



SAMPLE FEEDING SCHEDULE PUMP

NUTRITIONAL GOAL: _____ cans of _____ per day
and _____ cups (_____ oz) of water per day

Pump rate options: (see back of this page “Cycling”)

- _____ ml/hr X _____ hours = _____ cans per day
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- _____ ml/hr X _____ hours = _____ cans per day

Below is a sample schedule of the tube feeding rate you are currently tolerating.

____:____ Start with a new feeding bag.

Using a syringe, flush your feeding tube with _____cc (ml) water.

Add _____ can(s) formula to bag. Run pump at _____ml per hour.

____:____ When your bag is empty, rinse out your feeding bag with warm water.

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Using a syringe, flush your feeding tube with _____cc (ml) water.

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Using a syringe, flush your feeding tube with _____cc (ml) water.

Add _____ can(s) formula to bag. Run pump at _____ml per hour.

Additional Fluid Needs: _____cups (_____ oz) per day in addition to above flushes.
If fluids not taken by mouth, then they must be given through the feeding tube.

Prepared for _____ Date: _____

HomeMed Nutritionist: _____ 1-800-862-2731 ext. _____

**TO PREVENT FOOD BORNE ILLNESS
FROM BACTERIA IN FORMULA:**

After a can of formula has been opened it should remain at room temperature for no longer than **8 hours**.

Use the chart below to be sure the formula does not hang in the bag for more than 8 hours.

If the pump rate is set at _____ ml/hr, pour up to _____ cans into the bag.

| | | | | | |
|------|---|---|---|---|----|
| 20 | . | . | . | . | ½ |
| 30 | . | . | . | . | 1 |
| 40 | . | . | . | . | 1 |
| 50 | . | . | . | . | 1½ |
| 60 | . | . | . | . | 2 |
| 70 | . | . | . | . | 2 |
| 80 | . | . | . | . | 2½ |
| 90 | . | . | . | . | 3 |
| 100 | . | . | . | . | 3 |
| 110 | . | . | . | . | 3½ |
| 120 | . | . | . | . | 4 |
| >130 | . | . | . | . | 4 |

Be sure to rinse the tube feeding bag and tubing with water before adding more formula. The bag should be rinsed out *at least* every 8 hours.

CYCLING TUBE FEEDINGS

In order to have some time off the tube feedings during the day, you may prefer to cycle your feedings. This is done by running the pump faster to deliver the same amount of formula over a shorter period of time.

To minimize the amount of time spent hooked up to the pump, increase the pump rate as tolerated to the goal set by the HomeMed clinician. Increase the pump rate by 5-10 ml/hr increments every 1-4 days as tolerated. If at the new rate you experience any diarrhea, nausea, cramping, or bloating, go back to the previous tolerated rate and stay at that rate for about 3 days, then continue to increase the rate as tolerated.