

# BE

# Practice Safe Enteral Feeding in Kids

# READY

## Right patient Right product Right tube



- Match formula to patient's feeding order
- To help avoid misconnections trace tubing back to origin
- Label all enteral equipment
- Label human breast milk (HBM) per hospital policy

## Early Start of Enteral Feeding

24-48 hrs



- Start feedings within the first 24-48 hours in hemodynamically stable patients per protocol
- Bowel sounds or passing of flatus is not required to initiate feeding
- Elevate HOB 30 to 45° during feeding per protocol

## Assure Proper Preparation and Handling



- Prepare formulas using aseptic technique
- Maintain good handwashing practice
- Use sterile, liquid EN formulas (cans, closed system, RTF bottles for infants) over powders, if possible
- Follow guidelines for proper storage of formulas or HBM

## Deliver Formula Appropriately



- Advance tube feeding as per protocol
- Identify & prevent avoidable interruptions to EN in critically ill children
- Follow recommended hangtimes based on administration system
- Assess fluid status

## Your Safety Checklist



- Check for appropriate tube placement
- Only enteral to enteral connections
- Use oral syringes for medications administered through a feeding tube
- Consult pediatric pharmacist for meds co-administered with EN
- Use equipment designed to reduce the risk of tubing misconnections

