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**IDAPA 22
TITLE 01
CHAPTER 05**

**22.01.05 - RULES GOVERNING LICENSURE OF PHYSICAL THERAPISTS
AND PHYSICAL THERAPIST ASSISTANTS**

000. LEGAL AUTHORITY (RULE 0).

Pursuant to Title 54, Chapter 22, Idaho Code, the Idaho State Board of Medicine is authorized to promulgate rules to govern the licensure of Physical Therapists and Physical Therapist Assistants. (3-13-02)

001. TITLE AND SCOPE (RULE 1).

The rules shall be cited as IDAPA 22.01.05, "Rules Governing Licensure of Physical Therapists and Physical Therapist Assistants". (3-13-02)

002. WRITTEN INTERPRETATIONS (RULE 2).

Written interpretations of these rules in the form of explanatory comments accompanying the notice of proposed rule-making that originally proposed the rules and review of comments submitted in the rulemaking process in the adoption of these rules are available for review and copying at cost from the Board of Medicine, 1755 Westgate Drive, Suite 140, Box 83720 Boise, Idaho 83720-0058. (3-13-02)

003. ADMINISTRATIVE APPEAL (RULE 3).

All contested cases shall be governed by the provisions of IDAPA 04.11.01, "Idaho Rules of Administrative Procedures of the Attorney General" and IDAPA 22.01.07, "Rules of Practice and Procedure of the Board of Medicine". (3-13-02)

004. INCORPORATION BY REFERENCE (RULE 4).

There are no documents incorporated by reference into this rule. (3-13-02)

005. OFFICE -- OFFICE HOURS -- MAILING ADDRESS AND STREET ADDRESS (RULE 5).

The central office of the Board of Medicine will be in Boise, Idaho. The Board's mailing address, unless otherwise indicated, will be Idaho State Board of Medicine, Statehouse Mail, Boise, Idaho 83720. The Board's street address is 1755 Westgate Drive, Suite 140, Boise, Idaho 83704. The telephone number of the Board is (208) 327-7000. The Board's facsimile (FAX) number is (208) 377-7005. The Board's office hours for filing documents are 8 a.m. to 5 p.m. (3-13-02)

006. PUBLIC RECORD ACT COMPLIANCE (RULE 6).

These rules have been promulgated according to the provisions of Title 67, Chapter 52, Idaho Code, and are public records. (3-13-02)

007. FILING OF DOCUMENTS - NUMBER OF COPIES (RULE 7).

All documents in rulemaking or contested case proceedings must be filed with the office of the Board. The original and ten (10) copies of all documents must be filed with the office of the Board. (3-13-02)

008. -- 009. (RESERVED).

010. DEFINITIONS (RULE 10).

- 01. Board.** The Idaho State Board of Medicine. (3-13-02)
- 02. Committee.** The Physical Therapy Advisory Committee. (3-13-02)
- 03. Director.** The executive director of the Idaho State Board of Medicine. (3-13-02)
- 04. Licensee.** Persons licensed in accordance with chapter 22, Title 54, Idaho Code. (3-13-02)
- 05. Physical Therapist.** A person who meets all the requirements of chapter 22, Title 54, Idaho Code,

and who engages in the practice of physical therapy. (3-13-02)

06. Physical Therapist Assistant. A person who meets the requirements of Chapter 22, Title 54, Idaho Code, and who performs physical therapy procedures and related tasks that have been selected and delegated only by a supervising physical therapist. (3-13-02)

07. Practice Of Physical Therapy. The exercise of the profession of physical therapy by a person who engages in the following health care activities: (3-13-02)

a. Examining, evaluating and testing individuals with mechanical, physiological and developmental impairments, functional limitations, and disability or other health and movement related conditions in order to determine a diagnosis for physical therapy and prognosis for physical therapy, plan of therapeutic intervention, and to assess the ongoing effects of intervention. (3-13-02)

b. Alleviating impairments and functional limitations by designing, implementing and modifying therapeutic interventions that include, but are not limited to: therapeutic exercise; functional mobility training in self-care and in-home, community or work reintegration; manual therapy; assistive, adaptive, protective and supportive devices and equipment; bronchopulmonary hygiene; debridement and wound care; physical agents or modalities; mechanical and electrotherapeutic modalities; and patient related instruction; and to reduce the risk of injury, impairment, functional limitation, and disability, including the promotion and maintenance of fitness, health, and quality of life in all age populations. The practice of physical therapy shall not include the use of radiology, surgery or medical diagnosis of disease. (3-13-02)

c. Engaging in administration, consultation, testing, education and research as related to Subsection 010.07.a. and 010.07.b. of these rules. (3-13-02)

08. Supportive Personnel. A person, or persons, who are neither a physical therapist or a physical therapist assistant, but who are employed by and/or trained under the direction of a physical therapist to perform designated non-treatment patient related tasks and routine physical therapy tasks. (3-13-02)

09. Non-Treatment Patient Related Tasks. Actions and procedures related to patient care that do not involve direct patient treatment or direct personal supervision, but do require a level of supervision not less than general supervision, including, but not limited to: treatment area preparation and clean-up, equipment set-up, heat and cold pack preparation, preparation of a patient for treatment by a physical therapist or physical therapist assistant, transportation of patients to and from treatment, and assistance to a physical therapist or physical therapist assistant when such assistance is requested by a physical therapist or physical therapist assistant when safety and effective treatment would so require. (3-13-02)

10. Routine Physical Therapy Tasks. Actions and procedures within the scope of practice of physical therapy, which do not require the special skills or training of a physical therapist or physical therapist assistant, rendered directly to a patient by supportive personnel at the request of and under the direct personal supervision of a physical therapist or physical therapist assistant. (3-13-02)

11. Testing. (3-13-02)

a. Standard methods and techniques used in the practice of physical therapy to gather data about individuals including: (3-13-02)

i. Electrodiagnostic and electrophysiological measurements; (3-13-02)

ii. Assessment or evaluation of muscle strength, force, endurance and tone; (3-13-02)

iii. Reflexes; (3-13-02)

iv. Automatic reactions; (3-13-02)

v. Posture and body mechanics; (3-13-02)

- vi. Movement skill and accuracy; (3-13-02)
 - vii. Joint range of motion and stability; (3-13-02)
 - viii. Sensation; (3-13-02)
 - ix. Perception; (3-13-02)
 - x. Peripheral nerve function integrity; (3-13-02)
 - xi. Locomotor skills; (3-13-02)
 - xii. Fit, function and comfort of prosthetic, orthotic, and other assistive devices; (3-13-02)
 - xiii. Limb volume, symmetry, length and circumference; (3-13-02)
 - xiv. Clinical evaluation of cardiac and respiratory status to include adequacy of pulses, noninvasive assessment of peripheral circulation, thoracic excursion, vital capacity, and breathing patterns; (3-13-02)
 - xv. Vital signs such as pulse, respiratory rate, and blood pressure; (3-13-02)
 - xvi. Activities of daily living; and the physical environment of the home and work place; and (3-13-02)
 - xvii. Pain patterns, localization and modifying factors; and (3-13-02)
 - xviii. Photosensitivity. (3-13-02)
- b.** Specifically excluded are the ordering of electromyographic study, electrocardiography, thermography, invasive vascular study, selective injection tests, or complex cardiac or respiratory function studies without consultation and direction of a physician. (3-13-02)
- 12. Individuals.** Human beings. (3-13-02)
- 13. Functional Mobility Training.** Includes gait training, locomotion training, and posture training. (3-13-02)
- 14. Manual Therapy.** Skilled hand movements to mobilize or manipulate soft tissues and joints for the purpose of: (3-13-02)
- a.** Modulating pain, increasing range of motion, reducing or eliminating soft tissue swelling, inflammation or restriction; (3-13-02)
 - b.** Inducing relaxation; (3-13-02)
 - c.** Improving contractile and non-contractile tissue extensibility; and (3-13-02)
 - d.** Improving pulmonary function. (3-13-02)
- 15. Physical Agents Or Modalities.** Thermal, acoustic, radiant, mechanical, or electrical energy used to produce physiologic changes in tissues. (3-13-02)
- 16. General Supervision.** A physical therapist's availability at least by means of telecommunications, which does not require a physical therapist to be on the premises where physical therapy is being provided, for the direction of a physical therapist assistant. (3-13-02)
- 17. Direct Supervision.** A physical therapist's or physical therapist assistant's physical presence and

availability to render direction in person and on the premises where physical therapy is being provided. (3-13-02)

18. Direct Personal Supervision. A physical therapist's or physical therapist assistant's direct and continuous physical presence and availability to render direction, in person and on the premises where physical therapy is being provided. The physical therapist or physical therapist assistant must have direct contact with the patient during each session and assess patient response to delegated treatment. (3-13-02)

19. Telecommunications. Any means of transferring audio, video, or data information from a distant location for direction of the treatment plan of care. (3-13-02)

20. Supervising Physical Therapist. The physical therapist who developed and recorded the initial plan of care and/or who has maintained regular treatment sessions with a patient, or such physical therapist's designation of another physical therapist, if the physical therapist who developed and recorded the initial plan of care or maintained regular treatment sessions is not available to provide direction at least by means of telecommunications. (3-13-02)

21. Licensure. The act of acquiring legal certification as a physical therapist or physical therapist assistant. (3-13-02)

22. Nationally Accredited School. A school or course of physical therapy or physical therapist assistant with a curriculum approved by: (3-13-02)

a. The American Physical Therapy Association (APTA) from 1926 to 1936; or the APTA Accreditation Commission; or (3-13-02)

b. The Council on Medical Education and Hospitals of the American Medical Association from 1936 to 1960; or (3-13-02)

c. An Accrediting agency recognized by the U.S. Commissioner of Education, the Council on Postsecondary Accreditation, or both. (3-13-02)

011. -- 015. (RESERVED).

016. SUPERVISION (RULE 16).

A physical therapist shall supervise and be responsible for patient care given by physical therapist assistants, supportive personnel, physical therapy students, and physical therapist assistant students. (3-13-02)

01. Procedures And Interventions Performed Exclusively By Physical Therapist. The following procedures and interventions shall be performed exclusively by a physical therapist: (3-13-02)

a. Interpretation of a referral for physical therapy if a referral has been received. (3-13-02)

b. Performance of the initial patient evaluation and problem identification including a diagnosis for physical therapy and a prognosis for physical therapy. (3-13-02)

c. Development or modification of a treatment plan of care which is based on the initial evaluation and which includes long-term and short-term physical therapy treatment goals. (3-13-02)

d. Assessment of the competence of physical therapist assistants, physical therapy students, physical therapist assistant students, and supportive personnel to perform assigned procedures, interventions and routine tasks. (3-13-02)

e. Selection and delegation of appropriate portions of treatment procedures, interventions and routine physical therapy tasks to the physical therapist assistants, physical therapy students, physical therapist assistant students, and supportive personnel. (3-13-02)

f. Performance of a re-evaluation when any change in a patient's condition occurs that is not

consistent with the physical therapy treatment plan of care, patient's anticipated progress, and physical therapy treatment goals. (3-13-02)

g. Performance and documentation of a discharge evaluation and summary of the physical therapy treatment plan. (3-13-02)

02. Supervision Of A Physical Therapist Assistant. A physical therapist assistant shall be supervised by a physical therapist by no less standard than general supervision. (3-13-02)

a. A physical therapist assistant shall not change a procedure or intervention unless such change of procedure or intervention has been included within the treatment plan of care as set forth by a physical therapist. (3-13-02)

b. A physical therapist assistant may not continue to provide treatment as specified under a treatment plan of care if a patient's condition changes such that further treatment necessitates a change in the established treatment plan of care unless the physical therapist assistant has consulted with the supervising physical therapist prior to the patient's next appointment for physical therapy, and a re-evaluation is completed by the supervising physical therapist. (3-13-02)

c. A patient re-evaluation must be performed and documented by the supervising physical therapist a minimum of every five (5) visits or once a week if treatment is performed more than once per day. (3-13-02)

d. A physical therapist assistant may refuse to perform any procedure, intervention, or task delegated by a physical therapist when such procedure, intervention, or task is beyond the physical therapist assistant's skill level or scope of practice standards. (3-13-02)

e. A physical therapist shall not be required to co-sign any treatment related documents prepared by a physical therapist assistant, unless required to do so in accordance with law, or by a third-party. (3-13-02)

03. Supervision Of Supportive Personnel. Any routine physical therapy tasks performed by supportive personnel shall require direct personal supervision. (3-13-02)

04. Supervision Of Physical Therapy And Physical Therapist Assistant Students. Supervision of physical therapy students and physical therapist assistant students shall require a degree of supervision of no less than direct supervision. (3-13-02)

a. A physical therapy student shall only be supervised by the direct supervision of a physical therapist. (3-13-02)

b. A physical therapy student shall be required to sign all treatment notes with the designation "SPT" after their name, and all such signatures shall require the co-signature of the supervising physical therapist. (3-13-02)

c. A physical therapist assistant student shall be required to sign all treatment notes with the designation "SPTA" after their name, and all such signatures shall require the co-signature of the supervising physical therapist or supervising physical therapist assistant. (3-13-02)

05. Supervision Ratios. (3-13-02)

a. At no time during the treatment of a patient or patients for physical therapy shall the number of physical therapist assistants providing such treatment be more than twice in number of such supervising physical therapist(s) providing physical therapy treatment at any physical therapy practice or site. (3-13-02)

b. At no time during the treatment of a patient or patients for physical therapy shall the number of supportive personnel performing routine physical therapy tasks be more than twice in number of such supervising physical therapist(s) or supervising physical therapist assistant(s) providing physical therapy treatment at any physical therapy practice or site. (3-13-02)

c. At no time during the treatment of a patient or patients for physical therapy shall the number of physical therapy students performing delegated supervised physical therapy tasks be more than twice in number of such supervising physical therapist(s) providing physical therapy treatment at any physical therapy practice or site. (3-13-02)

d. At no time during the treatment of a patient or patients for physical therapy shall the number of physical therapist assistant students performing delegated supervised physical therapy tasks be more than twice in number of such supervising physical therapist(s) or supervising physical therapist assistant(s) providing physical therapy treatment at any physical therapy practice or site. (3-13-02)

e. At no time during the treatment of a patient or patients for physical therapy shall the number of physical therapist assistants, physical therapy students, physical therapist assistants students, and supportive personnel, or a combination thereof, performing delegated supervised physical therapy or routine physical therapy tasks be more than three (3) times in number of such physical therapist(s) providing physical therapy treatment at any physical therapy practice or site; nor shall the number of physical therapist assistant students or supportive personnel, or a combination thereof, performing delegated and supervised physical therapy tasks or routine physical therapy tasks be more than twice in number of such physical therapist assistant(s) providing physical therapy treatment at any physical therapy practice or site. (3-13-02)

017. -- 019. (RESERVED).

020. PHYSICAL THERAPY ADVISORY COMMITTEE (RULE 20).

Pursuant to Section 54-2205, Idaho Code, the committee shall work in conjunction with the board to perform the following duties and functions: (3-13-02)

01. Meetings. The committee shall meet not less than two (2) times per year. A majority of committee members present shall constitute a quorum for the conduct of committee business. The director or the director's designee shall keep written minutes of the committees meetings, such minutes to be signed by the committee chairperson, and submitted to the director. (3-13-02)

02. Chairperson. Each committee appointee shall serve as chairperson of the committee during the final year of their appointed and reappointed term. In the event of a vacancy in the chairpersonship, for any reason, the committee shall, by majority vote, select a chairperson. If a chairperson cannot be selected by majority vote, then the director shall appoint an appointee of the committee as chairperson. Such term, whether appointed by the director, or selected by majority vote of the committee, shall cease on July 1 of the year following such appointment or selection. The board shall provide for the timely orientation of a new appointee to the committee regarding the duties and functions of the committee as set forth in this chapter and Chapter 22, Title 54, Idaho Code. (5-3-03)

03. Evaluation Of Qualifications. The committee shall review all applications for licensure referred to the committee by the director, and shall make a recommendation to the board regarding any applicant's application for licensure, character and fitness, education, training, and any other qualifications deemed relevant by the board or committee for licensure. (3-13-02)

04. Examinations. The committee shall administer all examinations of applicants for licensure by advising the board of acceptable national examinations for licensure, and recommending to the board appropriate passing scores for such examinations. (3-13-02)

a. An applicant who fails any board authorized examination may retake a board authorized examination one (1) additional time without reapplication for licensure, provided that the second attempt occurs within six (6) months from the notification of the first failure. (5-3-03)

b. If an applicant applying for licensure has failed any board authorized examination two (2) or more times, the committee shall make a determination if the applicant shall reapply for licensure or if additional clinical training or coursework is needed, and recommend to the board such reapplication or such additional clinical training or coursework for such applicant. (5-3-03)

c. If licensure is by endorsement, the minimum passing score for the examination, which must be

substantially similar to a board authorized examination, required by the other state must be equal to or higher than the minimum passing score in Idaho for the same year. (5-3-03)

05. Issuing And Renewing Licenses. If the requirements for licensure as set forth in Chapter 22, Title 54, Idaho Code have been met, the committee shall issue and renew licenses, and submit such licenses to the director for distribution to the licensee, upon board approval. (3-13-02)

a. The committee shall examine any application for a license by a former licensee whose license has been expired for a period of three (3) consecutive years, and shall recommend to the board whether such applicant can demonstrate competency in the practice of physical therapy, and recommend whether such applicant should be required to take an examination or remedial courses, or both, prior to issuance of a license. (3-3-03)

06. Investigations And Discipline. The committee shall review all complaints received by the board regarding a licensee. If the board finds that probable cause exists to institute proceedings against the licensee and determines that the institution of proceedings against the licensee are appropriate, the committee shall serve as an advisor to the board with such proceedings. (3-13-02)

a. Proceedings instituted against such licensee shall be conducted in accordance with the procedures established in Chapter 22, Title 54, Idaho Code, Chapter 52, Title 67, Idaho Code, and Chapter 18, Title 54, Idaho Code. (3-13-02)

b. Upon any entering of findings of fact or conclusions of law entered by the board or its designee, or prior to the signing of any stipulation and order, the committee shall review such findings of fact or conclusions of law, or stipulation and order rendered during such proceedings and recommend to the board the appropriate disciplinary action or penalty, as those disciplinary actions and penalties are set forth in Section 54-2220, Idaho Code. (3-13-02)

07. Maintenance Of List. The committee shall maintain a current list of persons licensed in accordance with Chapter 22, Title 54, Idaho Code. Such list shall include the licensee's name, business address, business telephone number, and license number. (3-13-02)

08. Rules. The committee may submit proposed rules to the board, and shall review all proposed rules relating to these rules governing the licensure of physical therapists and physical therapist assistants contemplated by the board prior to their adoption, and provide comment and recommendation thereon. (3-13-02)

09. Information. In conjunction with the board and director, the committee shall provide such information as follows: (3-13-02)

a. At least thirty (30) days prior to their effect, information shall be provided to all licensees regarding changes in Chapter 22, Title 54, Idaho Code, and changes to these administrative rules. (3-13-02)

b. Information shall be provided to the general public, upon request, regarding the disciplinary proceeding process. (3-13-02)

c. At least annually, all licensees shall be provided information regarding any board or attorney general interpretations of Chapter 22, Title 54, or these administrative rules, and disciplinary actions taken or penalties assessed against a licensee, unless such disciplinary action is a censure or reprimand by informal admonition for minor misconduct in accordance with Section 54-2220(1), Idaho Code. (3-13-02)

021. -- 030. (RESERVED).

031. APPLICATION (RULE 31).

Each applicant shall submit a completed written application to the board on forms provided by the Board together with an application and examination fees. The application shall be verified under oath and shall require the following information: (3-13-02)

01. Education. The educational background of the application; (3-13-02)

02. Evidence Of Graduation. Evidence of graduation from an approved physical therapy curriculum; or an approved physical therapist assistant's curriculum; (3-13-02)

03. Criminal Convictions. The disclosure of any criminal conviction or charges against the applicant other than minor traffic offenses; (3-13-02)

04. Current Mental And Physical Status. The current mental and physical condition of the applicant together with disclosure of any previous serious physical or mental illness; (3-13-02)

05. Disciplinary Action. The disclosure of any disciplinary action against the applicant by any professional regulatory agency; (3-13-02)

06. License Or Registration Denial. The disclosure of the denial of registration or licensure by any state or district regulatory body; (3-13-02)

07. References. Two (2) references from persons having personal knowledge of the applicant; (3-13-02)

08. Photograph. An un-mounted photograph of the applicant, three inches by three inches (3" x 3"), taken not more than one (1) year prior to the date of application; and (3-13-02)

09. Other Information. Such other information as the board deems necessary to identify and evaluate the applicant's credentials. (3-13-02)

032. FEES (RULE 32).

01. Fee Table. (3-13-02)

a. The fee for the initial licensure of a physical therapist shall be one hundred and twenty dollars (\$120) and the renewal fee shall be sixty-five dollars (\$65). (5-3-03)

b. The fee for the initial licensure of a physical therapist assistant shall be eighty dollars (\$80) and the renewal fee shall be forty-five dollars (\$45). (5-3-03)

c. The examination fee shall equal the cost of the examination plus an administrative fee of forty dollars (\$40). (3-13-02)

d. A reinstatement fee shall be thirty-five dollars (\$35). (3-13-02)

02. Application Fees And Refunds. Necessary fees shall accompany applications. Fees shall not be refundable. (3-13-02)

03. Extraordinary Expenses. In those situations where the processing of an application requires extraordinary expenses, the board may charge the applicant reasonable fees to cover all or part of the extraordinary expenses. (3-13-02)

033. LICENSE RENEWAL (RULE 33).

01. License Renewal. Each license to practice as a physical therapist or physical therapist assistant shall be issued for a period of not less than one (1) year or more than five (5) years. Each license shall set forth its expiration date on the face of the certificate. The Board shall collect a fee for each renewal year of a license. The failure of any licensee to renew his or her license shall not deprive such person of the right to renewal, except as provided for herein and Section 54-2214, Idaho Code. (5-3-03)

02. Time For Application. All applications for license renewal shall be received by the board no later than June 30 of the year in which the license has expired. Applications received after June 30 of the year in which the

license expires shall not deprive such person of the right to renewal, unless such license shall have been expired for a period equal to or exceeding three (3) consecutive years. (3-13-02)

a. An application for renewal which has not been expired for a period of three (3) consecutive years, but which is received after June 30 of the year in which the license has expired, shall require a reinstatement fee of thirty-five dollars (\$35) in addition to the renewal fee of sixty-five dollars (\$65). (5-3-03)

b. An application for renewal of a license which has been expired for a period of three (3) consecutive years shall not be eligible for renewal, but shall require a re-application for a licensure, payment of a licensure fee, successful demonstration to the board of competency in the practice of physical therapy. The board may require the applicant for licensure to take an examination or remedial courses, or both, prior to issuing a license. (5-3-03)

034. DISCIPLINARY PENALTY (RULE 34).

If the board finds, after instituting proceedings against a licensee, that disciplinary actions or penalties are warranted, the board may impose a reasonable fine for each violation in an amount not to exceed five-hundred dollars (\$500) for each violation, and may, in addition to such fine, assess reasonable costs and attorney's fees. (3-13-02)

035. CODE OF ETHICS (RULE 35).

Physical therapists and physical therapist assistants are responsible for maintaining and promoting ethical practice in accordance with the ethical principles set forth in Appendix A and Appendix B to these rules. (3-13-02)

036. -- 999. (RESERVED).

APPENDIX A - PHYSICAL THERAPIST CODE OF ETHICS

Preamble

This Code of Ethics of the American Physical Therapy Association sets forth principles for the ethical practice of physical therapy. All physical therapists are responsible for maintaining and promoting ethical practice. To this end, the physical therapist shall act in the best interest of the patient/client. This Code of Ethics shall be binding on all physical therapists.

Principle 1

A physical therapist shall respect the rights and dignity of all individuals and shall provide compassionate care.

Principle 2

A physical therapist shall act in a trustworthy manner toward patients/clients and in all other aspects of physical therapy practice.

Principle 3

A physical therapist shall comply with laws and regulations governing physical therapy and shall strive to effect changes that benefit patients/clients.

Principle 4

A physical therapist shall exercise sound professional judgment.

Principle 5

A physical therapist shall achieve and maintain professional competence.

Principle 6

A physical therapist shall maintain and promote high standards for physical therapy practice, education, and research.

Principle 7

A physical therapist shall seek only such remuneration as is deserved and reasonable for physical therapy services.

Principle 8

A physical therapist shall provide and make available accurate and relevant information to patients/clients about their care and to the public about physical therapy services.

Principle 9

A physical therapist shall protect the public and the profession from unethical, incompetent, and illegal acts.

Principle 10

A physical therapist shall endeavor to address the health needs of society.

Principle 11

A physical therapist shall respect the rights, knowledge, and skills of colleagues and other health care professionals.

APPENDIX B - PHYSICAL THERAPIST ASSISTANT CODE OF ETHICS

Preamble

This document of the American Physical Therapy Association sets forth standards for the ethical conduct of the physical therapist assistant. All physical therapist assistants are responsible for maintaining high standards of conduct while assisting physical therapists. The physical therapist assistant shall act in the best interest of the patient/client. These standards of conduct shall be binding on all physical therapist assistants.

Standard 1

A physical therapist assistant shall respect the rights and dignity of all individuals and shall provide compassionate care.

Standard 2

A physical therapist assistant shall act in a trustworthy manner toward patients/clients.

Standard 3

A physical therapist assistant shall provide selected physical therapy interventions only under the supervision and direction of a physical therapist.

Standard 4

A physical therapy assistant shall comply with laws and regulations governing physical therapy.

Standard 5

A physical therapist assistant shall achieve and maintain competence in the provision of selected physical therapy interventions.

Standard 6

A physical therapist assistant shall make judgments that are commensurate with his or her educational and legal qualifications as a physical therapist assistant.

Standard 7

A physical therapist assistant shall protect the public and the profession from unethical, incompetent, and illegal acts.

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