

PLANNING OXYGEN SUPPLIES FOR RESPIRATORY PATIENTS WHEN TRAVELLING

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Amendments to 141/07

| Section | Change |
|---------|---|
| | Editorial to align to EIGA Style Manual |
| 4 | Additional definitions |
| | References updated |

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 in order 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 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.

It does provide 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.

2 Scope

The scope of this document is to provide advice to the Homecare Service Provider about the minimum safety precautions to be given to the patient when they require to use 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 (CHSP) in providing support the patient when travelling; and
- Homecare Service Provider at the destination (NHSP) 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 CHSP's area; and
- travelling away from home for longer periods when in the NHSP'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 provide guidance on the safety use of medical oxygen when away from home also to provide information to be given to the travel/accommodation providers as well as information to be provided by the patient to enable the oxygen supply system to be planned and actions to be taken when returning 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 (CHSP) | The Homecare Service Provider who is routinely providing therapy services at the patient's home. |
| New Homecare Service Provider (NHSP) | 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 (CHSP);
- New Homecare Service Provider (NHSP) at the destination (where different);
- transport operators;
- patient's prescriber;
- contracting entity; 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;
- all necessary information must be made available to the CHSP and to the NHSP by the patient before the travelling commences;
- at the destination, the NHSP should provide all of the equipment to provide oxygen to the patient;
- the NHSP will be responsible for training the patient and 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 CHSP should not be used other than for the duration of the journey; and
- arrangements for the payment of the service whilst travelling must be agreed prior to starting the journey

The paperwork proposed to be used in the preparation of the travel plan is given in Appendix 1. These forms should be completed by the patient as check list for 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 CHSP is responsible for providing information to the patient/carer concerning the specification of equipment being carried in own vehicle for insurance purposes.

The CHSP 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 to be tested. 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 CHSP should confirm whether they are able to supply oxygen at destination using the CHSP's local services.

Where this is not possible the CHSP should endeavour to provide the patient with contact details of an appropriate oxygen therapy supplier. Alternatively the CHSP 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 of the preparations when planning to travel away from home. This planning should 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 CHSP should provide the patient / carer with the:

- Travel planning form (see Appendix 1). The patient/carer should be requested to complete the form and return to the CHSP.
- Therapy details form (see Appendix 2). The patient/carer should be requested to give the form to their doctor to complete and return to the CHSP.

The patient should be advised by the CHSP to obtain a European Health Insurance Card prior to travelling. 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 New Homecare Service Provider information

Where the patient's travel plan requires them to use a New Homecare Service provider, they need to provide the completed travel details form and therapy details form to enable the NHSP to arrange appropriate oxygen supplies. It may also be beneficial to provide the NHSP with the address and contact details of the CHSP (provided as a pre-printed sheet).

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 CHSP'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 NHSP 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 NHSP and the CHSP; 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 NHSP.

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 CHSP 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.

The patient/carer should be requested to sign a list of the oxygen therapy equipment supplied (including any identification numbers) so that they can be reconciled after the journey.

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 CHSP that an oxygen therapy service is required, prior to the patient travelling the New Homecare Service Provider shall:

- make the necessary arrangements to supply the medical oxygen equipment and subsequent medical oxygen supplies, both at the patient's arrival point and at the final destination where the patient is going to stay;
- communicate with the patient on their possible travel plans locally.

When the patient arrives at destination the NHSP shall:

- train the patient in the correct use and safe handling of the oxygen equipment, including local emergency number;
- explain 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

At the end of the stay, the patient/carer should:

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

9 Information fact sheets

A number of 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:

- the reason why the patient needs to use the oxygen;
- 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.

Appendix 11 provides a checklist of the information that may be requested by transport companies when being requested to carry oxygen therapy equipment for patient use whilst travelling.

10 Patient travel dossier

The CHSP 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 New Homecare Service Provider there are a number of issues that shall be considered. These include:

- Cylinders or liquid oxygen vessels supplied by the patient should not be refilled as these are not covered by the marketing authorisation. The patient/carer should be offered loan stock cylinders/vessels to be able to comply with the regulations.
- Consumables should only be supplied if they are compatible with the equipment that the patient intends to use. It is the responsibility of the NHSP to ensure compatibility.
- Prescription details are required prior to providing new oxygen supply equipment to any patient
- Ensure that the patient’s equipment is compatible with the supply system, with respect to its pressure and flowrate and that the electrical supply requirements are compatible with the rating of the machine.
- where the patient wishes to use non CE marked medical device the NHSP should inform the patient that CE marked devices are required to be used within Europe. Alternative CE marked equipment shall be offered to the patient/carer.

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

|  | | CURRENT 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 | 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 NHSP 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 NHSP to patient | | | |
| 8 | Pre | Advise patient to send travel form and prescription form to NHSP | | | |
| 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 | | | | | |
| CHSP name | | | | | |
| Date complete | | | | | |

Appendix 2 Typical travel planning checklist – for New Homecare Service Provider

| | | | | |
|---|---|--------------------------|--------------------------|--------------------------|
|  | NEW 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 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2 Pre | Provide patient with proposed plan for supply | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3 Pre | Confirm method of payment for supplies | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4 Pre | Confirm equipment specification/requirements | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5 Pre | Confirm arrangements for meeting patient at arrival | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6 Pre | Organise initial supplies for patient – (accommodation) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7 Pre | Provide detailed information to accommodation provider | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8 During | Provide patient training and instructions | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9 During | Provide local oxygen therapy fact sheet – Use of oxygen in public | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10 Post | Confirmation from patient of end of stay | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11 Post | Provide invoice for supplies | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12 Post | Collection/reconciliation of equipment from accommodation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13 Post | Confirm transfer arrangements for patient travelling home | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Signed | | | | |
| NHSP name | | | | |
| Date Complete | | | | |

Appendix 3 Typical Form for Planning Travel Details

| TRAVEL DETAILS | | | | | | | |
|---|--|--|------------------------------------|-----------------------|--|-----|----|
| EIGA | | Supplies of Medical Oxygen to Domicillary Patients | | | | | |
| | | Planning Information – Patient Details | | | | | |
| Patient name | | | | | | | |
| Patient home address | | | | | | | |
| Patient/carers home contact details | | | | Postcode | | | |
| | | Tel | | Mobile | | | |
| Patient reference No | | | | | | | |
| Prescription details | | Flowrate (lpm) | | Hours/day | | | |
| Destination/delivery address | | | | | | | |
| Destination contact details | | | | Postcode | | | |
| | | 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 – Stationary cylinders | | | | | | | |
| Cylinder supply – Portable cylinders | | | | | | | |
| Concentrator | | | | | | | |
| Liquid oxygen (Base/Portable Unit) | | | | | | | |
| Destination Supply Details | | Yes | No | Specify Details | | | |
| Cylinder supply – Stationary cylinders | | | | | | | |
| Cylinder supply – Portable cylinders | | | | | | | |
| Concentrator | | | | | | | |
| Liquid oxygen (Base Unit & Portable Unit) | | | | | | | |
| Ancillary Equipment | | Yes | No | | | Yes | No |
| Cannula | | | | Humidifier | | | |
| Mask | | | | 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:

<http://ec.europa.eu/social/main.jsp?catId=509&langId=en>

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.

Typical examples of the European Health Insurance Card are given in the examples below:



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 • consider using an oxygen conserving device to extend the time of unit use. 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 • transport the base unit empty. | 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"> • use a cylinder with an integral valve where possible | 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 | <ul style="list-style-type: none"> allow access to the cylinder valve / flow control <p>When using a portable concentrator MOSS on public transport only:</p> <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 <p>When using a portable concentrator MOSS on public transport always:</p> <ul style="list-style-type: none"> orientate the concentrator so that the inlet filter is unobstructed | <ul style="list-style-type: none"> use a flow tube type flow control systems <p>When using a portable concentrator MOSS on public transport, 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 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 | <p>In the event of an emergency when using a MOSS on the Public transport always :</p> <ul style="list-style-type: none"> get out of the public transport when instructed by the official. 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 public transport if not removed | <p>In the event of an emergency when using a MOSS on the Public transport do not :</p> <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 |
| <p>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> | <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 • consider using a conserving device to extend the use of the unit <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 to keep the cylinder / liquid oxygen portable 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. | <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 adsorbent 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 |
| | <ul style="list-style-type: none"> obtain permission from the camp site management to use the MOSS on the site | |
| Liquid Oxygen Portable Units | When using a Liquid Oxygen MOSS in private transport, where possible: <ul style="list-style-type: none"> only use portable units transport the base unit empty. | 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 where possible: <ul style="list-style-type: none"> always use a cylinder with an integral valve allow access to the cylinder valve / flow control | |
| 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 leave the concentrator running when it is not in use |
| 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 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 airline to use a 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. • obtain permission from the Oxygen Service Provider where using your own MOSS • 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 oxygen for the journey • consider using an oxygen conserving device • always turn the MOSS off when not required for use • always use the MOSS as described in the user manual. • 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 to carry the portable unit and to keep it secure • keep the delivery tubing as short as | <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 • use a flow tube type flow control systems with clothing, bags etc. • have drinks or liquids in the vicinity of the portable concentrator |

|  TRAVELLING WITH OXYGEN - PATIENT CHECKLIST Travelling By Plane | | |
|---|---|--------|
| Safety Requirements | Do | Do not |
| | possible <ul style="list-style-type: none"> 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 motor boat | | |
|---|---|--|
| Safety Requirements | Do | Do not |
| General Safety Requirements for all Medical Oxygen Supply Systems (MOSS) on boats. | Before travelling on a boat always: obtain permission from the captain to use the MOSS whilst on the boat. When using the MOSS on all types of boats,,: only carry sufficient oxygen for the journey consider using an oxygen conserving device Ensure that you are 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 a boat in the event of an incident understand the risks associated with oxygen enrichment when using the MOSS. The MOSS should only be used on the boat: as described in the user manual. in a well ventilated area to prevent oxygen enrichment in a carrying bag to keep the cylinder / liquid oxygen portable secure with the delivery tubing as short as possible When not in use, ensure that the valve of the MOSS is securely closed and check for leaks | When using the MOSS on a boat do not : <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 | When using a Liquid Oxygen MOSS on a boat only : <ul style="list-style-type: none"> • store the base unit secured upright • transfill the portable unit on the deck. | When using a Liquid Oxygen MOSS on a boat, do not : <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 | When using a Cylinder Oxygen MOSS on boats, where possible: <ul style="list-style-type: none"> • always use a cylinder with an integral valve where possible • 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 not in use | When using a Cylinder Oxygen MOSS not fitted with an integral valve on boats, do not : <ul style="list-style-type: none"> • change the regulator on the public transport • use a flow tube type flow control systems |
| Concentrators | When using a concentrator MOSS on | When using a concentrator MOSS on |

|  TRAVELLING WITH OXYGEN - PATIENT CHECKLIST Travelling by Boat – Including cruise ship, sailing boat ferry and motor boat | | |
|---|---|--|
| Safety Requirements | Do | Do not |
| | a boat, always : <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 | a boat, 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 a Boat | | |
| In the event of an emergency on boats. | In the event of an emergency when using a MOSS on a boat, always : <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 | In the event of an emergency when using a MOSS on the boat, do not : <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 just enough gas 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 Information about Medical Oxygen Systems on public transport

General Advice

The following information is typically what should be made available to the transport company when they request details about the Medical Oxygen Supply System.

The level of information will be dependant on the type of travel and the type of equipment used.

1 Details of the medical oxygen cylinder / container

Provide basic design code details for the cylinder / container. Where the design codes are not relevant for the country of use provide equivalent codes where applicable.

Information concerning the cylinder shell / vessel should include:

- Design pressure
- Design temperature
- Maximum filling pressure
- Materials of construction
- Type of construction (such as conventional cylinder / hoop wrapped / full wrapped)
- Failure mode in the event of an incident
- Content of the cylinder expressed as litres of gas at atmospheric pressure

Information concerning the valve should include:

- Design pressure
- Material of construction
- Whether relief device fitted
- Method of isolation

2 Advice concerning the safe carriage of the medical oxygen cylinder/container

Information concerning the safe carriage of the Medical Oxygen Supply System should include:

- The method of security and restraint of the cylinder / container whilst in transit.
- Basic method of operation for isolation of the Medical Oxygen Supply System
- Maximum amount of storage in each container
- Need to store the container in a non-restricted, well ventilated area to ensure that no increase in oxygen concentrations will arise from a leak
- Need to check the integrity of the package prior to commencement of journey
- Likely implications to the safety of the package during transit
- Issues where the cylinder / container is required for immediate use during transit
- Details of the equipment required to be attached for use by the patient
- Instructions on setting the dosage rate on the device, where applicable
- Actions to be taken to render the package safe in the event of an emergency

Specific information for Liquid Oxygen systems

- Specific requirements for the correct restraining equipment for liquid cylinders
- Need to maintain liquid containers upright
- Potential for gas to vent from the liquid cylinder and the estimated vent rate when the cylinder is not in use

- Means of isolation of the liquid cylinder and the implications of isolating the outlet

3 Advice concerning the safe use of the medical oxygen cylinder/container

Information concerning the safe use of the Medical Oxygen Supply System should include:

- The basic method of operation of the Medical Oxygen Supply System
- Requirements to attach ancillary equipment to the Medical Oxygen Supply System , the method of attachment and how to leak check the system.
- Requirement to set to the flowrate at the level prescribed by the doctor
- The likely duration of use of the Medical Oxygen Supply System
- The need to change the cylinder / refill the portable container during the journey
- The likely number of cylinders required for use by the patient during the journey

Specific information for liquid oxygen systems should include:

- How to handle the container when frozen
- Procedures when refilling the portable container (where required to be refilled in transit)

4 Actions to be taken in an emergency

Provide information concerning the emergency actions to be taken with the Medical Oxygen Supply system should they be involved in an incident involving:

- Fire
- Cylinder / container falling over
- Large leak from the cylinder / container.

Advice should include reporting the incident to the Medical Oxygen Service Provider.

Appendix 12 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 13 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 (CHSP). It is advisable to contact your Insurance Company and the CHSP 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 NHSP at the 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: In general, liquid oxygen units are 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 NHSP 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 CHSP. No, if you change to another a NHSP. In this case the NHSP 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 CHSP 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?

In general this would not be advisable, but if your lung specialist/doctor have given you written permission, then you can always look into any possibilities with your CHSP. One very important factor is that, if you have to be on oxygen continuously it could be very difficult to arrange oxygen at the airports in a lot of countries.

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.

Do I need permission from my doctor/lung-specialist in order to go on holiday?

Yes, it is very important to contact your doctor/lung-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 in order 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 really necessary to contact my CHSP?

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