



Tiger 2™

SELF-ADVANCING NASAL JEJUNAL FEEDING TUBE



Advance to the next level of enteral feeding.

Global Product Number	Order Number	Fr	Length cm	Sideports
Tiger 2				
G50415	C-NJFT-14-U	14.0	155	5

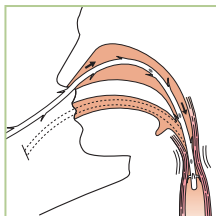
Global Product Number	Order Number	Diameter inch	Length cm	Tip
Torque Cable (optional)				
G30124	TSBD-65-170-NJFT	.065	170	straight



Tiger 2™

SELF-ADVANCING NASAL JEJUNAL FEEDING TUBE

Suggested Insertion Instructions



1. Apply lubrication to the distal tip of the Tiger 2.
2. Advance the feeding tube nasally or orally, initially 50-70 cm into the stomach (dependent upon patient's anatomical measurements).

Note: The optional torque cable may be used to advance the tube 50-70 cm. Cable must be inserted in the Tiger 2 prior to placement in patient. Remove the cable after advancement into the stomach is achieved.

Note: Do not reinsert torque cable while the Tiger 2 is in the patient.

Insufflation and auscultation may be used to confirm that the distal tip of the feeding tube is in the stomach.

3. The Tiger 2 should be left in place at 50-70 cm for 30 minutes to 1 hour.
4. Thereafter, advance the tube 10 cm every 30 minutes to 1 hour until the 100 cm mark is reached.

Note: If peristalsis activity is weak, the Tiger 2 can be advanced 10 cm every 2 hours.

5. If the patient's stomach is anatomically abnormal, advance the tube in 5 cm increments.
6. Pharmacological agents may be used to increase peristalsis in accordance with standard institutional protocol.
7. At the 100 cm mark, take an abdominal x-ray to confirm placement in the small intestine.
8. Secure appropriately to endotracheal tube or nose once the tube is fully advanced.

Note: Usually placed within 3-4 hours; however, placement could take 12-24 hours with decreased peristalsis.

Tube Removal

CAUTION: Remove the Tiger 2 in a slow, controlled manner.

Note: This Quick Reference Card is an outline highlighting the insertion and removal process for the Tiger 2 Self-Advancing Nasal Jejunal Feeding Tube. The *Suggested Instructions for Use* booklet should be consulted for a more thorough examination of the insertion and removal protocol, indications, contraindications, warnings and precautions.



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CC-BM-T2QRC-EN-201003