

Insertion and Maintenance of a Nasojejunal Tube



Your health care team feels that your child could benefit from a Nasojejunal Tube (NJ tube). An NJ Tube is a long flexible tube that is inserted into your child's nose and advanced under fluoroscopic (X-ray) guidance past the stomach into the proximal small bowel (jejunum). It is then used for supplemental or continuous feedings, as well as medication administration. The tube can remain in place for as little as one week, or up to one month at a time. The duration of the tube will be determined by your health care team.

What to expect?

Your child will lie on an X-ray table with the X-ray machine positioned over their face and belly. Depending on the age of your child, they may be swaddled to prevent them from accidentally pulling on the tube during insertion. A numbing lubrication gel is placed in the nostril; this gel helps reduce discomfort but does not completely take away the sensation.

The tube is then inserted into the nostril and advanced into the stomach. Insertion of the NJ may require guidewires to assist with maneuvering the tube through the stomach and into the proximal small bowel.

Throughout the procedure, the patient may experience some discomfort at the nose, gag, feel nauseated and/or vomit while the tube is being maneuvered into position.

Once the tube is in the appropriate position, it will be secured to the cheek with a protective skin barrier (Duoderm), tape and a transparent dressing.

Maintaining the NJ tube

The cheek and nose should stay dry and clean.

The NJ tube should be routinely flushed with warm water before and after feeding and any medication administration, as well as every four hours. Approximately 10-20 ml of warm water should be used. A minimum of 20 ml should be used for tubes longer than 90 cm.

When possible, liquid medications should be used. If a medication does not come in liquid form, then the pills should be crushed to a fine powder and mixed with a small amount of warm water before injecting into the tube. Check with your pharmacy for options.

If the tube becomes clogged, try flushing again with warm water. If you are unable to unclog the tube, contact your child's doctor or nurse. The tube will likely need to be replaced.