'Metrics' is generally identified with a science concerning quantitation and calculations. Many mathematical formulas have unknowingly entered into medical practice back door through computer-based systems that directly produce results without user being aware of the back-end calculations. Examples such as bispectral index, HPLC and evoked potential can be cited that hide complex calculation. Clinimetrics goes beyond these calculations and seeks to place the quantities and calculations in clinical context so that decisions in the interest of the patient can be taken on the basis of measurements after assessing their implications. In a way, this takes emotion away from the decisions that may be difficult to justify logically. You would agree that logic is the cornerstone for medical decisions.

Indicators, indexes and scores can be considered components of clinimetrics but major focus of this gradually developing science is on the methodology so that the tools so developed indeed have requisite applicability. It concerns with the quality of measuring instruments and looks at the process of the development of tools more than their final format.

Reliability, validity and responsiveness of measuring tools are integral part of their quality. A measuring tool should also be sufficiently sensitive to detect clinically relevant improvements attributable to therapeutic interventions. Close collaboration between clinicians, biostatisticians and epidemiologists is required for development of clinimetrics as a science of consequence. For details see the following.

**Indicators, indexes and scores**

**Medical scoring**