

Institutional Handbook of Operating Procedures Policy 09.13.37	
Section: Clinical Policies	Responsible Vice President: EVP and CEO Health System
Subject: General Procedures	Responsible Entity: Nursing Services

I. Title

Tube Placement for Nutrition in Adults

II. Policy

Evidence indicates that enteral nutrition for hospitalized adults should be initiated early. Delivery in the small bowel is desirable; however, delays incurred attempting small bowel placement of tubes may be unnecessary for some patients. UTMB evidence-based guidelines include an algorithm approach for tube selection and patient monitoring.

The EPIC order SET must be utilized for the insertion of a tube.

Nurses shall only insert non-styleted enteral feeding tubes.

Large bore (gastric) tubes may be placed for nutrition as long as the patient meets criteria for gastric feedings. Criteria for gastric feedings may be found [at the following link](#).

Any tubes placed for the delivery of nutrition or medications may not be utilized until X-ray confirmation of the tube's proper placement has been verified by a qualified radiology resident (i.e. a second-year radiology resident or above), radiology faculty, or the patient's attending physician. This includes both large bore and small-bore tubes. An EPIC order will be entered by a physician that the tube is cleared for use including which qualified physician has certified placement.

Enteral feeding tubes with stylets may be considered when placement without a stylet has been unsuccessful and delivery of tube feedings into the small bowel is considered necessary however:

- 1) Insertion may only be performed by a faculty physician, or by residents or fellows under the direct supervision of a faculty physician.
- 2) Options may include to facilitate placement with bronchoscopy or GI endoscopy.
- 3) X-ray confirmation by a qualified radiology resident (i.e. a second-year radiology resident or above), radiology faculty, or the patient's attending physician is required.

III. Guidelines

Detailed guidelines regarding tube placement for nutrition in adults at UTMB may be found [at the following link](#).

Enteral feedings should be started as soon as possible. Evidence indicates initiation within 24-48 hours of admission is beneficial.

Repeat X-rays should be obtained anytime there is a concern for potential tube dislodgement (e.g., change in tube's external length, or the patient begins vomiting, coughing, or moving excessively).

Documentation should include:

1. Procedure, including type and size of tube
2. Patient tolerance of procedure, including number of placement attempts (if more than one)
3. Date and time of insertion
4. Confirmation of placement using X-ray
5. Date and time of discontinuation
6. Patient and/or family teaching

IV. Related UTMB Policies and Procedures

[The University of Texas Medical Branch Tube Placement for Enteral Nutrition in Adults \(Nov 2017\)](#)

V. References

American Association of Critical Care Nurses (AACN). Practice Alert. Initial and Ongoing Verification of Feeding Tube Placement in Adults. (April 2016). Retrieved from <https://www.aacn.org/clinical-resources/practice-alerts/initial-and-ongoing-verification-of-feeding-tube-placement-in-adults>.

American Association of Critical Care Nurses (AACN). Practice Alert. Prevention of Aspiration in Adults. (Feb 2016). Retrieved from <https://www.aacn.org/~media/aacn-website/clincial-resources/practice-alerts/preventionaspirationpracticealert.pdf>.

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- 1.) Feeding Tube: Enteral Nutrition via Nasoenteric, Gastrostomy, or Jejunostomy Tube. Accessed 10/31/2017.
- 2.) Feeding Tube: Small-Bore Insertion, Care, and Removal. Accessed 10/31/2017.
- 3.) Feeding Tube: Verification of Placement. Accessed 10/31/2017.

Heuschkel, R & Duggan, C. (2015) *Enteral feeding: Gastric versus post-pyloric*. UpToDate, topic last updated July 6, 2015. Retrieved 10/31/2017 from https://www.uptodate.com/contents/enteral-feeding-gastric-versus-post-pyloric?source=search_result&search=enteral%20nutrition&selectedTitle=3~150

McClave, S., et al. (2016). Guidelines for the Provision and Assessment of Nutrition Support Therapy in the Adult Critically ill Patient: Society of Critical Care Medicine (SCCM) and American Society for Parenteral and Enteral Nutrition (A.S.P.E.N.). *Journal of Parenteral and Enteral Nutrition*, 40(2), 159-211.

VI. Dates Approved or Amended

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VII. Contact Information

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