OXYGEN THERAPY

Provide ventilatory assistance as needed

Determine and document patient's respiratory status prior to and after treatment.

For all patients with severe respiratory distress administer oxygen via Non-Rebreather at 10 LPM

If patient will not tolerate Non-Rebreather, oxygen may be administered via Nasal Cannula at 6LPM

For patients with non-distressed respiratory effort, administer oxygen as needed via nasal cannula at 2-4 LPM

FOR PATIENTS WITH SEVERE HEAD TRAUMA, ACUTE CORONARY SYNDROME OR INDICATORS OF ACUTE MYOCARDIAL INFARCTION:

- High flow oxygen has proven to have vasoconstricting properties and may be contraindicated in the above patients.
 - Target Pulse Oximetry in the range of 94%.
- **DO NOT** withhold high-flow oxygen if patient is in respiratory distress.

ALL patients
exhibiting
respiratory
distress or
significant medical
or traumatic
complaints should
receive oxygen
therapy.