

1. JOURNAL MISSION AND SCOPE

Undersea and Hyperbaric Medicine (UHM) is published quarterly in both print and electronic formats by the Undersea and Hyperbaric Medicine Society (UHMS). UHM accepts manuscripts for publication related to the areas of diving research and physiology, hyperbaric medicine and oxygen therapy, submarine medicine, naval medicine, and clinical research related to the above topics. To be considered for UHM, scientific papers must address significant, new research in areas related to biological, physical, and clinical phenomena in the above environments.

2. SUBMISSION OF MANUSCRIPTS

Manuscripts must have gone through all reviews and be approved for public release before being submitted electronically using the web-based system at <https://uhm.manuscriptmanager.net>.

Questions concerning submission should be directed to the Managing Editor, Lorrie Coté, at Lorrie@uhms.org.

The journal publishes four main types of articles:

- **Research Articles** may address basic, applied, or clinical research. Papers in this category should cover the results of experimental, theoretical, and clinical investigations on topics important to the understanding of undersea, submarine, and hyperbaric medicine. They should present the results of experimental or descriptive studies with suitable statistical analysis of results arranged into the following sections: Introduction, Methods, Results, and Discussion, ending with a statement of conclusions. Such manuscripts may not exceed 6000 words with approximately 25 references, 4 Tables, and 4 Figures.
- **Review Articles** are scholarly reviews of the literature on important subjects within the scope of the journal. Review articles may be either narrative reviews or systematic reviews. Systematic reviews should, where possible, be registered prospectively with PROSPERO (<https://www.crd.york.ac.uk/prospéro/>) or a similar registry, and the registration number must be included in the methods section. For systematic reviews, it is strongly recommended that a medical librarian be involved with the development and execution of the literature search. Systematic reviews and meta-analyses must be reported using the most recent Preferred Reporting Items for Systematic reviews and Meta-Analyses (PRISMA) guidelines (currently the 2020 edition). It is suggested that authors considering the preparation of a Review Article contact the Chief Editor to ascertain the suitability of the topic. Reviews generally may not exceed 6000 words with up to 150 references. Longer, exceptional-quality reviews of relevance may be considered.
- **Short Communications** describe new techniques, devices, or interesting preliminary findings that may serve as the basis for further definitive research. They should contain the same sections as a Research Article, but may not exceed 3000 words with approximately 12 references and a combined total of 4 Tables/Figures.

- **Case Reports** describe interesting or unusual clinical cases or aeromedical events. They should consist of a short Introduction section to provide perspective, a Case Report section containing details of the case, and a Discussion that includes references to pertinent literature. Such manuscripts may not exceed 3000 words with approximately 12 references and a combined total of 4 Tables/Figures.

Other types of manuscripts may be considered at the discretion of the Editor, including:

- **Historical Notes** are a type of Short Communication regarding past events of significance in the development of undersea and hyperbaric medicine.
- **Technical Notes** are a type of Short Communication that describes a new device or novel technique that may be promising for studying and working in the undersea and/or hyperbaric environments.
- **Letters to the Editor** discuss and/or criticize scientific papers that have appeared in the journal within the past year and are limited to 500 words. The author of the original paper will be invited to provide a response.

3. LIMITS ON PRIOR PUBLICATION

UHMJ will not ordinarily review for publication any work under consideration, accepted, or published by another journal. However, an author may submit a paper that expands on material that has appeared as an abstract or brief preprint, or that was rejected by another journal. In the case of papers that have been reviewed and released by another journal, *UHM* reserves the right to request reviews and editor comments from the other journal(s) during its consideration of the paper.

When submitting a paper, the Cover Letter must contain a full statement regarding any previous versions that have been posted online on any website, both formally and informally. For posted preprints, links to those are required. Copies of such material should be sent to the Editorial Office via separate e-mail, attaching any document(s) that may aid the Editor's decision in handling the matter.

Submissions inconsistent with these guidelines will be returned to the corresponding author for revision before being reviewed.

4. QUALIFICATIONS FOR AUTHORSHIP

This journal adheres to the criteria for authorship developed by the International Committee of Medical Journal Editors (icmje.org). Accordingly, authorship credit should be granted only to persons who meet *all four* of the following criteria:

- substantial contributions to conception and design of the study, or acquisition of data, or analysis and interpretation of results;
- drafting the article or revising it critically for important intellectual content;
- final approval of the version to be published; AND

- agreement to be accountable for all aspects of the study to ensure that questions related to the accuracy or integrity of any part of the study are appropriately investigated and resolved.

All persons who meet these criteria should be listed as authors. The order of authorship on the byline should be a joint decision of the co-authors, and the Corresponding Author should be prepared to explain that order. If there are more than seven authors, the contributions of each author should be included in the cover letter so the Editor can determine if all authors meet the above criteria.

Acquisition of funding, collection of data, or general supervision of the research group without meeting the other criteria does not justify authorship. Persons in those roles should be credited in the Acknowledgments. Examples might include a person who provided purely technical help or a department chair who provided only general support.

5. AI POLICY

It is critical for the integrity and quality of our journal that we have a policy for both authors and peer reviewers regarding the use of generative AI tools. The scholarly publishing community appears to have reached a consensus regarding several aspects of if/how generative AI should be permitted in the development and review of research articles. In establishing the policy for UHMJ, we have aligned ourselves with leading industry organizations such as the International Committee of Medical Journal Editors (ICMJE), the World Association of Medical Editors (WAME), Springer Nature, Science, Cambridge University Press, Elsevier, the Journal of the American Medical Association (JAMA), and the Council of Science Editors (CSE).

There are undeniable risks in using generative AI tools. These include, but are not limited to, loss of control over original data; potential breach of Institutional Review Board approval; inaccuracies introduced by AI hallucinations; perpetuated biases; infringement upon copyrights held by others; and having one's own copyright rendered unenforceable.

The spirit of UHMJ's policy is that authors are expected NOT to use generative AI in preparing their manuscript for submission to UHMJ.

ChatGPT, Large Language Models, and other generative AI programs cannot be used as a replacement for original thought or to perform activities that would normally be the responsibility of authors (e.g., developing hypotheses, selecting and interpreting statistical tests, writing abstracts, formatting articles, etc.). ChatGPT, Large Language Models, and any other generative AI programs cannot be used to create images, multimedia, or graphic elements.

Authors must specifically state in their cover letter that they have not used generative AI in the preparation of their manuscript.

Please note that standard referencing software tools are not considered "generative AI" and, therefore, are not subject to these policies.

For non-native English speakers ONLY, we will allow the use of generative AI programs for translation and readability improvements from their native language to English. Where this single exception applies, authors must adhere to the following steps:

- ChatGPT, Large Language Models, and any other generative AI programs cannot be listed as an author or co-author, nor cited as an author or co-author in the references.
- Authors must disclose the use of any generative AI tool in their cover letter to editors/reviewers at the submission stage and in the Methods section of their manuscript. The statement should include:
 - The name and version of the generative AI tool used.
 - A description of how the generative AI tool was used and for what purpose.
 - The full prompt(s) submitted to the generative AI tool, including the date and time of each query (to be submitted as supplementary material).
- Authors are responsible for the accuracy, completeness, and originality of the content in their manuscript.
- Authors are expected to verify all AI-generated output for accuracy, completeness, and proper citation, as well as take action to combat biases that may be perpetuated by generative AI tools. Authors should describe the steps taken to mitigate risks in the Methods section of their manuscript.

Any manuscript determined to be in violation of our AI policy, as detailed above, will be rejected.

Our journal staff and Editorial Board are committed to regularly reviewing and revising our policy as technologies continue to develop.

If, at any point, you are in doubt about the tools you have used or how you have used them, please contact our Chief Editor, Prof. David Newman, at UHMJed@uhms.org

6. USE OF HUMAN SUBJECTS

a. Ethics

UHMS endorses the World Medical Association's Declaration of Helsinki (<https://www.wma.net/policies-post/wma-declaration-of-helsinki/>). Experimental protocols must be approved by the appropriate committee for ethical review of human experimentation, and voluntary consent must be obtained from subjects after they have been fully informed of the nature of the experiment, any hazards involved, and their right to withdraw from the experiment at any time without prejudice or penalty. Inclusion of the following statement at the beginning of Methods will be understood by the Editor as the author's affirmation of compliance: "The study protocol was approved in advance by [full name of committee and/or its institutional sponsor, approval number XXX]. Each subject provided written informed consent before participating."

A study may be exempt from the above requirements if: a) the data were collected non-invasively during work or training that the subjects would have undertaken had no experiment

existed; or b) the data were collected using anonymous questionnaires. In either case, the reason for exemption must be described under Methods.

Retrospective approval for studies already completed will not be accepted for review. The Chief Editor will make the final determination as to whether or not a submitted research study has been reviewed and/or approved by the appropriate ethics committee.

Authors reporting on human experimentation that does not include both male and female subjects must explain, under Methods, the reason for not doing so.

b. Confidentiality

Reporting of individual data is not appropriate in Research Articles. Human subjects or patients in Case Reports must never be identified by name, initials, photographs, or other information that can be used to single out the individual unless the author has obtained written permission for the use of such material and provides a copy to the journal.

7. USE AND CARE OF ANIMALS

UHMS endorses high-quality research that responsibly uses experimental animals. Each scientist who performs such research must assume responsibility for the animals' general welfare and humane handling, and these must also be maintained under the surveillance of a veterinarian. Adherence to policies and procedures from the Guide for the Care and Use of Laboratory Animals of the U.S. Department of Health and Human Services (or comparable standards) is required, and the experimental protocol must be approved in advance by the appropriate Institutional Animal Care and Use Committee (or a comparable body). The standard of care, the name of the approving committee, and the fact that the animals were maintained under the surveillance of a veterinarian must be stated at the beginning of the Methods section in the manuscript.

8. LANGUAGE, ABBREVIATIONS, AND MEASUREMENTS

The language of the journal is standard American English in the style specified by the most recent edition of the U.S. Government Publishing Office (<https://www.govinfo.gov/collection/gpo-style-manual>). The journal cannot provide translation or rewriting services; authors who are not fluent in English should have the manuscript edited by a native speaker before submission. The journal will decline to review manuscripts that are not sufficiently clear for reviewers to follow the paper's argument.

Abbreviations and acronyms should be used only if they improve the readability of the text. The full term for which an abbreviation stands must precede its first use in the abstract and again in the text. Abbreviations should only be used if the relevant term appears at least three times within the text. These caveats do not apply to standard units of measurement, which require no explanation.

Measurements of length, weight, volume, and pressure should be reported in metric units and temperatures should be given in degrees Celsius (customary English units such as degrees Fahrenheit may be added in parentheses; altitude and depth should be in feet with equivalent

meters in parentheses). Hematological and clinical chemistries should generally be reported in the metric system in accordance with the International System of Units (SI). However, UHMJ allows reporting of clinical values in the terms used by the examining laboratory. Blood pressures should be given in millimeters of mercury.

If the subject matter makes it appropriate to use non-SI units such as fsw, msw, atm, or bar, a parenthetical conversion to pascals, kilopascals, or megapascals should accompany the first mention of a pressure value in the abstract and the text. Units of fsw and msw should not be used to express partial pressure or when the nature of the subject matter requires precise evaluation of pressure. After all units, authors must include a parenthetical (a) or a parenthetical (g) to indicate whether units are in absolute or gauge terms.

The proper method for the expression of other units or appreciations may be found in *Br Med J*. 1978;1:1334-1336 and *Aviat Space Environ Med*. 1984; 55: 93-100.

9. STATISTICAL REPORTING

Please follow these guidelines to avoid reporting errors commonly found in scientific articles: <http://www.equator-network.org/wp-content/uploads/2013/07/SAMPL-Guidelines-6-27-13.pdf>.

Reporting significance: precise p-values should be reported when possible. P-values should be reported as a lower case “p” and the numeric value preceded by a “0”. For p-values of 0.01 and greater, report the value to two decimals. For p-values of 0.001 to 0.01, report the value to three decimals. For p-values less than 0.001, report the value as “<0.001”.

P values alone are not sufficient. The calculated statistic, degrees of freedom, and exact p-values reported together provide the reader with a more comprehensive assessment of the outcome of statistical tests. The required format is Calculated statistic (degrees of freedom) = Value, p = value. For example, “F(2,98) = 10.12, p<0.001”.

10. REFERENCES

The Corresponding Author is responsible for providing complete, accurate references so a reader can locate the original material. Only references directly relevant to the argument of the paper should be cited. Preferred sources include peer-reviewed journals and books with ISBN designations. Technical reports and theses may be cited if the original report is publicly available. Abstracts and websites should be cited only if no other source is available. References should ordinarily be in English or at least contain an English abstract; titles in another language should be followed by an English translation in parentheses along with an indication of the original language at the end of the citation.

References should be cited using superscripts in numeric order in the text, or the Tables and Figure legends, and the list should be created after all the references have been cited. For in-text citations, ensure that no more than three citations are listed at the end of a sentence or phrase. The titles of cited journals should be abbreviated as in the U.S. National Library of Medicine’s (NLM) Medline (<http://www.ncbi.nlm.nih.gov/entrez/>). Examples of correct format for many different types of references can be downloaded from the journal’s Editorial Manager

page [See DOCUMENTS TO DOWNLOAD for a printable reference-formatting guide based on *Citing Medicine*, the NLM Style Guide for Authors, Editors, and Publishers, <https://www.ncbi.nlm.nih.gov/books/NBK7256/>].

References to papers for which authors have received a letter of acceptance, but which have not yet been published, must include the journal name and the words “forthcoming.” Information from manuscripts in preparation or submitted but not yet accepted should be cited in the text as (unpublished observations).

Unpublished communications may not be included in the list of references. Written communications may instead be inserted in the text, provided the author has obtained written permission from the person quoted; the editor will understand citation as “person's name (written communication, date)” as the Corresponding Author’s assurance that such permission was obtained. Oral communications may not be cited.

During the editing process and prior to publication, the Editorial Team will make any necessary adjustments to reference formatting in accordance with the NLM Style Guide. However, excessive or significant changes required during the editing process due to poor formatting efforts on the part of the author(s) may delay publication.

11. MANUSCRIPT REQUIREMENTS

Submission: Manuscripts must be submitted electronically through the online submission and review system, Manuscript Manager, at: <https://www.manuscriptmanager.net/uhm>.

Individuals submitting papers will be guided in the submission process, including full and short titles, keywords, conflict of interest statements, author names, affiliations, and email addresses—direct submission inquiries to the Managing Editor.

Text requirements: *Undersea and Hyperbaric Medicine* participates in the agreement established by the International Committee of Medical Journal Editors as outlined in Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Ann Intern Med. 1988; 108:258-265 and Br Med J 1988; 296:401-405.

Cover letter: A cover letter containing:

- A statement that the work is original, has not been published elsewhere, and is not currently under consideration by another journal. If the work has been posted as a preprint, provide the link. Otherwise, provide detailed information on those issues.
- A statement that there is no financial or other relationship that might be perceived as leading to a conflict of interest (i.e., affecting author objectivity). If such relationships do exist, provide detailed information.
- A statement that the manuscript has been read and approved by all authors and all named authors meet the appropriate criteria. If there are seven or more authors, explain the specific contributions of each that justifies their inclusion as an author (see QUALIFICATIONS FOR AUTHORSHIP above).

- A statement that generative AI has not been used in the preparation of their manuscript.
- Authors of papers based on statistical inference must inform the Chief Editor whether one of the authors is a trained statistician (has had some graduate training in statistics) or whether such a person was used as a consultant and has agreed to be named in the Acknowledgments. Absent such expertise, the Chief Editor may submit the paper to one of the journal's statistical consultants for review.
- Authors are requested to suggest the names of two or more scientists whom they regard as appropriate reviewers for their paper; the current e-mail and institutional affiliation of the candidates must be included. Authors may also name an individual to whom the paper should not be sent, where bias or conflict of interest is known to exist.

Title page: A title page that is separate from the manuscript should include the following:

- title
- each author's full name
- highest clinical degree/certification, followed by the highest academic degree, and the following:
- CHT, CHRN, DMT;
- laboratory or institution of origin;
- city, state, and country
- a running head, not to exceed 50 characters, including spaces;
- full contact info for the corresponding author, including telephone, complete postal address, and email.

Titles should be informative. The title should indicate the subject matter, nature of the study, and study design, if applicable. It may contain no more than 100 characters and spaces. It should not include abbreviations except those already widely understood (e.g., MRI). Animal studies should include the common name of the species (e.g., "rats"). We discourage the inclusion of geographic or organizational names. We encourage starting with important words rather than phrases such as "The effect of..." or "A study of..." For observational studies (eg, cohort, case-control, or cross-sectional studies), the title should indicate the nature of the study as per the "Strengthening the Reporting of Observational studies in Epidemiology" (STROBE) guidelines (<https://www.strobe-statement.org/>). The implication that a manuscript is one of a series of related papers is discouraged (e.g., "Decompression sickness studies I"). Avoid titles that pose questions.

Place this information on the title page.

Funding details: Please supply all details required by your funding and grant-awarding bodies as follows:

- **For single agency grants:** This work was supported by the [Funding Agency] under Grant [number xxxx].
- **For multiple agency grants:** This work was supported by the [Funding Agency #1] under Grant [number xxxx]; [Funding Agency #2] under Grant [number xxxx], etc.

- **No extramural funding must be indicated.**

IRB/IACUC approval:

- Indicate the body providing ethics approval and the approval number.
- List the date of ethics approval.
- List the date the first subject was enrolled.
- Indicate the page of your manuscript where ethics approval is indicated.

Word count for abstract.

Word count for main manuscript: Excluding references and tables.

Number of references.

Abstract: The abstract should be a one-paragraph “mini-paper” of no more than 250 words, with the same major headings as the paper. *For research papers and short communications*, the following headings must be used: Introduction, Methods, Results, and Discussion. For case reports, the following headings should be used: Introduction, Case Report, Discussion. Results should include important descriptive numerical data without specific P-values. Because abstracts are the only substantive portion of the article many readers see, abstracts must accurately reflect the content of the article.

Keywords: Include three to six keywords separated by semicolons that are not contained within the title.

Key points: An informative summary of two to three lines describing the paper's content must be provided for use in the table of contents.

Main Text:

INTRODUCTION: Briefly summarize the rationale for the study and clearly state the hypothesis or research question. This should contain only strictly pertinent references and is not the place for an extensive review of the literature. No more than three in-text citations are permitted at the end of a single sentence or phrase.

METHODS: Describe methods in sufficient detail to allow other workers to repeat the study. Clearly describe criteria for selection of the subjects or patients, including controls. As much as possible, standard subheadings should be used. For example, for a research study, appropriate subheadings would include subjects, equipment and/or materials, procedure, and statistical analysis. Some statement regarding Institutional Review Board/Ethics Committee approval or exemption needs to be included with the approval number. For established methods, give references without going into detail; for methods published but not well known, provide references and brief descriptions; for new or substantially modified methods, give details along with reasons for using them and their limitations. If an unusual apparatus was used, name it and give in parentheses the manufacturer's name and location (city, state, and country). Authors submitting systematic review articles or meta-analyses should include the

methods used for locating, selecting, extracting, and synthesizing data. Statistical methods should be described in the Methods section. Information about presentation of statistical material can be found in: Bailar J, Mosteller F. Guidelines for statistical reporting in articles for medical journals: amplifications and explanations. *Adv Intern Med* 1988; 108: 268-273.

RESULTS: Present results in logical sequence using text, Tables, and/or Figures. Data should appear in only one format (text, table, or graph), depending on which is best for a clear, concise presentation. Non-contributory results should be omitted. Subheadings should be avoided. Statistical results should contain the calculated statistic and degrees of freedom, in addition to the p-value. When statistical significance is revealed, exact p-values are preferred.

DISCUSSION: Emphasize the study's new and important aspects and the conclusions that follow from them. Do not repeat in detail data or other material given in the Introduction or the Results section. For experimental studies, it is useful to begin the discussion by briefly summarizing the main findings, then exploring possible mechanisms or explanations for them, comparing the results with other relevant studies, stating the study's limitations, and exploring the implications for future research and clinical practice. The final paragraph should be a statement of conclusions linked to the study's goals, as stated in the Introduction, and directly supported by the data. Avoid claiming priority or alluding to work that has not been completed. State new hypotheses when warranted but clearly label them as such. The manuscript must be divided into the following sections: Introduction, Methods, Results, and Discussion. Where appropriate, a limitations section should be included in the discussion section. Long stretches of text should be broken into suitable paragraphs. Obscure symbols and excessive use of abbreviations should be avoided.

Figures: *Figures may not be embedded in the manuscript*; however, please indicate within the text where they should be placed. Figures should be high-quality (1200 dpi for line art, 600 dpi for grayscale, and 300 dpi for color) and the correct size. Figures should be supplied in one of our preferred file formats: PDF, JPEG, or TIFF. Microsoft Word (.doc or .docx) files are acceptable for figures created in Word. Color images are allowed only when their removal would make the image uninterpretable, such as in diagnostic images. Figures created in Microsoft Excel are discouraged. No video or multimedia files will be accepted as part of the submission or as supplementary material.

Depictions of US Navy hyperbaric treatment tables will not be accepted as figures unless the treatment was modified in the study/case report. Indicate the treatment table used in the text and cite the current version of the US Navy Dive Manual.

Depiction of animals: Animals must be depicted only by line drawings or other forms of animation. It is the Journal's policy not to publish photographs of animal subjects.

Depiction of patients: *UHM* publishes only photos of subjects who have provided express written permission to the author to do so. The authors must specifically document this in an article that includes such images. A lack of specific consent requires a de-identified photo (i.e., one with a black box obscuring the subject's identity).

Tables: Tables should present new information rather than duplicating what is in the text. Readers should be able to interpret the table without reference to the text. *Tables may not be embedded in the manuscript.* Please supply editable tables in a Microsoft Word (.doc or .docx) file.

Equations: Equations should appear in the text in an appropriate type style (*italics*, **bold**, etc.). Authors should carefully distinguish between capital and lower-case letters, Roman and Greek characters, and letters and numerals. Number equations sequentially, in parentheses on the left edge of the text. All constituent terms should be defined when they initially appear. Authors are responsible for the correct formatting of each term in the equation. Equations should be considered camera-ready when they are submitted.

Acknowledgments: Acknowledgments of persons who aided in the work and of funding agencies, along with any other special considerations about the paper, should appear at the end of the text, before references.

Acknowledgments, including the following as appropriate:

- Acknowledgment of professional contributions other than authorship (see above) and/or technical assistance. All persons acknowledged must give their written permission to be named.
- Acknowledgments of financial and material support, specifying their nature (e.g., equipment or drugs).
- Statement of financial or other relationships that could be viewed as causing bias or conflict of interest for any of the authors.
- Institutional disclaimers and other required statements.

Footnotes: Footnotes to material in the text are not allowed. Footnotes to tables are acceptable and should be identified in sequence by lower-case letters of the alphabet in italic superscript.

12. PEER REVIEW

Unbiased, independent, critical assessment is an intrinsic part of all scholarly work, including the scientific process. Experts who are not part of the editorial staff conduct peer review at the request of the Chief Editor. Peer review is an important extension of the scientific process, helps editors decide which manuscripts are suitable for their journals, and helps authors and editors in their efforts to improve the quality of reporting. Reviewers for this journal are asked to excuse themselves if there is any possible conflict of interest. Reviewers, who volunteer their time, provide comments for the authors and may also make confidential comments to the editor. Although reviewers may recommend the disposition of an article, the final decision to accept or reject is the responsibility of the Chief Editor.

13. PROOFS and FEES

Proofs are sent to the corresponding authors via email as PDFs and should be checked carefully. The corresponding author is the responsible party for signing off on proofs. During

this process, UHM makes the reasonable assumption that the corresponding author will consult with all co-authors or be designated by the co-authors to act on their behalf.

Authors must clearly indicate the necessary changes on the galley or in an accompanying Word document, with corrections set in colored text or highlighted. Proofs must be returned within the specified time. A paper may be rescheduled if the delay warrants. Authors whose original papers are accepted for publication in UHM can publish for no fee.

Uncorrected proofs will be posted on the Journal's webpage after acceptance until they appear in the Journal. All articles will be open access 12 months after publication.