

**Instructions:**

**DISLODGED/DISPLACED TUBE CHECKLIST**

**Proactive Risk Management:** If a person receiving services/supports has this identified risk factor, this checklist can be utilized when developing and/or reviewing/revising a risk plan.

**Educational Tool:** Training curriculum, both general and individual-specific, can incorporate the information on this checklist.

**Addressing Specific Incidents:** As an incident occurs, the team can work through the variables that could have been contributing factors and ensure appropriate actions are taken to reduce the likelihood of a future incident of a similar manner.

Issue	#	GENERAL QUESTIONS
<input type="checkbox"/>	1	Where did it occur (e.g., during transport, in the bedroom, etc.)?
<input checked="" type="checkbox"/>	2	Was feeding in progress?
<input type="checkbox"/>	3	What was the activity (e.g., preparing to bathe, recreation, getting into a vehicle, found dislodged while asleep, etc.) at the time the tube was dislodged?
<input type="checkbox"/>	4	Was the tube inadvertently caught on clothing, furniture or other item?
<input type="checkbox"/>	5	Was the tube being purposely adjusted/moved in or out of the abdomen, when it was dislodged?
<input type="checkbox"/>	6	Did the tube have markings or numbers indicating the distance in or out of the abdomen (usually at the level of the collar or external bumper)? If so, how often is it read and recorded?
<input type="checkbox"/>	7	Is the length of the tube outside of the body recorded on a log or in a progress note? If so, how often?
<input type="checkbox"/>	8	If there is a change in the level recorded, is this change documented? Who is informed of the change?
<input type="checkbox"/>	9	Was this tube ever in too far? If so, when?
<input type="checkbox"/>	10	Did the person pull the tube out? If so, was it intentional or unintentional? Was it observed or unobserved?
<input type="checkbox"/>	11	Was the displacing preceded by severe coughing or vomiting?
<input type="checkbox"/>	12	How was the tube anchored to the body?
<input type="checkbox"/>	13	Was an external bumper/disc or collar in place?
<input type="checkbox"/>	14	If it was not, when was it last observed to be in place?
<input type="checkbox"/>	15	If it was in place, how often is it checked?
<input type="checkbox"/>	16	When was the last date/time of documentation that it was checked?
<input type="checkbox"/>	17	Was there an internal balloon? If so, was it still inflated or ruptured when displaced?
<input type="checkbox"/>	18	How long had the tube been out? If not known, when was it last noted to be in place?
<input type="checkbox"/>	19	When was the last time (date, shift, hour) the tube was dislodged?
<input type="checkbox"/>	20	When was the last time the tube was routinely replaced/changed?
<input type="checkbox"/>	21	What was the date of the original placement of this tube?
<input type="checkbox"/>	22	Has the person ever had a gastric button to replace the external tubing?

**AFTER THE INCIDENT**

<input type="checkbox"/>	23	What changes have been made to prevent further incidents of a dislodged/displaced tube?
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**STAFFING ISSUES/STAFF TRAINING ISSUES**

**Note:** Training should be competency-based (hands-on implementation of procedures to ensure staff understand and can perform)

<input type="checkbox"/>	24	Have direct support staff been formally trained on the care of the feeding tube?
<input type="checkbox"/>	25	What was the staffing ratio at the time the tube was dislodged/displaced or presumed to have been dislodged/displaced?
<input type="checkbox"/>	26	What should the staffing ratio have been at that time?

**MONITORING BY MANAGEMENT**

<input type="checkbox"/>	27	How often is the condition of the tube observed by a team member other than direct support staff?
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**PERTINENT DOCUMENTATION**

<input type="checkbox"/>	28	Training records regarding care of feeding tube for staff on duty 24 hours prior to the displaced tube being found
<input type="checkbox"/>	29	Copy of documentation regarding the length of the tube outside of the body

**Note:** Training should be competency-based (hands-on implementation of procedures to ensure staff understand and can perform)

Name

Date