

## PATIENT GROUP DIRECTION (PGD)

**Administration of Oxygen  
 By Registered Nurses and Midwives on the Neonatal Units at UHDB**

### Documentation details

Reference no:	UHDB100
Version no:	V2
Valid from:	07/11/2024
Review date:	07/05/2027
Expiry date:	06/11/2027

### Change history

Version number	Change details	Date
1	New individual template, Oxygen added	March 2021
2	Storage of cylinders	August 2024

### Glossary

Abbreviation	Definition

**1. PGD template development (PGD Working Group)**

**PGD Working Group Membership (minimum requirement of consultant, pharmacist and a registered professional who can work under a PGD (or manages the staff who do). If this is a review of existing PGD, replace previous names with the individuals involved for this version**

Name	Designation
Velur Balasubramaniam	Consultant
Lisa Taylor	Advanced Pharmacist
Vicki Baldwin	Neonatal Matron
Sally Shipley	Clinical Nurse Educator

Where an antimicrobial is included, confirm the name, designation and date of the antimicrobial pharmacist who has reviewed this version

Name of antimicrobial pharmacist	Designation	Date Reviewed
n/a	n/a	n/a

## 2. Organisational authorisations

The PGD is not legally valid until it has had the relevant organisational authorisation.

University Hospitals of Derby & Burton NHS Foundation Trust authorises this PGD for use by the services or providers listed below:

### Authorised for use by the following organisation and/or services

Royal Derby Hospital Neonatal Intensive Care Unit (NICU)  
Queens Hospital Burton Neonatal Unit (NNU)

### Limitations to authorisation

### Organisational Authorisation (legal requirement).

Role	Name	Sign	Date
Medicines Safety Officer (Pharmacist)  <i>Pharmacist: Medicines Safety Officer, Chief Pharmacist or assigned deputies)</i>	James Hooley	Signed copy held by Pharmacy	07/11/2024

Additional signatories (required as per legislation and locally agreed policy)			
Role	Name	Sign	Date
Advanced Pharmacist – W&C <i>Clinical Pharmacist from PGD working group</i>	Lisa Taylor	Signed copy held by Pharmacy	13/09/2024
Consultant Paediatrician /Neonatologist <i>Doctor</i>	Dr Balasubramaniam	Signed copy held by Pharmacy	05/11/2024
Matron, NICU <i>Registered Professional representing users of the PGD</i>	Vicki Baldwin	Signed copy held by Pharmacy	04/10/2024

Local enquiries regarding the use of this PGD may be directed to [UHDB.PGDgovernance@nhs.net](mailto:UHDB.PGDgovernance@nhs.net)

Section 7 provides a registered health professional authorisation sheet. Individual professionals must be authorised by name to work to this PGD.

### 3. Characteristics of staff

<b>Qualifications and professional registration</b>	<ul style="list-style-type: none"> <li>- NMC Registered Nurse</li> <li>- NMC Registered Midwife</li> </ul>
<b>Initial training</b>	<ul style="list-style-type: none"> <li>- Completion of all Essential-to-role training as outlined in the UHDB PGD policy.</li> <li>- Individual has read and understood full content of this PGD and signed authorisation (section 7)</li> <li>- Training which enables the practitioner to make a clinical assessment in order to establish the need and supply the medicine according to the PGD.</li> <li>- Completion of oxygen awareness training</li> <li>- Neonatal or Paediatric basic life support compliant (dependent on permanent area of work)</li> </ul>
<b>Competency assessment</b>	<p>Staff operating under this PGD are encouraged to review their competency using the <a href="#">NICE Competency Framework for health professionals using patient group directions</a></p> <p>Individuals operating under this PGD are personally responsible for ensuring they remain up to date with the use of all medicines included in the PGD - if any training needs are identified these should be discussed with the either authorising manager (section 7) or the manager within the PGD working group (section 1) so that further training can be provided as required.</p>
<b>Ongoing training and competency</b>	<p>Staff operating under the PGD must be compliant with medications management training for Paediatrics.</p>
<p><b><i>The decision to supply any medication rests with the individual registered health professional who must abide by the PGD and any associated organisation policies.</i></b></p>	

**4. Clinical condition or situation to which this PGD applies**

<b>Clinical condition or situation to which this PGD applies</b>	Emergency management of the hypoxic infant on the neonatal unit
<b>Criteria for inclusion</b>	<ul style="list-style-type: none"> <li>• Babies on the neonatal units presenting with signs of hypoxia (Saturations below 88%, cyanosis)</li> <li>• Babies on neonatal units whose saturations fall below target limits. Babies who have alternative target saturation limits should have this clearly documented in their medical notes.</li> </ul>
<b>Criteria for exclusion</b>	<ul style="list-style-type: none"> <li>• Duct dependent lesions – seek medical advice</li> </ul>
<b>Cautions including any relevant action to be taken</b>	<ul style="list-style-type: none"> <li>• Must reflect local and/or national clinical guidelines or policies where available.</li> <li>• If, after administration of oxygen, saturations return to target limits (refer to local policy), reduce oxygen to prevent hyperoxia.</li> <li>• The need for supplementary oxygen is an indication for urgent medical review.</li> </ul>
<b>Action to be taken if the patient is excluded</b>	<ul style="list-style-type: none"> <li>• Record reasons for exclusion in patient notes</li> <li>• Refer to medical staff</li> </ul>
<b>Action to be taken if the patient or carer declines treatment</b>	<ul style="list-style-type: none"> <li>• Document advice given</li> <li>• Refer to medical staff</li> </ul>
<b>Arrangements for referral for medical advice</b>	Seek medical review using the bleep system.

**5. Description of treatment**

<b>Name, strength &amp; formulation of drug</b>	Oxygen
<b>Legal category</b>	Prescription only medicine
<b>Route / method of administration</b>	Inhalation
<b>Indicate any off-label use (if relevant)</b>	
<b>Dose and frequency of administration</b>	Up to 15 litres/minute to achieve target level oxygen saturations. Increase oxygen up to 100% to achieve target level saturations.

<b>Duration of treatment</b>	Continuous while awaiting medical review
<b>Quantity to be supplied (leave blank if PGD is administration ONLY)</b>	
<b>Storage</b>	<p>Connected via oxygen port. Bottled oxygen should be stored in a secure location and not used after expiry date.</p> <p>Oxygen cylinders stored upright in an appropriate secure fixing. Empty cylinders should be replaced as soon as possible and stored in a designated space.</p>
<b>Drug interactions</b>	No interactions reported
<b>Identification &amp; management of adverse reactions</b>	<p>High concentrations of oxygen can cause pulmonary epithelial damage (Bronchopulmonary dysplasia), convulsions, and retinal damage, especially in preterm neonates.</p> <p>Preterm neonates who are at risk of developing retinal damage will be reviewed by ophthalmology according to local policy.</p> <p>Neonates who require emergency oxygen under the PGD will be subsequently reviewed by the medical team and appropriate action taken. In the event that high concentrations of oxygen cause convulsions, the emergency buzzer should be pulled for immediate medical review.</p>
<b>Management of and reporting procedure for adverse reactions</b>	<ul style="list-style-type: none"> <li>Healthcare professionals and patients/carers are encouraged to report suspected adverse reactions to the Medicines and Healthcare products Regulatory Agency (MHRA) using the Yellow Card reporting scheme on: <a href="https://yellowcard.mhra.gov.uk">https://yellowcard.mhra.gov.uk</a></li> <li>Record all adverse drug reactions (ADRs) in the patient's medical record.</li> <li>Serious adverse reactions (moderate harm or above as per NRLS definition) should be reported via trust incident management system (e.g. Datix) to ensure duty of candour and learning from harm during clinical use.</li> </ul>
<b>Written information to be given to patient or carer</b>	Verbal advice on why oxygen has been administered, action of the drug and subsequent management of the condition
<b>Patient advice / follow up treatment</b>	As arranged/required by physician.

<b>Records</b>	<p>Administration of oxygen under the PGD must be documented in the 'Once only' section of the drug chart (RDH) or as a nursing note or PGD medication entry on Meditech (QHB).</p> <p>Either the system holding the record, or the healthcare practitioner working under the PGD, must capture/document all of the following:</p> <ul style="list-style-type: none"> <li>• name of individual, address, date of birth and GP with whom the individual is registered (if relevant)</li> <li>• name of registered health professional</li> <li>• name of medication supplied/administered</li> <li>• date of supply/administration</li> <li>• dose, form and route of supply/administration</li> <li>• quantity supplied/administered</li> <li>• batch number and expiry date (if applicable e.g. injections and implants)</li> <li>• advice given, including advice given if excluded or declines treatment</li> <li>• details of any adverse drug reactions and actions taken</li> <li>• Confirm whether <u>supplied and/or administered</u> via Patient Group Direction (PGD)</li> </ul> <p>Records should be signed and dated (or a password controlled e-records).</p> <p>All records should be clear, legible and contemporaneous.</p>
----------------	---

## 6. Key references

<b>Key references</b>	<p>BNFC – NICE <a href="https://bnfc.nice.org.uk/treatment-summary/oxygen.html">https://bnfc.nice.org.uk/treatment-summary/oxygen.html</a></p>
-----------------------	--



**7. Registered health professional authorisation sheet**

**PGD Name [version]: Oxygen by registered nurses and midwives [v2.0]**  
**PGD ref: UHDB100 Valid from: 07/11/2024 Expiry date: 06/11/2027**

Before signing check that the document you have read is published on Koha or is an in-date hard-copy with all necessary authorisations signed in section 2. The Name/Version/Ref of the document you have read **MUST** match this authorisation form.

**Registered health professional**

By signing this patient group direction you are indicating that

- a) You agree to and understand all content and commit to only work within this framework.
- b) You have completed any core PGD e-Learning or training records on My Learning Passport or within your department.
- c) You meet the staff characteristics and have completed any additional learning/competency outlined in Section 3 of this PGD.

Patient group directions do not remove inherent professional obligations or accountability.

It is the responsibility of each professional to practise only within the bounds of their own competence and professional code of conduct.

I confirm that I have read and understood the content of this Patient Group Direction and that I am willing and competent to work to it within my professional code of conduct.			
Name	Designation	Signature	Date

**Authorising manager / Assessor**

I confirm that the registered health professionals named above have declared themselves suitably trained and competent to work under this PGD. I give authorisation on behalf of University Hospitals of Derby & Burton NHS Foundation Trust for the above named health care professionals who have signed the PGD to work under it.			
Name	Designation	Signature	Date

**Note to authorising manager**

Score through unused rows in the list of registered health professionals to prevent additions post managerial authorisation.

This authorisation sheet must be retained by a manager in the clinical department where the PGD is in-use to serve as a record of those registered health professionals authorised to work under this PGD.