UHMS Position Statement

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Title: **Standardization of Terminology in Undersea and Hyperbaric Medicine: Adoption of "Hyperbaric Oxygen Treatment "**

INTRODUCTION

Since the introduction of hyperbaric medicine into clinical practice, the treatment of patients exposed to greater-than-atmospheric pressure while breathing oxygen or other gas mixtures has been described by multiple terms in the medical literature, the public media, and professional organizations. Common nomenclature has included hyperbaric oxygen therapy, hyperbaric oxygen treatment, compression therapy, recompression therapy, and hyperbaric chamber treatment. Common abbreviations have included HBO, HBO_2, and HBOT.

The clinical delivery of hyperbaric oxygen is regulated at the state and institutional level, with requirements governing practitioner oversight, facility standards, and scope of practice. The Undersea and Hyperbaric Medical Society (UHMS) defines hyperbaric oxygen treatment as follows:

"Hyperbaric oxygen is a medical procedure requiring a physician's prescription and oversight. All patients must have their entire body placed within a hard sided hyperbaric chamber that meets the American Society of Mechanical Engineers and Pressure Vessels for Human Occupancy (ASME PVHO-1) code and the National Fire Protection Association (NFPA 99) code and standards for hyperbaric chambers, at a pressure of not less than 2.0 ATA (202.65 kPa) while breathing physician prescribed medical grade oxygen for an amount of time typically between 90 and 120 minutes per treatment. Medical grade oxygen (>99.0% oxygen purity) is the only acceptable gas for therapeutic delivery of hyperbaric oxygen."[1]

At present, some practitioners and facilities advertise treatments involving exposure to elevated atmospheric pressure using varying oxygen concentrations and treatment

parameters that do not meet UHMS definitions or accepted clinical standards for hyperbaric oxygen treatment. These interventions are frequently marketed as “mild hyperbaric” treatments despite operating outside established UHMS treatment parameters.[2]

Certain commercially marketed low-pressure or soft-sided hyperbaric chambers may operate outside UHMS-defined treatment parameters and may not meet applicable ASME PVHO-1 or NFPA 99 standards required for clinical hyperbaric oxygen treatment.

The use of inconsistent terminology to describe these differing interventions may contribute to confusion among patients, referring providers, regulatory agencies, payers, and the general public. The proliferation of commercial “mild hyperbaric” and wellness-based pressure exposure services has further highlighted the need for terminology that clearly distinguishes UHMS-defined clinical hyperbaric oxygen treatment from non-standardized interventions that may not meet accepted medical, safety, or regulatory standards.

Accordingly, the UHMS supports the standardization of terminology for the clinical practice of hyperbaric medicine to promote clarity, consistency, and alignment with accepted clinical standards.

ABSTRACT

1. Hyperbaric medicine terminology has historically lacked standardization, with multiple terms and abbreviations used interchangeably across clinical practice, scientific publications, educational materials, and public communications.
2. Inconsistent nomenclature may contribute to confusion regarding the definition, regulation, clinical standards, and physician oversight associated with hyperbaric oxygen treatment.
3. The Undersea and Hyperbaric Medical Society (UHMS) endorses the term *hyperbaric oxygen treatment* as the preferred terminology for clinically delivered hyperbaric oxygen under accepted UHMS standards.
4. The Society recommends adoption of the abbreviation HBO_2 or HBO_2 treatment in place of HBOT across manuscripts, presentations, educational content, and operational documents.
5. Consistent nomenclature is intended to improve clarity and communication among clinicians, researchers, regulatory agencies, payers, referring providers, and the public.

RATIONALE

The Undersea and Hyperbaric Medical Society has updated its preferred terminology standards to reflect a more precise and clinically appropriate description of care

delivered in hyperbaric medicine. Specifically, the Society endorses the term *"hyperbaric oxygen treatment" in place of "hyperbaric oxygen therapy"* (HBOT).

This terminology standard applies to peer-reviewed publications, scientific presentations, educational materials, institutional communications, and operational documents associated with the field of undersea and hyperbaric medicine. The updated nomenclature is reflected in the current edition of the *UHMS Hyperbaric Medicine Indications Manual* and associated UHMS publications.

Use of the term *treatment* more accurately reflects the structured, protocol-based, physician-supervised delivery of hyperbaric oxygen as a medical procedure. Standardized terminology also supports a clearer distinction between UHMS-defined clinical hyperbaric oxygen treatment and non-standardized commercial pressure-based wellness interventions.[3]

Consistent terminology promotes clearer communication among clinicians, researchers, regulatory agencies, payers, and the public while reinforcing the identity of hyperbaric medicine as a medically regulated discipline grounded in established physiologic principles and clinical evidence.

The Society recognizes that existing reimbursement terminology, coding language, and legacy literature may continue to reference “hyperbaric oxygen therapy” or HBOT. The recommendations contained within this statement are intended to establish preferred professional nomenclature for future scientific, educational, and operational communications and are not intended to modify existing coding or reimbursement frameworks.

CONCLUSIONS/RECOMMENDATIONS

The UHMS recommends adoption of the term *hyperbaric oxygen treatment* as the preferred nomenclature for the clinical delivery of hyperbaric oxygen under accepted UHMS standards.

The Society further recommends using the abbreviations *HBO_2* or *HBO_2 treatment* in scientific publications, educational materials, presentations, operational documents, and professional communications. Use of the abbreviation HBOT should be phased out in favor of terminology consistent with current UHMS guidance and publications.

REFERENCES

1. Undersea and Hyperbaric Medical Society. (2024). *UHMS hyperbaric medicine indications manual* (15th ed.). Best Publishing Company

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3. Undersea and Hyperbaric Medical Society. (2021). *Guidelines for hyperbaric facility operations*. Undersea and Hyperbaric Medical Society.