

After your Percutaneous Endoscopic Gastrostomy (PEG)

Discharge Information and summary of care

Endoscopy Unit

Surgical Services

This leaflet provides information/advice on discharge following your Percutaneous Endoscopic Gastrostomy (PEG). It is important that you are aware of what problems you may experience following discharge and situations that require further advice/treatment.

If you have a newly formed stoma site:

- For 10 – 14 days clean the stoma site using a sterile saline solution.
- Apply a dry dressing if there is oozing from PEG site
- If the site is inflamed, oozing blood or pus obtain a swab for analysis. (This can be done by your GP or District Nurse).
- Rotate the tube through 360° daily.
- For 2-3 weeks do not immerse the site in water (use showers not baths).

If you have an established stoma site:

- When the site has healed (2-3 weeks) clean daily with mild soap solution using tissues or soft cloth.
- No dressing should be necessary unless there is a heavy discharge.

Fixation Plate:

- The external fixation plate can be released at this point (2-3 weeks) noting the number mark on the tube, to access the stoma site for thorough cleaning – perform daily thereafter. Replace fixation plate after cleaning in its original position. (If you are unsure how to do this do not worry the PEG Nurse will go through this procedure at your 6 week appointment either in the PEG clinic or on a home visit.

- If you have gained weight or your abdomen is distended the position may need to be altered slightly.

Flushing and Feeding:

- Only administer prescribed feed, cooled, boiled water and medication
- Ensure prescribed volume of water is flushed through the tube before and after feed.
- Medicines should always be in suspension presentations
- Sitting upright or with the head of the bed elevated will help prevent reflux and risk of chest infections.
- Do not lie flat for 30 minutes after feeding has finished.
- If the tube blocks flush with 30 mls of warm water. If this fails after 30 minutes flush with soda water (carbonated drink) or pineapple juice. If still blocked after a further 30 minutes contact PEG Team or Out of Hours Contact (see overleaf).



If during the first 7 days following your tube insertion

- **there is a leak of fluid around the tube**
- **there is pain on feeding**
- **or there is fresh bleeding**

Stop the feed immediately and contact the hospital

Contact details overleaf

To be completed by the Ward Nurse or Dietitian responsible for patient discharge

Patient Name (Print).....

has been fitted with a PEG.

PEG Size:

Date of Insertion:

Name of Community Nurse informed (print).....

Type of feeding:

Prescribed feed:

BOLUS: Everyhours give.....mls

Flush withmls of water pre and post feeds and pre and post medication

CONTINUOUS:mls per hour overhours

Flush withmls of water pre and post feed and pre and post medication

Extra water flushes can be given asmls everyhours.

Contact Details

Monday to Friday - 9am to 5pm

For Adults

Urgent Messages:

PEG Nurses	0191 2829637 Direct Line
Nutrition Nurse	0191 2448520 Direct Line
RVI Endoscopy Unit	0191 2825655 Direct Line

Non urgent messages:

Answer phone 0191 2820134 Direct Line

For children

Sister Children’s Services	0191 2821694 Direct Line
Or	0191 2820325 Direct Line

Outside the hours stated above:

Please telephone:

Newcastle upon Tyne Hospitals NHS Foundation Trust Switchboard - 0191 2336161

Ask to speak to:

For Adults - Specialist Registrar on call for Gastroenterology and the Liver Unit at the Freeman Hospital

For Children – Specialist Registrar on call for Paediatrics

The patient has been reviewed by Consultant, Gastro Specialist Registrar or PEG / Nutrition Nurse and is fit for discharge and this has been documented in the case notes.

Yes / No

If no, patient must not be discharged.

Discharge Nurse (signature).....

Discharge Nurse (Print).....

Date.....

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