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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.

*Cardiovascular problem:* Any problem classified in the circulatory chapter (Chapter K) of the International Classification of Primary Care (Version 2) (ICPC-2).

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

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

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 MBS item numbers as previously listed 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
  - *nursing home visits*: 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
- *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).

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

*Medication*: Medication which 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 (above).

*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 healthcare 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 healthcare provider. Only new referrals to specialists, allied health professionals, and for hospital and nursing home admissions 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.

Statins: HMG CoA reductase inhibitors.

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

Work-related problem: Irrespective of the source of payment for the consultation, 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.

### **Abbreviations**

ABS Australian Bureau of Statistics

AIHW Australian Institute of Health and Welfare

AHP Allied health professional

AMA Australian Medical Association
AMI Acute myocardial infarction

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 BP Blood pressure

CAPS Coding Atlas for Pharmaceutical Substances

CI Confidence interval (in this report 95% CI is used)

CNS Central nervous system

COAD Chronic obstructive airways disease

CVA Cerebrovascular accident
CVD Cardiovascular disease
CVS Cardiovascular system

DoHA Commonwealth Department of Health and Ageing
DHAC Commonwealth Department of Health and Aged Care

DHHCS Commonwealth Department of Health, Housing and Community

Services

DHSH Department of Human Services and Health

Enc Encounter

FMRC Family Medicine Research Centre, The 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

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

IHD Ischaemic heart diseaseLCL Lower confidence limitMBS Medicare Benefits Schedule

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.

NHMRC National Health and Medical Research Council

NOS Not otherwise specified

NSAID Non-steroidal anti-inflammatory medications

OA Osteoarthritis

OTCs Medications advised for over-the-counter purchase

PVD Peripheral vascular disease

QA Quality assurance (in this case the Quality Assurance Program of the

Royal Australian College of General Practitioners)

RACGP Royal Australian College of General Practitioners

RFEs Reasons for encounter (see Glossary)

RRMA Rural, remote and metropolitan area classification

SAND Supplementary analysis of nominated data

SAS Statistical Analysis System UCL Upper confidence limit

VA Veterans' Affairs

WHO World Health Organization

WONCA World Organization of Family Doctors

# Appendix 1: Example of a recording form from 1998–99 BEACH data year

| EACH (Bettering the Evaluation And Care of Health) -M | Evaluation And                                    | are of Health)                           | -Morbidity ar  | d Treatment                        | orbidity and Treatment Survey -National National | National   | © BEACH F             | amily Medicine Research Unit, De                                 | © BEACH Family Medicine Research Unit, Department of General Practice, University of Sydney 1996 |
|---|---|--|--|------------------------------------|--|--|-----------------------|--|--|
| OCID: Date  | Date of encounter                                 | Date of Birth                            | Sex  | Patien<br>F New                    | Patient status New Old                           | Patient Postcode   | NESB?<br>Yes \<br>No  | Aboriginal? Yes \tag{1}  | Torres Strait Islander? Yes  |
| Patient Number:                                       | ent 1.  |  |  |                                    | HCC Status                                       | Veterans Affairs   | PATIENT SEEN Item no. | EN   | PATIENT NOT SEEN    Script   |
|   | Reasons for 2.                                    | -  |  |                                    | Yes  |  | W/C paid C            |  | Referral   |
| dn)   | (up to three) 3.                                  |  |  |                                    | No No  | White card   | No charge             | 10   | Other  |
| Diagnosis/problem                                     |   | Work<br>Related                          | Problem status<br>New  | ☐ PIO ☐                            | 2. Diagnosis/problem                             | lem  |                       | Work Pro   | Problem status New Old   |
| <b>ledications</b> for this problem: (up to four)     | lem: (up to four)                                 | Strength Regimen                         | No. ?<br>Rpts OTC  | GP Drug status<br>Supply New Cont. | TT.  | Medications for this problem: (up to four)                                     | our)                  | Strength Regimen   | No. ? GP Drug status Rpts OTC Supply New Cont.   |
|   |   |  |  |                                    | 1.   |  |                       |  |  |
|   |   |  |  |                                    | 2.   |  |                       |  |  |
|   |   |  |  |                                    | 3.   |  |                       |  |  |
|   |   |  |  |                                    | 4.   |  |                       |  |  |
| Procedures, other treatment, counselling              | int, counselling                                  | New referrals, admissions                | s, admissions  |                                    | Procedures, othe                                 | Procedures, other treatment, counselling                                       | Вų                    | New referrals, admissions  | missions   |
|   |   |  |  | ,                                  |  |  |                       |  |  |
| . Diagnosis/problem                                   |   | Work<br>Related                          | Problem status<br>New  | PIO M                              | 4. Diagnosis/problem                             | olem   |                       | Work Pro   | Problem status New Old   |
| fedications for this problem: (up to four)            | lem: (up to four)                                 | Strength Regimen                         | No. ?<br>Rpts OTC  | GP Drug status<br>Supply New Cont. |  | Medications for this problem: (up to four)                                     | our)                  | Strength Regimen Rpts  | No. ? GP Drug status Rpts OTC Supply New Cont.   |
|   |   |  |  |                                    | -1 2   |  |                       |  |  |
|   |   |  |  |                                    | 3.   |  |                       |  |  |
| Procedures, other treatment, counselling              | nt, counselling                                   | New referrals, a                         | s, admissions  |                                    | 4. Procedures, othe                              | Procedures, other treatment, counselling                                       | gu                    | New referrals, admissions  | missions   |
|   |   |  |  |                                    |  |  |                       |  |  |
| athology for problem(s)                               | Test/Body Site for problem(s) Plain X-ray 1 2 3 4 |  | To the patient:<br>In general would you<br>say your health is: | Patient's<br>Height:               |  | To the patient if 18+:<br>How often do you have a drink containing<br>alcohol? |                       | How many standard drinks of day when you are drinking?           | How many standard drinks do you have on a typical day when you are drinking?                     |
| 1 2 3 4   | US/CT/Contrast Other Imaging                      | 1 2 3 4 Excellent Cood Cood 1 2 3 4 Fair | ent  | Weight:                            | Never Monthly Once a week                        | 2-4 times a week 5+ times a week   |                       | How often do you have 6 or more standard drinks on one occasion? | Never  |
| 1 2 3 4   |   | Poor                                     |  |                                    |  |  | BO1A                  |  | 5+ times a week  |

# Appendix 2: Example of a recording form from 1999–00 BEACH data year

GP New Supply Drug How often do you have 6 or more standard drinks on one occasion? β PATIENT NOT SEEN Other..... Script......Referral.......Certificate...... Work related Work related OTC OTC 2-4 times a week.... 5+ times a week.... Monthly or less.. Once a week... No. of Rpts New referrals, admissions No. of Rpts New referrals, admissions Never... 5 BEACH Family Medicine Research Unit, Depart Workers comp paid..... State/Other paid....... No charge/Unpaid....... Strength Regimen Strength Regimen New problem New problem How many standard drinks do you have on a typical day when you are drinking? VA paid..... MBS/Vet. Affairs PATIENT SEEN 7 7 Item No Procedures, other treatment, counselling this consult Procedures, other treatment, counselling this consult Medications/vaccines for this problem Medications/vaccines for this problem To the patient if 18+:

How often do you have a drink containing alcohol? Health Care Card holder. Veterans Affairs Card Torres Strait Islander.. White card. Gold card. 5+ times a week..... 2-4 times a week.... New patient. Monthly or less.. Aboriginal. 2. Diagnosis/problem 4. Diagnosis/problem Once a week.. NESB... Never... BEACH (Bettering the <u>E</u>valuation <u>A</u>nd <u>C</u>are of <u>H</u>ealth) - Morbidity and Treatment Survey - National Patient Postcode g GP [ Patient's Work related Work related Height: Weight: OTC orc To the patient: In general would you say your health is: No. of Rpts New referrals, admissions New referrals, admissions Z Š Strength Regimen Strength Regimen Very good. Excellent. New problem New problem Good. Poor. Fair. Date of Birth 4 4 2 3  $\alpha$ 1 2 3 4 4 Imaging & other tests .....1 2 Procedures, other treatment, counselling this consult Procedures, other treatment, counselling this consult +Body site) Problem(s) Date of encounter Medications/vaccines for this problem Medications/vaccines for this problem Reasons for Encounter 3 4 3 4 For problem(s) Patient  $\omega$ 7 7 0 1. Diagnosis/problem 3. Diagnosis/problem Encounter Number athology

# Appendix 3: GP characteristics questionnaire, 1998–99 BEACH data year



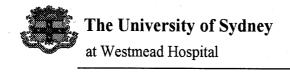
#### General Practice Statistics and Classification Unit Family Medicine Research Centre Department of General Practice

a collaborating unit of the
Australian Institute of Health and Welfare



| Please fill in boxes or circle answers where appropriate   |
|--|
|  |
| 1. Doctor Identification Number:   |
| 2. Sex: Male / Female 3. Age   |
| 4. How many years have you spent in general practice?  |
| 5. Number of general practice sessions you usually work per week?  |
| 6. How many <b>full-time</b> (>5 sessions per week) general practitioners work with you at this practice? (Practice= shared medical records) |
| 7. How many <b>part-time</b> (<6 sessions per week) general practitioners work with you at this practice? (Practice= shared medical records) |
| 8. Do you conduct more than 50% of consultations in a language Other than English?  Yes / No   |
| 9. What is the postcode of your major practice address?  |
| 10. Country of graduation:  Aust NZ Asia UK Other:   |
| 11. General Practice training status Presently Completed Not (CSCT or RACGP training programme)? training training applicable                |
| 12. Do you hold FRACGP? Yes / No   |
| 13. Are you a member of any of the following organisations?  AMA RACGP RDAA  |
| 14. How do you <u>routinely</u> instruct pharmacists on the substitution No substitute of generic drugs? No substitute allowed               |
| 15. Special interests: (up to three)   |
| 1. Acupuncture 7. Dermatology 13. Paediatrics  |
| 2. Anaesthetics 8. Diabetes 14. Preventive medicine  |
| 3. Asthma 9. Geriatrics/aged care 15. Psychiatry   |
| 4. Cardiology 10. Nutrition 16. Sports medicine  |
| 5. Computers 11. Obstetrics/antenatal 17. Surgery  |
| 6. Counselling 12. Occup./indust.med. 18. Women's Health   |
| Other  |

# Appendix 4: GP characteristics questionnaire, 1999–00 BEACH data year



### General Practice Statistics and Classification Unit Family Medicine Research Centre Department of General Practice

a collaborating unit of the Australian Institute of Health and Welfare



| Please fill in boxes or circle answers where appropriate  |   |                        |                  |          | Doctor Identif                          | ication Number          |
|---|---|------------------------|------------------|----------|---|-------------------------|
| 1. Sex:   |   | ••••••                 |                  | •••••    |   | Male / Female           |
| 2. Age  |   | ••••                   |                  |          |   |                         |
| 3. How many years have you spent in general pra   | ctice?  |                        |                  |          |   |                         |
| 4. Number of general practice sessions you usuall   | ly work per   | week?                  |                  | •••••    |   |                         |
| 5. How many full-time (>5 sessions per week) get work with you at this practice? (Practice= share | neral practi<br>ed medical r  | tioners<br>ecords)     |                  | •••••    |   |                         |
| 6. How many part-time (<6 sessions per week) go work with you at this practice? (Practice = sha   | eneral pract<br>ared medica   | titioners<br>1 records | )                | •••••    |   |                         |
| 7. Do you conduct more than 50% of consultation   | ns in a lang  | uage othe              | er than E        | inglish? |   | Yes / No                |
| 8. What is the postcode of your major practice ad   | dress?  |                        |                  | •••••    |   |                         |
| 9. Country of graduation:   | Aust  | NZ .                   | Asia             | UK       | Other:(sp                               | ecify)                  |
| 10. General Practice training status(CSCT or RACGP training programme)?                           | :<br>   |                        | Presei<br>traini | •        | Completed training                      | Not<br>Applicable       |
| 11. Do you hold FRACGP?   |   |                        | ······           |          |   | Yes / No                |
| 12. Are you a member of any of the following org  | anisations?   |                        | AMA              |          | RACGP                                   | RDAA                    |
| 13. How do you <u>routinely</u> instruct pharmacists on substitution of generic drugs?            | the   |                        |                  | I        | No substitut<br>allowed                 | e Substitute<br>allowed |
| 14. To what extent are computers used at your ma  Not at all Billing Prescribing                  |   | e address<br>ical Rec  |                  |          | any as apply)<br>et / Email             | Other Admin             |
| 15. Is this practice accredited ?   |   |                        |                  |          |   | Yes / No                |
|   | s for your properties for | Refe                   | rral to d        |          | Other                                   | None                    |
| 17. Do you have your own on-site NATA accredi   | ted patholog  | gy lab?                | ••••••           | •••••    | ••••••••••                              | Yes / No                |
| 18. Which external pathology provider does your   | N   | ame of p               | orovide          | r        | *************************************** |                         |
| practice normally use?  | Р   | rovider'               | s Postc          | ode      |   |                         |

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# Appendix 5: The recording form used in the Australian Morbidity and Treatment Survey 1990–91

| PROVIDER NUMBER ENCOUNT  | TER MUMBER                            | en de la companya de<br>La companya de la co   |                        | DA          | TE OF ENCOUNTER                                | (19-24)       |
|--|---------------------------------------|--|------------------------|-------------|--|---------------|
| 697 Nº   | 080                                   | TYPE   | OF ENCOUNTER           |             | لـــا ،لـ                                      |               |
|  | 000                                   | MEDICARE   |                        | 0ay         | Month  | Year          |
| (9-11)   | 12-14)                                | ITEM NUMBER  |                        |             | OFFICE U                                       | ISE ONLY-     |
|  |                                       | TTEN NONDER  | (15-18)                |             | Block cols 1-<br>12-14, 15-1                   | 8 front sheet |
| THE PATIENT  |                                       |  |                        |             | 1 1  | 29 - 37       |
| SEX: AGE: (years)  | REASONS FOR                           | ENCOUNTER (up to 3   | <b>)</b>               |             | 25   | L 3/          |
| M F <1yr = 00  |                                       |  |                        |             |  |               |
| >99yr = 99 2   |                                       |  |                        |             |  |               |
| Patient NEW to practice 1 3 Seen before in practice 2  |                                       |  |                        | <del></del> | 26 - 27  | + .           |
| THE PROBLEMS AND THEIR MANAGEMENT  | · · · · · · · · · · · · · · · · · · · |  | ,                      |             | 28   | <u> </u>      |
| 1. DIAGNOSIS/problem:  | 3                                     | 2. DIAGNOSIS/pro   | oblem                  |             | 38 - 57  | 58 - 77       |
|  |                                       | 1 1 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1  |                        | 1           |  |               |
|  |                                       | *  |                        |             |  | الحسا         |
| STATUS this problem (circle) NEW   | OLD                                   | STATUS this proble   | em (circle) MEW        | DLO         |  |               |
| TREATMENT/SCRIPTS for this problem: (  | (up to 4)                             | TREATMENT/SCRIPTS  | for this problem: (up  | (6 4)       |  |               |
|  |                                       |  |                        |             | 1  |               |
|  |                                       |  |                        |             | السلسلسا                                       | السسا         |
|  |                                       |  |                        |             | البياا   | L             |
| A CHARLEST AND A STATE OF THE S |                                       |  |                        |             |  |               |
| APPLICATION OF THE PROPERTY OF | <del></del> :                         | <del></del>  |                        |             | <del>                                   </del> | <u> </u>      |
| 50<br>•  |                                       |  |                        |             |  |               |
| 3. DIAGNOSIS/problem:  |                                       | 4. DIAGNOSIS/pro   | obles                  |             | 78 - 97  | 98 - 117      |
| o  |                                       |  |                        |             |  |               |
| •  |                                       | <u> </u>   |                        | [           |  |               |
| STATUS this problem (circle) NEW   | OLD                                   | STATUS this proble   | em (circle) NEW        | OLD         |  | . 1           |
| TREATMENT/SCRIPTS for this problem: (  | (un to 6)                             | TREATMENT/SCRIPTS  | for this problem: (up  |             |  |               |
| TREATMENT SERVICES TO CITES PROUTENT.  | (up (u 4)                             | TREATMENT/ SURTING   | ( )                    |             | 1  | ,             |
|  |                                       |  |                        |             |  |               |
|  |                                       | . *  |                        |             |  | السسا         |
|  |                                       |  |                        |             | 1  |               |
| <u></u>  |                                       |  |                        |             | البييا   |               |
|  |                                       |  |                        |             |  | لبيبا         |
| REFERRAL, TESTS, INVESTIGATIONS orde   | ecod/undecta                          | Landar de la companya |                        |             |  |               |
| PATHOLOGY:   |                                       | - RAY  | OTHER                  | 7           |  |               |
| Blood  | Plain                                 |  | E.C.G                  |             | 118 119 120                                    | 121 122 123   |
| Cul ture 3   | Ultrasound                            | d 3  | Multiphasis screening  | . , 3       | 124 125  | 126 127       |
| Papsmear   | Other                                 | •  | other                  |             |  | الاالا        |
| Other  | MEN DECEDO                            | ALS TO SPECIALISTS   | & HEALTH PROFESSIONALS |             | 128 129  | 130 131       |
| Hospital Emergency - public 1  | NEW KETEKK                            | we in alerineisis  | A HEVELI LYAL CASSANCE |             |  |               |
| - private 2 Elective - public 3  | 1                                     | · · · · · · · · · · · · · · · · · · ·  |                        |             | 132  | 133-134       |
| private 4 Nursing home   |                                       |  |                        |             |  | 135-136       |
| Other  | Z                                     |  | YES                    |             |  | L             |
| FOLLOW - UP: Mas this patient been a   |                                       |  | NO                     | ż           | 137  |               |

### Appendix 6: Problem code groups from ICPC-2 used in this report

| Group   | ICPC codes           | ICPC-2 rubric  |
|---|----------------------|--|
| Arrhythm ias  | K78                  | Atrial fibrillation/flutter  |
|   | <b>K</b> 79          | Paroxysmal tachycardia   |
|   | K80                  | Cardiac arrhythmias NOS  |
| Cardiovascular check-ups                                      | K30                  | Cardiovascular check-up—complete   |
|   | K31                  | Cardiovascular check-up—partial  |
| Cerebrovascular disease                                       | K89                  | Transient cerebral ischaemia   |
|   | K90                  | Stroke/cerebrovascular accident  |
|   | <b>K</b> 91          | Cerebrovascular disease  |
| Diabetes—all  | Т89                  | Diabetes; insulin-dependent  |
|   | T90                  | Diabetes; non-insulin-dependent  |
|   | W85                  | Gestational diabetes   |
| Hypertension (non-gestational)                                | K86                  | Uncomplicated hypertension   |
|   | K87                  | Hypertension with involvement of target organs   |
| Ischaemic heart disease                                       | K74                  | Ischaemic heart disease without angina   |
|   | K76                  | Ischaemic heart disease with angina  |
| Ischaemic heart disease/acute myocardial infarction (IHD/AMI) | K74                  | Ischaemic heart disease without angina   |
|   | K75                  | Acute myocardial infarction  |
|   | K76                  | Ischaemic heart disease with angina  |
| Other vascular disease  | <b>K</b> 92          | Atherosclerosis/peripheral vascular disease  |
|   | <b>K</b> 93          | Pulmonary embolism   |
|   | K94                  | Phlebitis and thrombophlebitis   |
|   | <b>K</b> 95          | Varicose veins of leg  |
|   | <b>K</b> 96          | Haemorrhoids   |
| Cardiovascular process of care                                | K30-K31              | Check-ups of the circulatory system, partial or full   |
|   | K32–K49<br>inclusive | Problems labelled as diagnostic, screening and preventive procedures of the cardiovascular system                            |
|   | K50–K59<br>inclusive | Problems labelled as medication, treatment or procedures of the cardiovascular system  |
|   | K60–69<br>inclusive  | Problems labelled in terms of test results, administrative action, referrals etc., associated with the cardiovascular system |

(continued)

#### Appendix 6 (continued): Problem code groups from ICPC-2 used in this report

| Group                               | ICPC codes  | ICPC-2 rubric                              |
|-------------------------------------|-------------|--|
| Circulatory symptoms and complaints | K01         | Heart pain                                 |
|                                     | K02         | Pressure/tightness of heart                |
|                                     | K03         | Cardiovascular pain NOS                    |
|                                     | K04         | Palpitations/awareness of heart            |
|                                     | K05         | Irregular heartbeat, other                 |
|                                     | K06         | Prominent veins                            |
|                                     | <b>K</b> 07 | Swollen ankles/oedema                      |
|                                     | K22         | Risk factors for cardiovascular disease    |
|                                     | K24         | Fear of heart disease                      |
|                                     | K25         | Fear of hypertension                       |
|                                     | K27         | Fear of cardiovascular disease, other      |
|                                     | K28         | Limited function/disability cardiovascular |
|                                     | <b>K</b> 29 | Cardiovascular symptom/complaint, other    |
| Other heart disease                 | K81         | Heart/arterial murmur NOS                  |
|                                     | K82         | Pulmonary heart disease                    |
|                                     | K83         | Heart valve disease                        |
|                                     | K84         | Heart disease, other                       |
| Other cardiovascular disease        | K70         | Infection of circulatory system            |
|                                     | K71         | Rheumatic heart disease                    |
|                                     | K72         | Neoplasm, cardiovascular                   |
|                                     | K73         | Congenital anomaly, cardiovascular         |
|                                     | <b>K</b> 99 | Cardiovascular disease, other              |