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Nursing Care of the Patient with an Enteral Feeding Tube: What Procedures Should be Updated with the ENFit Connector

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Introduction

A new design standard for medical device tubing connectors is on its way. Starting with enteral feeding, application-specific standards will help confirm that connectors do not fit into ports other than the type for which they are intended, reducing the incidence of misconnections. This global patient safety initiative starts in the US, Canada, and Puerto Rico, with the goal of completion in these markets by 2016. **More than anyone else, nurses will be handling and using the new ENFit connectors, so your preparedness is key.**

Purpose

The purpose of this document is to highlight where procedures needed for the routine care of the patient with feeding tubes used for enteral nutrition, administering medications or hydration will need some revision with the new **ENFit connector**.

Disclaimer

These procedures are not complete but only contain elements related to the new enteral connectors. Consider Insertion of these suggestions into currently approved policies. These are also not specific for every type of enteral system in every patient population. These recommendations should not substitute for sound clinical judgment.

Procedures/Interventions

Procedure	**Revision in Procedure: Short Term (Current Feeding Tube with semi-rigid female port)**	**Revision in Procedure: Long Term (New Feeding Tube with rigid male ENFit Connector)**
Verify tube position and connector type (Current or new ENFit) at beginning of each initial nursing assessment and then prior to administration of feedings or medications and prn as needed.	• Use ENFit transition administration set with male ENFit Transition Connector and place into current female port. • Use current Oral or Catheter tip syringe and check position of tube tip.	Use ENFit syringe and place into ENFit connector type on tube to check position of tube tip.
Feeding Tube Flushing: After checking placement, flush tube with at least 30mL of	Use Oral or Catheter tip syringe and place into current connector type to flush tube.	Use ENFit syringe and place into ENFit connector type on tube to flush tube.

water for non-volume restricted adult patients. Do this after checking residual, before and after administering intermittent feeding, and before and after medications.		
Checking gastric residual volume: As per institutional practice, check gastric residual volumes prior to each intermittent feeding, water bolus, medication administration, or serially if the patient is on continuous feedings in acute care.	Use Oral or Catheter tip syringe and place into current connector type to check residual volumes.	Use ENFit syringe and place into ENFit connector type on tube to check residual volumes.
Administration of formula: Closed System: (hang time 24 hours): • Obtain pre-filled container and spike set/tubing. Label, date and time container and tubing. • Shake container then spike and prime tubing, then attach the closed system to the enteral feeding pump according to manufacturer's directions.	Use ENFit transition administration set with ENFit Transition Connector to attach feeding formula to current female connector/port on tube.	Use administration set with ENFit connector to attach feeding formula to ENFit connector on tube.
Administration of formula: Open System: (hang time 8 hours) *Continuous Feeding*: • Pour the ordered amount of formula needed for 8 hours of administration into clean feeding administration bag. • Attach the administration set to the enteral feeding pump according to manufacturer's directions. *Intermittent Feeding:* • Pour the ordered amount of formula into cleaned feeding administration bag. • Feedings should be given slowly over 15-20 minutes.	Use ENFit transition administration set with ENFit connector and Transition Connector or Oral or Catheter tip syringe for bolus feedings to attach feeding formula to current female connector/port on tube.	Use administration set with ENFit connector or ENFit Syringe (for bolus feedings) to attach feeding formula to ENFit connector on tube.

• Flush tube with 30 ml of warm tap water before and after each intermittent feeding. *Bolus Feeding:* • Pour the ordered amount of formula into a syringe after attaching to the feeding tube. • Feedings should be given as tolerated. • Flush tube with 30 ml of water before and after each bolus feeding.		
<u>Medication delivery</u>: • Prepare medications for administration via feeding tube after discussion with Pharmacy. • Notify pharmacy of the need to supply liquid medications rather than tablet when available. • Administer each medication separately. • Flush tube with at least 15 ml –of water before, between and after each medication administration in non-volume restricted adult patients.	Communicate with pharmacy about medication being delivered into tube, what type of tube, and distal tip location. Have pharmacy provide medication in liquid form in Oral or Catheter tip syringe to patient care area as available. Use Oral or Catheter tip syringe to deliver medications and flushes through current connector tube tip.	Communicate with pharmacy about medication being delivered into tube, what type of tube, and distal tip location. Have pharmacy provide medication in liquid form in ENFit syringe to patient care area as available. Use ENFit syringe to deliver medications and flushes through ENFit connector tube tip.
<u>Tube care: cleaning end of long term tube</u>	---	With ENFit Connector on long –term feeding tube, use warm water and bottle brush or toothbrush to scrub proximal end of long-term tube to clean threads and male end of any formula or medication residual.

References

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