



Center for Medicaid and State Operations/Survey and Certification Group

Ref: S&C-07-10

**DATE:** January 12, 2007

**TO:** State Survey Agency Directors  
State Fire Authorities

**FROM:** Director  
Survey and Certification Group

**SUBJECT:** **Multiple Providers** - Hospitals, Ambulatory Surgical Centers, Nursing Homes, Religious Non-Medical Health Care Institutions, Programs of All-Inclusive Care for the Elderly (PACE) Facilities, Critical Access Hospitals, Intermediate Care Facilities for the Mentally Retarded – Medical Gas Storage and Usage Considerations

**Memorandum Summary**

- Up to 300 cubic feet of nonflammable medical gas may be accessible as operational supply rather than storage, when properly secured.
- An individual container of medical gas placed in a patient room for “as needed” (but regular) individual use is not required to be stored in an enclosure, when properly secured.

The purpose of this memorandum is to answer questions regarding storage requirements for small quantities of medical gas and what is considered when determining if a medical gas container is “in use.” These issues are not addressed by the 1999 edition of NFPA 99 Health Care Facilities but information on these issues can be found in the 2005 edition of NFPA 99 Health Care Facilities at 9.4.3.

Q1. Can up to 300 cu ft of nonflammable medical gas (12 E sized cylinders) associated with patient care be located outside of an enclosure at locations open to the corridor in a healthcare facility?

A1. Yes, up to 300 cu ft of nonflammable medical gas can be located outside of an enclosure (per smoke compartment) at locations open to the corridor such as at a nurse’s station or in a corridor of a healthcare facility.

This amount of nonflammable medical gas per smoke compartment is not considered a hazard if the containers are properly secured, such as in a rack to prevent them from tipping over or being damaged. In this case the medical gas is considered an “operational supply” and not storage. If the cylinders are placed in a corridor they should be placed so as not to obstruct the use of the corridor. This amount of medical gas is in addition to those cylinders contained in “crash carts” and in use on wheelchairs or gurneys.

Q2. When medical gases are used by patients on a “PRN” basis does the container have to be stored in an approved gas storage room when not being used?

A2. The term “PRN” means “as needed.” An individual cylinder placed in a patient room for immediate use by a patient is not required to be stored in an enclosure and is considered in use. It should be secured to prevent tipping or damage to the cylinder. If the resident does not need the use of oxygen for an extended period of time, such as several days, then the medical gas container should be removed from the room and properly secured in an approved storage room.

If you have any questions concerning this memorandum, please contact James Merrill at [James.Merrill@cms.hhs.gov](mailto:James.Merrill@cms.hhs.gov)

**Effective Date:** The information contained in this memorandum is current policy and is in effect for all healthcare facilities. The State Agency should disseminate this information within 30 days of the date of this memorandum.

**Training:** This information should be shared with all appropriate survey and certification staff, surveyors, their managers and state fire authorities and their staff.

/s/  
Thomas E. Hamilton

cc: Survey and Certification Regional Office Management (G-5)