7.05 Barriers to successful home pulse oximetry in a paediatric respiratory centre: A patient survey Isobel MacNamara¹, Jason Foran¹, Barry Linnane², Daryl Butler¹

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Background: Home pulse oximetry is typically the first line investigation for sleep disordered breathing (SDB) in children. These home-based studies are reliant on parents correctly applying a sensor beginning the study, potentially contributing to technically inadequate, non-diagnostic studies. **Methods:** A sample of non-diagnostic studies and non-arrivals were selected from February to June 2024 at UHL. Parents/guardians were contacted with a structured survey. Questions focused on non-attendance, subjective issues with the process and sought opinions on proposed improvements. **Results:** Thirty two patients from the 'failed study' cohort and 16 from the 'DNA cohort' were contacted. Of the latter, 3 had a previous failed study and received both surveys. The response rate was 27 of 48 surveyed (56%). Non-attendance was attributed to non-receipt of an appointment letter for 60% (6/10). For failed studies, issues included sensors either falling off/loosening 35% (7/20) or being difficult to secure 30% (6/20). Of proposed changes, 80% (16/20) identified the provision of an instructional video would be useful. **Conclusions:** This survey of parents/guardians highlighted challenges contributing to failed studies, with equipment issues prevalent. There is scope to improve study success rates by addressing technical difficulties with sensors and provision of additional parental information. **Disclosures: Conflicts of Interest:** The authors declare that they have no conflict of interest.