

Now that we have the answer, it's time to ask the questions.

Does the amount of oxygen received *really* match the amount prescribed?

Are my patients getting enough oxygen?

How can I help my patients stay active?

Are they getting enough oxygen during exercise?

Are my patients saturated when their breath rate increases?

The answer is the VIAspire™ liquid oxygen portable with SmartDose™ technology.

SmartDose technology monitors a patient's exertion level and adjusts accordingly. The more active the patient, the more oxygen that's delivered. SmartDose technology helps patients stay saturated, not only at rest, but also during activity. Better saturation means more activity, and that means better outcomes.



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Bringing breath to life.

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Does the amount of oxygen received really match the amount prescribed?

Oxygen prescriptions in the home are typically written assuming Continuous Flow as an equivalent for all portable devices. Unfortunately, manufacturers' determinations of "equivalency" vary and an O₂ delivery standard does not exist, so O₂ volume delivered differs by device even at the same flow settings. Tidal volume, respiratory rate and a patient's expiratory flows and anatomy also affect "equivalency". So basically, "a 2 is not a 2 is not a 2". Therapists need to recognize device capabilities and limitations, and determine which delivery best addresses the patient's oxygen needs.

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Are my patients getting enough oxygen?

Possibly not. Setting a prescription level (the "default" value frequently being 2 LPM) rather than titrating in the home at rest and activity, does not consider the variables leading to a patient's desaturation. Verifying O₂ saturation at rest and activity with the patient's device is the best way to know if adequate O₂ delivery is delivered. A device that automatically responds to clinical factors such as respiratory rate and adequacy of oxygenation is the ideal.

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How can I help my patients stay active?

Patient education and support is key. Ensure the patient understands the importance of activity; and make sure the right equipment and instruction is available to address shortness of breath that may occur when they are active. Research has noted that overall impairment in functional status is associated with impaired survival in COPD. The recent Pulmonary Rehabilitation Guidelines strengthen "previous recommendations supporting the benefits of lower and upper extremity exercise training and improvements in dyspnea and health-related quality-of-life outcomes of pulmonary rehabilitation." Motivating and reassuring patients how vital it is **to move** is the critical factor in managing their disease process.

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Are they getting enough oxygen during exercise?

Adequate O₂ delivery is important to a patient who is ambulatory or in an exercise program. Two key issues affect the outcome: the patient's ability to exercise and the limitations of oxygen devices to deliver an appropriate amount of oxygen during exercise. Determining saturation during the process can be assessed using simple oximetry. This simple test along with increases in the respiratory rate and heart rate will let you know the minute the volume of oxygen isn't meeting the patient's needs.

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Are my patients saturated when their breath rate increases?

Possibly not. Oxygen is a cornerstone in the treatment of COPD, but due to the limitations of many current portable devices to deliver adequate volume with an increased respiratory rate, patients require assessment according to the activity and the clinical signs of dyspnea. A device that automatically responds to clinical factors such as respiratory rate and adequacy of oxygenation is the ideal and should be considered to make sure that as the respiratory rate increases, patients receive the oxygen they require.

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