

DOMICILIARY OXYGEN THERAPY SERVICE

This document is dated 1st April 2013

	Page
DOMICILIARY OXYGEN THERAPY SERVICE	482
GENERAL ARRANGEMENTS	484
PHARMACIST CONTRACTOR AND PATIENT REQUIREMENTS FOR PROVISION OF SERVICE	484
PHARMACIST CONTRACTOR AND HEALTH BOARD	485
- ADMINISTRATIVE ARRANGEMENTS	485
OXYGEN EQUIPMENT WHICH MAY BE SUPPLIED ON LOAN	487
TO NHS PATIENTS DESCRIPTION	487
OXYGEN ADMINISTRATION EQUIPMENT	488
PROFESSIONAL FEES	490
ALLOWANCES FOR DELIVERY	491
DOMICILIARY OXYGEN THERAPY SERVICE PROVIDED BY DISPENSING DOCTORS TO NHS PATIENTS	492
PROVISION OF PORTABLE OXYGEN SERVICE	493
OXYGEN EQUIPMENT WHICH MAY BE SUPPLIED ON LOAN TO NHS PATIENTS TECHNICAL SPECIFICATIONS	495
OXYGEN CONCENTRATORS	503

1. GENERAL ARRANGEMENTS

- 1.1 Advice on the prescribing of oxygen is given in the relevant section of the British National Formulary.
- 1.2 Oxygen therapy equipment (oxygen sets and cylinders) is owned by a pharmacist contractor and is supplied on loan to patients.
- 1.3 The Health Board will assess the needs of its area and from this determine the level of provision that is required.
- 1.4 In order to supply oxygen and oxygen equipment to NHS patients, a pharmacist contractor must be listed as such in the Board's Pharmaceutical List.
- 1.5 A pharmacist contractor may apply at any time for inclusion on the Health Board's Pharmaceutical List as a supplier of oxygen. The Health Board will refer any such application to its Pharmacy Practices Committee for decision on an additional service
- 1.6 A copy of the Health Board's Pharmaceutical List showing those pharmacist contractors who are in contract to provide a domiciliary oxygen therapy service is supplied to every pharmacist contractor and doctor in the area. A copy of the list for an adjacent area will be sent on application to the Board in that area.
- 1.7 If a prescription for oxygen set or cylinders is presented to a pharmacy contractor whose name is not included in the list, he should provide the patient or his representative with the name, address and telephone number of at least two pharmacy contractors who provide oxygen therapy services at the time the need arises, and who are nearest to the patient's home.
- 1.8 Sections 1 to 6 of this part of this tariff shall cover supply of cylinder oxygen to the patient in the usual place of residence. Section 7 of this part shall cover additional arrangements for the supply of Portable Oxygen in cylinders.

2. PHARMACIST CONTRACTOR AND PATIENT REQUIREMENTS FOR PROVISION OF SERVICE

A pharmacist contractor who undertakes to provide an oxygen therapy service for NHS patients must be prepared to hold oxygen therapy equipment on his premises and to be responsible for the safe delivery and installation of the oxygen and equipment in the patient's home. The detailed requirements are as follows: -

- 2.1. The pharmacist contractor must regularly stock oxygen equipment, as specified in the Drug Tariff, and oxygen gas on the premises.
- 2.2 The pharmacist contractor is responsible for the safe delivery, erection and collection of sets and/or cylinders at the patient's home. A patient's representative may undertake these functions provided that the pharmacist contractor is satisfied that he is competent to do so.

- 2.3 The pharmacist contractor is required to ensure that the operation of the oxygen equipment is fully explained to the patient or his representative. Appropriate advice should be given on procedures to ensure safe use of oxygen in the house. Any safety instructions issued by the manufacturers of the equipment must be brought to the attention of the patient or his representative. The patient or his representative should be advised that the Fire Prevention Officer of the local Fire Brigade is prepared to visit a patient's home to provide advice on safety.
- 2.4 Only the pharmacist contractor who has loaned the set should normally supply oxygen gas to a patient. When, exceptionally, cylinder replacements are provided by a pharmacist contractor other than the one who supplied the set, he should, at the time, when cylinders are supplied satisfy himself that the patient continues to operate the equipment satisfactorily.
- 2.5 The pharmacist contractor shall on making the loan include a note with the set saying "This set is the property of the pharmacist contractor to whom it must be returned in good condition by the patient. The patient will be liable to make good any loss or damage".
- 2.6 The pharmacist contractor must ensure the recovery of empty cylinders from patients. Empty cylinders must be returned promptly to suppliers if adequate supplies of oxygen for the use of patients are to be maintained.

3. PHARMACIST CONTRACTOR AND HEALTH BOARD - ADMINISTRATIVE ARRANGEMENTS

The procedure for entering into contract with the Health Board is as set out in Section 1 above. The Health Board, having decided to enter into contract, will advise the pharmacist contractor of the number of oxygen sets, which he is authorized to hold. Thereafter the arrangements between pharmacist contractor and the Health Board are as follows: -

- 3.1 On making a loan of an oxygen set and cylinders the pharmacist contractor shall endorse the prescription with:
- a) name of set supplied
 - b) date of commencement of loan
 - c) size and number of cylinders supplied
- 3.2 A delivery slip (form GP64a) giving details of journey's undertaken to secure the supply of oxygen therapy equipment and oxygen gas to a patient should be submitted to Pharmacy Practice Division with the prescription.
- 3.3 The pharmacist contractor shall make a return monthly to Pharmacy Practice Division with a copy to the respective Health Board showing new installations, termination of loans, the number of sets on loan to patients and the number in stock.

- 3.4 Where the return made by the pharmacist contractor shows that the set has been on loan or at least 3 months and has not been returned to the pharmacist contractor, the Board shall ascertain from the doctor whether the equipment is still required. Two similar enquiries shall be made if necessary at intervals not exceeding 3 months during the first year of the loan.
- 3.5 In cases where the equipment has been on loan to a patient for 18 months or more, Pharmacy Practice Division will advise the Board where they have reason to doubt that the patient has continued need of the equipment. The Board should, in such cases, make special enquiries as to the circumstances of the loan.
- 3.6 Where the Board is satisfied, after making enquiries that the equipment is no longer required by the patient, or where between enquiries the doctor informs the Board to that effect, the Board shall notify the pharmacist contractor to arrange recovery.
- 3.7 Where the patient fails to return the equipment the onus of collecting it rests on the pharmacist contractor.
- 3.8 The method of claiming compensation for financial loss in respect of oxygen equipment is as follows: -

Where the pharmacist contractor suffers financial loss as a result of the act or default of a person causing the loss of, or damage to, oxygen equipment loaned, he should forthwith inform the Board of such financial loss and of the action taken by him, short of actual litigation, to recover the equipment, and compensation for its loss or damage from the person concerned. The Board shall investigate the matter and if in its opinion the financial loss was not occasioned by the act or default of the pharmacist contractor, or by his failure to take the appropriate action to recover the equipment and compensation, the Board shall make a payment to him. Payment shall be based on the value of the equipment at the date of loss, or equivalent to the cost of repairing the said damage, as the case may be. Where the pharmacist contractor is dissatisfied with the decision of the Board he may refer the matter to the Secretary of State, who shall give such direction to the Board, as he thinks fit.

In this section, the expression person means the person supplied the patient concerned, members of his household, or the authorities of an institution to which the equipment is delivered, as the case may be.

4. OXYGEN EQUIPMENT WHICH MAY BE SUPPLIED ON LOAN TO NHS PATIENTS DESCRIPTION**4.1 Oxygen Sets**

The following sets (see Specification 01A and 01B, below and diagrams, pages following) are approved for use within the domiciliary oxygen therapy service, and any one may be loaned against a prescription for a set. Where the manufacturer with the set has supplied spare O-rings, the pharmacist contractor should remove them before the set is supplied to the patient.

Specification 01A

BOC Domiflow Set (888830)

Oxylitre Set (M 210)

Oxylitre Set (M 410)

Puritan Bennett Set (778435)

Sabre Medical Oxydom Set

Therapy Equipment Dialreg Set (5120)

Specification 01B

Air Apparatus and Valve Ltd (D24)

On no account should pharmacist contractors attempt to modify any oxygen set to produce a higher flow rate than that for which it has been designed. To do so could create a hazardous situation for the patient.

4.2 OXYGEN ADMINISTRATION EQUIPMENT

The following equipment is approved for use within the oxygen therapy service: -

4.2.1 Constant performance masks:

- a) Ventimask MK IV, 28%
- b) Intersurgical 0100 Mask 28%
- c) Venticaire Venturi Mask 28%

4.2.2 Variable performance masks

- a) Intersurgical 005 Mask
- b) Venticaire Mask

4.2.3 Oxygen Nasal Cannulae

- a) Intersurgical 1161

Constant performance masks provide a nearly constant concentration of 28% oxygen in air over a wide range of oxygen supply, and irrespective of breathing pattern. When a constant performance mask is supplied to a patient, the recommended flow rate is 2 litres per minute (the Medium setting on the control head).

Variable performance masks provide a variable concentration of oxygen in air. The concentration varies with the rate of flow of oxygen supplied and the breathing pattern of the patient.

The manufacturer will supply two Ventimask MK IV, 28% constant performance masks with each oxygen set. (On account of bulk, these masks require to be packed separately from the remainder of the set).

Where a prescriber considers that the Ventimask MK IV, 28% mask is not appropriate for the treatment of a patient, he must state on the prescription which alternative approved mask or nasal canula is to be supplied.

Every mask or canula is supplied for the use of one patient only. They therefore, are "disposable" but each is sufficiently robust to withstand usage even over a long period of treatment.

4.3 Connection Plastic Tubing

A new length of connection plastic tubing (approx 150cm) is to be supplied for each new patient. During extended loan periods, replacement lengths of tubing may also require to be supplied.

4.4 Oxygen

4.4.1 **The prescriber must state the number of cylinders and the volume of gas to be supplied. If no volume is stated, the 1360L cylinder shall be supplied.**

The lightweight aluminum cylinder supplied by BOC is freestanding and obviates the need for a cylinder stand to be supplied to the patient.

		<u>Price (p)</u>
a) Oxygen BP 1360 litre	Each	1024
b) Oxygen BP, 1360L composite cylinder with integral headset to specification O2.	Each	1131

Prescribers should refer to Section 7 of this part with reference to the supply of Portable Oxygen cylinders. The 1360L cylinder is not considered as suitable for portable use.

4.4.2 Equipment authorised by Health Board for loan to patients.

The Department calculates rental payments for regulator sets based on the value of these items. Because stands are no longer essential to support cylinders, the holding of additional stands will no longer be authorised.

Rental payments for regulator sets.

a) <u>sets</u>	<u>180p per month</u>
----------------	-----------------------

4.4.3 Equipment issued to patients - non returnable

		<u>Price (p)</u>
a) Ventimask MK IV, 28%	Each	145
b) Intersurgical 005 Mask	Each	78
c) Intersurgical 0100 Mask	Each	97
d) Intersurgical Nasal Cannula 1161	Each	90
e) Venticaire Oxygen Mask	Each	71
f) Venturi Mask 28%	Each	92
g) Connection plastic tubing 1.8m		72

Important Note:

The tubing, canula and masks listed above are considered suitable for use with the Portable Cylinders referred to in Section 7.

4.5 PROFESSIONAL FEES

When a doctor orders on one prescription form more than 3x1360 litre cylinders of oxygen and when the prescribed cylinders are collected from the pharmacist by or on behalf of a patient, the professional fee will be claimable on the basis of one fee: -

- a) for every 3 cylinders (or balance of an order in excess of a multiple of 3 cylinders); or
- b) for the actual number of visits to the pharmacist by the collector whichever is the less.

When cylinders are delivered to the patient the professional fees will be claimable on the basis of one fee: -

- c) for every 3 cylinders (or balance of an order in excess of a multiple of 3 cylinders); or
- d) for the actual number of delivery journeys undertaken whichever is less.

Fees payable are:

A1. Supply of Sets	Price (p)
1. Supply of set and cylinders	925
2. Supply of replacement sets	
3. Checking and remedying set malfunction	
 A2. Supply of Cylinders	
1. Supply of cylinders when not in conjunction with set	829
2. Supply of replacement cylinders where original are found to be faulty	
3. Supply of masks or nasal canula (when not in conjunction with set or cylinders)	11
4. Collection of set and cylinders at end of treatment	829
5. Ineffective journeys for supply of collection of set and cylinders	829

4.6 ALLOWANCES FOR DELIVERY

When cylinders are delivered to the patient, allowances will be claimable on the basis of one allowance:

- 4.6.1 for every 3 cylinders (or balance of an order in excess of a multiple of 3 cylinders); or
- 4.6.2 for the actual number of delivery journeys undertaken whichever is less.

The allowances payable are

	Total (Return) Mileage Traveled on Delivery				
	over 1-6	6-10	10-20	20-30	30
	<u>Miles (p)</u>				
4.6.3.1 Supply of sets					
1. Supply of set and cylinders)	940	1642	1838	2629	80
2. Supply of replacement set)					per
3. Checking and remedying set malfunction)					mile
4.6.3.2 Supply of Cylinders)	850	1556	1752	2546	79
1. Supply of cylinders when not in conjunction with set)					per
2. Supply of replacement cylinders where original cylinders are found to be faulty					mile
3. Supply of masks, nasal canulae or tubing) (when not in conjunction with set or cylinder)	850	1556	1752	2546	79
					per
					mile
4. Collection of set and cylinders at end of treatment)	850	1556	1752	2546	79
5. Ineffective journeys for supply or collection of set and cylinders)	850	1556	1752	2546	79

5 URGENT FEES & ON-COST**5.1 URGENT FEES**

The standard arrangements for urgent fees, as set out in Part 1 of the Drug Tariff, are also applicable to prescriptions for oxygen and oxygen equipment.

5.2 ONCOST ALLOWANCE

The total basic cost of oxygen, masks and connecting plastic tubing supplied shall attract an on-cost allowance of 10%.

6.**DOMICILIARY OXYGEN THERAPY SERVICE PROVIDED BY DISPENSING DOCTORS TO NHS PATIENTS****6.1 General**

The arrangements set out in paragraphs 1-3, 4.1 to 4.3; 4.4.1 & 4.6 above are also applicable in relation to the oxygen therapy service provided by dispensing doctors.

6.2 Basis of payment to dispensing doctors for supply of approved oxygen equipment.**6.2.1 Set rentals**

For sets authorised by the Health Board:-

Approved lightweight single unit set and stand for use with 1360 litre oxygen cylinder	60p for the first week (or part of); 37p per week for remainder of 6 months (or part of), subsequently 10p per week
--	---

6.2.2 Equipment issued to patients

		Price (p)
6.2.2.1	Ventimask MK IV, 28%	each 145
6.2.2.2	Intersurgical 005 Mask	each 78
6.2.2.3	Intersurgical 0100 Mask 28%	each 97
6.2.2.4	Intersurgical Nasal Cannula	each 90
6.2.2.5	Venticaire Oxygen Mask	each 71
6.2.2.6	Venticaire Venturi mask 28%	each 92
6.2.2.7	Connection plastic tubing	1.8m 72

Plus an On cost Allowance of 25% of the basic price calculated on the total sum at the end of the month

6.3. Oxygen Gas

For the supply of oxygen BP 1360 litre 975p

Plus On cost Allowance

If no volume per cylinder is stated, payment shall be made based on the 1360 Litre size.

For dispensing doctors paid on Drug Tariff only

Dispensing fee At differential rate per prescription

7. PROVISION OF PORTABLE OXYGEN SERVICE

7.1 General

Health Department Letter HDL (2004) 01, issued on 12th January 2004, and amended on 9th February sets out the core terms of provision of service. Annex C to HDL (2004) 01 sets out clinical indications and the patient assessment protocol for Portable Oxygen.

In addition to the establishment of access to Portable Oxygen, the basal requirement for supply of Oxygen Concentrators has been amended.

7.2 Access to Portable Oxygen

Portable oxygen will be offered to patients that have been assessed by an NHS respiratory physician. The physician's recommendation will trigger a GP prescription that will be dispensed via the existing NHS community pharmacy network i.e. by a community pharmacist contractor or dispensing doctor who is already on an NHS Boards list to supply oxygen. The assessment process/requirement will include patients that are already using domiciliary oxygen i.e. the existing 1360L cylinder, and patients that have been receiving portable oxygen before the operative date of 1st April 2004.

Portable oxygen is **not** a replacement for large cylinders or concentrators. The expectation is that the patient will be maintained on the existing Tariff cylinders of 1360 litres or a concentrator, and that the smaller portable cylinders will be prescribed only for the purpose of travel away from a patient's normal place of residence.

The service will be delivered to patients through pharmacy contractors and dispensing practices that are included on the Health Board Pharmaceutical List of authorised Oxygen contractors.

7.3 Cylinders available

Volume	Designation	Maker	Fitting	Weight	Cost
460L	DD	BOC	Integral	3.2kg	2589p

- To ensure patient safety the recommended fitting should be cylinders with integral valve and meter assembly (Please see note 7.3.1 below)
- All cylinders are compatible with existing Drug Tariff tubing, masks and nasal canula.
- Ancillary equipment, or any portable cylinders other than those listed above, will not be considered for re-imburement purposes

7.3.1 The preferred cylinder for supply of portable oxygen is the DD cylinder from BOC.

7.4 **Prescribing and Dispensing Issues**

7.4.1. It is a requirement that the GP (or other authorised prescriber) shall specify that he/she requires 'portable oxygen', or else payment may be made for the current 1360 L sizes, which are more cost effective. The contractor cannot upgrade the claim without the prescriber's initials.

7.4.2 It is a requirement that the GP will indicate the cylinder size and volume and that the contractor specifies the supplier otherwise:

- If the GP does not specify 'portable oxygen', then the usual 1360L Size F shall be supplied and paid.
- If the GP does not specify the portable cylinder volume, the 460L size (DD) shall be supplied and paid.

7.5 **Review of Portable Oxygen Service**

Uptake of portable will be monitored, and it is expected that a review of the portable oxygen arrangements will be carried out by during 2008.

8. OXYGEN EQUIPMENT WHICH MAY BE SUPPLIED ON LOAN TO NHS PATIENTS TECHNICAL SPECIFICATIONS**8.1 Lightweight single unit sets.****8.1.1 Specification 01A (see also diagram page 10.12)**

The SET comprises: -

- a.
 1. a valve which reduces the gas cylinder pressure from 13,650 k.P.a. to a pressure of 70 to 415 k.P.a.;
 2. a miniature cylinder contents (pressure) gauge calibrated with $\frac{1}{4}$, $\frac{1}{2}$ and full markings;
 3. a cap consisting of a two flow selector which can be turned from the ratchet position marked "OFF" to ratchet positions marked "MED" and "HIGH", these being designed to correspond to flow rates of 2 litres and 4 litres respectively per minute;
 4. an outlet, being the male portion of a bayonet type connection;
 5. a standard bull-nose cylinder adapter designed for finger tightening and preferably incorporating an O-ring washer;
 6. a safety device, such as a sintered filter, to prevent the spontaneous combustion of particulate material in the control head or in the neck of the cylinder.
- b. Connection Plastic Tubing: 150cm (approx.) plastic tubing, 5mm bore, 8mm externally (Ref., Portex 800/012/300) with at one end a bayonet fitting to the control head.
- c. A Key Spanner of 100mm to 150mm length, for opening the oxygen cylinder valve.

The set parts a-c are packed in a strong box with full operating instructions being given in the lid.

Two Ventimask MK IV, 28% constant performance masks, each in a closed plastic bag, will be supplied by the manufacturer with each oxygen set. (On account of bulk, these masks will require to be packed separately from the remainder of the set).

Note: The manufacturer may supply Spare O-rings with the set, but the pharmacist contractor should remove these before the set is supplied to the patient.

8.2 Specification 01B (see also diagram page 10.12)

The set will comply with all the requirements of Specification 01A, with the exception of a.3, where the following will apply:

" A ratchet selection device to enable the gas flow to be set at predetermined positions to give flow rates of 2 litres and 4 litres per minute respectively. The positions will be clearly indicated and labelled 2L(MED) and 4L(HIGH); and a control knob, which permits the flow of gas to be turned on and off. It will be suitably labelled to indicate the ON and OFF positions and the direction of rotation to turn ON".

SPECIFICATION O2

Oxygen BP, Composite Cylinder with Integral Headset.

8.2.1 The integral valve (pillar valve/pressure regulator/flow controller) shall comply with BS EN 738 part 3: 1997, with the following additions.

- a. Miniature contents (pressure) gauge with at least 1/4, 1/2 and Full markings
- b. The flow control valve shall consist of either:
A flow selector, which can be turned from a ratchet position marked OFF to ratchet positions marked 2L(MED) and 4L(HIGH), these being designed to correspond to flow rates of 2 litres and 4 litres per minute respectively.
Or:
It shall contain a control knob, which enables the gas to be turned on and off. It will be suitably labelled to indicate the ON and OFF positions and the direction of rotation to turn ON. A ratchet selection device to enable the gas flow to give gas flow rates of 2 and 4 litres per minute. The positions shall be marked clearly 2L(MED) and 4L(HIGH).
- c. An outlet, being the male part of a bayonet type connection.

8.2.2 Both 'bayonet' and 'fir tree' outlets are approved for use on domiciliary oxygen regulators, including those built onto composite cylinders.

8.2.3 All devices should be CE marked under the European Medical Devices Directive.

8.3 Oxygen masks and Nasal Cannulae

Constant Performance Masks

These masks provide a nearly constant concentration of 28% Oxygen in air over a wide range of oxygen supply, and irrespective of breathing pattern. The most economical oxygen flow rate is 2L/minute (the 'medium setting' on the control head.)

1. Intersurgical 010 Mask, 28% (see figure 1).

The mask comprises a soft moulded plastic facepiece, an adjustable elastic head strap and a metal nose clip to ensure a close fit across the nose. A lightweight white venturi diluter fitted to the front of the mask ensures a near constant oxygen concentration. This can be rotated to suit varying positions of the connecting tube

Weight (less supply tube) 44 grams

Supplied by Intersurgical Ltd.

2. Venticaire Venturi Mask 28% (see figure 4)

The mask consists of a one-piece transparent flexible moulded facepiece, with Venturi barrel. It is fitted with an adjustable head strap, and the Venturi barrel can be rotated to suit convenient position of the tube.

Weight (Less supply tube) 39 grams

Supplied by Flexicare Medical Ltd.

3. Ventimask MK IV 28% (see figure 2)

The mask consists of one-piece transparent flexible moulded face piece incorporating a lightweight rigid clear plastic venturi device that ensures near constant concentration. It is fitted with an adjustable headband, and has a soft metal reinforcing strip to ensure a good fit over the bridge of the nose.

Weight (less supply tube) 66 grams

Supplied by Vickers Medical Equipment Ltd.

Variable Performance Masks

A flow rate of 2L/minute is recommended for these masks, no claim being made for the resultant oxygen concentration. They provide a variable concentration of oxygen in air. The concentration varies with the rate of flow of oxygen supplied and the breathing pattern of the patient.

4. Intersurgical 005 Mask (see figure 3)

A flow rate of 2 litres per minute is recommended, no claim being made for the resulting oxygen concentration. The Intersurgical 005 Mask comprises a soft moulded plastic facepiece, adjustable elastic head strap and a metal nose clip to ensure a close fit across the nose. A swivel connector on the front of the mask, to which the oxygen tube is connected, can be rotated to suit varying positions of the connecting tube.

Weight (less supply tube) 40 grams

Supplied by Intersurgical Ltd.

5. Venticaire Mask (see figure 4)

This mask comprises a soft moulded clear plastic face-piece, with either an adjustable elastic head strap, or ear loops. A swivel connector is provided on the front of the mask, this rotates to suit varying positions of the oxygen supply tube (not included)

Weight (less supply tube) 39 grams

Supplied by S & W Vickers Ltd

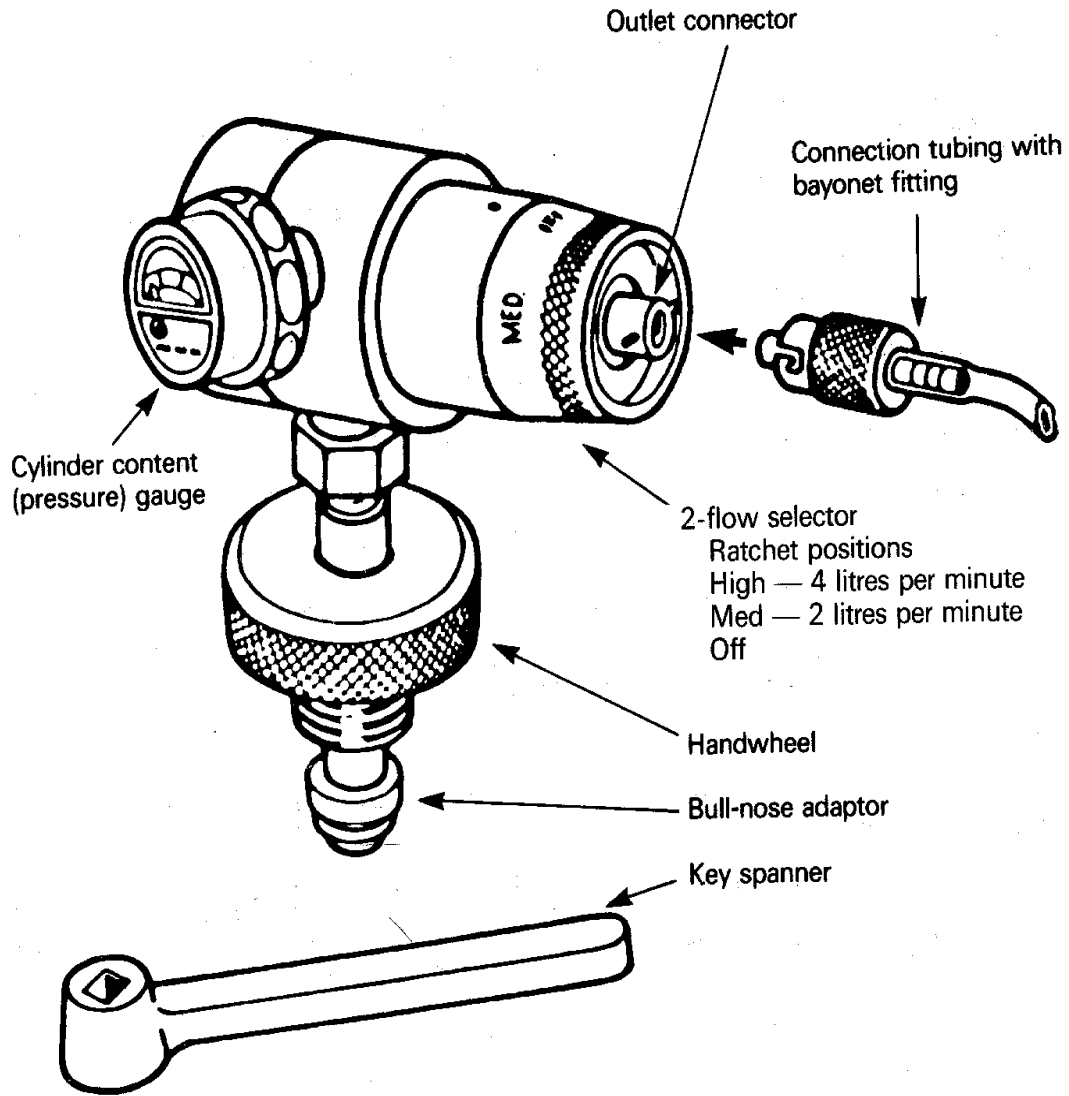
6. Oxygen Nasal Canula. Intersurgical 1161.

The oxygen nasal canula consists of two soft PVC prongs about 10mm long that project into the nostrils. The nasal prongs when positioned into the nostrils are fed through two PVC tubes of 3mm bore which are placed over the ears and tightened under the chin by means of a toggle. The two 3mm tubes are joined to an oxygen supply tube of 5mm bore and length 2 metres.

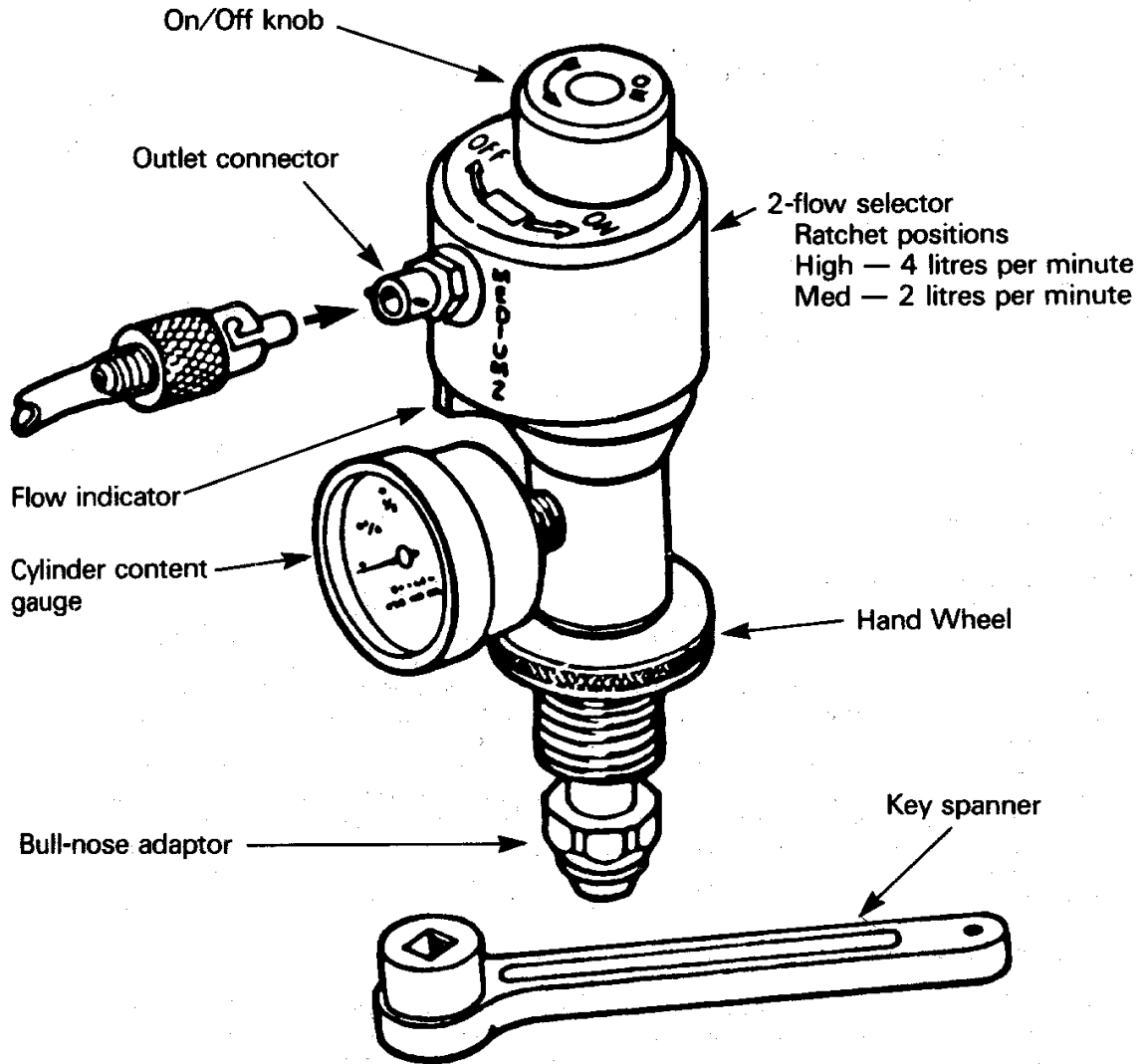
SPECIFICATION 01A

Lightweight (Single Unit) Set

NB Actual shape of control head varies with make

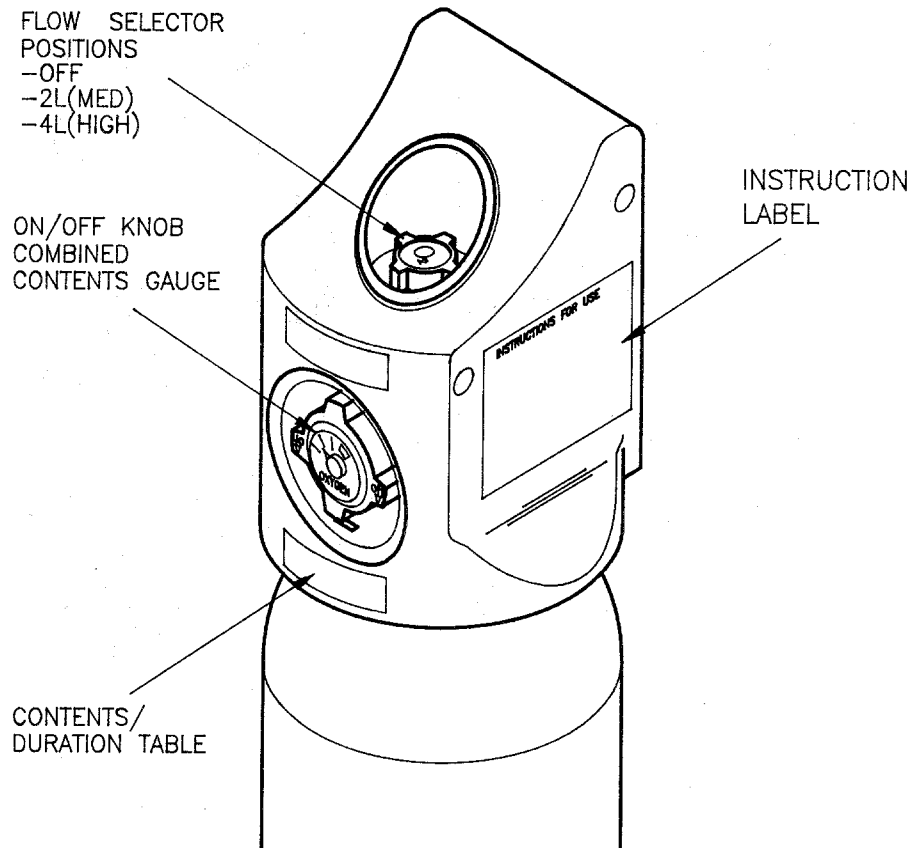


SPECIFICATION 01B
Lightweight (Single Unit) Set



SPECIFICATION 02

Oxygen BP, Composite Cylinder with Integral Headset

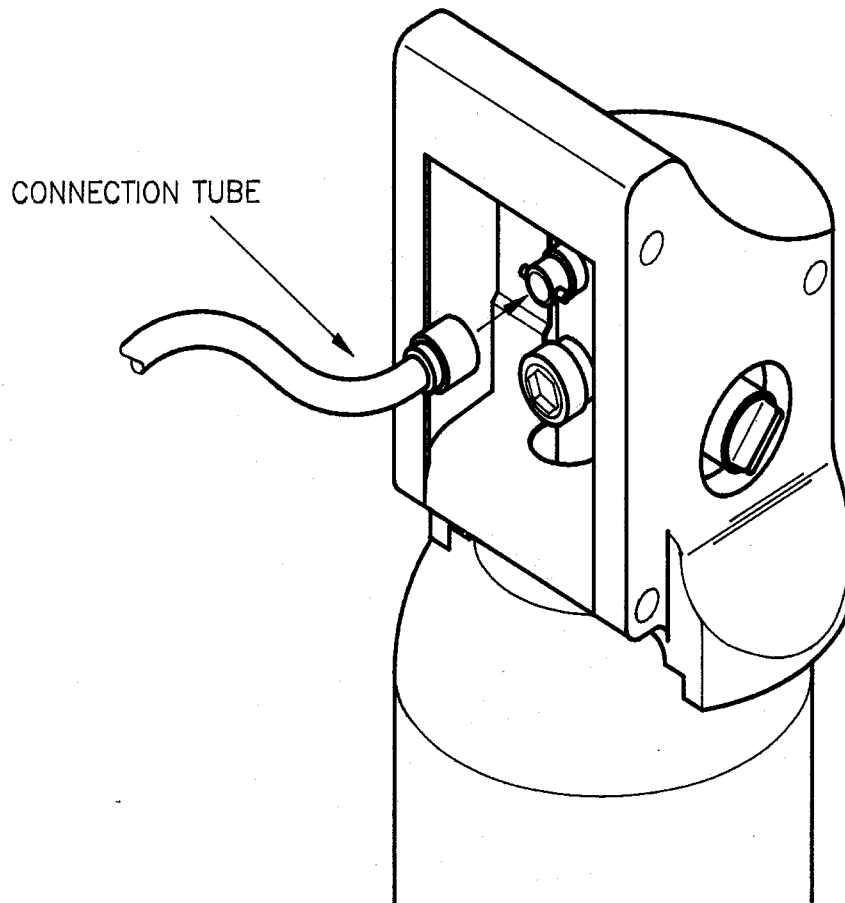


VIEW FROM FRONT OF CYLINDER

APPROX. SCALE 1/3 FULL SIZE

SPECIFICATION 02 (Contd.)

Oxygen BP, Composite Cylinder with Integral Headset



VIEW FROM REAR OF CYLINDER
APPROX. SCALE 1/3 FULL SIZE

APPROVED OXYGEN MASKS



Figure 1
Inter-Surgical O10 Mask

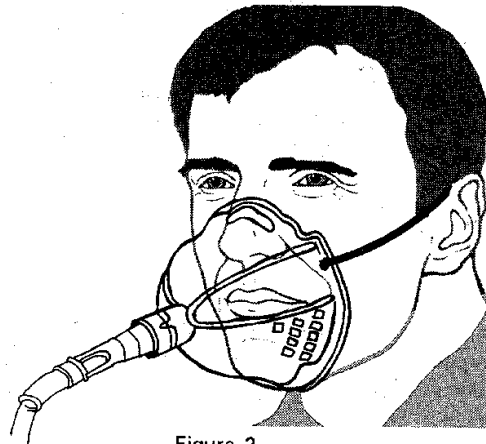


Figure 2
Ventimask Mk1V, 28%

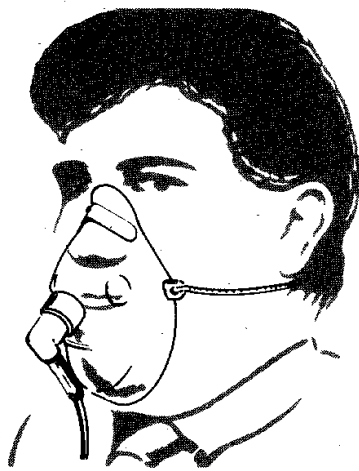


Figure 3
Inter-Surgical 005 Mask

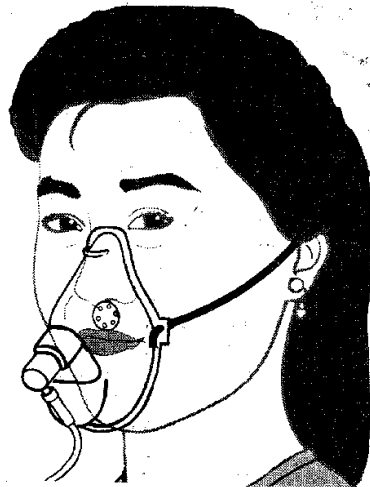


Figure 4
Venticaire Mask

8. OXYGEN CONCENTRATORS

- 8.1. Domiciliary patients receiving Long Term Oxygen Therapy (LTOT), which is generally considered to be the provision of oxygen for 8 hours or more per day for a prolonged period, may be provided with oxygen concentrators (NHS Circular No 1989 (Gen) 33).
- 8.2. The supply, installation and maintenance of oxygen concentrators is undertaken through a contract negotiated and funded centrally by the Common Services Agency.
- 8.3. Where a General Practitioner is of the opinion that a patient may be in need of LTOT, or the patient is receiving LTOT by means of cylinder oxygen, the patient should be referred for assessment by a respiratory consultant. If the GP's view is confirmed then the consultant will arrange, through CSA, for the provision of a concentrator to the patient. The supplier will remove the concentrator when the patient's need for the machine ceases.
- 8.4. The contractor may also supply a suitable back-up system to cover if the concentrator is not functioning.
- 8.5. Any enquiries about the practical aspects of the arrangements should be made to:

Project Manager
Scottish Healthcare Supplies
Gyle Square
1 South South Gyle Crescent
Edinburgh EH12 9EB
Tel No 0131 275 6546 Fax No 0131 314 0724