare professional's instructions. Check the MIC* GJ-tube daily for any signs of damage or clogging. Clean the jejunal port, gastric port, balloon inflation port and external components of the tube with a cotton-tipped applicator or soft cloth to remove all residual formula and medication.

Check the stoma site daily for any signs of infection such as redness, irritation, swelling, tenderness, rashes or discharge. The stoma site and MIC* GJ-tube should be cleaned daily using warm water and mild soap. Make sure to keep the tube and skin around the stoma clean and dry. Do not use mineral oil or petroleum-based products. Be careful not to pull the tube too much. **Do not rotate the tube.**

Clogging: If the tube becomes clogged, check to make sure the tube is not bent or clamped shut. If you can see the clog outside the stomach, gently massage the tube with your fingers to try to break up the clog. Gently apply mild alternating suction and pressure using a 30-60 ml syringe of warm water to dislodge the clog (connect the syringe to the jejunal access port). If the clog cannot be removed, do not use force, and call your healthcare professional.

Balloon Care: Once the stoma site is fully healed, the balloon volume should be checked once a week by removing the water with a syringe and comparing the amount removed to the recommended amount. Refill the balloon and, if needed, add additional water to meet the recommended amount. Wait 10-20 minutes and repeat. If the amount of water is different from the recommended fill volume, then the tube should be replaced. If the balloon is damaged, secure the tube in place using tape, then call your healthcare professional for instructions.

Do not use air or saline to fill the balloon. Air can leak out of the balloon causing it to collapse, and saline can crystallise over time causing clogs. Do not overinflate the balloon, as that can block the tube and decrease the life expectancy of the balloon.

How long does a MIC* Gastric-Jejunal Feeding Tube last?

The balloon can last 1-8 months. This depends on various factors such as the volume of water used to inflate the balloon (always use the exact amount that your healthcare professional recommends), stomach pH, and tube care.

Is the MIC* Gastric-Jejunal Feeding Tube MRI compatible?

MIC* GJ-tubes can be safely worn while getting an MRI under certain conditions. Talk to your healthcare professional if you need to get an MRI.

What are possible side effects of having a MIC* Gastric-Jejunal Feeding Tube?

Side effects may include skin irritation or infection, ulcers, sores, or gastrointestinal leakage. Contact your healthcare professional if you experience stomach pain or discomfort, dizziness or fainting, unexplained fever, or an unusual amount of bleeding or leakage through or around the tube.

There is a risk that if the internal balloon fails on the MIC* GJ-tube, the tube could fall out. There could be leakage of gastric content around the tube. The tube could become blocked or clogged if it is not properly flushed and cared for before and after feedings.

How do you report adverse events?

Report any adverse events you believe are related to use of the MIC* Gastric-Jejunal Feeding Tube to:

- Your physician for a correct clinical assessment or Avanos Medical by contacting Customer Service
  P: 1800 101 021
  E: **customerservice.ANZ@avanos.com**
- Therapeutic Goods Administration at **http://www.tga.gov.au/** using the "Report a Problem" or "Adverse Event" links.