## **Tube Feeding Log - Changing of Tubing**

| Student Name: Date of Birth:              |   |  |  |                                  |  |
|---|---|--|--|----------------------------------|--|
| replaced every 24 ho care plan. Tubing is | nd/or bags for school are<br>ours. Extension tubing a<br>to be rinsed/washed ou<br>gs need to be replaced i | and syringe must be<br>ut with every use and | replaced at least of placed to air dry | every 4 weeks, with all ports of | , or as stated in the pen. Any tubing, |
| Date Changed                              | Time Changed  | Supplies                                     |  |                                  | Initials                               |
|   |   | ☐ Tubing                                     | ☐ Syringe                              | □ Bag                            |  |
|   |   | ☐ Tubing                                     | ☐ Syringe                              | □ Bag                            |  |
|   |   | ☐ Tubing                                     | ☐ Syringe                              | □ Bag                            |  |
|   |   | ☐ Tubing                                     | ☐ Syringe                              | □ Bag                            |  |
|   |   | ☐ Tubing                                     | ☐ Syringe                              | □ Bag                            |  |
|   |   | ☐ Tubing                                     | ☐ Syringe                              | □ Bag                            |  |
|   |   | ☐ Tubing                                     | ☐ Syringe                              | □ Bag                            |  |
|   |   | ☐ Tubing                                     | ☐ Syringe                              | □ Bag                            |  |
|   |   | ☐ Tubing                                     | ☐ Syringe                              | □ Bag                            |  |
|   |   | ☐ Tubing                                     | ☐ Syringe                              | □ Bag                            |  |
|   |   | ☐ Tubing                                     | ☐ Syringe                              | □ Bag                            |  |
|   |   | ☐ Tubing                                     | ☐ Syringe                              | □ Bag                            |  |
|   |   | ☐ Tubing                                     | ☐ Syringe                              | □ Bag                            |  |
|   |   | ☐ Tubing                                     | ☐ Syringe                              | □ Bag                            |  |
|   |   | ☐ Tubing                                     | ☐ Syringe                              | □ Bag                            |  |
|   |   | <u>I</u>                                     |  |                                  |  |
|   |   |  |  |                                  |  |
| Staff Signature                           |   |  | Staπ ı                                 | Initials                         | Date                                   |
|   |   |  |  |                                  |  |
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