I. Title

Emergency Shut-Off of Oxygen Zone Values in UTMB Healthcare Areas

II. Policy

It is the responsibility of the unit charge nurse (unless otherwise assigned to a specific healthcare professional for that location) to shut off the oxygen zone valves in the event of an emergency that would potentially allow oxygen to escape into the immediate area or room intensifying a fire hazard.

When respiratory therapy equipment is in use, the only practical means of stopping the flow of piped oxygen (which accelerates a fire) into a patient room is by closing the pipeline zone valve(s). Zone valves typically control gas flow to several rooms: closing a valve may affect patients in more than one room. Residual pressure in the pipeline allows a short time before gas flow stops completely. Each zone valve must be labeled with the area it controls (e.g., "Oxygen Valve: Controls Rooms 901 through 906").

If a fire occurs in a room in which oxygen is in use, the zone valve(s) controlling that room must be closed, and affected patients requiring respiratory support must be immediately attended to. Failure to close the zone valve(s) risks intensifying and spreading the fire and smoke, placing more lives at risk.

The charge nurse will receive training relevant to:

- the effects of oxygen and fire
- patient care and oxygen delivery equipment
- zone valve location and areas controlled on unit
- who to notify when oxygen has been shut off
- the location of back-up oxygen tanks on unit.

Once the valve has been shut off, the decision to turn the valve back on will be made by the following:

**During normal working hours:**

- Environmental Health and Safety/Fire and Life Safety (Fire and Life Safety)
- Property Services (Maintenance)

**After hours, weekends, and holidays:**

- Galveston Fire Department
- Property Services, Shift Team

III. Responsibility

Unit Charge Nurse (or designee):

1. Assess the risk presented by the hazard to the patient (i.e., risk of free-flowing oxygen intensifying a fire and involving other combustible objects in the room). If necessary, consult with faculty anesthesiologist or ICU attending physician.
2. Provide for patient oxygen needs as appropriate. Maintains emergency supplies for patient evacuation. These supplies should enable respiratory support of patients during transport from the affected area to another smoke compartment or building.

3. If the hazard of fire is imminent, shut off the oxygen zone valve immediately. If the danger is not imminent, consult with Pulmonary Care Services, Fire and Life Safety, and Property Services when making the decision to shut off oxygen. Permission to do so is not required.

4. Communicate shut off oxygen on unit to Property Services, Pulmonary Care Services, Fire and Life Safety, and Nursing Service Director or designee.

5. Prepare patients for evacuation if indicated.

Unit Charge Nurse/Nursing Service Director (or designee) shall:

1. Call 911
2. Provide the following information to UTMB Police Dispatch or Operator, who in turn will convey the following information to Local Fire Department:
   i. Name, title and contact phone number
   ii. Which O₂ zone valve that was shut off, including: building, floor/unit and time it was shut

Environmental Health and Safety, Fire and Life Safety department shall:

1. Train and drill all hospital staff in execution of this plan

IV. Relevant Federal and State Statutes
The National Fire Protection Association (NFPA)
The Joint Commission

V. Related UTMB Policies and Procedures
UTMB Emergency Preparedness Plan

VI. Dates Approved or Amended

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VII. Contact Information
For further information about this policy or questions and comments, please contact: Environmental Health and Safety, Fire and Life Safety at: 409-747-0515 or send non-urgent comments to: ehsfire@utmb.edu.