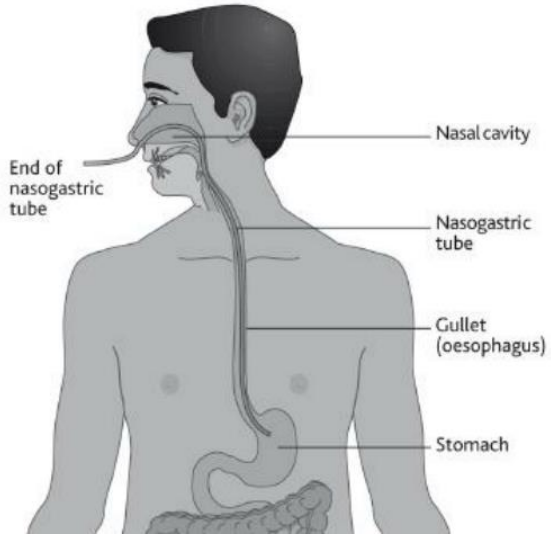
Nasogastric Tubes for Decompression

A **Nasogastric (NG) Tube** is a tube placed through your nose and into your stomach. It may be needed if your digestive system needs some rest. It drains fluid and air to prevent nausea and vomiting. It stays in place until your intestines begin working again. The NG tube will be removed before you start eating. You will not go home with it.



Why NG Tubes are Used
NG Tubes are most often used to decompress the stomach. This means that what is in the stomach is removed to reduce pressure.

NG tubes are often used to relieve pressure when:

- There is an obstruction in the intestines or stomach.
- You have an ileus.

This is most important to prevent **aspiration**. That is when fluid from the stomach enters the lungs after vomiting.

Placement
Placing an NG Tube can be an uncomfortable process. You will feel pressure in your nose and throat. However, patients often feel relief after the pressure is removed.

1. Your Nurse will measure from your nose to your chest. This will determine how long the tube should be.
2. Press down on one side of your nose at a time and breathe in and out. The side which is easier is the best side to place the tube.
3. Sometimes, a lidocaine spray can be used. It helps numb the nose and throat. Peppermint or Lavender oil may help reduce nausea. Ask your nurse if you feel like this may help you.
4. The tube will first be placed in your nose. Once it hits the back of your throat it is important to swallow water when your nurse says. This will help the tube reach your stomach.
5. Once placed, a securement device is attached to your nose and the tube to keep it in place.
6. An X-Ray will be done to confirm placement.

Removal
Removing an NG tube is an easy process.

1. Your nurse will take off the securement device.
2. Take a deep breath.
3. Hold your breath.
4. The tube is then taken out.

Your doctors will determine when your body is ready for the tube to be removed. Signs and methods used to help decide include:

- Having a bowel movement.
- Clamp Trials - Closing the NG tube for a few hours. Then checking how much is left in your stomach. If you become nauseous, notify your nurse.
- "Gastrografin Challenges" using a CT scan with contrast to visually see how your bowels are moving.

When your tube is removed, and your diet is increased, go slow! Eat or drink small amounts to start. Watch for any nausea. Even though you feel hungry, your body is not ready to digest large amounts right away.

While Having an NG Tube

- You will have an NPO diet. This means nothing by mouth. After some time, your doctor may allow ice chips to wet your mouth.
- It is very important not to eat or drink while you have the tube. This will allow it to work properly. Adding to your stomach does not allow your body to rest.
- Continue to walk as you are able. Walking is the easiest thing you can do to help have a bowel movement.

Always alert your nurse or nursing assistant if:

- You feel like the tube is falling out.
- The securement device isn't sticking.

If you feel like the tube is moving, hold on to it. **Do not** pull it out. The tube will likely need to be replaced if it comes out before you are ready.

Replacing an NG Tube

If the reason the tube was placed originally starts to appear again, the NG tube might be replaced. Signs include:

- Nausea and vomiting
- Abdominal pain
- Lack of bowel movements

Your doctor may prescribe stool softeners after an NG Tube is removed. It will help to prevent a new obstruction.

If you are taking opiate narcotic medicines for pain, you may need to take stool softeners. These medicines often cause constipation.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 5/2025 University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing HF# 8435