

# Nasogastric (NG) tube home care



## For Babies

(Checking placement, feedings and medicines)

### What is a Nasogastric (NG) tube?

It is a thin, soft tube that goes in your baby's nose and down the throat (esophagus) into the stomach. NG tubes are used to give nutrition or medicine to your baby.

### How is it put in?

- An NG tube will be put in while your baby is in the hospital or clinic. You may want to watch this video of a child getting an NG tube placed. The process will be a little different for a baby. Ask your nurse to see the video.
- When the NG tube is put in, the nurse will measure the amount of tubing from your baby's nose to the end of the tube.
- You will need to measure your child's tube before each feeding. The tubing should be the same length that the nurse measured.

Type of NG tube used: \_\_\_\_\_

Measurement of tubing from nose to end of tube: \_\_\_\_\_

### How often does it need to be changed?

- The tube needs to be changed every 30 days. Make an appointment with the doctor or nurse who is taking care of the tube.
- If the tube comes out by accident before the 30 days is up, it needs to be replaced by your home health nurse or at your doctor's office.

### How will I know the NG tube is in the stomach?

- Measure the NG tube from the tip of the nose to the end of the tube. The tube should be within 2 centimeters of the original measurements (see above measurement).
- Some tubes move a little when they are in place. It is okay to keep using the tube if:
  - the difference between the measurements is less than 2 centimeters **and**
  - your baby has been taking the feedings without choking or gagging.

If you are concerned that the tube is not in the right place, with or without a Bridle clip, call your baby's doctor or nurse. During normal business hours, call your doctor's office. After hours, call the Children's Operator at 414-266-2000 and ask them to page the GI fellow on call.

### How do I give my child feedings and medicine?

**Always check to be sure the NG tube is in the stomach before starting a feeding or giving medicine.**

- Measure outer portion of NG tube (from tip of nose to end of tube). Compare this measurement with previous measurements.
- Have your baby suck on a pacifier during the feeding.
- Make sure the formula or medicine is at room temperature.

## Supplies

## If needed:

<ul style="list-style-type: none"> <li>• Measuring tape</li> </ul>	<ul style="list-style-type: none"> <li>• Feeding pump</li> </ul>
<ul style="list-style-type: none"> <li>• Formula</li> </ul>	<ul style="list-style-type: none"> <li>• Medicine</li> </ul>
<ul style="list-style-type: none"> <li>• Syringes (60 ml for feeding and smaller syringes for flush and medicines)</li> </ul>	

### If you use a syringe for feedings:

- If your baby gets medicine with feedings, put it in the syringe before adding feeding.
- Connect the syringe to the end of the NG tube without the plunger.
- Fill the syringe with the amount of liquid needed. Do not overfill.
- You may need to push gently with the plunger to start the flow. Take out the plunger and let the feeding go by gravity.
- You may hold your baby during the feeding. To do this, wrap a piece of tape around the top of the syringe. The tape can then be pinned to your clothes, near your upper chest.

### If you are using a feeding pump for feedings:

- If your child gets medicine with feedings, give it with a syringe before connecting the feeding pump.
- Program the feeding pump to give your child's feeds as directed by your doctor.
- Attach the tubing to your child's NG tube and press start.

## After feeding

- Clear the NG tube:
  - When all the formula is out of the syringe, pour 5ml (or the amount your doctor tells you) of tap water into the syringe. If you are using a feeding pump, use a syringe to push 5mL of tap water (or the amount that your doctor tells you) into the NG tube.
- Leave the NG tube in. Put the cap or clamp on the end.
- Hold, comfort and burp your child after the feeding is done.
- If it is naptime or bedtime, put your baby on their back.

## Are there any complications with the NG tube?

Your baby may:

- Vomit or throw up.
- Cough a lot.
- Be very crabby.
- Make a gurgling sound when they breathe.
- Have nasal congestion.
- Choke.
- Poop more than normal.

### If any of these happen, call your doctor.

**ALERT:** Call your child's doctor, nurse, or clinic if you have any questions or concerns or if:

- The measurement of the NGT does not match what it should be.
- The NG tube comes out by accident and needs to be put back in.
- Your child has special health care needs that were not covered by this information.

**This sheet was created to help you care for your child or family member. It does not take the place of medical care. Talk with your healthcare provider for diagnosis, treatment and follow-up.**