


Name of Policy: Nasojejunal (NJ) and Oral Jejunal (OJ) Tube Placement Policy Number: 3364-110-05-17 Approving Officer: Chief Nursing Officer (CNO) Responsible Agent: Chief Nursing Officer (CNO) Scope: Nursing Administration		 Effective date: 4/8/2021 Original effective date: 4/8/2021	
Key words:			
<input checked="" type="checkbox"/>	New policy proposal	<input type="checkbox"/>	Minor/technical revision of existing policy
<input type="checkbox"/>	Major revision of existing policy	<input type="checkbox"/>	Reaffirmation of existing policy

(A) Policy Statement

This policy of the University of Toledo Health Science Campus (HSC) UT Medical Center and the Department of Nursing outlines the process for nasojejunal (NJ) and oral jejunal (OJ) tube placement for all nursing and ordering providers that may participate in the placement of NJ/OJ tubes.

(B) Purpose of policy

To create guidelines for safe placement of nasojejunal (NJ) or oral jejunal (OJ) tubes in patients.

(C) Scope

A practical guideline for the health care providers involved in ordering and placing NJ and OJ tubes.

(D) Procedure

- 1) In order to provide safe and efficient care to patients while attempting to minimize unnecessary radiation exposure of the nurse who has received the training and demonstrated competency may facilitate NJ/OJ tube placement.
- 3) Every patient should undergo radiography to confirm proper position of an NJ or OJ tube before feeding is initiated.
- 4) If the desired location of the tube is not reached on the initial placement a follow up radiograph should be obtained 24 hours after initial placement as the majority of tubes migrate to the desired location without additional intervention.
- 5) In the event the tube does not reach the desired position the radiology department can offer fluoroscopic guidance to the nursing team to help further the tube placement.

(D) Contraindications

These contraindications are not absolute, but in these patient groups the insertion of a NJ or OJ tube must be discussed with the medical team in charge of the patient's care. The decision and plan of care should be documented in the patient's medical notes.

Such patients require NJ/OJ tube insertion under fluoroscopic control.

