Patient information



Post Insertion Care of a CORFLO Percutaneous Endoscopic Gastrostomy (PEG)

What is a PEG?

Today you have had a PEG (a thin tube through the skin and directly into the stomach) inserted as a way of introducing food, fluids, and medicines directly into the stomach.

How will I feel after the PEG insertion?

As the endoscope has been passed through your mouth to your stomach, the back of your throat may feel sore for the rest of the day, and you may feel a little bloated.

If your procedure was carried out with sedation, you may feel sleepy for the remainder of the day. It will take a little while for you to recover from the sedation but once you are fully awake, the PEG site may feel uncomfortable and pain killers should help.

When should I seek help/advice?

Serious side effects are rare however, if any of the following occur within 48 hours after your gastroscopy and PEG insertion, consult a doctor immediately:

- Vomiting blood
- Severe abdominal pain
- · Difficulty breathing
- Fever
- Chest pains
- Severe bloating
- Bowel motions turn black

Conquest Hospital contact numbers:

Endoscopy Unit – Tel: 0300 131 5297 – Monday to Friday 8.00am to 6.00pm (except bank holidays).

Eastbourne District General Hospital contact numbers:

Endoscopy Unit – Tel: 0300 131 4595 – Monday to Friday 8.00am to 6.00pm (except bank holidays).

Alternatively, after 6.00pm and at weekends please contact your GP, attend your nearest Accident and Emergency Department or ring NHS 111.

How do I care for my PEG?

Always wash your hands with warm soapy water before touching your tube.

If a Biopatch dressing has been applied, this can be left in place for 5 days as it is designed to reduce the incidence of local infection. Thereafter, no dressing is necessary. Should the area around your PEG tube site become red, inflamed with increased oozing, become more painful or you feel like you have a temperature, please consult a medical professional as these could be signs of wound infection.

Your PEG should be flushed before and after feeding or medicine administration with 30 millilitres (mls) of water to prevent blockage.

The area around where the tube enters your stomach is known as the stoma site, and you may experience a discharge for the first few days. It is important to clean your stoma site daily and keep it dry.

Once the PEG has been in place for 10 days and the stoma has healed, you should start to rotate it after it has been cleaned. If however, the PEG does not turn and causes pain, stop and try again the next day. If this problem continues, contact your dietician for advice.

If you notice any redness, pain, odour, or discharge from the PEG site you may have an infection, and should contact your GP immediately to identify the cause.

If feed begins leaking from around the stoma site, you should stop feeding and contact your GP.

What should I do when I go home?

The multidisciplinary team will plan for your discharge home and ensure that the necessary support is in place. The dietician will monitor your progress.

Will I have to come back to hospital?

You will be expected to return to the Endoscopy Unit 18 months after your PEG was inserted to have it changed to a balloon PEG, which can then be changed without having to return to the Endoscopy Unit.

Consent

Although you consent for this treatment, you may at any time after that withdraw such consent. Please discuss this with your medical team.

Sources of information

You will be provided with a copy of the <u>Avanos Corflo Percutaneous Endoscopic Gastrostomy</u> patient booklet, to provide useful information on care of your PEG.

Important information

The information in this leaflet is for guidance purposes only and is not provided to replace professional clinical advice from a qualified practitioner.

Your comments

We are always interested to hear your views about our leaflets. If you have any comments, please contact the patient experience team on 0300 131 4784 or esh-tr.patientexperience@nhs.net.

Hand hygiene

We are committed to maintaining a clean, safe environment. Hand hygiene is very important in controlling infection. Alcohol gel is widely available at the patient bedside for staff use and at the entrance of each clinical area for visitors to clean their hands before and after entering.

Other formats

If you require any of our leaflets in alternative formats, such as large print or alternative languages, please contact the Equality and Human Rights Department on 0300 131 4434 or esh-tr.AccessibleInformation@nhs.net

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Conquest contact numbers:

PEG Link Nurse: Staff Nurse Salini Narayanan, Staff Nurse Magret Magidi & Kate Punzalan Conquest Hospital Endoscopy Unit – Tel: 0300 131 5297 Monday-Friday 8.00am to 6.00pm (except bank holidays)

Eastbourne contact numbers:

PEG Link Nurse: Matron Danielle Lloyd & Sister Sheryl Manton Eastbourne DGH Endoscopy Unit – Tel: 0300 131 4595 Monday-Friday 8.00am to 6.00pm (except bank holidays)

Reference

The following clinicians have been consulted and agreed this patient information: Consultant Gastroenterologists Dr D Neal & Dr M Whitehead

The directorate group that have agreed this patient information leaflet: Medicine Division

Next review date: November 2026
Responsible clinician/author: Sister Sheryl Manton
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Endoscopy Discharge Report:

	You will be sent an outpatient appointment.						
	You have been referred to a Clinical Nurse Specialist						
	You have been given an information leaflet.						
	You have been given a Feeding Tube Passport document.						
	You have been spoken to by an endoscopist/nurse regarding the results of your procedure						
If you have any further questions, please ask a member of the nursing staff who will be happy to explain anything you are unclear about.							
Completed by:							
Р	rint Name: Designation:						
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View hospital appointments, clinical letters and pathology results using our secure online system www.esht.nhs.uk/mhcr

