

# INTRODUCTION

Enteral tubes feeding(ETF) are frequently used in high risk neonate for feeding and gastric decompression . It is indicated for infants who have a functioning gastrointestinal tract and cannot ingest enough nutrients orally or they are unable or unwilling to take oral feeding (*Williams, Leslie, 2004*).

Enteral tube feeding has become a widely used health care technology both in the hospital and community settings. It is means using the gastrointestinal tract for the delivery of nutrients which includes eating food, consuming oral supplements and all types of tube feeding. It includes both oral feeding as well as tube feeding. When oral feeding is insufficient, tube feeding enables neonates to maintain a good nutrition status (*Jams,2007*).

Nasogastric tube is used to administer a variety of medications and are the most frequently used method for delivery of enteral feeding (**Metheny&Titler, 2001**). It is temporary fixed for an infant who is not gaining enough weight or is unable to feed orally because of illness or immaturity (**Richards, 2007**).

High risk newborn, even as young as 23 weeks gestational age, can be fed enterally at the first week of life because they lack sucking and swallowing reflexes so coordination of sucking, swallowing, and breathing is necessary for efficient and safe oral feeding, this is not well established before the 35th week gestational age ( **Hillel Yaffe Medical Center,2007**).

Quality means developing statements regarding the inputs, process and out- comes standards that the health care delivery system must meet in order for its populations to achieve optimum health gains (*Bethesda,2001*). As stated by *Azopardi (2000)*, application of quality in health care, especially neonatal intensive care is a very important concern. Accurate and complete documentation of the nature and quality of nursing care given to neonates, can help the other members of health team to confirm their impressions about the neonate's condition and progress or points out the need for adjustment in the therapeutic regimen.

According to *Premji, Shahirose,(2008)*, enteral feeding is considered a relatively safe method of providing nutritional support to high-risk neonates. It is important that the nurse should give the opportunity to learn and become competent in the care of an infants with a nasogastric tube. This will include confirming the correct position of the tube, passing the tube, knowing how to aspirate tube, knowing how to proceed if no aspirate obtained and their child's usual pH levels. Training should be given by a qualified nurse who has been appropriately trained by the enteral feeding nurse specialist to perform procedures safely and competently (*Walley& Wong,2000;& NHS Quality Improvement,2004;*).