Nasogastric (NG) Tube Feeding Instructions

Bolus (Gravity) Feeding: Syringe

Supplies:
- Stethoscope
- Replicare
- Tegaderm
- 5 to 10 mL syringe
- 60 mL syringe
- Feeding (liquid food)
- Plain tap water for rinsing tube

- After every medicine and after each feeding, flush the tube with 5 to 10 mL of water. This can help keep tube from clogging.
- Wash both parts of syringe in warm soapy water, rinse and air dry after each use.

Step 1
Check NG tube placement.
- Listen for air going into stomach. Use a 5 to 10 mL syringe to push 2 to 5 mL air into tube and listen over stomach with stethoscope for "whoosh" or "gurgle" sound.
- You may also look for stomach contents. Attach empty syringe to tube. Pull back on plunger until you withdraw greenish, tan, or white liquid from the stomach.

Step 2
Make sure that the tube is clamped. Connect syringe to NG tube and fill with liquid food.

Step 3
Open clamp. Food will flow through syringe by gravity, usually over 10 to 20 minutes. Control the flow of feeding by the height of the syringe. The nurse will show you how.

Step 4
Close clamp. Detach tube from syringe. Flush tube with 5 to 10 mL water as instructed.

Step 5
Close feeding tube and secure tube to cheek.
Nasogastric (NG) Tube Feeding Instructions

Bolus (Gravity) Feeding: Bag

Supplies:
- Stethoscope
- Replicare
- Tegaderm
- 5 to 10 mL syringe
- Feeding bag
- Feeding (liquid food)
- Plain tap water for rinsing tube

- After every medicine and after each feeding, flush the tube with 5 to 10 mL of water. This can help keep tube from clogging.
- Wash both parts of syringe in warm soapy water, rinse and air dry after each use.

Step 1
Check NG tube placement.
- Listen for air going into stomach. Use a 5 to 10 mL syringe to push 2 to 5 mL air into tube and listen over stomach with stethoscope for “whoosh” or “gurgle” sound.
- You may also look for stomach contents. Attach empty syringe to tube. Pull back on plunger until you withdraw greenish, tan, or white liquid from the stomach.

Step 2
Make sure that the tube is clamped. Fill bag with liquid food and connect to NG tube.

Step 3
Open clamp. Food will flow through bag by gravity, usually over 10 to 20 minutes. Control the flow of feeding by the height of the bag. The nurse will show you how to do this.

Step 4
Close clamp. Detach tube from bag. Flush tube with 5 to 10 mL water as instructed.

Step 5
Close feeding tube and secure tube to cheek.
Nasogastric (NG) Tube Feeding Instructions

Continuous Feeding with Pump

**Supplies:**
- Stethoscope
- Replicare
- Tegaderm
- 5 to 10 mL syringe
- Feeding bag
- Feeding (liquid food)
- Plain tap water for rinsing tube

- After every medicine and after each feeding, flush the tube with 5 to 10 mL of water. This can help keep tube from clogging.
- Wash both parts of syringe in warm soapy water, rinse and air dry after each use.

**Step 1**
Check NG tube placement.
- Listen for air going into stomach. Use a 5 to 10 mL syringe to push 2 to 5 mL air into tube and listen over stomach with stethoscope for “whoosh” or “gurgle” sound.
- You may also look for stomach contents. Attach empty syringe to tube. Pull back on plunger until you withdraw greenish, tan, or white liquid from the stomach.

**Step 2**
Make sure that the tube is clamped. Fill bag with liquid food and connect to NG tube.

**Step 3**
Open clamp. Turn on pump. The feeding rate is regulated by the pump. The home care company providing supplies and the feeding pump will provide training materials for you. Your home pump may look very different than the picture on this page.

**Step 4**
Close clamp. Detach tube from bag. Flush tube with 5 to 10 mL water as instructed.

**Step 5**
Close feeding tube and secure tube to cheek.
Nasogastric (NG) Tube Feeding Instructions

Replacing a Nasogastric Tube

The manufacturer recommends replacing the tube every 30 days. Switch nostrils each time you replace the tube to prevent breakdown of your child’s skin.

Supplies:
- Stethoscope
- Replicare
- Tegaderm
- 5 to 10 mL syringe
- Permanent marker pen
- Lubricant

Step 1
Measure the tubing on the outside of your child’s body from tip of nose, to ear, to midway between the bottom of the sternum and the belly button. Then, mark the spot with a black marker.

Step 2
Put lubricant on unmarked end of tubing. Slide the lubricated end of tube into one nostril all the way to the black line you made on the tube.

Step 3
Secure tube to cheek using Replicare and Tegaderm. To avoid tube being pulled out, be sure tube is secure during the day when not being used for a feed.

Step 4
Check NG tube placement.
You want to hear air enter the stomach and/or see stomach contents enter the syringe to ensure tube is in the stomach.

Listening method: Listen for air going into stomach.
1. Pull 2 to 5 mL of air into syringe.
2. Attach syringe to tube.
3. Place stethoscope on child’s stomach.
4. Push air into tube quickly.
5. Listen for “whoosh” or “gurgle” sound.

Stomach content method: Look for stomach contents.
1. Connect empty syringe to tube.
2. Gently pull back plunger until stomach contents are in syringe.
3. Return stomach contents by gently pushing them back into the tube.