

# Managing home oxygen after leaving the NICU



## Call 911 right away if your baby has any of these:

- Not breathing
- Cannot wake up
- Oxygen saturation levels or “sats” on monitor are lower than ordered limits by your baby’s doctor and not responding to increased supplemental (extra) oxygen
- Heart rate very low on monitor
- Blue or grey color to nails, lips or skin

## When should I call the pulmonologist (lung doctor)?

Call your baby’s lung doctor at **404-785-KIDS (5437)** if:

- Your baby has lower oxygen saturation levels than normal.
- You are almost out of your baby’s medicine (inhalers or diuretics).

## What home oxygen supplies will I need?

The care team will work with you to arrange the delivery of supplies before your baby goes home. You will need these supplies:

- Nasal cannula
- Portable oxygen tank (a small tank for travel)
- Oxygen concentrator (a large oxygen machine for home)
- Pulse oximeter (pulse ox) probe
- Pulse ox machine and charging cord
- Medical tape

## How do I use the supplies?

- The nasal cannula is a thin plastic tube with 2 small tubes that point into your baby’s nostrils (nose holes). It gives oxygen to your baby from a portable tank or home concentrator.
- The pulse ox uses a probe on your baby’s hand or foot to measure their oxygen saturation level (like what your baby had in the hospital).
- The pulse ox machine will alarm when the oxygen saturation level and heart rate are outside the range that your baby’s doctor ordered.
- The portable oxygen tank has a limited amount of oxygen inside. Check the amount of oxygen inside the tank often (at least 1 time each day and before you travel). Keep the oxygen tank key nearby at all times.
- Call your home health company if:
  - Any of your supplies do not work.
  - You are running low on supplies.

**In case of an urgent concern or emergency, call 911 or go to the nearest emergency department right away.**

# Managing home oxygen after NICU, continuation

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## How do I use the pulse ox probe?

- You may put the probe on your baby’s hands or feet.
- Move the position of the pulse ox probe each morning and each night.
- As your baby grows, you may be able to put it on your baby’s fingers or toes.

## What do I do when the pulse ox machine alarms?

The alarm means your baby’s oxygen saturation level is reading too low or your baby’s heart rate is outside of the normal range.

- Make sure the:
  - Pulse ox probe is attached to your baby.
  - Pulse ox probe is attached to the machine.
  - Pulse ox probe is tracking well. Your baby’s movements can affect how well it works.
  - Red light on the pulse ox probe is on.
  - Nasal cannula is in your baby’s nose.
  - Oxygen tubing is attached to your portable tank or home concentrator.
  - Oxygen tank is not empty.
- Look at your baby for signs of respiratory distress (see below).
- Calm down your baby if they are upset.
- Turn up the oxygen flow to bring up your baby’s oxygen saturation level.
- Call your child’s pediatrician for mild to moderate respiratory distress.
- Call 911 or take your baby to the nearest emergency department (ED) for severe respiratory distress. When in doubt, call 911.

## What are signs of respiratory distress?

Mild to moderate distress	Severe distress
<ul style="list-style-type: none"><li>• Breathing very fast</li><li>• Fussy</li><li>• Oxygen saturation level is a little lower than normal (80 to 90%) but is responding to increased oxygen flow</li><li>• High heart rate as shown on pulse ox machine</li><li>• Coughing</li><li>• Red or flushed face</li><li>• Shallow retractions (muscles between ribs or under ribs pull in)</li><li>• Nostrils (nose holes) flaring open</li></ul>	<ul style="list-style-type: none"><li>• Breathing very slow</li><li>• Sleepy and will not wake up</li><li>• Oxygen saturation level is much lower than normal (less than 80%) or is not responding to increased oxygen flow</li><li>• Very high heart rate or very low heart rate as shown on pulse ox machine</li><li>• Coughing</li><li>• Pale color</li><li>• Deep retractions (muscles between ribs or under ribs pull in very much)</li><li>• Head bobbing (head bouncing forward and back when they breathe)</li></ul>

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# Managing home oxygen after NICU, continuation

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## How do I keep my baby safe while using oxygen?

- Stay away from open flames and heat sources.
- Do not smoke anywhere near your baby or the oxygen concentrator and tank. This could cause harm to your baby and cause a fire that spreads quickly.
- Protect the oxygen tank from being knocked over.
- Be aware of tubing to avoid tripping

## How long will my baby need oxygen?

- The length of time that oxygen is needed is different for each baby.
- The lung doctors and your baby's pediatrician will work together to make a plan to stop oxygen use.
- Your baby's doctor will be responsible for changes in their oxygen. Do not change your baby's home oxygen until their first visit with the follow-up doctor.

### About my baby

- **My baby's name is:**
- **Their birthday is:**
- **Their diagnosis is:**
- **My baby was sent home from the hospital on:**
- **Their typical oxygen support is:**
- **Their typical oxygen saturation levels are:**
- **Their typical heart rate is:**
- **My baby's current medicines are:**

**This teaching sheet contains general information only. Talk with your child's doctor or a member of your child's healthcare team about specific care of your child.**

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