

Neonatal and Infant (up to 60 weeks CGA) Home NGT Guidelines

Background:

There are many reasons why an infant may not be able to achieve full oral feeds. Often, infants remain in a hospital setting until they can achieve full oral feeds, or an alternative feeding mechanism has been established.

For some infants, oral feeds skills can be supported using a Nasogastric Tube (NGT) or a G-Tube. If an infant is demonstrating safe progress in oral feeding and good growth, discharging a patient with a home NGT may be a possible option. For other infants that will likely need feeding support for longer durations, a G-Tube may be the appropriate choice.

Best practice for each individual patient will be determined based on the below guidelines but also up to provider team discretion.

Criteria for Home NGT:

- Infant > 38 week GA
- Infant Taking >40/50% Oral Feeds and can tolerate bolus feeds over 30 mins q3-4 hours*
- 6F/8F NGT fits comfortably in patient (DME Dependent)
- Infant has demonstrated ability to safely PO feed, determined by primary care team and speech therapy team
- Patient has demonstrated appropriate growth on anticipated home regiment for >48 hours
- Caregiver(s) are agreeable to home NGT and have completed all training requirements
- Caregiver(s) have access to outpatient follow up with PCP comfortable managing NGT (and complete GI referral)
- Caregiver(s) have access to home equipment resources (DME).

- Complete 24-48 hours of rooming in stay with caregiver doing all feeding and medication administration cares

***Special Circumstances:**

- For Infants with genetic, cardiac, anatomic or neurologic conditions which are anticipated to greatly affect infants long term oral feeding ability (greater than ~ 3-6 months), discuss benefit and risk of a G-tube vs Home NGT with parents before making decision about supportive feeding options.
 - o (See “Alternative Feeding Guideline” in NICU section on PCG Website)
- For cardiac infants that may be eligible for home NGT feeds, Haiku message Callie Brecek, NP from Children’s Heart Center Specialist Team to help coordinate home planning.

Caregiver Training:

- Goal is to have 2 available caregivers identified
- Goal is each caregiver successfully place NGT two separate times (ok for parents to video the training/placement with HIPAA compliance).
- Caregiver can connect NGT to feeding source (Gravity vs Pump).
- If patients go home with Feeding Pump, able to demonstrate how to operate the pump
- Link to Parent Home Resources: [Patient and Family Education A - Z | Patient and Family Education | UC Davis Children Hospital](#)

Discharge Medical Equipment Needed:

- Use Order Set: “Neonatal/Pediatric Feeding DME”. This includes NG/NJ, G tube, and GJ discharge DME needs.

Outpatient Follow Up:

- Communicate with PCP prior to discharge. Ensure PCP is comfortable with initial management
- Prior to discharge, place referral to UCD Pediatric Gastroenterology
- Prior to discharge, consider Speech Therapy Referral
- Special considerations for Cardiology, Pulmonology and Nephrology patients- determine

prior to discharge who will be managing enteral nutrition needs (PCP vs subspecialties)

References:

1. Lagatta JM, Uhing M, Acharya K, Lavoie J, Rholl E, Malin K, Malnory M, Leuthner J, Brousseau DC. Actual and Potential Impact of a Home Nasogastric Tube Feeding Program for Infants Whose Neonatal Intensive Care Unit Discharge Is Affected by Delayed Oral Feedings. J Pediatr. 2021 Jul;234:38-45.e2. doi: 10.1016/j.jpeds.2021.03.046. Epub 2021 Mar 28. PMID: 33789159; PMCID: PMC8238833.
2. <https://starship.org.nz/guidelines/discharge-home-on-short-term-nasogastric-tube-feeding-for-neonates/>
3. <https://pplog.co.uk/wp-content/uploads/Early-Discharge-from-the-Neonatal-Unit-with-Nasogastric-Tube-Feeding.pdf>
4. https://www.infantjournal.co.uk/journal_article.html?id=7139
5. <https://www.childrensmn.org/myjourney/neonatal/educationmaterials/article/15553/nasogastric-ng-tube-feeding/> (Discharge instructions for Parents)
6. <https://www.upmcphysicianresources.com/news/071724-ng-feeding-tube>
7. <https://pmc.ncbi.nlm.nih.gov/articles/PMC5727911/>
8. <https://www.nature.com/articles/s41372-019-0449-z>

Medical Legal Disclaimer:

Welcome to the UC Davis Health, Department of Pediatrics, Clinical Practice Guidelines Website. All health and health-related information contained within the Site is intended chiefly for use as a resource by the Department's clinical staff and trainees in the course and scope of their approved functions/activities (although it may be accessible by others via the internet). This Site is not intended to be used as a substitute for the exercise of independent professional judgment. These clinical pathways are intended to be a guide for practitioners and may need to be adapted for each specific patient based on the practitioner's professional judgment, consideration of any unique circumstances, the needs of each patient and their family, and/or the availability of various resources at the health care institution where the patient is located. Efforts are made to ensure that the material within this Site is accurate and timely but is provided without warranty for quality or accuracy. The Regents of the University of California; University of California, Davis; University of California, Davis, Health nor any other contributing author is responsible for any errors or omissions in any information provided or the results obtained from the use of such information. Some pages within this Site, for the convenience of users, are linked to or may refer to websites not managed by UC Davis Health. UC Davis Health does not control or take responsibility for the content of these websites, and the views and opinions of the documents in this Site do not imply endorsement or credibility of the service, information or product offered through the linked sites by UC Davis Health. UC Davis Health provides limited personal permission to use the Site. This Site is limited in that you may not:

- Use, download or print material from this site for commercial use such as selling, creating course packets, or posting information on another website.
- Change or delete propriety notices from material downloaded or printed from it. · Post or transmit any unlawful, threatening, libelous, defamatory, obscene, scandalous, inflammatory, pornographic, or profane material, any propriety information belonging to others or any material that could be deemed as or encourage criminal activity, give rise to civil liability, or otherwise violate the law.
- Use the Site in a manner contrary to any applicable law.

You should assume that everything you see or read on this Site is copyrighted by University of California or others unless otherwise noted. You may download information from this Site as long as it is not used for commercial purposes, and you retain the proprietary notices. You may not use, modify, make multiple copies, or distribute or transmit the contents of this Site for public or commercial purposes without the express consent of UC Davis Health.