

DTP 1: Pre-diagnostic interpretation of clinical information. Any term which indicates that the clinician has made some interpretation of the information available where the result of this activity is not sufficiently specific to constitute a diagnosis.

DTP 2: Diagnostic interpretation of clinical information. Same as DTP 1 but with a greater degree of specificity which is sufficient for a diagnosis.

DTP 3: Judgment of the need for further general or clarifying enquiry, not stemming from either prediagnostic or diagnostic interpretations. Where the clinician enquires further about the patient's symptoms, signs, etc. for clarification.

DTP 4: Expecting, searching for, or planning to search for specific features of disease or treatment of disease. Where the clinician shows expectation of information or considers likely certain features of disease, given the information already obtained.

DTP 5: Reinterpretation of clinical information, when no new information has been added. Where an array of clinical information which has already been interpreted in some way becomes amenable to a new (altered or additional) interpretation because of a change in the clinician's own thinking and not because new information has been added. The new interpretation may or may not be related to the old one(s).

DTP 6: Reinterpretation of clinical information arising from the addition of new information. Same as DTP 5 but stemming from the addition of new information.

DTP 7: Enquiry responsive to elicited information. Where the course of the visit as directed by the clinician is determined by, or follows from, the flow of information as presented by the patient.

DTP 8: Enquiry determined by the clinician's interpretation. Where the course of the visit is determined by the clinician's requirement to test his/her active interpretation of the clinical information.

DTP 9: Routine enquiry. Where the clinician conducts the visit according to a routine format as defined by the standard clinical history or any of its components.

DTP 10: Failure to make specific enquiry. Where the clinician identifies, in retrospect, his/her own failure to make a specific enquiry concerning the patient's problem, symptoms, signs, etc.

DTP 11: Failure to make general enquiry. Where the clinician identifies, in retrospect, his/her own failure to make sufficient routine, general or screening enquiry.

DTP 12: Active confirmation of an interpretation. Where the clinician feels that the selected interpretation is confirmed as an actual diagnosis.

DTP 13: Active elimination of an interpretation. Where the clinician eliminates an identified interpretation because of contrary evidence or lack of necessary evidence.

DTP 14: Postponement of either confirmation or elimination of an interpretation with or without stated differential likelihoods. Where an interpretation is neither confirmed nor eliminated but is left under postponed judgment.