

HOUSE BILL REPORT

HB 2590

As Reported by House Committee On:
Health Care

Title: An act relating to physical therapy.

Brief Description: Modifying the scope of care provided by physical therapists.

Sponsors: Representatives Ruderman, Cody, DeBolt, Veloria, Schual-Berke and Kagi.

Brief History:

Committee Activity:

Health Care: 1/31/02, 2/8/02 [DPS].

Brief Summary of Substitute Bill

- Clarifies the scope of practice of licensed physical therapists, including the purchase and administration of specified medications and other drugs prescribed by a physician, wound debridement, the provision of prefabricated orthoses and other services.
- Authorizes the use of physical therapy assistants, aides, and other assistive personnel.
- Updates the physical therapy practice act generally.

HOUSE COMMITTEE ON HEALTH CARE

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 11 members: Representatives Cody, Chair; Schual-Berke, Vice Chair; Campbell, Ranking Minority Member; Alexander, Ballasiotes, Benson, Conway, Darneille, Edwards, Ruderman and Skinner.

Staff: John Welsh (786-7133).

Background:

The practice of physical therapy is licensed by the Department of Health. The Board of Physical Therapy acts as the disciplinary authority for unprofessional conduct under the Uniform Disciplinary Act.

Physical therapy provides for the treatment of bodily or mental conditions through physical, chemical, or other properties, such as electricity, sound, massage, and therapeutic exercise, including posture and rehabilitative procedures, tests of neuromuscular function, treatment in consultation with authorized health practitioners, treatment of neuromuscular or musculoskeletal conditions limited to the foot or ankle by referral from authorized health practitioners, and supervision of trained supportive personnel. The use of X-ray and radium for diagnostic purposes, electricity for surgical purposes, and manipulation the spine and its immediate articulations are excluded from the scope of practice.

The use of physical therapy assistants, aides, or other assistive personnel is not authorized.

Summary of Substitute Bill:

The scope of physical therapy is based on movement science and includes: (1) examining individuals with impairments, functional limitations in movement, and disability for diagnosis, and prognosis; (2) alleviating impairments and limitations through therapeutic interventions, including exercise, manual therapy and joint manipulation, massage, supportive devices related to postural control and mobility, airway clearance techniques, physical agents or modalities, mechanical and electrotherapeutic modalities, and patient-related instruction; (3) functional evaluation of a patient with an orthosis or prosthesis, and providing prefabricated upper limb, knee, or ankle-foot orthoses and unregulated assistive devices; (4) performing wound debridement and management; (5) reducing risk of injury and promotion of fitness; and (6) engaging in administration, consultation, education, and research.

Physical therapy assistants, aides, and other assistive personnel are authorized to perform delegated tasks under supervision and they are responsible for patient care.

It is unlawful to practice physical therapy without a license or represent oneself as a licensed physical therapist. Exemptions from licensure are provided for other credentialed health professionals practicing within their authorized scope, for physical therapy students, for physical therapists practicing under federal auspices, and for physical therapists from other jurisdictions participating in an educational seminar.

No persons may practice or hold themselves out as physical therapists without a license. Physical therapists must refer appropriate patients to other appropriate health practitioners for required services beyond the scope of physical therapy.

A physical therapist may perform electoneuromyographic examinations for testing neuromuscular functions, and may store, purchase, and administer specified medications, and may administer other drugs prescribed by an authorized health provider. The

secretary may adopt rules authorizing the administration of other controlled substances, in consultation with the pharmacy board and medical commission.

Substitute Bill Compared to Original Bill:

Physical therapy provides specified direct formed prefabricated devices. Physical therapist assistants must complete a board-approved educational program. Aides receive on-going on-the-job training. References to specified drugs are corrected, and other drugs may be approved by authorized health providers.

Appropriation: None.

Fiscal Note: Not Requested.

Effective Date of Substitute Bill: Ninety days after adjournment of session in which bill is passed.

Testimony For: The practice of physical therapy has advanced with improvements in the science of rehabilitation. It's important to clarify more precisely the scope of practice, and expand therapies to include the use of certain drugs and wound debridement. The practice act needs to include exemptions from licensure under certain conditions, and accord physical therapy with the licensed practice of prosthetics and orthotics.

Testimony Against: The use of drugs in physical therapy is questionable, as well as the treatment of wounds.

Testified: (Support) Sharon McCallum, Pat Muchmore, and Jill Floberg, Physical Therapy Association of Washington; Katherine Stewart, Washington Occupational Therapy Association; Michael Podrasky and Henry Bennett, Washington Orthotics and Prosthetics Association; and Sue Shoblom, Department of Health.

(Possible Concerns) Frank Morrison, Washington State Podiatric Medical Association.

(Opposed) Carl Nelson, Washington State Medical Association.