

Home Oxygen Referral Pathway

Community Respiratory Service



Humber Teaching
NHS Foundation Trust

Long Term Oxygen Therapy (LTOT)

Consider referral when evidence of:

- Resting SpO₂ on 2 occasions
≤ 92% or
≤ 94% (Polycythaemia / Pulmonary HTN)

Ambulatory Therapy (AOT)

Consider referral when evidence of both

- Exercise desaturation
(SpO₂ <90% or SpO₂ drop >4%)
- Require oxygen outside of the home

Palliative Oxygen Therapy (POT)

Consider referral when evidence of:

- Symptomatic patient with SpO₂ 92%<

**Please complete HOOF A if patient
need is deemed urgent**

COMPLETE CUSTOMER ACCESS SERVICE (CAS) REFERRAL FORM

When all sections are completed please send using electronic referral via SystmOne or email to hnf-tr.cas@nhs.net

BTS Guidelines: It is recommended that patients are assessed for **LTOT / AOT** 8 weeks post exacerbation.

If oxygen commenced on hospital discharge, please advise patients of this 8-week timescale for community review and refer via CAS.

(Patients who exacerbate frequently and are unable to achieve a period of stability lasting 8 weeks may need to be assessed earlier. If LTOT is ordered for these patients, they should be counselled that in the future LTOT may not be required once they achieve a stable state)

For patients discharged from hospital / hospice on **Palliative Oxygen Therapy**:

Complete CAS referral form only if a telephone call from the HOSAR following installation is required.

PLEASE DO NOT HESITATE TO CONTACT THE HOS-AR FOR ADVICE OR DISCUSSION OF INDIVIDUAL PATIENTS

