

The following tube feeding formulas have been evaluated for use with RELiZORB in the following use conditions:

- 1. Continuous feeding with enteral pump using single (~500 mL of formula) and tandem (~1000 mL of formula) RELiZORB at 120 mL/hour
- 2. Bolus feeding with a single RELiZORB at maximum feed rate of ~400 mL/hr

Enteral tube feed formulas evaluated with RELiZORB								
							Fat Hydrolysis (%)*	
Formula Name			Continuous	Bolus**				
	Fat (g)	Calories (kcal)	Contains pre- hydrolyzed protein	Contains Insoluble Fiber	MCT:LCT ratio	Omega-3 DHA & EPA (g)	Single and Tandem RELIZORB at 120 mL/ hour with enteral pump (Condition 1)	Single RELiZORB at 400 mL/hour with enteral pump or syringe push (Condition 2)
Alfamino® Junior†	11	255	X	-	65:35	-	68	47
Boost® Kid Essentials 1.0	9	240	-	-	-	-	48	NR
Boost® Kid Essentials 1.5	18	360	-	-	-	-	52	24
Boost® Kid Essentials 1.5 with Fiber	18	360	-	X	-	-	64	47
Compleat® Pediatric Standard 1.0	11	250	-	Х	20:80	-	66	44
Compleat® Pediatric Standard 1.4	16	350	-	X	20:80	-	36	32
EleCare® Junior†	12.3	254	Х	-	-	-	47	48
Impact® Peptide 1.5	15.9	375	Х	-	50:50	1.23	82	73
Kate Farms® Peptide 1.0	13	325	Х	X	45:65	-	74	68
Kate Farms® Peptide 1.5	25	500	Х	X	-	-	90	66
Kate Farms® Standard 1.0	12	325	-	X	33:67	-	52	41
Kate Farms® Standard 1.4	19	455	-	X	40:60	-	84	67
Kate Farms® Pediatric Peptide 1.0	11	250	Х	Х	-	-	>90	>90
Kate Farms® Pediatric Peptide 1.5	17	375	X	X	40:60	-	62	53
Kate Farms® Pediatric Standard 1.2	12	300	-	X	40:60	-	44	40
Neocate® Junior†	12.5	250	X	-	35:65	-	43	46
Neocate® Splash	12.1	237	X	-	-	-	NR	46
Novasource® Renal	24	475	-	-	-	-	38	26
Nutren® 1.5	15	375	-	-	20:80	-	65	50
Nutren® 2.0	23	500	-	-	50:50	-	78	42
Osmolite® 1.0 Cal	8.2	250	-	-	-	-	60	52
Osmolite® 1.2 Cal	9.3	285	-	-	-	-	60	NR
Osmolite® 1.5 Cal	11.6	355	-	-	-	-	51	NR
PediaSure® 1.0	9	240	-	-	-	-	56	NR
PediaSure® 1.5	16	350	-	-	-	0.03	57	45
PediaSure® Peptide 1.0	9.6	237	Х	-	-	-	56	55
PediaSure® Peptide 1.5	14.4	356	X	-	-	-	72	59



Enteral tube feed formulas evaluated with RELiZORB								
	Per serving						Fat Hydrolysis (%)*	
Formula Name							Continuous	Bolus**
	Fat (g)	Calories (kcal)	Contains pre- hydrolyzed protein	Contains Insoluble Fiber	MCT:LCT ratio	Omega-3 DHA & EPA (g)	Single and Tandem RELiZORB at 120 mL/ hour with enteral pump (Condition 1)	Single RELIZORB at 400 mL/hour with enteral pump or syringe push (Condition 2)
PediaSure® Grow & Gain	9	240	-	-	-	-	78	72
PediaSure® Grow & Gain with Fiber	9	240	-	X	-	-	74	65
PediaSure* Grow & Gain Therapeutic Nutrition Shake	9	240	-	-	-	-	76	68
PediaSure* Grow & Gain Therapeutic Nutrition Shake with Fiber	9	240	-	X	-	-	86	69
Peptamen*	10	250	X	-	70:30	-	68	72
Peptamen AF*	13.5	300	X	-	50:50	0.60	63	59
Peptamen® 1.5	14	375	X	-	70:30	-	74	68
Peptamen Junior®	9.5	250	X	-	60:40	-	63	54
Peptamen Junior® 1.5	17	375	X	-	60:40	0.15	75	48
Peptamen Junior® with Fiber	9.5	250	Х	Х	60:40	-	59	57
Pivot® 1.5 Cal	12	355	Х	-	-	0.90	50	NR
TwoCal® HN⁵	21.5	475	-	-	-	-	36	20
Vital* 1.0	9	237	Х	-	-	-	68	55
Vital* AF 1.2 Cal	12.8	284	Х	-	-	0.90	61	57
Vital® 1.5 Cal	13.5	355	Х	-	-	-	87	55

 $^{^{*}}$ Fat hydrolysis (%) is estimated based on label claim fat content.

The following formulas have been evaluated for use with RELiZORB and are shown to be incompatible: Liquid Hope, Nourish, Real Food Blends, Promote with Fiber, Compleat Pediatric, Compleat Organics, Compleat Standard 1.4, Kate Farms Pediatric Blended Meals, Pediasure 1.5 with Fiber, Nutren Jr. with Fiber, Isosource 1.5, Replete with Fiber.

NOTE: Formula manufacturers may change the composition of their formulas, which may affect the operation of RELiZORB. Please refer to formula product websites for recent product descriptions, ingredients, and nutritional information.

NOTE: Please consult with your physician regarding acceptable enteral nutrition formulas for use with children.



For other enteral formula and enteral feeding supply compatibility questions, please contact RELiZORB Support Services at 1-844-632-9271.

^{**}Representative hydrolysis for the following use conditions: Enteral pump for 500 mL at 400 mL/hr, Syringe push bolus of 250 mL with delivery of -7 mL per min. †Powdered formulas were tested at 30 kcal/oz.

 $^{{}^{\}rm s}{\sf Fat}$ hydrolysis rates are similar over the shelf life of RELiZORB.

NR-Not recommended



Enteral Feeding Supplies

RELIZORB is intended to connect to ENFit® feeding supplies including tubing, extension sets, and enteral syringes.

 When using RELiZORB, all connections should be kept clean and dry before connecting supplies for feeding to prevent connections from overtightening or becoming stuck together.

RELIZORB is for use with enteral feeding only; do not connect to intravenous or other medical tubing. Medications should not be administered through RELIZORB. **Please see Instructions for Use at www.relizorb.com**

Enteral Pumps

 RELIZORB must be used with enteral tube feeding pumps that have low flow/no flow alarms.
 RELIZORB has been tested and is compatible with the following pumps*:

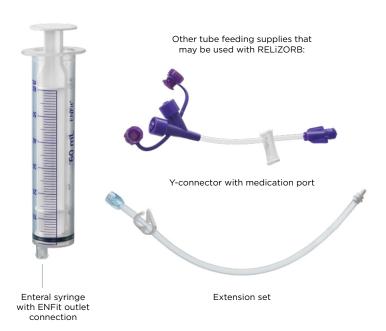
Pump Name	Pump Manufacturer			
EnteraLite® Infinity®	Moog			
Kangaroo™ Joey	CardinalHealth			
Kangaroo™ ePump	CardinalHealth			
Kangaroo OMNI™ Pump	CardinalHealth			

^{*}Pumps tested with pump manufacturer specific enteral feeding pump sets.



Enteral Supplies

 RELIZORB must be used with syringes that have ENFit outlet connections.





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