# Tube Feeding Your Baby on the Neonatal Unit

# Parent/Carer Learning Pack

# KSS Neonatal ODN

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| Description | Parent/Carer Learning Pack |
| Target audience | Neonatal parents/carers |
| Related documents / policies (do not include those listed as appendices) | Awaiting: Network Gastric Tube Guideline for Neonatal Staff |
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| Approval committee | KSS Neonatal ODN Governance |
| Approval date | |
| Review date | |

# Tube Feeding Your Baby on the Neonatal Unit

Baby(s) Name:

Parent/Carer(s) Name(s):

# Contents:

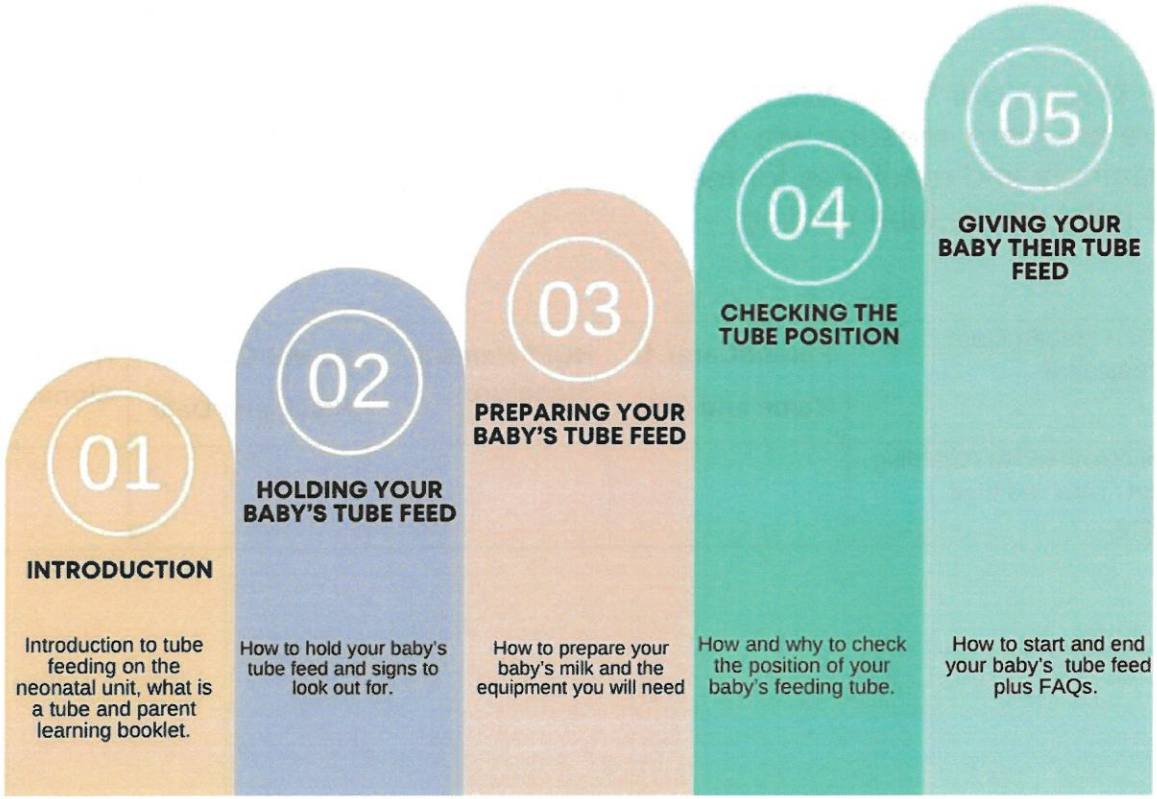
Welcome to your tube feeding learning pack. You will be able to undertake tube feeding unsupervised once you have had this learning pack signed off.

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

This learning pack will take you through 5 sections to develop your confidence in tube feeding your baby.

There is a table at the end of each section for you to complete with a member of the neonatal team (referred to as HCP – health care professional) once you feel confident in that area.

At the end of this pack there is a final table to record all the skills you have learnt.



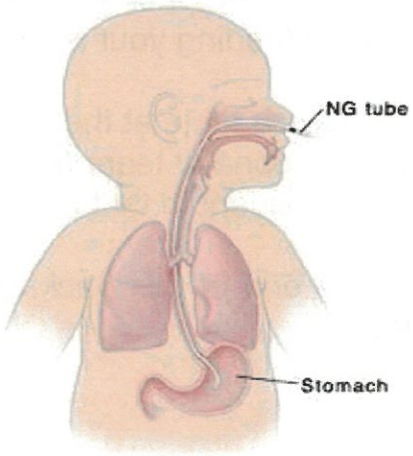
# A) Introduction to Tube Feeding

On the Neonatal Unit, we like to encourage you to be involved, where possible, in the care of your baby and we can teach you to give tube feeds if you would like to learn. You will be fully supported by the neonatal team to help you learn to tube feed your baby and will not be expected to do this until you feel confident. If at **ANY TIME** you decide this is something you would rather **NOT DO**, that is fine.

This learning pack provides you with a checklist of information that will guide you through the step-by-step process of how to tube feed. This will be led by you and we can progress as slowly or as quickly as you decide.

### What is a Feeding Tube?

A feeding tube is a thin tube that is passed through the mouth or nose and goes down into the stomach. It can also be referred to as an orogastric (mouth), (OGT) or nasogastric (nose), (NGT) tube. The tube is secured with tape on the baby's face and has an opening with a cap on the end that allows a syringe to be attached to give the milk feeds.




### Why Does Your Baby Need Tube Feeds?

There are many reasons why babies need to be fed milk via a tube, including prematurity and readiness for feeding. You can ask your neonatal team why your baby needs tube feeding.

| *HCP = Health Care Professional | **Parent/Carer 1: Name and Date** | **HCP* Name & Signature** | **Parent/Carer 2: Name and Date** | **HCP* Name & Signature** |
|---|---|---|---|---|
| Initial conversation regarding parent / carer led tube feeding | | | | |

# B) Holding a Tube Feed

Feeding with a syringe attached to the tube is called gravity feeding. It allows the milk to move through the tube and into the stomach.

The first step to feeding your baby by tube is to hold the tube whilst the feed is given. A member of staff will check the position of the tube and prepare the milk for you at this stage.

- Hold the syringe throughout the tube feed, just above the level of your baby's head
- The higher the syringe is held the faster the milk will flow
- Ensure you can see your baby's face throughout the feed
- Watch and observe your baby carefully throughout the feed **and call the HCP (Health Care Professional) for support** if you see the following:
    - vomiting
        - **Stop** the feed by kinking the feeding tube close to the cap. Insert the plunger back into the syringe before turning the syringe upside down. Next, disconnect the syringe from the feeding tube, release the kink and replace the cap.
    - accidental tube removal or movement of the tube
        - **Stop the feed** by kinking the tube as above. We do not normally replace it until the next feed is due as replacing the tube may cause the baby to vomit.
    - retching or looking uncomfortable
        - Lower the tube to **slow/stop the feed**, allow a brief pause.

| **Skill** | **Name:** | | | **Name:** | | |
|---|---|---|---|---|---|---|
| | **Demo given** | **Observed by HCP** | **Skill Achieved** | **Demo given** | **Observed by HCP** | **Skill Achieved** |
| What to look out for during the feed | | | | | | |
| How to stop a feed if worried | | | | | | |
| How to call for help | | | | | | |

*HCP Sign and Date each box when completed.
**Skill achieved once both parent/carer and HCP confident

# C) Preparing to tube feed

1. Clean your hands
2. Make sure you and your baby are comfortable
3. Prepare your baby's milk –
    a. Collect your baby's milk
    b. Check the milk is for your baby and labelled with your baby's name and date.
    c. Double check name and date with member of staff
    d. Place your baby's milk in the milk warmer (or other local method)
    e. Once it is ready, recheck that the milk is your baby's with a staff member.
4. Whilst your baby's milk is warming - Prepare all the equipment that you will need to give the feed.
   You will need:
    a. The appropriate syringe to administer feed
    b. 10ml or 20ml syringe for aspirating the feeding tube
    c. pH testing strips

| **Skill** | **Name:** | | | **Name:** | | |
|---|---|---|---|---|---|---|
| | **Demo given** | **Observed by HCP** | **Skill Achieved** | **Demo given** | **Observed by HCP** | **Skill Achieved** |
| The importance of handwashing | | | | | | |
| Gathering the correct equipment | | | | | | |
| Why and how to warm the feed | | | | | | |
| Checking correct feed for your baby | | | | | | |

*HCP Sign and Date each box when completed.

**Skill achieved once both parent/carer and HCP confident

## D) Checking the Tube Position

1. Check the tube and tape are fixed securely to your baby's face
2. Check the length of the tube at the nose or mouth and check this length with a member of staff
3. Check the position of the feeding tube using the pH test strip. (see below)

**It is important that you do not put <u>anything</u> down the feeding tube until you can confirm it is in the correct position.**

To do this:

- Remove the cap from your baby's feeding (NG/OG) tube
- Attach the 10ml or 20ml syringe to the open end of the feeding tube using a clockwise twist
- Gently draw back a small amount of fluid into the syringe
- Kink the feeding tube and remove the syringe using an anticlockwise twist
- Replace the cap on the feeding tube
- Syringe a few drops of fluid onto the pH strip
- Compare the pH strip to the colour chart on the pH strip container/pot

**Until you are fully confident and have completed the skills table below, you must show the pH strip to a member of staff.**

**If no fluid (aspirate) can be drawn into the syringe, the stomach may be empty, or the tip of the tube may be against the stomach wall. Try repositioning your baby by laying them on their side and try aspirating again**

**If you are still unable to get any fluid aspirated after 2 attempts or are worried about the position of the tube, ask a staff member for help**

4. If the pH is **<u>5.5 or below</u>**, this means the tube is in the stomach, because you have detected acid. You can now move on to **"Giving the Tube Feed"**

5. If the pH is **<u>6 or above</u>**, **DO NOT FEED**, ask a member of staff for help.
6. Please note down the pH at every feed so this can be recorded in your baby's notes

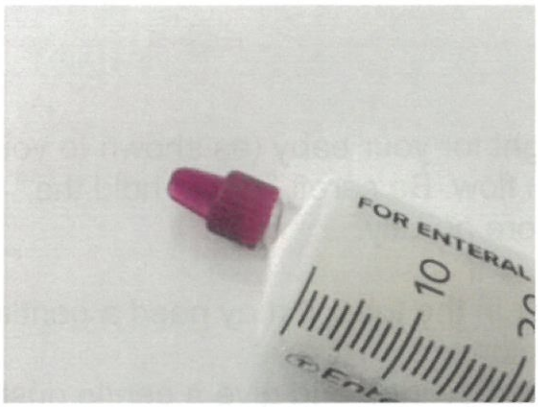
| Skill | Name: | | | Name: | | |
|---|---|---|---|---|---|---|
| | Demo given | Observed by HCP | Skill Achieved | Demo given | Observed by HCP | Skill Achieved |
| Check the tube is secure: tape and length | | | | | | |
| Check the pH | | | | | | |
| What to do if pH 5.5 or below | | | | | | |
| What to do if pH 6 of above | | | | | | |
| Troubleshooting if unable to obtain an aspirate | | | | | | |

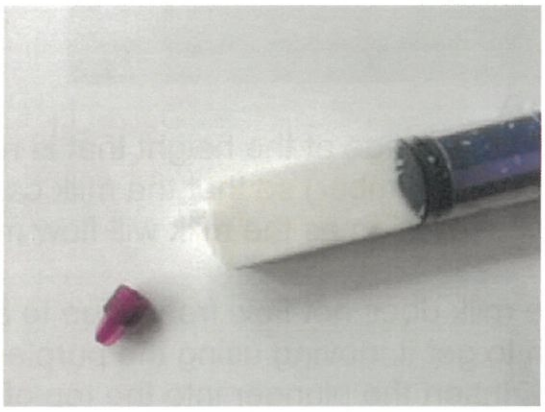
*HCP Sign and Date each box when completed.
**Skill achieved once both parent/carer and HCP confident

## E) Giving the Tube Feed

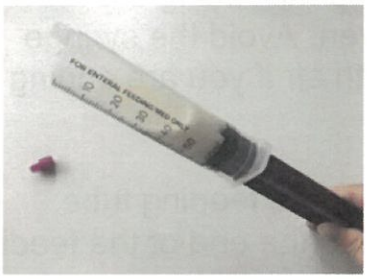
When you have confirmed the pH is 5.5 or below and you have the correct milk for your baby, you can start to give your baby their tube feed.

1. If there is a purple stopper on the syringe, remove the purple stopper and discard.

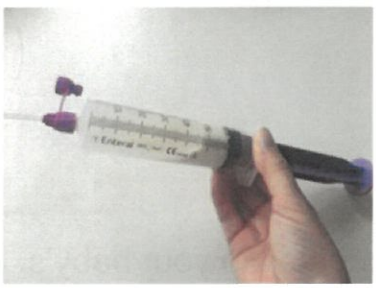




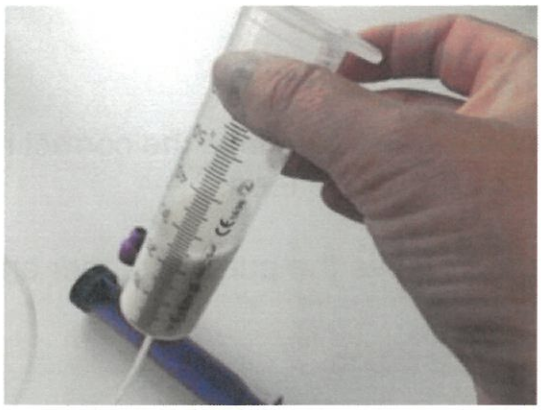
2. Gently pull the plunger to the end of the syringe without pulling out fully.



3. Connect the syringe to the feeding tube



4. Remove the plunger from the syringe



5. Hold the syringe at the height that is right for your baby (as shown to you by a staff member) so that the milk can flow. Be careful not to hold the syringe too high as the milk will flow more quickly.

6. If the milk does not flow freely due to air in the tube, it may need a gentle push to get it moving using the purple plunger.
    a. Insert the plunger into the top of the syringe and give a gentle push
    b. Remove plunger again to allow the feed to flow in by gravity

7. Once the syringe is nearly empty continue to top up milk using the milk from the bottle until the right amount has been given. Avoid the syringe becoming empty so you do not fill the stomach with air if you are adding more milk.

8. Once the feed is finished and syringe is empty, kink the feeding tube, remove the syringe, and replace the cap attached to the end of the feeding tube.

9. If your baby appears unsettled after or during their feed, please discuss this with a member of staff.

At the end of the feed:

- All rubbish should be placed in the yellow bins
- Clean your hands
- Ensure that the feed volume and pH are documented in your baby's notes – this may need to be completed by a member of the nursing team

| Skill | Name: | | | Name: | | |
|---|---|---|---|---|---|---|
| | Demo given | Observed by HCP | Skill Achieved | Demo given | Observed by HCP | Skill Achieved |
| Starting the tube feed | | | | | | |
| Completing a tube feed | | | | | | |
| Rubbish disposal | | | | | | |
| Importance of hand hygiene | | | | | | |
| Documentation | | | | | | |

*HCP Sign and Date each box when completed.
**Skill achieved once both parent/carer and HCP confident

# Tube Feeding Final Competency Checklist

Sign and date once you feel confident at each stage of tube feeding your baby.

| | Date & Signature: | | Registered Nurse Name & Signature |
|---|---|---|---|
| | Name: | Name: | |
| **A + B) Introduction to tube feeding** | | | |
| **C) Preparing to tube feed** | | | |
| **D) Checking the feeding tube position** | | | |
| **E) Giving the tube feed** | | | |

**Parent/Carer**

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 1 Name:**..... **Parent/Carer Signature:**.....

**Parent/Carer 2 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:

**Registered Nurse Name**..... **Registered Nurse Signature** .....

**Date of completion:**.....

# FAQs:

***Will my baby get a dry mouth or lips from tube feeds?*** Whilst your baby is receiving tube feeds, they will continue to need mouth care using either fresh expressed breastmilk or sterile water. Please discuss with your neonatal team how often to give mouth care and how to do this. This is something you can do for your baby.

***My baby's nose looks sore, is this normal?*** No - If your baby has a feeding tube down their nostril, it is important to check their nose and skin for redness that may be caused by the feeding tube rubbing the side of their nostril. Let your baby's nurse know if you see any redness or if the area around the tube looks sore.

**Should my baby always have their tube feed in their cot?** No - your baby can have skin-to-skin or cuddles whilst being tube fed. Make sure they are settled prior to starting the tube feed, and continue to observe them throughout the feed. It might be a little tricky to do all the steps for tube feeding on your own whilst having skin-to-skin or cuddles. However, the neonatal staff are still here to help you and your baby and can support you with preparing the feed whilst you are having cuddles.

**How can I help my baby get ready for oral feeding (breast-feeding or bottle-feeding)?** Many babies finding sucking practice or 'non-nutritive sucking' really helpful and calming during tube feeds. Sucking on a dummy or a clean (or gloved) finger during tube feeding can promote an association between full tummy and sucking, particularly if they look hungry. This can also aid the comfortable digestion of milk. You can also use 'dummy dips' or 'finger dips' during tube feeds, please discuss this with a member of staff. Skin-to-Skin can also be beneficial to develop pre-feeding skills and your baby may start to root and suck at the breast.

## For more information see:

https://www.bliss.org.uk/parents/about-your-baby/feeding/tube-feeding

https://www.unicef.org.uk/babyfriendly/baby-friendly-resources/neonatal-care-resources/you-and-your-baby-supporting-love-and-nurture-on-the-neonatal-unit/