



Rancho Los Amigos National Rehabilitation Center

DEPARTMENT OF NURSING

CLINICAL

POLICY AND PROCEDURE

SUBJECT: OXYGEN ADMINISTRATION AND
MAINTENANCE: USE OF SIMPLE FACE
MASK OR NASAL CANNULA

Policy No.: C137.15
Effective Date: 03/1999
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Purpose of Procedure: To define how to initiate and maintain oxygen use by simple mask or nasal cannula to prevent or relieve tissue hypoxia.

Physician's Order Required: Yes

Performed By: RN, LVN, RCP, NAs, RAs, SNWs, and Affiliating Nursing Students under the supervision of licensed nurse

Equipment:

- Oxygen source
- Flowmeter
- Humidifier with sterile water
- Nasal cannula with disposable connecting tubing
- Simple face mask with or without aerosol
- Pulse oximeter
- Nebulizer for aerosol
- Large bore tubing for aerosol mask
- Small bore tubing for simple mask

Policy Statement:

1. An oxygen administration order will include oxygen concentration and administration method.
Key Point: The mask is generally used to deliver a flow of 5-10 liters/minute. The nasal cannula is best used to deliver low flow oxygen of 1-4 liters/minute.
2. Licensed nursing staff/RCP will initiate orders and maintain oxygen equipment for oxygen delivery via simple face mask or nasal cannula.
3. Respiratory Therapy will date and time humidifiers when initiated or changed.
Key Point: Humidification may not be ordered if the flow rate is less than 4 liters/minute. Low flow humidification decreases oxygen percentage administered.

Procedural Steps:

1. Obtain physician order
 - a. Gather and prepare necessary equipment.
 - b. Perform hand hygiene and identify the patient.
 - c. Explain procedure and purpose to patient.
 - d. Raise the patient's bed to waist level before providing care.
 - e. Elevate the head of the bed 30 to 45 degrees (unless contraindicated).
 - f. Perform a baseline assessment.
 - g. Check the patient's room to make sure that it is safe for oxygen administration.
 - h. When applying oxygen by nasal cannula, set the flow rate at prescribed liters and feel for air coming from the prongs. Insert the prongs in patient's nose and adjust straps around ears for a comfortable fit.
Key Point: Avoid petroleum jelly lubrication of nares, a flammable substance which may also clog cannula openings.
 - i. When applying oxygen by simple face mask, set the flow rate at the prescribed liters or percentage and feel for air coming from mask holes. Place mask over patient's nose and mouth and adjust straps for a comfortable fit.
 - j. Bring the patient's bed to lowest position.
 - k. If ordered, monitor oxygen saturation with pulse oximeter. Notify physician of decrease in oxygen saturation per parameters or deterioration in patient's condition.
 - l. Assess skin behind ears, over bridge of nose, and cheeks every shift and PRN.
 - m. Change nasal cannula or mask when visibly soiled or PRN.

- n. Contact RCP when humidifier is ¼ full.

PATIENT/FAMILY EDUCATION:

- 1. Ensure patient/family teaching regarding:
 - a. Oxygen administration purpose and delivery method.
 - b. Alarms including indication and oxygen saturation normal range.
 - c. Signs and symptoms of shortness of breath and to notify nurse or doctor if observed.
 - d. No smoking during oxygen use.

DOCUMENTATION:

- 1. Initiate a respiratory Interdisciplinary plan of care (IPOC)
 - 2. Document oxygen therapy use, patient's response, and education provided.
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Revised by: Julie Villalobos, MSN, RN

References:

Lippincott Procedures. (2020). Oxygen Administration

Reviewed/Revised:

03/99 – Reviewed	09/07 – Revised	09/17 – Revised	05/21 - Revised
02/02 – Revised	10/08 - Revised	02/15 - Revised	
11/04 – Revised	10/11 – Revised	03/18 – Revised	
