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## *Information for You from Your Health Care Team*

### **Nasogastric Tube Insertion**

#### **Your child will use:**

Your child needs a nasogastric tube (NG tube) for feeding. This soft tube is placed through your child's nose, goes down the esophagus and into the stomach. While your child cannot eat or drink by mouth or take in enough fluids, tube feedings will help your child grow and stay healthy. Although putting a tube in may be scary at first, most parents learn how to put down the NG tube while the child is still hospitalized. Below are the steps to follow when putting down an NG tube.

#### **Supplies you will need to insert the NG tube:**

- New or clean NG tube.
- Surgilube or sterile water to lubricate the end of the tube.
- Tape for marking the length and securing the tube to your child's face.
- Skin barrier to use under the facial tape.
- Stethoscope for checking the tube placement.
- Syringe with air for checking tube placement.
- Tape measure to measure exposed tube length.

#### **Inserting the NG tube:**

1. Wash your hands.
2. Measure the tube. If the first tube was placed during endoscopy, the length of tube from the nose to the end of the tube will be noted. Use this length to mark tube placement as shown by your child's nurse. (Note: If the tube is used in an infant then this length may need to be changed as the child grows.)
3. Prepare small pieces of tape to be used for taping the tube to the face once placement is confirmed. Cut a piece of skin barrier and apply to the cheek where the tube and tape will go.
4. Without blocking the holes at the end of the tube, lubricate the end of the tube with a small amount of surgilube or sterile water.
5. Have a stethoscope and syringe with 3-10cc of air ready to check tube placement.
6. If possible, have one person help hold the child still in a sitting position. For infants and toddlers, using the baby's stroller often works well.
7. As shown by your child's nurse, place the new NG tube into the opposite nostril of where the old tube was (unless there is a physical reason not to do this). Insert the tube in a back and down motion. If the child is old enough, he/she can help by taking small sips of water as you insert the tube. Watch the child carefully for any signs of breathing problems. If the child has labored breathing or begins turning blue, remove the tube and try again later. Stop inserting the tube when you reach the pre-measured length. Gently remove the guidewire at this time, if present. Lightly tape the NG tube in place. Check the tube placement as shown by your child's nurse. Once placement is confirmed, tape the tube securely. ALWAYS avoid any pressure against the nostrils.
8. The NG tube will need to be changed every \_\_\_\_\_ days. If the tube becomes clogged easily, you may need to change it more often. Your Home Health Nurse can give you helpful ideas for keeping the tube clear. Please contact your child's Clinical Nurse Specialist, if you have any questions.