Enhance Nursing Documentation on Nasogastric Feeding in LKB, PMH

Tam LC, Au Yeung WM, Heung KP, HO Y C, Yeung N K
Lai King Building (LKB), Department of Medicine & Geriatrics, PMH

Keywords: Documentation, NG tube, LKB

Introduction
Patient with Nasogastric (NG) feeding tube for maintaining nutrition is a common procedure in an extended care unit. Nurse should ensure a good documentation on the confirmation of NG tube placement and fluid balance charting as there is 40% patients with NG tube feeding in LKB. However, different practice in documentation for verification of NG tube placement and fluid balance charting that lead inconsistency of care delivery. Good documentation is contributed to increase quality and consistency of daily care and patient safety in NG tube feeding. Therefore, a good practice on documentation of NG tube feeding will provide a clear picture of NG tube placement verification procedure and patient’s nutritional status which can facilitate the communication for health care team.

Objectives
1) To standardize documentation format for NG tube feeding
2) To ensure the compliance of NG tube feeding documentation

Methodology
The problems were identified and the following strategies were implemented: 1. Retrospective audit on documentation was conducted to identify the problems in January 2016. 2. Standardized documentation formation on verification of NG tube placement and fluid balance charting. 3. Developed audit checklist for monitoring on the compliance of NG tube feeding documentation. 4. Enhancement training on knowledge on NG tube placement verification and proper documentation on NG tube feeding was provided in ward by responsible APN. 5. Posted up the standardized documentation samples on patient’s record trolley for staff reference. 5. Nourished a good documentation practice on NG tube feeding with random spot check weekly by ward in-charge after implementation of programme. Post enhancement audit was conducted in April 2016 for compliance evaluation.

Result
Retrospective study is adopted for evaluation. 30 samples were collected in both pre
and post audits. The pre audit result showed the compliance rate is 70.3% and the consistency in documentation was not completed. Enhancement training was provided in ward and 100% nurses received the training. A post enhancement audit showed 98.5% compliance rate on NG tube feeding documentation. The overall compliance rate increased 28.8% after implementation of the program. It can be concluded that the program was achieved regarding a safe tube insertions and safe feeding in LKB. It nourishes good documentation practice for nurses on verification of NG tube placement and fluid balance charting. An annual audit will be conducted to ensure the safety of NG tube feeding in LKB.