

Going Home with a Nasogastric Feeding Tube

Disclaimer to staff: The distribution of this leaflet is only permitted by members of Aintree Dietetic Department.

Leaflet provided by:

Name _____

Grade/designation _____

Disclaimer for patients: If you have been provided with this leaflet by someone other than a Dietitian, please contact the dietetic department on 0151 529 3473

General information

A nasogastric tube is inserted into the nostril, with the tip lying in the stomach for feeding.

Initial Care

- A dressing may be applied after tube placement to keep the tube in position on the side of your face. Alternatively, a bridle may be clipped onto the tube to keep it in place.
- Make a note of the tube exit point by using the centimetre marking on the tube. This can then be used as a visual guide to ensure the tube is in place.

Your centimetre marker is _____ cm at _____

- If you have any pain, speak to the nurse or a doctor on the ward
- Keep the tube clean with warm water and very gentle wiping with cloth or gauze. Make sure the tube is dry afterwards.

Daily Care

- Hygiene is important – wash your hands before handling the tube or administering feed or flushes.
- It is important to check that your tube is in the correct position before you start feeding each day, or if you suspect it has become dislodged, e.g. after a violent coughing fit or vomiting.
- It is important to flush the tube with water regularly to prevent it from becoming blocked (refer to separate information leaflet 'Going Home with a Feeding Tube - Information about Flushes').

Checking the pH

Be aware that if you are on anti-acid or reflux medications, this could affect the pH of the aspirate

1. Take the cap off your feeding tube
2. Attach a 60ml enteral syringe to the end of the tube
3. Pull back the plunger until a small amount of fluid (0.5-1ml) appears in the syringe

4. Detach the syringe from the tube
5. Squirt a few drops of the fluid in the syringe onto a pH strip. If the pH reading is 5.5 or below it is safe to start feeding.

If it is above 5.5 re-check in 1 hour. If the pH remains above 5.5 after an hour, **do not start feeding** and contact your Dietitian.

If no fluid appears in the syringe, lie on your left side and try again. You may need to syringe a small amount (10-20ml) of air into the tube to displace any feed remaining in the end of the tube. If fluid still does not appear contact your Dietitian.

If the tube becomes dislodged do not use the tube. You should contact:

Further information

If you have any problems you can contact:

Abbott Hospital2Home Helpline

0800 018 3799

Or

Nutricia Homeward Advice Line

0800 0933 672

Endoscopy Nurse Specialists

0151 529 0383

Monday – Friday 9am – 5pm

Aintree Hospital Dietitians

0151 529 3473

Monday – Friday 8am – 4pm

Out of hours and at weekends contact the ward you were discharged from
Ward Telephone Number:

Community Dietitian:

You can also get further information from:

www.aboutmyhealth.org

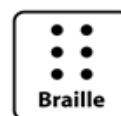
– for support and information from charities you can trust.

www.bapen.org.uk

– British Association for Parental and Enteral Nutrition (BAPEN)

www.pinnt.com

- Patients on Intravenous and Nasogastric Nutrition Therapy (PINNT)



If you require a special edition of this leaflet

This leaflet is available in large print, Braille, on audio tape or disk and in other languages on request. Please contact:

Tel No: 0151 529 2906

Email: interpretationandtranslation@liverpoolft.nhs.uk