

Medical Oxygen Order Form



Client details			
Patient name:	<input type="text"/>	Email:	<input type="text"/>
Patient address:	<input type="text"/>	Patient:	<input type="text"/>
	<input type="text"/>	Caregiver Contact:	<input type="text"/>
Date of birth:	<input type="text"/>	Gender: Male Female	Contact Name: <input type="text"/>

Funding details	
Funding Body/Hospital:	<input type="text"/>
Contact Name:	<input type="text"/>
Email:	<input type="text"/>
Contact Number:	<input type="text"/>

Oxygen prescription			
At rest:	<input type="text"/>	l/min:	<input type="text"/>
Exercise:	<input type="text"/>	l/min:	<input type="text"/>
Nocturnal:	<input type="text"/>	l/min:	<input type="text"/>
Physicians Name:	<input type="text"/>	Provider Number:	<input type="text"/>
Address:	<input type="text"/>		
:	<input type="text"/>	Fax:	<input type="text"/>
Physician signature:	<input type="text"/>	Date:	<input type="text"/>
Add Comments:	<input type="text"/>		
No. of hours per day:	<input type="text"/>		

Equipment requirements			
Portable Oxygen Concentrator		Stationary Oxygen Concentrator	
Continuous & Pulse Flow		5L	10L
Portable Oxygen Cylinder:		Stationary oxygen cylinder (standard):	
B size (160L)	Carry bag	D D size (1500L)	
CH size (470L)	Trolley	Stationary oxygen cylinder with integrated regulator:	
CL (760L)	Walker Bracket	2.8 (590L)	20 (4100L)
2.8L (590L) with integrated regulator		5.0 (1000L)	
Regulator / OCD	Continuous flow regulator	Oxygen conserving device (pulse dose)	
	Cannula Mask	Other: <input type="text"/>	

Please send completed form to:			
e-fax: 1800 254 329	Emails:	NSW alhorders@airliquide.com	SA saorders@airliquide.com
1300 36 02 02		WA alhwa.orders@airliquide.com	QLD alhqld.orders@airliquide.com
		VIC alhvic.orders@airliquide.com	

Oxygen, energy of life

Scan the QR Code to visit our Home Oxygen website



1300 36 02 02 | au.healthcare.airliquide.com



How can Oxygen Therapy support you

[^]<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2648117>



Going Out



Travelling



Daily Activities



Improve wellbeing



Gardening



Shopping



Personal Care



Exercise Capability

What do I do next?

Have your Medical Oxygen form completed from your Respiratory specialist



Medical Oxygen Order forms are available from our website:
au.healthcare.airliquide.com/oxygen



Once completed by your specialist send the form to Air Liquide Healthcare via any method below;



alhenquiries@airliquide.com



e-fax: 1800 254 329



To purchase online simply visit store.airliquidehealthcare.com.au
And upload your script with your Oxygen Therapy device purchase



A dedicated Customer Service member will contact you to discuss your script requirements

Rent
Short Term
min. 2 weeks

\$15/day

Inc Free Comfort
Accessories:

- ✓ x1 Cannula
- ✓ x1 NozOil

Rent
Long Term
min. 6 months

\$10/day

Inc Free Comfort
Accessories:

- ✓ x6 Cannula
- ✓ x1 NozOil
- ✓ x1 EZ Ear Wrap

Air Liquide Healthcare
supplies a wide range
of POC's from leading
manufacturers for rent
or purchase

*Portable Concentrator purchases or
Rentals are not funded by government
funding bodies inc. SA Health/
MASS/Silverchain/Enable /SWEP

Please do not hesitate to contact us for any assistance. We will help you find the equipment that meets your oxygen needs and complements your way of life.