Training Checklist for Gastrostomy Feeding

Student’s Name: ___________________ Date: ________________
Persons Trained: _______________ School: __________________

School Nurse: _________________

G Tube Type: ___________ Size: _______________ Position for feeding: ___________
Formula Type: _______________ Amount given _______________
Flush Type: _______________ Amount given _______________
Times during the school day given: ___________________________
Length of time for the feeding: _____________________________
During a disaster the times given in a 24 hour period: _______________
Equipment needed for feeding: ____________________________________________________________________________

Skills checklist

- Gathers equipment, washes hands and puts on gloves
- Positions child and explains procedure
- Opens tube/button and check for proper placement
- Clamps off tubing.
- Pours room temperature formula into syringe/bag, being careful not to allow much air to return stomach.
- Release or unclamps tube and allows feeding to go in at an appropriate rate.
- Raises the syringe to have the feeding go at the faster rate
- Lowers the syringe to have the feeding go at a lower rate
- Adds more formula when feeding gets to 5 cc mark.
- Continues this procedure until the feeding has been completed.
- Flushes tube with cc’s of water.
- Removes syringe and turns to locked or clamped to off position.
- Allows child to remain in a feeding position for 1/2 hour.
- Washes equipment with warm soapy water.
- Reports any problems to parents and school nurse
- Documents procedure and problems in log.

Return Demonstrations

Date Date