

A. General Guidelines for Oxygen Administration

Oxygen will be administered utilizing the most appropriate device in order to achieve an Oxygen saturation greater than 94%.

EMR / BLS

1. Consider high flow oxygen (10-15 L/min) via non-rebreather facemask or BVM to all of the following but not limited to:
 - a) Patients in congestive heart failure (CHF) or with suspected pulmonary edema.
 - b) Patients with obstructive pulmonary disease in severe respiratory distress.
 - c) Patients with upper airway burns and toxic inhalations.
 - d) Patients experiencing significant PVC's [Protocol 09](#) (ALS Only)

B. Chronic Obstructive Pulmonary Disease (COPD)

1. If the patient is showing signs of respiratory distress, administer high-flow oxygen as in any other critical patient.
2. If the patient is awake, alert and not showing signs of respiratory distress and on home oxygen therapy, administer oxygen via nasal cannula at 1 L/minute higher than their rate at home. If the home oxygen rate is not known or if the patient is awake, alert and not showing signs of acute respiratory distress, administer oxygen at 3 L/minute via nasal cannula and monitor respirations