

## **Criteria for Hyperbaric Oxygen Therapy**

Every patient is required to have a prescription for Hyperbaric Oxygen Therapy, a complete History and Physical report, and notes supporting their diagnosis. A chest X-ray is required for patients with COPD or who smoke.

### **1. Preparation and Preservation of a Compromised Skin Graft**

- Doppler study or documentation of patient pulses
- Notes

### **2. Diabetic Lower Extremity Wound**

- Documentation reflecting no measurable signs of healing for at least thirty days of treatment with standard care.
- Evaluation of patient at least every thirty days during Hyperbaric Oxygen Therapy i.e. notes, measurements and pictures

**Medicare guidelines state reimbursement for a wound with all 3 of the following criteria:**

1. Patient has Type 1 or Type 2 Diabetes and has a lower extremity wound that is due to diabetes
2. Patient has a wound classified as Wagner Grade 3 or higher
3. Patient has failed and adequate course of standard wound therapy.

### **3. Chronic Refractory Osteomyelitis**

- Medical history prior to treatment including antibiotic therapy and surgical intervention
- MRI test results, bone biopsy, or bone scan
- Recommended twenty to forty treatments

**The use of Hyperbaric Oxygen Therapy is covered as adjunctive therapy only after there are no measurable signs of healing for at least 30 days of treatment with standard wound therapy, and it must be used in addition to standard wound care. Standard wound care in patients with Diabetic wounds includes:**

- Assessment of patient's vascular status (and correction of any vascular problems in the affected limb)
- Optimization of nutritional status
- Optimization of glucose control
- Debridement by any means to remove devitalized tissue
- Maintenance of clean, moist bed of granulation tissue
- Appropriate off-loading
- Necessary treatment to resolve any infection that might be present