
August 28, 2017

#O2TheFix – Oxygen prescribing saves lives

Waitemata DHB is the first in the country to transform the way oxygen is prescribed.

Its *#O2TheFix: Swimming between the flags* is an awareness campaign that encourages staff to consider appropriate levels when administering oxygen.

The project was overall winner at this year's Waitemata DHB Health Excellence Awards and has since been presented at the Thoracic Society of Australia and New Zealand (TSANZ) meeting in Queenstown.

It will also feature at the upcoming New Zealand Hospital Pharmacists' Association (NZHPA) annual conference.

"Oxygen has always been a crucial form of treatment for many hospitalised patients with profound physiological effects - both beneficial or potentially harmful like any other medicine," Waitemata DHB respiratory clinical nurse specialist Nikola Ncube says.

"Up until recently, it has been poorly prescribed or not prescribed at all. Oxygen is a medicine so inappropriate administration of it can be detrimental to patient health outcomes."

Oxygen is prescribed for low blood oxygen levels, carbon monoxide toxicity, and long term oxygen prescriptions are important for people with chronically low oxygen such as from cystic fibrosis.

"There are concerning statistics that show when oxygen is prescribed and administered in an 'uncontrolled' manner, this can lead to harm," Nikola says

"Studies show that controlling oxygen in this manner can reduce hospital mortality by 58% in all hospital admissions and by 78% in patients with COPD."

Pharmacy team leader Jessica Nand says #O2TheFix has improved understanding of oxygen and its delivery devices.

"There was no information or guidelines available for doctors and nurses to refer to which has led to confusion in the past. The project focusses on different aspects to improve awareness of oxygen."

The project uses electronic prescribing to make the process easier and safer. Doctors who type "oxygen" into the electronic medical chart, MedChart, choose from a list of set devices that are clinically most appropriate for their patient. They then choose the most appropriate pre-set target saturation range.

Pharmacists, in consultation with respiratory and the Intensive Care Unit staff, have set up quick-lists in MedChart to ensure all important information is already pre-populated into the programme.

Jessica says this has completely revolutionised the prescribing of oxygen which was previously done on a paper chart which allowed risk.

“Now each prescription of oxygen includes all mandatory information and it is fairly difficult to prescribe oxygen inappropriately. It is easier for our clinicians and also safer for our patients,” she says.

A campaign week during October 2016 helped raise awareness with interactive stalls, educational posters on the clinical wards, stickers promoting the catch phrase and social media hashtag #O2TheFix.

Six months after implementing the project at Waitemata DHB, the percentage of patients prescribed oxygen increased from 12 percent to 49 percent.

“We already know that safer prescribing of oxygen measured and adjusted to appropriate target saturations can reduce mortality rates. This behaviour just needs to become part of our standard practice,” Nikola says.



Caption: Robin Molloy of Unsworth is treated at North Shore Hospital by Respiratory clinical nurse specialist Nikola Ncube, Pharmacy team leader Jessica Nand and Respiratory and General medical consultant Dr Alex Chapman.

ENDS