**How to Perform a Paediatric Gastric Aspirate**

1. **Gather materials needed for the procedure. Put on a N95 mask and gloves.**
2. **Immobilize the child with a sheet or his/her upper clothes.**
3. **Measure expected tube distance from tip of nose, to the tragus of the ear, then to the stomach. Mark the tube.**
4. **Moisten the feeding tube in the child’s mouth.**
5. **Pass the tube through the child’s nose to the stomach.**
6. **When tube reaches the pen mark, aspirate with a 20mL syringe to a goal volume of 5mL.**
7. **Slowly remove feeding tube once specimen is collected.**
8. **Place the specimen obtained in the appropriate specimen container(s).**
9. **Neutralize aspirate with sodium bicarbonate (NaHCO₃) based on sample size:**
   - <5mL = 1mL of NaHCO₃
   - ≥5mL = 2mL of NaHCO₃
10. **Tightly secure the lid and wipe container with 70% alcohol. Label samples & complete lab request forms. Send specimens to the lab.**
11. **Dispose of all sharps and hazardous waste material in the appropriate containers. Clean all surfaces and wash hands.**

**Note:** Child should fast at least 4-6 hours prior to the procedure including no medications, water, food or breast milk.

**Materials**
- N95 masks & gloves
- Sheet to immobilize
- 8-10 French or larger feeding tube
- Two 20mL syringes
- One 10mL syringe
- Pen/Marker
- Sterile water
- Sodium Bicarbonate (8.5%) with a needle
- Specimen containers
- GXP (if necessary)
- Smear (if necessary)
- Culture
- Lab request form(s)

**To obtain the highest yield, 3 gastric aspirates should be collected when possible.**

**If <5-10mL of specimen:**
1) Re-position the tube and/or child and pass tube further into the stomach while continuing to aspirate.
2) If still <5-10mL of specimen, instill 20-30mL of sterile water into the tube and re-aspirate stomach contents.