

## Procedure for the use of Oxygen

<b>Approved by: Ian Marshall, Chairman</b> <b>Originator: Catherine Power, Head of Clinical Services</b> <b>Date of approval: September 2017</b>	<b>Signature:</b>  .....
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### Policy area

Use, Storage, Handling and Administration of Oxygen

### Aim and Scope of Procedure

To provide instructions for the use of oxygen and the oxygen concentrators in the Day Hospice.

- Ordering, supply and delivery of oxygen
- Use of oxygen by individual patients
- Storage of oxygen cylinder
- Storage and care of oxygen concentrator
- Administration of oxygen
- Action to be taken in the event of adverse reactions
- Incident reporting
- Product recalls and hazard/alert notices
- Moving and Handling of oxygen equipment

### Staff Responsibilities

- |                           |                                                                                                                                                                                                                                                      |
|---------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Head of Clinical Services | <ul style="list-style-type: none"> <li>• To ensure that the procedure is in place and follows appropriate guidelines</li> </ul>                                                                                                                      |
| Team Leader, Day Hospice  | <ul style="list-style-type: none"> <li>• To ensure that the procedure regarding oxygen is adhered to</li> <li>• To ensure that the use, storage and handling of oxygen equipment is safely carried out within the scope of this procedure</li> </ul> |
| Clinical Staff            | <ul style="list-style-type: none"> <li>• To follow internal procedure regarding oxygen use</li> <li>• To ensure that patients receive oxygen safely and there is no hazard to other patients</li> </ul>                                              |

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## Method:

### Ordering and Supply of Oxygen:

As the Hospice uses oxygen infrequently the need to replace cylinders is on a needs basis. When an oxygen cylinder requires replacing Day Hospice staff will contact the supplier (BOC) by phone and request a replacement as per local agreement.

- The Hospice has a rental agreement with BOC who charge per replacement cylinder. The finance department are invoiced directly and records of transactions are retained
- When an order is placed, a delivery date will be requested and a member of the clinical team will be designated to receive the new cylinder
- When delivered the empty cylinder is replaced with a new one and checked by the supplier to ensure the cylinder head is functioning effectively

### Procedure for Delivery of Cylinders:

The gas supplier (BOC) reports to the Day Hospice Team Leader on arrival at Primrose Hospice who will attend the delivery. On completion of delivery the driver will sign the delivery note and hand it to the Day Hospice Team Leader or her deputy. The named person who receives the oxygen cylinder should perform some basic checks before accepting it. These include:

- The cylinder colour code and the name of the gas as denoted on the collar are the same
- The cylinder size and that marked on the collar are correct
- The cylinder dates are present and correct
- The tamper evident seal is in place

The Oxygen Delivery Log (appendix) should then be completed and signed by the named person who has accepted the delivery.

### Use of Oxygen by Individual Patients:

- Patients who normally require home oxygen and have therefore had a prescription for oxygen from their own GP may receive oxygen whilst attending the Day Hospice
- Copy of Prescription to be obtained and scanned into SystemOne
- Patients will be advised to bring their own nasal cannulae/oxygen mask and tubing from home for use in the Day Hospice

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- Oxygen giving sets may be issued from Day Hospice stock and will be discarded as clinical waste at the end of the day
- Patients may bring their own oxygen cylinders from home (usually portable) for use during their journey to and from the Day Hospice and these are to be used in compliance with this procedure

## Storage and Use of Portable Oxygen Cylinders:

- The oxygen cylinders are for use in an emergency situation e.g. sudden collapse; in the case of unexpected loss of power to the oxygen concentrator whilst in use, or, if necessary to facilitate transfer of an oxygen-dependant patient around the Day Hospice
- When not in use the oxygen cylinders must be stored in the sluice with mask and giving set in place for emergency use
- Oxygen cylinders are to be checked weekly by a member of the nursing staff to ensure effective function; checklist on sluice wall to be signed to provide record of this activity
- Due to the combustible nature of oxygen there should be no naked flames, sparking objects or aerosols in the vicinity of the oxygen cylinder, and no direct contact with oil, grease or alcohol
- Should a cylinder become empty it must be removed from the storage area until collection by BOC

## Storage and Use of Oxygen Concentrators:

- Oxygen concentrators are to be used by only one patient each day
- Air filter and oxygen connector to be washed after each individual patient use or weekly if not in use, by removing and washing in a solution of warm water and washing up liquid. It should be rinsed thoroughly with warm water and towel dried and the filter should be completely dry before reinstalling
- Oxygen concentrators to be stored adjacent to appropriate electrical socket in the lounge for immediate use. However, it should be a minimum of five feet away from hot sparking objects or naked flames

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## Administration of Oxygen

- Oxygen equipment to be used, handled and administered by qualified staff only
- All staff to follow guidelines as per Royal Marsden Manual of Clinical Nursing Procedures

## Action to be taken in the case of adverse reaction

- As oxygen is the only medical gas used at Primrose Hospice adverse reaction is unlikely other than dry mouth, coughing and fatigue subsequent to prolonged inhalation.
- In the case of concern, report back to the prescriber (most likely GP)

## Incident Reporting

- Incident reporting should follow normal procedure i.e. complete an incident form and report to line manager

## Product recalls and hazard/alert notices

- See Hazard Warning/Drug Alert Procedure

## Moving and Handling of Oxygen Equipment

- All staff including volunteers to receive annual training and updates on moving and handling issues
- Oxygen equipment in use in the Day Hospice to be placed so that it does not pose any hazard to other patients, staff and volunteers with specific regard to trailing tubing or leads etc.

## References:

BOC: Medical safety guidelines on storage and handling of oxygen cylinders

Oxygen Therapy: Primary Care Training Group

Royal Marsden Hospital Manual of Clinical Nursing Procedures (eighth edition)

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