Pattern 5A: Primary Prevention/Risk Reduction for Loss of Balance and Falling

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)

- Advanced age
- Alteration in senses (auditory, visual, somatosensory)
- Dementia
- Depression
- Dizziness
- Fear of falling
- History of falls
- Medications
- Musculoskeletal diseases
- Neuromuscular diseases
- Prolonged inactivity
- Vestibular pathology

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

- Deconditioning
- Difficulty negotiating in community environment
- Difficulty negotiating terrains
- Disequilibrium
- Generalized weakness
- Impaired gait pattern
- Impaired position sense
Examination

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

Tests and Measures for Pattern 5A
Tests and measures for this pattern may include those that characterize or quantify:

- Aerobic Capacity/Endurance
- Assistive Technology
- Balance
- Community, Social, and Civic Life
- Cranial and Peripheral Nerve Integrity
- Education Life
- Environmental Factors
- Gait
- Mental Functions
- Mobility (Including Locomotion)
- Motor Function
- Muscle Performance (Including Strength, Power, Endurance, and Length)
- 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

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- 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 5B: Impaired Neuromotor Development

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)

- Alteration in senses (auditory, visual)
- Birth trauma
- Cognitive delay
- Developmental coordination disorder
- Developmental delay
- Dyspraxia
- Fetal alcohol syndrome
- Genetic syndromes
- Prematurity

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

- Clumsiness during play
- Delayed motor skills
- Delayed oral motor development
- Impaired arousal, attention, and cognition
- Impaired locomotion
- Impaired sensory integration
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

- Spinal cord injury

Findings That May Require Classification in Additional Patterns

- Arthritis
- Congenital heart defect

Examination

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

Tests and Measures for Pattern 5B
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
- Mental Functions
- Mobility (Including Locomotion)
- Motor Function
- Muscle Performance (Including Strength, Power, Endurance, and Length)
- Neuromotor Development and Sensory Processing
• 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
- Airway Clearance Techniques
- 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 5C: Impaired Motor Function and Sensory Integrity Associated With Nonprogressive Disorders of the Central Nervous System—Congenital Origin or Acquired in Infancy or Childhood

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)

- Anoxia or hypoxia
- Birth trauma
- Brain anomalies
- Cerebral palsy
- Encephalitis
- Genetic syndromes affecting central nervous system (CNS)
- Hydrocephalus
- Infectious disease affecting CNS
- Meningocele
- Neoplasm
- Prematurity
- Tethered cord
- Traumatic brain injury

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

- Difficulty negotiating terrains
- Difficulty planning movements
- Difficulty with manipulation skills
- Difficulty with positioning
- Frequent falls
- Impaired affect
- Impaired arousal, attention, and cognition
- Impaired expressive or receptive communication
- Impaired motor function
- Loss of balance during daily activities

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• Inability to keep up with peers
• Inability to perform work (job/school/play) 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 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
• Coma
• Spinal cord injury

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

• Congenital heart defect
• Fracture

**Examination**

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

**Tests and Measures for Pattern 5C**

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
• Mental Functions
• Mobility (Including Locomotion)
• Motor Function
• Muscle Performance (Including Strength, Power, Endurance, and Length)
• Neuromotor Development and Sensory Processing
• 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
• Airway Clearance Techniques
• 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 5D: Impaired Motor Function and Sensory Integrity Associated With Nonprogressive Disorders of the Central Nervous System—Acquired in Adolescence or Adulthood

**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)**

- Aneurysm
- Anoxia or hypoxia
- Bell palsy
- Cerebrovascular accident
- Infectious disease that affects the central nervous system
- Intracranial neurosurgical procedures
- Neoplasm
- Seizures
- Traumatic brain injury

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

- Difficulty negotiating terrains
- Difficulty planning movements
- Difficulty with manipulation skills
- Difficulty with positioning
- Frequent falls
- Impaired affect
- Impaired arousal, attention, and cognition
- Impaired expressive or receptive communication
- Impaired motor function
- Loss of balance during daily activities
- Inability to keep up with peers
- Inability to perform work (job/school/play) 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 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
- Coma

Findings That May Require Classification in Additional Patterns

- Fracture
- Multisystem trauma

Examination

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

Tests and Measures for Pattern 5D
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
- Mental Functions
- Mobility (Including Locomotion)
- Motor Function
- Muscle Performance (Including Strength, Power, Endurance, and Length)
- Neuromotor Development and Sensory Processing
- 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
- Airway Clearance Techniques
- 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 5E: Impaired Motor Function and Sensory Integrity Associated With Progressive Disorders of the Central Nervous System

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
- Alcoholic ataxia
- Alzheimer disease
- Amyotrophic lateral sclerosis
- Basal ganglia disease
- Cerebellar ataxia
- Cerebellar disease
- Huntington disease
- Idiopathic progressive cortical disease
- Intracranial neurosurgical procedures
- Multiple sclerosis
- Neoplasm
- Parkinson disease
- Primary lateral palsy
- Progressive muscular atrophy
- Seizures

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

- Difficulty coordinating movement
- Difficulty with manipulation skills
- Difficulty negotiating terrains
- Frequent falls
- Impaired affect
- Impaired arousal, attention, and cognition
- Impaired endurance
- Impaired motor function
- Impaired sensory integrity
• Loss of balance during daily activities
• Progressive loss of function
• Inability to keep up with peers
• Inability to negotiate community environment
• Inability to perform job/school activities
• Lack of safety in home environment

**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
- Coma

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

- Amyotrophic lateral sclerosis with pneumonia
- Parkinson disease with arthritis

**Examination**

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

**Tests and Measures for Pattern 5E**

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
• Mental Functions
• Mobility (Including Locomotion)
• Motor Function
• Muscle Performance (Including Strength, Power, Endurance, and Length)
• Neuromotor Development and Sensory Processing
• 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
• Airway Clearance Techniques
• 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 5F: Impaired Peripheral Nerve Integrity and Muscle Performance Associated With Peripheral Nerve Injury

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)

- Neuropathies
  - Carpal tunnel syndrome
  - Cubital tunnel syndrome
  - Erb palsy
  - Radial tunnel syndrome
  - Tarsal tunnel syndrome
- Peripheral vestibular disorders
  - Labyrinthitis
  - Paroxysmal positional vertigo
- Surgical nerve lesions
- Traumatic nerve lesions

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

- Difficulty with manipulation skills
- Decreased muscle strength
- Impaired peripheral nerve integrity
- Impaired proprioception
- Impaired sensory integrity
- Loss of balance during daily activities
- Inability to negotiate community environment
- Lack of safety in home environment
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 Bell palsy
- Impairments associated with demyelinating disease
- Radiculopathies

Findings That May Require Classification in Additional Patterns

- Decubitis ulcer
- Reflex sympathetic dystrophy syndrome

Examination

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

Tests and Measures for Pattern 5F
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

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• 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 5G: Impaired Motor Function and Sensory Integrity Associated With Acute or Chronic Polyneuropathies

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
- Axonal polyneuropathies
  - Alcoholic
  - Diabetic
  - Renal
- Dysfunction of the autonomic nervous system
- Guillain-Barré syndrome
- Leprosy
- Post-polio syndrome

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

- Decreased endurance
- Decreased independence in activities of daily living
- Difficulty with manipulation skills
- Impaired motor function
- Impaired peripheral nerve integrity
- Impaired proprioception
- Impaired sensory integrity
- Inability to negotiate work environment
- Lack of safety in community environment
- Loss of balance during daily activities

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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

- Coma
- Impairments associated with compression or traumatic neuropathies
- Impairments associated with multisystem trauma

Findings That May Require Classification in Additional Patterns

- Decubitis ulcer

Examination

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

Tests and Measures for Pattern 5G

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)
- Cranial and Peripheral Nerve Integrity
- Community, Social, and Civic Life
- 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:

- Patient or Client Instruction
- Airway Clearance Techniques
- 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 5H: Impaired Motor Function, Peripheral Nerve Integrity, and Sensory Integrity Associated With Nonprogressive Disorders of the Spinal Cord

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)

- Benign spinal neoplasm
- Complete and incomplete spinal cord lesions
- Infectious diseases affecting the spinal cord
- Spinal cord compression
  - Degenerative spinal joint disease
  - Herniated intervertebral disk
  - Osteomyelitis
  - Spondylosis

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

- Decreased aerobic capacity
- Difficulty accessing community
- Difficulty with activities of daily living
- Difficulty with instrumental activities of daily living
- Impaired ventilation
- Impaired motor function
- Impaired muscle performance
- Impaired peripheral nerve integrity
- Inability to keep up with peers
- Inability to perform work (job/school/play)
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 Guillian-Barré syndrome
- Meningocele
- Nerve root compression due to lumbar radiculopathy
- Tethered cord

Findings That May Require Classification in Additional Patterns

- Decubitis ulcer
- Impairments associated with ventilator dependency

Examination

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

Tests and Measures for Pattern 5H
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
- Mental Functions
- Mobility (Including Locomotion)
- Motor Function
• Muscle Performance (Including Strength, Power, Endurance, and Length)
• Neuromotor Development and Sensory Processing
• 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
- Airway Clearance Techniques
- 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 5I: Impaired Arousal, Range of Motion, and Motor Control Associated With Coma, Near Coma, or Vegetative State

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)

- Anoxia
- Birth trauma
- Cerebral vascular accident
- Infectious or inflammatory disease that affects the central nervous system
- Neoplasm
- Prematurity
- Traumatic brain injury

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

- Impaired arousal
- Impaired motor function
- Impaired range of motion
- Lack of response to stimuli
- Impaired sensory integrity
**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 Additional Patterns**

- Decubitis ulcer
- Impairments associated with ventilator dependency

**Examination**

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

**Tests and Measures for Pattern 5I**

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

- Anthropometric Characteristics
- Assistive Technology
- Circulation (Arterial, Venous, Lymphatic)
- Cranial and Peripheral Nerve Integrity
- Environmental Factors
- Integumentary Integrity
- Mental Functions
- Motor Function
- Neuromotor Development and Sensory Processing
- Pain
- Posture
- Range of Motion
- Reflex Integrity
- Self-Care and Domestic Life
- Skeletal Integrity
- Ventilation and Respiration
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
- Airway Clearance Techniques
- 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.