



Home Oxygen Concentrator Program Safety Information/Requirements

Client Name: _____

Case Coordinator/
Respiratory Therapist/Palliative Care Nurse
Designate Name: _____

The oxygen safety facts are intended to provide direction/information to clients/caregiver regarding safe use and the environment relative to the delivery of oxygen. These are to be reviewed with client/caregiver and adhered to for enrollment and continued use of oxygen therapy.

Open Flame

- Keep oxygen at least 10 feet or 3 meters away from open flames. Examples of open flame are; pilot Lights -furnace/hot water tanks, fireplaces, candles, gas stoves, and barbeques.

Smoking

- Do not smoke while using oxygen.
- Do not allow others to smoke in your home. Ask others to smoke outside
- "NO SMOKING" signs should be posted by the client within three (3) meters (ten 10 feet) of the oxygen source and on the front door /window of the client's home.

Concentrator

- Should be kept in an area that is dry, well ventilated, and away from heat sources.

Oxygen Cylinders

- Backup cylinder must be stored upright in the floor stand.
- Do not store near hot pipes or other heat sources.
- Only use the backup cylinder when there is a power outage.

Hand and Nasal Products

- Do not use hand sanitizer, or any petroleum-based products (cosmetics, hand lotion) e.g. Vaseline, Vicks Note: Pharmacies carry water based products e.g. Secaris to lubricate the nose.

Oil or Grease

- Oil or grease must never be used on or around oxygen equipment e.g. changing an oxygen regulator/cylinders.
- Keep hands and clothing free of oil and grease. A spark could cause the substance to catch on fire.

Electrical

- Do not use an extension cord to plug in the oxygen concentrator; plug it directly into the wall.
- Do not plug in the oxygen concentrator with other major appliances e.g. microwaves, stoves, fridges



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Power Outage

- Always have a flashlight handy in case of a power outage.
- Do not use candles.
- Make sure the back-up oxygen tank is used.

Fire Safety

- Your home should have a working fire extinguishers and smoke detectors. Ensure these are checked twice a year.

Do you smoke? ____ *yes* ____ *no*

If yes is answered a safe smoking plan is:

- Always remove the oxygen before starting to smoke
- Wait 10minutes before lighting a cigarette/pipe
- Have one designated smoking area
- Never smoke in bed
- Use deep ashtrays
- Don't place cigarettes/ash trays near/on absorbent material
- Never leave a lit cigarette unattended

I have read and understood/had reviewed with me the Home Oxygen Concentrator Program Safety Information/Requirements and agree to follow the safety requirements related to the delivery and use of oxygen. I understand the oxygen equipment will be removed if I do not use oxygen safely.

Client/caregiver Name: _____
Signature

Date:
(dd/mm/yyyy)

Case Coordinator/: _____
Respiratory Therapist/ Palliative Care Nurse **Signature**

Date:
(dd/mm/yyyy)