
**Prosthetics and orthotics — Limb
deficiencies —**

**Part 5:
Description of the clinical condition of
the person who has had an amputation**

Prothèses et orthèses — Malformations des membres —

*Partie 5: Description des conditions cliniques d'une personne ayant subi
une amputation*



PDF disclaimer

This PDF file may contain embedded typefaces. In accordance with Adobe's licensing policy, this file may be printed or viewed but shall not be edited unless the typefaces which are embedded are licensed to and installed on the computer performing the editing. In downloading this file, parties accept therein the responsibility of not infringing Adobe's licensing policy. The ISO Central Secretariat accepts no liability in this area.

Adobe is a trademark of Adobe Systems Incorporated.

Details of the software products used to create this PDF file can be found in the General Info relative to the file; the PDF-creation parameters were optimized for printing. Every care has been taken to ensure that the file is suitable for use by ISO member bodies. In the unlikely event that a problem relating to it is found, please inform the Central Secretariat at the address given below.

STANDARDSISO.COM : Click to view the full PDF of ISO 8548-5:2003

© ISO 2003

All rights reserved. Unless otherwise specified, no part of this publication may be reproduced or utilized in any form or by any means, electronic or mechanical, including photocopying and microfilm, without permission in writing from either ISO at the address below or ISO's member body in the country of the requester.

ISO copyright office
Case postale 56 • CH-1211 Geneva 20
Tel. + 41 22 749 01 11
Fax + 41 22 749 09 47
E-mail copyright@iso.org
Web www.iso.org

Published in Switzerland

Foreword

ISO (the International Organization for Standardization) is a worldwide federation of national standards bodies (ISO member bodies). The work of preparing International Standards is normally carried out through ISO technical committees. Each member body interested in a subject for which a technical committee has been established has the right to be represented on that committee. International organizations, governmental and non-governmental, in liaison with ISO, also take part in the work. ISO collaborates closely with the International Electrotechnical Commission (IEC) on all matters of electrotechnical standardization.

International Standards are drafted in accordance with the rules given in the ISO/IEC Directives, Part 2.

The main task of technical committees is to prepare International Standards. Draft International Standards adopted by the technical committees are circulated to the member bodies for voting. Publication as an International Standard requires approval by at least 75 % of the member bodies casting a vote.

Attention is drawn to the possibility that some of the elements of this document may be the subject of patent rights. ISO shall not be held responsible for identifying any or all such patent rights.

ISO 8548-5 was prepared by Technical Committee ISO/TC 168, *Prosthetics and orthotics*.

ISO 8548 consists of the following parts, under the general title *Prosthetics and orthotics — Limb deficiencies*:

- *Part 1: Method of describing limb deficiencies present at birth*
- *Part 2: Method of describing lower limb amputation stumps*
- *Part 3: Method of describing upper limb amputation stumps*
- *Part 4: Description of causal conditions leading to amputation*
- *Part 5: Description of the clinical condition of the person who has had an amputation*

Introduction

The rehabilitation of the person who has had an amputation depends not only on the surgery performed but also on the causes and pathological condition for which amputation was performed, and on other clinical conditions and attributes of the person. The various members of the clinic teams in different countries develop their own nomenclature to record this information. Hence there is a need for an international system to allow comparisons of clinical practice.

The system is designed to meet the needs of the members of the clinic team in assessing the person and evaluating treatment. Such a system allows the description of the person to be recorded in a way that can easily be incorporated in reports and be used for analysis. It would also be of value to epidemiologists and government health officials.

This part of ISO 8548 defines the minimum information to be described.

STANDARDSISO.COM : Click to view the full PDF of ISO 8548-5:2003

Prosthetics and orthotics — Limb deficiencies —

Part 5:

Description of the clinical condition of the person who has had an amputation

1 Scope

This part of ISO 8548 establishes a method of describing those attributes of a person who has had an amputation which may affect their rehabilitation.

2 Normative references

The following referenced documents are indispensable for the application of this document. For dated references, only the edition cited applies. For undated references, the latest edition of the referenced document (including any amendments) applies.

ISO 8548-1:1989, *Prosthetics and orthotics — Limb deficiencies — Part 1: Method of describing limb deficiencies present at birth*

ISO 8548-2:1993, *Prosthetics and orthotics — Limb deficiencies — Part 2: Method of describing lower limb amputation stumps*

ISO 8548-3:1993, *Prosthetics and orthotics — Limb deficiencies — Part 3: Method of describing upper limb amputation stumps*

ISO 8548-4:1998, *Prosthetics and orthotics — Limb deficiencies — Part 4: Description of causal conditions leading to amputation*

ISO 8549-1:1989, *Prosthetics and orthotics — Vocabulary — Part 1: General terms for external limb prostheses and external orthoses*

ISO 8549-2:1989, *Prosthetics and orthotics — Vocabulary — Part 2: Terms relating to external limb prostheses and wearers of these prostheses*

3 Terms and definitions

For the purposes of this document, the terms and definitions given in ISO 8548-1, ISO 8548-2, ISO 8548-3, ISO 8548-4, ISO 8549-1, and ISO 8549-2 apply.

4 Description of the person who has had an amputation

4.1 General

NOTE The general condition of the person has an important bearing on the rehabilitation achieved irrespective of the condition of the stump or the prosthesis if fitted.

The description should include the information listed in 4.2 to 4.5.

4.2 Personal factors

State the person's age, gender, height and body mass.

Describe, where relevant, the person's social and physical environment, vocational and recreational activities.

Describe any significant and relevant medical history, including the usage of tobacco.

Describe any limitation of the functions of the lower limb(s), upper limb(s) or the trunk which existed prior to the amputation, and which may affect the outcome of rehabilitation.

4.3 Condition of the musculoskeletal system

4.3.1 Condition of the amputation stump(s)

Describe the condition of the amputation stump(s), using the method specified in ISO 8548-2 or ISO 8548-3 as appropriate, and state the laterality of the amputation(s).

4.3.2 Condition of the remaining limbs

Describe any abnormality of the remaining limbs, using the appropriate descriptors as specified in ISO 8548-2 or ISO 8548-3.

4.4 General clinical condition

Disorders of any of the following may affect the rehabilitation of the person who has had an amputation:

- a) the cardiovascular system;
- b) the respiratory system;
- c) the neurological system;
- d) the special senses;
- e) the nutritional status;
- f) the cognitive state;
- g) the mental and psychological status;
- h) other systems.

State whether there is a significant disorder of any of these, and if the effect on the person's performance is moderate or severe, and note any current treatment.

4.5 Motivation and perceived needs

NOTE The motivation and perceived needs of the person have a marked effect upon their rehabilitation. They are interdependent and are influenced by the person's clinical condition, personality and physical, social and cultural environment. Motivation is difficult to describe but both poorly motivated and highly motivated individuals can be recognized by clinicians.

State the clinical impression of the person's motivation and their perceived needs.