Position Statement – North Carolina Board of Physical Therapy Examiners

16. Scope of Authority of the Physical Therapist Assistant to Assist the Physical Therapist with Functional Capacity Evaluations

Adopted – December 2, 2004

Position Statement

It is the position of the North Carolina Board of Physical Therapy Examiners that a physical therapist assistant (“PTA”) is qualified and permitted by the North Carolina Physical Therapy Practice Act to assist a physical therapist (“PT”) with the performance of a Functional Capacity Evaluation (“FCE”) on a limited and restricted basis. A PTA may not perform FCE’s independently. The following principles support this position:

- The purpose of an FCE is to provide an objective measure of safe functional abilities compared to the physical demands of work.
- The performance of an FCE generally takes from four to eight hours over a period of one to two days.
- An FCE is an evaluative procedure, the performance of which is limited to PT’s.
- A PTA may assist in the practice of physical therapy, but may not perform evaluations. NCGS §90-270.24(3).
- A PT should only delegate those limited aspects of an FCE that are appropriate to the PTA’s education, experience, knowledge, and skill.
- A PTA may participate in the collection of objective data. It is the responsibility of the PT to interpret data.
- A PTA may participate in the performance of objective tests and measures that do not require evaluation or the judgment of a PT.
- Data collection, tests and measures performed to assess patient response during an FCE require a different set of skills than data collection, tests and measures performed in connection with patient intervention.
- Training and education beyond entry-level skills are required before a PTA can assist a PT with an FCE.

Description of FCE

Occupational Health Physical Therapy Guidelines: Evaluating Functional Capacity defines an FCE as follows:

An FCE is a detailed examination and evaluation that objectively measures the patient’s/client’s current level of function, primarily within the context of the demands of competitive employment. Measurements of function from an FCE are compared to the physical demands of a job or other functional activities, and are used to make return-to-work/activity decisions, disability determinations, or to generate a rehabilitation plan. An FCE measures the ability of an individual to perform functional or work-related tasks and predicts the potential to sustain these tasks over a defined time frame. A job-specific FCE is one that is required to evaluate a client’s ability to perform the physical demands of a specific, identified job.
Rationale for Position Statement

The basic components of the FCE are data collection and tests and measures. The FCE takes four to eight hours to administer over a one to two day period. Initially, a determination must be made by the PT that it is appropriate to proceed with the FCE. Further, to avoid the risk of additional injury, the tests and measures must be performed safely and correctly. The PT is responsible for interpreting the data collected and the tests and measures performed. A PTA with sufficient education and training can assist with the performance of an FCE.

Data Collection. It is frequently and incorrectly assumed that a PTA is competent to collect all of the data that is obtained from the FCE patient. Although the collection of general data related to medical and employment history is within the competence of a PTA, specific questions regarding a patient’s health status can be evaluative in nature. Therefore, it is usually appropriate for a PTA to interview the patient and note responses to standard form questions. It would be inappropriate for a PTA to ask follow-up questions of an evaluative nature requiring the judgment of a PT since the information contained in responses to those questions can affect the manner in which the FCE will be conducted for a particular patient.

Tests and Measures. Typical FCEs range from musculoskeletal screening and kinesiological assessment to observation of the manner in which the test is being performed. An FCE does include measurements of strength, but it can also entail analysis of the root causes of a patient’s dysfunction. So long as observation does not require ongoing evaluation, a PTA can assist a PT. For example, a sufficiently trained PTA may be able to observe whether the patient is performing a test in a safe and correct manner, but a PTA cannot determine whether a patient has achieved maximum capacity, what physical limitations may affect capacity, or whether a patient can perform at a different level or capacity.

Conclusions

- An FCE must be performed by the PT.
- Before proceeding with an FCE, the PT must assess the patient’s medical condition and whether the tests can be performed without further injury to the patient.
- A PTA can utilize a form to ask a patient questions regarding medical history, incidents of pain or dysfunction and work history.
- If a standard form is used to obtain responses from each patient to basic questions, a PT must ask any questions generated by the patient’s responses to the basic questions.
- When assisting with the performance of an FCE, a PTA cannot perform tests of cardiovascular or pulmonary capacity, observations of integumentary changes, or assessments of musculoskeletal or neuromuscular function.
- An appropriately trained PTA may perform objective tests and measures related to strength and lifting and range of motion.
- A PTA can determine whether a patient is performing a test in a safe and correct manner.
- A PT must make all observations that require an evaluation or determination, including whether a task can be performed in the workplace, at what level a task can be performed, or how long the task can be performed.
- Any observations made by a PTA should be reported to the supervising PT.
- A PTA must document in the patient record all procedures performed by the PTA.
Resources

Isernhagen Work Systems. Section III. The Kinesiophysical Approach.


Physical Therapy Board of California: Functional Capacity Evaluations performed by Physical Therapist Assistants (2001)


Kathy Arney, PT, MA, Executive Director
NC Board of Physical Therapy Examiners
18 West Colony Place Suite 140
Durham, NC 27705
Phone: 1-919-490-6393 / 800-800-8982
Fax: 1-919-490-5106
Email: karney@ncptboard.org
Web: www.ncptboard.org