Name of Policy:	**Oxygen delivery devices for oxygen therapy**
Policy Number:	3364-136-02-01
Department:	Pulmonary Services
Approving Officer:	Senior Hospital Administrator
Responsible Agent:	Director, Pulmonary Services
Scope:	The University of Toledo Medical Center Pulmonary Services Department

THE UNIVERSITY OF TOLEDO MEDICAL CENTER

Effective Date: June 1, 2023

Initial Effective Date: 12/1/2004

_____ New policy proposal
_____ Major revision of existing policy
__x__ Minor/technical revision of existing policy
_____ Reaffirmation of existing policy

(A) Policy Statement

Respiratory Care Practitioners will use different oxygen delivery systems as ordered by a qualified physician. Oxygen masks will be utilized for the delivery of specific oxygen concentrations (Fi02), as ordered by a qualified physician. The oxygen delivery devices listed in this procedure will be available for all sizes of patients served by this hospital.

(B) Purpose of Policy

To ensure that the Respiratory Care Practitioner maintains high quality patient safety and precaution standards while utilizing any of the delivery systems for oxygen therapy.

(C) Procedure

I. Oxygen Aerosol Delivery Devices:

a. Aerosol systems are used when a specific oxygen concentration is ordered and when humidity is desired along with the oxygen therapy. Aerosol masks are capable of delivering an FIO2 from .21 to .98 (actual analyzed FIO2 may not reach .98). Level of water in the disposable bottle must be monitored during patient care interactions.

II. Non-Rebreather Masks:

a. Non-rebreather masks are used when a maximum FIO2 of 1.0 is desired. The attached reservoir bag should have a sufficient flow of oxygen to prevent it from deflating by more than one-third on inspiration.
b. Non-rebreather masks have a one-way valve between the reservoir bag and the mask, as well as one one-way valve on one of the two exhalation ports on the sides of the mask.

III. Nasal Cannula:

a. Nasal cannulas are used for the delivery of oxygen from 0.5 liters per minute to 6 liters per minute.
b. High-Flow system: delivers heated, humidified high flow oxygen up to 60 liters per minute using a special cannula. Designed to deliver 100% relative humidity from 35-37 degrees C without discomfort to the patient or damage to the airway. A specific Fi02 can be delivered with a blender. Follow manufacturer's recommendations for set up and delivery.

IV. Set-up:

a. After verification of the prescribed oxygen therapy, the practitioner should assemble the appropriate equipment and proceed to the patient's room.

b. The practitioner should identify himself/herself and then identify the patient, before putting the equipment on the patient.

c. Sterile water should be used when humidification is ordered for any oxygen therapy. Humidification with the nasal cannula is used only on flows greater than 4 lpm (i.e.: 5-6 lpm), for adults, unless otherwise ordered by a physician. Humidification will be used at all flows for pediatric patients.

d. Oxygen set-up information, including type of delivery system, time, oxygen saturation and any pertinent patient status comments will be documented in the electronic medical record. The appropriate oxygen charge (set-up, if applicable and daily) must also be entered into the electronic medical record.

Approved by:		**Review/Revision Date:**
/s/ Michael Taylor Director, Pulmonary Services	06/22/2023 Date	03/12/2001 05/15/2002 04/18/2005 03/05/2008 03/09/2011 08/03/2012 12/01/2015 04/08/2019 12/30/2022 06/01/2023
/s/ Shahnaz Rehman, M.D. Medical Director	08/01/2023 Date	
/s/ Russell Smith Senior Hospital Administrator	06/29/2023 Date	
Review/Revision Completed By: *Director, Pulmonary Services*		**Next Review Date: June 1, 2026**
Policies Superseded by This Policy:		

It is the responsibility of the reader to verify with the responsible agent that this is the most current version of the policy.