

Clinical Learning Guide

NasoGastric Tube insertion(NGT)

STEP/TASK	AP	IP	NP
Equipment			
1. Gather equipment <ul style="list-style-type: none"> ▪ A pair of non-sterile gloves. ▪ A NG tube of appropriate size. ▪ K-Y jelly. ▪ Xylocaine spray. ▪ A glass of water (if appropriate). ▪ Tape. ▪ Stethoscope. ▪ A 20 ml syringe and some pH paper. ▪ A catheter bag. ▪ A vomit bowel. 			
Before starting			
<ol style="list-style-type: none"> 1. Introduce yourself to the patient. 2. Explain the procedure 3. Ensure consent. 4. If possible, sit patient upright for optimal neck/stomach alignment 5. Examine nostrils (deformity/obstructions, polyps, septal deviation) to determine best side for insertion 6. Ensure that the patient is comfortable. 7. Wash your hands and wear on the gloves. 			
Procedure			
<ol style="list-style-type: none"> 1. Measure the length of NG tube to be inserted by placing the tip of the tube at the nostril and extending the tube behind the ear and then to two fingerbreadths above the umbilicus. 2. Lubricate the tip of the NG tube with K-Y jelly. 3. Spray the back of the throat with xylocaine 4. Insert the NG tube into the preferred nostril and slide it along the floor of the nose into the nasopharynx. 5. Ask the patient to swallow some water as you continue to advance the tube through the pharynx and oesophagus and into the stomach. 6. If the patient coughs or gags, slightly withdraw the tube and leave him some time to recover. 7. Insert the tube to the required length. 8. Ensure that the tip of the tube is in the stomach. 9. Inject 20 ml of air into the tube and listen over the epigastrium with your stethoscope. 10. Pull back on the plunger to aspirate stomach contents. Test the aspirate with pH paper to confirm its acidity (pH <6). If a fine bore tube has been inserted, it may not be possible to aspirate stomach contents. 11. Request a chest X-ray or indicate that you would do so. 12. Tape the tube to the nose and to the side of the face. 13. Attach a catheter bag to the NG tube. 			
After the procedure	1	1	
<ol style="list-style-type: none"> 1. Ask the patient if he has any questions or concerns. 2. Ensure that he is comfortable. 3. Thank the patient. 	1	1	

Document the reason for the tube insertion, type & size of tube, the nature and amount of aspirate, the type of suction and pressure setting if for suction, the nature and amount of drainage, and the effectiveness of the intervention.

NB: The main complications of NG tube insertion are aspiration and tissue trauma.