ADMINISTRATION OF OXYGEN

PURPOSE

To prevent Hypoxia.

To promote comfort and breathing efficiency.

APPLIES TO

Ч	Registered Nurses
	Licensed Practical/Vocational Nurses
	Therapists
	Other (Identify):

EQUIPMENT/SUPPLIES

- Oxygen supply source and delivery device.
- Oxygen flow meter/gauges.
- Portable cart for small cylinder, liquid oxygen portable unit, and cart.
- Carrying shoulder cases or strap for tank or liquid oxygen portable unit.
- Humidifier with tubing (permanent or disposable), adapters, if ordered.
- Oxygen analyzer.
- Cannula with extra on hand; selection for comfort and protection of skin and mucous membranes.
- Reservoir cannula, if used.
- Venturi or Bi-Flo mask, if ordered.
- Water-soluble lubricant.
- Catheter for transtracheal devices, if used.
- Extra delivery system supplies on hand.
- Mild soap, warm water for cleansing delivery adjuncts.

SPECIAL CONSIDERATIONS

Oxygen is used conservatively in clients with chronic lung disease because high levels of oxygen may suppress breathing stimuli.

- 1. Signs and Symptoms of Hypoxia:
 - a. Restlessness.
 - b. Headache.
 - c. Visual disturbances.
 - d. Confusion or change in behavior.
 - e. Increased respiratory rate.
 - f. Increased heart rate.
 - g. Elevated blood pressure.
 - h. Shortness of breath (dyspnea).
- 2. Advanced Symptoms:
 - a. Decreased blood pressure.
 - b. Decreased heart rate.
 - c. Cyanosis Metabolic acidosis.
- 3. Chronic Symptoms:
 - a. Clubbing of fingers and toes.
 - b. Right sided heart failure.
 - c. Thrombosis.
 - d. Polycythemia (excess number of red blood cells).

PROCEDURE

- 1. Obtain orders from the primary care physician for:
 - a. Type of oxygen therapy.
 - b. Administration device and liter flow rate or concentration.
 - c. Arterial blood gas values, if available.
 - d. Respiratory therapy consultation (as ordered).
- 2. Discuss the indications, purposes, and anticipated outcomes of oxygen therapy with the client and family.

- 3. Evaluate the client's oxygen needs:
 - a. Prescribed flow rate or concentration.
 - b. Desired portability.
 - c. Humidity requirements.
 - d. Continuous or intermittent use.
- 4. Select an oxygen delivery system:
 - a. High-pressure cylinder.
 - b. Oxygen concentrator.
 - c. Liquid oxygen system.
- 5. Coordinate order and delivery of equipment and supplies with the vendor. Follow vendor and manufacturer instructions for equipment operation.
- 6. Teach or review oxygen safety precautions with the client and family:
 - a. Do not smoke.
 - b. Do not use oxygen near stove, space heater or heat source.
 - c. Do not use electric blankets or heating pads.
 - d. Do not use polyester or nylon bed linens or clothing. Instead, use all cotton bed linens and clothing to prevent static electricity.
 - e. Make sure that all electrical equipment is properly grounded.
 - f. Avoid the use of alcohol and oil-containing skin care products because they are flammable.
 - g. Do not run oxygen tubing under clothes, bed linens, furniture, rugs, etc.
 - h. Keep the oxygen container upright.
 - i. Turn off the oxygen when it is not in use.
 - j. Alert the local fire department and rescue squad about the use and storage of oxygen in the home.
- 7. Wash hands. Refer to the Hand Washing procedure.

Nasal Cannula Administration

You may deliver up to 6L/minute and allow a range of oxygen concentration of 22-40%. Humidification of low-flow oxygen through nasal cannulae is not considered essential and may be contraindicated because it supports bacterial growth.

- 1. Assemble regular cannula with prongs and tubing, cannula with Oxy-Ears, or cannula with nose pads around nasal prongs.
- 2. Place straight prongs into nares with smoother side against skin. Curve prongs downward into nares.
- 3. Place cannula tubing snugly around each ear and under the chin.
- 4. Adjust to fit securely under chin or by elastic around head. Pad tubing with gauze on face and ears as needed.
- 5. Apply natural or K-Y gel to nasal passages to prevent friction. (*Use only water soluble products and not petroleum based. Petroleum products are combustible, not absorbed by the body, and difficult to clear from the mucosa*).
- 6. Set flow rate and turn on oxygen supply.

Face Mask Administration

Four Types of Masks: Simple face mask, partial rebreather mask with reservoir bag, non-rebreather mask with reservoir bag, venturi mask used specifically to control oxygen concentration.

- 1. Assemble mask and tubing.
- 2. Select a mask that fits the client snugly and offers correct oxygen concentration.
- 3. Place pads around mask if face lacks supporting tissue or is edematous. Pad elastic straps with gauze for comfort.
- 4. Turn on oxygen flow to liters prescribed. If reservoir bag is attached, partially inflate it with oxygen. Oxygen flow must be at a level to prevent the bag from collapsing. (A tight fit prevents oxygen from escaping around the eyes or nose.)
- 5. Remove mask and use cannula when eating.
 - a. Change mask and tubing per agency policy and provide skin care to face.
 - b. Check equipment frequently. If a humidifier is attached maintain appropriate water level.

RELATED PROCEDURES

Suctioning-All, Pulse Oximetery, Arterial Blood Gas Sampling