

Regional Name/Logo	Client Name	
	Address/Postal Code	
	Town/City	
	Phone #	
	PHIN/MHSC#	
	Date of Birth	Gender

APPENDIX 4 - HOME OXYGEN SAFETY QUESTIONNAIRE

- How far away must oxygen be kept from lit cigarettes and open flame? _____ Metres/Feet
- Give 3 examples of open flame.
a) _____ b) _____ c) _____
- Do you smoke? Yes No If Yes, do you plan to smoke in your Home? Yes No
If you plan to smoke in your home where: _____
If you plan to smoke in your home:
 - Has a safe smoking plan been reviewed with you? Yes No
 - If smoking, do you agree to turn off the oxygen, remove the oxygen, wait 10 minutes, and stay 10 feet (3 meters) away from the oxygen? Yes No
 - Do you know what can happen if you smoke while wearing oxygen? _____

- What would you do if someone else (family/guest) wanted to smoke in your home? _____

- Aerosol sprays should not be used around oxygen. True False
- Hands and clothing must be free of grease, oil and hand sanitizer when changing oxygen regulators on portable oxygen cylinders/tanks. True False
- Do you have a working smoke detector in your home? Yes No
- What would you do if a fire started in your home/suite? _____
- Describe anything you feel may prevent you from managing your oxygen equipment safely (E.g., poor vision, difficulty remembering things or making decisions, poor manual dexterity, poor mobility): _____

I have read and understood the Oxygen Safety Guidelines and I agree to follow them as presented in the WRHA Home Care Oxygen Concentrator Program handout provided to me. I understand the oxygen equipment may be removed if I do not follow oxygen equipment safety guidelines.

Client/Caregiver Name: _____

Print Name

Signature

Date: _____ (dd/mm/yyyy)

Educators Name: _____

Print Name

Signature

Date: _____ (dd/mm/yyyy)

APPENDIX 4 - HOME OXYGEN SAFETY QUESTIONNAIRE - ANSWER KEY

1. How far away must oxygen be kept from open flame?
 - 3 Meters or 10 Feet away from open flame, this includes smoking.
2. Give 3 examples of open flame.
 - Barbeque, candles, pilot light on furnace/hot water tank, gas stove, fireplace, fire pit, matches/lighter.
3. Do you smoke? You plan to smoke in your home?

If yes is the answered, then part A, B, and C must be answered as well.

 - A. A safe smoking plan must be reviewed.
 - B. They have to agree to removing oxygen before starting to smoke elsewhere, if not client will and should not be approved for home oxygen.
 - C. Facial burns, clothing/furniture/bedding could catch on fire. Client must Indicate they understand they could get burnt or if could start a fire.
4. What would you do if someone else (family/guest) wanted to smoke in your home?
 - Ask them to leave the house and smoke outside.
5. Aerosol sprays should not be used around oxygen.
 - True - E.g. Hair spray, room air freshener, deodorant and insect repellent. Use non aerosol products when possible.
6. Hands and clothing must be free of grease, oil and hand sanitizer when changing oxygen regulators.
 - True
7. Do you have a working smoke detector in your home?
 - If they do NOT have one, they should install one on every level of the home and areas where people smoke. For help with installation and placement the local fire department can assist.
8. What would you do if a fire started in your home/suite?
 - Leave and call 911. A pre-determined and practiced escape plan will reduce panic and confusion. They should make sure all doors and windows are accessible. People living in some residences may receive specific instructions from building management; in that case, they would follow the building management requirements.
9. Describe anything you feel may prevent you from managing your oxygen equipment safely
 - Blindness, poor memory, rheumatoid arthritis, wheelchair bound may prevent safety use of oxygen equipment.

SAFE SMOKING DISCUSSION POINTS

- Always remove the oxygen
- Wait 10 minutes before lighting a cigarette/pipe. An oxygen rich environment would make a fire worse
- Have one designated safe smoking area
- Preferably sit at a table
- Never smoke in bed
- Use deep ash trays
- Don't place cigarettes/ash tray near/on absorbent material, e.g. carpet, sofas, on the arm of a cloth chair or near papers
- Never leave a lit cigarette un-attended
- If medications cause drowsiness or confusion clients should never smoke
- The safest plan is to speak to a Doctor about smoking cessation options
- Cognitive issues: the family/caregiver must realize the seriousness of the client smoking around oxygen (e.g. cigarettes/matches/lighters must not be available for the client when the caregiver/family is sleeping). If the client does not have a caregiver, they may need to be discharged to a situation where they are monitored.
- Active drug or alcohol use?
- Will the discharge "home" allow oxygen (e.g. Salvation Army, some rooming housed will not take clients with oxygen)
- Does the client/family indicate the living environment/location is safe to have oxygen? Sometimes it is not the client that is an issue, but could be those who live in the location with the client.