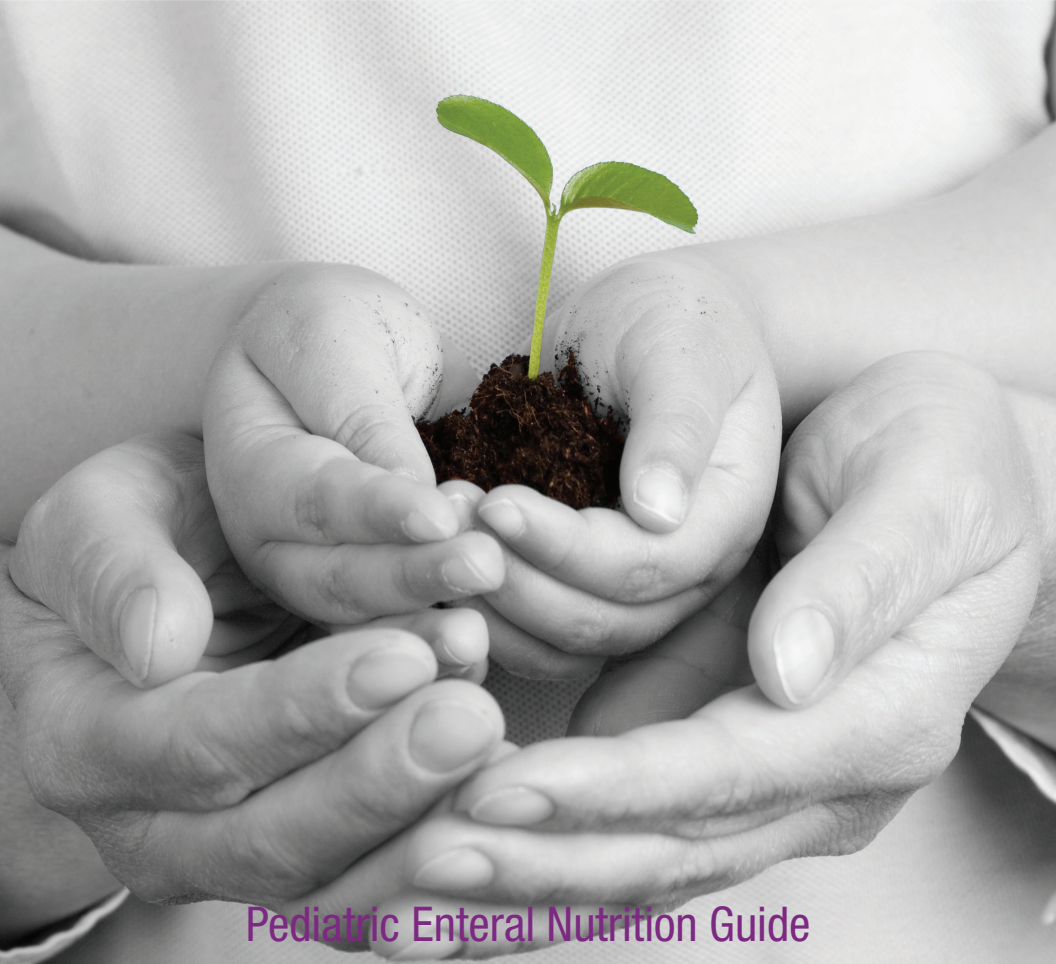


# GROW

with Shield HealthCare

## Tube Feeding Your Child At Home

Medical Supplies for Care at Home Since 1957



Pediatric Enteral Nutrition Guide



**98%** of our customers would recommend us to friends and family.\*

*\*2015 Annual Report on Quality, Press-Ganey Associates, Inc.*

*Pocket for Paperwork  
and Business Cards Slot*



**Our GROW with Shield program provides specialized support and products to help keep children with complex health care needs at home and thriving with their families. We focus on parent and caregiver support to promote healthy development and well-being.**

## **INTRODUCTION**

If your child is unable to meet his or her nutritional needs by mouth, a feeding tube provides a way to obtain life-sustaining nutrients. This method of “eating” bypasses the mouth and esophagus and delivers nutrition directly into the stomach or small intestine.

This guide provides the basic information about tube feeding, including how to care for your child’s tube and the skin around it, how to deliver feedings and how to prevent common complications. This information does not replace the advice of your healthcare professionals.

## Pediatric Products for Care at Home

### Enteral Nutrition

- Portable feeding pumps
- Backpack and emergency gravity kit with every pump
- Feeding tubes and accessories
- Complete line of infant and pediatric formulas



### Diapers and More

- Disposable diapers and pull-ups
- Underpads and liners
- Wipes, skin creams and cleansers



### Urological

- Foley, intermittent and external catheters
- Tubing and connectors
- Leg and night drain bags



### Wound Care

- Basic wound care and skin protection
- Advanced wound care dressings



### Ostomy

- Drainable and closed pouches
- Wafers and barriers
- Ostomy accessories





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# Your Child's Feeding Plan



You and your healthcare team will come up with a feeding plan that meets your child's nutritional needs and is most appropriate for his or her medical condition. Use this space to record your child's feeding plan.

Formula Name: \_\_\_\_\_

Total number of cans per day: \_\_\_\_\_

Feeding method:       Bolus/Syringe       Gravity       Pump

Feeding schedule: Rate: \_\_\_\_\_

Dose: \_\_\_\_\_

*\*Rate = milliliter (mL) per hour    \*Dose = amount of formula    \*mL = cc*

Water flushes:

\_\_\_\_\_ mL before and after each feeding

\_\_\_\_\_ mL before and after medication

\_\_\_\_\_ mL every 4 hours on continuous feeding

**Your health care team includes your child's doctor, nurse, registered dietitian and other healthcare professionals. Your Shield HealthCare Registered Dietitian is part of your healthcare team!**



# Life With a Feeding Tube

Having a child with a feeding tube may take some getting used to but you will get the hang of it with support from family, friends and your health care team. Although you may need to make some changes, the key to adjusting is for you and your team to come up with the plan that best fits your child's and your family's lifestyle.

## Tips for adjusting to tube feeding:

- Find out from your health care team all you can about tube feeding and what to expect.



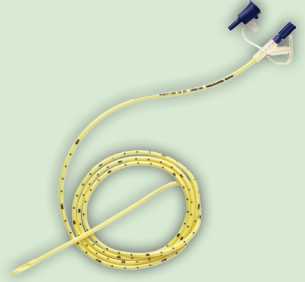
- Work with your health care team to plan a feeding schedule that fits with school, appointments and sleep.
- Have your child participate in his or her normal daily activities as much as possible. For example, have her join the family during mealtimes. She may take her feedings at another time if that works better.
- Stick to the feeding plan prescribed by the doctor. If your child misses a feeding, ask your team if you can fit it in at another time.
- Keep track of your child's feeding and medication schedule and how he or she responds to feedings. Write down any questions or concerns and take them to your child's medical appointments.
- Keep track of your child's weight and height. Your health care team will evaluate it at regular visits to make sure your child is receiving adequate nutrition for growth and development.
- Be prepared. Have enough formula and supplies on hand for your child's daily feedings.
- Connect with others who are on tube feeding. Ask your team about local support groups or join an online forum, such as the Feeding Tube Awareness Foundation (see page 25).

# Your Child's Feeding Tube

There are many different types of feeding tubes. The doctor chose the one that worked best for your child at the time it was placed. It may be necessary to change the type or size of the tube as your child grows.

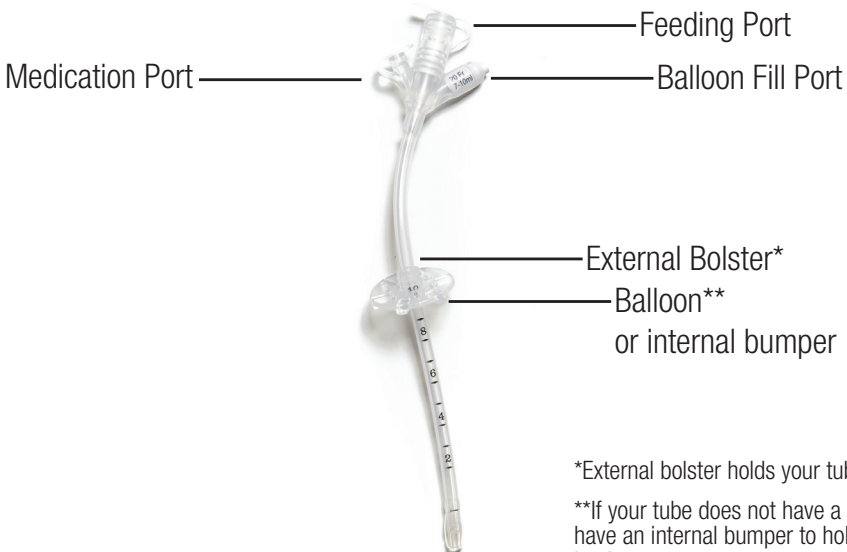
## Nasogastric (NG)/Nasojejunal (NJ)

This tube enters the body through the nose and passes through the esophagus. The tip of the tube may be in the stomach (nasogastric) or further down the gastrointestinal tract in the small intestine (nasojejun). These tubes are generally for short-term use. They come in different sizes.



## Gastrostomy tube (G-tube)

For this tube, a hole is made in the abdominal wall. The tip of the tube sits in the stomach. The length of some gastrostomy tubes may be adjusted by sliding the external bolster up or down the tubing. Most gastrostomy tubes will last a few months to a year or longer. These tubes come in french sizes. The tube is usually held in place with an internal bumper or a balloon.



\*External bolster holds your tube in place.

\*\*If your tube does not have a balloon it will have an internal bumper to hold the tube in place.

# Your Child's Feeding Tube

## Jejunostomy tube (J-tube)

A jejunostomy tube is placed during a surgical procedure, in which a hole is made further down on the abdominal wall. The tip of the tube lies in the jejunum or the second part of your small intestine, so nutrition bypasses the stomach.

## Gastrojejunostomy tube (GJ-tube)

Although only one hole is made in the abdomen, this type of tube has two ports: one that enters the stomach and one that enters the jejunum. The gastric port is typically used to vent gas from the stomach or to deliver medications, while the jejunal port is used for formula. This tube may have an internal bolster or a balloon to hold it in place.



## Low profile tube

A low-profile tube, also known as a button tube, sits close to the skin and requires extension tubing in order to use it. When not in use, it snaps shut. The tube may be in the stomach or jejunum. These tubes come in different sizes and lengths. Many are held in place by an internal balloon that holds water. They are usually replaced every few months.



## Your Feeding Tube

It may be helpful to note details about your child's tube for when it needs to be replaced.

Tube type: \_\_\_\_\_ Brand: \_\_\_\_\_

French size (diameter): \_\_\_\_\_ Length (if applicable): \_\_\_\_\_

Balloon volume (if applicable): \_\_\_\_\_



# Using the Tube

## Flushing the Tube with Water

Discuss your child's fluid needs with the health care team. Although liquid formulas contain water, it may not be enough to meet your child's daily needs. You may need to put additional water through the tube for hydration and to prevent the tube from clogging due to medications or dried formula. Regular tap water is safe for most people with tube feeding but ask your physician about the best type of water to use for your child.

Flush the tube with the amount of water recommended by your health care team – before and after giving formula and medications and every 4 hours when the tube is not in use.

### Supplies:

- Cup of room-temperature or warm water
- 60 mL syringe

### Instructions:

- Place the tip of the syringe into the water and pull back on the plunger until the water reaches the specified amount.
- Insert the tip of the syringe into your child's feeding port and slowly push the plunger until the water goes through.
- You may also remove the plunger from the syringe, insert the tip into your child's feeding port and slowly pour water into the syringe.



Syringe

# Using the Tube

## Venting a Gastrostomy Tube

You may need to release air from your child's stomach through the gastrostomy tube in order to decrease discomfort caused by gas. This is called venting the tube. **Check with your child's doctor before following these tips:**

1. Make sure the tubing is unclamped.
2. Remove the plunger from a 60 mL syringe and attach the tip of the syringe to the feeding tube or extension tubing.
3. Try pressing gently on your child's stomach or lifting her legs to help release the air.
4. If liquid comes out as well, allow it to flow back into the stomach. This liquid contains important nutrients and electrolytes.



# Delivering Medications/Formula

## Delivering Medications

Medication is the most common cause of a clogged tube. Follow these tips to help prevent clogs:

- Stop the feeding and flush the tube with water before and after medication.
- Give each medication separately unless otherwise instructed.
- Crush only those medications which are immediate-release. Sustained-release and enteric-coated medications may not be absorbed properly when crushed.
- Dissolve medications in warm water before giving them.
- Use liquid medications when available.
- Dilute liquid medications with water to prevent clogging and stomach upset.
- If you have questions, ask the doctor or pharmacist about the best way to give your child's medications through the feeding tube.

## Delivering Formula



### Feeding Tips

- Your health care team will provide instructions on the rate (how fast your formula flows) and the volume (the amount of formula used) for your child's feedings.
- Always wash your hands before handling the tube, formula and feeding supplies.
- Your child should be sitting upright or at a 30- to 40-degree angle during the feeding and for an hour afterward. This will help to prevent aspiration of formula into the airway.
- If your child experiences any symptoms of feeding intolerance during the feeding, such as nausea or vomiting, diarrhea or abdominal bloating, try slowing down the rate and contact your healthcare professional.

# Feeding Methods - Bolus/Syringe

## Bolus/Syringe Method

This method uses a syringe to administer a specified amount of formula at one time, much like a meal. This method may also be called gavage feeding. Discuss your child's feeding schedule with your health care team to find the best plan.

### Supplies:

- 60 mL syringe
- Room-temperature water
- Formula

### Instructions:

1. If your child has a low profile feeding tube, attach the extension tubing.
2. Open the feeding port and flush the tube with the recommended amount of water (see page 9).
3. Clean off the outside of the formula container with a clean towel and open it.
4. Remove the plunger from the syringe.
5. Attach the syringe to your child's feeding port, holding up the tube and syringe with one hand.
6. Slowly pour formula into the syringe with your other hand. Allow it to flow by gravity into your child's stomach. It should take around 15 minutes to deliver 8 ounces of formula. Feed more slowly or more quickly depending on tolerance. You can make the formula flow faster or slower by raising the syringe higher or lower in relation to your child's stomach. You can also push the formula in with the plunger to speed it up.
7. Flush your child's feeding tube with the amount of water recommended by your health care team.
8. Close the feeding port and disconnect the extension tubing.
9. Wash and dry all equipment and your hands.
10. Refrigerate any leftover formula and use within 24 hours.



# Feeding Methods - Gravity

## Gravity Method

With this method, formula flows out of a feeding bag and into the feeding tube by gravity. This method is slower than the bolus/syringe method and uses a roller clamp on the bag's tubing to control the rate.

### Supplies:

- 60 mL syringe
- Room-temperature water
- Gravity feeding bag
- IV pole
- Formula





# Feeding Methods - Gravity

## Instructions:

1. If your child has a low profile feeding tube, attach the extension tubing.
2. Open the feeding port and flush the tube with the amount of water recommended by your health care team (see page 9).
3. Hang the gravity feeding bag from the IV pole so that the bag is at least 18 inches above your child's stomach.
4. Clean off the outside of the formula container with a clean towel, shake it gently and open it.
5. If the gravity bag has a clamp, make sure it is closed.
6. Open the bag and pour in the desired amount of formula. Close the bag.
7. Prime the tubing to release any air. This will prevent the air from going into your child's stomach. Slowly open the clamp/roller clamp and allow the formula to flow until it reaches the tip of the tubing, then clamp it shut.
8. Remove the cover on the tip of the gravity bag's tubing.
9. Attach the tip of the tubing to the feeding port. Slowly open the clamp/roller clamp to start feeding. Control the rate of feeding by adjusting the clamp/roller clamp. It should take between 30 to 60 minutes to deliver 8 ounces of formula, depending on your child's tolerance.
10. When you are done feeding, disconnect the gravity bag tubing from your child's feeding tube.
11. Flush your child's feeding tube with the amount of water recommended by your health care team.
12. Close the feeding port and disconnect the extension tubing.
13. Wash and dry all equipment and your hands.
14. Refrigerate any leftover formula and use within 24 hours.

# Feeding Methods - Pump

## Pump Method

With this method, battery-powered pump infuses or pushes formula into the feeding tube. The pump may be set to run at a continuous rate over several hours or for 1 or 2 hours at a time. See page 19 for feeding pump troubleshooting guides. Refer to your pump's Operator's Manual for more information.

### Supplies:

- 60 mL syringe
- Room-temperature water
- Feeding bag
- Feeding Pump
- IV pole or Enteral Backpack
- Formula



# Feeding Methods - Pump

## Instructions:

1. If your child has a low profile feeding tube, attach the extension tubing.
2. Open the feeding port and flush the tube with the amount of water recommended by your health care team (see page 9). Flush the tube every time you use or every time you turn the pump on and off.
3. Hang the feeding bag from the IV pole so that the bag is at least 18 inches above your child's stomach. If you are using an enteral backpack, secure the bag inside and thread the tubing through the holes and out the back of the backpack (see page 30).
4. Insert the cassette into the feeding pump. The cassette includes the looped part of the tubing. Wrap the loop around the black wheel and stretch it lightly until the cassette clicks into the pump.
5. Close the pump door and turn the pump on. Keep it plugged in if you are near an electrical outlet to keep the pump charged.
6. Open the bag and pour in the desired amount of formula.
7. Squeeze the air out of the bag and close it.
8. Prime the tubing to release any air (see page 17/18). This will prevent the air from going into your child's body and causing discomfort.
9. Remove the cover on the tip of the feeding bag's tubing.
10. Attach the tip of the bag's tubing to the feeding port.
11. Set the pump to desired settings and start the feeding (See page 17/18).
12. When you are done feeding, disconnect the tubing from your child's feeding tube.
13. Flush your child's feeding tube with the amount of water recommended by your health care team.
14. Close the feeding port and disconnect the extension tubings.
15. Wash and dry all equipment and your hands.
16. Refrigerate any leftover formula and use within 24 hours.

# Priming/Setting Your Enteralite Infinity

## Priming:

- To prime the pump using the automatic prime feature, push and hold the PRIME button until the formula reaches the end of the tubing. Release the PRIME button.
- To prime the tubing manually, squeeze any air out of the bag and close it. Look for a raised teardrop etched onto the blue part of the tubing. Gently press the tubing together with your thumb and index finger right above the teardrop to allow the formula to free-flow through the tubing until it reaches the tip. Insert the cassette into the pump and close the door.

## Setting:

- Press the RATE/DOSE button until the word RATE is displayed on the screen. Push the + button until the desired rate is reached.
- Press the RATE/DOSE button until the word DOSE is displayed on the screen. To set a specific amount, push the + button until the desired amount is reached. If you want the pump to simply shut off when the formula is gone, continue to push the + button until the INF (Infinity) is displayed on the screen.
- Press RUN to start the feeding.



# Priming/Setting Your Kangaroo Joey

## Priming:

- Press PRIME PUMP in the opening menu.
- To prime automatically, press AUTO PRIME once.
- To prime manually, press and hold HOLD TO PRIME until the formula reaches the end of the tubing.

## Setting:

- Select ADJUST FEED, then FEED RATE.
- Use the arrows on the left to set the desired rate and press ENTER.
- Press RUN to start the feeding.





# Managing Common Complications

## Dealing with Gastrointestinal Issues



Your child may experience gastrointestinal symptoms while on tube feeding. In some cases, reducing the rate or the amount of formula may help. Even if your child is able to tolerate a slower rate or smaller amount, she may not be getting all of her nutrition. You may need to discuss trying a different formula or feeding plan with your health care team.

Keep in mind that gastrointestinal issues may be related to other things besides the feeding, such as medications or infection. Contact your team if your child has any of these issues.

Complication	Tube Feeding-Related Cause	Solution or Prevention
Diarrhea	Too much formula/too fast	Slow down the feeding rate and contact your health care team.
Constipation	Not enough water and/or fiber	Ask your health care team if you need additional fiber or water.
Nausea or vomiting	Too much formula/too fast  Cold formula	Sit your child upright or keep the head of the bed at 30 degrees or greater during the feeding. Ask your health care team about the right position for your child during feeding.  Slow down the feeding rate and contact your health care team.  Use room-temperature formula.
Feeling of fullness or abdominal discomfort	Too much formula/too fast	Slow down the feeding rate and contact your health care team.

# Managing Common Complications

## Preventing Infection

- Wash your hands every time you handle the tube, formula and feeding supplies.
- Use a new feeding bag daily or as instructed by your health care team. Between feedings, rinse the bag thoroughly with warm water.
- Rinse out the syringe with warm water and allow to dry after each use.
- For commercially-prepared formula, pour the amount into the bag that will be used within 12 hours.
- When preparing powdered formula, follow mixing instructions from your health care professional or on the formula label carefully. Here are some tips:
  - Prepare a single feeding whenever possible.
  - If making more than one feeding at a time, store in the refrigerator for up to 24 hours.
  - Re-warm refrigerated formula in a container of warm water or in an approved bottle warmer. Do not use a microwave.
  - Transport prepared formula with ice packs and use within 2 hours.
  - Hang prepared formula in a feeding bag for no longer than 4 hours.
- Practice good oral hygiene. Keeping your child's mouth clean and moist may help prevent oral bacteria from moving down the airway and causing pneumonia.
  - Floss and brush with a soft toothbrush and toothpaste (check with your doctor first) at least once daily.
  - Wipe the inside of your child's mouth with a clean, damp washcloth or mouth swab.
  - Avoid alcohol-containing mouthwashes, as these can be drying.
- Refrigerate leftover formula and discard after 24 hours.



## Resolving a Clogged Feeding Tube

If formula or water will not go through the tube or if you notice resistance when flushing, your child's tube may be clogged. First, make sure the tubing is not clamped or kinked. Then, follow these steps to clear the clog:

1. Using a 60 ml syringe administer 15ml of warm water or the amount recommended by your health care team. Gently move the plunger back and forth to help loosen the blockage.
2. If the blockage does not clear, clamp the tube for at least 5 to 15 minutes, allowing the warm water to soften the clog. If you can see the clog, massage that portion of the tube gently with your fingers.
3. Unclamp the tube and repeat steps 2 and 3.
4. If you are unable to release the clog, contact your health care team.

Prevent a clogged tube by regularly flushing the tube with the amount of water recommended by your health care team. You should do this before and after giving formula/medications and every 4 hours when the tube is not in use.



# Skin Care and Your Feeding Tube



Most tube-related skin issues can be prevented with routine monitoring and care of the skin around the tube.



- Wash your hands before touching the tube or your child's skin.
- Check the skin around the feeding tube daily. If you notice redness, pain, irritation or leaking around the site, notify your health care team.
- Rotate the external bolster (see page 7)  $\frac{1}{4}$  turn daily. It should rotate freely. **Do not rotate jejunostomy tubes.**
- Check the external bolster height both while sitting and lying flat. There should be about the width of a dime between the bolster and your child's skin.
- If your child's tube has a balloon, check the volume weekly or as recommended by your health care team to make sure it is filled with the right amount of water.
- Clean the area, including underneath the external bolster, with mild soap and water.
- Keep the skin around your child's feeding tube clean and dry. After a few days, leave the skin open to air unless your healthcare provider tells you to apply gauze.
- Secure the tube to clothing to prevent damage to the skin from excessive pulling. Here are two ways to do this:
  - Loop a piece of tape or a rubber band around the tubing and use a safety pin to secure it to clothing.
  - Wrap an ace bandage or abdominal binder around the waist and secure the tubing underneath.
- Replace the tube immediately if it comes out, or secure it with tape until it can be replaced. If left open, the hole can close up within a few hours!

Contact your health care team if you notice any of these signs on the skin around your feeding tube.

## Leakage around the tube can occur if the tube fits too loosely.

- Adjust the external bolster height and/or balloon volume as needed.
- Apply a skin protectant or moisture barrier.
- Use a short-term dressing, such as gauze to absorb drainage.



*The external bolster is the part of your tube that sits against your skin. The space between the bolster and the skin should be about the thickness of a dime.*

## Pressure necrosis may develop if the external bolster fits too tightly. You may notice redness, irritation and pain around your child's tube.

- If your child's tube has a balloon, verify that it is filled with the correct amount of water.
- If your child's tube does not have a balloon, adjust the height of the external bolster.



## Hypergranulation tissue appears as discolored, irritated and raised skin tissue around the tube.

- Prevent it by using only mild soap and water for daily cleaning.
- Stabilize the tube (see page 22) to restrict movement that may further irritate the skin.
- Treatment may include foam dressings to apply pressure and absorb moisture, silver nitrate sticks, moisture barriers and/or steroid creams.





# ing-Related Skin Issues

Contact your health care team if you notice any of these signs on the skin around your feeding tube.

**Bacterial infection may occur if moisture remains around the site. You may notice pain, inflammation, redness or drainage that may have an odor or color.**

- Wash your hands before touching your child's skin or the tube itself.
- Clean the site two to three times daily with warm water and keep it dry.
- Your doctor will determine if your child needs an oral or topical antibiotic.



**Yeast infection may occur as a result of excessive moisture from leakage or perspiration. It may present as a rash with swelling and sores around the site.**

- Gently cleanse and dry the skin around your child's tube.
- If you use a dressing, change it when it becomes moist.
- Your doctor may suggest antifungal powder or other treatments.



**A healthy stoma site should look like healthy skin.**



# Resources and Support



## **Your Shield HealthCare Registered Dietitian (RD) is part of your health care team.**

Contact your local Shield HealthCare office or call **1.800.228.7150** to get in touch with your RD for questions about your child's tube feeding and nutritional needs.

## **Shield HealthCare Online Communities** [www.shieldhealthcare.com/community](http://www.shieldhealthcare.com/community)

Caregivers

GROW

Nutrition

Incontinence and Urological

OstomyLife

Breastfeeding

Wound

## **Facebook Community: The Daily Feed Support Network**

[www.facebook.com/groups/TheDailyFeed/](http://www.facebook.com/groups/TheDailyFeed/)

## **Tube Feeding Organizations:**

1. The Feeding Tube Awareness Foundation works to raise positive awareness of tube feeding and to help parents obtain the practical knowledge and support they need. They also started Feeding Tube Awareness Week, which occurs every February.

[www.feedingtubeawareness.com](http://www.feedingtubeawareness.com)

[www.facebook.com/FeedingTubeAwareness](http://www.facebook.com/FeedingTubeAwareness)

2. The Oley Foundation provides support to home tube-fed adults and children with newsletters, a video library, an online community forum, support groups, an annual consumer conference and more.

[www.oley.org](http://www.oley.org)

3. The Oley Foundation also runs an equipment supply exchange, where users may donate or request tube feeding supplies and formula.

[www.oley.org/equipexchange.html](http://www.oley.org/equipexchange.html)

# When to Call Shield HealthCare

## Reordering Supplies:

Call Shield HealthCare at **1.800.228.7150** to reorder your tube feeding supplies monthly.

- Contact us a few days before you run out of supplies. You should receive a reminder call from us around this time each month.

## Changes to your child's feeding plan:

- Let us know if your doctor makes changes to your child's feeding plan, such as the amount of formula you use every day.



## Questions or concerns about your feeding pump:

- During business hours call **1.800.228.7150**
- After business hours call our 24-hour pump hotline at **1.866.614.PUMP (7867)**

## Questions about the information in this booklet:

- Contact your local Shield HealthCare office or call **1.800.228.7150** to get in touch with your RD for questions about your tube feeding and nutritional needs.

Call Shield HealthCare for all of your home medical supply needs, including:

**Incontinence    Enteral Nutrition    Ostomy**  
**Urological        Wound            Breast Pumps**

### NO FOOD Alarm

If re-priming of the pump delivery set is required, it is advisable to disconnect the enteral adapter from the patient's feeding tube while re-priming.

1. Is bag of pump delivery set empty?

**YES**

Refill bag, re-prime delivery set and resume feeding.

**NO**

2. Is air present in the tubing?

**YES**

Has air been removed from **bag** of pump delivery set?

**NO**

**IF NO:** Manually prime tubing by turning bag upside down, gently squeezing lower half of bag while pinching the teal colored tubing just below the drop symbol. Hold this position until all air is removed from bag and tubing.

**IF YES:** Press and hold the PRIME key to move the air in the tubing past pump delivery set cassette and resume feeding.

3. Is formula blenderized or aggressively mixed?

**YES**

Let formula sit for 10-15 minutes before preparing pump delivery set for feeding. If foam is present in tubing, flush by priming pump delivery set either manually or with the pump and resume feeding.

**NO**

4. Are air bubbles trapped inside the cassette?

**YES**

Remove tubing from pump and manually prime tubing by turning bag upside down, gently squeezing lower half of bag while pinching the teal colored tubing just below the drop symbol. Hold this position until all air has passed through the teal segment to the tubing.

**NO**

If alarm continues, contact Nestlé HealthCare Nutrition, (877) 338-4238 for assistance.

### ERRA, ERRD or ERRF Alarms

1. Was pump door open while pump was turned on or while running?

**YES / UNSURE**

Turn pump off. Unload and reload delivery set cassette. Make sure door is closed securely, then turn pump back on.

**NO**

If alarm continues, contact Nestlé HealthCare Nutrition, (877) 338-4238 for assistance.

### LOAD SET Alarm

1. Is door closed securely?

**NO / UNSURE**

Turn pump off. Unload and reload delivery set cassette. Make sure door is closed securely, then turn pump back on.

**YES**

2. Is door cracked or tab on inside of door broken?

**YES**

Contact MOOG Customer Advocacy, (800) 970-2337 to order a new door.

**NO**

Contact Nestlé HealthCare Nutrition, (877) 338-4238 for assistance.

# Infinity™ Troubleshooting Guide

## NO FLOW IN or NO FLOW OUT Alarm

- **NO FLOW IN** – Occlusion between delivery set and pump.
- **NO FLOW OUT** – Occlusion between pump and patient.

1. Is delivery set tubing pinched, kinked or clogged?

**YES**

Check delivery set for obstructions or kinks in tubing. Correct blockage and resume feeding.

**NO**

2. Is tab on inside of door broken?

**YES**

Contact MOOG Customer Advocacy, (800) 970-2337 to order a new door.

**NO**

3. Is pressure sensor region of cassette receptacle clean?

**NO**

Clean pressure sensor area with a cotton swab, soft cloth or dampened sponge, or wash entire pump under running water. Do not use abrasive materials or harsh chemicals.

**YES**

4. Are there visible signs of damage to pressure sensors area?

**YES**

Contact MOOG Customer Advocacy, (800) 970-2337 to return pump for service.

**NO**

Disconnect from patient and fill a new delivery set with food. Prime set and start pump. **If alarm continues, contact Nestlé HealthCare Nutrition, (877) 338-4238 for assistance.**

## CHARGING PROBLEMS

1. Is A/C adapter charger plugged into wall outlet and pump properly?

**NO / UNSURE**

Check connections for both wall plug and pump adapter. Green indicator light on charger wall plug should be illuminated and pump display should have plug symbol with scrolling bars between E and F of fuel gauge. When pump is fully charged, bars will stop scrolling.

**YES**

2. Is wall outlet functioning properly?

**NO / UNSURE**

Plug another device into outlet to verify outlet is functioning properly.

**YES**

3. Does charger port appear to have any damage including bent or missing pins?

**YES**

Contact MOOG Customer Advocacy, (800) 970-2337 to order a new charger.

**NO**

4. Does charger adapter appear to have any damage?

**YES**

Contact MOOG Customer Advocacy, (800) 970-2337 to return pump for service.

**NO**

5. Is Battery Symbol and E and F of fuel gauge flashing?

**YES**

Contact MOOG Customer Advocacy, (800) 970-2337 to return pump for service.

**NO**

If condition continues, contact MOOG Customer Advocacy, (800) 970-2337 to return pump for service.



## Kangaroo Joey™ Enteral Feeding Pump

### Troubleshooting Guide

Listed below are some of the probable causes of alarm conditions and their corrections.



SYMPTOM	PROBABLE CAUSE	CORRECTIONS
Hold Error	Pump in <b>HOLDING</b> mode for more than 10 minutes.	Press ► <b>CONTINUE</b> to return to <b>HOLDING</b> screen, or press and hold the Power button to turn off. Several options are available from the <b>HOLDING</b> screen, such as <b>RUN</b> or <b>ADJUST SETTINGS</b> .
Flow Error	Occlusion in pump-patient line. (downstream occlusion)	Check for and correct the occlusion in the line between pump and patient. Replace Pump Set if error cannot be resolved.
Feed Error	Empty bag or occlusion in bag-pump line. (upstream occlusion)	Check for empty bag and refill, or check for and correct the occlusion in the line between the pump and feed bag. Replace Pump Set if error cannot be resolved.
Flow Error Use > 24 Hrs	Pump Set in use beyond recommended length of time.	Informational warning message blinks on upper left of screen. It is recommended that the Pump Set be replaced.
Pump Set Dislodged	Pump Set not properly loaded to pump.	Check black ring retainer (MISTIC) and valve; reload Pump Set and restart pump to continue. Replace Pump Set if error cannot be resolved.
Battery Low	Battery charge too low.	Immediately plug pump into A/C outlet to recharge battery and to provide power for pump.
Rotor Error	Pump Set tubing not properly loaded on rotor, or some other unusual rotor operating condition.	Check that the tubing is loaded on the rotor and that it is not damaged, torn, etc. Reload tubing or replace Pump Set.
System Error	General error caused by many factors. See Manual for error list.	Power down pump and attempt restart to clear error. Call customer service with screen code if error cannot be resolved.

# How to Use the Enteral Backpack

## Step 1 Inserting the Feeding Set

A. For a 500-mL feeding bag: Place the bag in the first large section of the backpack. (Fig. 1) Thread the end of the tubing through the middle set of Velcro straps, and through the hole on the bottom, toward the back of the backpack. The end of the tubing should exit the back of the backpack. (Fig. 1)

B. For a 1,200-mL bag: Place the bag in the largest section, to the rear of the backpack. (Fig. 3) Thread the end of the tubing through the Velcro straps on the bottom, and out the back of the backpack. (Fig. 2) Thread the cassette through the hole toward you until it sits in the pump section.



Fig. 1

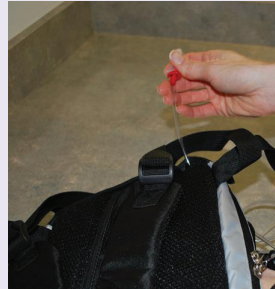


Fig. 2

## Step 2 Securing the Feeding Bag

Squeeze any air out of the feeding bag and pour desired amount of formula into the bag. Close it tightly. Secure the neck of the feeding bag with the Velcro strap inside the backpack. Secure the handle of the bag with the inner metal clip. (Fig. 3)



Fig. 3

## Step 3 Inserting the Pump

Load the cassette into the pump and close the door. Prime the tubing per pump instructions and set the pump to the desired setting. Secure the pump in the front section of the backpack with the Velcro straps. Be sure that the pump fits snugly. Close all sections of the backpack, using the zippers.



Fig. 4

## Step 4 Making the Backpack Comfortable and Secure

Adjust the shoulder straps according to comfort. Use the abdomen strap to secure the backpack around the waist.









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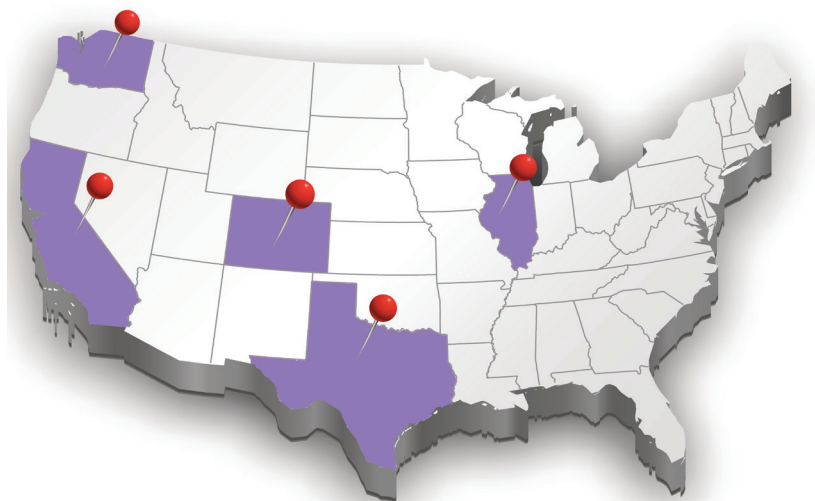
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