

Skin Site Solutions



- If you notice leakage around the stoma site:
 - o Adjust the external bolster height and/or balloon volume as needed.
 - o Apply a skin protectant or moisture barrier.
 - o Use a short-term dressing to absorb drainage.
 - o Keep the head of the bed at 30-45 degrees during and one hour after feedings.
 - o Adjust the volume of feeding as needed.
 - o Replace the tube if the stoma size has changed.
- Hypergranulation tissue (discolored, irritated and raised skin tissue around the stoma site)
 - o Prevent it by using only mild soap and water to clean the site.
 - Half-strength hydrogen peroxide should only be used occasionally to clean crusty debris not removable by water & mild soap.
 - o Stabilize the tube to restrict movement that may further irritate the skin.
 - o Treatment includes foam dressings to apply pressure and absorb moisture, silver nitrate sticks, moisture barriers & steroid creams.

Come discover more home tube feeding tips

at Shield HealthCare's online nutrition page at

ShieldHealthCare.com/community/nutrition



Featured Product: CALORIE AND PROTEIN MODULARS

When your patient needs additional calories and/or protein for wound healing but doesn't tolerate the volume of more formula or food, modular products may be useful.



Healthy At Home

Tips for Keeping Your Tube-fed Patients in the Home

Celebrate **National Food Safety Education Month** (September) by encouraging your patients to follow these safe practices for tube feeding:

- ✓ Wash your hands before handling all formula equipment and supplies
- ✓ Refrigerate leftover formula and discard after 24 hours
- ✓ Follow formula hang time guidelines:
- ✓ Store unopened formula in a cool, dry area

4 hours

Non-sterile powdered formula and human milk

8 hours

Sterile formula in an open system in a health care facility

12 hours

Sterile formula in an open system at home

24-28 hours

Non-sterile powdered formula and human milk

PEDIATRIC CORNER

Nutrition For Pediatric Wound Healing

A new study out of Seattle Children’s Hospital suggests guidelines to assess and manage the nutrition status of pediatric patients with complex wounds i.e., pressure ulcers, dehisced surgical wounds. A multidisciplinary team identified key components of the wound healing process:

- Formal nutrition assessment to evaluate nutritional needs and intake, weight status, labs, etc.
- Multivitamin and mineral supplementation for patients with one or more of the following: consuming less than 75% of estimated needs, 5% weight loss, BMI or weight/length of < 10% or > 95th percentile for age, < 90% ideal body weight, or growth failure.
- Increased protein intake (20-25% above current prescription) for non-healing wounds
- Evaluation of serum zinc and vitamin C levels and supplementation when deficiency is suspected and/or confirmed.




SEASONAL TIP: Vitamin D and Your Skin

Your body uses UVB exposure from sunlight absorbed by your skin to make vitamin D. Experts recommend 5 to 30 minutes of sunlight exposure between 10 am and 3 pm at least twice weekly. Multiple factors, however, affect your body’s ability to make vitamin D from sunlight:

- Complete cloud cover reduces UV rays by 50%.
- Shade cover reduces UV rays by 60%.
- Sun exposure through glass does not produce vitamin D.
- Sunscreen with SPF > 8 blocks most UV rays (although most people don’t apply enough to prevent partial exposure).
- The darker your skin, the less UVB it can absorb.

If many of the above factors apply to you, you may need to get more vitamin D from food to meet the 600 International Units (IU) recommended daily. Ask your doctor if you should also take a vitamin D supplement.

Food	Amount in International Units	Percent Daily Value
Cod Liver Oil, 1 Tbs	1,360 IU	340%
Salmon (sockeye), 3 oz	447 IU	112%
Tuna packed in water, 3 oz	154 IU	39%
Orange Juice, fortified	137 IU	34%
Milk, 1 cup	120 IU	30%
Fortified margarine, 1 Tbs	60 IU	15%
Egg Yolk, 1 large	41 IU	10%



Caregiver Corner

September is National Preparedness Month!

Make sure you’re prepared for anything with these steps:

Be informed. Find out about which types of disasters, including natural, technological and home fires are likely to occur in your area. Be on the alert for wireless emergency alert text messages on your cell phone.

Make a plan. Be sure your family knows what to do before, during and after an emergency. Download the Family Communication plan at <http://www.fema.gov/media-library/assets/documents/34330>

Build a kit. Set aside enough food, water and supplies to last at least 3 days.

• Choose foods your family will eat and that are low in salt, which will increase thirst: salt-free crackers, whole grain cereals and low-sodium canned foods with a high liquid content.

• If you or a family member depends on a feeding pump for nutrition, keep an Emergency Gravity Feeding Kit from Shield HealthCare on hand.

Get involved. Join the National Preparedness Community for tips, links, discussions and events at

community.fema.gov

Meet Your Local RDs...



Trina Boland
MS, RD, LD



Amy Long Carrera
MS, RD, CNSC, CWCMS



Mary Kuehl
MS, RD, CNSC



Lisa Zaccaro
RD, CWCMS



Annie Muto
MS, RD

**ASK
The RD**

Question

**What should I do if my
G-tube comes out?**

Answer

Your patient's feeding tube may become dislodged or the balloon may fail to stay inflated. If this happens, keep the tube in place with tape and cover the area until a tube can be successfully reinserted at the doctor's office or emergency department.

If left open, the hole can close up within a few hours!

References:

Kimberly-Clark Health Care Education: Care and Maintenance of the Stoma Site and Feeding Tube
A.S.P.E.N. Enteral nutrition practice recommendations. JPEN, March 2009.
Federal Emergency Management Agency: Ready.gov
Office of Dietary Supplements
Thompson KL, et al. Nutrition Interventions to Optimize Pediatric Wound Healing: An Evidenced-Based Clinical Pathway. Nutr Clin Pract. published online 28 May 2014.

Connect With Us & See What's New At...



Shield Enteral Nutrition Support Program A d v a n t a g e

- Pump setup within 4 hours of discharge in most cases
- Direct dietitian-physician communication
- Wellness checks and quarterly nutrition screenings
- Clinical and nutrition in-services for your staff
- Fewer hospital visits for your patients
- On-staff RDs available for questions and troubleshooting

Call us today, we're here to help!

California

Fresno 800.675.8842
Inland Empire 800.557.8797
Los Angeles 800.372.6205
Sacramento 800.675.8842
San Diego 800.557.8797
San Francisco 800.675.8840

Colorado

Denver 800.525.8049

Illinois

Chicago 800.675.8847

Texas

Dallas 800.407.8982
Fort Worth 800.407.8982
Houston 800.493.7863
San Antonio 800.495.0999
West Texas 800.495.0999

Washington

Seattle 800.720.7440

