

Nasogastric tube feeding care guidance

Created in 1998.07 Revised in 2021.12 English version in 2021.12

I. Before Feeding

- 1. Make sure the graduation is which is near to the nose of the NG tube and the tape Pasted firmly, make the patient to sit up or raise the bed head up 45 angles, if it can't raise, make the patient on right side.
- 2. Aspirating the gastric contents with the NG gavage syringe for watch for absorption situation, if more than 60c.c.,return all the aspirated gastric juice or milk and immediately stop the feeding. After one hour, if it less than 60c.c.can do the feeding.
- 3. Afer check absorption situation, should flush the NG tube with the 30-50c.c. water before feeding to avoid congested the NG tube. The temperature of the food is mainly not hot, about 37.8~40.5℃.
- 4. Immediately hold on the feeding, can't return and notify the nursing staff if it smells or the coffee, dark green and black fluid is aspirated.

II. During feeding

- 1. When feeding, fold the nasogastric tube with one hand before opening the lid of the nasogastric tube to prevent air from entering the stomach.
- 2. If liquids too thick, could be diluted with water, but the inflow of food should not be too fast. The feeding time should be at least 15-20 minutes to avoid vomiting or stomach upset.
- 3. The height of the device when feeding should be30-45 cm above the nose, using the principle of gravity to make the food flow slowly.
- 4. When the food can't flow in naturally, or the patient has abdominal distension, vomiting, coughing and other related abnormal conditions, the feeding should be stopped immediately and the nursing staff should be notified to deal with it.

III. After Feeding:

- 1. Flush the NG tube with the 30~50c.c. water to avoid clogged the NG tubes or food corruption.
- 2. Before clamp the tube, kinking NG tube to prevent air entry or food out.
- 3. Keep tilting the patient by 45 angles for half to one hour, DO NOT turn over the patient or sputum to avoid vomiting.

IV. Other considerations:

- 1. Remember change tape of NG every day, but DO NOT fixed on the same part of nose, use the Y-shaped breathable tape is attached to the nose for protect the skin.
- 2. At least once a day, use the NG gavage syringe push water to flush the NG tube, make the NG tube residue could be effectively moved and emptied to reduce the obstruction of NG tube.

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- 3. Change the new NG tube should be performed by professional. After change, the patient could easy to cough due to irritation, but he/she will stop later, if the patient still coughing, the nursing staff should be notified.
- 4. The NG should avoid oppression twisting or being pulled out during feeding.
- 5. Pay attention to oral cavities hygiene, do the mouth care every morning and evening or in needed.
- 6. If the patient needs sputum should before half or one hour of feeding to avoid irritation and vomiting.
- 7. If vomiting occurs before, during, and after feeding, should be turned the patient's head sideways and the NG tube should be opened for drainage to avoid patient aspiration pneumonia.
- 8. If the patient still should use the NG tube after discharge, the patient can receive home health care in needed and followed up regularly in the outpatient department.

If you have any question or suggestion, please contact with us. We are happy to provide you services to you. Contact telephone number: MacKay Memorial Hospital: (02)25713760; Hsinchu MacKay Memorial Hospital: (03)5745098; Taitung MacKay Memorial Hospital: (089)310150 ext: 311. Time of consultant: 9:00 am~12:00 noon, 2:00 pm~5:00 pm Monday ~ Friday.

May God Bless You