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Feeding tube placement

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Before I start my reflection on the feeding tube module and the blind nasoentreric Feeding tube insertion, I would like to give you a brief history of what I already have done with my experience in the military. When I was preparing to deploy with the Army we had to receive Survival, Evasion, Resistance and Escape (SEER) training and Combat Life Savings class. While in both classes or schools I learned how to properly administer a breathing tube and how to receive a feeding tube. Although I couldn't have the breathing tube done on myself because I had nose surgery. However, I didn't know it at the time, but these tools allowed me to understand what we should learn during this module. While the protocols for how we completed both lifesaving tools were drastically different from the medical field. I will give one example and then move onto the actual module. One real life scenario we learned is that when down rage you may not have lube for the nasal and the second-best thing is your saliva and while this may not be sanitary it was efficient when the time comes.

The first module I reviewed was the nasoentric tube insertion and this section is very important for students to learn but I must mention that I did come into this module with a lot of the knowledge presented from this section because of my previous experience but this should remain in the module. The video that we watched was informative on not only how to apply this application but the little tricks that may help you when performing it on the patient. The second

module was the initial reading of the validation of image interpretation for direct vision-guided feeding tube placement. But this was one only the beginning of what I had learned from because I directed my attention Nutrtioncare.org and within the aspen directory. The initial study by Stephen and others was slightly confusing. I say this because going into the module I thought we were going to learn how to complete a tube feeding procedure rather than the data behind which process is better. I do have to mention that knowing this knowledge and how it has advanced is important to know later when we start our rotations and our careers. Going into this study, I knew about some of the risk that may come from tube feeding and what some of the complications could be as well.

In my opinion, I think this module should be clearer and have more videos on how to perform a tube along with what is already included for us, so we have the background information as well. I mention this, because when I viewed the Nutrition care site, I was bombarded with about 20 sources and at first, I was slightly confused. I believe in the future; the course should site just the sources they would like us to view instead of leading us to this site. With this sourcing, the student would be able to view the modules deemed the most important, rather than going through some of the links that could give us valuable information but may be introduced too early on into the program and may be misinterpreted. However, after I was able to decide what sources, I think I needed to go through, which I still am unaware of, I learned the ASPEN practice recommendations.

While I reviewed the online resources on the Evidence behind the BTF, I learned some valuable information that I will be able to use if I ever come across myself having to use these protocols with one of my patients. Some information I learned was how to adequately assess the patient, procedures for acute or long-term care and the safety protocols that come with this

intervention. I did not know that there were specific protocols to use when it comes to storage, sanitation and support while implementing tube feeding. I also didn't know there were different tube sizes, types and the application technique's that are used in different procedures. I think if the modules I mentioned above were individually sited on Moodle, it could make the module more assessable and easier to digest the information. I think if these actions were taken, the module should stay in the course but with everything laid out how they are I think it is very saturated with information and the less steps to get to the information the better. Overall, I think I came away from this module with the data and information the I need to prepare myself for what may lay ahead of this program and my rotations to perform my best and in the best interest of my future patients.