

Nasogastric "NG" Tube

School Aged (6 - 11 years)

SCHOOL AGE DEVELOPMENT

Development Goals

Snapshot of developmental goals and what school-age kids understand:

- Plav:
- involvement with peers
 - o games with rules and the opportunity to utilize a skill they are good at
- Learning:
 - o increased ability to problem solve
 - logical thinking begins understanding problems and seek to solve them
 - o growing attention span
 - o concept of time increases
 - o imagination broadens
 - understanding the body: beginning understanding of body parts working together within the body to help our bodies function
- · How they relate to themselves:
 - o experiences more independent and autonomous self-care
 - self-esteem and self-identity really begin to take shape, they identify more
 with what skills they have and how these skills contribute to the needs and
 interests of the group

Stressors

Can experience stress if

- · Feelings of loss of bodily control or functioning
- · Feelings of forced dependence on caregivers or others
- · Separation issues related to disruption in daily living, school, and peers
- Fear of pain, bodily injury, mutilation
- · Fear of loss of control, loss of love, loss of respect
- · Regression in cognitive skills
- Disruption in self-esteem and self-identity can cause stress
- · Can view illness as punishment

How to Support or Help

- Ensure preparation and any chance for the child to be involved in procedures or medical care
- · Identify and correct misconceptions
- · Encourage choices when possible
- Discuss changes in physical appearance
 - o such as the tube being visible on their face
 - how long it may be there
 - exploring with them how they feel about having such a visible change to their appearance
- Promote family or caregiver involvement in the NG tube placement process
- Provide opportunities for options for learning about and utilizing coping tools/skills during NG tube placement, which will help the child feel opportunities for success over experience



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COPING PLAN

Preparation

By showing your child the real medical items, and showing them the steps of the experience is helpful in solidifying their learning, and helping them to know what to expect.

What to say:

- "An NG tube is a long, flexible tube that goes in through the nose and down the throat directly into the stomach"
 - discuss the "why" for the need for the NG tube:
 - o needing medication
 - · helping to get nutrition

You can use a doll or stuffed animal, and string for the NG tube. Open up as a conversation, and let them help in making decisions. Talk with them about:

- · Where they would like to sit,
 - o sitting with caregiver, on their lap getting a big hug
 - sitting by themselves on the bed, with the caregiver next to them
 - o emphasizing their job will be to hold their body, especially their head, still
- · Show the string goes into the nose and slides down the throat
- The tube will be secured on the face with tape
- pictures (X-Ray) of their chest to make sure it is in the right place

Give Choices

The child does not have the choice of the NG tube placement happening, but you can provide feelings of independence and control by giving choices that they actually do have - but be mindful to not give an overwhelming amount of choices

- · Which distraction or coping tools do they want to use?
- Do they want the nurse to talk about the steps they are doing, or would they
 prefer to zone out and not think about what is happening during the NG tube
 placement?
- Would they prefer to sit on their caregiver's lap, next to their caregiver, hold their caregiver's hand, or sit alone?
 - remember to only give this choice if you feel your child can hold their body still on their own.



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Positions for Comfort

Comfort positioning is a way to help your child feel comforted, while still limiting movement, as an alternative to holding them down during the NG placement. When a child is comforted they are more likely to feel safe and more calm.

Sitting on caregiver's lap with the child facing away from caregiver, so child's back is to caregiver's chest.

- Arms: caregiver giving the child a big hug from behind to support in securing the child's arms and hands.
- Legs: child's legs can also be between the caregiver's legs, or the caregiver can fold a leg over the child's leg.

Sitting next to a caregiver with the caregiver giving a side hug

 Help to make sure hands and arms stay down, can even support with holding hands to provide further support and opportunity for child to squeeze your hands.

Distraction or Coping Tools

Using relaxation or distraction can help the child to remain calm and help them feel they have control during the experience

- · Practice rhythmic breathing through the nose
- · Selecting a focal point across the room (TV, support person)
- · Holding someone's hand/stress ball
- Have a towel and a bucket or bowl nearby for any fluids
- Take small sips of clear liquids through a straw to help the NG tube move easier
- Popsicles may help post-NG placement

Support During the Procedure

Explain what is happening, and use the same language used during the preparation play

- · The nurse is measuring the string
- the nurse is putting a sticker on your face

Remind them of their jobs and point out what they are doing well

- "I see you holding your head so still"
- "You are doing such a great job giving your stuffed animal a big hug"
- "I see you using those deep breaths"

Remind of how they will know they are all done

- "remember you will know you are all done when they place the tape on your
- or "remember you will know you are all done when all of the nurses step away from the bed"