

Process for prescribing of oxygen in Adults in Primary Care

Section 1: Prescribing oxygen in primary care

In primary care oxygen can be supplied via;

1. Home Oxygen Service Contractor, BOC via Home Oxygen Order Form (HOOF)
2. Community Pharmacy Oxygen contractor- HS21 prescription

Completion of the Home Oxygen Order Form (HOOF)

Oxygen is a medicinal product and, therefore, needs to be prescribed via a new oxygen prescription, the Home Oxygen Order Form (HOOF Part A). The forms are available from the pharmaceutical section of the BSO website at: www.hscbusiness.hscni.net/services/2357.htm and the primary care intranet at: http://primarycare.hscni.net/PharmMM_Resources_Clinical%20Resources.htm#Home%20Oxygen%20Service.

Guidance on completion of these forms can also be found at www.hscbusiness.hscni.net/services/2359.htm

When ordering a combination of equipment including ambulatory cylinders, check that the total number of hours per day does not exceed 24 hours.

The patient may choose to obtain ambulatory oxygen cylinders from BOC or from their community pharmacy. Two prescribers should not be independently prescribing oxygen for the same patient. i.e. **a patient cannot obtain ambulatory cylinders from both suppliers.**

The following table lists the various options for the supply of home oxygen:

Oxygen modality	BOC Prescription via HOOF Part A form	Community pharmacy HS21 prescription form
Static concentrator	Yes	No
Static cylinders (AF)	No	Yes
Standard ambulatory cylinder (CD 460litres)	Yes	Yes

For information only:

Additional ambulatory options are available under the new contract from BOC and these would normally be prescribed on the HOOF Part B form (adults) or Paediatric HOOF (child) following specialist assessment or paediatric assessment as described in section 2 of this document.

Patients who require oxygen assessment for ambulatory/LTOT should be referred to the respiratory specialist services in their area.

A list of these ambulatory options is listed below:

Static concentrator (normal flow 0-5 LPM)	Self-fill (2 x cylinders as standard)
Static concentrator (high flow 0-9 LMP)	Transportable oxygen concentrator (trolley based)
Portable oxygen concentrator (over the shoulder)	Standard portable cylinder (CD 460 litres)
Lightweight portable cylinder (ZA 300 litres)	Oxygen conserving device
Liquid oxygen (dewar plus 1 flash)	

(a) Supply from BOC

For patients prescribed a concentrator, sufficient back up static cylinders to provide 8 hours of oxygen at the prescribed flow rate and hours/per day will be supplied by BOC.

1. Duration of supply for ambulatory cylinders

Ambulatory standard cylinders ordered via HOOF Part A will be supplied to the patient by BOC for the period defined by the GP. This is stated on section 14 of the HOOF. This can be for a period of up to but not exceeding 12 months. Towards the end of this period BOC will notify the GP and request a new HOOF to be completed.

2. Delivery times (Appendix 1)

There are three categories of installation:

1. Standard (within 3 business days)
2. Next Calendar Day
3. Urgent (within 4 hours)

The GP must consider this carefully – it is envisaged that most supplies of oxygen should be made within the standard supply arrangements i.e. 3 business days.

Please ensure that you select the correct delivery category as there are cost implications for next day/4 hour supply.

3 Patient Consent

Prior to the ordering of oxygen the GP must obtain patient consent to the transfer of their data to:

- BOC Healthcare
- Northern Ireland Fire and Rescue Service (for fire safety reasons). BOC inform the Fire and Rescue Service of all installations they make.
- The patient's electricity supplier (to identify essential electricity users)
- The Health and Social Care Board and Business Service Organisation for payment and probity purposes

A record of the patient's consent should be retained in the patient's record.

The completed HOOF should be faxed to:

BOC Patient Service Centre 0800 169 9989

BOC will confirm receipt by fax.

A second fax will be received to confirm details of the installation once the necessary arrangements have been made with the patient / carer. BOC will contact the GP if they have any queries.

The original copy should also be posted first-class to:

**BOC Homecare
Prince Regent Road
Castlereagh
Belfast
BT5 6RW**

Mark the envelope with HOOF/Confidential on right hand corner

4. Urgent orders required where a HOOF cannot be completed in advance

In clinical situations where oxygen is urgently required but the prescriber is unable to complete and fax a HOOF to BOC, an urgent order may be requested by telephone providing that all the necessary information can be provided to the

contractor by the prescriber. In this case, the prescriber **MUST** provide the completed HOOF within 24 hours of the request being made by telephone. The telephone number for urgent requests without a HOOF is **0845 6094345**

5. Changes to the patient's oxygen requirements

If the patient's details or their requirements have changed, a new HOOF A needs to be completed. BOC should be notified by fax with the following information:

BOC Patient Service Centre 0800 169 9989;

- Patient Name
- BOC Patient Number (if available)
- Address
- NI Health & Care Number
- Date Of Birth
- Date of Death or Date no longer required

Patients/carers may also contact BOC directly on 0845 609 4345 to notify them of any change of details or circumstances e.g. the need for removal of oxygen equipment.

An advice line is available to deal with any clinical queries. The telephone number is:

BOC Clinical Support Number - Patient Service Centre 0845 609 4345

(b) Supply from community pharmacy

Static and ambulatory cylinders can be prescribed on HS21 prescription in line with the [Northern Ireland Drug Tariff](#). This must not be a duplicate supply.

Section 2: Patients who require long term oxygen therapy

Patients requiring Long Term Oxygen Therapy (LTOT) will have their needs assessed by the appropriate healthcare specialist. This may be either a primary care or a secondary care specialist respiratory team. In addition to establishing the clinical need for long term oxygen the specialist team will consider the most appropriate modality which best meets the clinical, lifestyle and mobility needs of the patient. The specialist teams will be able to choose from a wider range of options including high flow concentrators, self-fill concentrators, transportable and portable concentrators, lightweight and standard ambulatory cylinders, conserver devices and liquid oxygen.

The healthcare professional will order in a similar way using a specialist HOOF B. Patients may choose to have their ambulatory cylinders provided by BOC or from their community pharmacy. Prescribers will be required to indicate clearly on communication to you whether ambulatory cylinders will need to be prescribed by the GP for the patient.

Trusts will have a register of authorised prescribers who may order oxygen from BOC using HOOF Part A or Part B. Trust Health Care Professionals (HCPs) should ensure that an authorised Trust prescriber signs all HOOF prescription forms. In exceptional clinical circumstances, where there is no authorised Trust prescriber available to sign a HOOF and there would otherwise be a delay to a patient receiving oxygen services, a Trust HCP may ask a GP to prescribe home oxygen. In these circumstances, the HCP should liaise with the GP to seek their agreement and ensure that the relevant HOOF is completed fully and signed before ordering.

Recording of prescribing of oxygen

It is important that the prescribing of oxygen is recorded on the patient's record using the appropriate read code.

If oxygen is prescribed by a Trust HCP, they should ensure that there is comprehensive and timely communication to the patient's GP to include the following:

- The clinical indication for the prescription of oxygen
- Details of the prescription – i.e. Flow rate and number of hours / day that oxygen is required
- Where patients have chosen to obtain ambulatory cylinders from their community pharmacy rather than from BOC this should be stated to GP.
- When the patient will next be reviewed

Existing Patients

From 1st January 2013 patients prescribed oxygen will receive their oxygen concentrator service from BOC. Ambulatory cylinders will continue to be

prescribed by the patient's GP and be supplied by the patient's community pharmacy. There will be no changes to the patient's equipment until the patient is reviewed and an assessment made regarding any appropriate changes. Specialist teams will agree a process for prioritising patients for review.

There will be no changes to existing prescribing practices until patients are reviewed by a specialist team and an assessment made regarding any appropriate changes. After review a patient may choose to continue to receive their ambulatory cylinders via their general practitioner and community pharmacist or have them supplied by BOC. In the event that the patient requests supply via BOC the GP will be notified in writing by the review team and all existing HS21s must be cancelled accordingly by the GP.

Appendix 1: Ordering and Delivery schedule

Order placed with BOC	Standard supply				Next Day Supply	
	Received before 5pm	Received after 5pm			Received before 5pm	Received After 5pm
	DELIVERY BY END OF					
Monday	Thurs	Fri	Tue	Wed	Tue	Wed
Tuesday	Fri	Mon	Wed	Thurs	Wed	Thurs
Wednesday	Mon	Tue	Thurs	Fri	Thu	Fri
Thursday	Tue	Wed	Fri	Mon	Fri	Sat
Friday	Wed	Thurs	Mon	Tue	Sat	Sun
Saturday	Thurs	Thurs	Tue	Tue	Sun	Mon
Sunday	Thurs	Thurs	Tue	Tue	Mon	Tue