

TITLE OF SKILL: NASOGASTRIC INTUBATION

INTRODUCTION/RATIONALE:

Nasogastric intubation refers to the process of placing a soft plastic nasogastric (NG) tube through a patient's nostril, past the pharynx and down the esophagus into patient's stomach.

LEARNING OBJECTIVES:

After the session students should be able to:

- List the equipment/material required for NG intubation
- Demonstrate the appropriate technique for insertion of nasogastric tube

EQUIPMENT REQUIRED

- Nasogastric tube of appropriate size
- Lubricant
- Protective gown
- Topical anesthetic 4% lidocaine
- Glass of water with straw
- Stethoscope

PROCEDURE:

PREPARATION:

- Explain procedure to patient
- Obtain informed consent
- Choose the appropriate size of nose for insertion
- Pretreatment of nasal passage with oxymetazoline which will constrict vessel of nasal mucosa to allow easy insertion of the tube
- Anesthetize nasal mucosa topically with 4% lidocaine
- Estimate the proper depth by measuring distance from xiphoid to angle of mandible and then to nostril

Position the patient in sitting upright in the sniffing position.

Lubricate the distal end of nasogastric tube and insert into nasal cavity slowly passing in posteriorly along with the floor of nasal canal.

Continue to advance tube slowly into the posterior or pharynx.

Coordinate further advancement of tube with instruction of the patient to swallow.

As patient swallows, the epiglottis cover trachea and prevent insertion of tube into the trachea.

Secure tube with paper tap

Confirm the presence of nasogastric tube with stethoscope.

Connect the tube with 50 cc feeding syringe or functioning equipment.

BACKGROUND INFORMATION (THEOTRICAL INFORMATION TO BE READ BY THE STUDENT)

INDICATIONS:

Diagnostic:

- Decompression of gastrointestinal tract
- Gastrointestinal hemorrhage

Therapeutic:

- Administrations of oral agents e.g,charcoal
- Administrations of oral feeding e.g,milk,juices

CONTRAINDICATIONS:

1. Maxillofacial trauma
2. Esophageal abnormalities
3. Corrosives ingestion
4. Altered mental status

COMPLICATIONS:

1. Sinusitis
2. Sore throat
3. Epistaxis