

Survey: What is the current practice around Gastric Residual Volume (GRV) measurement in UK PICUs & NICUs?

We would like just one survey returned per unit – this survey should be completed collaboratively between a senior doctor, a nurse who still does clinical practice (and takes patients) and a dietitian. If done collaboratively it should take about 10-15 minutes to complete.

Best Wishes,

The GASTRIC study team

Please confirm if you are completing the survey on behalf of a Paediatric Intensive Care Unit (PICU) or Neonatal Intensive Care Unit (NICU).

- ☐ PICU
☐ NICU

Introduction

We would like to find out what standard or usual practice is around the measurement of Gastric Residual Volume (GRV) in your PICU.

GRV measurement is defined as aspirating all of the stomach contents to measure a 'volume'. We are not talking about aspirating a small amount of the tube to test the pH to confirm tube position, nor that obtained from surgical children who have continuous suction applied.

We recommend that a senior clinical nurse (who still does clinical practice) along with a senior doctor and a dietitian complete this survey together as we would like just one survey returned per PICU.

Which PICU do you work at?

Role of individuals who are completing this survey:

- ☐ Senior Doctor (Consultant)
☐ Middle Grade Doctor (SpR)
☐ Junior Grade Doctor (SHO)
☐ Nurse
☐ Dietitian

What band of nurse are you?

What band of dietitian are you?

Introduction

We want to find out how Gastric Residual Volumes (GRV) are measured and used in your NICU. GRV measurement is aspirating ALL of the stomach contents to measure a 'volume' or 'aspirate' and often to look at the colour. This is NOT the small amount that is aspirated to test pH to confirm tube position.

We recommend a senior clinical nurse (who still does clinical practice) along with a senior doctor and/or a dietitian sit down together to complete this survey and we would like just one survey returned per NICU. If this is not possible, please respond without such a meeting.

Which neonatal unit do you work at?

Is the unit?

- ☐ NICU surgical and medical
- ☐ NICU medical only
- ☐ LNU
- ☐ SCBU

What are the job positions of the people completing this survey?

- ☐ Senior Doctor (Consultant)
- ☐ Middle Grade Doctor (SpR)
- ☐ Junior Grade Doctor (SHO)
- ☐ Nurse
- ☐ Dietitian

What band of nurse are you?

What band of dietitian are you?

Does your unit have written feeding guidelines/ protocol for medical and surgical babies?

- ☐ Yes
- ☐ No

We would greatly appreciate it if you would upload the feeding guidelines/protocol using the 'upload document' link below. Alternatively, they can be emailed to the GASTRIC study team at gastric.study@liverpool.ac.uk.

Are your standard NG feeds:

- ☐ Intermittent
- ☐ Continuous

Is there specific guidance about how Gastric Residual Volume should be measured and interpreted - for example a protocol or guideline?

- ☐ Yes
- ☐ No

We would greatly appreciate it if you would upload the guidelines/protocol using the 'upload document' link below. Alternatively, they can be emailed to the GASTRIC study team at gastric.study@liverpool.ac.uk.

Does Gastric Residual Volume measurement differ between the medical and surgical babies?

- ☐ Yes
☐ No

Please describe how it differs?

The rest of the survey is now ONLY asking about the management of preterm and term medical babies - not surgical babies.

How often do staff in your unit measure Gastric Residual Volume? (this question is NOT about aspirating a small amount to test pH, ONLY about how often you measure Gastric Residual Volume)

- ☐ Once a day
- ☐ Before every feed
- ☐ Only when clinically indicated
- ☐ Other

Please provide further details regarding how staff measure Gastric Residual Volume below; if 'other' has been selected, please also describe below:

Are Gastric Residual Volume measured for all babies, or just below a set gestational age/birth weight or for a specific condition?

Is the specific guidance for Gastric Residual Volume measurement followed and actually undertaken as per protocol? If needed, please ask a clinical member of your nursing team.

- ☐ Always
- ☐ Usually
- ☐ Often
- ☐ Rarely
- ☐ Never

Why is the guidance not always followed?

Who usually decides what to do with concerning Gastric Residual Volume aspirates in the first instance?

- ☐ Senior Doctor (Consultant)
- ☐ Middle Grade Doctor (SpR)
- ☐ Junior Grade Doctor (SHO)
- ☐ Bedside Nurse
- ☐ Nurse in charge of shift (senior nurse)

What band of nurse?

What would make a nurse seek advice from the medical team?

If you indicated that more than one person is involved in decision-making, please explain which factors may influence who makes the decision below:

How much does volume of the aspirate affect your decision around Gastric Residual Volume?

- ☐ 1 (Not at all) ☐ 2 ☐ 3
☐ 4 ☐ 5 (Very much)

Please specify how:

How much does colour of the aspirate affect your decision around Gastric Residual Volume?

- ☐ 1 (Not at all) ☐ 2 ☐ 3
☐ 4 ☐ 5 (Very much)

Please specify how:

What do you do with Gastric Residual Volume once obtained: return it or discard it?

- ☐ Return
☐ Discard
☐ Other

Please explain the factors that influence the decision to return or discard the Gastric Residual Volume. If 'other' selected, please also explain below:

Thank you for participating in the survey, your responses are greatly appreciated! If you have any further comments you wish to make, please provide below:

If you wish to be contacted about the study, please add your email address below (optional):
