



**Home Oxygen Therapy Information and Agreement form  
For Service User/ Guardian/ Legally Appointed Person**

**Name of Service User:** \_\_\_\_\_ **Date:** \_\_\_\_\_

- I have been given information on the safe use of oxygen and I understand this information.
- I understand that my contact details and information regarding myself/my child's/ the person under my guardianship's medical condition will be shared with the oxygen supplier.
- From time to time the HSE will do a review of oxygen therapy services. This is called an audit. No identifying information, such as my name or date of birth will be used in the audit reports. I understand that information relating to my oxygen therapy will be used in these audits.
- I understand that my oxygen therapy after it is installed, will be periodically reviewed by the oxygen prescriber.
- If the status of my medical card or my long term illness card changes I will inform the HSE and the oxygen service supplier of these changes.
- If, at any time in the future the medical team deems that my oxygen therapy is no longer required, I agree that the oxygen supplier can remove their equipment from my home.
- If I do not use my oxygen therapy safely, I understand that the oxygen therapy may be stopped and the equipment may be removed from my home for health and safety reasons.

I agree to the conditions outlined above:

Signature of Service User/Guardian/ Legally Appointed Person: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

<b>Information provided to the Service User</b>	<b>Tick</b>	<b>Comments</b>
Fire safety (highlighted overleaf)		
Administration (highlighted overleaf)		

Witness/staff member obtaining agreement and providing information:

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_



## Oxygen Therapy Safety Advice to be provided to Service Users

### 1. Fire safety

These include but are not limited to:

- Service Users and their family members are advised that **smoking cigarettes and/or E-cigarettes is not permitted in the same room** where an oxygen concentrator or oxygen cylinders are used or stored.
- Advise to have a suitable **fire extinguisher** available in the residence.
- Advise that the home environment must be fitted with suitable and operational **smoke or fire alarms**
- Advise that the oxygen concentrator or cylinders should **never be used near a naked flame e.g. a gas cooker or open flame**
- Advise that petroleum based products (**e.g. Vaseline/Vapor rub**) should **never** be used near oxygen.

### 2. Administration

The Service User should be advised of the following recommendations. These include but are not limited to:

- Inform their home and/or car insurance company that oxygen therapy is being used in the home/car.
- Complete ESB Priority Support customer registration form and how/where to access same.  
<https://www.esbnetworks.ie/who-we-are/customer-service/vulnerable-customer-policy>
- Non-medical card holders are advised on how to request reimbursement for oxygen or ventilation through the Drugs Payment Scheme (DPS)- <https://www2.hse.ie/services/schemes-allowances/drugs-payment-scheme/refunds/>
- Advise that the oxygen supplier will provide training including booklets to service user, family/carers at time of installation.
- Any emergencies with oxygen equipment must be directed to the oxygen supplier on their emergency numbers.