Oxygen Needs / Standards of Care for CRU

Admission standards

Patients who admit to the CRU will be required to have 3L of O2 or less, with a noticeable decrease in any shortness of breath or symptomatic coughing in the days prior.

Therapy standards

During therapy sessions (PT/OT/Amubulation) may cause the patient to require an elevated level of oxygen to maintain an adequate O_2 Sats during and immediately after the activities. Short elevation of O_2 flow of 4L/min or more may be needed and acceptable for staff to manage as needed for short periods (10 min or less). When Patients return to their baseline or have their shortness of breath resolve they should be returned to their previous L/min. Remember to document the additional O_2 and the length of time needed.

Use of different delivery device may be used to achieve a desired FiO_2 (Fractional concentration of inspired Oxygen). Depending on the type of device different levels of O_2 flow rates are needed to reach a desired FiO_2 .

Nasal Cannula

The use of Nasal Cannula on a regular and routine basis is expected for patients on the CRU.

The Maximum flow rate is at 6L/min.

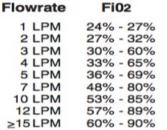


Nasal Cannula	
Flow Rate	O ₂ %
1 L/min	24%
2 L/min	28%
3 L/min	32%
4 L/min	36%
5 L/min	40%
6 L/min	44%

OxyMASK

The Oxymask device allows for a much higher flow rate (15 L/min or more) and can achieve higher FiO₂ levels at the same L/min as the Nasal Cannula.

This device should be considered if a flow rate above 6L/min is needed (or 4L/min for more than 15 minutes) to return to the patient's baseline.





OxyMIZER

The Oxymizer (sometimes referred to as a mustache cannula) allows for increased FiO₂ with lower L/min rates than Nasal Cannula.

If rates are to remain above 8 L/min converting to this device should be considered to achieve the higher FiO_2 rates with lower demand on the Facility O_2 supply system.

One of these devices should be kept on the unit to be used if a transfer to a higher level of care is delayed. Multiple High Flow O_2 devices through the entire facility could outpace the systems replenishment capacity.

Patients requiring prolonged O₂ of 4 L/min or more should be transferring to a higher level of care