What Is the Guide?

The *Guide to Physical Therapist Practice* (the Guide) is a resource that is intended to:

- Describe generally accepted physical therapist practice,
- Standardize terminology, and
- Delineate preferred practice patterns.

The Guide was developed by the American Physical Therapy Association and expert clinicians through a consensus process, and is divided into two parts.

Part I describes the elements of patient/client management and explains the tests and measures and interventions performed by therapists. Part II consists of the Preferred Practice Patterns grouped into four system areas: musculoskeletal, neuromuscular, cardiopulmonary, and integumentary. The practice patterns describe common sets of management strategies used by physical therapists for selected patient/client groups and identify the range of current options for care. How these two parts relate to your practice are further explored later in this document.

The Guide is based on the process of enablement and the integration of prevention and wellness strategies. The Guide is an evolving document that will be systematically revised as the knowledge base of physical therapy, scientific literature, and outcomes research develop and as examination and intervention strategies change.

The Guide is designed to help physical therapists:

- Enhance quality of care,
- Improve patient/client satisfaction,
- Promote appropriate utilization of health care services,
- Increase efficiency and reduce unwarranted variation in provision of services, and
- Promote cost reduction through prevention and wellness initiatives.

What Is Patient/Client Management?

Five elements of care define patient/client management within physical therapist practice:

1. **Examination**: A process of obtaining a history, performing relevant systems review, and selecting and administering specific tests and measures.
2. **Evaluation**: A dynamic process in which the physical therapist makes clinical judgments based on data gathered during the examination.
3. **Diagnosis**: A label encompassing a cluster of signs related to impairments of the four systems of the body (musculoskeletal, neuromuscular, cardiopulmonary, and integumentary).
4. **Prognosis**: The predicted optimal level of functional improvement, recommendation for amount of service, and establishment of a plan of care.
5. **Intervention**: Purposeful and skilled interaction with the patient/client, including coordination, communication, documentation, patient/client-related instruction, and procedural interventions.
How Do Practice Patterns Relate to Pediatric Conditions?
A child with a particular medical condition may have a physical therapy diagnosis of one or more practice patterns. Some practice patterns, such as Neuromuscular Patterns 5B (impaired neuromotor development) and 5C (nonprogressive CNS disorders–child), are specific to pediatrics, whereas many other patterns, such as Musculoskeletal Pattern 4C (impaired muscle performance) and Cardiopulmonary Pattern 6B (deconditioning) occur throughout the lifespan.

Why Is the Guide Important to Pediatric Practice?
The Guide provides a framework for clinical decision making in physical therapy. To provide high-quality pediatric physical therapy services, therapists need to consider the Guide; other documents, such as federal and state legislation; practice setting; and research-based evidence for practice decisions.

In collaboration with the child, family, and other health and educational team members, therapists make decisions regarding the examination, evaluation, diagnosis, prognosis, and intervention, as well as the intensity of service delivery, outcomes, and criteria for discharge.

How Does Guide Terminology Apply to Pediatrics?
Guide terminology has specific applications to pediatric physical therapy, as outlined below.

**History**
The Guide defines history as interviewing and reviewing medical records. These may include:
- Past medical history
- Current health status
- Social history
- Identification of patient expectations and desired outcomes

In pediatric physical therapy, the interview is a central component of the examination and promotes family-centered care. Therapists interview the child, family, and other professionals, and cover the following key topics:
- Child, family, and team outcomes
- Child/family activities and hobbies
- Amount of previous therapy, progress, current therapy
- Medications, surgeries
- Child/family attitudes and knowledge related to the diagnosis

**Systems Review**
The Guide defines systems review as screening for:
- General health of patient
- Identification of possible health problems requiring consultation and/or referral to other providers
- Physiologic status of musculoskeletal, neuromuscular, cardiopulmonary, and integumentary conditions
- May include ability to communicate, affect, cognition, language, and learning style
In pediatric physical therapy, therapists consider a review of the various developmental domains that influence a child’s function. These may include cognition; language and communication; social/emotional development; adaptive function; physical development, including vision and hearing; and play.

Tests and Measures
In the Guide, tests and measures are used to gather specific information on the patient/client.
- The Guide provides a catalog of tests and measures in 24 categories, ranging from aerobic capacity to gait and balance to neuromotor development
- During the examination, assessment is defined as the measurement or quantification of a variable or placement of a value on a behavior

Pediatric therapists can use the Guide’s information on tests and measures to select the most appropriate tool to gather information on the child’s participation in the home, school, and community; ability to perform activities; and body structure and functional status. The term “assessment” in early intervention and school settings refers to an ongoing process of collecting information to guide intervention planning.

Plan of Care
In the Guide, the plan of care is used to determine goals, outcomes, specific intervention strategies, duration and frequency of intervention, and criteria for discharge. Outcomes may include minimization of functional limitations and disability, optimization of health status, prevention of disability, and optimization of patient/client satisfaction.

When pediatric physical therapists practice in early intervention and school settings, their plan of care is driven by the child’s Individualized Family Service Plan or Education Program. The Guide’s terminology for outcomes is consistent with the spirit of family-identified outcomes in early intervention, as well as functional goals and objectives for children in educational settings.

Intervention
Intervention includes coordination, communication, and documentation; patient/client-related instruction; and procedural intervention.

Coordination, communication, and documentation means providing services to ensure comprehensive and cost-effective care and efficient integration to home and community.

In pediatric settings, this component of intervention emphasizes the critical role of collaboration, consultation, and case management. Consideration is given to what health professional, educational, or community referrals are needed for the child.

Patient/client-related instruction is providing education on current condition, resources, plan of care, and future transitions.

In pediatric settings, this aspect of intervention is a reciprocal sharing of information among the therapist, child, and family. It recognizes the importance of self-determination for the child. Home or school activity programs are developed within the context of daily routines and activities.

Procedural intervention is used to determine core interventions, including therapeutic exercise and functional training.
The Guide's list of interventions provides the scope of procedures that are appropriate for a given practice pattern.

How Can I Order a Copy of the Guide?

To order the Guide to Physical Therapist Practice, contact the Service Center at the American Physical Therapy Association at 800/999-2782, ext 3395, or visit APTA's Web site at www.apta.org.

For More Information

If you have additional questions, would like to order additional copies of this fact sheet, or would like to join the Section on Pediatrics, please contact the Executive Office of the Section on Pediatrics of the American Physical Therapy Association at:

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