

# Glossary

*A1 Medicare items:* Medicare item numbers 1, 2, 3, 4, 13, 19, 20, 23, 24, 25, 33, 35, 36, 37, 38, 40, 43, 44, 47, 48, 50, 51, 601, 602.

*Aboriginal:* The patient identifies himself or herself as an Aboriginal person.

*Allied and other health professionals:* Those who provide clinical and other specialised services in the management of patients, including physiotherapists, occupational therapists, dietitians, dentists and pharmacists.

*Analyte:* Any substance undergoing analysis, for example, the substance which a laboratory test aims to detect.

*Chapters (ICPC-2):* The main divisions within ICPC-2. There are 17 chapters primarily representing the body systems.

*Chronic problem:* see *Diagnosis/problem*.

*Commonwealth concession card:* An entitlement card provided by the Australian Government that entitles the holder to reduced cost medicines under the Pharmaceutical Benefits Scheme and a limited number of other concessions from state and local government authorities.

*Complaint:* A symptom or disorder expressed by the patient when seeking care.

*Component (ICPC-2):* In ICPC-2 there are seven components which act as a second axis across all chapters.

*Consultation:* See *Encounter*.

*Diagnosis/problem:* A statement of the provider's understanding of a health problem presented by a patient, family or community. GPs are instructed to record at the most specific level possible from the information available at the time. It may be limited to the level of symptoms.

- *New problem:* The first presentation of a problem, including the first presentation of a recurrence of a previously resolved problem, but excluding the presentation of a problem first assessed by another provider.
- *Old problem:* A previously assessed problem that requires ongoing care, including follow-up for a problem or an initial presentation of a problem previously assessed by another provider.
- *Chronic problem:* A medical condition characterised by a combination of the following characteristics: duration that has lasted or is expected to last 6 months or more, a pattern of recurrence or deterioration, a poor prognosis, and consequences or sequelae that affect an individual's quality of life. (Source: O'Halloran J, Miller GC, Britt H 2004. Defining chronic conditions for primary care with ICPC-2. *Fam Pract* 21(4):381-6).
- *Work-related problem:* Irrespective of the source of payment for the encounter, it is likely in the GP's view that the problem has resulted from work-related activity or workplace exposures, or that a pre-existing condition has been significantly exacerbated by work activity or workplace exposure.

*Encounter (enc):* Any professional interchange between a patient and a GP.

*General practitioner (GP):* A medical practitioner who provides primary comprehensive and continuing care to patients and their families within the community (Royal Australian College of General Practitioners).

*Indigenous:* The patient identifies himself or herself as an Aboriginal and/or Torres Strait Islander person.

*Marginal significant difference:* see *Significant*.

*Medication:* Medication that is prescribed, provided by the GP at the encounter or advised for over-the-counter purchase.

*Medication rates:* The rate of use of all medications, including medications that were prescribed, supplied by the GP and advised for over-the-counter purchase.

*Medication status:*

- *New:* The medication prescribed/provided at the encounter/advised is being used for the management of the problem for the first time.
- *Continuation/old:* The medication prescribed/provided at the encounter/advised is a continuation or repeat of previous therapy for this problem.

*Morbidity:* Any departure, subjective or objective, from a state of physiological wellbeing. In this sense, sickness, illness and morbid conditions are synonymous.

*Patient status:* The status of the patient to the practice.

- *New patient:* The patient has not been seen before in the practice.
- *Old patient:* The patient has attended the practice before.

*Prescribed rates:* The rate of use of prescribed medications (that is, does not include medications that were GP-supplied or advised for over-the-counter purchase).

*Problem managed:* See *Diagnosis/problem*.

*Provider:* A person to whom a patient has access when contacting the health care system.

*Reasons for encounter:* The subjective reasons given by the patient for seeing or contacting the general practitioner. These can be expressed in terms of symptoms, diagnoses or the need for a service.

*Recognised GP:* A medical practitioner who is:

- vocationally recognised under Section 3F of the *Health Insurance Act*, or
- a holder of the Fellowship of the Royal Australian College of General Practitioners who participates in, and meets the requirements for, quality assurance and continuing medical education as defined in the Royal Australian College of General Practitioners (RACGP) Quality Assurance and Continuing Medical Education Program, or
- undertaking an approved placement in general practice as part of a training program for general practice leading to the award of the Fellowship of the Royal Australian College of General Practitioners, or undertaking an approved placement in general practice as part of some other training program recognised by the RACGP as being of equivalent standard. (*Source:* Commonwealth Department of Health and Aged Care 2001. Medicare Benefits Schedule book. Canberra: DHAC).

*Referral:* The process by which the responsibility for part or all of the care of a patient is temporarily transferred to another health care provider. Only new referrals to specialists and allied health professionals, and for hospital and residential aged care facility admissions arising at a recorded encounter are included. Continuation referrals are not included. Multiple referrals can be recorded at any one encounter.

*Repatriation health card:* An entitlement card provided by the Department of Veterans' Affairs that entitles the holder to access a range of Repatriation health care benefits, including access to prescription and other medications under the Pharmaceutical Benefits Scheme.

*Rubric:* The title of an individual code in ICPC-2.

*Significant:* This term is used to refer to a statistically significant result. Statistical significance of difference is measured at the 95% confidence level in this report. If the 95% confidence intervals for two results do not overlap the difference or change is regarded as statistically significant. If the 95% confidence intervals of two results do not overlap, but they butt (e.g. 95% CI: 4.5–4.7, and 95% CI: 4.7–4.9), the difference or change is regarded as marginally significant.

*Torres Strait Islander:* The patient identifies himself or herself as a Torres Strait Islander person.

*Work-related problem:* See *Diagnosis/problem*.

# Appendices

## Appendix 1: Example of a 2007–08 recording form



# Appendix 2: GP characteristics questionnaire, 2007–08



**The University of Sydney**  
at Westmead Hospital

**Australian General Practice  
Statistics and  
Classification Centre**



a collaborating unit of the

**Australian Institute of Health and Welfare**

Doctor Identification Number

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**Please fill in boxes or circle answers**

1. Sex ..... **Male / Female** (please circle)

2. Age.....

3. How many years have you spent in general practice?.....

4. How many GPs (full time equivalents) work at this practice (including yourself)?   
(Practice = shared medical records)

5. Postcode of major practice address ..

6. In which GP Division is this practice  
.....

7. Year of graduation .....

8. Place of graduation (primary medical degree):  
Aust ..... 1  
NZ ..... 2  
Asia ..... 3  
UK / Ireland..... 4  
Other: (specify) ..... 5

9. Do you conduct any of your consultations in a language other than English?  
No..... 1  
Yes - <25%..... 2  
Yes - 25 to 50%..... 3  
Yes - >50%..... 4

10. Are you a GP registrar (i.e. in training)?... **Yes / No**

11. Do you hold FRACGP ?..... **Yes / No**

12. Is your major practice accredited ?..... **Yes / No**

13. Is there a practice nurse at your major practice address ?..... **Yes / No**  
If yes, how many full time equivalents?

14. Number of general practice sessions you usually work per week? (1 session = ~4 hrs eg a morning session) ....

15. Direct patient care hours worked per week? (Include hours of direct patient care, instructions, counselling etc and other services such as referrals, prescriptions, phone calls etc.) .....

16. Over the past four weeks have you provided any patient care ....(Circle all that apply)

- As a locum ..... 1
- In a deputising service ..... 2
- In a residential aged care facility ..... 3
- As a salaried/sessional hospital medical officer..... 4
- None of the above ..... 5

17. What are the normal after-hours arrangements for your practice? (Circle all that apply)

- Practice does its own.....1
- Co-operative with other practices .....2
- Deputising service.....3
- Referral to other service (eg A&E) .....4
- Other .....5
- None .....6

18. Do you bulk bill ALL patients?..... **Yes / No**

**If No**, which groups are bulk billed?

(Tick those that apply)

- |                                       | <b>All</b>               | <b>Some</b>              |
|---------------------------------------|--------------------------|--------------------------|
| Pensioner/Healthcare Card holders ... | <input type="checkbox"/> | <input type="checkbox"/> |
| Children <16 years.....               | <input type="checkbox"/> | <input type="checkbox"/> |
| Selected other patients .....         | <input type="checkbox"/> | <input type="checkbox"/> |

19. To what extent are computers used -

- | (i) at your major practice? |                    | (ii) by you (at work)? |                         |
|-----------------------------|--------------------|------------------------|-------------------------|
| Not at all ..... 1          | Not at all ..... 1 | Billing.....2          | Test ordering ..... 2   |
| Prescribing.....3           | Prescribing .....3 | Medical Records.....4  | Medical Records ..... 4 |
| Other Admin.....5           | Internet ..... 5   | Internet / Email.....6 | Email .....6            |

(iii) Prescribing / Health record software used is —

20. Is your major practice site a teaching practice? (Circle all that apply)

- for undergraduates..... 1
- for GP registrars ..... 2
- No..... 3

21. Did any of your BEACH consultations take place in an Aboriginal Community Controlled Health Service (ACCHS)?

- No..... 1
- Yes - all..... 2
- Yes - some (which dates?) ..... 3

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*Thank you for participating in the BEACH PROGRAM.*

## **Appendix 3: Code groups from ICPC-2 and ICPC-2 PLUS**

Available from [www.aihw.gov.au/publications/index.cfm/subject/19](http://www.aihw.gov.au/publications/index.cfm/subject/19)

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