

Managing your nasogastric feeding tube



This leaflet provides you and your family/carers with the information you will need to support you at home with a nasogastric (NG) feeding tube.

The leaflet aims to answer some of the commonly asked questions regarding managing your NG tube at home. All training will be provided before you go home and reasons for the NG tube fully discussed. Your doctor and dietitian will have discussed how long you may need the tube and a review plan agreed.

What happens when I go home?

You, a carer or a member of your family will be shown how to look after and use the NG tube. You will be encouraged to stay in hospital until you or your family feel confident to manage the NG tube and feed pump.

Training will include:

- how to set up the feed using the feed pump
- how to check that the tube is correctly positioned in your stomach
- how to flush the tube
- how to safely secure the tube
- what to do if your tube falls out or becomes blocked.

Mouth care

It is important that you take care of your mouth whilst you are unable to eat and drink normally, as plaque and bacteria can still build up. Clean your mouth and tongue at least twice a day. Also check your nose for redness or sores.

What equipment will I be given on discharge?

You will usually be sent home with a 14 day supply of feed, giving sets and syringes. You will also be given a pump and table-top pump-stand. The dietitian will have discussed registering you with the home delivery service who will then deliver further supplies of your feed and giving sets directly to your home. You may ask the dietitian to arrange a nurse to come to your home to demonstrate again how to use the feeding pump, if required.

Ancillaries	Provided (tick box as appropriate)
Replacement device for securing the NG tube to your face	
14 days' supply of purple 60ml syringes	
14 days' supply tube feed	
14 days' supply giving-sets	
A feeding pump and table-top pump-stand (brought to the ward by the dietitian).	
1 tub of pH indicator strips (CE marked/ accredited for use with gastric aspirate).	

Equipment after discharge

Further equipment such as the syringes and nasal securement will need to be ordered through the district nursing team. The district nurses will be informed of your discharge from hospital.

When do I check the tube position?

- At least once a day during continuous feed.
- Before EVERY administration of feed or bolus.
- Before EVERY administration of water or medications.
- After episodes of coughing, retching or vomiting.
- If the length of the tube has changed.
- If you experience any discomfort or reflux of feed into your throat.

How do I check the tube position?

1. Wash your hands.
2. Attach a 60 ml purple syringe to the NG tube.
3. Pull back on the plunger of the syringe to draw back a little fluid (aspirate) from your stomach (only a drip is needed for testing).
4. Test this fluid on the pH strips, ensuring all squares are covered.
5. Allow between 10 – 60 seconds for the coloured squares on the strip to change colour.
6. Compare this with the colour chart on the packet for the closest match.
7. If the reading is pH 5.5 or less then the tube is likely to be in the stomach and is safe to use.

What if I am unable to obtain fluid?

If you are unable to obtain fluid (aspirate), try the following:

- Check the tube length markers to see if it has moved since it was first inserted.
- Turn onto your left side, if this is possible.
- Inject 10-20mls of air down the tube.
- If you are able to drink, have some fluid, wait half an hour and try to aspirate again.
- If you are still unable to obtain fluid contact the nurse or dietitian for advice. However, a plan should be discussed with you before you are discharged home.

It is NEVER a good idea to skip this test because you 'feel' it must be in the right place.

What are the risks of NG tube and feeding?

Aspiration/ heartburn/ reflux

Whether feeding through a pump or bolus feeding you should be as upright as possible during feeding and for up to an hour after. This will help to reduce feelings of reflux and heartburn. If feeding at night you will need to be propped up, for example with 2 pillows at an angle. Lying flat during tube feeding may allow feed to 'reflux' back up and could risk aspiration of tube feed.

NG tube falling out

The NG tube can fall out or become misplaced or go into your lungs. You will be shown how to prevent this happening and taught how to check that the tube is still in your stomach each time before using the tube. You will have been given advice on who to contact if the tube falls out. See below 'Arranging a replacement or if you are unable to unblock the tube'.

Blocked nasogastric tube

You can help to prevent your tube from blocking by flushing with water before and after putting feed or medications down the tube. Aim to flush the tube at least every 4 hours when not in use, although there is no need to wake at night to do this. Ensure medications are suitable for putting via the NG tube as these are a common cause of a blocked NG tube.

How do I unblock the NG tube?

Follow this step by step guide:

8. Check that the tube is not visibly kinked or clamped.
9. Connect a 60ml purple syringe to the tube with warm water and massage the NG tube, using a push-pause technique to try to flush the water in (this should have been explained).
10. Try using a weak solution of bicarbonate of soda. Put half a teaspoon of the powder into 1 cup of warm water. You will only need to use a very little of the solution, but this is just to achieve the correct strength. Bicarbonate of soda is available at most supermarkets and commonly found in the baking section. It can take some time for a blockage to clear. If you are able to get a little of the bicarbonate into the tube, then it may take half an hour or so to dissolve the blockage.
11. Never attempt to unblock the tube with sharp instruments or wires. Never use additional tools to exert excessive force.
12. In some cases the community nurses or specialist nurses may be able to help. A plan of action will be discussed with you prior to discharge and you will be provided with contact details for a specialist nurse, dietitian and/ or doctor.

Only attend ED in an emergency, for example, if you experience breathlessness and/or become unwell whilst a feed is running.

Arranging a replacement or if you are unable to unblock the tube

If you are unable to use the tube because it has blocked or fallen out, call the nurse specialist or the dietitian so they can arrange for you to attend the hospital for a replacement. If this happens overnight, call early the next morning.

If you are unable to use the tube over the weekend and you are nil-by-mouth (NBM) or are having essential medication down your NG tube, contact your GP emergency services. The GP services may be able to provide support regarding additional fluids and an alternative route for the medications until the tube can be replaced on the Monday. If the GP is unable to find a solution, then you may have to come to the Emergency department – however it is recommended you avoid doing so overnight and wait until morning.

Contact us

If you have any concerns regarding your NG tube weekdays 9 – 5 please call the specialist nurses or dietitians on the numbers below.

For problems with the feeding pump or deliveries call the home delivery company 24 hour service 7 days a week on:

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Your specialist nurses are:

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Your dietitians are:

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Personal care plan

Patient name			
Affix label			
NHS number			
NG date inserted Fr size NEX pH or X-ray confirmation			
Discharging ward		Consultant	Dietitian
Nutrition nurse			
Method of insertion	Yes		No
Radiologically			
Naso-endoscope guided			
Bed side placement			
Any contraindications			
Nasal securement device insitu	Yes		No
Follow up arrangements or planned OP appointment:			
Date for Consultant/ Dietitian review:			
(This should be arranged before discharge)			
Discharged to HEF dietitian	Yes/ No		
Patient/ carer/ family training	Yes	No	NA
pH checking explained			
Blockage			
Falls out			
Pump training			
Spare NG provided if needed to attend hospital for replacement			

Contact telephone numbers

Nutrition nurses: 01872 252409

Specialist nurses:
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Dietitians:
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Consultant:

If you would like this leaflet in large print, braille, audio version or in another language, please contact the General Office on 01872 252690

