

	Pass Fail or N/A	Assessed by: (RN Name)	COMPETENCY EVALUATION TOOL for G OR J-TUBE BOLUS FEEDING Staff Name: _____ Name of Individual _____
			PROCEDURE FOR BOLUS FEEDINGS
1.			Checks physician's orders
2.			Washes hands
3.			Gathers equipment—Correct amount of formula, water, 60cc catheter tip syringe (with barrel separated from plunger), and clean towel.
4.			Inform individual of what is being done
5.			Positions individual in correct position.
6.			Pinches G-tube before unplugging tube and inserting tip of syringe into tube.
7.			Places plug so that it remains free of contamination.
8.			Pours prescribed amount of water into barrel of syringe, unpinches the tube and allows water to slowly enter stomach by gravity and pinches the tube just prior to syringe being completely emptied.
9.			Slowly pours formula into barrel of syringe and unpinched the tube to allow the formula to enter the stomach. Continuously refills the barrel before it completely empties, to prevent air from entering, until all of prescribed amount of formula has been poured into the syringe.
10.			Pinches G-tube just prior to syringe being completely emptied.
11.			Pours prescribed amount of water into syringe, unpinches tube, and allows water to enter stomach (to flush tube).
12.			Pinches G-tube when syringe has just completely emptied of water.
13.			Reinserts plug prior to unpinching tube.
14.			Documents that feeding has been given.
15.			Ensures that individual sits up for at least 60 minutes after feeding is complete.

<p>Based on this Competency Assessment Tool, I, _____ have <i>Name of RN</i></p>		
<p>determined that _____ is competent to <i>Name of Staff Person</i></p>		
<p>administer G/J tube bolus feedings to : _____. <i>Name of Individual</i></p>		
<p>_____ <i>RN's Signature</i></p>	<p>_____ <i>Date</i></p>	<p>_____ <i>Phone Number</i></p>
<p>_____ <i>Staff Person's Signature</i></p>	<p>_____ <i>Date</i></p>	