

Oxygen Therapy & Humidification (Adults)

Statement of Best Practice

Patients requiring Oxygen therapy and humidification will have care delivered safely by a registered practitioner, optimising their comfort and minimising adverse effects.

Introduction

The administration of supplemental oxygen is an essential element of appropriate management of a wide range of clinical conditions. However oxygen should be regarded as a drug and requires prescribing in all but emergency situation.

Standards of Care

- A full comprehensive assessment of the patient is carried out to identify the appropriate oxygen therapy and if there is a need for humidification.
- Oxygen is prescribed according to a target saturation range of 91-98% for most acutely unwell patients or 88-92% for those at risk of hypercapnic respiratory failure.
- Oxygen therapy is routinely reviewed and incorporated into the patient's management plan.
- Patients receiving oxygen therapy receive observations of vital signs, clearly documented according to local trust documentation.
- If Oxygen therapy is required for more than a few hours humidification should be considered as oxygen therapy dries the airways, mouth and throat.
- Oxygen delivered via a tracheostomy should be humidified as it is introduced directly into the lower airway and bypasses the moistening and filtering effects of the upper airway.
- Oral hygiene should be performed to maintain a comfortable clean, moist and free from infection mouth as per local trust guidelines.
- Patients requiring oxygen therapy whilst being transferred from one area to another should be accompanied by a trained member of nursing staff.

Education and Training

- All staff administering oxygen therapy must have received training in the oxygen administration systems, normal vital sign parameters and the oxygen equipment used with the unit, and an understanding of humidification and when this is required.
- National Competency Framework for Adult Critical Care Nurses is available from www.cc3n.org.uk

N.B. In an emergency situation any registered practitioner can commence oxygen therapy without an oxygen prescription. Oxygen should be given to the patient immediately without a formal prescription or drug order but documented later in the patient's record.

References

Critical Care National Network Nurse Lead (CC3N)

National Competency Framework for Adult Critical Care Nurses www.cc3n.org.uk

Duck, A. (2009) Does Oxygen need humidification? Nursing Times 14-December 2009

O'Driscoll, B.R., Howard, L.S. and Davidson, A.G. (2008) BTS guideline for emergency oxygen use in adult patients. Thorax 63 Supplement 6

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Review date July 2015

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