

EL DORADO COUNTY EMS AGENCY

FIELD PROCEDURES

815

Effective: July 1, 2015
Last Revised: September 2024

(on file)

EMS Agency Medical Director

OROGASTRIC/NASOGASTRIC TUBE INSERTION

PURPOSE:

To prevent and treat gastric distention and aspiration in pediatric and adult patients.

INDICATIONS:

- To prevent gastric distention during prolonged bag-valve-mask ventilation
- When gastric distention impedes ventilation in patients being ventilated by bag-valve-mask, supraglottic, or ETT

CONTRAINDICATIONS:

- Recent esophageal or gastric surgery
- Presence of a percutaneous gastric tube
- Toxic ingestion (unless ordered by base physician)
- NG Tubes are contraindicated for suspected basilar skull fracture

PROCEDURE:

1. Select the appropriate tube size per app or Broselow.
2. Procedure should be performed with patient sitting upright with neck flexed forward (chin to chest) if possible.
3. Measure the tube from the patient's mid abdomen, along lateral neck, around their ear to the tip of the patient's nose to determine the proper length of insertion. Mark this depth on the tube.
4. If NG, instill neosynephrine and water-based lubricant into the chosen nostril if possible.
5. Lubricate the tube and insert it - directed posteriorly along the floor of the mouth or the nose into the esophagus (do not angle upward).
6. Confirm tube placement by aspirating gastric contents and by injecting 10-20 mL of air while auscultating over the left upper quadrant, listening for air gurgling.
7. Secure the tube.
8. Attach to low suction.

Endotracheal intubation should be performed prior to gastric tube insertion.