Development of a Competency Model for Placement and Verification of Nasogastric/Nasoenteric (NG/NE) Feeding Tubes for Adult Hospitalized Patients An ASPEN Fact Sheet

ASPEN recommends the following safe practices for NG/NE tubes:

- Use safe practices for NG/NE tube placement, verification, and securement
- Develop an institutional competency plan using the ASPEN Bedside Feeding Tube
 Placement Competency Model and Checklist

Safe Practices for Tube Placement, Verification, and Securement

Placement Techniques

- Blind placement
- Direct visualization placement
- Real time indirect visualization placement

Tube Tip Verification

- X-Ray
- pH
- Electromagnetic placement devices
- Capnography
- Camera
- Ultrasound

Tube Securement

- Tape, nasal tube
- Transparent dressing
- Nasal securement technology (bridle)



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ASPEN Bedside Feeding Tube Placement Competency Model

Include the following competencies for feeding tube placement:

- 1 Every clinician should complete a program for initial competency with content including:
 - NG/NE tube indications and contraindications
 - Institution-specific policies and procedures
 - Observations of NG/NE tube placement
 - Manufacturer's recommendations if you are using assistive placement technology
- Assess prior knowledge and effective learning using tools such as a pre-test and post-test or interactive question and answer session.
- The clinician should place a minimum of *eight* feeding tubes, using the specified placement technique, for the initial competency evaluation under the supervision of an experienced preceptor.
- Appropriate tube should be placed for patients based on the spectrum of medical/surgical and nutrition conditions, body weights, and age ranges cared for by the institution.
- The preceptor should use the **ASPEN Bedside Feeding Tube Placement Competency Tool Checklist** during evaluation of clinician competency.
- 6 Complete required number of ongoing continuing education hours, as determined by each institution, and review placements of a minimum of three patients using the checklist for annual competency re-evaluation.

Case # Clinician Verified by (preceptor)

Date Competency/Critical Behaviors Review Needed Verify order for tube placement
Review patient health history for any contraindications to tube placement
Obtain verbal informed consent if applicable
Gather appropriate supplies
Perform hand hygiene
Introduce self to patient, explain procedure, and offer comfort measures as indicated
Confirm patient identity according to policy
Place patient in the appropriate position
Place tube according to policy and technique for facility
Secure tube with tape, transparent dressing, or a commercial fixation device
Educate patient and family as appropriate
Document tube placement according to policy
Verify proper tube placement prior to use, per policy

Figure 1. ASPEN Bedside Feeding Tube Placement Competency Tool Checklist

Fact Sheet Based on Development of a Competency Model for Placement and Verification of Nasogastric and Nasoenteric Feeding Tubes for Adult Hospitalized Patients Powers J, Brown B, Lyman B, et al. Nutrition in Clinical Practice. 2021; doi.org/10.1002/ncp.10671

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