

Tube Feeding Your Baby on the Neonatal Unit



Parent/Carer Learning Pack

Baby(s) Name:	
Parent/Carer Name:	



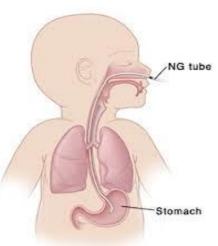
Welcome to your tube feeding learning pack. You need to have this learning pack signed off before you can undertake tube feeding unsupervised. Please keep it with your baby on the Neonatal Unit.

This booklet has been written for parents/carers who have a baby being fed by a feeding tube, as part of their treatment on the Neonatal Unit. The aim of the booklet is to help you understand why your baby needs tube feeds and how to give a tube feed.

On the Neonatal Unit, we like to encourage our parents/carers to be involved, where possible, in the care of their baby(s) and we offer to teach you to give tube feeds if you would like to learn. You will be fully supported by the Healthcare Professionals (HCP) helping you care for your baby and will not be expected to undertake the procedure until you feel confident and are signed off as competent by a Registered Nurse. If at **ANY TIME** you decide this is something you would rather **NOT DO**, that is fine.

What is a Feeding Tube?

A thin tube that is passed through the mouth or nose and goes down into the stomach, often referred to as an orogastric (mouth), (OGT) or nasogastric (nose), (NGT) tube. The tube will be secured with tape to the chin or cheek and has an opening with a cap on the end, outside of the baby, that allows a syringe to be attached to give the milk feeds.



How Will I Be Prepared for Tube Feeding?

We will begin to talk you through the process of tube feeding from the very first feed. This will provide you with the information to help you to decide if this is a skill you wish to learn. You will not be expected to undertake tube feeding until your baby is stable and tolerating some feeds. This learning pack provides you with a checklist of information, that will guide you through the step-by-step process to tube feeding.

This is a parent led learning pack and teaching will progress as slowly or as quickly as you decide.

Why Does My Baby Need Tube Feeds?

Both preterm and term babies will receive tube feeds until they are able to take feeds by mouth. Until then, and sometimes longer your baby will need help with feeding so they can get enough calories and other nutrients to make sure they grow and develop as they should.



Introduction to Tube Feeding

	Date Discussed	HCP Name & Signature
Parent / Carer encouraged to be		
present for their baby's first tube feed		
Initial conversation regarding parent /		
carer led tube feeding		

Holding a Tube Feed

The first steps to feeding your baby by feeding tube might be to hold the tube whilst the feed is being giving, after the position the tube has already been checked by the HCP.

Gravity feeding: allowing the milk to flow in freely. The higher the syringe is held the faster the milk will flow.

Safety:

- Hold the syringe throughout the tube feed, just above the level of your baby's head
- Ensure you can see your baby's face throughout the feed and observe your baby for vomiting or accidental tube removal
- If your baby is retching or uncomfortable, lower the tube to slow/stop the feed, allow a brief pause and then resume feeding
- If your baby vomits, stop the feed by kinking the feeding tube, then
 inserting the plunger back into the syringe, before turning the syringe
 upside down, disconnecting the syringe from the feeding tube and
 replacing the cap onto the feeding tube. Whilst you are learning, you
 should call the HCP for support.
- If the tube is accidently removed during the feed, we do not normally replace it until the next feed is due as replacing the tube may cause the baby to vomit.

Skill	Demonstrated	Observed	Skill Achieved	
	(HCP Sign and Date)			
What to look out for during the feed				
How to stop a feed if worried				
How to call for help				



Preparation to tube feed

- 1. Make sure your baby is settled in their cot/incubator
- 2. Wash your hands
- Prepare all the equipment that you will need to give the feed. You will need:
 - Make sure you know how much milk you need before you start and select the appropriate syringe to administer feed (5, 10, 20ml) – or collect the premeasured feed
 - 10ml/20ml syringe for aspirating the feeding tube
 - pH testing strips
- 4. Check the milk is for your baby (and labelled) before it is placed in the milk warmer (or other local method)
- 5. Once it is warm, check that the milk is your baby's and take it to the cot side where you should recheck it with the HCP

Skill	Demonstrated	Observed	Skill Achieved	
	(HCP Sign and Date)			
The importance of				
handwashing				
Gathering the correct				
equipment				
Why and how to warm				
the feed				
Checking correct feed				
for your baby				

Checking the Tube Position

- 1. Check the tube is secure ensuring the tape has not become unstuck
- 2. Check the length of the tube at the nose or mouth and compare this to previous documented length (Look at previous documented measurement on paperwork or speak to the HCP helping you care for your baby
- 3. Check the position of the feeding tube using the pH test strip. It is important that you do not put anything liquid (milk/medicine/water) down the feeding tube until you can confirm it is in the correct position. To do this:
 - Remove cap from the tube and attach the 10/20ml syringe to the open end of the feeding tube using a clockwise twist
 - Gently draw back a small amount of fluid into your syringe
 - Kink the feeding tube and remove the syringe using anticlockwise twist
 - o Replace the cap on the feeding tube
 - Place the aspirate onto the pH strip
 - Compare the pH strip to the colour chart on the pot



- 4. If the pH is a 5.5 or below, we know this means the tube is in the stomach, because you have detected acid.
- 5. Until you are signed off as fully competent you must show the pH strip to the HCP looking after your baby, to confirm the pH.
- 6. If the pH is 5.5 or below you can move on to "Giving the Tube Feed"
- 7. If the pH is **6 or above**, **DO NOT FEED**, ask the nurse for help and tell the nurse the pH you have obtained
- 8. If no aspirate can be obtained, the stomach may be empty, or the tip of the tube may be against the stomach wall
- 9. Disconnect the syringe from the feeding tube, pull back on the plunger to obtain 1ml of air within the syringe. Reconnect the syringe to the feeding tube and gently push the air into the stomach. This is to try to dislodge the tip of the feeding tube from the stomach wall. Now aspirate the syringe as per step 3
- 10. If there is still no aspirate, try repositioning your baby by laying them on their side and try aspirating again
- 11. If you are still unable to get any aspirated after 2 attempts or are worried about the position of the tube, ask the HCP for help

Skill	Demonstrated	Observed	Skill Achieved	
	(HCP Sign and Date)			
Check the tube is				
secure: tape and				
length				
Check the pH				
What to do if pH 5.5 or				
below				
What to do if pH 6 of				
above				
Troubleshooting if				
unable to obtain an				
aspirate				

Giving the Tube Feed

- 1. When you have confirmed the pH is 5.5 or below you give the tube feed:
 - Milk in syringe: If there is a stopper on the syringe, remove the purple stopper and gently pull the plunger to the end of the syringe without pulling out fully. Connect the syringe to the feeding tube and pull the plunger out of the syringe.
 - Milk in bottle: remove the plunger from the larger syringe and attach the syringe to the feeding tube. Pour some milk into the syringe careful not



- to overfill. Once the syringe is nearly empty continue adding milk until the right amount has been given, avoid the syringe becoming empty so you do not fill the tummy with air.
- o If the milk does not flow freely due to air in the tube, it may need a gentle push. Insert the plunger into the top of the syringe and give a gentle push, before removing plunger again to allow the feed to flow in by gravity.
- 2. Once the syringe is empty, kink the feeding tube, remove the syringe, and replace the cap
- 3. Ensure your baby is settled after the feed before leaving them to rest, this enables the baby to digest their feed. If you are cuddling your baby during a feed, hold them for a further 5-10 minutes following the end of the feed.
- 4. All rubbish should be placed in the yellow bins
- 5. Wash your hands
- 6. Feed and pH should be documented in your baby's notes

Skill	Demonstrated	Observed	Skill Achieved	
	(HCP Sign and Date)			
Starting the tube feed				
Completing a tube feed				
Rubbish disposal				
Importance of hand hygiene				
Documentation				

Additional Care of Baby's with a feeding tube

Whilst your baby is receiving tube feeds, they will need mouth care.

If your baby has a feeding tube down their nostril, it is important to check their nose for redness that may be caused by the feeding tube rubbing the side of their nostril, inform the nurse if observed.

If both parents / carers are present, your baby can have skin-to-skin / cuddle whilst being fed, make sure they are settled prior to starting the tube feed, and continue to observe them throughout the feed.



If your baby uses a dummy, using this during tube feeding can promote an association between full tummy and sucking, particularly if they look hungry. This can aid the comfortable digestion of milk. You can also use 'dummy dips' during tube feeds, please discuss with HCP if these are appropriate.

Tube Feeding Final Competency Checklist

	Date Competent	Registered Nurse Name & Signature
Introduction to tube feeding		
Preparing to tube feed		
Checking the feeding tube position		
Giving the tube feed		

Parent/Carer

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I confirm, I have been provided with the appropriate training, as laid out in this learning pack, and I feel confident to administer my baby's tube feeds:

Parent/Carer Name.....

Parent/Carer Signature.....

Registered Nurse
I confirm, the above-named parent/carer has undertaken the appropriate training, as laid out in this learning pack, and has demonstrated the appropriate knowledge and skills to safely administer their baby's tube feeds:

ivedistered Maise Maille	 	 	
Registered Nurse Signature	 	 	
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Date of completion	 	 	
Date of completion	 	 	

