Orthotist/prosthetists provide an essential service to consumers with physical disabilities which impact on their mobility, ability to conduct activities of daily living, pain levels, psychological well being, social participation and subsequently quality of life.

The profession promotes consumer independence and the achievement of functional, cosmetic and/or comfort goals, through the provision of orthoses and prostheses. Orthotics and prosthetics is an essential clinical service.

The profession is prominent within public and private hospital settings, community based organisations, aged care facilities and the private health sector. Services are delivered across the entire age spectrum; resulting in services within the primary, secondary and tertiary care sectors.

More specifically, orthotist/prosthetists assess the physical and functional limitations of individuals, interpret and analyse the assessment findings, prescribe and develop the most suitable treatment plan to assist the achievement of client centered goals.

Orthotist/prosthetists may also cast, modify and manufacture orthoses and prostheses, as well as providing any relevant training and education as part of the overall treatment process. Review, adjustment and long term follow up are a necessity within the treatment plan to ensure the optimal fit, function and compatibility and outcome of an orthosis/prosthesis within the treatment goals.

The AOPA endorses the clinical services of practitioners who are dual stream qualified, ie: qualified to practice in both orthotics and prosthetics. Whilst the clinical skills in both areas are suitably transferable, the client groups vary widely and the differences between orthotics and prosthetics are outlined below in order to provide further understanding.
**Prosthetist**

A prosthetist is responsible for the assessment, prescription, design, casting, modification, fabrication, fitting, adjustment and ongoing maintenance of any prosthesis and the associated provision of supporting clinical services, education and management for people who have undergone amputation of one or more segments of the lower or upper limbs. The prosthetist will also be involved in pre-amputation education and assessment and immediate post-operative limb management. The prosthetist remains an integral part of the consumer’s multidisciplinary team throughout the rehabilitation phase and into outpatient care as services will be required throughout the individual’s life.

A prosthesis is a custom designed, fabricated and fitted device which replaces an absent external limb. Provision of a prosthesis occurs in order to improve function and/or cosmesis.

**Orthotist**

An orthotist is responsible for the assessment, prescription, design, cast, modification, fabrication, fitting, adjustment, maintenance and review of all orthoses for the entire body, including provision of supporting clinical services.

An orthosis is a device which applies external forces to the body with the aim of either:
- controlling biomechanical alignment
- supporting limbs
- reducing pain
- enhancing mobility and independence
- protecting a damaged area.

An orthotist treats a wide variety of patient groups with broadly varying clinical presentations across all sectors of the healthcare system. Examples of the diversity of clinical services may include:
- Aged care and the elderly; the provision of orthoses to promote mobility, independence and the maintenance of Activities of Daily Living (ADLs)
- Acute and post surgical care; the provision of orthoses to assist in recovery and healing
- Paediatrics; promoting mobility and independence for children with physical and developmental disabilities
- Chronic condition management; supporting and relieving discomfort from symptoms, or to control the progression of deformity and enhance mobility
- Complex physical disability management; including people with a multitude of physical presentations, of varying complexity. This may include physical disabilities associated with trauma, neurological, degenerative and genetic conditions.

**entry level qualification for the profession**

After almost two decades of education at the Bachelor Degree level, the Australian orthotic and prosthetic profession shifted to a minimum education standard of Masters in 2009. This is currently only offered at La Trobe University, Melbourne, Australia.

An Australia Qualification Framework Level 7 (Bachelor Degree) is required for entry to the orthotic/prosthetics occupation in Australia. This is reflected in public sector awards and the AOPA membership eligibility criteria. The only Bachelor Degree accepted for entry into the profession is a Bachelor in Prosthetics and Orthotics.

**Certified Orthotist/Prosthetist (CPO-AOPA)**

An AOPA Certified orthotist/prosthetist upholds the AOPA Code and Professional Conduct (2012), Competency Standards (2003), and adheres to the rules and by-laws of the Association. Further to this, they demonstrate a commitment to lifelong learning through participation in the Continuing Professional Development (CPD) program. Members are certified on an annual basis through submission of their CPD log. In the current age of rapid technological development and changing healthcare environment, commitment to the CPD program is vital.

**The Australian Orthotic Prosthetic Association Inc. (AOPA) May 2013**
The following broad tasks have been identified as those which can reasonably be expected within the graduate entry level practitioner’s skill set and from all Certified AOPA members (CPO-AOPA):

- assessing clients’ emotional, psychological, developmental and physical capabilities using clinical observations and standardised tests
- administering muscle, nerve, joint and functional ability tests to identify and assess physical problems of patients
- subjectively and objectively assessing clients’ functional potential in their home, leisure, work and school environments, and recommending appropriate technology to maximise their performance
- designing, prescribing and fitting orthoses and prostheses to meet the clients’ needs, including their functional, emotional, psychological and developmental goals
- manufacturing of custom prostheses and orthoses in accordance with the Therapeutic Goods Medical Devices Regulations (TGA, 2002)
- providing training and education for the client and appropriate family members/carers in relation to the use and care of a prosthesis or orthosis
- continually monitoring, assessing and evaluating orthoses and prostheses in relation to treatment outcomes and possible alternatives
- adjusting and modifying orthoses and prostheses to accommodate minor changes to the client’s neuro-muscular skeletal system
- provision of relevant therapy, such as education, movement advice, gait training and exercises to support orthotic and prosthetic care or assist in treatment goals
- working with other Health Professionals to provide holistic case management; including team consultation and appropriate referrals
- working with other professionals in providing specialist advice to specific client groups such as those requiring third-party compensation and medico-legal representation
- recording clients’ progress and maintaining professional relationships in accordance with relevant legislative requirements, ethical guidelines and organisational policies and procedures

extended scope of practice

This document does not intend to limit an orthotic/prosthetic practitioner’s scope of practice. The AOPA acknowledges that scope of practice is continually evolving and is ultimately dependent upon individual experience. The team setting within which a practitioner participates will greatly affect their required range of skills in order to achieve optimal client outcomes. Expertise may be consciously developed well beyond entry level within a specialist area through further available training, education and experience. Should practitioners extend their scope to tasks commonly performed by other health care professionals or beyond those listed within this document, they should be able to provide evidence that the necessary training and/or supervision has occurred.

Supervision of undergraduate and work experience students is required within the profession. This, along with supervision, direction and mentoring of new graduate practitioners can be considered extended scope of practice as it is not expected at the graduate entry level.
All members of the AOPA are bound by the Ethical Code and Professional Conduct (2010) document. Any concerns, complaints and/or compliments regarding the actions and/or professional conduct of an AOPA member should be raised with the AOPA Office and processed according to established procedures.

This document supersedes any previous versions and is valid until the next review two years post publication.

Date of publication: May 2013
Date of review: May 2015

PO Box 1219 Greythorn Vic 3104
P 03 98164620    f 03 9816 4305
TF 1300 668 194
e admin@aopa.org.au
w www.aopa.org.au
Reg No A0020154E   ABN 30 174 229 615