

6. What should I do if my nasogastric feeding tube becomes blocked?

- Gently massage the tube to free any blockage within the tube.
- Carbonated or warm water can help to free the blockage.
- If your tube blocks between Monday and Friday, 8:30am and 4.30pm, then please contact the nutrition specialist nurse on 0151 290 4389.
- Out of hours, if you are unable to take any food or fluids by mouth then you should go to your local emergency department (A&E) immediately, for them to attempt unblocking and possible replacement of the tube.
- If you are able to eat and drink, and your tube has blocked over the weekend or overnight, please wait until the next working day to contact the nutrition specialist nurse on 0151 290 4389, Who will be able to arrange to see you and unblock or replace your tube.

Having a nasogastric feeding tube

If you need this leaflet in a different language or accessible format please speak to a member of staff who can arrange it for you.

اگر به این بروشور به زبان دیگر یا در قالب دسترس پذیر نیاز دارید، لطفاً با یکی از کارکنان صحبت کنید تا آن را برای شما تهیه کند.

Jeśli niniejsza ulotka ma być dostępna w innym języku lub formie, proszę skontaktować się z członkiem personelu, który ją dla Państwa przygotowuje.

Dacă aveți nevoie de această broșură într-o altă limbă sau într-un format accesibil, vă rog să discutați cu un membru al personalului să se ocupe de acest lucru pentru dumneavoastră

如果您需要本传单的其他语言版本或无障碍格式，请联系工作人员为您安排。

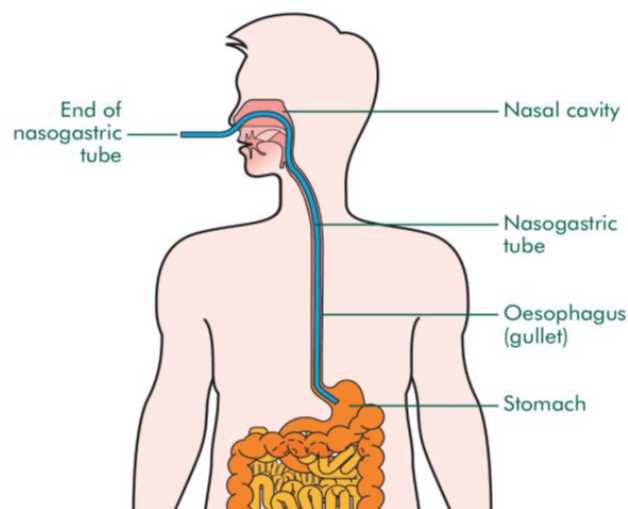
إذا احتجت إلى هذه النشرة بلغة أخرى، أو بتنسيق يسهل الوصول إليه، يرجى التحدث إلى أحد الموظفين لترتيب ذلك لك.

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Marshall Cross Road,
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What is a nasogastric feeding tube?

A nasogastric tube (NG tube) is a fine tube that is passed through your nose, down the back of your throat and into your stomach. They are usually placed to allow liquid food to be given to you directly into your stomach. We often use NG tubes because you may have problems swallowing food properly. They are also sometimes used to drain fluid from the stomach.



<http://www7.dxlne.info/diseases/nasogastric-feeding-tube?usid=23&utid=7203995884>

How is the tube inserted?

The procedure is carried out by a trained healthcare professional and takes just a few minutes. Having the tube passed may be a little uncomfortable but should not be painful. The healthcare professional will gently pass the tube into one of your nostrils and from there the tube travels down your throat, down your food pipe and into your stomach. The tube left on the outside of your body is usually secured to your cheek with an adhesive dressing and sometimes tied to the nose with a special thread called a bridle. Once the tube is in, it should be quite comfortable.

3. What if the pH is greater than 5.5?

- Check that the tube is the same length as usual (using the centimetre markings by your nostril).
- If you have been told it is safe for you to drink by mouth, have a drink of something acidic eg orange juice. Wait 2 minutes and then recheck the aspirate from your nasogastric tube.
- It may be that you are on a medication such as omeprazole, lansoprazole, pantoprazole or esomeprazole. If this is the case, your pH may be greater than 5.5. If you have had no retching, coughing or vomiting and the tube has not moved at the nose, you may use the tube.

4. What if the measurement at my nostril moves?

If you are still able to get a pH of 5.5 or below, it is safe to continue using the tube.

If you are unable to aspirate and the tube has moved or you have experienced any coughing, retching or vomiting, please seek advice from the nutrition specialist nurse or attend your local emergency department. Who may need to arrange a chest x-ray or replace the tube.

5. How do I prevent my nasogastric tube from becoming blocked?

Ensure all medications are given separately with a minimum of 10ml cooled boiled water flushed through the tube before and after each one.

Always flush your tube with a minimum of 30ml cooled boiled water before and after your feed.

Troubleshooting

1. What should I do if my nasogastric tube comes out?

If your tube has come out Monday to Friday between 8:30am and 4.30pm then please contact the nutrition specialist nurse on 0151 290 4389.

Out of hours, if you are unable to take any food or fluids by mouth then you should go to your local emergency department (A&E) immediately for a replacement. If you are able to eat and drink, and your tube has come out over the weekend or overnight, please wait until the next working day to contact the nutrition specialist nurse on 0151 290 4389 who will be able to arrange to see you and replace your tube.

2. What if I cannot get an aspirate?

- Check that the tube is the same length as usual (using the centimetre markings by your nostril).
- Draw back 10ml of air into your syringe and push this down your tube (there could be some debris on the end of your tube so the gush of air may help to move it). Try to aspirate again.
- Try lying on your left side for 10 minutes and try to aspirate again.
- Brushing your teeth or rinsing your mouth can also make your stomach produce more acid, so try this and then recheck after 5 minutes.
- If you are still unable to aspirate, if the tube has not moved at the nose and you have not experienced any coughing, retching or vomiting, you may use the tube.

Why do I need a nasogastric tube?

It may be unsafe for you to take food and fluids by mouth, or you may be unable to take enough by mouth. Food, water and medicines can be given via the tube to support you. Sometimes the tubes are used to drain fluid from your bowel if it is blocked.

How long will I need it for?

This will depend on your individual condition, and will be decided between you and the team caring for you. Please discuss this further with your team and the dietitian.

How do I care for my nasogastric tube at home?

In many cases, the care of your tube at home will be undertaken by a carer or a family member, but some patients do manage the tube themselves. Nasogastric tubes are usually held in place by the adhesive dressing/tape on your cheek and occasionally a nasal bridle (a piece of string that goes around the inside of the nose and ties to the tube). Despite this, the tubes can still move inside. Coughing, vomiting or pulling on the tube can move the tube from your stomach making feeding unsafe. To ensure that you feed safely at home, you must follow the guidance below.

1. Ensure adhesive dressing is firmly attached to the skin daily.
2. Check the centimetre measurement at the nostril daily (this is marked on the feeding tube). This should be the same as when you left hospital. If it is not, this may mean that the tube has moved; do not use the tube and see the troubleshooting section.

3. Every time the tube is used for feed, medication, water or if you have an episode of coughing or vomiting, it is essential that the position of the tube is checked to ensure the tube tip is in your stomach. This is done by 'pH testing' which checks the acid level of fluid removed from your stomach. More information about pH testing is provided in the section below.

How do I do pH testing?

- You will need a clean surface, large purple syringe (60ml size) and some pH strips.
- Wash your hands.
- Attach a clean 60ml purple syringe to the end of your nasogastric tube.
- Pull back on the plunger of the syringe to draw back some fluid (aspirate) from your stomach (you only need a very small amount – approximately 5ml).
- Use a new pH strip and squirt the fluid from the syringe onto the pH strip, ensuring all coloured squares are covered.
- Allow between 10 and 60 seconds for the coloured squares on the strip to change colour. Compare this to the colour chart on the box of the pH strips for the closest match.
- If the reading is 5.5 or less, then the tube is likely to be in your stomach and is safe to use. If the pH reading is greater than 5.5 **do not use** the tube and see the troubleshooting section.
- Wash hands with soap and water.

How will I get a regular supply of feed and equipment at home?

You will be registered with a feed company, who will deliver your feed and equipment to you or your local pharmacy every month until you no longer need it. Your dietitian will arrange this.

What equipment will I be given when leaving hospital?

You will receive the following supplies before leaving the hospital:

- pH strips
- one week's supply of 60ml purple enteral syringes
- one week's supply of liquid feed as prescribed by your dietitian
- If you are using a pump to deliver your feed you will be given a pump, stand and one week's supply of giving sets (feeding lines).

Can I eat and drink with a nasogastric tube?

If your team advise that it is safe for you to eat and drink, you can continue to do so with a nasogastric tube. However, if they tell you that swallowing food is dangerous for you, then you must not eat and drink with the tube in place.

How is my nasogastric tube removed?

When you no longer need your nasogastric tube, your team will arrange for it to be removed. The adhesive tape around it will be removed or the bridle will be cut and the tube will be gently pulled out. If the tube needs to stay in for a long time, it may be necessary to change the tube to a new tube; your team will advise you if this is needed. It is usually routinely changed after one year but may be done earlier if required.