

Medication: Oxygen	PDN: 6966.02	Last Updated: May 10, 2013	PMD: Andrew Travers*	PDC: Steven Carrigan*	Page 1 of 2
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OXYGEN

1.0 Classification

- Element/gas

2.0 Mechanism of Action

- Increases oxygen levels by increasing:
 - Inspired percentage of oxygen
 - Oxygen concentration in the alveoli
 - Arterial oxygen levels
 - Oxygen delivered to tissues

3.0 Indications

- Hypoxia

4.0 Contraindications

- No absolute contraindications, but should only be given with hypoxia and not to obtain a state of hyperoxia

5.0 Precautions

- Oxygen is a vasoconstrictor; aiming to achieve an SpO₂ of 100% can be detrimental in situations such as ischemic chest pain or ROSC
- Some patients with COPD are at risk of being CO₂ retainers, monitor closely if providing these patient with supplemental oxygen

6.0 Route

- May be given passively or actively with various devices, including:
 - Nasal cannula
 - Nebulizer
 - Non-rebreather
 - Bag-valve-mask
 - Venturi (patient may have their own)
 - CPAP

7.0 Dosage

- Appropriate delivery device and flow rate should be chosen to obtain an SpO₂ based on the patient's condition:
 - Ischemic chest pain: 94-99%
 - ROSC: 94-99%
 - Sepsis: 100%
 - Stroke: > 92%
 - Respiratory distress: > 92%
 - Patient with COPD: 88-92%
 - As directed by [1] Special Patient Program, [2] Clinical Support Desk and/or [3] Online Medical Control

8.0 Supplied

- Oxygen tanks of 3 sizes:
 - M = 3000 L volume (tank factor 1.56)
 - E = 660 L volume (tank factor 0.28)
 - D = 400 L volume (tank factor 0.16)
- **Note:** Calculation for time remaining in tank equals = $\frac{[\text{Pressure on gauge} - 200 \text{ psi}] \times \text{tank factor}}{\text{Flow rate (lpm)}}$

CPAP pressures based on oxygen flow

O ₂ Flow (lpm)	<u>Flow-Safe</u> CPAP/PEEP (cmH ₂ O)	<u>Flow-Safe II</u> CPAP/PEEP (cmH ₂ O)
6	< 1	2-3
8-9	< 1	5
10-12	1.5-2	7.5
13-14	2-3	10
15	3-4	13.0 (Max)
25	8.5-10	13.0 (Max)

9.0 May Be Given By

- PCP/ICP/ACP/CCP

10.0 Adverse effects

- Light-headedness
- Respiratory failure in a small number of patients who are CO₂ retainers

11.0 Special notes

- If patient's are within their targeted oxygen saturation, it is not necessary to administer supplemental oxygen

12.0 References

- All Clinical Practice Guidelines outline the role of supplemental oxygen when managing the various emergencies

*Electronically Signed

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