

## Medications and Enteral Feeding

### General Considerations

1. Consider an alternative dosage form to oral (e.g. inhalation, transdermal)
2. Liquid dosage forms are preferred
3. Flush with at least 30 mLs of water before and after medication administration
4. Immediate release tablets can be crushed and added to the enteral feed
5. Cytotoxic, controlled release and enteric coated tablets cannot be crushed and accordingly cannot be administered through enteral feeding tube

### Administration of Specific Medications Incompatible with Enteral Feed

Medication	Incompatibilities	Recommendations
Phenytoin (Dilantin®)	Reduced bioavailability	<ul style="list-style-type: none"><li>• Stop the feed 2 hours before and after the phenytoin dose</li></ul>
Quinolones (e.g. ciprofloxacin, levofloxacin)	Reduced bioavailability with minerals e.g calcium	<ul style="list-style-type: none"><li>• Stop the feed 2 hours before and after the quinolone dose</li></ul>
Pantoprazole (Pantoloc®), Rabeprazole (Pariet®)	Reduced efficacy if crushed	<ul style="list-style-type: none"><li>• Change to equivalent doses of lansoprazole (Prevacid®) capsules</li><li>• Administer capsule contents in 40 mLs of apple juice</li></ul>
Warfarin (Coumadin®)	Vitamin K content may reduce efficacy	<ul style="list-style-type: none"><li>• INR has to be monitored closely and dose adjusted accordingly</li></ul>

### Unclogging of a blocked enteral feeding tube

1. Withdraw any enteral solution remaining in the tube
2. Try 5 mLs of warm water first,
3. If still clogged use Sodium Bicarbonate / Viokase® mixture:
  - Crush one tablet of sodium bicarbonate 325 mg and mix together with the contents of one capsule of Viokase® or Cotazyme® in 5 mLs of sterile water
  - Inject the mixture in the enteral feeding tube
  - Clamp for 5 minutes and flush with water until clear
4. If the tube is still clogged it might need replacement

**NOT SURE MEDICATION IS COMPATIBLE WITH ENTERAL FEED?**

**CONTACT PHARMACY or REFER TO POLICY 10-13**