<u>SHB 1137</u> - S COMM AMD

By Committee on Health & Long-Term Care

ADOPTED 04/07/2005

Strike everything after the enacting clause and insert the following:

3 "Sec. 1. RCW 18.74.005 and 1983 c 116 s 1 are each amended to read 4 as follows:

((In order to safeguard the public safety and welfare, to protect 5 б the public from being misled by incompetent, unethical, and 7 unauthorized persons, and to assure the highest degree of professional 8 conduct and competency, it is)) The purpose of this chapter ((to 9 strengthen existing regulation of persons offering physical therapy services to the public)) is to protect the public health, safety, and 10 11 welfare, and to provide for state administrative control, supervision, 12 licensure, and regulation of the practice of physical therapy. It is the intent of the legislature that only individuals who meet and 13 maintain prescribed standards of competence and conduct be allowed to 14 engage in the practice of physical therapy as defined and authorized by 15 16 this chapter.

17 **Sec. 2.** RCW 18.74.010 and 1997 c 275 s 8 are each amended to read 18 as follows:

19 ((Unless the context otherwise requires,)) The definitions in this 20 section apply throughout this chapter <u>unless the context clearly</u> 21 <u>requires otherwise</u>.

(1) "Board" means the board of physical therapy created by RCW18.74.020.

24

(2) "Department" means the department of health.

(3) "Physical therapy" means the ((treatment of any bodily or mental condition of any person by the use of the physical, chemical, and other properties of heat, cold, air, light, water, electricity, sound, massage, and therapeutic exercise, which includes posture and rehabilitation procedures; the performance of tests and measurements of

neuromuscular function as an aid to the diagnosis or treatment of any 1 2 human condition; performance of treatments on the basis of test findings after consultation with and periodic review by an authorized 3 health care practitioner except as provided in RCW 18.74.012; 4 supervision of selective forms of treatment by trained supportive 5 personnel; and provision of consultative services for health, 6 education, and community agencies. The use of Roentgen rays and radium 7 8 for diagnostic and therapeutic purposes, the use of electricity for surgical purposes, including cauterization, and the use of spinal 9 10 manipulation or manipulative mobilization of the spine and its immediate articulations, are not included under the term "physical 11 12 therapy" as used in this chapter)) care and services provided by or 13 under the direction and supervision of a physical therapist licensed by 14 the state. The use of Roentgen rays and radium for diagnostic and therapeutic purposes, the use of electricity for surgical purposes, 15 including cauterization, and the use of spinal manipulation, or 16 manipulative mobilization of the spine and its immediate articulations, 17 are not included under the term "physical therapy" as used in this 18 19 chapter.

20 (4) "Physical therapist" means a person who ((practices physical 21 therapy as defined in this chapter but does not include massage 22 operators as defined in RCW 18.108.010)) meets all the requirements of 23 this chapter and is licensed in this state to practice physical 24 therapy.

25

(5) "Secretary" means the secretary of health.

26 (6) Words importing the masculine gender may be applied to females. 27 (7) "Authorized health care practitioner" means and includes 28 physicians, osteopathic physicians, licensed chiropractors, naturopaths, podiatric physicians and surgeons, dentists, and advanced 29 registered nurse practitioners: PROVIDED, HOWEVER, That nothing herein 30 31 shall be construed as altering the scope of practice of such 32 practitioners as defined in their respective licensure laws.

33 <u>(8) "Practice of physical therapy" is based on movement science and</u> 34 <u>means:</u>

(a) Examining, evaluating, and testing individuals with mechanical,
 physiological, and developmental impairments, functional limitations in
 movement, and disability or other health and movement-related

1 conditions in order to determine a diagnosis, prognosis, plan of 2 therapeutic intervention, and to assess and document the ongoing 3 effects of intervention;

4 (b) Alleviating impairments and functional limitations in movement by designing, implementing, and modifying therapeutic interventions 5 that include therapeutic exercise; functional training related to 6 balance, posture, and movement to facilitate self-care and 7 reintegration into home, community, or work; manual therapy including 8 soft tissue and joint mobilization and manipulation; therapeutic 9 massage; assistive, adaptive, protective, and devices related to 10 postural control and mobility except as restricted by (c) of this 11 12 subsection; airway clearance techniques; physical agents or modalities; 13 mechanical and electrotherapeutic modalities; and patient-related 14 instruction;

(c) Training for, and the evaluation of, the function of a patient 15 wearing an orthosis or prosthesis as defined in RCW 18.200.010. 16 Physical therapists may provide those direct-formed and prefabricated 17 upper limb, knee, and ankle-foot orthoses, but not fracture orthoses 18 except those for hand, wrist, ankle, and foot fractures, and assistive 19 technology devices specified in RCW 18.200.010 as exemptions from the 20 21 defined scope of licensed orthotic and prosthetic services. It is the intent of the legislature that the unregulated devices specified in RCW 22 18.200.010 are in the public domain to the extent that they may be 23 24 provided in common with individuals or other health providers, whether unregulated or regulated under Title 18 RCW, without regard to any 25 26 scope of practice;

(d) Performing wound care services that is limited to sharp debridement, debridement with other agents, dry dressings, wet dressings, topical agents including enzymes, hydrotherapy, electrical stimulation, ultrasound, and other similar treatments. Physical therapists may not delegate sharp debridement. A physical therapist may perform wound care services only by referral from or after consultation with an authorized health care practitioner;

34 (e) Reducing the risk of injury, impairment, functional limitation, 35 and disability related to movement, including the promotion and 36 maintenance of fitness, health, and quality of life in all age 37 populations; and 1 (f) Engaging in administration, consultation, education, and 2 research.

3 <u>(9)(a) "Physical therapist assistant" means a person who has</u>
4 <u>successfully completed a board-approved physical therapist assistant</u>
5 <u>program.</u>

6 (b) "Physical therapy aide" means a person who is involved in 7 direct physical therapy patient care who does not meet the definition 8 of a physical therapist or physical therapist assistant and receives 9 ongoing on-the-job training.

(c) "Other assistive personnel" means other trained or educated 10 health care personnel, not defined in (a) or (b) of this subsection, 11 12 who perform specific designated tasks related to physical therapy under 13 the supervision of a physical therapist, including but not limited to licensed massage practitioners, athletic trainers, and exercise 14 physiologists. At the direction of the supervising physical therapist, 15 and if properly credentialed and not prohibited by any other law, other 16 assistive personnel may be identified by the title specific to their 17 training or education. 18

(10) "Direct supervision" means the supervising physical therapist 19 must (a) be continuously on-site and present in the department or 20 21 facility where assistive personnel or holders of interim permits are performing services; (b) be immediately available to assist the person 22 being supervised in the services being performed; and (c) maintain 23 24 continued involvement in appropriate aspects of each treatment session in which a component of treatment is delegated to assistive personnel. 25 26 (11) "Sharp debridement" means the removal of devitalized tissue from a wound with scissors, scalpel, and tweezers without anesthesia. 27 "Sharp debridement" does not mean surgical debridement. A physical 28 therapist may perform sharp debridement, to include the use of a 29 scalpel, only upon showing evidence of adequate education and training 30 as established by rule. Until the rules are established, but no later 31 than July 1, 2006, physical therapists licensed under this chapter who 32 perform sharp debridement as of the effective date of this section 33 shall submit to the secretary an affidavit that includes evidence of 34 35 adequate education and training in sharp debridement, including the use 36 of a scalpel.

1 Sec. 3. RCW 18.74.012 and 2000 c 171 s 24 are each amended to read
2 as follows:

((Notwithstanding the provisions of RCW 18.74.010(3),)) 3 Α and periodic review by 4 consultation an authorized health care 5 practitioner is not required for treatment of neuromuscular or musculoskeletal conditions((+ PROVIDED, That a physical therapist may 6 only provide treatment utilizing orthoses that support, align, prevent, 7 8 or correct any structural problems intrinsic to the foot or ankle by 9 referral or consultation from an authorized health care practitioner)).

10 <u>NEW SECTION.</u> Sec. 4. (1) It is unlawful for any person to 11 practice or in any manner hold himself or herself out to practice 12 physical therapy or designate himself or herself as a physical 13 therapist, unless he or she is licensed in accordance with this 14 chapter.

15 (2) This chapter does not restrict persons licensed under any other 16 law of this state from engaging in the profession or practice for which 17 they are licensed, if they are not representing themselves to be 18 physical therapists or providers of physical therapy.

(3) The following persons are exempt from licensure as physicaltherapists under this chapter when engaged in the following activities:

(a) A person who is pursuing a course of study leading to a degree as a physical therapist in an approved professional education program and is satisfying supervised clinical education requirements related to his or her physical therapy education while under direct supervision of a licensed physical therapist;

(b) A physical therapist while practicing in the United States armed services, United States public health service, or veterans administration as based on requirements under federal regulations for state licensure of health care providers; and

30 (c) A physical therapist licensed in another United States 31 jurisdiction, or a foreign-educated physical therapist credentialed in 32 another country, performing physical therapy as part of teaching or 33 participating in an educational seminar of no more than sixty days in 34 a calendar year.

35

NEW SECTION. Sec. 5. (1) A physical therapist licensed under this

chapter is fully authorized to practice physical therapy as defined in
 this chapter.

3 (2) A physical therapist shall refer persons under his or her care 4 to appropriate health care practitioners if the physical therapist has 5 reasonable cause to believe symptoms or conditions are present that 6 require services beyond the scope of practice under this chapter or 7 when physical therapy is contraindicated.

8 (3) Physical therapists shall adhere to the recognized standards of 9 ethics of the physical therapy profession and as further established by 10 rule.

A physical therapist may perform electroneuromyographic 11 (4) 12 examinations for the purpose of testing neuromuscular function only by 13 referral from an authorized health care practitioner identified in RCW 18.74.010(7) and only upon demonstration of further education and 14 training in electroneuromyographic examinations as established by rule. 15 Within two years after July 1, 2005, the secretary shall waive the 16 17 requirement for further education and training for those physical licensed this 18 therapists under chapter who perform electroneuromyographic examinations. 19

(5) A physical therapist licensed under this chapter may purchase, 20 21 store, and administer medications such as hydrocortisone, fluocinonide, 22 topical anesthetics, silver sulfadiazine, lidocaine, magnesium sulfate, zinc oxide, and other similar medications, and may administer such 23 24 other drugs or medications as prescribed by an authorized health care 25 practitioner for the practice of physical therapy. A pharmacist who dispenses such drugs to a licensed physical therapist is not liable for 26 27 any adverse reactions caused by any method of use by the physical 28 therapist.

29 <u>NEW SECTION.</u> Sec. 6. (1) Physical therapists are responsible for 30 patient care given by assistive personnel under their supervision. A 31 physical therapist may delegate to assistive personnel and supervise 32 selected acts, tasks, or procedures that fall within the scope of 33 physical therapy practice but do not exceed the education or training 34 of the assistive personnel.

35 (2) Nothing in this chapter may be construed to prohibit other
 36 licensed health care providers from using the services of physical
 37 therapist assistants, physical therapist aides, or other assistive

б

personnel as long as the licensed health care provider is responsible for the activities of such assistants, aides, and other personnel and provides appropriate supervision.

4 <u>NEW SECTION.</u> **Sec. 7.** Sections 4 through 6 of this act are each 5 added to chapter 18.74 RCW."

<u>SHB 1137</u> - S COMM AMD By Committee on Health & Long-Term Care

ADOPTED 04/07/2005

6 On page 1, line 1 of the title, after "therapy;" strike the 7 remainder of the title and insert "amending RCW 18.74.005, 18.74.010, 8 and 18.74.012; and adding new sections to chapter 18.74 RCW."

--- END ---