Feeding Your Baby at Home with a Nasogastric Tube

Newborn Services

This leaflet offers more information about the benefits and process for taking your baby home while still being partially fed via a nasogastric tube. If you have any further questions or concerns, please speak to the staff member in charge of your baby's care.

What is a nasogastric tube and why would my baby need one?

A nasogastric tube (NGT) is a specially designed tube through which your baby can be fed milk directly into their stomach. This tube is inserted into one of the nostrils and passes down the back of the nose and mouth into the stomach. It is taped onto the face to keep it secure with tape that is suitable for newborn skin.

An NGT is used when a baby is unable to suck through their mouth sufficient amounts of milk for them to grow adequately. This may be because:

1. The sucking reflex is not well developed as a consequence of prematurity
2. The baby tires easily during feeds
3. There is a medical reason why feeding is more difficult.

What are the risks of having an NGT?

NGT feeding is a very common procedure in neonatal units. When the appropriate guidance and safety checks are followed, it is very safe. However, no medical procedure is without some risk and feeding via an NGT is the same.

When the NGT is inserted there is small risk of it going down the wrong way into lungs instead of the stomach. The tube could also move if it is accidentally pulled or if the baby vomits or retches. This can be recognised by checking the position of the tube through testing the acidity of the aspirate (fluid sucked up) obtained from the tube. The aspirate must be checked immediately after the tube is inserted and before every feed.

When would my baby be considered for nasogastric tube feeding at home?

If your baby is receiving feeds via an NGT, it may be possible for you to take them home with the tube in place, so they can establish full oral feeds at home. Besides enabling you to care for your baby in the privacy and comfort of your home, this has been shown to
increase the speed with which babies come off the NGT feeding. It also improves weight gain and reduces exposure to hospital-acquired infections. It can also improve the bonding of siblings with their new brother or sister.

Your baby would be considered for nasogastric tube feeding at home if:
1. you are willing to complete an NGT training package
2. you are comfortable to go home NGT feeding
3. your baby is medically well
4. your baby’s weight gain is adequate
5. they can maintain their temperature in an open cot
6. they are feeding at least three hourly
7. they can complete at least 50% of their required feed volume orally
8. you are resident in a home in Wandsworth on discharge.

How will I learn how to feed my baby at home using an NGT?
You will receive training from the nursing staff on the unit and you will not go home until you are comfortable using the NGT. It is a good idea to keep a copy of your NGT competency booklet to remind you of the correct way to use your baby’s NGT. It is important that you ask questions if you are unsure of any part of using the NGT, as there is a lot of information to take in and it can feel daunting.

You should only use breast milk or infant formula and never put medications down the tube unless you have been specifically instructed and trained to do so. You will be taught how to check that the tube is in a safe position through checking the acidity of the aspirate. It is important that this is always done before putting anything down the tube.

What happens when my baby is discharged home on NGT feeding?
The neonatal community nursing team will support you while at home, along with your health visitor. They will visit you at home on the day of discharge from hospital. Thereafter they will usually see you twice a week while you are providing NGT feeds at home although the frequency of visiting will depend on how you and your baby are doing. You will be able to contact them via telephone for advice at other times.

As your baby’s feeding improves orally, the amount of feed through the NGT will reduce. The community nurses will review the weight gain and overall health of your baby and advice on the feeding plan. You will be also be able to be mobile with the baby, to undertake any family activities you feel are suitable (such as dropping siblings off in school, going out with family and friends etc.). Your baby will be able to be bathed as normal but you may need to change the tape that secures the tube, if it becomes damp. Your baby will also be able to go out of the house as normal, so the NGT should not interrupt the normal routine for your baby or family.
What if my baby pulls out his/her tube at home?
You can reduce the risk of the tube coming out by adding extra tape if the existing tape is lifting off. Also, make sure there is no gap between the tape and your baby’s nostril. If there is a gap, your baby may be able to hook a finger into the gap and pull the tube out. If your baby is particularly vigorous, it can be useful to use mittens (or socks on the hands) or a long sleeved Babygro with the sleeve turned over to prevent them from grasping the tube.

Your baby’s NGT will be re-inserted by a healthcare professional. This may be carried out by the neonatal community nursing team while at home during weekday working hours.

Outside of normal working hours, you may occasionally be asked to come back to the Blue Sky Paediatric unit at St George’s Hospital for the tube to be replaced by a member of our neonatal nursing team. All babies on home tube feeding will be able to take at least 50% of their feed orally so it should be unnecessary to bring your baby into hospital in the middle of the night.

Weekend hours
Over the weekend the Children’s Community Nursing Team can be contacted on 020 8725 2272 between the hours of 9am and 2pm. If the team has capacity they will be able to come out and re-insert the NGT. There is only one nurse covering the weekend so it is important if you leave a message to leave your name and number.

If the Children’s Community Nurse is unable to come out to your home, they may ask you to attend one of the wards so they can re-insert the tube there or make arrangements for you to go to the Neonatal unit.

Note
If your baby is not taking its feeds as well as usual, or is not keeping feeds down, this can be a sign that the baby is unwell and you should seek medical advice from your GP or out of hours primary care provider.

Useful sources of information
NHS pregnancy and baby advice
http://www.nhs.uk/conditions/pregnancy-and-baby/
BLISS
Bliss is a support group which is able to offer support and advice to families with babies with a range of conditions.

Fourth Floor
Maya House
134-138 Borough High Street
London
SE1 1LB

Enquiries: 020 7378 1122
Email: hello@bliss.org.uk Website: www.bliss.org.uk

Use your smartphone to scan the QR code (you may need to download a QR code scanning app).

Contact us
If you have any questions or concerns about home nasogastric feeding, please contact a member of the neonatal team on the neonatal unit.

Once you are home, urgent concerns should be addressed through seeing your General practitioner or through attending the emergency department. For non-urgent queries, the neonatal community nursing team can be contacted on 07789 505 291 during weekday working hours. If the call goes to a voicemail, please leave a message or send a text message and they will call you back.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.stgeorges.nhs.uk

Additional services

Patient Advice and Liaison Service (PALS)
PALS can offer you on-the-spot advice and information when you have comments or concerns about our services or the care you have received. You can visit the PALS office between 9.30am and 4.30pm, Monday to Friday in the main corridor between Grosvenor and Lanesborough wings (near the lift foyer).
Tel: 020 8725 2453 Email: pals@stgeorges.nhs.uk

NHS Choices
NHS Choices provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health.
Web: www.nhs.uk
**NHS 111**
You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones.

**Tel:** 111

**AccessAble**
You can download accessibility guides for all of our services by searching ‘St George’s Hospital’ on the AccessAble website (www.accessable.co.uk). The guides are designed to ensure everyone – including those with accessibility needs – can access our hospital and community sites with confidence.