



WISCONSIN DEPARTMENT OF
PUBLIC INSTRUCTION

Nasogastric (NG) Medication Administration Skills Competency Checklist

Student's name: _____ Grade/Teacher: _____

Person trained*: _____ Position: _____ Initials: _____

Person training: _____ Position: _____ Initials: _____

***NOTE: The skills competency check list does not include the assessment of proper nasogastric tube placement immediately prior to medication administration. This procedure is commonly performed by a licensed registered nurse.**

Skills	Initial Demonstration		Return Demonstration				
	Date:	Date:	Date:	Date:	Date:	Date:	Date:
1. Review student's medical order including:							
a. medication name, dosage, and form (liquid or crushed pills).							
b. time of administration. For medications to be given on empty stomach stop any feedings 30 minutes before scheduled dose.							
c. amount of water used to flush the tube.							
2. Wash hands, put on gloves							
3. Prepare medication for administration. If the medication is dispensed as a liquid it is in a form ready for administration. Medications in pill or capsule form must be modified to liquid.							
a. score the tablet properly or pour the correct number of tablets into pill crusher or clean mortar.							
b. crush solid medication that are not sustained release preparations into a fine powder with the pestle or pill crusher.							



<p>c. pour the powder into a small medication cup.</p> <p>d. draw up 1-10 ml of warm diluent(e. g. formula or water as ordered) into a syringe and mix into medication cup to dissolve the medication.</p> <p>e. draw up the medication from the cup into the syringe and clear syringe of excess air. Label syringe as containing the medication.</p> <p>f. Draw up a small amount of diluent flush solution (1-10 ml as ordered) into a separate syringe and label appropriately.</p>							
<p>4. Gather equipment and place on clean surface</p>							
<p>5. Position child either sitting or supine with head up at least 30 degrees</p>							
<p>6. Inspect nares for discharge or irritation, or skin breakdown</p>							
<p>7. Assessment of proper NG placement must be done by the parent or a Registered Nurse immediately prior to medication administration. NG tube placement is not addressed in Wis. Stat. sec. 118.29. NG tube placement is addressed in Wis. Stat. 441 and N 6.</p>							
<p>To continue with NG tube medication administration:</p>							
<p>8. Remove cap/plug</p>							
<p>9. Attach syringe labeled with medication to tube port and slowly instill diluted medications into the NG tube by slowly and steadily pushing on the plunger <u>or</u> attach 60 ml syringe with plunger removed to NG tube. Pour medication into syringe and allow to flow in by</p>							



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gravity.							
10. Follow instilled administration of medication with 1-10 ml of diluent.							
11. Disconnect syringe							
12. Pinch or clamp NG tubing for 30 minutes after medication administration if the tube is not in continuous use							
13. Make sure NG tube is secured to face and appropriate secured to clothing to prevent dislodgement							
14. Keep the child in upright position for at least 30 minutes after completing medication administration							
15. Wash syringe with soap and warm water.							
16. Catheter tip syringe can be used repeated times for up to 24 hours							
17. Remove gloves and perform hand hygiene							
18. Document assessment, steps taken to verify tube placement, feeding, other interventions and outcomes in student's healthcare record							
19. Follow up, as needed, with parents/guardian and healthcare provider							
20. Special Considerations:							

The above named staff member has been trained in accordance with district policy and are therefore authorized to administer nasogastric medication to students per Wis. Stat. § 118.29.

Signature of district administrator: _____

Date: _____