# Oxygen Administration

# **Key Terms**

Dyspnoea	Hypoxemia	Humidifier
Venturi mask	Anxiety	Cannula

#### **DEFINITION:**

Method by which oxygen is supplemented at higher percentages than what is available in atmospheric air.

#### **PURPOSE:**

- 1. To relieve dyspnoea
- 2. To reduce or prevent hypoxemia and hypoxia
- 3. To alleviate associated with struggle to breathe

#### **SOURCES OF OXYGEN:**

Therapeutic oxygen is available from two sources

- 1. Wall Outlets(; Central supply)
- 2. Oxygen cylinders

#### **EQUIPMENTS REQUIRED:**

- 2. Oxygen connecting tube (1)
- 3. Flow meter (1)
- 4. Humidifier
- 5. Oxygen source: Wall Outlets or Oxygen cylinder
- 6. Tray with nasal cannula of appropriate size or oxygen mask (1)

- 7. Kidney tray (1)
- 8. Adhesive tape
- 9. Scissors (1)
- 11. Gauze pieces, Cotton swabs if needed

# CHARACTERISTICS OF LOW FLOW SYSTEM OF OXYGEN ADMINISTRATION

Method	Flow	Oxygen	Advantages	Disadvantages
	rate	concentratio		
	(L/min)	n		
		delivered		
	1	22-24 %	Convenient	Assumes an adequate
	2	26-28 %	• comfortable more than	breathing pattern
			face mask	Unable to deliver
	3	28-30 %	<ul> <li>bring less anxiety</li> </ul>	concentrations above
N 1	4	32-36 %	Allows client to talk	44 %
Nasal cannula	5	36-40 %	and eat	
	6	40-44 %	Mouth breathing does	
			not affect the	
			concentration of	
			delivered oxygen	

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Face mask	5-6	40 %	Can deliver high	•	May cause anxiety
			concentration of oxygen	•	Able to lead hotness
			more than nasal cannula		and claustrophobic
	6-7	50 %		•	May cause dirty easier,
					so cleansing is needed
	7-8(10)	60 %			frequently
				•	Should be removed
					while eating and
					talking
				•	Tight seal or long
					wearing can cause skin
					irritation on face
Venturi mask			This prevents the inhalation of		
			mixed gases.		
			The approximate oxygen		
			received is 99 per cent		
High	10-15				
concentration	litres				
oxygen masks	required				

#### **PROCEDURE:**

#### NASAL CANNULA METHOD

S.NO	NURSING ACTION	RATIONALE
1.	Check doctor's prescription including date,	To avoid medical error
	time, flow liter/minute and methods	
2.	Perform hand hygiene and wear gloves if	To prevent the spread of infection
	Available	
3.	Explain the purpose and procedures to the	Providing information fosters the
	Patient	client's
		cooperation and allays his/her anxiety
4.	Assemble equipments	Organization facilitates accurate skill
		performance
5.	Prepare the oxygen equipment:	Humidification prevents drying of the
	1)Attach the flow meter into the wall outlet	nasal mucosa
	or oxygen cylinder	To prevent entering dust from exist of
	2)Fill humidifier about 1/3 with sterile water	cylinder to the nostril
	or boiled water	
	3)Blowout dusts from the oxygen cylinder	
	4)Attach the cannula with the connecting	
	tubing to the adapter on the humidifier	
6.	Test flow by setting flow meter at 2-3L/	Testing flow before use is needed to
	minute and check the flow on the hand.	provide prescribed oxygen to the

		client
7.	Adjust the flow meter's setting to the ordered	The flow rate via the cannula should
	flow rate.	not exceed 6L/m. Higher rates may
		cause excess drying of
		Nasal mucosa.
8.	Insert the nasal cannula into client's	Proper position allows unobstructed
	nostrils,adjust the tubing behinds the client's	oxygen flow
	ears and slide the plastic adapter under the	and eases the client's respirations
	client's chin until he or she is comfortable.	
9.	9.Maintain sufficient slack in oxygen tubing	To prevent the tubing from getting
		out of place Accidentally
10.	Encourage the client to breathe through the	Breathing through the nose inhales
	nose rather than the mouth and expire from	more oxygen into the trachea, which
	the mouth	is less likely to be exhaled
		through the mouth
11.	Initiate oxygen flow	To maintain doctor's prescription and
		avoid oxygen toxicity
12.	Assess the patient's response to oxygen and	Anxiety increases the demand for
	comfort level.	oxygen
13.	Dispose of gloves if you wore and perform	To prevent the spread of infection
	hand hygiene	
14.	Document the following:	Documentation provides coordination
	Date, time, method, flow rate, respiratory	of care

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condition and response to oxygen	Sometimes oxygen inhalation can
	bring oxygen intoxication.

# OXYGEN MASK METHOD

S.NO	NURSING ACTION	RATIONALE
1.	Perform hands hygiene and put on gloves if	To prevent the spread of infection
	available	
2.	Explain the procedure and the need for	The client has a right to know what is
	oxygen to the client.	happening and why.
		Providing explanations alley his/her
		anxiety
3.	.Prepare the oxygen equipment:	To maintain the proper setting
	1)Attach the humidifier to the threaded outlet	The oxygen must be flowing before
	of the flowmeter or regulator.	you apply themask to the client
	2)Connect the tubing from the simple mask	
	to the nipple outlet on thhumidifier	
	3)Set the oxygen at the prescribed	
	flowrate.(for non rebreathing mask fill the	
	reservoir with air )	
4.	To apply the mask, guide the elastic strap	This position will hold the mask
	over the top of the client's head. Bring the	most firmly

	strap down to just below the client's ears.	
5.	Gently, but firmly, pull the strap extensions	The seal prevents leaks as much as
	to center the mask on the client's face with a	possible
	tight seal.	
6.	Make sure that the client is comfortable.	Comfort helps relieve apprehension,
		and lowers oxygen need
7.	Remove and properly dispose of gloves.	Respiratory secretions are considered
	Wash your hands	contaminated
8.	Document the procedure and record the	Documentation provides for
	client's reactions.	coordination of care
9.	Check periodically for depresses respirations	To assess the respiratory condition
	or increased pulse.	and find out any abnormalities as
		soon as possible

# Performing Nebulizer Therapy

#### Definition:

Nebulizer Therapy is to liquefy and remove retained secretions from the respiratory tract. A nebulizer is a device that a stable aerosol of fluid and /or drug particles.

#### Purpose:

- 1. To relieve respiratory insufficiency due to bronchospasm
- 2. To correct the underlying respiratory disorders responsible for bronchospasm
- 3. To liquefy and remove retained thick secretion form the lower respiratory tract
- 4. To reduce inflammatory and allergic responses the upper respiratory tract
- 5. To correct humidify deficit resulting from inspired air by passing the airway during the use of mechanical ventilation in critically and post surgical patients

#### Types of nebulizer:

- 1. Inhaler ormeterd-dose nebulizer
- 2. Jet nebulizer
- 3. Ultrasonic nebulizer
- a. Inhaler

#### Equipments required:

- 1.Dr.'s order card, client's chart and kardex
- 2. Inhaler (1)
- 3. Tissue paper
- 4. Water, lip creamas required

s.no	Nursing Action	Rationale

1.	Performhand hygiene	To prevent the spread of infection
2.	Prepare the medication following the Five	Strictly observe safety precautions to
	rights of medication administration:	decrease the possibility of
	Right drug	amedication error
	Right dose	
	Right route	
	Right time	
	Right client	
	Right documentation	
3.	Explain to the clientwhat you are going to do.	Providing explanation fosters his/her
		cooperation and allays anxiety
4.	Assist the client to make comfortable position	Upright position can help expanding
	in sitting or semi-Fowler position.	the chest
5.	Shake the inhaler well immediately prior to	Shaking aerosolizes the fine particles
	use	
6.	Spray once into the air.	To fill the mouth piece
7.	Instruction to the client:	
	• Instruct the client to take a deep breath	
	and exhale completely through the	
	nose	
	• The client should grip the mouthpiece	
	with the lips, push down on the bottle,	
	1 71	

	and inhale as slowly and deeply as	
	possible through themouth.	The procedure is designed to allow
	Instruct the client to hold his/her	the medication to come into contact
	breath for adult 10 seconds and then to	with the lungs for the maximum
	slowly exhale with pursed lips	amount of time
	Repeat the above steps for each	
	ordered "puffs", waiting 5-10 seconds	This method achieve maximum
	or as prescribed between puffs.	benefits
	Instruct the client to gargle and wipe	
	the face if needed.	Gargling cleanse the mouth. When
		steroid remains inside the mouth,
		infection of fungus may occur.
8.	Replace equipments used properly and	To prepare for the next procedure
	discard dirt	prevent the spread of infection
9.	Perform hand hygiene.	To prevent the spread of infection

- Document the date, time, amount of puffs, and response.
- Report any findings to a senior staff.

#### Equipments required:

- 1.Dr.'s order card, client's chart and kardex
- 2.Ultrasonic nebulizer (1)
- 3. Circulating set-up (1)
- 4. Sterilewater
- 5. Mouthpiece or oxygenmask (1)
- 6. Prescribedmedication
- 7. Sputummug if available (1)
- 8. Tissue paper
- 9. Water, lip creamas required

s.no	Nursing action	rationale
1.	Check the medication order against the	To ensure that you give the correct
	original Dr's order	medication to the correct client
2.	Perform hand hygiene	To prevent the spread of infection
3.	Prepare the medication following the Five	Strictly observe safety precautions to
	rights of medication administration:	decrease the possibility of a
	Right drug	medication error
	Right dose	
	Right route	
	Right time	

	Right client	
	Right documentation	
4.	Explain to the client what you are going to do	Providing explanation fosters his/her
		cooperation and allays anxiety.
5.	Assist to the client to a make comfortable	Upright position can help expanding
	position in sitting or semi-Fowler position.	the chest
6.	Setting the nebulizer:	To ensure that you give the correct
	1) Plug the cord into an electrical outlet	amount of medication
	2) Fill the nebulizer chamber with the ordered	
	amount of medication	
	3) Turn on the nebulizer at the prescribed	
	time	
7.	Instructing the client during nebulization:	
	1) Instruct the client to close the lips around	If the client is using a mask, he/she
	the mouthpiece and to breathe through	may breathe
	themouth	normally
	2) Instructing the client to continue the	To ensure that the client inhales the
	treatment until he/she can no longer see a mist	entire dose
	on exhalation from the opposite end of the	
	mouthpiece or vent holes in the mask	

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	Encourage the client to partially cough and	
	expectorate any secretions loosed during the	
	treatment	
8.	After nebulization finished,	
	Turn off the nebulizer and take off the cord	Gargling cleanse the mouth. When
	from the electrical outlet.	steroid remains inside the mouth,
	Instruct the client to gargle and wipe the face	infection of fungus
	if needed.	
	Apply lip cream if needed.	Applying lip cream provide moisten
		on lips.
	Disinfect the nebulizer by alcohol swab.	To avoid contamination
	Rinse and dry it after each use	To prepare for the next procedure
9.	Replace equipments used properly and	To prepare for the next procedure and
	discard dirt.	prevent the spread of infection
10.	Performhand hygiene.	☐ To prevent the spread of infection

Document the date, time, type and dose of medication, and response.