

# Promoting Relaxation with Essential Oils



## Key point

Each clinical environment is different. The following steps are generalizations to help you think through an assessment to use the appropriate delivery method and essential oil. Always follow the policy and procedures of your organization if any are in place.

## Step 1: Assess patient/client for obvious causes of stress and anxiety

Anxiety, stress, and nervousness can seem the same to some people. Your scope of practice will guide your assessments. Pain and poor sleep can contribute to anxiety, stress, and nervousness.

## Step 2: Select the essential oil and delivery method

### Selecting an essential oil

Consider your initial assessment of the patient's pain. If your goal is to target pain and stress, select an essential oil or combination of essential oils that also has properties for relaxation. Include the patient (or family) in the selection of the appropriate essential oil. Remember that everyone reacts to scents differently, and consider the safety aspects of the essential oil. Lavender, for example, may not be appropriate for a patient who associates the smell with a traumatic memory, and bergamot should not be applied to skin that may be exposed to sunlight within the next 24 hours.

### *Examples of essential oils effective for anxiety/stress include:*

- Bergamot (*Citrus bergamia*)
- Clary sage (*Salvia sclarea*)
- Frankincense (*Boswellia carterii*)
- Lavender (*Lavandula angustifolia*)
- Mandarin (*Citrus reticulata*)
- Roman chamomile (*Chamaemelum nobile*)
- Sweet marjoram (*Origanum majorana*)
- Sweet orange (*Citrus sinensis*)
- Ylang ylang (*Cananga odorata*)

### Selecting a delivery method

Both inhaled and topical essential oils will provide varying sedating effects, trigger a relaxation response in the brain, and reduce irritability and insomnia.

Consider the following when selecting a delivery method:

- What options are available, per organizational policy?
- What does the patient/client/family prefer?
- Is the patient physically and mentally capable of making a choice?
- Do physical or mental factors make any method unsafe for the patient?



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- Is there a reason one method may be more effective than another? (e.g., inhalation may be more effective for stress and anxiety, since breathing is also known to elicit a relaxation response.)

## Step 3: Provide education to the patient and/or family prior to delivery

### Direct inhalation

Demonstrate how to take slow, easy breaths of the essential oil, using any of the direct inhalation methods described in the “Essential Oil Inhalation Methods” reading found in Week 3 of this course:

- Cotton ball techniques
- Adhesive bandage techniques
- Patches
- Aromasticks

### Topical application

Massage is the most widely practiced topical application method in the clinical setting. Demonstrate techniques shown in the “Essential Oil Massage Techniques” video and linked in the “Topical Application Methods” reading in Week 3 of this course.

- Use pre-diluted essential oil whenever possible. If that is not available, use 1–5% as instructed in the dilution chart. In the clinical setting, 2% is most often used.
- If blending more than one essential oil, calculate the total drops to determine dilution.  
Example: 6 drops of lavender + 6 drops sweet marjoram = 12 drops total.  
12 drops in 1 oz. carrier = 2% dilution.

## Step 4: Evaluate effectiveness

Reassessment is imperative, just as it is with other patient treatments. Patient needs may change as their condition changes. A patient may also want to try a different essential oil, blend, or different delivery method as time goes on. Document in accordance with your professional and organizational standards.



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