Review Of Enteral Feed Preparation Process in Neonatal Intensive Care Unit (NICU)

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Introduction

Human breast milk is regarded as ‘medication’ and counter checking is necessary to prevent misadministration.

Background

In the past, one feed nurse was assigned on each shift to prepare enteral feed in NICU. Counter checking was not fully imposed then and the feed nurse had to call the primary nurse of respective infants to counter check patient’s identification to ensure the right breast milk prepared. At times primary nurse might be held up and unavailable to counter check. Considering that several bottles of human milk being prepared for each patient thereby increasing the chances of errors. In 2016, there were a total of 6 milk related incidents. Lapses in checking and failure to counter check had led to the incidents.

Methodology

- Two feed nurses to prepare enteral feed
- Both nurses to counter check the name label on the bottle of the expressed breast milk with the name label on the feed changes book using two patient’s identifiers
- Milk was prepared in a designated enclosed room under aseptic technique and adhering to the universal precaution (operator changes gloves after each patient)
- Feed nurse would sort out the prepared feeds and distribute to the primary nurse in charge

Results

- Zero milk error since implementation
- Random audit was done and has shown consistency and standardization in the process of feed preparation
- No additional manpower cost incurred
- Patient care is not compromised as primary nurse is not required to leave her cubicle to prepare feed

Conclusion

Milk preparation is an important task that requires hygienic preparation and vigilant check to target zero harm to the vulnerable sick infants. The improved milk preparation process is efficacious, feasible and safe. This initiative has then been introduced and implemented in Special Care Nursery as well.