On October 18, 19, and 20, 1997, the Federation of State Boards of Physical Therapy (FSBPT) conducted its Fall Educational Program for Licensure Boards and Administrators. John M. Silverstein (Board Attorney), Ben F. Massey, Jr., PT (Executive Director), and I represented the North Carolina Board of Physical Therapy Examiners (NCBPTE) at this program.

Mr. Massey, Parliamentarian for the Council of Board Administrators of the FSBPT, played a major role in the newly developing organization’s meeting. Ben was in charge of developing and presenting the Bylaws to the Council for their approval. As usual, Ben did an outstanding presentation and the proposed Bylaws were unanimously adopted. We are very proud of Ben in his new elected position in the FSBPT.

John Silverstein and I attended a mock hearing for a contested case regarding a physical therapist who had violated a state’s practice act. The session was most informative as it demonstrated how other Board’s conduct contested cases. The following session was a roundtable discussion of challenging ethical issues. The breadth of expertise of fellow Board members from across the country greatly enhanced our knowledge of how other states address complaints and enriched our perspectives on contested cases and penalties for practice act violations.

The major focus of the program was “practice act violations.” Other states have noted an alarming increase in violations. North Carolina has also experienced a significant increase in complaints and violations over the past few years. The knowledge and insight that we gained from attending this program is directly applicable to many of the issues that the Board is currently facing in North Carolina.

In closing, I want to reiterate the concluding remarks that I made in the Chairman’s Message of Issue 18, Spring 1997 regarding the vitally important issue of improper physical therapy practices: “Only when we take pride in ourselves and our profession do we consistently deliver a professional line of service and only then will complaints to the Board again decline.”
Meet the Staff

Pamela P. Kelly joined the Board staff in September 1997 as an Office Assistant. She relocated to Durham from California in 1980 and has two children. Ms. Kelly works part time, assisting in the renewal process and the licensure of new applicants. She provides additional support to the staff by answering the phones, handling requests for applications and performing general office.

NORTH CAROLINA PHYSICAL THERAPY
Board Orders / Consent Orders / Other Board Actions
August, September, October, November, 1997

Suspensions (1)

Everette, Mark A., PTA
Location: Emporia, VA
License #: PTA 1228
Conduct: Provided false information on 1998 Renewal Form by failing to disclose disciplinary action in Virginia.
Discipline: 11/20/97 Order executed. License summarily suspended pending hearing.

Private Reprimands (4)

One (1) private reprimand was issued to a physical therapist assistant for failure to document instructions of major modifications of treatment that were requested by the physical therapist.

One (1) private reprimand was issued to a licensee for failure to respond to repeated requests by the Board asking that she provide proof that she did not engage in the practice of physical therapy for a period of time when she had not renewed her license.

One (1) private reprimand was issued to a licensee for allowing a new graduate to practice for a brief period of time without a valid Graduate Permit.

One (1) private reprimand was issued to a graduate who practiced for a brief period of time without a valid Graduate Permit.

Warnings (1)

Eidens, Gerald G., PT
Location: Troy, NC
License #: PT 4015
Conduct: Failure to document in patient records the involvement of the physical therapist in the patient's intervention.
Discipline: Warning

Licensure Statistics
(As of January 2, 1998)

<table>
<thead>
<tr>
<th></th>
<th>Licensed in NC</th>
<th>Reside in NC</th>
<th>Work in NC</th>
</tr>
</thead>
<tbody>
<tr>
<td>PTs</td>
<td>4393</td>
<td>2988</td>
<td>2649</td>
</tr>
<tr>
<td>PTAs</td>
<td>1852</td>
<td>1520</td>
<td>1343</td>
</tr>
</tbody>
</table>

Complaints Submitted (11)

During the months of August, September, October, and November, 1997, there were eleven (11) new complaints submitted to the Board. The Investigative Committee maintained approximately two (2) dozen active investigations during this period. Upon completing their investigations, the Investigation Committee found that there was no probable cause to pursue disciplinary action regarding eight (8) licensees against whom complaints had been previously filed.

CHANGE OF ADDRESS / NAME / LICENSEE DIRECTORY CORRECTION FORM

Current Name ________________________________ New Name ______________________________ PT ______ PTA______

New Home Address ______________________________________________________________________________________
New Home City, State, Zip ______________________________________________________________ Phone _______________

New Work Address ______________________________________________________________________________________
New Work City, State, Zip ____________________________________________________________ Phone _______________ Fax ____________
License # ___________ Mail or Fax to: NC Board of PT Examiners, 18 West Colony Place, Durham, NC 27705 Fax 919-490-5106 E-mail: ncptboard@mindspring.com
S
ince North Carolina has sanctioned
direct access by legislation, doesn’t
a physical therapist have the
absolute authority to determine what
course of physical therapy treatment is
best for the patient? If the Physical
Therapy Practice limits the practice of
physical therapy to those who are
licensed in accordance with its provi-
sions, isn’t the responsibility to determine
the proper course of a patient’s physical
therapy treatment the ultimate responsi-
bility of the physical therapist performing
the evaluation? In recent months, the
Board has received more than one
request for an opinion regarding the
impact of direct access on the ability of
the physical therapist to vary a physi-
cian’s order for physical therapy. Does a
physical therapist always have to follow a
physician’s order for specific treatment?

At the outset, it is important to note
that direct access in North Carolina is not
a broad authorization for physical therapi-
sts to evaluate and treat any individual
who presents himself or herself without
being referred by a physician. In fact, the
heading for the section in which direct
access is authorized is labeled “Unlawful
Practice.” In North Carolina, it is unlawful
to fail to refer a patient to a licensed
medical doctor or dentist”...whose med-
ical condition should have, at the time of
evaluation or treatment, been determined
to be beyond the scope of practice of a
physical therapist.”

G.S. 90-270.35(4). Therefore, it is only
by implication that a physical therapist
can evaluate and treat a patient whose
condition is diagnosed to be within the
scope of practice of a physical therapist.
Moreover, there is no statutory basis for
the proposition that a physical therapist is
not bound to comply with a specific order
for physical therapy treatment.

Just as a physical therapist assistant is
prohibited from making major modifica-
tions in patient treatment programs, there
is no authority, either express or implied,
for a physical therapist to vary a physi-
cian’s order for specific treatment. This
problem would not be presented if the
physician’s order is general in nature,
e.g. “evaluate and treat.”

Since there is no requirement in the
Practice Act or the Board’s rules for a
physical therapist to accept a particular
patient, it is appropriate for a physical
therapist to refuse to treat a patient if
the therapist feels that a specific order is
inconsistent with the patient’s needs or
condition. While it is certainly advisable
to attempt to contact the referring physi-
cian to discuss the reasons for the dif-
ference in opinion regarding the particu-
lar course of treatment, the physical
therapist will not commit a Practice Act
violation by refusing to perform treat-
ments that the physical therapist, in
good conscience and with a supporting
evaluation, determines could result in
harm or injury to the patient.

In conclusion, a patient who has a
specific order for treatment must either
be given that treatment or refused treat-
ment altogether. Unless the physician
modifies the order, there is no way for a
physical therapist to turn a patient with a
specific order for treatment into a direct
access patient.

FOLLOWING ORDERS
John M. Silverstein, Board Attorney

Q: Can the Physical Therapist Assistant sign the Discharge
Summary?

A: Any patient note that involves an evaluation must be signed
by a physical therapist. However, to the extent that a discharge
summary consists solely of a summary of matters already in the
patient’s chart, such an entry can be made and signed by a
physical therapist assistant. In the past, the Board has attempt-
ed to make a distinction between a “discharge summary” and a
“discharge note”, with the difference being that a note contains
the final evaluation prior to discharge, which must be signed by
the physical therapist, while a summary is limited to matters
already in the record without an additional evaluation, assess-
ment, judgement or opinion being involved.

In the final analysis; however, the Board is more concerned with
what the note contains than with what it is called. If the note con-
tains any evaluative information, it must be signed by the physical
therapist. If it is simply a summary of prior information in the
patient’s record, it can written and signed by a physical therapist
assistant.

DISCHARGE SUMMARIES

NOTICE FROM
NC INDUSTRIAL COMMISSION

The North Carolina Industrial Commission requested the
North Carolina Board of
Physical Therapy Examiners to
disseminate a Memorandum
that clarifies questions pre-

tened to the Commission by
Payors and Payees as to
whether an “office visit” is
allowed. The Memorandum is
posted on the new NC PT
Board Homepage on the
Internet.

Website Address: NCPTBoard.org.

(Please visit the web page regularly for updates from the
PT Board.)
BUNCH & KING ELECTED

Congratulations are extended to J. Herman Bunch, Jr., PT for being unanimously re-elected as Chairman of the Board at the October 23, 1997 Board Meeting. Mr. Bunch was appointed to the Board in 1994 and has been elected as Chairman in 1995 and 1996.

At the same meeting, JoDell F. King, PTA, was unanimously elected as Secretary-Treasurer for the Board. Ms. King was appointed to serve on the Board in 1995 and has served on numerous Task Forces and Committees during her tenure.

PT FORUM: QUESTIONS AND ANSWERS

Q: Does a physical therapist need a physician’s order when using iontophoresis and phonophoresis?
A: Yes, a signed physician’s order for prescription medications is required. Direct Access in North Carolina does not allow a physical therapist to administer prescription medications without a physician’s order.

Q: Can a physical therapist use and sell “magnetic devices” in shoe inserts, mattress inserts, wound bandages, and massage rollers.
A: The use of magnetic devices is not routinely taught in physical therapy educational programs or continuing education programs, nor does there appear to be any research reports in the peer reviewed literature that would support the use of magnet devices as a therapeutic device. Therefore, it appears that the use and sell of magnetic for the purposes as described above does not fall under the current scope of practice for physical therapists.

Q: Is a PT Graduate allowed to co-sign a PT Aide’s Notes.
A: No. The PT Graduate requires immediate supervision; therefore, the graduate would be ineligible to co-sign notes.

Q: Are there new examinations for physical therapists and physical therapist assistants being given by the Professional Examination Service (PES) to replace the former tests.
A: Yes. The Federation of State Boards of Physical Therapy has completed a comprehensive and defendable analysis of practice for physical therapists and assistants. The results of this massive study serve as the blueprints (outlines) for the national physical therapist and physical therapist assistant licensure examinations effective July, 1997.

SUMMARY OF FEES

<table>
<thead>
<tr>
<th>Service</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Renewal (PT &amp; PTA)</td>
<td>$40.00</td>
</tr>
<tr>
<td>Revival Fee and Renewal Fee</td>
<td>$65.00</td>
</tr>
<tr>
<td>Application Fee PT</td>
<td>$100.00</td>
</tr>
<tr>
<td>Application Fee PTA</td>
<td>$90.00</td>
</tr>
<tr>
<td>Exam Cost (PT &amp; PTA)*</td>
<td>$185.00</td>
</tr>
<tr>
<td>Exam Retake Fee</td>
<td>$30.00</td>
</tr>
<tr>
<td>Transfer Fee</td>
<td>$15.00</td>
</tr>
<tr>
<td>Licensee Directory</td>
<td>$6.24</td>
</tr>
<tr>
<td>License Card</td>
<td>$6.00</td>
</tr>
<tr>
<td>Labels of Licensees (PT or PTA)</td>
<td>$60.00</td>
</tr>
<tr>
<td>Certificate Replacement</td>
<td>$15.00</td>
</tr>
</tbody>
</table>

*plus PT or PTA Application Fee

Tentative Schedule of Board Activities

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jan 21, 1998</td>
<td>Investigative Committee Meeting</td>
</tr>
<tr>
<td>Jan 31, 1998</td>
<td>Final Deadline for licenses to be in!</td>
</tr>
<tr>
<td>Feb 1, 1998</td>
<td>Licenses not renewed lapse.</td>
</tr>
<tr>
<td>Feb 5, 1998</td>
<td>Board Meeting (Public Hearing for Proposed Rules Changes)</td>
</tr>
<tr>
<td>Feb 26, 1998</td>
<td>Investigative Committee Meeting</td>
</tr>
<tr>
<td>March 17, 1998</td>
<td>Federation Annual Meeting</td>
</tr>
<tr>
<td>April 14, 1998</td>
<td>MAHEC Presentation, Asheville</td>
</tr>
</tbody>
</table>