

**Home Oxygen Therapy- NICU Full Clinical Neonatal Guideline –
 Summary**

Reference no.: NIC NE 08/ May 22/v003

Home Oxygen Pathway

Affix patient identification label inbox below or complete details

Surname	Hospital No	Neonatal Consultant
Forename	Date of Birth	
Address	NHS No	Provisional date of discharge
	Sex	
Postcode	Male / Female	

Pathway	Due	Initial, date & time
Set alarm limits on saturation monitor to 88% lower and 97% higher to gauge correct amount of oxygen needed. Attempt to wean oxygen.	36 weeks corrected gestation	
If baby is in oxygen at 36 weeks corrected gestational age, refer to Neonatal Outreach Team who will discuss home oxygen with the family and provide written information.	At 36 weeks corrected gestation	
Oxygen dependant babies to have saturation monitoring only and stop cardiac monitoring if condition allows. If available change onto a Nellcor monitor.	At 36 weeks gestation	
If by 38 weeks the baby still has an oxygen requirement. They will need sleep studies to establish oxygen levels needed	At 38 weeks gestation	
Once sleep studies have been passed and oxygen requirement have been agreed by medical staff, further oxygen saturation monitoring should be stopped. The baby should be kept in the agreed amount of oxygen without oxygen saturation monitoring for at least 48h prior to discharge home.	Once a sleep study has been passed	
Neonatal Outreach Team will gain consent from family for home installation and order home oxygen from relevant oxygen provider.	1 week prior to discharge	
Neonatal Outreach Team will organise a home visit and complete parent education training of home oxygen.	In the week prior to discharge	

Ensure ECG and Echo have been performed as per guideline.	In the week prior to discharge	
Neonatal staff to complete a referral to the relevant Children's Community Nursing Team.	In the week prior to discharge	
Arrange discharge planning meeting, send invites to all appropriate members of the multidisciplinary team e.g. Health Visitors, physiotherapist, SALT, Dietician, GP, Children's Community Nurses, Portage worker.	In the week prior to discharge	
Arrange RSV vaccination if appropriate (refer to RSV guideline ref NIC)	Before discharge	
Inform CED of baby home on oxygen and provide copy of Badger discharge summary	On day of discharge	
Arrange addition to EDIS system in CED	On day of discharge	

Ordering of home oxygen;

Complete IHORM.	Once a sleep study has been passed	
Complete EMHORT.	Once a sleep study has been passed	
Complete HOOOF.	Once a sleep study has been passed	

Before leaving the hospital, the baby's parents/carers must:

Have all the equipment and replacement supplies necessary for the supply of home oxygen.	
Have had training in the technique and management of the supply of home oxygen and are confident in using the equipment. Also have safety information from the oxygen provider.	
Have had life support training and know how this can be kept up to date.	
Have learned how to observe the child's breathing pattern and know how to interpret and act on this information.	
Have a list of contact details and know who to contact for different sources of help	
Know what to do if the oxygen supply is not available.	

The parents/carers are aware of the systems that enable them to:

Order and reorder supplies, e.g. cannulae, tubing, etc.	
Have oxygen delivery equipment replaced, repaired and serviced.	

The following must be checked:

When travelling outside the home, those escorting the infant will transport the oxygen safely.	
The parents/carers have informed the car insurance company of the need to carry oxygen	
The parents/carers have informed the house insurance company of the need to have oxygen in the family home.	

The parents/carers are aware of the importance of early contact with the Neonatal Outreach Team/ Children’s Community Nurses	
The child can be assured that the parents/carers will plan holidays or overnight stays in advance and approach the relevant agencies in a timely manner.	
Ongoing supplies to be ordered by Neonatal Outreach team.	
Ensure Speech and Language therapy team are aware of discharge home in oxygen plan.	
Ensure Neonatal physiotherapy team are aware of discharge home in oxygen plan.	
Neonatal Outreach Team will provide parents/carers with information regarding Disability living allowance and Blue Disabled Badge applications.	