

Gastrostomy Button - Bolus Feeding Skills Checklist

Child's Name: _____

Person Trained: _____ Position: _____ Instructor: _____

	Demo Date	Return Demonstration					
		Date	Date	Date	Date	Date	Date
A. States name and purpose of procedure.							
B. Preparation:							
1. Completes at _____ time(s)							
2. _____ ccs (amount) _____ Formula/feeding (type of feeding)							
3. Feeding to be completed in _____ minutes							
4. Position for feeding: _____							
5. Identifies potential problems and appropriate actions							
C. Identifies Supplies:							
1. 60cc catheter-tip feeding syringe							
2. Adapter with tubing and clamp							
3. Prescribed diet at room temperature							
4. Tap water							
D. Procedure:							
1. Washes hands thoroughly							
2. Gathers equipment							
3. Positions child							
4. Attaches the adapter to feeding syringe							
5. Opens safety plug and attaches the adapter with feeding syringe to the button							
6. Pours feeding into syringe until about one-half full							
7. Elevates the feeding above the level of the stomach. Opens clamp. Allows feeding to go in slowly, 20-30 minutes. The higher the syringe is held, the faster the feeding will flow. Lowers syringe if the feeding is going too fast.							
8. Refills the syringe before it empties to prevent air from entering stomach.							
9. Makes feeding like mealtime: young children may suck on a pacifier.							
10. Flushes the button with _____ ccs of water when feeding is complete.							
11. After flushing, lowers the syringe below the stomach level to facilitate burping.							
12. Removes the adapter with feeding syringe and snaps safety plug in place.							
13. Keeps the child in a feeding position for at least 30 minutes after completing feeding.							
14. Washes syringe and tubing with soap and warm water and puts in home container.							
15. Documents feeding and observations in log.							
16. Reports any problems to parents							

Checklist content approved by:

Parent/Guardian Signature

Date