

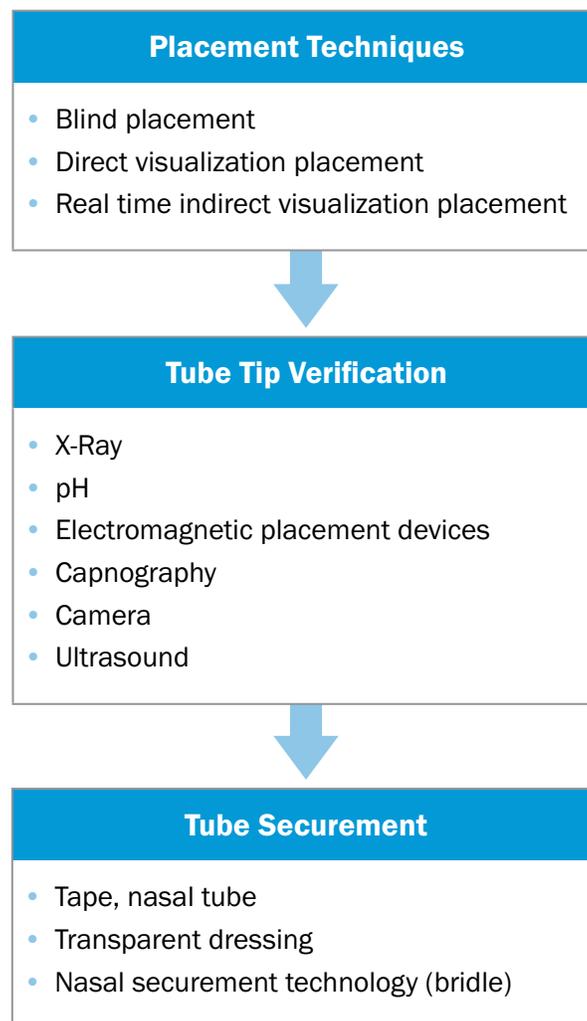
Development of a Competency Model for Placement and Verification of Nasogastric/Nasoenteric (NG/NE) Feeding Tubes for Adult Hospitalized Patients

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



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
- 2 Assess prior knowledge and effective learning using tools such as a pre-test and post-test or interactive question and answer session.
- 3 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.
- 4 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.
- 5 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.

Figure 1. ASPEN Bedside Feeding Tube Placement Competency Tool Checklist

Case # _____ Clinician _____ Verified by (preceptor) _____

Date	Competency/Critical Behaviors	Competency Met	Review Needed	Evaluator's Initials
	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			

Fact Sheet Based on [Development of a Competency Model for Placement and Verification of Nasogastric and Nasoenteric Feeding Tubes for Adult Hospitalized Patients](#)

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