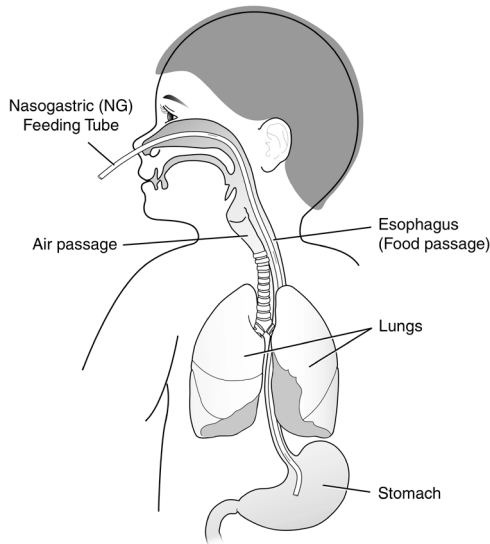


**Nasogastric Feeding Tubes at Home**

**What is a nasogastric feeding tube?**

A nasogastric feeding tube is a thin, flexible, soft tube that is passed through your child’s nose (nostril), down the back of the throat (esophagus), and into the stomach. A nasogastric feeding tube is sometimes called an NG.



**Why does my child need a nasogastric feeding tube?**

A feeding tube is used to give fluids, food, or medicine when a child cannot take them by mouth. Reasons a child may need a nasogastric tube include:

- Problems with sucking, chewing, or swallowing.
- Unable to get enough nutrition with a normal diet.

**Why is it important to keep the tube secured?**

The tube needs to be kept secure to ensure the tube stays in the stomach. It is unsafe if the tube moves out of the stomach. The tube can be secured by a transparent dressing or a nasal bridle. The nasal bridle will reduce the chances of the tube coming out. Nasal bridles can remain in place for up to 30 days.



**How do I know the tube is in the stomach?**

An x-ray will be taken when the tube is placed, and the feeding tube will have a number marking where it exits the nose. This number should not move. Check the number every time you use the tube. If the number moves, do not use the tube and call your provider.

**Your Child’s Feeding Tube & Plan**

Size of feeding tube: \_\_\_\_\_

Measurement at nose (cm): \_\_\_\_\_

Securement Method:

- Transparent dressing
- Nasal bridle, bridle size \_\_\_\_\_

Date tube placed: \_\_\_\_\_

Date tube due to be changed: \_\_\_\_\_

What to feed: \_\_\_\_\_

Amount to feed: \_\_\_\_\_

Method: \_\_\_\_\_ Bolus \_\_\_\_\_ Continuous

How often to feed: \_\_\_\_\_

Schedule: \_\_\_\_\_

If using pump, rate of feeding: \_\_\_\_\_

Flush the feeding tube at the end of each feeding with \_\_\_\_\_ ml of water.

Other instructions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**How do I give a bolus feeding by gravity?**

- Wash hands with soap and water.
- Check tube to make sure number marking has not moved.
- Prepare feeding in syringe or bag and prime tubing. Prepare flush.
- Connect feeding bag/syringe to feeding tube.
- Deliver feeding with child in upright position with syringe or bag above child's head.
- When feeding is complete, disconnect bag/syringe from feeding tube.
- Flush feeding tube with \_\_\_\_\_ mL of water.
- Clamp feeding tube.

**How do I care for the supplies?**

Wash supplies with soap and warm water. Rinse well with water and let dry.

**What can I do while my child is being fed?**

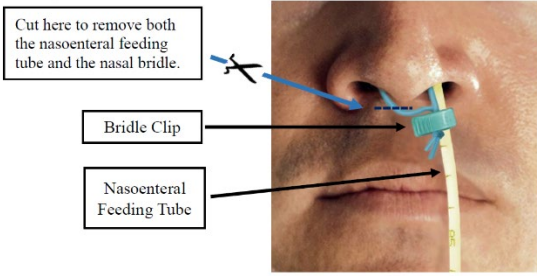
Feeding time is a special time for babies. Babies enjoy being held closely, cuddled, rocked, or talked to during tube feedings just as if they were being fed by mouth. Hold your baby and offer a pacifier during feeding to practice sucking and swallowing.

Toddlers will need to stay in one place, so playing a game or doing a quiet activity may help. Older children can sit at the table with the family and receive a tube feeding while the family eats a meal.

**When should I call my child's doctor?**

- Your child has trouble breathing
- Your child turns blue
- You see blood around the tube, in your child's stool, or in stomach contents
- Your child coughs, chokes, or vomits while feeding
- Your child has a bloated or rigid belly (belly feels hard when it is gently pressed)
- Your child is in pain during feeding
- Your child has diarrhea or constipation
- Your child has a fever of 100.4° F or higher

## Problem Solving

Problem	What to do
Clogged Feeding Tube	<ul style="list-style-type: none"> <li>• Flush tube with warm water</li> <li>• Do not use carbonated drinks, juice or heavy pressure</li> <li>• If unable to unclog tube, call provider</li> </ul>
Cracked tube	<ul style="list-style-type: none"> <li>• Call provider</li> </ul>
Tube not at right number marking or tube comes out	<ul style="list-style-type: none"> <li>• Call provider</li> <li>• If tube is partially out, remove tube</li> <li>• To remove bridle:               <ul style="list-style-type: none"> <li>○ Cut only <b>one</b> strand of the bridle loop.</li> <li>○ Gently pull both the bridle and nasal tube out of the nose.</li> </ul> </li> </ul> <div style="text-align: center;">  <p style="font-size: small; text-align: center;">From <a href="http://www.antiinovation.com/bridle.html">www.antiinovation.com/bridle.html</a>. (Used with permission)</p> </div>
Vomiting (throwing up)	<ul style="list-style-type: none"> <li>• Slow feeding rate or stop feeding for a while</li> <li>• Start feeding again when child feels better</li> <li>• Call provider if vomiting continues</li> </ul>
Skin inside and around nose is red	<ul style="list-style-type: none"> <li>• Keep area clean</li> <li>• Inspect the skin around the nostril close to the tube and bridle and look for any signs pressure, irritation, and/or breakdown.</li> <li>• Apply small amount of ointment (i.e. Aquaphor) with a cotton tip applicator two times per day</li> <li>• Gently remove any build up from tube or nose with cotton tip applicator and water</li> </ul>
Nasal stuffiness	<ul style="list-style-type: none"> <li>• Use saline nasal spray. One spray in each nostril up to three times per day.</li> </ul>

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 11/2019 University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#7223.