



Juneau – Zoom

AK PT/OT Board - Scope of Practices Committee Mtg - January 8, 2024

Alaska Division of Corporations, Business and Professional Licensing
Jan 8, 2024 at 10:00 AM AKST to Jan 8, 2024 at 12:00 PM AKST

Meeting Minutes

1. Call to Order/Roll Call

10:00 AM

The Physical Therapy and Occupational Therapy Scopes of Practice Committee meeting was called to order at 10:02 am on Monday, January 8, 2024 by Tina McLean. Roll call done by Tina McLean. Committee members present were board members Lindsey Hill, Tina McLean and Enlow Walker. Guest present - Kristen Neville with American Occupational Therapy Association (AOTA). Staff present: Sheri Ryan, License Examiner and Shane Bannarbie, Program Coordinator.

2. Review/Approve Agenda

10:05 AM

No changes to the agenda. All in favor of the agenda as written.

3. Public Comment

10:10 AM

No public comment given.

4. Correspondence Items – referred by Board

1. DPT Students and Dry Needling - 10-17-2023

Board discussion from Nov. mtg = Discussed question of DPT students and their ability to perform dry needling under the supervision of a licensed physical therapist in the State of Alaska.

Current regulations do not address dry needling. Position statement out that supports dry needling for licensed physical therapists that have been adequately trained. Definition non-licensed personnel – 12 AAC 54.590 (3) - Non-licensed personnel can only be used for patient-related duties that are routine tasks that do not require the education, skill, and training of a physical therapist or physical therapist assistant, and for which the outcome anticipated for the task is predictable; and situation of the patient and the environment is table and will not require the judgement, interpretations, or adaptations be made by non-licensed personnel; and task routine and process have been clearly established.

Appropriate training required – 54.520(c) – assure training of non-licensed personnel under the supervision of a PT and document that training. Is the PT adequately trained to train/supervise? Is the student a first year or senior year? Needs further research to respond.

1-8-2024 SOP committee mtg. Discussion:

12 AAC 54.535 (d)(2)(c) PT internship standards – therapeutic practice would include dry needling, but “Internship” doesn’t pertain to students. 12 AAC 54.590 (3) non-licensed personnel– doesn’t include students. There is no current regulation that addresses student supervision.

Any requirements for student education/learning opportunities: Supervisor needs to be proficient in dry needling. Any learning opportunity would need to be under direct supervision. Would need an opportunity to learn/practice their skill. Current opportunities are supervised for entry/base level skills as a student as part of curriculum. Is dry needling part of curriculum of school in order to be part of this internship? Or is this an extracurricular activity? Dry needling is not part of ACOTE standards for doctoral OT program per Kristen Neville w/ACOTE. Dry needling is considered an advanced level skill for both PT and OT. Dry needling is beyond basic DPT training; it is a certification outside/after graduate program. Requirements to take dry needling course for certification = 1-3 years of licensed physical therapy practice which exceed the level of skills of a “student”.

Is this a Level 1 internship or Level 2 internship? What is the purpose of having a student do dry needling on patients?? Why would you have an entry level student doing an advanced level skill?

Recommendation to the board - consider regulatory project for supervision of students during internship = Would need to be motioned/approved at the full board meeting. To be added to February, 2024.

Kristen Neville -- Doctorate OT students exposed to physical agent modalities but not dry needling. Dry needling is not an entry level skill; not currently documented in any AOTA official position statements. TN amended statues that only licensees can perform dry needling; no students. Watch/learn but not perform on patients. [ACOTE standards](#) do include *Demonstrate knowledge and use of the safe and effective application of superficial thermal agents, deep thermal agents, electrotherapeutic agents, and mechanical devices as a preparatory measure to improve occupational performance. This must include indications, contraindications, and precautions.* OTA does not include “*demonstrate knowledge*” – states “define the safe and effective application of” so there is a differentiation between what is required of OT students and OTA students. Most would agree dry needling meets the definition of a “mechanical device”. Fieldwork is for learning basic learning skills. Dry needling is not an entry level skill.

Tina will draft language for a letter to be approved by committee at next SOP committee mtg 02/12/2024. Approved letter will be sent to full board at February board meeting.

Initial DRAFT Response - Currently our regulations stipulate that supervision of non-licensed personnel and internships for the physical therapist is ultimately responsible for the evaluation, treatment, and delivery of care. It would be in the best interest of any supervising PT and the student to understand that dry needling is an advanced level skill not required for graduation of any program that we are aware of. It would not be advised to allow a student to perform dry needling of any patient. We support supervision of students in clinical settings for check off of their clinical skills for graduation requirements for the basic entry level skills required by their programs, but it would not be the board's position to support that they perform on patient advanced level skills beyond those required for the graduate program.

2. APTA-AK request for clarification on diagnostic imaging by physical therapists - 11-13-2023

- Question #1 - Duty to refer – YES. 08.84.120(a)(6) The board may refuse to license an applicant, may refuse to renew the license of a person, and may suspend or revoke the license of a person who... has failed to refer a patient to another qualified professional when the patient's condition is beyond the training or ability of the person. Principles of Practice – Duty to act in the best interests of the patient within own level of competence.

Discussion: Can a PT refer directly to the radiologist for diagnostic imaging... aka an x-ray/MRI/CTs (contrast and non-contrast) /diagnostic ultrasound? Previously, permission to do imaging has been requested through primary care provider. Requesting the elimination of the middleman. A Physical Therapist has the onus to act within their level of training/competency.

Does a PT have the education to read the results of the plain film x-ray? MRI? CT? Diagnostic Ultrasound when the radiologist report is received? Do all PTs have this knowledge base? Depends on level of training of the physical therapist.

[Principle 1: Patient/Client Safety and Well Being](#) (3) Provide services within practitioner's level of competence as demonstrated by education, training and professional experience.

[08.84.190 \(6\)](#) "physical therapy" does not include the use of roentgen rays and radioactive materials for diagnosis and therapeutic purposes. How does this statute relate to the "ordering" of diagnostic imaging studies?

Discussion of this passage – roentgen rays - not actually performing the procedure – taking of an x-ray – only referring for the imaging. Not diagnosing. Using to guide plan of care. PT asking to clarify what imaging would show on the joint specific area in which we are working to help us determine and guide our plan of care. Do we keep working on that patient or do we refer out to a specialist to further care for that patient that might

be beyond our scope. Physical therapists are clearly trained on musculoskeletal diagnosis, but they are not making a medical diagnosis.

“Determination” aka diagnosis – being used for guiding of care/treatment. Confirmation of clinical presentation of patient. Continue or refer out. Whole clinical presentation of the patient used plus results of what plain film x-ray results may say to determine to refer out or continue treatment.

Referring for imaging is not being used for “therapeutic purposes”. Therapeutic purposes are using x-rays or radiation for treatment of a condition. For example, using radiation for treatment of breast cancer or prostate cancer.

- Question #2 - YES, the board considers a board-certified radiologist to be a “qualified professional”.
- Question #3 - Nothing within current statutes explicitly prohibits PTs from directly ordering diagnostic imaging. Does the current practice act support PTs referring for diagnostic imaging? YES.

In Alaska, OTs do not have direct access. PTs do have direct access.

Title 7 = Health and Social Services; Chapter 12 Facilities and Local Units; 477 Radiology Service

- 7 AAC 12.477(b) Radiology services may be performed only upon the order of the attending physician or practitioner.
- 7 AAC 12.477(b) – What is the definition of attending physician or practitioner used in this reference? Sheri Ryan, Licensing Examiner to research

Title 7 = Health and Social Services; Chapter 18 Radiation Sources and Radiation Protection

7 AAC 18.990 (58) Definitions – “practitioner of the healing arts licensed by this state” includes the following practitioners licensed by this state:

- A. Chiropractor;
- B. Dentist;
- C. Nurse practitioner;
- D. Osteopath;
- E. Physician, including a surgeon;
- F. Physician assistant; and
- G. Podiatrists;
- H. Physical Therapist; (*request to add by APTA-AK*)

7 AAC 18.990 (58) “practitioner of the healing arts” – what would the process be to change and have physical therapist added? Sheri Ryan, Licensing Examiner to research.

- Question #4 - In support of changes to Alaska’s Administrative Code Title 7 changes that would recognize and identify physical therapists as healthcare “practitioners” who may refer for “radiological services” but may not be within the Board of Physical Therapy and Occupational Therapy’s purview to affect change.

Initial DRAFT Response:

1. Duty to refer – YES. Physical therapists have a duty to refer patients to an appropriate healthcare provider for further evaluation and treatment, in the most timely fashion, as necessitated by the suspected acuity and seriousness of their condition.

[08.84.120\(a\)\(6\)](#) The board may refuse to license an applicant, may refuse to renew the license of a person, may discipline a person, and may suspend or revoke the license of a person who has failed to refer a patient to another qualified professional when the patient's condition is beyond the training or ability of the person;

[Principles of Practice](#) – Principle 1 – (2) + (3) Act in the best interest of the patient/client and Provide services within practitioner’s level of competence as demonstrated by education, training and professional experience.

2. YES, the board considers an Alaska licensed board-certified radiologist to be a “qualified professional”.
3. Nothing within current statutes explicitly prohibits physical therapists from directly ordering diagnostic imaging. The board believes the current practice act supports physical therapists referring for diagnostic imaging studies that are within their level of competence.
4. The board is in support of changes to Alaska’s Administrative Title 7 Code changes that would recognize and identify physical therapists as healthcare “practitioners” who may refer for “radiological services”, but it is not within the Board of Physical Therapy and Occupational Therapy’s purview to affect this change.

5. Next Steps

- Tina to draft response letter for DPT Students dry needling question to be reviewed by committee at next SOP committee meeting on 02/12/2024.
- Tina to draft letter for APTA-AK imaging question to be reviewed by committee at next SOP committee meeting on 02/12/2024.
- 7 AAC 12.477(b) – What is the definition of attending physician or practitioner used in this reference? Sheri Ryan, Licensing Examiner to research

- 7 AAC 18.990 (58) “practitioner of the healing arts” - what would the process be to change and have physical therapist added? Sheri Ryan, Licensing Examiner to research.
- Recommendation to the board - consider regulatory project for supervision of students during internship.

6. Adjourn

The Physical Therapy and Occupational Therapy Scope of Practices Committee meeting adjourned at 11:22 am on Monday, January 8, 2024.

Reviewed and approved by Scope of Practices Committee 02/12/2024.