

UTMB RESPIRATORY CARE SERVICES <b>GUIDELINE - Discharge of Oxygen Dependent Patients</b>	Policy 7.2.5 Page 1 of 1
Discharge of Oxygen Dependent Patients  Formulated: 11/91	<b>Effective:</b> 10/19/94 <b>Reviewed:</b> 08/14/23

## Discharge of Oxygen Dependent Patients

<b>Purpose</b>	To provide guidelines for the discharge of oxygen dependent patients who have chronic obstructive pulmonary disease or conditions that cause hypoxemia.
<b>Scope</b>	All patients with written prescriptions for home oxygen therapy. Respiratory Care Services will provide assistance to physicians and social services by providing information on devices and equipment and assist nursing with patient and family teaching.
<b>Physician's Order</b>	<ul style="list-style-type: none"> <li>• Device indicated (nasal cannula, aerosol, etc.)</li> <li>• FiO<sub>2</sub> or liter flow required</li> <li>• Order for ABG or Oximetry reading (if applicable)</li> </ul>
<b>Guideline</b>	<ul style="list-style-type: none"> <li>• Prior to discharge, all patients with a written prescription for oxygen should have a documented PaO<sub>2</sub> of 55 or less or a resting SaO<sub>2</sub> of 88% or less within the last 24 hours.</li> <li>• Documentation of the PaO<sub>2</sub> or SaO<sub>2</sub> will be entered into Epic under the Respiratory Other section of RCS Assessment and the physician will be notified.</li> </ul>
<b>References</b>	AARC Clinical Practice Guidelines; <u>Discharge Planning for the Respiratory Care Patient</u> , Respiratory Care; 1995; 40 (12) 1308-1312