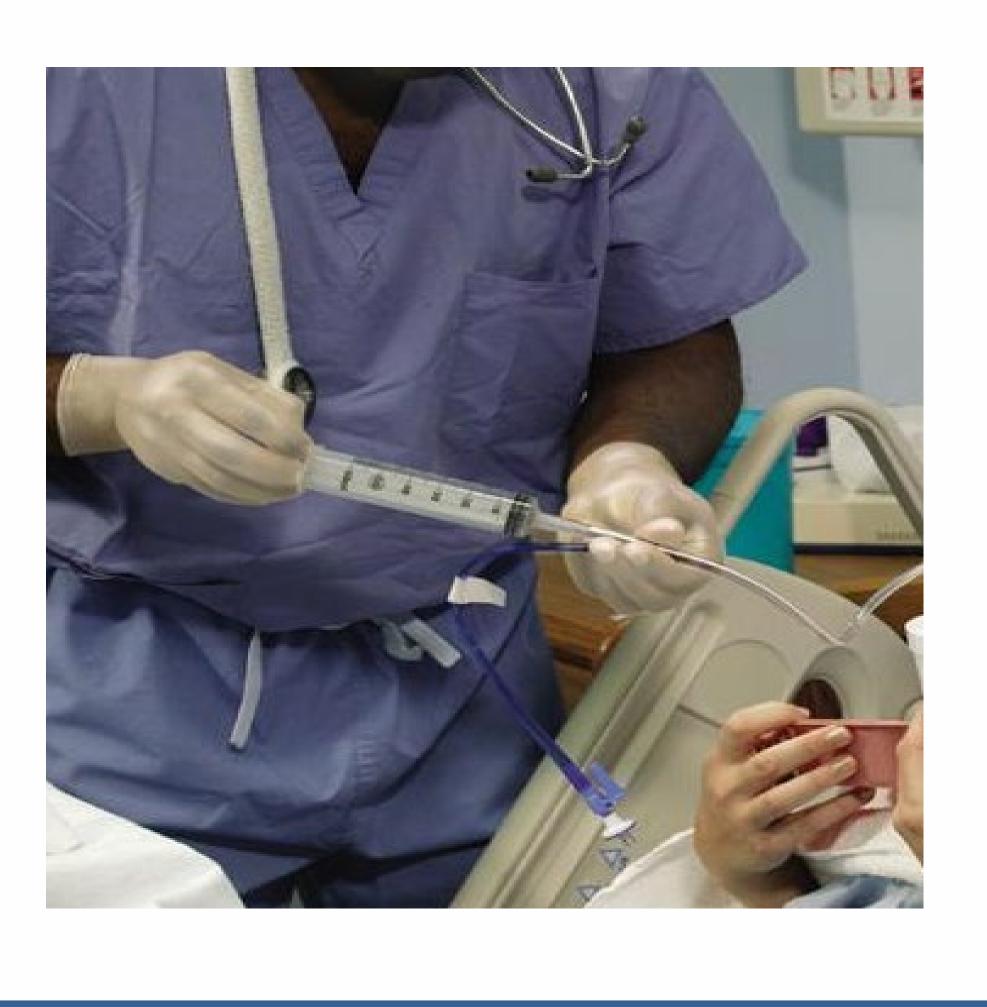
PLACEMENT VERIFICATION OF A NASOGASTRIC TUBE (NGT) IN THE ADULT PATIENT Vanessa Woody BSN, RN

BACKGROUND

Nasogastric tube (NGT) misplacement is a sentinel event that can often result in a potentially fatal situation. After the insertion of a NGT, current practice for many nurses usually involves auscultation to verify the NGT is inserted into the right area. While auscultation may be the current practice, research has identified auscultation as an unreliable method for verifying placement. Due to the inability to differentiate between respiratory and gastrointestinal sounds, a nurse can easily mistake the sounds heard as a positive indicator that the NGT is in the right place.



PURPOSE

The purpose of this quality improvement projects is to: 1)Ensure the provision of quality & evidence-based care to our patients. 2)Educate staff on best practice guidelines and implement measures to ensure compliance to these guidelines.

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EVIDENCE

Auscultation as a Means for Placement Verification: -Due to the inability to differentiate between respiratory and gastrointestinal sounds, a nurse can easily mistake the sounds heard as a positive indicator that the NGT is in the right place.

- -In addition auscultation can not detect when the NGT's tip is in the esophagus
- -Thus, auscultation is considered as an unreliable means for placement verification of a NGT.

Gold Standard for NGT Placement Verification: -Radiographic confirmation has been identified as the gold standard for verifying the correct placement of a blindly-

inserted NGT in adult patients. -This standard is supported by a recommendation from the American Society for Parenteral and Enteral Nutrition (ASPEN), AACN, and Lippincott Procedures to prevent the risk of accidental feeding into the lung.

<u>The Use of EMAR in Establishing a Standardized Method</u> for Placement Verification:

- -Order sets/ order link are a support tool within a computerized system to promote safe, efficient, and evidence-based care.
- -Providing clinicians with a standardized order can serve to reduce the risk of error and prevent adverse events.
- -Order sets/order links can help save time ordering procedures, promote adherence to best practice recommendations, and prevent variation in care practices.

RECOMMENDATION FOR PRACTICE

Based off of evidenced-based research, the recommendations are as follows:

current policy for Enteral Feeding. blindly-inserted NGT in adult patients. variation in practices, and adverse events.

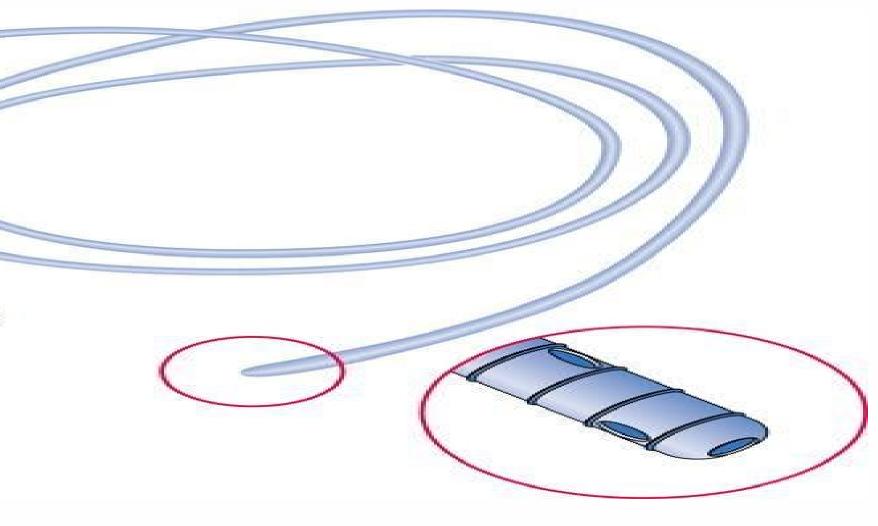
for signs of respiratory distress.



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- 1)The removal of the use of auscultation to verify placement from the
- 2)Adjusting the policy to reflect the gold standard of practice by requiring the need for radiographic confirmation to verify correct placement of a
- 3)The creation of an order-link to ensure gold standard utilization, prevent
- 4)The insertion of the following into the current policy as a means for confirming NGT placement after the initial radiographic confirmation: measure aspirate volume, observe for changes in tube length, and monitor



REFERENCES



