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# Notice of Rulemaking Hearing

*Hearings will be conducted in the manner prescribed by the Uniform Administrative Procedures Act, Tennessee Code Annotated, Section 4-5-204. For questions and copies of the notice, contact the person listed below.*

<b>Agency/Board/Commission:</b>	Tennessee Board of Physical Therapy
<b>Division:</b>	
<b>Contact Person:</b>	Diona E. Layden, Assistant General Counsel
<b>Address:</b>	Office of General Counsel 220 Athens Way, Suite 210 Nashville, Tennessee 37243
<b>Phone:</b>	615-741-1611
<b>Email:</b>	<a href="mailto:Diona.Layden@tn.gov">Diona.Layden@tn.gov</a>

*Any Individuals with disabilities who wish to participate in these proceedings (to review these filings) and may require aid to facilitate such participation should contact the following at least 10 days prior to the hearing:*

<b>ADA Contact:</b>	ADA Coordinator, Division of Health Related Boards
<b>Address:</b>	Heritage Place – Metro Center 227 French Landing, Suite 300 Nashville, Tennessee 37243
<b>Phone:</b>	615-532-3202 or (Toll Free) 1-800-778-4123
<b>Email:</b>	

**Hearing Location(s)** (for additional locations, copy and paste table)

Address 1:	Heritage Place – Metro Center 227 French Landing, Suite 150, Iris Room		
Address 2:			
City:	Nashville, Tennessee		
Zip:	37243		
Hearing Date :	11/13/2009		
Hearing Time:	9:00 am	<input checked="" type="checkbox"/> CST	<input type="checkbox"/> EST

**Additional Hearing Information:**

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**Revision Type (check all that apply):**

- Amendment
- New
- Repeal

**Rule(s)** (ALL chapters and rules contained in filing must be listed here. If needed, copy and paste additional tables. Please enter only ONE Rule Number/RuleTitle per row.)

<b>Chapter Number</b>	<b>Chapter Title</b>
1150-01	General Rules Governing The Practice Of Physical Therapy
<b>Rule Number</b>	<b>Rule Title</b>
1150-01-.01	Definitions
1150-01-.02	Scope of Practice and Supervision
1150-01-.04	Qualifications for Licensure
1150-01-.08	Examinations
1150-01-.12	Continuing Competence

(Place substance of rules and other info here. Statutory authority must be given for each rule change. For information on formatting rules go to <http://state.tn.us/sos/rules/1360/1360.htm>)

#### Substance of Proposed Rule

Rule 1150-01-.01 Definitions is amended by deleting paragraphs (1) through (37) in their entirety and substituting instead the following language, so that as amended, the new paragraphs (1) through (36) shall read:

- (1) The Act – The statute governing the practice of occupational and physical therapy in Tennessee as codified at Title 63, Chapter 13 of the Tennessee Code Annotated.
- (2) Advertising – Includes, but is not limited to, business solicitations, with or without limiting qualifications, in a card, sign, or device issued to a person; in a sign or marking in or on any building; or in any newspaper, magazine, directory, or other printed matter. Advertising also includes business solicitations communicated by individual, radio, video, Internet, or television broadcasting or any other means designed to secure public attention.
- (3) American Physical Therapy Association – When the acronym “APTA” appears in these rules, it is intended to mean the American Physical Therapy Association.
- (4) Applicant – Any individual seeking licensure by the board and who has submitted an official application and paid the application fee.
- (5) Board – The Board of Physical Therapy.
- (6) Board administrative office – The office of the Unit Director assigned to the board located at 227 French Landing, Suite 300, Heritage Place, MetroCenter, Nashville, TN 37243.
- (7) Board Designee – Any person who has received a written delegation of authority from the board to perform board functions subject to review and ratification by the full board where provided by these rules.
- (8) Clinical Student – A student enrolled in a CAPTE approved developing program or a CAPTE accredited physical therapy program or regionally accredited post professional physical therapist program.
- (9) Closed file – An administrative action which renders an incomplete or denied file inactive.
- (10) Commission on Accreditation of Physical Therapy Education (CAPTE) – An agency approved by the Board of Physical Therapy to accredit schools of physical therapy pursuant to T.C.A. §63-13-307(a).
- (11) Consultation – A meeting that is conducted either face-to-face or by some other medium such as, but not limited to, telephone, facsimile, mail, or electronic means, wherein two or more health professionals discuss the diagnosis, prognosis, and treatment of a particular case.
- (12) Continuing Competence – The ongoing application of professional knowledge, skills and abilities which relate to occupational performance objectives in the range of possible encounters that is defined by that individual's scope of practice and practice setting.
- (13) Department – Tennessee Department of Health.
- (14) Division – The Division of Health Related Boards, Department of Health, from which the board receives administrative support.

- (15) Examination Service – The testing service whose examination has been adopted by the board.
- (16) Fee – Money, gifts, services, or anything of value offered or received as compensation in return for rendering services; also, the required fee(s) pursuant to these rules.
- (17) Good Moral Character – The quality of being well regarded in personal behavior and professional ethics.
- (18) Guide to Physical Therapist Practice – the APTA document, adopted by the Board pursuant to rule 1150-1-.02, that explains physical therapy scope of practice, preferred practice patterns, and appropriate utilization of services.
- (19) He/she Him/her – When “he” appears in the text of these rules, the word represents both the feminine and masculine genders.
- (20) HRB – When the acronym “HRB” appears in the text of these rules, it represents Health Related Boards.
- (21) Internationally Educated – An individual who has graduated from a PT or PTA program outside the United States and its jurisdictions.
- (22) License – Document issued to an applicant who has successfully completed the licensure process. The license takes the form of an “artistically designed” license as well as other versions bearing an expiration date.
- (23) Licensee – Any person duly licensed by the board to engage in the practice of physical therapy.
- (24) Licensed Physical Therapist (PT) – Any person who has met the qualifications for licensed physical therapist and holds a current, unsuspended, or unrevoked license which has been lawfully issued by the board.
- (25) Licensed Physical Therapist Assistant (PTA) – Any person who has met the qualifications for licensed physical therapist assistant and holds a current, unsuspended, or unrevoked license that has been lawfully issued by the board. PTAs perform physical therapy procedures and related tasks that have been selected and delegated only by the supervision physical therapist.
- (26) Manual Therapy Techniques – Consists of a broad group of passive interventions in which physical therapists use their hands to administer skilled movements designed to modulate pain; increase joint range of motion; reduce or eliminate soft tissue swelling, inflammation, or restriction; induce relaxation; improve contractile and noncontractile tissue extensibility; and improve pulmonary functions. These interventions involve a variety of techniques, such as the application of graded forces, which are not performed beyond the joint’s normal range of motion. These interventions may be applied to all joints of the body as deemed appropriate.
- (27) Person – Any individual, firm, corporation, partnership, organization, or political entity.
- (28) Physical Therapy Assistive Personnel -
  - (a) Physical therapy aide – Aides, technicians, and transporters trained by

and under the direction of physical therapists who perform designated and supervised routine physical therapy tasks.

- (b) Other assistive personnel – Other trained or educated health care personnel not defined in paragraph (25) or subparagraph (28) (a) of this rule who perform specific designated tasks related to physical therapy under the supervision of a physical therapist. At the discretion of the supervising physical therapist, and if properly credentialed and not prohibited by any other law, “other assistive personnel” or “other support personnel” may be identified by the title specific to their training or education.
- (29) Physical Therapy Treatment Diagnosis – Both the process and the end result of evaluating information obtained from the examination, which the physical therapist then organizes into defined clusters, syndromes, or categories to help determine the most appropriate intervention strategies.
- (30) Recognized credentialing agency – An agency approved by the board which evaluates the educational credentials of international graduates who have not attended CAPTE - accredited or board approved schools of physical therapy pursuant to T.C.A. §63-13-307(a).
- (31) Recognized educational institution – Any educational institution that is accredited by CAPTE and which is approved by the board.
- (32) Relative – A parent, foster parent, parent-in-law, child, spouse, brother, foster brother, sister, foster sister, grandparent, grandchild, son-in-law, brother-in-law, daughter-in-law, sister-in-law, or other family member who resides in the same household.
- (33) Restriction – Any action deemed appropriate by the board to be required of a disciplined licensee during any period of probation, suspension, or revocation with leave to apply or as a prerequisite to the lifting of probation or suspension, or any action deemed appropriate by the board to be required of an applicant for licensure.
- (34) Use of a title or description – To hold oneself out to the public as having a particular status, including but not limited to , by the use of signs, mailboxes, address plates, stationery, announcements, advertising, the Internet, business cards, or other means of professional identification.
- (35) Volunteer personnel – Uncompensated individuals contemplating a career in physical therapy, and are limited to observation of physical therapy functions and are prohibited from the delivery of physical therapy services.
- (36) Written evidence – Includes, but is not limited to, written verification from supervisors or other professional colleagues familiar with the applicant’s work.

Authority: T.C.A. §§ 63-13-103 and 63-13-304.

Rule 1150-01-.02 Scope of Practice and Supervision is amended by deleting subparagraph (2)(b) but not its parts and substituting instead the following language, so that as amended, the new subparagraph (2)(b) but not its parts shall read:

- (b) Supervision of physical therapy assistive personnel (See rule 1150-1-

.01).

Authority: T.C.A. §§ 63-13-103, 63-13-301, and 63-13-311.

Rule 1150-01-.02 Scope of Practice and Supervision is amended by deleting subparagraph (2)(d) in its entirety and substituting instead the following language, so that as amended, the new subparagraph (2)(d) shall read:

- (d) Pursuant to rule 1150-1-.01, physical therapists and physical therapist assistants shall provide direct onsite supervision of volunteers. Volunteers may not provide physical therapy to patients.

Authority: T.C.A. §§ 63-13-103, 63-13-301, and 63-13-311.

Rule 1150-01-.02 Scope of Practice and Supervision is amended by adding as a new subparagraph (1)(b) the following language and renumbering according, so that as amended the new subparagraph (1)(b) shall read:

(1) Scope of Practice

(b) Practice of Physical Therapy

1. 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 physical therapy treatment diagnosis, prognosis, a plan of therapeutic intervention, and to assess the ongoing effect of intervention; and
2. Alleviating impairments and functional limitations by designing, implementing, and modifying therapeutic interventions that include, but are not limited to: therapeutic exercise; functional training; manual therapy; therapeutic massage; assistive and adaptive orthotic, prosthetic, protective and supportive equipment; airway clearance techniques; debridement and wound care, physical agents or modalities, mechanical and electrotherapeutic modalities including patient-related instruction and electrophysiologic studies (motor and sensory nerve conduction, and somatosensory evoked potentials)
  - (i) Invasive kinesiological electromyography may be performed only in a university academic setting as part of a research project that has been approved by the educational institution's Internal Review Board without a referral or;
  - (ii) Notwithstanding the provisions of part 1., diagnostic electromyography must be performed by a licensed physical therapist who has complied with the requirements of paragraph 1150-1-.04 (4) and;
  - (iii) Notwithstanding the provisions of part 1., diagnostic and invasive electromyography may only be performed when there is a referral for such service from:

- (I) an allopathic physician licensed under T.C.A. §§ 63-6; or
  - (II) an osteopathic physician licensed under T.C.A. §§ 63-9; or
  - (III) a doctor of dentistry licensed under T.C.A. §§ 63-5; or
  - (IV) a doctor of podiatry licensed under T.C.A. §§ 63-3.
3. Reducing the risk of injury, impairments, functional limitation and disability, including the promotions and maintenance of fitness, health and quality of life in all age populations; and
  4. Engaging in administration, consultation, education and research.
  5. Manual therapy techniques consist of a broad group of passive interventions in which physical therapists use their hands to administer skilled movements designed to modulate pain; increase joint range of motion; reduce or eliminate soft tissue swelling, inflammation, or restriction; induce relaxation; improve contractile and noncontractile tissue extensibility; and improve pulmonary function. These interventions involve a variety of techniques, such as the application of graded forces.

Authority: T.C.A. §§ 63-13-301 and 63-13-304.

Rule 1150-01-.02 Scope of Practice and Supervision is amended by adding as a new subparagraph (1)(c) the following language and renumbering according, so that as amended the new subparagraph (1)(c) shall read:

(1) Scope of Practice

(c) Substandard Care

1. Over-utilization of appropriate physical therapy services or the lack thereof.
2. Providing treatment intervention that is unwarranted by the condition of the patient.
3. Providing treatment that is beyond the point of reasonable benefit.
4. Abandoning the care of a patient without informing the patient of further care options.
5. Failing to practice in accordance with the standards set forth in the "Guide to Physical Therapist Practice," pursuant to rule 1150-1-.02 (1) (d).

Authority: T.C.A. §§ 63-13-301 and 63-13-304.

Rule 1150-01-.04 Qualifications for Licensure is amended by deleting subparagraph (4)(a) in its entirety and substituting instead the following language, so that as amended, the new subparagraph (4)(a) shall read:

- (a) Applicants for licensure as a Physical Therapist who seek to conduct diagnostic electromyography (invasive needle study of multiple muscles for diagnosis of muscle and nerve disease), pursuant to rule 1150-1-.02 (See Practice of Physical Therapy), while practicing must submit to the Board's administrative office documented evidence of possessing current ECS certification from the American Board of Physical Therapy Specialties.

Authority: T.C.A. §§ 63-13-304 and 63-13-307.

Rule 1150-01-.04 Qualifications for Licensure is amended by deleting subparagraph (4)(b) in its entirety and substituting instead the following language, so that as amended, the new subparagraph (4)(b) shall read:

- (b) Applicants for licensure as a Physical Therapist who seek to conduct surface electrophysiological studies (motor and sensory conduction, and somatosensory evoked potentials), and kinesiological studies (invasive needle study of the muscles to determine the degree and character of a muscle during certain movements) pursuant to rule 1150-1-.02 (See Practice of Physical Therapy), while practicing must submit to the Board's administrative office documented evidence of possessing the theoretical background and technical skills for safe and competent performance of such studies.

Authority: T.C.A. §§ 63-13-304 and 63-13-307.

Rule 1150-01-.08 Examinations is amended by deleting paragraph (9) but not its subparagraphs and substituting instead the following language, so that as amended, the new paragraph (9) but not its subparagraphs shall read:

- (9) Remediation – Applicants who have twice failed the examination must obtain an Examination Performance Feedback report. This is a detailed diagnostic score report provided by the FSBPT for a fee. The applicant must develop a remediation plan. Such plan may be developed with the assistance of faculty at his/her accredited physical therapy educational program. The plan must outline the measures to be taken to address the weak areas, and must include the observation of physical therapy being practice in a clinical setting for a minimum of twenty (20) hours during the three (3) month period described in subparagraph (8) (a).

Authority: T.C.A. §§ 63-13-301, 63-13-304, 63-13-306, and 63-13-307.

Rule 1150-01-.12 Continuing Competence is amended by deleting the introductory paragraph in its entirety and substituting instead the following language, so that as amended, the new introductory paragraph shall read:

1150-01-.12 Continuing Competence. On January 1, 2003, the Board shall begin to notify

applicants for renewal of continuing competence requirements as provided in T.C.A. §63-13-304(6). The Board shall require each licensed physical therapist and physical therapist assistant to participate in a minimum number of experiences to promote continuing competence for the twenty-four (24) months that precede the licensure renewal month. Beginning January 1, 2005, all applicants for licensure, renewal of license, reactivation of license, or reinstatement of license must demonstrate competency.

Authority: T.C.A. §§ 63-13-304, 63-13-308, and 63-13-309.

Rule 1150-01-.12 Continuing Competence is amended by deleting paragraph (3) in its entirety and substituting instead the following language, so that as amended, the new paragraph (3) shall read:

- (3) Twenty-four (24) Month Requirement – Continuing competence credit is awarded for the clock hours spent in an activity as provided in paragraphs (5) and (6). Except as provided in paragraph (4), all required hours may be met through Class I activities. Except as provided in paragraph (4), any Class I activity without a stated maximum number of hours may be used to accrue all required hours.
  - (a) Physical Therapist – Thirty (30) hours are required for the twenty-four (24) months that precede the licensure renewal month.
    1. At least twenty (20) hours of the thirty (30) hour requirement must be from Class I activities as provided in paragraph (5).
    2. Up to ten (10) of the thirty (30) hour requirement may be from Class II activities as provided in paragraph (6).
  - (b) Physical Therapist Assistant – Twenty (20) hours are required for the twenty-four (24) months that precede the licensure renewal month.
    1. At least ten (10) hours of the twenty (20) hour requirement must be from Class I activities as provided in paragraph (5).
    2. Up to ten (10) hours of the twenty (20) hour requirement may be from Class II activities as provided in paragraph (6).

Authority: T.C.A. §§ 63-13-304, 63-13-308, and 63-13-309.

Rule 1150-01-.12 Continuing Competence is amended by deleting paragraph (4) but not its subparagraphs and substituting instead the following language, so that as amended, the new paragraph (4) but not its subparagraphs shall read:

- (4) Four (4) of the hours required in parts (3) (a) 1. and (3) (b) 1. consist of ethics and jurisprudence education courses. These four (4) hours are required every other twenty-four (24) month period.

Authority: T.C.A. §§ 63-13-304, 63-13-308, and 63-13-309.

Rule 1150-01-.12 Continuing Competence is amended by deleting subparagraph (5)(a) in its entirety and substituting instead the following language, so that as amended, the new subparagraph (5)(a) shall read:

- (a) External peer review of practice with verification of acceptable practice by a recognized entity, e.g., American Physical Therapy Association. Continuing competence credit is twenty (20) hours per review with a maximum of one (1) review each twenty-four (24) month period.

Authority: T.C.A. §§ 63-13-304, 63-13-308, and 63-13-309.

Rule 1150-01-.12 Continuing Competence is amended by deleting subparagraph (5)(b) in its entirety and substituting instead the following language, so that as amended, the new subparagraph (5)(b) shall read:

- (b) Internal peer review of practice with verification of acceptable practice. Continuing competence credit is two (2) hours per review with a maximum of two (2) reviews during each twenty-four (24) month period.

Authority: T.C.A. §§ 63-13-304, 63-13-308, and 63-13-309.

Rule 1150-01-.12 Continuing Competence is amended by deleting subparagraph (5)(h) in its entirety and substituting instead the following language, so that as amended, the new subparagraph (5)(h) shall read:

- (h) Authorship of a presented scientific poster, scientific platform presentation or published article undergoing peer review. Continuing competence credit is ten (10) hours per event with a maximum of two (2) events each twenty-four (24) month period.

Authority: T.C.A. §§ 63-13-304, 63-13-308, and 63-13-309.

Rule 1150-01-.12 Continuing Competence is amended by deleting subparagraph (5)(j) in its entirety and substituting instead the following language, so that as amended, the new subparagraph (5)(j) shall read:

- (j) Certification of clinical specialization by the American Board of Physical Therapy Specialties (ABPTS). Continuing competence credit is twenty-six (26) hours and is recognized only in the twenty-four (24) month period in which certification is awarded.

Authority: T.C.A. §§ 63-13-304, 63-13-308, and 63-13-309.

Rule 1150-01-.12 Continuing Competence is amended by deleting subparagraph (5)(k) in its entirety and substituting instead the following language, so that as amended, the new subparagraph (5)(k) shall read:

- (k) Certification of clinical specialization by organizations other than the ABPTS (e.g. the McKenzie Institute, the Neuro Developmental Treatment Association, the Ola Grimsby Institute, etc.) may be recognized as continuing competence credit for up to twenty-six (26) hours, in the twenty-four (24) month period in which certification or recertification is awarded. The number of continuing competence credit hours awarded is determined by the Board.

Authority: T.C.A. §§ 63-13-304, 63-13-308, and 63-13-309.

Rule 1150-01-.12 Continuing Competence is amended by deleting subparagraph (5)(l) in its entirety and substituting instead the following language, so that as amended, the new subparagraph (5)(l) shall read:

- (l) Awarding of an advanced degree from an accredited University. Continuing competence credit is twenty-six (26) hours and is recognized only in the twenty-four (24) month period in which certification or recertification is awarded.

Authority: T.C.A. §§ 63-13-304, 63-13-308, and 63-13-309.

Rule 1150-01-.12 Continuing Competence is amended by deleting subparagraph (6)(a) in its entirety and substituting instead the following language, so that as amended, the new subparagraph (6)(a) shall read:

- (a) Self-instruction from reading professional literature. Continuing competence credit is limited to a maximum of one (1) hour each twenty-four (24) month period.

Authority: T.C.A. §§ 63-13-304, 63-13-308, and 63-13-309.

Rule 1150-01-.12 Continuing Competence is amended by deleting subparagraph (6)(b) in its entirety and substituting instead the following language, so that as amended, the new subparagraph (6)(b) shall read:

- (b) Attendance at a scientific poster session, lecture, panel or symposium that does not meet the criteria for Class I. Continuing competence credit is one (1) hour per hour of activity with a maximum of two (2) hours credit each twenty-four (24) month period.

Authority: T.C.A. §§ 63-13-304, 63-13-308, and 63-13-309.

Rule 1150-01-.12 Continuing Competence is amended by deleting subparagraph (6)(e) in its entirety and substituting instead the following language, so that as amended, the new subparagraph (6)(e) shall read:

- (e) Participating in a physical therapy study group consisting of two (2) or more physical therapists or physical therapist assistants. Continuing competence credit is limited to a maximum of one (1) hour credit each twenty-four (24) month period.

Authority: T.C.A. §§ 63-13-304, 63-13-308, and 63-13-309.

Rule 1150-01-.12 Continuing Competence is amended by deleting subparagraph (6)(f) in its entirety and substituting instead the following language, so that as amended, the new subparagraph (6)(f) shall read:

- (f) Attending and/or presenting in-service programs. Continuing competence credit is one (1) hour per eight (8) contact hours with a

maximum of four (4) hours credit each twenty-four (24) month period.

Authority: T.C.A. §§ 63-13-304, 63-13-308, and 63-13-309.

Rule 1150-01-.12 Continuing Competence is amended by deleting subparagraph (6)(g) in its entirety and substituting instead the following language, so that as amended, the new subparagraph (6)(g) shall read:

- (g) Serving the physical therapy profession as a delegate to the APTA House of Delegates, on a professional board, committed, or task force. Continuing competence credit is limited to a maximum of one (1) hour credit each twenty-four (24) month period.

Authority: T.C.A. §§ 63-13-304, 63-13-308, and 63-13-309.

Rule 1150-01-.12 Continuing Competence is amended by deleting paragraph (10) in its entirety and substituting instead the following language, so that as amended, the new paragraph (10) shall read:

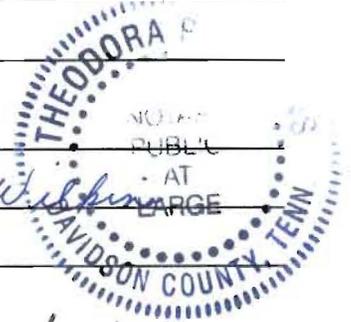
- (10) The Board, in cases of documented illness, disability, or other undue hardship, may waive the continuing competence requirements and/or extend the deadline to complete continuing competence requirements. To be consider for a waiver of continuing competence requirements, or for an extension of the deadline to complete the continuing competence requirements, a licensee must request such in writing with supporting documentation before the end of the twenty-four (24) month period in which the continuing competence requirements were not met.

Authority: T.C.A. §§ 63-13-304, 63-13-308, and 63-13-309.

I certify that the information included in this filing is an accurate and complete representation of the intent and scope of rulemaking proposed by the agency.

Date: September 18, 2009  
Signature: Diona E. Layden  
Name of Officer: Diona E. Layden  
Assistant General Counsel  
Title of Officer: Department of Health

Subscribed and sworn to before me on: 9/18/09  
Notary Public Signature: Theodore P. Wilburn  
My commission expires on: 11/7/2011



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Filed with the Department of State on: 9/18/09  
Tre Hargett  
Tre Hargett  
Secretary of State

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