FACTSHEET

This fact sheet is for education purposes only. Please consult with your doctor or other health professionals to make sure this information is right for your child. If you would like to provide feedback on this fact sheet, please visit: www.schn.health.nsw.gov.au/parents-and-carers/fact-sheets/feedback-form.

Tube feeding: Caring for your child's Nasogastric tube

A nasogastric (NG) tube is a special tube that carries formula, fluid and medicine directly to the stomach via the nose. For some children it is used to give all their nutrition and hydration needs and for other children it is used in combination with normal eating.

Your child's NG tube requires daily care. Daily maintenance will ensure it works, lasts and does not need unnecessary replacement.

Checking the NG tube position

Before putting any formula, water or medication down the NG tube, you should check to ensure the tip of the tube is actually in the stomach.

This is done by removing some gastric fluid from the tube with a syringe and testing it for acidity (indicated by a colour change) using litmus paper/ pH indicator.

Obtaining a sample of gastric fluid may take several attempts and repositioning your child may help. Your health professional will teach you how to do this.

You should not use the NG tube, if you are unsure of or unable to confirm its position in your child. If you have any doubts contact your health professional immediately for advice.

Flushing the tube

Regular flushing of your child's tube will help prevent the NG tube from becoming blocked. Your health professional will teach you on how to do this.

At a minimum you should flush the NG tube after every feed and after giving medication, using 5-20mL of water depending on your child's age or as recommended by your health professional. If feeding and medications are less frequent the tube should be flushed every 4 hours.

To flush the NG tube:

- 1. Place the tip of a syringe, without the plunger, into the feeding port.
- 2. Pour the recommended amount of warm water into the syringe to flush the tube.

The water can run through the tube with gravity or you can add the syringe plunger and assist with a gentle, slow, push.

If your child is feeding via a pump regular flushing should still occur. The pump will need to be place 'on hold' and the NG tube disconnected to flush.

Managing and preventing a blocked NG tube

If your child's NG tube does becomes blocked:

- 1. Check that the NG tube is not kinked or bent.
- 2. Use a 30mL syringe or smaller.
- 3. Fill the syringe with warm water and flush into the NG tube using reasonable pressure. If you meet resistance try a gentle push pull action on the syringe for several minutes to see if you can move the blockage.
- 4. If this doesn't work, contact your health professional or local hospital for advice.







It is important to prevent the NG tube from becoming blocked. Regular flushing will help prevent this.

To further reduce the risk of the NG tube becoming blocked:

- Follow instructions on the volume and timing of water flushes.
- Request medications in liquid form and check with your Pharmacist as to whether your child's medications are safe to go down the NG tube.
- Do not give medications mixed together with formula unless advised to do so by your health professional.

What to do if your child's NG tube comes out?

- Your health professional should have instructed you on what to do if your child's NG tube comes out.
- Only attempt to reinsert the NG tube if you have been trained by a health professional to do so safely. This is because there is a risk the tube may be placed into your child's lung, instead of the stomach.
- If you have not been trained, contact your health professional for advice about replacement.
- If you are unable to contact your health professional then present to your nearest emergency department for assistance. If you have spare equipment, please take it with you.

Skin care

Good care of your child's skin will prevent it from becoming inflamed or irritated.

Simple steps you should follow:

- Keep the skin around the NG tube clean by using warm water and a wash cloth.
- Remove any crusts or secretions from around the nose.
- When changing tapes use adhesive remover if available to prevent damaging the skin.
- Make sure the skin is clean and dry before applying new tape.
- If you notice redness or irritation on one side of the face you may consider putting the NG tube in the other nostril.

How often does your child's NG tube need changing?

Ask your health professional about how often your child's tube may need to be replaced. Some NG tubes can stay

in for up to 3 months, others may require more frequent changing.

When should you ask for help?

You should contact your health professional if any of the following occur:

- There is redness and swelling around both nostrils.
- The tube is blocked and you can't unblock it.
- The tube falls out and you are unable to replace it.
- If the tube needs replacing.

Remember:

- Before putting any formula, water or medication down the NG tube, you should check to ensure the tip of the tube is in the stomach.
- It is important to flush the NG tube regularly, as recommended.
- Good skin care practices will prevent irritation to your child's skin.
- If the NG tube is dislodged or removed only attempt to reinsert it if you have been trained by a health professional to do so safely.