

Standards for Insertion of Nasal/Oral Feeding Tubes

Background:

The manual insertion of a feeding tube is an invasive procedure. In accordance with the Dietitians Regulation, section 6, a Registered Dietitian (RD) may insert a nasal or oral (naso/oro) feeding tube when acting under the delegated authority of registrant of the College of Physicians and Surgeons of BC (CPSBC) and in accordance with specified standards.

“Delegated authority” from a CPSBC registrant to insert a feeding tube means specific instructions for each client and dietitian.

“Manager” means the person to which a dietitian reports.

Effective January 18, 2006, standards approved by the CDBC Board and the CPSBC Board came into effect.

Standards:

1. The RD’s work site manager is responsible to ensure that the RD meets the following criteria **before** beginning certification training for the insertion of naso/oro feeding tubes:
 - registered in good standing with the CDBC,
 - registered with Restricted Activities A and C,
 - an employee at the worksite applying this policy,
 - a minimum of 2 years (24 months) (within the last 3 years (36 months)) experience caring for clients who receive nutrition via a feeding tube, **and**:
 - Certified Nutrition Support Dietitian credentialing¹ **or**
 - a demonstrated advanced level of practice as it relates to enteral nutrition (i.e. experience with enteral nutrition policy and procedure development; involvement educating colleagues and other health care professionals).
2. The RD’s work site manager is responsible for creating and maintaining a maximum 6-month certification program that addresses all of the following required competencies and is supervised by a CPSBC registrant who is qualified to insert feeding tubes.
 - a. **Knowledge competencies:**
 - Anatomy of the upper gastrointestinal tract and respiratory system,
 - Indications/contraindications for feeding tube insertion,

¹ Credentialing is by the National Board of Nutrition Support Certification, Inc. recognized by the American Society of Parenteral and Enteral Nutrition.

- Universal infection control precautions,
- Potential complications of feeding tube insertion and management of complications,
- Legal implications of increased RD responsibility,
- Health care record documentation, and
- Isolation/reverse isolation procedures.

b. Skills competencies:

- Patient assessment,
- Patient positioning,
- Patient interaction,
- Team interaction,
- Confirmation of feeding tube insertion,
- Universal infection control precautions,
- Identification and management of potential complications associated with feeding tube insertion, and
- Identification and management of immediate complications associated with feeding tube insertion.

c. Judgment competencies:

- Willingness to ask for help/direction from others,
- Identification of contraindications to feeding tube insertion,
- Identification of feeding tube malposition,
- Ability to problem-solve feeding tube misplacement,
- Willingness to refuse to insert feeding tube if inappropriate for patient or uncomfortable with situation, and
- Willingness to terminate feeding tube insertion if unsuccessful or uncomfortable with situation.

d. Attitude competencies:

- Confidence and competence with performance of procedure,
- Respect for patient and other team members,
- Willingness to learn from others,
- Commitment to safe, successful feeding tube insertion, and
- Ability to proactively problem solve.

3. [The RD who completes the certification program for the insertion of naso/oro feeding tubes:](#)

- meets the knowledge, skills, judgment, and attitude competencies outlined in Standard 2; and
- inserts successfully the following minimum number of naso/oro feeding tube insertions within the stated training time period:
 - Gastric (naso/oro) feeding tube insertion certification: 6 insertions per six-month period or
 - Post-pyloric (naso/oro) feeding tube insertion certification: 10 insertions per six-month period.

4. [At the completion of certification program, the RD submits to the CDBC a Declaration form signifying competence with the insertion of naso/oro feeding tubes. The form is signed by the supervising CPSBC registrant.](#)

- Gastric (nasoro) certification: Appendix “A”
- Gastric and/or post-pyloric (nasoro) certification: Appendix “B”.

5. The RD renews certification annually* by March 31 with registration renewal by:

- registering with Restricted Activities A and C,
- ensuring the following standards for renewing certification are obtained:
 - Gastric (nasoro) feeding tube certification: 6 insertions per six-month or
 - Post-pyloric (nasoro) feeding tube certification: 10 insertions per six-month period.
- obtaining signatures on the Declaration form verifying the registrant’s competence inserting feeding tubes ([Appendix A or B](#)),
- submitting the Declaration form to the CDBC, and
- maintaining documentation confirming the successful insertion of the number of feeding tubes required to renew certification per six-month period; make available to the CDBC on request.

*Certification may be required more frequently than annually as it is not transferable between work sites and the delegation is CPSBC registrant specific. Re-certification is required, along with notification to the CDBC, when a certified RD moves to a new work site and is delegated the task of insertion of nasal/oral enteric tubes.

References and Resources:

American Society of Parenteral and Enteral Nutrition (ASPEN) established National Board of Nutrition Support Certification (SBNSC). Retrieved March 20, 2023. <https://www.nutritioncare.org/nbnsc/>.

[CDBC Restricted Activities page.](#)

- Gastric (nasoro) certification: Appendix “A”
- Gastric and/or post-pyloric (nasoro) certification: Appendix “B”.

Health Professions Act. Dietitians Regulation, section 6. BC Government. Retrieved January 10, 2023. https://www.bclaws.gov.bc.ca/civix/document/id/complete/statreg/279_2008#section6.