

**Section 5.5.t conduct oral and nasal gastric tube insertion.**

S = Satisfactory | U = Unsatisfactory

<b><u>Nasal Gastric Insertion</u></b>	<b>S</b>	<b>U</b>	<b><u>Comments</u></b>
1. Perform hand hygiene			
2. Visually inspect condition of patient's nasal and oral cavities.			
3. Assess for the best nostril before you begin.  Do this by occluding one side and asking the patient to sniff. Ask the patient about previous injuries or history of a deviated septum.			
4. Palpate patient's abdomen for distension, pain, and/or rigidity.  Auscultate for bowel sounds.			
5. Assess patient's level of consciousness and understanding of procedure.			
6. Position patient sitting up at 45 to 90 degrees (unless contraindicated by the patient's condition), with a pillow under the head and shoulders.			
7. Place a towel on the patient's chest and provide facial tissues and an emesis basin.			

<p>8. Measure distance of the tube from</p> <p>The tip of the nose, to...</p> <p>The earlobe, to...</p> <p>The xiphoid process and then mark the tube at this point.</p>				
<p>9. Lubricate NG tube tip according to your agency policy.</p>				
<p>10. Apply clean non-sterile gloves.</p>				
<p>11. Curve 10 to 15 cm of the end of the NG tube around your gloved finger, and then release it.</p>				
<p>12. Have patient drop head forward and breathe through the mouth.</p>				
<p>13. Insert NG tube tip slowly into the patient's nostril and advance it steadily, in a downward direction, along the bottom of the nasal passage, with the curved end pointing downward in the direction of the ear on the same side as the nostril</p>				
<p>14. You may feel slight resistance as you advance along the nasal passage. Twist the tube slightly, apply downward pressure, and continue trying to advance the tube. If significant resistance is felt, remove the tube and allow the patient to rest before trying again in the other nostril.</p>				

<p>15. If there is difficulty in passing the NG tube, you may ask the patient to sip water slowly through a straw unless oral fluids are contraindicated. If oral fluids are not allowed, ask the patient to try dry swallowing while you advance the tube.</p>			
<p>16. Continue to advance NG tube until you reach the mark/tape you had placed for measurement.</p>			
<p>17. Temporarily anchor the tube to patient's cheek with a piece of tape until you can check for correct placement.</p>			
<p>18. Verify tube placement</p>			
<p>19. Once the tube placement has been confirmed, mark (with a permanent marker) and record the length of tubing extending from the nose to the outer end of the tube.</p>			
<p>20. Document the procedure</p>			

Trainee: \_\_\_\_\_ Signature: \_\_\_\_\_

Evaluator: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_