

Have you and/or your clinic taken the time to define what qualifies as simple vs complex in your setting?

Meeting as a group to intentionally classify criteria that may move a patient from one category to another can help clarify expectations for students.

Additionally, creating a document such as this will allow all mentors to have similar expectations. There are many ways to organize this information:

### **Example 1**

You could take common diagnoses and add the variables that add complexity:

#### **Simple**

- Gait training for single limb fracture
- Less than two medical lines to manage

#### **Complex**

- Gait training for multiple limb fractures
- Greater than two medical lines to manage

#### **Highly Complex**

- Gait training for multiple limb fractures
- Altered weight-bearing status and cognitive deficits

### **Example 2**

Or, you could categorize the primary psychosocial issues that add complexity to a case:

#### **Simple**

- Musculoskeletal dysfunction of 1 joint

#### **Complex**

- Language barrier (foreign language speaker, ASL, use of interpretive services, etc.)
- Two or more body parts involved
- Lack of transportation and/or technology

#### **Highly Complex**

- Impaired cognitive capacity
- Mental health issues
- No viable discharge destination (homeless, undocumented person)