

# NG Tube Feeding



HOMeward  
BOUND

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## Lesson 1

# Understanding Your Child's Feeding Tube

### Goals for this lesson

#### *In the classroom, you will:*

- learn why your child needs a feeding tube
- read the glossary in this booklet
- state and show how to keep your child safe during tube feedings
- learn when to call the doctor.

#### *At your child's bedside, you will:*

- show or describe how to keep your child safe during tube feedings
  - raise your child's head
  - use a new bag each day
  - follow milk and formula storage guidelines
- describe signs and symptoms of when to call the doctor.

### Why does my child need a nasogastric tube (NG tube)?

If your child is having trouble swallowing food or liquid safely, a feeding tube may be needed. A nasogastric (NG) tube, is a small tube inserted through the nose, down the back of the throat, and through the esophagus into the stomach. ('Nasogastric' means "from the nose to the stomach.")

The NG tube is used to put liquid food or medicine straight into your child's stomach. It may be used if your child cannot take enough food or liquid by mouth for good growth.

Liquid food given through the tube is digested the same as if it were taken by mouth. You will be taught how to use, care for, and clean your child's feeding tube.

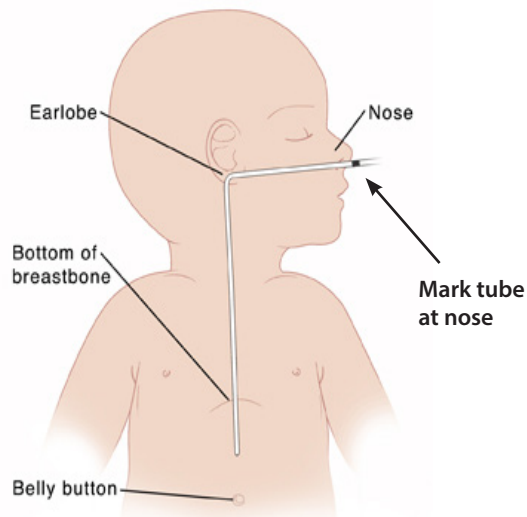
### How to keep your child safe

- When giving an NG feeding your child's head should be raised at least 30 degrees. You may hold your child during the feeding or you can feed while he or she is sitting up in a high chair.
- When using a pump for feeding, you need to use a new feeding bag each day. It is a good idea to write the date on the bag each day to help you remember to change it.
- **If your child is younger than 1 year of age, practice safe sleep by placing your baby on his or her back to sleep, unless your child's doctor recommends a different sleep position because of medical reasons.**
- Milk storage guidelines:
  - Fresh breast milk and ready-to-feed formula, that has not been mixed with any supplements, can be kept in the refrigerator for 48 hours.
  - Breast milk and formula that has been mixed with supplements can be stored in the refrigerator for 24 hours.
  - Breast milk can be frozen and kept in your refrigerator's freezer for 3 months or in a deep freezer for 6 months.
  - At room temperature, breast milk and formula are good for only 4 hours.
  - Unopened cans of formula should be stored at room temperature, in an area that will not get too hot or too cold.

## When to call

Call your child's doctor or nurse if:

- your child's stomach contents have blood or look green, black, or brown like coffee grounds
- your child's stomach begins to bulge outward and is hard when you touch it
- your child throws up more than usual
- feedings are no longer flowing easily into your child's stomach.



*Measure the length of tubing from your child's nose to halfway between the bottom of the breast bone and the belly button. Put a mark on the tube at your child's nose.*

## Lesson 2

### Placing the NG Tube

#### Goals for this lesson

*In the classroom, you will explain and show how to:*

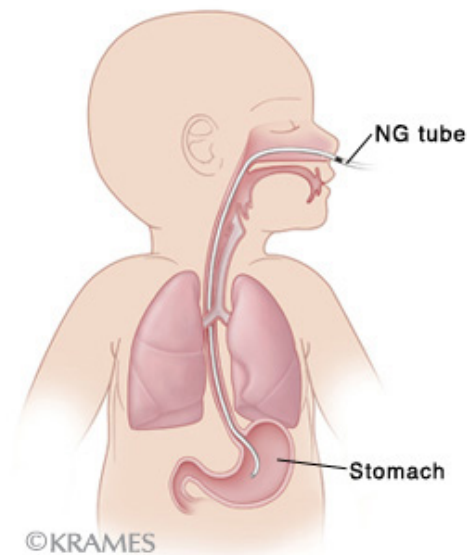
- explain the steps to get ready for a feeding
- insert and check NG tube placement.

*At your child's bedside, you will:*

- insert the NG tube and check placement of the tube.

#### Gather your supplies

- NG tubing
- scissors
- permanent marker
- water-based lubricant
- medical tape or transparent dressing
- 10 ml syringe
- bulb suction.



## Mark the length of the NG tube

1. Wash your hands with soap and warm water for at least 20 seconds. Rinse with clear water and dry on a clean towel.
2. Cut pieces of medical tape to have ready.
3. If your NG tube has a wire in it, remove the wire and throw it away before measuring. This wire should not be used to insert the tube in your child's nose.
4. Measure how much tubing you will need by holding the NG-tubing starting at the nose, extending the tubing to the earlobe, then extending the tubing from the earlobe to halfway between the bottom of the breast bone and the belly button.
5. Put a mark on the tube with permanent marker at your child's nose.

## Insert the NG tube

1. Put some lubricant on the tip of the tube at the end without the mark, so it can pass through the nostril easily.
2. Push the tube gently toward the back of the throat and then push it down until you reach the mark on the tube. Your child may gag as you push in the tubing. Have your baby suck on a pacifier to help with gagging. If your child is older and can follow instructions, encourage him or her to try to swallow to help the tube go down.
3. Tape the tube to your child's cheek.

## Check the position of the tube

Check the position of the tube to be sure the tube reached the stomach and is not in the lungs. Do this by placing a syringe, with no needle on it, onto the end of the NG tube, then pull back the plunger.

- ✓ If white milky-looking fluid comes into the tubing, the tube is in the stomach. You may start the feeding.
- ✗ If there is no milky fluid in the tubing, check the position of the tube at your child's nose. Make sure the mark you made on the tube is at your child's nose. Then, push 3 to 5 ml of air into the tube and pull back on the plunger again.
  - ✓ If white milky-looking fluid comes into the tubing, the tube is in the stomach. You may start the feeding.
  - ✓ If the milky white fluid still does not come into the tube, and the tube is positioned correctly at the nose, start your child's feeding at a slower rate than usual and watch for signs that he or she is choking, not breathing well, or having stomach pain.

If you see no signs of problems with breathing or stomach pain, increase the feeding rate to the normal flow.

**If your child shows any signs of choking, breathing problems, or stomach pain when you start the feeding, stop the feeding right away, take the tube out, and replace the tube.**

If you replace the tube and the problem happens again when you start the feeding, contact your child's doctor.





## Feeding by gravity

1. Wash your hands.
2. Check to be sure NG tube is in the correct position by following the steps in “Check the position of the tube” (see page 3).
3. Push the milky fluid back into the tube.
4. Prepare the correct amount of formula in a clean container.
5. Remove the plunger from the 30 or 60 ml syringe that you will use for feeding.
6. Push the end of the syringe into the NG tube.
7. Pour the formula into the syringe until it is half full. As the level of the formula reaches the bottom of the syringe, add more formula until you have completed the feeding. Let the formula flow in slowly over 10 to 15 minutes.
8. You may want to give your baby a pacifier during feedings to teach your baby that the sucking action is associated with feeling full.
9. When feeding is finished you will flush the tube by putting 3 to 5 ml of water into the tube.
10. Bend the feeding tube into a V shape and remove the syringe.
11. Burp your child.

## Feeding with a pump

1. Prepare the formula as directed and pour it into the feeding bag.
2. Hang the bag on the pole and put the tubing into the feeding pump.
3. Prime the tubing with formula.
4. Check to be sure NG tube is in the correct position by following the steps in “Check the position of the tube” (see page 3).
5. Insert the end of the feeding tube into the end of the NG tube.
6. Check the settings on the feeding pump then start the feeding.
7. When the feeding is finished, bend the NG tube into a V shape and remove the feeding tube.
8. With a small syringe, flush the NG tube with 3 to 5 ml of water, then plug the end of the NG tube.



*Gravity feeding through an NG tube.*

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