



Department:	Nursing		
Document:	Internal Policy and Procedure		
Title:	Administration of Medication Via Nasogastric Tube		
Applies To:	All Nursing Staff		
Preparation Date:	January 08, 2025	Index No:	NR-IPP-007
Approval Date:	January 22, 2025	Version :	2
Effective Date:	February 22, 2025	Replacement No.:	NR-IPP-007 (1)
Review Date:	February 22, 2028	No. of Pages:	03

1. PURPOSE:

- 1.1 To ensure safe administration of medication by nasogastric tube (NGT).

2. DEFINITONS:

- 2.1 It is the procedure of administering drug/medication via nasogastric tube.

3. POLICY:

- 3.1 Medication administration by nasogastric tube must be performed safely following the ten rights of medication administration.
- 3.2 Nasogastric tube may be inserted by staff nurse, upon the order and under the supervision of the Physician.

4. PROCEDURE:

- 4.1 Check the Physician's written order.
- 4.2 Identify the patient using 2 identifier (four names for Saudi or Complete name for Non-Saudi and Medical Record Number).
- 4.3 Observe the ten rights of medication administration.
- 4.4 Perform hand hygiene to reduce transfer of microorganisms.
- 4.5 Prepare medication, adhering to the rights of drug administration.
- 4.6 Verify allergies listed on medication form, to alert the nurse to possibility of allergic reaction.
- 4.7 Prepare medication properly in an appropriate manner to allow the medication to go down and prevent blocking the nasogastric tube.
 - 4.7.1 For tablet- crush tablet with mortar and pestle or between two spoons and mixes with 10 to 20 ml of water.
 - 4.7.2 For capsule- empty contents of capsule in medicine cup. Mix with 10 to 20 ml of water.
- 4.8 Position patient in semi fowler's in bed or sitting up in wheelchair, promotes flow fluid and medication into nasogastric tube and stomach.
- 4.9 Wear gloves.
- 4.10 Place incontinent pad over patient's chest to promote cleanliness.
- 4.11 Release clamp on patient's tube or disconnect from tube feeding, to provide access to open tubing system to give medication.
- 4.12 Check tube placement inside the stomach:
 - 4.12.1 Attach syringe to free end of tube and aspirate small amount of gastric fluid.
 - 4.12.2 Place stethoscope on the epigastric region and instil 5ml of air into tube while listening for a 'gurgling' sound.
 - 4.12.3 Place the end of nasogastric tube in a small container filled with water and check for presence of bubbles.

- 4.13 Flush tube with 5 to 15ml water after you have confirmed tube in place, to facilitate movement of medication.
- 4.14 Place medication into syringe, attach syringe to nasogastric tube and then gently push through tube, to deliver medication into the stomach with minimal trauma to tissues.
- 4.15 Follow medication by flushing 5 to 15 ml of water, to prevent obstruction of tubing.
- 4.16 Clamp nasogastric tube for 30 minutes or more, to promote medication passage into stomach.
- 4.17 Keep patient in upright position for 30 to 45 minutes, to prevent risk of aspiration; facilitates movement of medication in gastrointestinal system.
- 4.18 Remove gloves and wash hands, to reduce microorganism transfer.
- 4.19 Discard disposable equipment and supplies.
- 4.20 Documentation:
 - 4.20.1 In the medication form: write the name, dosage of drug, date, time and signature.
 - 4.20.2 In the nurse's note: write patient's response to medication and procedure.

5. MATERIALS AND EQUIPMENT:

- 5.1 Medicine cup
- 5.2 Disposable gloves
- 5.3 Medication
- 5.4 Water
- 5.5 20 ml syringe
- 5.6 Incontinent pad
- 5.7 Stethoscope

6. RESPONSIBILITIES:

- 6.1 Nurse






7. APPENDICES:

- 7.1 N/A

8. REFERENCES:

- 8.1 Jean Smith Temple and Joyce Young Johnson, Nurses Guide to Clinical Procedures, 5th Edition, Lippincott Williams and Wilkins, Pages: 231-235.

9. APPROVALS:

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