

## **鼻胃管留置的日常照護指導(英文版)**

### **Guidelines for Daily Care of Indwelling NG Tube**

#### **\* 鼻胃管留置之目的 Purpose of Indwelling NG Tube :**

對於吞嚥困難、意識不清的病人，建立一個可供給營養及藥物的途徑 To establish a route for providing nutrition and medication for those who have difficult swallowing or confusion.

#### **\* 鼻胃管留置之照護目標 Goals for Indwelling NG tube care :**

維持鼻胃管管路之清潔、通暢，避免管路滑脫

To keep NG tube clean, patent and to avoid dislocation.

#### **\* 灌食步驟及注意事項 Steps of feeding and cautions :**

1. 洗手 Wash hands
2. 床頭抬高採半坐臥式，並維持此姿勢至灌食後一小時以上 Lift head of the bed to let the patient in semi-upright position and keep this position still for 1 hour after feeding.
3. 先確認管路位置正確，執行方式如下 Check that correct position of the NG tube, as follows :
  - (1) 檢查鼻胃管的記號(鼻孔處)無移位 Check there is no displacement of the NG tube mark (at nostrils).
  - (2) 以灌食空針反抽有胃內容物 When withdraw the feeding syringe, you can see the gastric content.
  - (3) 打 20 cc 空氣，上腹部可聽到或摸到空氣進入的「咕嚕」聲 With injecting 20 cc air, you can hear/feel the borborigami over the patient's abdomen.
4. 反抽檢查胃殘存量，確定消化良好才可灌食 Withdrawn the

syringe to check the gastric residue, and make sure there is good digestion to justify further feeding.

(1)反抽少於 70 cc(一個注射筒)可安心灌食 withdrawn residue less than 70 cc (a full syringe) → feed without worry.

(2) 反抽多於 70 cc 等一小時後，少於 70 cc 再灌食，如仍多於 70 cc 暫停灌食一次 withdrawn residue more than 70 cc wait for 1 hour to make sure it is less than 70 cc, then go on feeding. If still more than 70 cc skip feeding once.

(3)先前反抽物須再推打回胃內 withdrawn residue should be pushed back to the stomach.

(4)反抽物如有血色或咖啡色，應告知護理人員以評估是否可繼續灌食 If there is blood or coffee colored substance in the residue, you should contact the nurse to see if we can continue the feeding.

5.每隔 4 小時灌食一次，每次灌食量不超過 400 cc Feed every 4 hours, do not exceed 400 cc each time.

6.灌食配方溫度以接近體溫為宜 The temperature of the feeding material should be better close to the body temperature .

7. 灌食時應注意預防空氣灌入，以重力原理方式流入，灌食速度愈慢愈好，每餐 10-15 分鐘灌完 Avoid feeding with air, feed by gravity and the slower the better. Feed each meal within 10-15 minutes.

8. 灌完後，以 30-50 cc 溫開水沖淨管內剩下食物，並將鼻胃管密封 After feeding, flush the N-G tube with 30-50 cc warm boiled water and close the NG tube tightly.

9.清洗灌食器具並保持清潔乾淨 Wash and keep the feeding apparatus clean.

10.患者如須拍背、抽痰或翻身、擦澡，請在灌食前一小時完成

If the patient needs chest percussion, sputum aspiration or rubbing bath, please finish these 1 hour before feeding.

11.額外水分(開水、果汁)可於兩餐間補充 Extra water (boiled water, fruit juice) can be fed between meals.

12.灌食過程中若出現異常現象：如咳嗽不止、嘔吐、臉色發紫

等，應立刻停止灌食，並告知護理人員或居家護理師 If any abnormal condition happens during feeding ,e.g. : continuous cough , vomiting or cyanosis, you should stop feeding immediately and contact the nurse.

#### \* 管路照顧 Care of the NG tube :

1.管路更換時間 Interval for change NG tube :

(1)一般材質：每 14 天更換一次 Common material : change every 14 days.

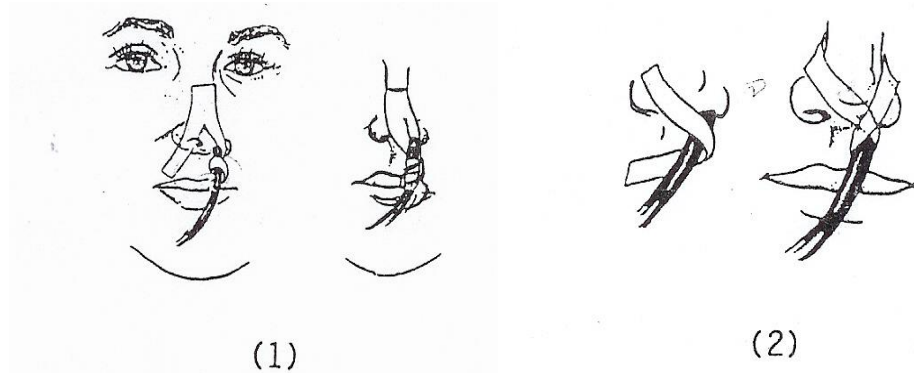
(2)矽質：每個月更換一次 Silicon : change every month.

2.每天給予口腔護理，以預防口臭、舌苔產生 Clean the mouth every day, to prevent foul odor, fungal tongue.

3.每天以棉花棒清潔鼻腔，並拭淨鼻翼油垢，過長鼻毛予以修剪 Clean the nostrils with cotton tip, clean the grease over the nasal wings and trim the nose hair.

4.每天更換固定的紙膠，並輕柔旋轉鼻胃管，以預防鼻胃管黏附胃壁，固定方式如圖 Change tape everyday and slowly twist the

NG tube to prevent it adhering to stomach wall. The ways of fixing the NG tube is as the following illustrations :



**\* 出院注意事項 Discharge notes :**

1. 出院前請與營養師連絡，以便告知出院後居家灌食之配方建議及營養品購買服務，諮詢專線：(03)9544106 轉 5111

Before discharge, please contact dietitian for home feeding formula consultation and purchase. TEL : (03) 9544106 ext 5111

2. 出院後管路若有滑脫或阻塞情形，可於上班時間與居家護理師連絡，連絡專線：(03)9544106 轉 8101

After discharge, if there is NG tube dislocation or obstruction, please contact home care nurse in office time. TEL : (03) 9544106 ext 8101