



Safer Practice Notice

- Status**
- Active
 - Updated
 - Resolved

- Zone Application**
- Provincial
 - North
 - Edmonton
 - Central
 - Calgary
 - South

30 May 2016

For Action By:

- Allied Health Leaders
- Patient Care Managers
- Professional Practice Leads
- Clinical Leaders
- Medical Leaders
- Operational Leaders
- Contract Service Providers
- Inter Professional Practice
- Nurse Educators
- Respiratory Educators
- CPSM
- Midwives
- EMS

Contact:

Professional Practice
 Consultation Service
 1-855-735-3043
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Restrict Medical Air Access for Patient Safety

Issue

Patients may be harmed when they are mistakenly attached to Medical Air instead of Oxygen. The wall outlet design does not deter this type of unintended misconnection. There is evidence that a blended approach to reducing risk includes:

- **installation of Air Guards to all air flowmeters**
- **standardized inventory control of air flowmeters**

Refer to “Managing Air Oxygen Misconnections Toolkit” available on Insite

Action

Units Manager should direct the following activities:

- to remove all air flowmeters from wall outlets
- decide how many air flowmeters to retain (consider **2 air flowmeters** per site or 1 per 50 beds)
- purchase and attach **Air Guards** to each of the retained air flowmeters (Oracle/iProcurement Product #313628)
- send the excess air flowmeters to surplus

Site Directors should:

- devise and implement an inventory control process for all retained air flowmeters

Staff should follow Infection Prevention Control (IPC) processes by:

- wiping down reusable *air flowmeters and *Air Guards between patients with AHS approved low level disinfectant (e.g. Caviwipes, Virox)
- replacing single-patient-use ****adapters** between patients
- storing the *air flowmeters and *Air Guards in a clean, covered container as per IPC Best Practice Guidelines

