

PLANNING OXYGEN SUPPLIES FOR RESPIRATORY PATIENTS WHEN TRAVELLING

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Amendments to 141/13

Section	Change
General	Review of the entire document

Note: Technical changes from the previous edition are underlined

1 Introduction

Throughout Europe, medical oxygen respiratory therapy is recognised by the health authorities as a means of treating patients with respiratory disease to improve the quality of life of thousands of patients. A large group of these patients are still very active and have the desire to move outside of their home environment and to travel for extended distances.

It is normally the responsibility of the Homecare Service Providers to assist in organising the medical oxygen therapy service whilst the patient is away from the home, including trips abroad.

The requirements from the patient to be able to use the oxygen therapy system outside the home is constantly increasing. The patients require the ability to visit public places, such as restaurants and cinemas, whilst being able to use the ambulatory oxygen systems safely.



This document provides a guide to the patient's Homecare Service Provider for the process of organising the medical oxygen therapy supply for patients whilst travelling away from their home.

It also provides guidance that can be given to the patient about the safe use of the medical oxygen therapy supply on public transport and in public places.

This document does not attempt to describe all of the possible organisational requirements for the patient to plan their trips or define the issues around the payments and reimbursement of the associated fees.

2 Scope

The scope of this document is to provide advice to the Homecare Service Provider about the minimum safety precautions and practical advice to be given to the patient when they require use of medical oxygen supply systems outside the home environment and whilst travelling.

The advice can also be provided to the travel companies, such as airlines, train and bus operators and public services providers as guideline for the safe use of medical oxygen supply system for domiciliary patients.

It details the actions and roles for the:

- patient when travelling with equipment;
- current Homecare Service Provider (current HSP) in providing support the patient when travelling; and
- Homecare Service Provider at the destination (HSP at destination) in providing a suitable medical oxygen supply system for the patient when travelling.

It also covers specific guidelines for homecare respiratory patients for using oxygen when:

- in transit;
- at locations outside the home when in the Current HSP's area; and
- travelling away from home for longer periods when in the HSP at destination's area.

The document provides:

- templates for handouts to the patient giving the minimum safety requirements for the use of medical oxygen supply systems in transit;
- templates for handouts to the travel service provider giving the minimum safety requirements for the use of medical oxygen equipment in transit;
- information covering carrying and/or using medical oxygen systems on different forms of transport and in different public environments; and
- advice on the use and the permissions required when using the medical oxygen supply equipment on public transport and in public areas.

3 Purpose

The purpose of the document is :

- to provide guidance on the safe use of medical oxygen when away from home;
- to provide information to be given to the travel/accommodation providers;
- to outline the information required from the patient to ensure oxygen supply is assured during travel, at destination and when coming back home.

4 Definitions

Contracting Entity	An organisation responsible for the payment of the oxygen therapy service.
Carer	A person (for example a relative or friend) who can assist the patient with their therapy.
Current Homecare Service Provider (Current HSP)	The Homecare Service Provider who is routinely providing therapy services at the patient's home.
Homecare Service Provider at destination (HSP at destination)	The Homecare Service Provider who is temporarily providing therapy services during or at the journey of the patient.
<u>SDS</u>	<u>Safety Data Sheet</u>
<u>EHIC</u>	<u>European Health Insurance Card</u>
<u>MOSS</u>	<u>Medical Oxygen Supply Systems</u>

5 Travel plan

The proposed travel plan provides a logical order of actions to be taken by the relevant parties involved in making arrangements for the supply of the patient's medical oxygen therapy system. The travel plan is used to ensure that the patient can continue to use their medical oxygen therapy system safely during the journey and at their destination point.

The key stakeholders in preparing the travel plan are the:

- patient/patient carer;
- current Homecare Service Provider (current HSP);
- Homecare Service Provider at destination (HSP at destination) (where different);
- transport operators;
- patient's prescriber;
- contracting entity (payor) and
- travel and accommodation provider(s).

The basic principles for ensuring that the patient receives an appropriate service are that the:

- patient is recommended to contact their doctor to obtain authorisation for travelling and to review their oxygen requirements;
- patient gets in contact with the current HSP to communicate in advance all necessary information about the travel plan;
- the HSP at destination should provide all products and equipment needed for the therapy
- the HSP at destination will be responsible for training the patient and/or caregiver ensuring that they are competent in using the equipment and for providing a backup service (if needed) in case of equipment failure;
- oxygen supply equipment provided by the current HSP should not be used other than for the duration of the journey and
- Administration for the payment of the service whilst travelling must be checked prior to starting the journey.

Suggested of administrative documents to be used in the preparation of the travel plan are given in Appendix 1. These forms should be completed by the patient as check list to allow the correct and complete organisation of the journey.

The travel plan summarises the activities that shall be carried out when organising a journey and specifies the responsibilities and information to be completed:

- prior to the journey (see Section 6);
- at the destination (see Section 7) and
- after the journey (see Section 8).

6 Actions prior to making the journey

6.1 Patient information

Prior to making the journey, the Patient / Carer should supply the following information to the Current Homecare Service Provider:

- travel dates;
- mode of travel;
- final travel details - including any flight, cruise or train references;
- length / time of journey and
- travel itinerary (including all locations, addresses of hotels and final destination).

The Current HSP is responsible for providing information to the patient/carer concerning the specification of equipment being carried in own vehicle for insurance purposes.

The Current HSP should advise the patient that they should contact their doctor to inform them that they intend to travel. Dependant on the type of travel and on their physical condition, it could be necessary for the patient undergo further examination. This will determine whether the Patient's prescribed flowrates need to be modified for when they are travelling to the destination. This is especially important when flying, where the oxygen content is likely to fall below normal atmospheric levels. This could result in the patient receiving a modified prescription to cover their travelling activities.

The Current HSP should confirm whether they are able to supply oxygen at destination using the Current HSP's local services.

Where this is not possible the Current HSP should endeavour to provide the patient with contact details of an appropriate oxygen therapy supplier. Alternatively, the Current HSP should provide the patient/carer with contact details of companies that specialise in making travel arrangements for oxygen therapy patients.

The patient is responsible for carrying out all the preparations when planning to travel away from home. This planning should ideally be completed at least two weeks in advance of the journey in order to ensure that an appropriate service can be provided by all stakeholders. The patient shall take notice of the information supplied by the current HSP regarding operating instructions of the devices during travel and is responsible to verify beforehand the compatibility of electrical connections at the destination.

The current HSP should be aware of the travel planning and the therapy details:

- Travel planning: the patient/carer shall provide the requested information to the current HSP (example of checklist for HSP – see appendix 1).
- Therapy details: The patient/carer shall provide the requested information to their doctor and shall provide feedback to the current HSP (example see - appendix 2).

The patient should be advised by the current HSP to obtain a European Health Insurance Card prior to travelling to another country. This will provide them with access to the state provided health care during their stay within another Member State.

More information concerning the European Health Insurance Card is given in Appendix 5.

6.2 Information for the Homecare Service Provider at destination

When Homecare Service provider at destination is not the same company as the current HSP, the current HSP and the patient need to ensure the complete travel details and therapy details are made available to the HSP at destination to arrange appropriate oxygen supplies. It may also be beneficial to provide the HSP at destination with the address and contact details of the current HSP.

Where the travel details mean that the patient will visit several destinations, they will need to complete the details for each destination where a different service provider will supply the oxygen.

It is recommended that the current HSP's supply equipment is not used whilst the patient is away from home and that the equipment at the proposed destination(s) is provided by the HSP at destination which will:

- ensure that the equipment is compatible with the local conditions;
- provide a suitable replacement policy for when the equipment malfunctions;
- give a clear distinction of equipment ownership between the HSP at destination and the current HSP; and
- ancillary equipment, such as oxygen conserving devices may not be suitable for use with the new equipment and requirements for this type of equipment should be made clear when arranging the supplies with the HSP at destination.

It should be explained to the patient that they will need to be trained in the use of the new equipment when they arrive at the destination.

Where the patient requires an oxygen supply whilst travelling, the current HSP should provide the patient with a suitable supply system that will have sufficient capacity for the duration of the journey, including the return back home. It is important to inform the patient that this equipment shall be retained and returned after they have returned home.

Where the equipment is electrically powered, a check should be made to ensure that the voltage supply and power lead is compatible with the electrical supply available at all destinations. This is likely to apply to portable concentrators, where recharging of the batteries is required.

7 Actions at the destination

Having been informed by the patient/carer or the current HSP that an oxygen therapy service is required, prior to the patient travelling the Homecare Service Provider at destination shall:

- make the necessary arrangements to supply the medical oxygen equipment and subsequent medical oxygen supplies, at the patients' destination (e.g. hotel,...)
- communicate with the patient on their possible travel plans locally.

When the patient arrives at destination the HSP at destination shall:

- ensure that the patient is trained in the correct use and safe handling of the oxygen equipment, including knowledge of the local emergency number;
- ensure the patient knows the actions to be taken in case of an emergency;
- provide contact details during normal and outside office hours;
- advise the accommodation provider of the procedures for the safe handling and storage of the oxygen equipment; and
- provide a fact sheet giving a brief description of the safe handling and use of the supply equipment, detailing suitable storage and usage locations and precautions to be taken so that the patient and other travellers are not put at risk.

8 Actions after the journey

Normally the travel period start- and end date are known before the departure. If an end date is not known in advance, the patient should well in advance to the actual end of stay:

- inform the HSP at destination of the completion of the stay;
- inform the current HSP that oxygen therapy supplies are required on return;
- provide confirmation to the HSP at destination that the equipment detailed on the checklist is available for collection; and
- where applicable, confirm to the relevant person that the invoices from the HSP at destination can be paid.

9 Information fact sheets

Typical safety cards are shown in Appendix 3 that give details of the safe use of oxygen whilst using different means of transport. These safety cards are primarily designed for use by the patient/carer but should also be given to the transport provider to detail the procedures to be used with oxygen when in use by the patient.

These safety cards include travelling with oxygen:

- on public transport including coaches (buses), metro and trains (see Appendix 6);
- by private transport (see Appendix 7);
- by plane (see Appendix 8);
- by boat (see Appendix 9).

Appendix 10 provides a typical fact sheet that can be prepared by the Homecare Service Provider, detailing:

- General statement on the nature of the Medical Oxygen requirement for the patient
- typical flowrates and the implications to confined spaces;
- precautions that need to be taken when using the oxygen in a public place; and
- precautions for restraining the equipment when in transit.

The purpose of this fact sheet is that it should be made available to the patient/carer so that they can provide it to the transport provider, restaurant and hotel owner and any other provider who offer services to the general public. The fact sheet is intended to remove any concerns that could be expressed by the general public when oxygen is being used in their presence.

When travelling in group, Appendix 11 contains a checklist for the elements that should be considered by the organisers of the group travel.

A Frequently asked questions list is also included in Appendix 12 of this document.

10 Patient travel dossier

The current HSP should advise the Patient / Carer to carry the following documents when travelling:

- travel Plan details (Appendix 3);
- prescription details (Appendix 4)
- the specific product Safety Data Sheet (SDS) for either compressed or liquid medical oxygen dependant on the mode of supply;
- European Health Insurance card, where used in the destination country (Appendix 5);
- safety card with the "Do and Do not" for the mode of transport required (Appendices 6 - 9); and
- fact sheet covering the safe use of oxygen therapy (Appendix 10).


The travel dossier should be kept up to date by the patient and modified as necessary throughout the period that they are travelling and using their medical oxygen therapy equipment. The information in the travel dossier should be readily available to the transport provider, restaurant and hotel management or other service provider when requested.

11 Unplanned oxygen supplies


When a new patient who has not pre-arranged an oxygen supply requests services from a Homecare Service Provider at destination there are a number of issues that shall be considered. These include:

- Prescription details are required prior to providing new oxygen supply equipment to any patient
- Empty cylinders brought by the patient shall not be refilled for regulatory and technical reasons. The patient/carer should be offered loan stock cylinders.
- Any liquid oxygen vessels from other HSP, brought by the patient, shall not be refilled for regulatory and technical reasons. The patient/carer should be offered loan stock vessels (including portable unit).
- Only Medical Oxygen systems and the consumables provided by the HSP at destination should be used.

Appendix 1 Typical travel planning checklist – for Current Homecare Service Provider

	<p>CURRENT HOMECARE SERVICE PROVIDER</p> <p>TRAVEL PLANNING CHECKLIST</p> <p>Supplies of Medical Oxygen to Domiciliary Patients</p> <p>For use when travelling</p>			
Planning Checklist				
Patient name				
Patient reference				
Activity	Yes	No	N/A	
1 Pre	Send blank travel form and prescription form to patient/carer			
2 Pre	Completed travel plan and prescription form obtained from patient			
3 Pre	Identify responsibility for payment			
4 Pre	Potential HSP at destination identified at destination			
5 Pre	Patient to use own equipment at destination			
6 Pre	Identify therapy supply/equipment required for journey			
7 Pre	Provide details of HSP at destination to patient			
8 Pre	Advise patient to send travel form and prescription form to HSP at destination			
9 Pre	Advise patient to prepare travel dossier			
10 Pre	Provide relevant fact sheet to cover mode of travel			
11 Pre	Provide detailed information to travel/accommodation provider			
12 Pre	Provide copy of Safety Data Sheet			
13 Pre	Provide local oxygen therapy fact sheet – Use of oxygen in public			
14 Pre	Notify patient of need for EHIC			
15 Post	Receipt of confirmation of patient return			
16 Post	Confirm invoicing complete			
17 Post	Arrange new supplies for patient at home			
18 Post	Reconcile returned equipment			
Signed				
Date complete				

Appendix 2 Typical travel planning checklist – for Homecare Service Provider at destination


		HOMECARE SERVICE PROVIDER TRAVEL PLANNING CHECKLIST Supplies of Medical Oxygen to Domicillary Patients For use when travelling			
		Planning Checklist			
Patient name					
Patient reference					
Activity		Yes	No	N/A	
1	Pre	Receive travel plan & prescription form from patient			
2	Pre	Provide patient with proposed plan for supply			
3	Pre	Confirm method of payment for supplies			
4	Pre	Confirm equipment specification/requirements			
5	Pre	Confirm arrangements for meeting patient or caregiver at destination			
6	Pre	Organise initial supplies for patient – (accommodation)			
7	Pre	Provide detailed information to accommodation provider			
8	During	Provide patient training and instructions			
9	During	Provide local oxygen therapy fact sheet – Use of oxygen in public			
10	Post	Confirmation from patient of end of stay			
11	Post	Provide invoice for supplies			
12	Post	Collection/reconciliation of equipment from accommodation			
13	Post	Confirm transfer arrangements for patient travelling home			
Signed					
Date Complete					

Appendix 3 Typical Form for Planning Travel Details

TRAVEL DETAILS					
Supplies of Medical Oxygen to Patients					
EIGA					
Planning Information – Patient Details					
Patient name					
Patient home address					
				Postcode	
Patient/carers home contact details		Tel		Mobile	
Patient reference No					
Prescription details		Flowrate (lpm)		Hours/day	
Destination/delivery address					
				Postcode	
Destination contact details		Tel			
Leaving date/time – from home				Leaving date/time – at destination	
Arrival date/time –at destination				Arrival date/time –at home	
Home Supply Details		Yes	No	Specify Details	
Cylinder supply					
Concentrator					
Portable concentrator					
Self Fill system					
Liquid oxygen (Base/Portable Unit)					
Destination Supply Details		Yes	No	Specify Details	
Cylinder supply					
Concentrator					
Portable concentrator					
Self fill system					
Liquid oxygen (Base Unit & Portable Unit)					
Ancillary Equipment		Yes	No		Yes No
Cannula / mask				Humidifier	
Spare batteries (portable concentrator)				Carrying bag	
Extension tubing				Trolley	
Oxygen conserving device				Other (Specify below)	
Comments				Signed	

		Name	
		Date	

Appendix 4 Typical Form for Documenting Therapy Details

		OXYGEN THERAPY DETAILS			
		Patient Prescription Details			
Patient Details					
Patient name					
Patient home address					
			Postcode		
Patient/carers home contact details		Tel		Mobile	
Patient reference / ID No					
Prescription details		Flowrate (lpm)		Hours/day	
Therapy Details		Yes	No	Specify Details	
LTOT patient					
Permitted to fly					
Permitted to travel					
Ambulatory (less than 4 hours / day)					
Ambulatory (more than 4 hours / day)					
Requires personal assistance					
Comments					
Prescriber's details			Patient's details		
Signed			Signed		
Name			Name		
Date			Date		

Appendix 5 European Health Insurance Card

European Health Insurance Card

Since January 2006 the European Health Insurance Card has been recognised in all the EU member States as well as in Iceland, Liechtenstein, Norway and Switzerland.

The European Health Insurance Card makes it easier for the patient to obtain access to medical treatment that they may require while staying temporarily in another Member State. Medical treatment is provided in accordance with the rules of the Member State, which is being visited, and the costs incurred are reimbursed in line with the tariff scales applied in that Member State.

For example, if medical care is provided free of charge in the Member State the patient is visiting, then they will be entitled to free medical care by presenting their European Health Insurance Card. Presentation of the European Health Insurance Card guarantees you reimbursement of the medical costs on the spot, or soon after the patient returns home.

Anyone who is insured by or covered by a statutory social security system in any Member States is entitled to a European Health Insurance Card. The European Health Insurance Card is available free of charge through the patient's sickness insurance institution.

Information concerning the European Health Insurance Card is available from the following Internet link:

<https://ec.europa.eu/social/main.jsp?catId=559>


The model for the European health insurance card is identical in all the Member States. This enables health care providers in every Member State to identify the card immediately. The insured person can then benefit from a simplified procedure for receiving any medical assistance that might become necessary during a temporary stay.


The only personal information on the European Health Insurance Card is the European Health Insurance Card holder's surname and first name, personal identification number and date of birth.

The European Health Insurance Card does not contain medical data.


Each Member State is responsible for producing and distributing the European Health Insurance Card in its territory. To request a card, the patient should contact their national Health Service.


Appendix 6 Travelling with Medical Oxygen: Public Transport – Typical Patient Checklist

 TRAVELLING WITH OXYGEN - PATIENT CHECKLIST Travelling By Public Transport – Including Bus, Metro And Train		
Safety Requirements	Do	Do not
General safety requirements for all medical oxygen supply systems (MOSS) in public transport	When using the MOSS on public transport: <ul style="list-style-type: none"> • only carry sufficient oxygen for the journey Ensure that you are <ul style="list-style-type: none"> • trained in the correct method of operation of the medical oxygen supply system. • aware of the appropriate precautions to be taken whilst using the MOSS on public transport and in the event of an incident. • understand the risks associated with oxygen enrichment when using the MOSS on public transport. The MOSS should be used: <ul style="list-style-type: none"> • as described in the user manual. • in a non-smoking compartment • preferably sitting next to an open window to allow for better ventilation • in a carrying bag to keep the cylinder / vessel secure • with the delivery tubing as short as possible When not in use, ensure that there is no gas/liquid flow and the MOSS is checked for leaks	When using the MOSS on public transport, do not : <ul style="list-style-type: none"> • allow anyone to smoke near you in the compartment (not nearer than 3 metres). • leave the MOSS unattended • leave the cannula or mask on the seat or other adsorbent materials when not in use. • allow children to tamper with the MOSS • cover the MOSS with any clothing, bags or other material.
Liquid Oxygen Portable Units	When using a Liquid Oxygen MOSS on public transport only : <ul style="list-style-type: none"> • use portable units 	When using a Liquid Oxygen MOSS on public transport, do not : <ul style="list-style-type: none"> • sit or stand too close to another passenger
Cylinders	When using a Cylinder Oxygen MOSS on public transport always : <ul style="list-style-type: none"> • allow access to the cylinder valve / flow control 	When using a Cylinder Oxygen MOSS not fitted with an integral valve on public transport, do not : <ul style="list-style-type: none"> • change the regulator on the public transport •


 TRAVELLING WITH OXYGEN - PATIENT CHECKLIST Travelling By Public Transport – Including Bus, Metro And Train		
Safety Requirements	Do	Do not
Portable Concentrators	When using a portable concentrator MOSS on public transport only : <ul style="list-style-type: none"> run the concentrator when the oxygen is required for use preferably sitting next to an open window to allow for better ventilation When using a portable concentrator MOSS on public transport always : <ul style="list-style-type: none"> orientate the concentrator so that the inlet filter is not obstructed 	When using a portable concentrator MOSS on public transport, do not : <ul style="list-style-type: none"> cover the concentrator when in use have drinks or liquids in the vicinity of the concentrator leave the concentrator running when it is not in use
Emergency Actions When using the Medical Oxygen Supply System on Public Transport		
In the event of an emergency on the Public transport	In the event of an emergency when using a MOSS on the Public transport always : <ul style="list-style-type: none"> take your MOSS with you if it is safe to do so notify the Emergency Services and inform them of the presence of oxygen on the public transport if not removed 	In the event of an emergency when using a MOSS on the Public transport do not : <ul style="list-style-type: none"> allow anyone to smoke near you when evacuating the public transport


Appendix 7 Travelling with Medical Oxygen: Private Transport – Typical Patient Checklist

 TRAVELLING WITH OXYGEN - PATIENT CHECKLIST Travelling by Private Transport – including Car, Camper Vans and Mobile Homes (and tents)		
Safety Requirements	Do	Do not
General Safety Requirements for all Medical Oxygen Supply Systems (MOSS) in all private vehicles (information also relevant to use of MOSS in mobile homes and tents)	<p>When using the MOSS in all types of private transport:</p> <ul style="list-style-type: none"> • only carry sufficient oxygen for the journey <p>Ensure that you and the driver are</p> <ul style="list-style-type: none"> • trained in the correct method of operation of the medical oxygen supply system. • aware of the appropriate precautions to be taken whilst using the MOSS in private vehicles and in the event of an incident. • understand the risks associated with oxygen enrichment and spillages when using the MOSS in private vehicles. <p>The MOSS should only be used:</p> <ul style="list-style-type: none"> • with the specific permission of the Homecare Service Provider • as described in the user manual. • preferably sitting next to an open window to allow for better ventilation • with the vehicle ventilation system set to draw in fresh air from outside the vehicle • in a carrying bag supplied by the HSP to keep the material secure • with the delivery tubing as short as possible • with the appropriate permission where required for use in tunnels <p>When not in use, ensure that the valve of the MOSS is securely closed and checked for leaks</p> <p>When using the MOSS in a mobile home or tent, always:</p> <ul style="list-style-type: none"> • secure the oxygen supply system not required for immediate use in a separate compartment • store the MOSS outside the vehicle when parked for long periods such as overnight when it is secure. • obtain permission from the camp site management to use the MOSS 	<p>When using the MOSS in private transport, do not:</p> <ul style="list-style-type: none"> • allow anyone to smoke near you in the compartment (not nearer than 3 metres). • use the MOSS whilst the vehicle is being refuelled • leave the MOSS unattended • leave the cannula or mask on the seat or other oxygen absorbing materials when not in use. • allow children to tamper with the MOSS • use a humidifier • cover the MOSS with any clothing, bags or other material.


 TRAVELLING WITH OXYGEN - PATIENT CHECKLIST Travelling by Private Transport – including Car, Camper Vans and Mobile Homes (and tents)		
Safety Requirements	Do	Do not
	on the site	
Liquid Oxygen Portable Units	When using a Liquid Oxygen MOSS in private transport: <ul style="list-style-type: none"> • only use portable units fixed in vertical position 	When using a Liquid Oxygen MOSS in private transport, do not : <ul style="list-style-type: none"> • sit or stand too close to another passenger
Cylinders	When using a Cylinder Oxygen MOSS in private transport: <ul style="list-style-type: none"> • allow access to the cylinder valve / flow control • If available, cylinders with integrated valve should be used. 	When using a Cylinder Oxygen MOSS in private transport, do not: <ul style="list-style-type: none"> - Expose the cylinder to direct sunlight for long periods
Portable Concentrators	When using a portable concentrator MOSS in private transport always : <ul style="list-style-type: none"> - Run the concentrator only when the oxygen is required for use, preferably sitting next to an open window to allow for better ventilation. - Protect the electrical supply to the concentrator from damage. - Orientate the concentrator so that the inlet filter is unobstructed 	When using a portable concentrator MOSS in private transport, do not : <ul style="list-style-type: none"> • cover the concentrator when in use • have drinks or liquids in the vicinity of the concentrator
EMERGENCY ACTIONS		
When using the Medical Oxygen Supply System in Private Transport		
In the event of an emergency on the private transport	In the event of an emergency when using a MOSS in private transport always : <ul style="list-style-type: none"> • stop the vehicle and switch off the engine immediately • get out of the vehicle immediately or as instructed by the driver. • remove the MOSS from the vehicle, if it is safe to do so • evacuate the area if there is a fire • notify the Emergency Services and inform them of the presence of oxygen on the private transport if not removed 	In the event of an emergency when using a MOSS in private transport do not : <ul style="list-style-type: none"> • allow anyone to smoke near you when evacuating the private transport


Appendix 8 Travelling with Medical Oxygen: Plane – Typical Patient Checklist

 TRAVELLING WITH OXYGEN - PATIENT CHECKLIST Travelling by Plane		
Safety Requirements	Do	Do not
<p>General Safety Requirements for all Medical Oxygen Supply Systems (MOSS) on planes (where permission has been granted by the airline)</p> <p>Note: It is likely that only gas cylinders or especially portable concentrators will be permitted on board a plane. Liquid systems are normally not allowed to be used.</p> <p>Note: Cylinders not owned by the Airline might not be allowed.</p>	<p>Before travelling by plane always:</p> <ul style="list-style-type: none"> • obtain permission to fly whilst using medical oxygen from your doctor. • obtain permission from the HSP when planning to use your usual MOSS • obtain permission from the airline to use an oxygen supply system onboard the plane. • determine if you may use your own MOSS or the airline's system. • determine whether you need to be accompanied by a carer on board the plane • check the availability of a MOSS for use getting on / off the plane (from check-in to check-out), where the airline is providing the service during the flight. • preferably use integral valved cylinders on planes <p>When using a MOSS on a plane,:</p> <ul style="list-style-type: none"> • only carry sufficient autonomy for the journey including safety buffer • always turn the MOSS off when not required for use • always use the MOSS as described in the user manual. • In case of smoke formation immediately contact the flight attendants. • only use portable units (where permitted) whilst travelling on planes. <p>When using a MOSS on a plane, ensure:</p> <ul style="list-style-type: none"> • you are trained in the correct method of operation of the MOSS • you are aware of the appropriate precautions to be taken whilst using the MOSS on the plane and in the event of an incident. • understand the risks associated with oxygen enrichment when using the MOSS on planes. • use a carrying bag supplied by the HSP to carry the portable unit and to 	<p>When using the MOSS on a plane, do not:</p> <ul style="list-style-type: none"> • allow anyone to smoke near you in the compartment (nearer than 3 metres) • leave the MOSS unattended • leave the cannula or mask on the seat or other adsorbent materials when not in use. • allow children to tamper with the MOSS • cover the MOSS with any clothing, bags or other material. • change the regulator on the plane • have drinks or liquids in the vicinity of the portable concentrator


 TRAVELLING WITH OXYGEN - PATIENT CHECKLIST Travelling by Plane		
Safety Requirements	Do	Do not
	keep it secure <ul style="list-style-type: none"> • keep the delivery tubing as short as possible • allow access to the cylinder valve / flow control when in use on board plane 	
EMERGENCY ACTIONS		
When using the Medical Oxygen Supply System on a Plane		
In the event of an emergency on a plane	<ul style="list-style-type: none"> • In the event of an emergency when using a MOSS on a plane always follow the instructions from a crew member 	

Appendix 9 Travelling with Medical Oxygen: Boat – Typical Checklist

 TRAVELLING WITH OXYGEN - PATIENT CHECKLIST Travelling by Boat – Including cruise ship, sailing boat ferry and motorboat		
Safety Requirements	Do	Do not
<p>General Safety Requirements for all Medical Oxygen Supply Systems (MOSS) on boats.</p> <p>Note: liquid oxygen is not suitable to be used on smaller boats, if the base unit cannot be adequately secured.</p>	<p>Before travelling on a boat always: obtain permission from the captain to use the MOSS whilst on the boat.</p> <p>When using the MOSS on all types of boats:</p> <ul style="list-style-type: none"> - only carry sufficient autonomy for the journey (including safety buffer) - Ensure that you are trained in the correct method of operation of the medical oxygen supply system - Be aware of the appropriate precautions to be taken whilst using the MOSS on a boat in the event of an incident - Understand the risks associated with oxygen enrichment when using the MOSS. <p>The MOSS should only be used on the boat:</p> <ul style="list-style-type: none"> - as described in the user manual. - in a well ventilated area to prevent oxygen enrichment - in a carrying bag supplied by the HSP to keep the POC / cylinder / liquid oxygen portable secure with the delivery tubing as short as possible <p>When not in use, ensure that the valve of the MOSS is securely closed and check for leaks or that device is turned off.</p>	<p>When using the MOSS on a boat do not:</p> <ul style="list-style-type: none"> • allow anyone to smoke near you on the boat (not nearer than 3 metres). • leave the MOSS unattended in a public area on the boat • leave the cannula or mask on the seat or other adsorbent materials when not in use. • allow children to tamper with the MOSS • Cover the MOSS with any clothing, bags or other material. • leave the MOSS in the sun • use or store the MOSS near any oils, grease or fuel • use or store the MOSS within 3 metres of a cooker or heater with an open flame • use the MOSS within 1.5 metres of electrical appliances or systems with an enclosed flame.
Liquid Oxygen Portable Units	<p>When using a Liquid Oxygen MOSS on a boat only:</p> <ul style="list-style-type: none"> • store the base unit secured upright • transfill the portable unit on the deck. 	<p>When using a Liquid Oxygen MOSS on a boat, do not:</p> <ul style="list-style-type: none"> • transfill portable units below decks • leave the portable unit connected to the base unit • cover the portable unit with clothing, bags or other material.
Cylinders	<p>When using a Cylinder Oxygen MOSS on boats:</p> <ul style="list-style-type: none"> • use a cylinder with an integral valve where possible 	<p>When using a Cylinder Oxygen MOSS not fitted with an integral valve on boats, do not:</p> <ul style="list-style-type: none"> • change the regulator with public

 TRAVELLING WITH OXYGEN - PATIENT CHECKLIST Travelling by Boat – Including cruise ship, sailing boat ferry and motorboat		
Safety Requirements	Do	Do not
Concentrators	<ul style="list-style-type: none"> • only use one cylinder in the passenger compartment at a time • allow access to the cylinder valve / flow control when in use on the boat • secure cylinders <p>When using a concentrator MOSS on a boat, always:</p> <ul style="list-style-type: none"> • run the concentrator only when the oxygen is required for use • use the MOSS in a well ventilated area • orientate the concentrator so that the inlet filter is unobstructed • Secure the stationary concentrator in place to avoid shifting 	<p>present</p> <p>When using a concentrator MOSS on a boat, do not:</p> <ul style="list-style-type: none"> • cover the concentrator when in use • have drinks or liquids in the vicinity of the concentrator
EMERGENCY ACTIONS		
When using the Medical Oxygen Supply System on a Boat		
In the event of an emergency on boats.	<p>In the event of an emergency when using a MOSS on a boat, always:</p> <ul style="list-style-type: none"> • get off the boat when instructed by a crew member. • take your MOSS with you, if it is safe to do so • evacuate the area if there is a fire • notify the Emergency Services and inform them of the presence of oxygen on the boat if not removed 	<p>In the event of an emergency when using a MOSS on the boat, do not:</p> <ul style="list-style-type: none"> • allow anyone to smoke near you when evacuating the boat

Appendix 10 Typical Factsheet - For Patient Use

	FACTSHEET Use of Medical Oxygen Supply Systems in Public Places Use of Portable Medical Oxygen Systems on Public Transport
<p>Medical oxygen is an essential requirement for those people who suffer of certain respiratory diseases. Their doctor has prescribed the Medical Oxygen and given authorisation to use Medical Oxygen Supply Systems to enable them to travel safely and comfortably.</p> <p>Medical oxygen is a safe product when it is used correctly.</p> <p>All patients are extensively trained to use their medical oxygen system safely. Providing that the patient follows the simple steps detailed below on this factsheet, it can be used safely in public places or on any public transport system.</p> <p>It is important to understand the medical oxygen does not burn itself - but will make other things burn more vigorously if it is present in a fire.</p> <p>Medical oxygen is safe when supplied in either high pressure gas cylinders, concentrators or in liquid oxygen containers. The portable system used by the patient needs to contain enough autonomy for the journey to allow the patient to travel safely and comfortably.</p> <p>The equipment is designed to safely contain the gas and to operate correctly under defined conditions. It is specifically designed to deliver the quantity of gas to the patient as prescribed by their doctor.</p> <p><u>Typical flow rates for mobile patients can vary between 1 and 6 litres per minute.</u></p>	
<p>The use of Medical Oxygen Supply Systems on public transport and/or in public places is safe provided that the following simple rules are followed. The Medical Oxygen Supply System should:</p> <ul style="list-style-type: none">• only be used in a non-smoking area.• be kept under the control of the user at all times.• only be used in a naturally ventilated area and the equipment shall not be covered.• be kept in a clean condition and not exposed to any oils or grease, including cosmetic creams• be used in an upright position (Portable Liquid Oxygen systems)• be closed when not in use	

Appendix 11 Typical travel arrangement for groups of patients

General Advice

Patients' Associations sometimes organise travel for groups of their members.

When patients using Medical Oxygen Supply Systems travel together, there are additional issues to consider in order to make the group travel safe and comfortable.

1 Before Travelling

The following points should be considered by those who are organising the travel arrangements for the patient group:

Travelling by plane

- Contact airline and airport authorities to define particular needs for the patients.
- Arrange assistance for the group at the departure and arrival airport.
- Allow sufficient time for the patient boarding the plane.
- Determine the need for a physician on board of the plane for dealing with emergency situations with the patients.
- Determine type and maximum number of Medical Oxygen Supply Systems that can be taken on one plane.

Travelling by boat

- Contact cruise/sailing company and the port authorities to define particular needs for the patients.
- Arrange assistance for the group at the departure and arrival port /harbour to board/disembark.
- Determine the maximum number of base units allowed on the boat and consider the need for back up units.
- Check availability of a physician on board for dealing with emergency situations with the patients.
- Check possibility to fill base units at any harbour where the boat will land during the trip.

Travelling by train

- Contact train company and the station authorities to define particular needs for the patients.
- Check departure and arrival times for the trains.
- Arrange assistance for the group at the departure, intermediate and arrival stations as required.
- Determine the maximum number of base units allowed on the boat and consider the need for back up units.
- Check availability of a physician on board train/at stations for dealing with in emergency situations with the patients.
- Check possibility to fill base units at any stations during the trip (to be chosen in advance).

Travelling by buses and coaches

- Contact bus/coach company to define particular needs for the patients.
- Arrange assistance for the group at the departure and arrival.
- Determine whether the portable units can be used in the bus/coach.
- Determine the maximum number of portable units allowed on the bus/coach.
- Check availability of a physician on board the coach/at destination points for dealing with emergency situation with the patients.
- Check possibility to have a van with a larger tank or a suitable number of base units that can follow the bus/coach in order to fill in portable units during periodical stops.
- Check requirements for overnight accommodation

Use in hotels

- Contact hotels to be used on the trip to define particular needs for the patients.
- Arrange assistance for the group at arrival and departure.

- Determine whether the base units can be used in the hotel, including how many per room/floor
- Check the possibility to store base units in a dedicated room to be used for refilling portable units.
- Evaluate the use of concentrators inside the rooms instead of liquid systems.
- Evaluate the distribution of patients in the hotel.
- Review with the hotel management the possibility to have a fire extinguisher in any room .
- Check availability of a physician for dealing with emergency situation with the patients.
- Discuss with hotel management about contacting local hospital, ambulances and fire brigades

Use in camp sites

- Contact camp site to be used on the trip to define particular needs for the patients.
- Arrange assistance for the group at arrival and departure.
- Determine whether the base units can be used in the campsite and where they should be stored.
- Check possibility to place patients in safety areas in the camp site.
- Check the rules for using medical oxygen / storage of the medical oxygen Supply System inside the tents and how many can be used / stored in each unit.
- Check the possibility to store Base Units to be used for refilling portable units in a dedicated area.
- Evaluate the use of concentrators inside the caravans/tents instead of base units.
- Evaluate with camping management the possibility to have fire extinguishers available.
- Check availability of a physician for dealing with emergency situation with the patients.
- Discuss with camp site management about contacting local hospital, ambulances and fire brigades.

Medical and technical support requirements

- Evaluate the possibility to have a doctor/nurse available during the travel arrangements in order to resolve any medical issues with the patients.
- Review the availability of back up devices during the trip for base units, portable unit, pressure regulators, concentrators, etc.
- Review the stocks of disposables to be always available for patients needs.
- Possibility to have a Homecare Service provider person available to resolve any issues with the equipment.

Appendix 12 Frequently Asked Questions - by the patient

Questions frequently asked by the patient when requiring to travel with their Medical Oxygen Supply System with the typical answers. The questions relating to the cost of the service will depend on the way in which the Medical Oxygen is financed for the patient's normal use.

Do I have to cover all the costs myself or am I entitled to a reimbursement?

It depends on your Insurance Organisation (public or private) and your Current Homecare Service Provider (current HSP). It is advisable to contact your Insurance Company and the current HSP before you make a definite holiday reservation to inquire to what extent your oxygen needs abroad are covered by your insurance policy. Even if the cost of medical aid while abroad is covered by your insurance company, it is highly likely that you will have to pay yourself initially and the amount will be reimbursed by your insurance company

Should I ask my Insurance Company for permission before actually booking a holiday?

You are not obliged to ask your Insurance organisation for permission to travel abroad, however if you want the cost of your oxygen supply abroad to be paid for by your insurance then you would be advised to contact them before you book the holiday. You can always try to declare any costs incurred abroad upon returning home.

Should I take my own equipment with me on holiday?

You may take your own disposables with you (such as nasal cannula and nasal tubes) and also portable concentrators. However, it is not strictly necessary to do so, as the HSP at destination will also supply disposables and equipment. Some patients do prefer to take their own disposables to ensure that they have the correct size.

May I take my own medical Oxygen Supply System with me in the passenger cabin?

An oxygen supply during the flight should be requested from the airline company when purchasing the ticket. This also applies to any additional assistance concerning oxygen during stop-over/transferrals, the time between check-in and boarding, and the time between landing and leaving the airport. The options available can vary between airlines and it is advisable to make some inquiries far in advance.

Oxygen Cylinder: It is possible that oxygen cylinders will be allowed on the plane.

Liquid Oxygen vessel: liquid oxygen units are typically not allowed on the plane.

Oxygen Concentrator: It is possible that portable oxygen concentrators will be allowed on the plane.

Can I have the same oxygen system on holiday as I use at home?

The HSP at destination will do their best to provide the patient with a similar oxygen system to the one they use at home. However, not every country has the same oxygen system available and it greatly depends on which country or even which area of a country you are planning on visiting.

Can I use my equipment abroad?

Yes, if you remain with your current HSP. No, if you change to another a HSP at destination. In this case the HSP at destination will provide you with a similar system based on the prescription and mobility requirements.

I would like to visit several places during my holiday, would that be possible?

It all depends on the destinations and complexity of your journey and the kind of oxygen system you use how much oxygen you need and the level of flow of oxygen necessary. For mobility you can use a portable liquid oxygen system, portable cylinder or portable oxygen concentrator.

How far in advance should I book?

We would advise you to contact your current HSP at least 2 weeks before travelling to find out about the different options available in the country you would like to visit.

I need oxygen 24 hours a day. Would I still be able to go on holiday?

If your specialist doctor have given you written permission, then you can always look into any possibilities with your current HSP. One very important factor is that, if you rely on oxygen continuously the continuity of supply/availability can be difficult to organise (e.g. airports, stations,...). Another point to consider is the availability of oxygen during delays and the time spent during transfer between flights etc.

Does my need for oxygen alter when flying?

Due to the change in air pressure when flying most patients need additional oxygen. Please refer to your specialist doctor on how to deal with this.

Do I need permission from my doctor/specialist to go on holiday?

Yes, it is very important to contact your doctor/specialist about any plans you have concerning going on holiday. Invariably airlines will insist on a medical declaration from your specialist. In any case, we often need additional medical information to ascertain which kind of oxygen system would be most appropriate for you while on holiday and what your limitations may be in terms of travel.

I do need oxygen now and again. Is it necessary to contact my current HSP?

Yes, and please contact your doctor before making any arrangements to travel.