**General principles of assessing respiratory status**

- Oxygen therapy is guided by respiratory rate (RR), oxygen saturations (SpO₂) and assessment of breathing pattern.
- Count respiratory rate by pretending to check pulse whilst counting breaths for 1 minute.
- Don’t tell the patient you are measuring their respiratory rate – they may breath hold or hyperventilate.
- Target respiratory rate is ≤25 breaths per minute.

**Target saturations**

- Most patients have a target saturation of 92-94% (note this is lower than the normal 94-98% to conserve O₂ supply).
- The following patients should have a lower target of 88-92%
  - Severe cardiorespiratory disease (can’t complete one flight of stairs or stop >30 secs at top due to breathlessness)
  - Documented oxygen sensitivity *Obesity (BMI>40)
  - Neuromuscular disease (discuss with Respiratory Team*)
- Always use the lowest flow rate possible to achieve target SpO₂ as Oxygen likely to be in short supply in the hospital.

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**Assess Oxygen saturations, respiratory rate and breathing pattern**

- **SpO₂ <92% and RR<15**
  - **Very high risk group.**
  - Commence Oxygen aiming at target range, contact Respiratory Team* and monitor closely.
  - Start with 2L/min via nasal cannula.
  - Increase to 4L/min then to 6L/min as required.
  - Target SpO₂ achieved within 30mins?
    - Yes
      - For 88-92% SpO₂ target, do ABG and contact Respiratory Team*.
      - For 92-94% SpO₂ target, switch to 40% Venturi mask (red), increasing if needed to 60% (green)³.
      - Target SpO₂ achieved 30mins?
        - Yes
          - Use lowest flow rate or Venturi (or air) to achieve target SpO₂.
          - If SpO₂ >94% (or >92% if lower target) – reduce flow rate or Venturi.
          - Continue to monitor RR & SpO₂.
        - No
          - Patients taking large tidal volumes (very deep breaths) may be a concerning sign – contact Respiratory Team* if concerned.
          - Contact Respiratory Team*.
    - No
      - Switch to face mask with reservoir bag 10L/min and inform Critical Care or Respiratory Teams* depending on escalation decision.
      - Target SpO₂ achieved 30mins?
        - Yes
          - Increase to 15L/min with further management as advised by Critical Care/Respiratory Teams.
        - No
          - For any patient on 60% O₂ via Venturi or >10L/min O₂ via reservoir bag for >1hr, contact LGI CSM (07776 228723/bleep 2928) for LGI wards or SJUH CSM (07776 230473/bleep 5242) for SJUH or CAH wards to allow monitoring of ward O₂ usage.

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³ If any patient on 60% O₂ via Venturi or >10L/min O₂ via reservoir bag for >1hr, contact LGI CSM (07776 228723/bleep 2928) for LGI wards or SJUH CSM (07776 230473/bleep 5242) for SJUH or CAH wards to allow monitoring of ward O₂ usage.

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* Respiratory team contact is through Respiratory SpR at SJUH (bleep 6775) and Cardiology SpR at LGI (07795 477736).