



DPC: 24/30471000 DC

BSI Group Headquarters

389 Chiswick High Road London W4 4AL

Tel: +44 (0)20 8996 9000

Fax: +44 (0)20 8996 7400

www.bsigroup.com

Date: 16 August 2024

Origin: International

Latest date for receipt of comments: 09 October 2024

Project No. 2023/00502

Responsible committee: CH/121 Anaesthetic and respiratory equipment

Interested committees:

Title: Draft BS ISO 19223-2 Lung ventilators and related equipment - Vocabulary and semantics. Part 2: High frequency and jet ventilation.

Please notify admin.start@bsigroup.com if you are aware of any keywords that might assist in clarifying or identifying the standard or of the content of this standard:

- i) has any issues related to 3rd party IPR, patent or copyright
- ii) affects other national standard(s)
- iii) requires additional national guidance or information

WARNING: THIS IS A DRAFT AND MUST NOT BE REGARDED OR USED AS A BRITISH STANDARD. THIS DRAFT IS NOT CURRENT BEYOND 09 October 2024

This draft is issued to allow comments from interested parties; all comments will be given consideration prior to publication. No acknowledgement will normally be sent. **See overleaf for information on the submission of comments.**

No copying is allowed, in any form, without prior written permission from BSI except as permitted under the Copyright, Designs and Patent Act 1988 or for circulation within a nominating organization for briefing purposes. Electronic circulation is limited to dissemination by e-mail within such an organization by committee members.

Further copies of this draft may be purchased from BSI Shop <http://shop.bsigroup.com> or from BSI Customer Services, Tel: +44(0) 20 8996 9001 or email cservices@bsigroup.com. British, International and foreign standards are also available from BSI Customer Services.

Information on the co-operating organizations represented on the committees referenced above may be obtained from <https://standardsdevelopment.bsigroup.com/>.

E-mail: admin.start@bsigroup.com

Introduction

This draft standard is based on national and international discussions. Your comments on this draft are invited and will assist in the preparation of the consequent standard.

For international standards, comments will be reviewed by the relevant UK national committee before sending the consensus UK vote and comments to the international committee, which will then decide appropriate action. If the international standard is approved, it is usual for the text to be published as a British Standard.

For national standards, comments will be reviewed by the relevant UK national committee and the resulting standards published as a British Standard.

UK Vote

Please indicate whether you consider the UK should submit a negative (with supporting technical reasons) or positive vote on this draft. Please indicate if you are aware of any reason why this draft standard should not be published as a British Standard.

Submission of Comments

- **Annotated drafts are not acceptable and will be rejected.**
- All comments should be submitted online at <https://standardsdevelopment.bsigroup.com/>. You will need to register in order to comment.

Template for comments and secretariat observations

Date: xx/xx/20xx	Document: ISO/DIS xxxx
------------------	------------------------

1	2	(3)	4	5	(6)	7
MB	Clause No./ Subclause No./Annex (e.g. 3.1)	Paragraph/ Figure/Table/Note	Type of comment	Comment (justification for change) by the MB	Proposed change by the MB	Secretariat observations on each comment submitted
	3.1	Definition 1	ed	Definition is ambiguous and needs clarifying.	Amend to read '...so that the mains connector to which no connection...'	
	6.4	Paragraph 2	te	The use of the UV photometer as an alternative cannot be supported as serious problems have been encountered in its use in the UK.	Delete reference to UV photometer.	



DRAFT International Standard

ISO/DIS 19223-2

Lung ventilators and related equipment — Vocabulary and semantics —

Part 2: High frequency and jet ventilation

ICS: 11.040.10; 01.040.11

ISO/TC 121/SC 4

Secretariat: **ANSI**

Voting begins on:
2024-08-16

Voting terminates on:
2024-11-08

This document is circulated as received from the committee secretariat.

THIS DOCUMENT IS A DRAFT CIRCULATED FOR COMMENTS AND APPROVAL. IT IS THEREFORE SUBJECT TO CHANGE AND MAY NOT BE REFERRED TO AS AN INTERNATIONAL STANDARD UNTIL PUBLISHED AS SUCH.

IN ADDITION TO THEIR EVALUATION AS BEING ACCEPTABLE FOR INDUSTRIAL, TECHNOLOGICAL, COMMERCIAL AND USER PURPOSES, DRAFT INTERNATIONAL STANDARDS MAY ON OCCASION HAVE TO BE CONSIDERED IN THE LIGHT OF THEIR POTENTIAL TO BECOME STANDARDS TO WHICH REFERENCE MAY BE MADE IN NATIONAL REGULATIONS.

RECIPIENTS OF THIS DRAFT ARE INVITED TO SUBMIT, WITH THEIR COMMENTS, NOTIFICATION OF ANY RELEVANT PATENT RIGHTS OF WHICH THEY ARE AWARE AND TO PROVIDE SUPPORTING DOCUMENTATION.

Reference number
ISO/DIS 19223-2:2024(en)

© ISO 2024  **Documents**
Document Sharing Hub



COPYRIGHT PROTECTED DOCUMENT

© ISO 2024

All rights reserved. Unless otherwise specified, or required in the context of its implementation, no part of this publication may be reproduced or utilized otherwise in any form or by any means, electronic or mechanical, including photocopying, or posting on the internet or an intranet, without prior written permission. Permission can be requested from either ISO at the address below or ISO's member body in the country of the requester.

ISO copyright office
CP 401 • Ch. de Blandonnet 8
CH-1214 Vernier, Geneva
Phone: +41 22 749 01 11
Email: copyright@iso.org
Website: www.iso.org

Published in Switzerland

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23

Contents

Foreword 4

Introduction..... 5

1 * Scope..... 7

2 Normative references 7

3 * Terms, definitions, symbols, and abbreviated terms 7

3.1 General high-frequency ventilation terminology..... 8

3.2 High-frequency-ventilation equipment terminology 9

3.3 High-frequency-ventilation mode terminology 10

3.4 Pressure terminology..... 13

3.5 Flow and volume terminology..... 13

3.6 Waveform terminology 14

Annex A (informative) Rationales and guidance..... 15

A.1 General guidance 15

A.2 Mental model of ventilation as the basis of this document..... 15

A.3 Guidance followed in the writing of this document..... 15

A.4 Rationales for particular clauses and subclauses 15

Annex B (informative) Classification of ventilation-modes..... 17

Annex C (informative) Illustration of high-frequency ventilation terms..... 19

Annex D (informative) Terminology – Alphabetized list of defined terms 25

Bibliography 24

Foreword

ISO (the International Organization for Standardization) is a worldwide federation of national standards bodies (ISO member bodies). The work of preparing International Standards is normally carried out through ISO technical committees. Each member body interested in a subject for which a technical committee has been established has the right to be represented on that committee. International organizations, governmental and non-governmental, in liaison with ISO, also take part in the work. ISO collaborates closely with the International Electrotechnical Commission (IEC) on all matters of electrotechnical standardization.

The procedures used to develop this document and those intended for its further maintenance are described in the ISO/IEC Directives, Part 1. In particular, the different approval criteria needed for the different types of ISO documents should be noted. This document was drafted in accordance with the editorial rules of the ISO/IEC Directives, Part 2 (see www.iso.org/directives).

Attention is drawn to the possibility that some of the elements of this document may be the subject of patent rights. ISO shall not be held responsible for identifying any or all such patent rights. Details of any patent rights identified during the development of the document will be in the Introduction and/or on the ISO list of patent declarations received (see www.iso.org/patents).

Any trade name used in this document is information given for the convenience of users and does not constitute an endorsement.

For an explanation of the voluntary nature of standards, the meaning of ISO specific terms and expressions related to conformity assessment, as well as information about ISO's adherence to the World Trade Organization (WTO) principles in the Technical Barriers to Trade (TBT) see www.iso.org/iso/foreword.html.

This document was prepared by Technical Committee ISO/TC 121, *Anaesthetic and respiratory equipment*, Subcommittee SC 4, *Vocabulary and semantics*, Working Group WG 2, *High Frequency Ventilation*.

A list of all parts in the ISO 19223 series can be found on the ISO website.

Any feedback or questions on this document should be directed to the user's national standards body. A complete listing of these bodies can be found at www.iso.org/members.html.

Introduction

The characteristics of *ventilation-modes* of current automatic *lung ventilators* are often not well understood. The current terminology used for their description is based on that introduced in the early days of *mechanical ventilation*, but with the advances in *ventilators*, and *ventilation-modes* that have evolved over recent years, the language used has been continuously adapted. In the absence of any effective international coordinating action, this has inevitably led to increasing inconsistencies in the way in which well-established terms and their derivatives are used.

To further compound the difficulties in understanding these complexities, some *ventilator manufacturers* have created new proprietary terms to describe these alternative ways of *ventilating patients*, and others have used existing terms with different meanings in different situations. This has led to *patient* safety hazards, an example being that *lung ventilator* clinical orders (*settings*) for one model of *ventilator* can be quite different from those required to get the same result from a different *ventilator*.

Recognizing these difficulties, ISO Technical Committee ISO/TC 121 requested its Subcommittee, SC 4, to completely review the terminology and semantics for *patient ventilation* with a view to compiling a standardized vocabulary that is applicable to current and, as far as possible, future practice. The primary objective was to use as much existing terminology as possible, while clarifying its meaning and limiting its potential for misuse by defining it more precisely. New terms were only introduced where there was no alternative, either in order to name new concepts or where the misuse of existing vocabulary has become so widespread that the term has become meaningless or unacceptably ambiguous. Importance was placed on a vocabulary that would communicate a clear mental model of how the selected *settings* would determine the interaction between the *patient* and the *ventilator*.

In order to achieve a vocabulary that is coherent, consistent and applicable to a range of fields such as *patient* care, research, data collection and incident reporting, this document has been developed with the participation, cooperation and assistance of members of other standards development organizations, and of major international *ventilator manufacturers*. The applications include *lung ventilators*, medical data systems facilitating clinical care and research, interoperability, incident reporting and equipment maintenance.

The early work by the subcommittee in establishing how a standardized vocabulary should be structured increasingly led to the conclusion that it would be necessary to revert to first principles. It was recognized that much of the current terminology has its origins in the early use of *automatic ventilation*, when the emphasis was inevitably on how best to save the lives of *patients* who could not *breathe* for themselves and, consequently, only made basic provisions for the *patient's* own *respiratory activity*. Since that time, *ventilators* have become increasingly interactive with the *patient*, such that it is now necessary to consider their use from a *ventilator-patient* system perspective because it is no longer possible, with any certainty, to predict ahead of time how that interaction will take place.

The terminology in this document is defined and used in a way that makes it capable of facilitating, unambiguously, both the *setting* of a *ventilator* and how to describe and record the resultant *ventilator-patient* interactions, continuously and at defined points within the course of *ventilation*.

In 2019, ISO Technical Committee ISO/TC 121 sub-committee SC 4 published the first edition of ISO 19223, *Lung ventilators and related equipment—Vocabulary and semantics*. ISO Technical Committee ISO/TC 121 Subcommittee SC 4's Working Group 1 published the fifth edition of ISO 4135, *Anaesthetic and respiratory equipment—Vocabulary* in 2022.

The Subcommittee recognized that these new standards did not adequately address vocabulary and semantics for technologies such as *high-frequency ventilation* or some aspects of respiratory therapy equipment. The Subcommittee resolved to undertake development of these specialized vocabularies as additional parts of ISO 19223. The second edition of ISO 19223, *Lung ventilators and related equipment—Vocabulary and semantics*, would subsequently be published as ISO 19223-1.

In general, the ISO 19223 series is intended to provide a consensus view and the basis for a coherent language for describing *ventilator* function. Now that the fundamental concepts of *artificial ventilation* practice within the scope of this document have matured, it has been possible to review the boundaries between the various concepts of established *ventilation-modes* and the methods of artificially inflating a *patient's lungs* and to formulate definitions that clarify the common elements and the distinctions. In particular, the scopes of several concepts that were appropriate to earlier technology and practice have become inadequate to encompass new developments and it was found necessary to subdivide them. Some of their designating terms have, therefore, had to be deprecated, replaced, or constrained using more restrictive definitions, resulting in an inevitable reintroduction of some little-used legacy terms and the need to create a few new terms.

The overall objective is to encourage a more disciplined use of *ventilator* vocabulary so that *users* trained in the application of this document will be able to move easily from one *ventilator* to another and operate each one, with confidence, after a minimum amount of training. Although it is recognized that change will not be immediate, it is expected that this discipline will feed through into scientific publications, textbooks and training so that, over time, a standardized basic language of *artificial ventilation* will become internationally established.

Included with many of the terms are notes to entry that provide supplementary information, including explanations of the semantics of the term along with their classification schemes. This format is not only a requirement of ISO 704 but, unlike with such information in an annex, ensures that it remains associated with the term when viewed on the free-to-access ISO Online Browsing Platform.

Some of the terms in this document are principally intended for technical documents, informatics and related applications, and might have little applicability to *ventilator* labelling and instructions for use.

ISO 19223 has three parts: ISO 19223-1:— provides vocabulary applicable to conventional rate ventilation and applicable to ventilation generally. ISO 19223-2:— extends the scope of the ISO 19223 series to include high frequency and jet ventilation, and ISO 19223-3:— extends the scope to include respiratory therapy, which were excluded from the scope of the initial publication, ISO 19223:2019.

In this document, the following print types are used:

Definitions: roman type.

Material appearing outside of tables, such as notes, examples and references: smaller type.

Terms defined in Clause 3 of this document, ISO 19223-1:— or as noted, apart from those in the form of acronyms or initialisms or when used in headings or tables: *italic* type.

In this document, the conjunctive “or” is used as an “inclusive or” so a statement is true if any combination of the conditions is true.

The verbal forms used in this document conform to the usage described in ISO/IEC Directives, Part 2, Annex H. For the purposes of this document, the auxiliary verb

— “shall” means that compliance with a requirement or a test is mandatory for compliance with this document,

— “should” means that compliance with a requirement or a test is recommended but is not mandatory for compliance with this document, and

— “may” is used to describe a permissible way to achieve compliance with a requirement or test.

An asterisk (*) as the first character of a title or at the beginning of a paragraph or table title indicates that there is guidance or rationale related to that item in Annex A.

Lung ventilators and related equipment — Vocabulary and semantics – Part 2: High Frequency and Jet Ventilation

1 * Scope

This document establishes a vocabulary of terms and semantics for:

- *high-frequency oscillatory ventilation* (HFOV);
- *percussive ventilation*, including *high-frequency percussive ventilation* (HFPV);
- *jet ventilation*, including *high frequency jet ventilation* (HFJV);
- modes that combine high-frequency and physiological-rate ventilation.

It is applicable

- in *lung ventilator* and *breathing-therapy* device standards,
- in health informatics standards,
- for labelling on *medical electrical equipment* and *medical electrical systems*,
- in *medical electrical equipment* and *medical electrical system* instructions for use and *accompanying documents*,
- for *medical electrical equipment* and *medical electrical systems* interoperability, and
- in electronic health records.

This document is also applicable to those accessories intended by their *manufacturer* to be connected to a *ventilator breathing system* or to a *ventilator*, where the characteristics of those accessories can affect the basic safety or essential performance of the *ventilator* or *ventilator breathing system*.

NOTE This document can also be used for other applications relating to *lung ventilation*, including non-electrical devices and equipment, research, description of critical events, forensic analysis and adverse event (vigilance) reporting systems.

The ISO 19223 series does not specify terms specific to physiologic closed-loop *ventilation* or *negative-pressure ventilation*; nor to respiratory support using liquid *ventilation* or extra-corporeal gas exchange, or oxygen, except where it has been considered necessary to establish boundaries between bordering concepts.

2 Normative references

There are no normative references in this document.

3 * Terms, definitions, symbols, and abbreviated terms

ISO and IEC maintain terminological databases for use in standardization at the following addresses:

- ISO Online browsing platform: available at <https://www.iso.org/obp>
- IEC Electropedia: available at <http://www.electropedia.org/>