

NASOGASTRIC TUBE FEEDING

RYLE'S TUBE FEEDING

DEFINITION

Administration Of Feed Directly Into The Stomach Through A Tube Passed Into The Stomach Through The Nose (Nasogastric) Or Mouth (Orogastric)

PURPOSE

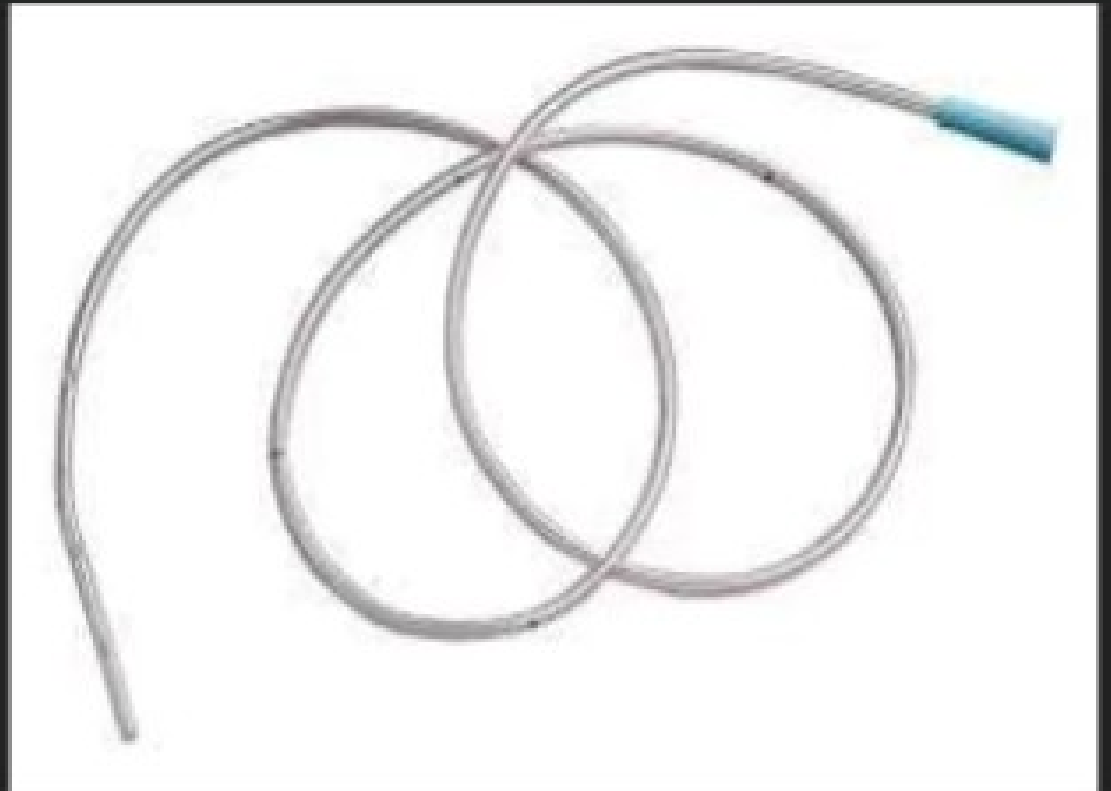
- To Provide Adequate Nourishment To Patient Who Cannot Feed Themselves.
- To Administer Medication
- To Provide Nourishment To Patients Who Cannot Be Fed Through Mouth. E.G. ; Surgery In Oral Cavity , Unconscious Or Comatose State

INDICATIONS

- Head And Neck Injury
- Coma
- Obstruction Of Oesophagus Or Oropharynx
- Severe Anorexia Nervosa
- Recurrent Episodes Of Aspiration
- Increased Metabolic Needs – Burns ,Cancer Etc.
- Poor Oral Intake

TYPES OF NASOGASTRIC TUBE

LEVINE'S TUBE



SALEM SUMP

Salem (Double Lumen) pump



- Most common nasogastric tube
- Used for irrigation of stomach and tube feedings
- Sizes 14-18 French
- 120 cm long
- If suction is needed, connect the larger bore to suction
- Blue vent is **always** open to air for continuous atmospheric irrigation
- Prevent reflux by having the blue vent port above patient's waist

ARTICLES

A Tray Containing ;

- Formula Feed
- Graduated Container
- Large Syringe(30 To 60 ML)
- Water In Container
- Stethoscope

GRADUATED CONTAINER



LARGE SYRINGE (60 ML)



PROCEDURE

NURSING ACTION

- Identify Patient And Explain Procedure To The Patient And That Feeding Will Take Around 10 – 20 Minutes To Complete, Also Explain That Patient Will Experience A Feeling Of Fullness After Feeding.
- Assess The Food Allergies, Time Of Last Feed , Bowel Sounds And Laboratory Values.

- Place Container With Feed In Warm Water.
- Assist Patient To Fowlers Position.
- Wash Hands
- Spread Towel And Mackintosh Over Patients Chest.
- Done Gloves Attach Syringe To Nasogastric Tube.

○ Aspirate Stomach Contents If There Is Doubts About Tube Placement And Obtain An Order For X-ray.

○ If Tube Placement Is Confirmed In Stomach , Pinch The Feeding Tube And Attach Barrel Of Feeding Syringe To Tube

- Fill Syringe Barrel With Water And Allow Fluid To Flow In Gravity , By Raising Barrel Above Level Of Patients Head.
- Pour Feed Into Syringe Barrel And Allow It To Flow By Gravity Keep On Pouring Feed / Formula To Barrel When It Is Three Quarters Empty, Pinch Tube Whenever Necessary To Stop When Pouring

- After Feeding Is Completed ,
Flush Tube With At Least 30 Cc Of
Plain Water.
- After Tube Is Cleared Close The
End Of Feeding Tube.
- Rinse Equipment's With Warm
Water And Dry.
- Keep Head Of Bed Elevated For
30-60 Mins After Feeding.

- Wash Hand
- Document Type And Amount Of Feeding Amount Of Feeding, Amount Of Water Given And Tolerance Of Feed.
- Monitor For Breath Sounds ,Bowel Sounds , Gastric Distension , Diarrhoea Constipation And Intake And Output.

○ Instruct Patient To Notify Nurse If He Experience Sensation Of Fullness , Nausea Or Vomiting.

SPECIAL CONSIDERATION

- Change The Nasogastric Tube According To Institution Policy.
- Change The Articles Every 24 Hours Or According To Institute Policy.