

# GLOSSARY<sup>1</sup>

**Caregiver:** One who provides care, often used to describe a person other than a health care professional.

**Case Management:**  
The coordination of patient care or client activities.

**Client:** An individual who is not necessarily sick or injured but who can benefit from a physical therapist's consultation, professional advice, or services. A client also is a business, a school system, or other entity that may benefit from specific recommendations from a physical therapist.

**Clinical Education Experiences:**  
These experiences comprise all of the formal and practical "real-life" learning experiences provided for students to apply classroom knowledge and skills in the clinical environment. Experiences would include those of short and long duration (e.g., part-time, full-time, internships) and those that provide a variety of learning experiences (e.g., rotations on different units within the same practice setting, rotations between different practice settings within the same health care system) to include comprehensive care of patients across the life span and related activities.

**Clinical Indications:**  
The patient factors (e.g., symptoms, impairments, deficits) that suggest that a particular kind of care (examination, intervention) would be appropriate.

**Clinical Instructor (CI):**  
Individual at the clinical education site who directly instructs and supervises students during their clinical learning experiences. CIs are responsible for facilitating clinical learning experiences and assessing students' performance in cognitive, psychomotor, and affective domains as related to entry-level clinical practice and academic and clinical performance expectations.

**Complexity of Tasks/Environment:**  
Multiple requirements of the patient or environment (e.g., simple, complex). The complexity of the environment can be altered by controlling the number and types of elements to be considered in the performance, including patients, equipment, issues, etc. As a student progresses through clinical education experiences, the complexity of tasks/environment should increase, with fewer elements controlled by the CI.

**Consistency:** The frequency of occurrences of desired behaviours related to the performance criterion (e.g., infrequently, occasionally, routinely). As a student progresses through clinical education experiences, consistency of quality is expected to progress from infrequently to routinely.

**Consultation:** The provision, by a physical therapist, of professional opinion or of advice.

**Consumer:** One who acquires, uses, or purchases goods or services; any actual or potential recipient of health care.

**Critical Inquiry:**

The process of applying the principles of scientific methods to read and interpret professional literature, participate in research activities, and analyze patient care outcomes, new concepts, and findings.

**Diagnosis:** Both the process and the end result of the evaluation of information obtained from the patient examination. The physical therapist organizes the evaluation information into defined clusters, syndromes, or categories to determine the most appropriate intervention strategies for each patient.

**Documentation:**

All written forms of communication provided related to the delivery of patient care, to include written correspondence, electronic record keeping, and word processing.

**Education:** Knowledge or skill obtained or developed by a learning process; a process designed to change behaviour by formal instruction and/or supervised practice, which includes teaching, training, information sharing, and specific instructions.

**Efficiency:** The ability to perform in a cost-effective and timely manner (e.g., inefficient/slow, efficient/timely). As the student progresses through clinical education experiences, efficiency should progress from a high expenditure of time and effort to economical and timely.

**Entry-level Performance:**

A physical therapist clinician performing at entry-level utilizes critical thinking to make independent decisions concerning patient needs and provides quality care with simple or complex patients in a variety of clinical environments. The physical therapist clinician at the professional level needs no guidance or supervision except when addressing new or complex problems.

**Evaluation:** A dynamic process in which the physical therapist makes clinical judgments based on data gathered during the examination.

**Examination:**

The process of obtaining a patient history, performing relevant systems reviews, and selecting and administering specific tests and measures.

**Function:** The special, normal, or proper action of any part or organ; an activity identified by an individual as essential to support physical and psychological well-being as well as to create a personal sense of meaningful living; the action specifically for which a person or thing is fitted or employed; an act, process, or series of processes that serve a purpose; to perform an activity or to work properly or normally.

**Functional Limitation:**

A restriction of the ability to perform a physical action, activity, or task in a typically expected, efficient, or competent manner.

**Goal:**

The long-term statement(s) that define the patient's expected level of performance at the end of the rehabilitation process; the functional outcomes of therapy, indicating the amount of independence, supervision, or assistance required and the equipment or environmental adaptation necessary to ensure adequate performance. Desired outcomes may be stated as long-term or short-term as determined by the needs of the patient and the setting.

**Health Care Provider:**

A person or organization offering health services directly to patients or clients.

**Health Promotion:**

Activity designed to develop healthy behaviours in such areas as exercise, diet, avoidance of drug abuse, etc.

**Health Status:**

The level of an individual's physical, mental, affective, and social function: health status is an element of well-being.

**History:**

An account of past and present health status that includes the identification of complaints and provides the initial source of information about the patient. The history also suggests the patient's ability to benefit from physical therapy services.

**Intervention:**

The purposeful and skilled interaction of the physical therapist or physical therapist assistant with the patient or client, using various methods and techniques to produce changes in the condition of the patient or client. Intervention has three components: direct intervention; instruction of the patient or client and family; and coordination, communication, and documentation.

**Novice Clinical Performance:**

A physical therapist student who provides quality care only with uncomplicated patients and a high degree of supervision. Without close supervision, the student's performance and clinical decision-making are inconsistent and require constant monitoring and feedback. This is typically a student who is inexperienced in clinical practice or who performs as though he or she has had limited or no opportunity to apply academic knowledge or clinical skills.

**Objectives:** A measurable behavioural statement of an expected response or outcome; something worked toward or striven for; a statement of direction or desired achievement that guides actions and activities.

**Outcome:** The result of physical therapy management expressed in five areas: prevention and management of symptom manifestation, consequences of disease (impairment, disability, and/or role limitation), cost-benefit analysis, health-related quality of life, and patient satisfaction. A successful outcome includes improved or maintained physical function when possible and slowed decline in function where the status quo cannot be maintained, and is considered meaningful by the patient.

**Outcomes Analysis:**

A systematic examination of patient outcomes in relation to selected patient variables (e.g.: age, gender, diagnosis, interventions performed); outcomes analysis may be used in quality assessment, economic analysis of practice, etc.

**Patient:** An individual who is receiving direct intervention for an impairment, functional limitation, disability, or change in physical function and health status resulting from injury, disease, or other causes; an individual receiving health care services.

**Physical Function:**

Fundamental components of health status describing the state of those sensory and motor skills necessary for mobility, work, and recreation.

**Physical Therapist:**

A licensed health care professional who offers services designed to preserve, develop, and restore maximum physical function.

**Physical Therapist Assistant:**

An educated health care provider who performs physical therapy procedures and related tasks that have been selected and delegated by the supervising physical therapist.

**Plan of Care:** A plan that specifies: long-term and short-term outcome/goal; predicted level of maximal improvement; specific interventions to be used; duration and frequency of the intervention required to reach the outcome/goal; and criteria for discharge.

**Presenting Problem:**

The specific dysfunction that causes an individual to seek attention or intervention (i.e., chief complaint).

**Prevention:** Activities concerned with slowing or stopping the occurrence of both mental and physical illness and disease; minimizing the effects of a disease or impairment on disability; reducing the severity or duration of an illness. *Primary:* Preventing the development of disease in a susceptible or potentially susceptible population through specific measures such as immunization and through general health promotion efforts. *Secondary:* Seeking to shorten the duration of illness, reduce severity of diseases, decrease the possibility of contagion, and limit sequelae through early diagnosis and prompt therapy. *Tertiary:* Attempting to limit the degree of disability and promoting rehabilitation and restoration of patients with chronic and irreversible diseases.

**Prognosis:** The determination of the level of maximal improvement that might be attained by the patient and the amount of time needed to reach that level.

**Quality:** The degree of skill or competence demonstrated (e.g.: limited skill, high skill), the relative effectiveness of the performance (e.g.: ineffective, highly effective), and the extent to which outcomes meet the desired goals. A continuum of quality might range from demonstration of limited skill and effectiveness to a highly skilled and highly effective performance.

**Role:** A behaviour pattern that defines a person's social obligations and relationships with others (e.g.: father, husband, son).

**Screening:** Determining the need for further examination or consultation by a physical therapist or for referral to another health care professional. *Cognitive screening:* briefly assessing a patient's thinking process (e.g.: ability to process commands).

**Supervision/Guidance Required:**

Level and extent of assistance required by the student to achieve clinical performance at entry-level. As a student progresses through clinical education experiences, the degree of monitoring needed is expected to progress from full-time monitoring/direct supervision or cuing for assistance to initiate, to independent performance with consultation. The degree of supervision and guidance may vary with the complexity of the patient or environment.

**Technically Competent:**

Correct performance of a skill.

**Tests and Measures:**

General methods and techniques used to conduct an examination.

**Treatment:** One or more interventions used to ameliorate impairments, functional limitations, or disability, or otherwise produce changes in the health status of the patient; the sum of all interventions provided by the physical therapist to a patient during an episode of care.

**Visual Analog Scale (VAS):**

A scale used to measure any variable that allows the patient to indicate a degree of that variable by pointing to a visual representation of its intensity. In the case of this clinical performance instrument, the VAS represents the line or continuum of performance, ranging from “novice student clinical performance” to “entry-level clinical performance.”

**Wellness:** A concept that embraces a proactive, positive approach to good health. Wellness advocates seek to increase a person’s level of health as a preventive measure to guard against future disease or pathology.