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## SUBSTITUTE HOUSE BILL 1498

State of Washington 58th Legislature 2003 Regular Session

By House Committee on Health Care (originally sponsored by Representatives Morrell, Campbell, Cody, Kagi and Santos)

READ FIRST TIME 02/20/03.

- 1 AN ACT Relating to physical therapy; amending RCW 18.74.005,
- 2 18.74.010, and 18.74.012; and adding new sections to chapter 18.74 RCW.
- 3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 4 **Sec. 1.** RCW 18.74.005 and 1983 c 116 s 1 are each amended to read 5 as follows:
- 6 ((In order to safeguard the public safety and welfare, to protect
- 7 the public from being misled by incompetent, unethical, and
- 8 unauthorized persons, and to assure the highest degree of professional
- 9 conduct and competency, it is the purpose of this chapter to strengthen
- existing regulation of persons offering physical therapy services to the public.)) The purpose of this chapter is to protect the public
- 12 health, safety, and welfare, and to provide for state administrative
- 13 control, supervision, licensure, and regulation of the practice of
- 14 physical therapy. It is the intent of the legislature that only
- 15 individuals who meet and maintain prescribed standards of competence
- 16 and conduct be allowed to engage in the practice of physical therapy as
- 17 <u>defined and authorized by this chapter.</u>

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- 1 **Sec. 2.** RCW 18.74.010 and 1997 c 275 s 8 are each amended to read 2 as follows:
  - ((Unless the context otherwise requires,)) The definitions in this section apply throughout this chapter unless the context clearly requires otherwise.
- 6 (1) "Board" means the board of physical therapy created by RCW 7 18.74.020.
  - (2) "Department" means the department of health.

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- (3) "Physical therapy" means the ((treatment of any bodily or 9 10 mental condition of any person by the use of the physical, chemical, and other properties of heat, cold, air, light, water, electricity, 11 12 sound, massage, and therapeutic exercise, which includes posture and 13 rehabilitation procedures; the performance of tests and measurements of 14 neuromuscular function as an aid to the diagnosis or treatment of any 15 human condition; performance of treatments on the basis of test findings after consultation with and periodic review by an authorized 16 17 health care practitioner except as provided in RCW 18.74.012; supervision of selective forms of treatment by trained supportive 18 personnel; and provision of consultative services for health, 19 education, and community agencies. The use of Roentgen rays and radium 20 21 for diagnostic and therapeutic purposes, the use of electricity for 22 surgical purposes, including cauterization, and the use of spinal manipulation or manipulative mobilization of the spine and its 23 24 immediate articulations, are not included under the term "physical therapy" as used in this chapter)) care and services provided by or 25 26 under the direction and supervision of a physical therapist licensed by 27 the state. The use of spinal manipulation, or manipulative mobilization of the spine and its immediate articulations, are not 28 included under the term "physical therapy" as used in this chapter. 29
  - (4) "Physical therapist" means a person who ((practices physical therapy as defined in this chapter but does not include massage operators as defined in RCW 18.108.010)) meets all the requirements of this chapter and is licensed in this state to practice physical therapy.
    - (5) "Secretary" means the secretary of health.
  - (6) Words importing the masculine gender may be applied to females.
- 37 (7) "Authorized health care practitioner" means and includes 38 licensed physicians, osteopathic physicians, chiropractors,

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- naturopaths, podiatric physicians and surgeons, dentists, and advanced registered nurse practitioners: PROVIDED, HOWEVER, That nothing herein shall be construed as altering the scope of practice of such practitioners as defined in their respective licensure laws.
- 5 (8) "Practice of physical therapy" is based on movement science and 6 means:

- (a) Examining, evaluating, and testing individuals with mechanical, physiological, and developmental impairments, functional limitations in movement, and disability or other health and movement-related conditions in order to determine a diagnosis, prognosis, plan of therapeutic intervention, and to assess and document the ongoing effects of intervention;
- (b) Alleviating impairments and functional limitations in movement by designing, implementing, and modifying therapeutic interventions that include therapeutic exercise; functional training related to balance, posture, and movement to facilitate self-care and reintegration into home, community, or work; manual therapy including soft tissue and joint mobilization and manipulation; therapeutic massage; assistive, adaptive, protective, and devices related to postural control and mobility except as restricted by (c) of this subsection; airway clearance techniques; physical agents or modalities; mechanical and electrotherapeutic modalities; and patient-related instruction;
- (c) Training for, and the evaluation of, the function of a patient wearing an orthosis or prosthesis as defined in RCW 18.200.010. Physical therapists may provide those direct-formed and prefabricated upper limb, knee, and ankle-foot orthoses, but not fracture orthoses except those for hand, wrist, ankle, and foot fractures, and assistive technology devices specified in RCW 18.200.010 as exemptions from the defined scope of licensed orthotic and prosthetic services. It is the intent of the legislature that the unregulated devices specified in RCW 18.200.010 are in the public domain to the extent that they may be provided in common with individuals or other health providers, whether unregulated or regulated under Title 18 RCW, without regard to any scope of practice;
- (d) Performing wound management that is limited to sharp debridement, debridement with other agents, dry dressings, wet

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dressings, topical agents including enzymes, hydrotherapy, electrical stimulation, ultrasound, and other similar treatments. Physical therapists may not delegate sharp debridement;

- (e) Reducing the risk of injury, impairment, functional limitation, and disability related to movement, including the promotion and maintenance of fitness, health, and quality of life in all age populations; and
- 8 <u>(f) Engaging in administration, consultation, education, and</u> 9 research.
- 10 <u>(9)(a) "Physical therapist assistant" means a person who has</u>
  11 <u>successfully completed a board-approved physical therapist assistant</u>
  12 program.
  - (b) "Physical therapy aide" means a person who is involved in direct physical therapy patient care who does not meet the definition of a physical therapist or physical therapist assistant and receives ongoing on-the-job training.
  - (c) "Other assistive personnel" means other trained or educated health care personnel, not defined in (a) or (b) of this subsection, who perform specific designated tasks related to physical therapy under the supervision of a physical therapist. At the direction of the supervising physical therapist, and if properly credentialed and not prohibited by any other law, other assistive personnel may be identified by the title specific to their training or education.
  - (10) "On-site supervision" means the supervising physical therapist must (a) be continuously on-site and present in the department or facility where assistive personnel or holders of interim permits are performing services; (b) be immediately available to assist the person being supervised in the services being performed; and (c) maintain continued involvement in appropriate aspects of each treatment session in which a component of treatment is delegated to assistive personnel.
- 31 (11) "Sharp debridement" means the removal of devitalized tissue 32 from a wound with scissors, scalpel, and tweezers without anesthesia. 33 "Sharp debridement" does not mean surgical debridement.
- **Sec. 3.** RCW 18.74.012 and 2000 c 171 s 24 are each amended to read 35 as follows:
- 36 ((Notwithstanding the provisions of RCW 18.74.010(3),)) A consultation and periodic review by an authorized health care

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practitioner is not required for treatment of neuromuscular or musculoskeletal conditions((: PROVIDED, That a physical therapist may only provide treatment utilizing orthoses that support, align, prevent, or correct any structural problems intrinsic to the foot or ankle by referral or consultation from an authorized health care practitioner)).

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- NEW SECTION. Sec. 4. (1) It is unlawful for any person to practice or in any manner hold himself or herself out to practice physical therapy or designate himself or herself as a physical therapist, unless he or she is licensed in accordance with this chapter.
- (2) This chapter does not restrict persons licensed under any other law of this state from engaging in the profession or practice for which they are licensed, if they are not representing themselves to be physical therapists or providers of physical therapy.
- (3) The following persons are exempt from licensure as physical therapists 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 on-site 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
- (c) A physical therapist licensed in another United States jurisdiction, or a foreign-educated physical therapist credentialed in another country, performing physical therapy as part of teaching or participating in an educational seminar of no more than sixty days in a calendar year.
- NEW SECTION. Sec. 5. (1) No person may practice or in any manner hold himself or herself out to be engaging in the practice of physical therapy or designate himself or herself as a physical therapist unless licensed as a physical therapist in accordance with this chapter.
- 35 (2) A physical therapist licensed under this chapter is fully 36 authorized to practice physical therapy as defined in this chapter.

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

- (4) Physical therapists shall adhere to the recognized standards of ethics of the physical therapy profession and as further established by rule.
- (5) A physical therapist may perform electroneuromyographic examinations for the purpose of testing neuromuscular function only by referral from an authorized health care provider and only upon demonstration of further education and training in electroneuromyographic examinations as established by rule.
- (6)(a) A physical therapist licensed under this chapter may purchase, store, and administer medications such as hydrocortisone, fluocinonide, topical anesthetics, silver sulfadiazine, lidocaine, magnesium sulfate, zinc oxide, and other similar medications, and may administer such other drugs or medications as prescribed by an authorized health care provider. A pharmacist who dispenses such drugs to a licensed physical therapist is not liable for any adverse reactions caused by any method of use by the physical therapist.
- (b) The secretary, after approval from the board of physical therapy, the board of pharmacy, and the medical quality assurance commission, may adopt rules that authorize licensed physical therapists to purchase and use legend drugs and devices in addition to the drugs authorized in this chapter.
- NEW SECTION. Sec. 6. (1) Physical therapists are responsible for patient care given by assistive personnel under their direct supervision. A physical therapist may delegate to assistive personnel and supervise selected acts, tasks, or procedures that fall within the scope of physical therapy practice but do not exceed the education or training of the assistive personnel.
- 33 (2) Nothing in this chapter may be construed to prohibit other 34 licensed health care providers from using the services of physical 35 therapist assistants, physical therapist aides, or other assistive 36 personnel as long as the licensed health care provider is responsible

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- 1 for the activities of such assistants, aides, and other personnel and
- 2 provides appropriate supervision.
- 3 <u>NEW SECTION.</u> **Sec. 7.** Sections 4 through 6 of this act are each
- 4 added to chapter 18.74 RCW.

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