Feeding Through a Tracheoesophageal Puncture (TEP)

A tracheoesophageal puncture is an incision from the trachea through to the esophagus for a laryngectomy patient. It is made for the eventual placement of a voice prosthesis. To keep the incision site open, a catheter (Red Robinson) is placed through the tract and esophagus and passed down to the stomach. This tube can be used for feeding purposes if needed. This process is the same as feeding through a nasogastric tube (NG) or a percutaneous gastrostomy tube (PEG).

How to Perform Feedings

1. Secure the TEP tube to make sure it does not get pulled or tugged.
2. Pinch the tube below the opening and remove the stopper.
3. Using a catheter tip syringe, perform bolus feedings which are also known as gravity feedings.
4. After the feeding, flush with 150cc of water.
5. Pinch the TEP tube and remove the syringe.
6. Replace the stopper.
7. If the tube becomes clogged, flush it with 1oz of warm water or carbonated beverage.
8. Ensure the patient stays in an upright position for at least 30 minutes following a feeding.

What to do if the Red Robinson Catheter comes out at home?

If the Red Robinson catheter comes out, don’t panic. The patient, caregiver, or home health nurse may replace the catheter. It is very important that this catheter be replaced as soon as possible to keep the tract open for future placement of the voice prosthesis. The longer the catheter is out, the greater the chance the puncture hole will close. Patients will also aspirate liquids through this hole. If the catheter is unable to be replaced, make an appointment to see Speech as soon as possible or go to the UAB emergency room. If the hole closes, the patient will eventually need to go back to the operating room for another tracheoesophageal puncture (usually after 2-3 months).

Steps to replace catheter

1. Clean and rinse the Red Robinson catheter.
2. Pull back on the skin around the puncture site so the opening can be visualized.
3. Slide catheter back in, leaving approximately 2 inches of the catheter outside of the opening.
4. Secure by taping the catheter to the skin.
5. Call the ENT office at 205-934-9766 for assistance and to make an appointment to see the Speech pathologist.