### Insert and secure nasogastric tubes



#### **Overview**

This standard covers the insertion of nasogastric tubes following agreed protocols and procedures as and when directed. All of these activities must be undertaken using an aseptic technique.

Users of this standard will need to ensure that practice reflects up to date information and policies.

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# Performance criteria

You must be able to:

- P1 apply standard precautions for infection prevention and control and take other appropriate health and safety measures
- P2 check the individual's identity and the confirm the planned activity
- P3 give the individual relevant information, support and reassurance in a manner which is sensitive to their needs and concerns
- P4 gain valid consent to insert the nasogastric tube
- P5 select and confirm all equipment and materials for inserting the nasogastric tube is:
  - P5.1 appropriate to the procedure
  - P5.2 fit for purpose
- P6 ensure the individual is positioned in a way that will:
  - P6.1 ensure their safety and comfort
  - P6.2 facilitate insertion of the nasogastric tube
- P7 insert the nasogastric tube in compliance with the correct protocols and procedures:
  - P7.1 at an appropriate time according to the individual's plan of care
  - P7.2 using appropriate techniques
  - P7.3 using equipment in line with manufacturer's instructions
  - P7.4 in a manner which optimises the patient's comfort and dignity and minimises pain and trauma
- P8 observe the individual throughout the activity, recognise and report any condition or behaviour which may signify adverse reactions to the activity and take the appropriate action
- P9 ensure the nasogastric tube is correctly positioned in the stomach
- P10 ensure the drainage bags are securely attached in a way that prevent discomfort and promotes dignity of the individual
- P11 ensure the individual is made comfortable following insertion of the nasogastric tube and dispose of waste according to agreed procedures
- P12 observe nasogastric aspirate for any change in appearance and promptly inform the appropriate member of the care team
- P13 measure and record the volume of aspirate and correctly using the required documentation
- P14 seek assistance promptly from an appropriate person should it be required at any stage
- P15 dispose of waste appropriately
- P16 record clearly, accurately, and correctly any relevant information in the necessary records

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# Knowledge and understanding

You need to know and understand:	K1	the current European and National legislation, national guidelines, organisationa lpolicies and protocols in accordance with Clinical/Corporate Governance which affect your work practice in relation to inserting and securing nasogastric tubes
	K2	your responsibilities and accountability in relation to the current
		European and National legislation, national guidelines and local policies and protocols and Clinical/Corporate Governance
	K3	the duty to report any acts or omissions in care that could be detrimental to yourself, other individuals or your employer
	K4	the importance of applying standard precautions to inserting and securing nasogastric tubes and the potential consequences of poor practice
	K5	the importance of working within your own sphere of competence when

- and seeking advice when faced with situations outside your sphere of competence
- K6 the conditions and constraints which might denote who undertakes this procedure and why
- K7 what valid consent means and why it must be obtained and confirmed prior to actions being taken
- K8 the anatomy of the upper gastro-intestinal tract in relation to inserting nasogastric tubes
- K9 the physiology of the stomach and small intestine in relation to potential contents of gastric aspirate
- K10 the following regarding the stomach/intestinal fluid:
  - K10.1 the normal appearance and content of stomach/intestinal fluid
  - K10.2 potential abnormal appearance and content of stomach/intestinal fluid depending on the individual's presenting medical condition
- K11 potential sources of contamination when inserting nasogastric tubes and appropriate measures to reduce or deal with them
- K12 the potential consequences of contamination of equipment and materials used for the insertion of nasogastric tubes
- K13 how aseptic technique contributes to the control of infection
- K14 why individuals should be supported and told about the nature of the insertion of the nasogastric tube
- K15 the concerns and worries which individuals or client groups may have in relation to some clinical procedures
- K16 the adverse reactions which may occur during and following procedures and how to identify and deal with these
- K17 the importance of offering effective verbal and non-verbal support and reassurance to patients when you insert nasogastric tubes
- K18 the effective methods of providing verbal and non-verbal support and

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reassurance to patients

- K19 the types of nasogastric tubes that can be used and why you should select that most appropriate for the individual
- K20 the topical anaesthetic agents
- K21 the importance of maintaining the correct level of cleanliness for the insertion of nasogastric tubes
- K22 the importance of following procedures for the insertion of nasogastric tubes exactly as specified, and the potential effects of not doing so
- K23 the importance of packing up used equipment and materials and covering receptacles containing nasogastric aspirate prior to leaving the immediate care area
- K24 how and where to dispose of: K24.1 used equipment and materials K24.2 nasogastric aspirate
- K25 the importance of immediately reporting any issues which are outside your own sphere of competence without delay to the relevant member of staff
- K26 the following regarding records:
  - K26.1 the importance of keeping accurate and up to date records
  - K26.2 the specific records required for reporting on the insertion of nasogastric tubes

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#### **Additional Information**

**External Links** This standard links with the following dimension within the NHS Knowledge and Skills Framework (October 2004):

Dimension: HWB5 Provision of care to meet health and wellbeing needs

The candidate and assessor must only sign below when all Performance Criteria and Knowledge points have been met.

#### Unit assessed as being complete

Candidate's Name:	
Candidate's Signature:	
Date submitted to assessor as complete:	

Assessor's Name:	
Assessor's Signature:	
Date assessed as complete:	

#### Internal Verification —

to be completed in accordance with centre's IV strategy

Evidence for this Unit was sampled on the following date/s:	IV's Signature	IV's Name

This Unit has been subject to an admin check in keeping with the centre's IV strategy.

Date of admin check	IV's Signature	IV's Name

#### Unit completion confirmed

IV's Name:	
IV's Signature:	
Date complete:	