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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, 720, 722, 724, 726, 728, 730, 734, 738, 740, 742, 744, 746, 749, 757, 759, 762, 765, 768, 771, 773, 775, 778, 779, 801, 803, 805, 807, 809, 811, 813, 815.

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

Activity level: The number of general practice A1 Medicare items claimed during the previous 3 months by a participating general practitioner.

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.

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

Chronic condition: Chronic conditions may be characterised by the following criteria: a duration that has lasted, or is expected to last, 6 months; an insidious onset; an uncertain or poor prognosis; and the possibility of sequelae. Conditions regarded as chronic for the analyses conducted in this report can be found in Appendix 7.

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. Includes follow-up for a problem or an initial presentation of a problem previously assessed by another provider.

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

- *Indirect*: Encounter where there is no face-to-face meeting between the patient and the GP but a service is provided (e.g. prescription, referral).
- *Direct*: Encounter where there is a face-to-face meeting of the patient and the GP.

Direct encounters can be further divided into:

- *Medicare-claimable*
 - *A1 items of service*: See *A1 Medicare items*
 - *surgery consultations*: Encounters identified by any one of MBS item numbers 3; 23; 36; 44
 - *home visits*: Encounters identified by any one of MBS item numbers 4; 24; 37; 47
 - *hospital encounters*: Encounters identified by any one of MBS item numbers 19; 33; 40; 50
 - *visits to residential aged care facilities*: Encounters identified by any one of MBS item numbers 20; 35; 43; 51
 - *other institutional visits*: Encounters identified by any one of MBS item numbers 13; 25; 38; 40
 - *other MBS encounters*: Encounters identified by an MBS item number that does not identify place of encounter (see *A1 Medicare items*)
 - *Workers compensation*: Encounters paid by workers compensation insurance
 - *Other paid*: Encounters paid from another source (e.g. State).

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).

Group: Multiple ICPC-2 or ICPC-2 PLUS codes which are grouped together for purposes of analysis.

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

Medication status:

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

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.

Problem managed: See *Diagnosis/problem*.

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

Reasons for encounter (RFEs): 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 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. (Medicare Benefits Schedule book, 1 November 1998).

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 specialist, allied health professionals, and for hospital and for admissions to residential aged care facilities arising at a recorded encounter are included. Continuation referrals are not included. Multiple referrals can be recorded at any one encounter.

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

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

Abbreviations

ABS	Australian Bureau of Statistics
ADL	Activities of Daily Living
AIHW	Australian Institute of Health and Welfare
AMTS	Australian Morbidity and Treatment Survey 1990–91
ATC	Anatomical Therapeutic Chemical (classification)
AUDIT	Alcohol Use Disorders Identification Test
BEACH	Bettering the Evaluation and Care of Health
BMI	Body mass index
C&S	Culture and sensitivity
CAPS	Coding Atlas for Pharmaceutical Substances
CI	Confidence interval (in this report 95% CI is used)
CT	Computed tomography
DALY	Disability-adjusted life years
DoHA	Commonwealth Department of Health and Ageing
DHAC	Commonwealth Department of Health and Aged Care
DVA	Commonwealth Department of Veterans' Affairs
Enc	Encounter
EPC	Enhanced Primary Care
ESR	Erythrocyte sedimentation rate
EUC	Electrolytes, urea and creatinine
FMRC	Family Medicine Research Centre, University of Sydney
GP	General practitioner
GPSCU	General Practice Statistics and Classification Unit, University of Sydney, a collaborating unit of the Australian Institute of Health and Welfare
HALE	Health Adjusted Life Expectancy (scale)
HbA1c	Haemoglobin, type A1c
HIC	Health Insurance Commission
ICPC	International Classification of Primary Care
ICPC–2	International Classification of Primary Care (Version 2)
ICPC–2 PLUS	An extended vocabulary of terms classified according to ICPC–2
INR	International Normalised Ratio
LCL	Lower confidence limit
MBS	Medicare Benefits Schedule
MC&S	Microscopy, culture and sensitivity
NEC	Not elsewhere classified

NESB	The patient reports coming from a non-English-speaking background, i.e. a language other than English is spoken at home.
NSAID	Non-steroidal anti-inflammatory drug
OTCs	Medications advised for over-the-counter purchase
PIP	Practice Incentive Program of the Commonwealth Department of Health and Aged Care
RACGP	Royal Australian College of General Practitioners
RFE(s)	Reason for encounter(s) (see Glossary)
SAND	Supplementary Analysis of Nominated Data
SAS	Statistical Analysis System
U&E	Urea and electrolytes
UCL	Upper confidence limit
UTI	Urinary tract infection
WHO	World Health Organization
WONCA	World Organization of Family Doctors