

## LETTER FROM THE CHAIR

2019 has been another busy year for NOVEL project members. Below is the current membership of the NOVEL project and our affiliations:

Beth Lyman, MSN, RN, CNSC, FASPEN, FAAN, newly retired and now a consultant; Project Chair; representing ASPEN

LaDonna Northington, RN, DNS; University of Mississippi School of Nursing; representing Society of Pediatric Nursing

Carol Kemper, PhD, RN; Children's Mercy Kansas City; representing Patient Safety Officers

Sharon Irving, PhD, CRNP, FCCM, FAAN; University of Pennsylvania School of Nursing; representing AACN and ASPEN

Gina Rempel, MD, FRCPC, FAAP; Children's Hospital Winnipeg; representing ASPEN and international members

Wednesday Sevilla, MD, MPH, CNSC; Children's Hospital of Pittsburgh, UPMC; representing ASPEN

Rosemary Pauley, APRN, MS; Boys Town National Research Hospital; representing Association of Pediatric Gastroenterology and Nutrition Nurses APGNN

Candice Moore, MSN, RN; Cincinnati Children's Hospital; representing home care

Deahna Visscher; Parent Representative and Safety Advocate

Peggi Guenter, PhD, RN, FAAN, FASPEN; ASPEN staff liaison and advisor

## NEW STUDY IN THE WORKS ON NG PLACEMENT AND VERIFICATION IN 2020

The NOVEL Project conducted a study in 2015 to quantify the usage of NG tubes in children's hospitals and NICUs in the United States. You may have participated in this study. We also asked how placement was verified in those hospitals. We found a variety of methods being used and now it is time to see if things have changed. LaDonna Northington is the principal investigator for a research study looking at this very issue. Please watch for information about how to participate in a 15-item survey which should be IRB approved in early 2020. Even if your institution does not use pH or a radiograph to verify placement of an NG tube, please participate as you will give us valuable information. This is a dynamic process and progress is being made. We now want to be more intentional in our approach to changing practice. Please help us. Last time, 63 hospitals sought their IRB approval and participated. This time, you do not need IRB approval to participate in the survey and we want over twice that number of institutions—WE NEED YOU!

## ASPEN NOVEL BEST PRACTICES PAPER WIDELY DISSEMINATED

In 2018, the best practices position paper [Pediatric Nasogastric Tube Placement and Verification: Best Practice Recommendations From the NOVEL Project](#) was published in *Nutrition in Clinical Practice*. The authors were Sharon Y. Irving, PhD, CRNP, FCCM, FAAN; Gina Rempel, MD, FRCPC; Beth Lyman, RN, MSN, CNSC, FASPEN; Wednesday Marie A. Sevilla, MD, MPH, CNSC; LaDonna Northington, DNS, RN, BC; and Peggi Guenter, PhD, RN, FAAN, FASPEN. We encourage you to check it out and see how it compares to your current practice. Since publication through October 2019, this paper has been downloaded 6,336 times and has been cited in 5 other articles including papers from *Heart & Lung*, *Advances in Neonatal Care*, and *Nutrition in Clinical Practice*.

## NOVEL PRESENTATION AT ASPEN 2019 MEETING

In March 2019, Sharon Irving co-presented with a PharmD and attorney in a patient safety session at ASPEN's annual meeting. She presented the Best Practice document and the attorney presented how the legal system uses such documents. While Sharon focused on the science behind our document, the attorney spent much of his time explaining how such documents are powerful tools when patient harm is incurred from a misplaced NG tube as juries tend to be influenced by professional organization documents like this one. ASPEN has many documents, in addition to our best practice document, that specifically address nursing practice as it pertains to such things as parenteral nutrition administration. I encourage you to check them out as they are available to download from the ASPEN website.

## NOVEL WORKGROUP FOCUSING ON ADULTS

By popular demand, ASPEN has convened an interdisciplinary group to address issues related to feeding tube placement verification in adult patients. The adult population often has a registered dietitian placing a feeding tube. This group is going to first tackle competencies for NG and small bowel placement. While they may have different issues, the topic of NG/post pyloric tube placement certainly is of interest to many clinicians. You will hear more about this group.

## PSMF ACTIONABLE PATIENT SAFETY SOLUTION

In 2016 we were asked to join forces with the [Patient Safety Movement Foundation](#) (PSMF) to write a document outlining how to best verify NG tube placement across the lifespan. This was an international, interdisciplinary effort that was first published in 2017. We now have updated the document and it is available on the PSMF website. It is APSS #15. Check out this organization as it has 4,700 hospitals from 53 countries and those APSS cover many topics that pertain to nursing.

## NEONATAL pH PAPER PUBLISHED

This year the largest NICU study looking at pH measurement in neonates to date was published as a retrospective review of 1,024 infants who had 6,979 pH measurements to verify NG tube placement. The results were that 97% of the pH values were  $\leq 5$ , indicating gastric placement. We encourage you to check out this publication. It adds credence to the use of pH measurement across the lifespan. The citation is listed below.

Kemper C, Haney B, Oschman A, Lee B, Lyman B, Parker L, Brandon D. Acidity of enteral feeding tube aspirate in neonates: do pH values meet the cutoff for predicting gastric placement? [Adv Neonatal Care](#). 2019 Aug;19(4):333-341.

## NG TUBE PLACEMENT VIDEOS

Early in 2018, Beth Lyman made two educational videos on NG tube insertion and placement verification. One is directed toward healthcare providers and the other one is for caregivers/parents. You can access these videos for use with your patients on the [ASPEN website](#). The clinician video has been viewed over 9,200 times and the caregiver video over 15,000 times. In 2019, we received a grant to have them translated into Spanish and those have been viewed globally. Thanks to Cardinal Health for an educational grant to support the creation of these videos.

## PERSISTENCE AND RESEARCH PAY-OFF

Candice Moore, working at one of the best pediatric hospitals in the country and being a member of the NOVEL committee, felt that it was her responsibility to bring about a change in the current Cincinnati Children's Hospital Medical Center nasal-gastric placement policy. CCHMC was still using auscultation to verify placement of all NG tubes. The step taken was to speak with and present the NOVEL finding and research to the Medical Director of the Gastroenterology department (GI) at CCHMC. Next, Candy spoke with the Gastroenterologist that sits on the committee that decides practice changes for both the inpatient and outpatient GI departments. Knowing that this change would need to be hospital-wide, Candy then sent a referral to the hospital-wide nursing practice council. This referral contained all the research that the NOVEL committee had obtained so far, current safety practices and the NOVEL position paper. Success; the nursing practice council decided to change the NG placement verification process from using auscultation to using aspiration house-wide. This process was slow to spread to all departments of the hospital at first, especially home care. Currently, a new NG placement verification video is on the Cincinnati Children's website and both the pediatric ICU and the NICU are testing the use of PH to verify NG placement. It has taken several years, but persistence and research payed off. Cincinnati Children's Hospital Medical Center continues its practice of putting patient safety first.

## MEETINGS ATTENDED BY NOVEL PROJECT MEMBERS

In March 2019, Deahna Visscher and Carol Kemper attended the 2019 Quality and Safety in Children's Health Conference in Atlanta, GA. They spoke at "How a Mother's Story and Sharing Across Hospitals Has Transformed Pediatric Safety" impact session where they discussed how a similar practice in placing NG tubes at separate hospitals caused serious safety events. Children's Mercy Kansas City accelerated efforts to share serious harm concerns following the revelation. Attendees heard from Carol and Deahna, whose story has influenced industry change, on how sharing safety events and solutions among hospitals can prevent further harm from occurring.

In May 2019, Deahna Visscher attended the high-level Forum on Global Action on Patient Safety at Wilton Park, United Kingdom. The goal of this conference was to help strengthen the global momentum in this area and to secure high-level commitment and support of senior leaders and policy makers from countries across the world to improve patient safety globally. Attendees included policy makers, health experts, and patient representatives that discussed the progress of patient safety as a global priority thus far. The discussions focused on how to best ensure greater international focus and collaboration through sharing of best practice and policies in order to support patient safety challenges.

## THE YEAR AHEAD

As you can tell from reading this newsletter, we continue to soldier on in our efforts to change practice. This year we hope to quantify how much the bar has been raised and will share that with you in our 2020 newsletter. I continue to be amazed at how many organizations and hospitals are working to update their practice as it pertains to NG tube placement verification. If you are working on this and need some help, my new email since my retirement in 2019 is [lymanb2954@gmail.com](mailto:lymanb2954@gmail.com). Feel free to reach out and share success stories or seek help.

## ASPEN20

The NOVEL Project group will meet at the ASPEN 2020 Nutrition Science & Practice Conference. This meeting will be held in Tampa on **Monday, March 30, 2020 at 1 PM Eastern** in the Tampa Convention Center. Anyone interested in this issue, from clinicians to industry members, is welcome to attend.