

<p align="center"><u>Competency for administering naso-gastric tube feed at home.</u></p>	<p align="center"><u>Explained/observed</u></p>	<p align="center"><u>Practised</u></p>	<p align="center"><u>Competent</u></p>
<p><u>Area of concern: Parent to understand reason for NG feeding and be able to administer feed safely in accordance with guidelines.</u> Provide parent/ carer with the leaflet: ‘Nasogastric (NG) Tubes for Neonates leaflet’</p> <p>The Naso-gastric tube must be checked prior to EVERY feed OR giving medicines.</p> <ol style="list-style-type: none"> 1. Ensure pH strips, syringes and feed are prepared and ready for use and that baby is in a comfortable position. 2. Wash hands before checking tube position. 3. Check the tube position: <ul style="list-style-type: none"> • Is it fixed at the recorded length? • Is the tube and tape secure? • Is the tube kinked at the back of the mouth? 4. Attach a 2.5 or 5ml syringe to the end of the NG tube and draw back up to 1ml of fluid. If you cannot withdraw any milk/fluid try: <ul style="list-style-type: none"> • Turning baby side to side, sit up and down. • Offer a small suck feed, wait 5 minutes, then try again. Contact the Outreach Team if you are still unable to withdraw milk. 5. Once fluid obtained, place a few drops onto the pH strip ensuring all squares are covered. 			



<p>6. Match the colour change on the pH strip to the chart on the box to identify pH level.</p> <p>7. A pH of 5 or below indicates the NG tube is in the correct position and you may commence the feed. (If pH is above 5 DO NOT FEED – see flow diagram and contact Outreach Team)</p> <p>8. Attach a 20ml syringe to the NG tube with the plunger already removed.</p> <p>9. Pour the measured amount of milk into the syringe and elevate, allowing the milk to flow by gravity. Continue until all the feed has gone.</p> <p>10. The milk may flow easily, or it may need a gentle push with the plunger to get it going. (If the NG tube appears blocked and the milk will not go down, DO NOT apply too much pressure. Disconnect the feed, try aspirating with a 5ml Syringe or offer a suck feed and begin the procedure again)</p> <p>11. If vomiting/colour change/coughing are observed during a feed <u>STOP FEED</u></p> <ul style="list-style-type: none"> • Kink the NG tube to stop the flow of feed. • Discard feed into a bottle • Reassess the baby • Recheck the NG tube position • If unsure about continuing feed contact Neonatal Outreach. <p>12. Once feed is finished replace cap securely and clear away equipment.</p> <p>13. Discuss storage and cleaning of equipment</p>			
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