

## **Pattern 4A: Primary Prevention/Risk Reduction for Skeletal Demineralization**

### **Inclusion**

The following examples of examination findings may support the inclusion of clients in this pattern:

#### **Risk Factors or Consequences of Pathology/Pathophysiology (Disease, Disorder, or Condition)**

- Chronic cardiovascular/pulmonary dysfunction
- Deconditioning
- Hormonal changes
- Hysterectomy
- Medications (eg, anti-epileptic medications, steroids, thyroid hormone)
- Menopause
- Nutritional deficiency
- Paget disease
- Prolonged non-weight-bearing state

#### **Impairments of Body Functions and Structures, Activity Limitations, or Participation Restrictions**

- Inability to ambulate
- Joint immobilization associated with inactivity
- Prolonged muscle weakness or paralysis

### **Examination**

Read [Physical Therapist Examination and Evaluation: Focus on Tests and Measures](#).

#### **Tests and Measures for Pattern 4A**

Tests and measures for this pattern may include those that characterize or quantify:

- [Aerobic Capacity/Endurance](#)
- [Anthropometric Characteristics](#)
- [Balance](#)
- [Community, Social, and Civic Life](#)

- Education Life
- Environmental Factors
- Gait
- Mental Functions
- Mobility (including locomotion)
- Motor Function
- Muscle Performance (Including Strength, Power, Endurance, and Length)
- Posture
- Range of Motion
- Self-Care and Domestic Life
- Skeletal Integrity
- Work Life

## **Evaluation, Diagnosis, Prognosis (Including Plan of Care)**

Read **Principles of Physical Therapist Patient and Client Management**.

Factors That May Require New Episode of Care or That May Modify Frequency of Visits/Duration of Care:

- Accessibility and availability of resources
- Adherence to the intervention program
- Age
- Anatomical and physiological changes related to growth and development
- Caregiver consistency or expertise
- Chronicity or severity of the current condition
- Comorbidities, complications, or secondary impairments
- Concurrent medical, surgical, and therapeutic interventions
- Level of impairment of body functions and structures
- Level of independence in activity and participation
- Living environment
- Mental status
- Multisite or multisystem involvement
- Nutritional status
- Overall health status
- Potential destinations at conclusion of care
- Premorbid conditions
- Probability of prolonged impairment of body functions and structures and probability of activity limitations and participation restrictions
- Psychological and socioeconomic factors
- Psychomotor abilities
- Social support
- Stability of the condition

## **Intervention**

Read **Intervention**.

The categories of interventions for this pattern are:

- Patient or Client Instruction
- Functional Training in Self-Care and in Domestic, Education, Work, Community, Social, and Civic Life
- Motor Function Training
- Therapeutic Exercise

## **Reexamination**

Read **Physical Therapist Examination and Evaluation: Focus on Tests and Measures**.

## **Outcomes for Patients or Clients**

Read **Measurement and Outcomes**.

## **Concluding an Episode of Care**

Read “Criteria for Concluding an Episode of Care” under **Intervention**.

## **Pattern 4B: Impaired Posture**

### **Inclusion**

The following examples of examination findings may support the inclusion of clients in this pattern:

#### **Risk Factors or Consequences of Pathology/Pathophysiology (Disease, Disorder, or Condition)**

- Congenital torticollis
- Pain
- Pregnancy
- Repetitive stress syndrome
- Scheuermann disease
- Scoliosis, kyphoscoliosis

#### **Impairments of Body Functions and Structures, Activity Limitations, or Participation Restrictions**

- Impaired joint mobility
- Inability to tolerate prolonged sitting
- Leg length discrepancy
- Muscle imbalance
- Muscle weakness

### **Exclusion or Multiple-Pattern Classification**

The following examples of examination findings may support exclusion from this pattern or classification into additional patterns. Depending on the level of severity or complexity of the examination findings, the physical therapist may determine that the patient/client would be more appropriately managed through (1) classification in an entirely different pattern or (2) classification in both this and another pattern.

#### **Findings That May Require Classification in a Different Pattern**

- Impairments associated with chronic obstructive pulmonary disease with kyphosis
- Impairments associated with spinal stabilization surgery
- Radicular signs

## **Findings That May Require Classification in Additional Patterns**

- Impairments associated with scoliosis, with contusion of the thigh

## **Examination**

Read **Physical Therapist Examination and Evaluation: Focus on Tests and Measures**.

### **Tests and Measures for Pattern 4B**

Tests and measures for this pattern may include those that characterize or quantify:

- Anthropometric Characteristics
- Assistive Technology
- Balance
- Community, Social, and Civic Life
- Education Life
- Gait
- Mobility (Including Locomotion)
- Motor Function
- Muscle Performance (Including Strength, Power, Endurance, and Length)
- Pain
- Posture
- Range of Motion
- Self-Care and Domestic Life
- Sensory Integrity
- Skeletal Integrity
- Ventilation and Respiration
- Work Life

## **Evaluation, Diagnosis, Prognosis (Including Plan of Care)**

Read **Principles of Physical Therapist Patient and Client Management**.

Factors That May Require New Episode of Care or That May Modify Frequency of Visits/Duration of Care:

- Accessibility and availability of resources
- Adherence to the intervention program

- Age
- Anatomical and physiological changes related to growth and development
- Caregiver consistency or expertise
- Chronicity or severity of the current condition
- Comorbidities, complications, or secondary impairments
- Concurrent medical, surgical, and therapeutic interventions
- Level of impairment of body functions and structures
- Level of independence in activity and participation
- Living environment
- Mental status
- Multisite or multisystem involvement
- Nutritional status
- Overall health status
- Potential destinations at conclusion of care
- Premorbid conditions
- Probability of prolonged impairment of body functions and structures and probability of activity limitations and participation restrictions
- Psychological and socioeconomic factors
- Psychomotor abilities
- Social support
- Stability of the condition

## **Intervention**

Read **Intervention**.

The categories of interventions for this pattern are:

- **Patient or Client Instruction**
- **Biophysical Agents**
- **Functional Training in Self-Care and in Domestic, Education, Work, Community, Social, and Civic Life**
- **Manual Therapy Techniques**
- **Motor Function Training**
- **Therapeutic Exercise**

## **Reexamination**

Read **Physical Therapist Examination and Evaluation: Focus on Tests and Measures**.

## **Outcomes for Patients or Clients**

Read **Measurement and Outcomes**.

## **Concluding an Episode of Care**

Read “Criteria for Concluding an Episode of Care” under **Intervention**.

## Pattern 4C: Impaired Muscle Performance

### **Inclusion**

The following examples of examination findings may support the inclusion of clients in this pattern:

### **Risk Factors or Consequences of Pathology/Pathophysiology (Disease, Disorder, or Condition)**

- Acquired immune deficiency syndrome
- Chronic musculoskeletal dysfunction
- Chronic neuromuscular dysfunction
- Diabetes
- Down syndrome
- Pelvic floor dysfunction
- Renal disease
- Vascular insufficiency

### **Impairments of Body Functions and Structures, Activity Limitations, or Participation Restrictions**

- Decreased functional work capacity
- Decreased nerve conduction
- Diastasis recti
- Inability to climb stairs
- Inability to perform repetitive work tasks
- Loss of muscle strength, power, endurance
- Stress urinary incontinence

## **Exclusion or Multiple-Pattern Classification**

The following examples of examination findings may support exclusion from this pattern or classification into additional patterns. Depending on the level of severity or complexity of the examination findings, the physical therapist may determine that the patient/client would be more appropriately managed through (1) classification in an entirely different pattern or (2) classification in both this and another pattern.

### **Findings That May Require Classification in a Different Pattern**

- Fracture
- Impairments associated with amputation
- Impairments associated with primary capsular restriction
- Impairments associated with primary joint arthroplasty
- Impairments associated with primary localized inflammation
- Muscular pain due to cesarean delivery
- Recent bony surgery

### **Findings That May Require Classification in Additional Patterns**

- Post-polio syndrome with bursitis

## **Examination**

Read **Physical Therapist Examination and Evaluation: Focus on Tests and Measures**.

### **Tests and Measures for Pattern 4C**

Tests and measures for this pattern may include those that characterize or quantify:

- [Aerobic Capacity/Endurance](#)
- [Anthropometric Characteristics](#)
- [Assistive Technology](#)
- [Balance](#)
- [Community, Social, and Civic Life](#)
- [Cranial and Peripheral Nerve Integrity](#)
- [Education Life](#)
- [Environmental Factors](#)
- [Gait](#)
- [Mobility \(Including Locomotion\)](#)
- [Motor Function](#)
- [Muscle Performance \(Including Strength, Power, Endurance, and Length\)](#)
- [Pain](#)

- Posture
- Range of Motion
- Reflex Integrity
- Self-Care and Domestic Life
- Sensory Integrity
- Skeletal Integrity
- Ventilation and Respiration
- Work Life

## **Evaluation, Diagnosis, Prognosis (Including Plan of Care)**

Read **Principles of Physical Therapist Patient and Client Management**.

Factors That May Require New Episode of Care or That May Modify Frequency of Visits/Duration of Care:

- Accessibility and availability of resources
- Adherence to the intervention program
- Age
- Anatomical and physiological changes related to growth and development
- Caregiver consistency or expertise
- Chronicity or severity of the current condition
- Comorbidities, complications, or secondary impairments
- Concurrent medical, surgical, and therapeutic interventions
- Level of impairment of body functions and structures
- Level of independence in activity and participation
- Living environment
- Mental status
- Multisite or multisystem involvement
- Nutritional status
- Overall health status
- Potential destinations at conclusion of care
- Premorbid conditions
- Probability of prolonged impairment of body functions and structures and probability of activity limitations and participation restrictions
- Psychological and socioeconomic factors
- Psychomotor abilities
- Social support
- Stability of the condition

## **Intervention**

Read **Intervention**.

The categories of interventions for this pattern are:

- Patient or Client Instruction
- Biophysical Agents
- Functional Training in Self-Care and in Domestic, Education, Work, Community, Social, and Civic Life
- Manual Therapy Techniques
- Motor Function Training
- Therapeutic Exercise

## **Reexamination**

Read **Physical Therapist Examination and Evaluation: Focus on Tests and Measures**.

## **Outcomes for Patients or Clients**

Read **Measurement and Outcomes**.

## **Concluding an Episode of Care**

Read “Criteria for Concluding an Episode of Care” under **Intervention**.

## **Pattern 4D: Impaired Joint Mobility, Motor Function, Muscle Performance, and Range of Motion Associated With Connective Tissue Dysfunction**

### **Inclusion**

The following examples of examination findings may support the inclusion of clients in this pattern:

#### **Risk Factors or Consequences of Pathology/Pathophysiology (Disease, Disorder, or Condition)**

- Joint subluxation or dislocation
- Ligamentous sprain
- Musculotendinous strain
- Pregnancy
- Prolonged joint immobilization
- Rheumatoid arthritis
- Scleroderma
- Systemic lupus erythematosus
- Temporomandibular joint syndrome

#### **Impairments of Body Functions and Structures, Activity Limitations, or Participation Restrictions**

- Decreased range of motion
- Inability to squat due to joint instability
- Muscle guarding or weakness
- Pain
- Postpartum sacroiliac dysfunction
- Swelling or effusion

## **Exclusion or Multiple-Pattern Classification**

The following examples of examination findings may support exclusion from this pattern or classification into additional patterns. Depending on the level of severity or complexity of the examination findings, the physical therapist may determine that the patient/client would be more appropriately managed through (1) classification in an entirely different pattern or (2) classification in both this and another pattern.

### **Findings That May Require Classification in a Different Pattern**

- Fracture
- Immobility as a primary result of prolonged bed rest
- Lack of voluntary movement
- Radiculopathy

### **Findings That May Require Classification in Additional Patterns**

- Abrasion or wound

## **Examination**

Read **Physical Therapist Examination and Evaluation: Focus on Tests and Measures**.

### **Tests and Measures for Pattern 4D**

Tests and measures for this pattern may include those that characterize or quantify:

- Anthropometric Characteristics
- Assistive Technology
- Balance
- Community, Social, and Civic Life
- Cranial and Peripheral Nerve Integrity
- Education Life
- Environmental Factors
- Gait
- Joint Integrity and Mobility
- Mobility (Including Locomotion)
- Motor Function
- Muscle Performance (Including Strength, Power, Endurance, and Length)
- Pain
- Posture

- Range of Motion
- Reflex Integrity
- Self-Care and Domestic Life
- Sensory Integrity
- Skeletal Integrity
- Ventilation and Respiration
- Work Life

## **Evaluation, Diagnosis, Prognosis (Including Plan of Care)**

Read **Principles of Physical Therapist Patient and Client Management**.

Factors That May Require New Episode of Care or That May Modify Frequency of Visits/Duration of Care:

- Accessibility and availability of resources
- Adherence to the intervention program
- Age
- Anatomical and physiological changes related to growth and development
- Caregiver consistency or expertise
- Chronicity or severity of the current condition
- Comorbidities, complications, or secondary impairments
- Concurrent medical, surgical, and therapeutic interventions
- Level of impairment of body functions and structures
- Level of independence in activity and participation
- Living environment
- Mental status
- Multisite or multisystem involvement
- Nutritional status
- Overall health status
- Potential destinations at conclusion of care
- Premorbid conditions
- Probability of prolonged impairment of body functions and structures and probability of activity limitations and participation restrictions
- Psychological and socioeconomic factors
- Psychomotor abilities
- Social support
- Stability of the condition

## **Intervention**

Read **Intervention**.

The categories of interventions for this pattern are:

- Patient or Client Instruction
- Biophysical Agents
- Functional Training in Self-Care and in Domestic, Education, Work, Community, Social, and Civic Life
- Manual Therapy Techniques
- Motor Function Training
- Therapeutic Exercise

## **Reexamination**

Read **Physical Therapist Examination and Evaluation: Focus on Tests and Measures**.

## **Outcomes for Patients or Clients**

Read **Measurement and Outcomes**.

## **Concluding an Episode of Care**

Read “Criteria for Concluding an Episode of Care” under **Intervention**.

## **Pattern 4E: Impaired Joint Mobility, Motor Function, Muscle Performance, and Range of Motion Associated With Localized Inflammation**

### **Inclusion**

The following examples of examination findings may support the inclusion of clients in this pattern:

#### **Risk Factors or Consequences of Pathology/Pathophysiology (Disease, Disorder, or Condition)**

- Abnormal response to provocation
- Ankylosing spondylitis
- Bursitis
- Capsulitis
- Epicondylitis
- Fasciitis
- Gout
- Osteoarthritis
- Prenatal and postnatal soft tissue inflammation
- Synovitis
- Tendinitis

#### **Impairments of Body Functions and Structures, Activity Limitations, or Participation Restrictions**

- Edema
- Inability to perform self-care
- Inflammation of periarticular connective tissue
- Muscle strain
- Muscle weakness
- Pain
- Worker's activity limitation and participation restriction because of localized joint pain

## **Exclusion or Multiple-Pattern Classification**

The following examples of examination findings may support exclusion from this pattern or classification into additional patterns. Depending on the level of severity or complexity of the examination findings, the physical therapist may determine that the patient/client would be more appropriately managed through (1) classification in an entirely different pattern or (2) classification in both this and another pattern.

### **Findings That May Require Classification in a Different Pattern**

- Deep vein thrombosis
- Fracture
- Impairments associated with dislocation
- Impairments associated with hemarthrosis
- Surgery

### **Findings That May Require Classification in Additional Patterns**

- Open wound

## **Examination**

Read **Physical Therapist Examination and Evaluation: Focus on Tests and Measures**.

### **Tests and Measures for Pattern 4E**

Tests and measures for this pattern may include those that characterize or quantify:

- [Aerobic Capacity/Endurance](#)
- [Anthropometric Characteristics](#)
- [Assistive Technology](#)
- [Balance](#)
- [Community, Social, and Civic Life](#)
- [Cranial and Peripheral Nerve Integrity](#)
- [Education Life](#)
- [Environmental Factors](#)
- [Gait](#)
- [Integumentary Integrity](#)
- [Joint Integrity and Mobility](#)
- [Mobility \(Including Locomotion\)](#)
- [Motor Function](#)

- Muscle Performance (Including Strength, Power, Endurance, and Length)
- Pain
- Posture
- Range of Motion
- Reflex Integrity
- Self-Care and Domestic Life
- Sensory Integrity
- Skeletal Integrity
- Ventilation and Respiration
- Work Life

## **Evaluation, Diagnosis, Prognosis (Including Plan of Care)**

Read **Principles of Physical Therapist Patient and Client Management**.

Factors That May Require New Episode of Care or That May Modify Frequency of Visits/Duration of Care:

- Accessibility and availability of resources
- Adherence to the intervention program
- Age
- Anatomical and physiological changes related to growth and development
- Caregiver consistency or expertise
- Chronicity or severity of the current condition
- Comorbidities, complications, or secondary impairments
- Concurrent medical, surgical, and therapeutic interventions
- Level of impairment of body functions and structures
- Level of independence in activity and participation
- Living environment
- Mental status
- Multisite or multisystem involvement
- Nutritional status
- Overall health status
- Potential destinations at conclusion of care
- Premorbid conditions
- Probability of prolonged impairment of body functions and structures and probability of activity limitations and participation restrictions
- Psychological and socioeconomic factors
- Psychomotor abilities
- Social support
- Stability of the condition

## **Intervention**

Read **Intervention**.

The categories of interventions for this pattern are listed alphabetically, with patient or client instruction first:

- Patient or Client Instruction
- Biophysical Agents
- Functional Training in Self-Care and in Domestic, Education, Work, Community, Social, and Civic Life
- Manual Therapy Techniques
- Motor Function Training
- Therapeutic Exercise

## **Reexamination**

Read **Physical Therapist Examination and Evaluation: Focus on Tests and Measures**.

## **Outcomes for Patients or Clients**

Read **Measurement and Outcomes**.

## **Concluding an Episode of Care**

Read “Criteria for Concluding an Episode of Care” under **Intervention**.

## **Pattern 4F: Impaired Joint Mobility, Motor Function, Muscle Performance, Range of Motion, and Reflex Integrity Associated With Spinal Disorders**

### **Inclusion**

The following examples of examination findings may support the inclusion of clients in this pattern:

#### **Risk Factors or Consequences of Pathology/Pathophysiology (Disease, Disorder, or Condition)**

- Degenerative disk disease
- Disk herniations
- History of spinal surgery
- Spinal stenosis
- Spondylolisthesis

#### **Impairments of Body Functions and Structures, Activity Limitations, or Participation Restrictions**

- Abnormal neural tension
- Altered sensation
- Decreased deep tendon reflex
- Inability to perform lifting tasks
- Inability to perform self-care independently
- Inability to sit for prolonged periods
- Muscle weakness
- Pain with forward bending

## **Exclusion or Multiple-Pattern Classification**

The following examples of examination findings may support exclusion from this pattern or classification into additional patterns. Depending on the level of severity or complexity of the examination findings, the physical therapist may determine that the patient/client would be more appropriately managed through (1) classification in an entirely different pattern or (2) classification in both this and another pattern.

### **Findings That May Require Classification in a Different Pattern**

- Fracture
- Impairments associated with systemic conditions (eg, ankylosing spondylitis, Scheuermann disease, juvenile rheumatoid arthritis)
- Impairments associated with traumatic spinal cord injury

### **Findings That May Require Classification in Additional Patterns**

- Neuromuscular disease

## **Examination**

Read [Physical Therapist Examination and Evaluation: Focus on Tests and Measures](#).

### **Tests and Measures for Pattern 4F**

Tests and measures for this pattern may include those that characterize or quantify:

- [Aerobic Capacity/Endurance](#)
- [Anthropometric Characteristics](#)
- [Assistive Technology](#)
- [Balance](#)
- [Community, Social, and Civic Life](#)
- [Cranial and Peripheral Nerve Integrity](#)
- [Education Life](#)
- [Environmental Factors](#)
- [Gait](#)
- [Joint Integrity and Mobility](#)
- [Mobility \(Including Locomotion\)](#)
- [Motor Function](#)
- [Muscle Performance \(Including Strength, Power, Endurance, and Length\)](#)
- [Pain](#)
- [Posture](#)

- Range of Motion
- Reflex Integrity
- Self-Care and Domestic Life
- Sensory Integrity
- Skeletal Integrity
- Work Life

## **Evaluation, Diagnosis, Prognosis (Including Plan of Care)**

Read **Principles of Physical Therapist Patient and Client Management**.

Factors That May Require New Episode of Care or That May Modify Frequency of Visits/Duration of Care:

- Accessibility and availability of resources
- Adherence to the intervention program
- Age
- Anatomical and physiological changes related to growth and development
- Caregiver consistency or expertise
- Chronicity or severity of the current condition
- Comorbidities, complications, or secondary impairments
- Concurrent medical, surgical, and therapeutic interventions
- Level of impairment of body functions and structures
- Level of independence in activity and participation
- Living environment
- Mental status
- Multisite or multisystem involvement
- Nutritional status
- Overall health status
- Potential destinations at conclusion of care
- Premorbid conditions
- Probability of prolonged impairment of body functions and structures and probability of activity limitations and participation restrictions
- Psychological and socioeconomic factors
- Psychomotor abilities
- Social support
- Stability of the condition

## **Intervention**

Read **Intervention**.

The categories of interventions for this pattern are:

- Patient or Client Instruction
- Biophysical Agents
- Functional Training in Self-Care and in Domestic, Education, Work, Community, Social, and Civic Life
- Manual Therapy Techniques
- Motor Function Training
- Therapeutic Exercise

## **Reexamination**

Read **Physical Therapist Examination and Evaluation: Focus on Tests and Measures**.

## **Outcomes for Patients or Clients**

Read **Measurement and Outcomes**.

## **Concluding an Episode of Care**

Read “Criteria for Concluding an Episode of Care” under **Intervention**.

## **Pattern 4G: Impaired Joint Mobility, Muscle Performance, and Range of Motion Associated With Fracture**

### **Inclusion**

The following examples of examination findings may support the inclusion of clients in this pattern:

#### **Risk Factors or Consequences of Pathology/Pathophysiology (Disease, Disorder, or Condition)**

- Bone demineralization
- Hormonal changes
- Medications (eg, anti-epileptic medications, steroids, thyroid hormone)
- Menopause
- Nutritional deficiency
- Prolonged non-weight-bearing state
- Trauma

#### **Impairments of Body Functions and Structures, Activity Limitations, or Participation Restrictions**

- Inability to access community
- Limited range of motion
- Muscle weakness from immobilization
- Pain with functional movements and activities

## **Exclusion or Multiple-Pattern Classification**

The following examples of examination findings may support exclusion from this pattern or classification into additional patterns. Depending on the level of severity or complexity of the examination findings, the physical therapist may determine that the patient/client could be more appropriately managed through (1) classification in an entirely different pattern or (2) classification in both this and another pattern.

### **Findings That May Require Classification in a Different Pattern**

- Flail chest

### **Findings That May Require Classification in Additional Patterns**

- Osteogenesis imperfecta

## **Examination**

Read [Physical Therapist Examination and Evaluation: Focus on Tests and Measures](#).

### **Tests and Measures for Pattern 4G**

Tests and measures for this pattern may include those that characterize or quantify:

- [Aerobic Capacity/Endurance](#)
- [Anthropometric Characteristics](#)
- [Assistive Technology](#)
- [Balance](#)
- [Community, Social, and Civic Life](#)
- [Cranial and Peripheral Nerve Integrity](#)
- [Education Life](#)
- [Environmental Factors](#)
- [Gait](#)
- [Integumentary Integrity](#)
- [Joint Integrity and Mobility](#)
- [Mobility \(Including Locomotion\)](#)
- [Motor Function](#)
- [Muscle Performance \(Including Strength, Power, Endurance, and Length\)](#)
- [Pain](#)
- [Posture](#)
- [Range of Motion](#)

- Self-Care and Domestic Life
- Sensory Integrity
- Skeletal Integrity
- Ventilation and Respiration
- Work Life

## **Evaluation, Diagnosis, Prognosis (Including Plan of Care)**

Read **Principles of Physical Therapist Patient and Client Management**.

Factors That May Require New Episode of Care or That May Modify Frequency of Visits/Duration of Care:

- Accessibility and availability of resources
- Adherence to the intervention program
- Age
- Anatomical and physiological changes related to growth and development
- Caregiver consistency or expertise
- Chronicity or severity of the current condition
- Comorbidities, complications, or secondary impairments
- Concurrent medical, surgical, and therapeutic interventions
- Level of impairment of body functions and structures
- Level of independence in activity and participation
- Living environment
- Mental status
- Multisite or multisystem involvement
- Nutritional status
- Overall health status
- Potential destinations at conclusion of care
- Premorbid conditions
- Probability of prolonged impairment of body functions and structures and probability of activity limitations and participation restrictions
- Psychological and socioeconomic factors
- Psychomotor abilities
- Social support
- Stability of the condition

## **Intervention**

Read **Intervention**.

The categories of interventions for this pattern are listed alphabetically, with patient or client instruction first:

- Patient or Client Instruction
- Biophysical Agents
- Functional Training in Self-Care and in Domestic, Education, Work, Community, Social, and Civic Life
- Manual Therapy Techniques
- Motor Function Training
- Therapeutic Exercise

## **Reexamination**

Read **Physical Therapist Examination and Evaluation: Focus on Tests and Measures**.

## **Outcomes for Patients or Clients**

Read **Measurement and Outcomes**.

## **Concluding an Episode of Care**

Read “Criteria for Concluding an Episode of Care” under **Intervention**.

## **Pattern 4H: Impaired Joint Mobility, Motor Function, Muscle Performance, and Range of Motion Associated With Joint Arthroplasty**

### **Inclusion**

The following examples of examination findings may support the inclusion of clients in this pattern:

#### **Risk Factors or Consequences of Pathology/Pathophysiology (Disease, Disorder, or Condition)**

- Ankylosing spondylitis
- Arthroplasties
- Avascular necrosis due to steroid use
- Juvenile rheumatoid arthritis
- Neoplasms of the bone
- Osteoarthritis
- Rheumatoid arthritis
- Trauma

#### **Impairments of Body Functions and Structures, Activity Limitations, or Participation Restrictions**

- Decreased range of motion
- Inability to access transportation
- Inability to dress
- Muscle guarding
- Muscle weakness
- Pain

### **Exclusion or Multiple-Pattern Classification**

The following examples of examination findings may support exclusion from this pattern or classification into additional patterns. Depending on the level of severity or complexity of the examination findings, the physical therapist may determine that the patient/client would be more appropriately managed through (1) classification in an entirely different pattern or (2) classification in both this and another pattern.

### **Findings That May Require Classification in a Different Pattern**

- Impairments associated with multisite trauma

### **Findings That May Require Classification in Additional Patterns**

- Rheumatoid arthritis with deconditioning

## **Examination**

Read [Physical Therapist Examination and Evaluation: Focus on Tests and Measures](#).

### **Tests and Measures for Pattern 4H**

Tests and measures for this pattern may include those that characterize or quantify:

- [Aerobic Capacity/Endurance](#)
- [Anthropometric Characteristics](#)
- [Assistive Technology](#)
- [Balance](#)
- [Community, Social, and Civic Life](#)
- [Cranial and Peripheral Nerve Integrity](#)
- [Education Life](#)
- [Environmental Factors](#)
- [Gait](#)
- [Integumentary Integrity](#)
- [Mobility \(Including Locomotion\)](#)
- [Motor Function](#)
- [Muscle Performance \(Including Strength, Power, Endurance, and Length\)](#)
- [Pain](#)
- [Posture](#)
- [Range of Motion](#)
- [Reflex Integrity](#)
- [Self-Care and Domestic Life](#)
- [Sensory Integrity](#)
- [Skeletal Integrity](#)
- [Work Life](#)

## **Evaluation, Diagnosis, Prognosis (Including Plan of Care)**

Read **Principles of Physical Therapist Patient and Client Management**.

Factors That May Require New Episode of Care or That May Modify Frequency of Visits/Duration of Care:

- Accessibility and availability of resources
- Adherence to the intervention program
- Age
- Anatomical and physiological changes related to growth and development
- Caregiver consistency or expertise
- Chronicity or severity of the current condition
- Comorbidities, complications, or secondary impairments
- Concurrent medical, surgical, and therapeutic interventions
- Level of impairment of body functions and structures
- Level of independence in activity and participation
- Living environment
- Mental status
- Multisite or multisystem involvement
- Nutritional status
- Overall health status
- Potential destinations at conclusion of care
- Premorbid conditions
- Probability of prolonged impairment of body functions and structures and probability of activity limitations and participation restrictions
- Psychological and socioeconomic factors
- Psychomotor abilities
- Social support
- Stability of the condition

## **Intervention**

Read **Intervention**.

The categories of interventions for this pattern are:

- Patient or Client Instruction
- Biophysical Agents
- Functional Training in Self-Care and in Domestic, Education, Work, Community, Social, and Civic Life
- Manual Therapy Techniques
- Motor Function Training
- Therapeutic Exercise

## **Reexamination**

Read **Physical Therapist Examination and Evaluation: Focus on Tests and Measures**.

## **Outcomes for Patients or Clients**

Read **Measurement and Outcomes**.

## **Concluding an Episode of Care**

Read “Criteria for Concluding an Episode of Care” under **Intervention**.

## **Pattern 4I: Impaired Joint Mobility, Motor Function, Muscle Performance, and Range of Motion Associated With Bony or Soft Tissue Surgery**

### **Inclusion**

The following examples of examination findings may support the inclusion of clients in this pattern:

### **Risk Factors or Consequences of Pathology/Pathophysiology (Disease, Disorder, or Condition)**

- Ankylosis
- Bone graft and lengthening procedures
- Cesarean section
- Connective tissue repair or reconstruction
- Fascial releases
- Fusions
- Internal debridement
- Internal knee derangement
- Intervertebral disk disorder
- Laminectomies
- Muscle, tendon, ligament, capsule repair or reconstruction
- Multisite fractures
- Open reduction internal fixation
- Osteotomies
- Tibial tuberosity procedures

### **Impairments of Body Functions and Structures, Activity Limitations, or Participation Restrictions**

- Decreased range of motion
- Decreased strength and endurance due to inactivity
- Impaired joint mobility
- Limited independence in activities of daily living
- Pain
- Swelling

## **Exclusion or Multiple-Pattern Classification**

The following examples of examination findings may support exclusion from this pattern or classification into additional patterns. Depending on the level of severity or complexity of the examination findings, the physical therapist may determine that the patient/client would be more appropriately managed through (1) classification in an entirely different pattern or (2) classification in both this and another pattern.

### **Findings That May Require Classification in a Different Pattern**

- Amputation
- Closed head trauma
- Non-union fractures
- Peripheral nerve lesions
- Total joint arthroplasties

### **Findings That May Require Classification in Additional Patterns**

- Neurological sequelae
- Non-healing wound
- Vascular sequelae

## **Examination**

Read [Physical Therapist Examination and Evaluation: Focus on Tests and Measures](#).

### **Tests and Measures for Pattern 4I**

Tests and measures for this pattern may include those that characterize or quantify:

- [Aerobic Capacity/Endurance](#)
- [Anthropometric Characteristics](#)
- [Assistive Technology](#)
- [Balance](#)
- [Community, Social, and Civic Life](#)
- [Cranial and Peripheral Nerve Integrity](#)
- [Education Life](#)
- [Environmental Factors](#)
- [Gait](#)
- [Integumentary Integrity](#)
- [Joint Integrity and Mobility](#)

- Mobility (Including Locomotion)
- Motor Function
- Muscle Performance (Including Strength, Power, Endurance, and Length)
- Pain
- Posture
- Range of Motion
- Reflex Integrity
- Self-Care and Domestic Life
- Sensory Integrity
- Skeletal Integrity
- Work Life

## **Evaluation, Diagnosis, Prognosis (Including Plan of Care)**

Read **Principles of Physical Therapist Patient and Client Management**.

Factors That May Require New Episode of Care or That May Modify Frequency of Visits/Duration of Care:

- Accessibility and availability of resources
- Adherence to the intervention program
- Age
- Anatomical and physiological changes related to growth and development
- Caregiver consistency or expertise
- Chronicity or severity of the current condition
- Comorbidities, complications, or secondary impairments
- Concurrent medical, surgical, and therapeutic interventions
- Level of impairment of body functions and structures
- Level of independence in activity and participation
- Living environment
- Mental status
- Multisite or multisystem involvement
- Nutritional status
- Overall health status
- Potential destinations at conclusion of care
- Premorbid conditions
- Probability of prolonged impairment of body functions and structures and probability of activity limitations and participation restrictions
- Psychological and socioeconomic factors
- Psychomotor abilities
- Social support
- Stability of the condition

## **Intervention**

Read **Intervention**.

The categories of interventions for this pattern are listed alphabetically, with patient or client instruction first:

- Patient or Client Instruction
- Biophysical Agents
- Functional Training in Self-Care and in Domestic, Education, Work, Community, Social, and Civic Life
- Manual Therapy Techniques
- Motor Function Training
- Therapeutic Exercise

## **Reexamination**

Read **Physical Therapist Examination and Evaluation: Focus on Tests and Measures**.

## **Outcomes for Patients or Clients**

Read **Measurement and Outcomes**.

## **Concluding an Episode of Care**

Read “Criteria for Concluding an Episode of Care” under **Intervention**.

## **Pattern 4J: Impaired Motor Function, Muscle Performance, Range of Motion, Gait, Locomotion, and Balance Associated With Amputation**

### **Inclusion**

The following examples of examination findings may support the inclusion of clients in this pattern:

#### **Risk Factors or Consequences of Pathology/Pathophysiology (Disease, Disorder, or Condition)**

- Amputation
- Diabetes
- Frostbite
- Peripheral vascular disease
- Trauma

#### **Impairments of Body Functions and Structures, Activity Limitations, or Participation Restrictions**

- Decreased community access
- Difficulty with manipulation skills
- Edema
- Joint contracture
- Impaired aerobic capacity
- Impaired gait pattern
- Impaired integument and inadequate shape of residual limb
- Impaired performance during activities of daily living
- Residual limb pain

## **Exclusion or Multiple-Pattern Classification**

The following examples of examination findings may support exclusion from this pattern or classification into additional patterns. Depending on the level of severity or complexity of the examination findings, the physical therapist may determine that the patient/client would be more appropriately managed through (1) classification in an entirely different pattern or (2) classification in both this and another pattern.

### **Findings That May Require Classification in a Different Pattern**

- Amputation with respiratory failure

### **Findings That May Require Classification in Additional Patterns**

- Open wound

## **Examination**

Read [Physical Therapist Examination and Evaluation: Focus on Tests and Measures](#).

### **Tests and Measures for Pattern 4J**

Tests and measures for this pattern may include those that characterize or quantify:

- [Aerobic Capacity/Endurance](#)
- [Anthropometric Characteristics](#)
- [Assistive Technology](#)
- [Balance](#)
- [Circulation \(Arterial, Venous, Lymphatic\)](#)
- [Community, Social, and Civic Life](#)
- [Cranial and Peripheral Nerve Integrity](#)
- [Education Life](#)
- [Environmental Factors](#)
- [Gait](#)
- [Integumentary Integrity](#)
- [Joint Integrity and Mobility](#)
- [Mobility \(Including Locomotion\)](#)
- [Motor Function](#)
- [Muscle Performance \(Including Strength, Power, Endurance, and Length\)](#)
- [Pain](#)
- [Posture](#)

- Range of Motion
- Self-Care and Domestic Life
- Sensory Integrity
- Skeletal Integrity
- Work Life

## **Evaluation, Diagnosis, Prognosis (Including Plan of Care)**

Read **Principles of Physical Therapist Patient and Client Management**.

Factors That May Require New Episode of Care or That May Modify Frequency of Visits/Duration of Care:

- Accessibility and availability of resources
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- Level of impairment of body functions and structures
- Level of independence in activity and participation
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- Multisite or multisystem involvement
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- Potential destinations at conclusion of care
- Premorbid conditions
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- Psychomotor abilities
- Social support
- Stability of the condition

## **Intervention**

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The categories of interventions for this pattern are listed alphabetically, with patient or client instruction first:

- Patient or Client Instruction
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- Manual Therapy Techniques
- Motor Function Training
- Therapeutic Exercise

## **Reexamination**

Read **Physical Therapist Examination and Evaluation: Focus on Tests and Measures**.

## **Outcomes for Patients or Clients**

Read **Measurement and Outcomes**.

## **Concluding an Episode of Care**

Read “Criteria for Concluding an Episode of Care” under **Intervention**.