

The Role of the Physical Therapist Assistant

Physical Therapist Assistant Program
Northwest Arkansas Community
College
(NWACC)
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What is the role of the Physical Therapist Assistant?

This course is designed to answer the question, "What is the role of the PTA?".

For many Physical Therapists, it is not clear what role the PTA should play in patient care, the limitations on what they can or can not do, or the amount and type of supervision the PT should provide.

What is the Role of the PTA?

- In this course, we will look at the following:
 - Guidelines set forth by the APTA
 - Arkansas law from the Arkansas Physical Therapy Practice Act, and Arkansas Physical Therapy Rules & Regulations
 - Criteria governing Physical Therapist Assistant education by the Commission on Accreditation in Physical Therapy Education (CAPTE)
 - Examples of interventions and data collection PTA's are taught to perform & sample exam questions
 - NWACC PTA Program
 - Supervision Requirements in a variety of settings

Course Objectives

- Upon completion of this course, Physical Therapists and Physical Therapist Assistants will have an understanding of the following:
 1. Differences in roles of PT's and PTA's based on guidelines from APTA, CAPTE, Arkansas Physical Therapy Practice Act
 2. Information to assist the PT in deciding what can be delegated and what cannot be delegated to a PTA.

Course Objectives continued

3. Interventions and data collection performed by PTA's
4. Educational requirements of PTA's with emphasis on NWACC PTA Program Curriculum
5. PTA supervision requirements in different settings for Medicare reimbursement.

American Physical Therapy Association (APTA)

The APTA defines the role of the Physical Therapist Assistant (PTA) as "an educated individual who works under the direction and supervision of a physical therapist".

This means a PTA cannot work under the supervision of a physician or other healthcare provider that is not a physical therapist.

APTA

- The APTA is very clear that the Physical Therapist (PT) is solely responsible for the following:
 - Interpreting referrals
 - Performing the initial examination, evaluation, diagnosis, and prognosis
 - Developing or modifying the plan of care (POC) which includes the PT goals
 - Revision of POC and/or goals
 - Developing the discharge plan and documenting the discharge summary
 - Overseeing all documentation

APTA Direction & Supervision of
the PTA HOD 05-18-26

APTA

Lets start with the APTA statement:

“The PT is solely responsible for performing the initial examination, evaluation, diagnosis, and prognosis.”

Can the PTA assist in the Initial Evaluation?

- The PTA can assist the PT with data collection for the evaluation
- A few examples of data collection the PTA can obtain for the PT are
 - ROM
 - MMT
 - Vital Signs.....

Can the PTA assist in the Initial Evaluation?

- Although the PTA can assist the PT with data collection
- The PT is responsible for interpreting and evaluating the data to develop the
 - diagnosis,
 - prognosis,
 - goals, and
 - POC.

Physical Therapy Initial Evaluation

- It would be both unethical and illegal for a PTA to develop the patient goals and a POC

POC and PT Goals

- The role for the PTA is pretty clear for the initial evaluation, but what if a patient's status changes?

APTA

- The APTA states that the PT is responsible for the revision of the POC and/or goals.
 - Does this mean the PT must re-evaluate the patient early?

APTA

- The APTA Guide for Conduct of the Physical Therapist Assistant 3.1 D states:

“A PTA may modify specific interventions within the plan of care established by the PT in response to changes in a patient’s/clients status.”

Role of PTA

- The key phrases in the APTA statement are
 - “specific interventions within the plan of care established by the PT”, and
 - “response to changes in a patient’s/clients status.”

What to Do?

- Can the PTA change the treatment?
 - The PTA can only “modify” a treatment that is already outlined in the plan of care as a result of a patient change in status.

Changes Within the POC

- How much a PTA can modify or progress the treatment interventions **within** the POC depends on how **specific** the physical therapist has written the POC.

Intervention changes within the POC

- If the POC specifies “gait training with a standard walker”, then
 - the PTA **cannot** change the patient’s assistive device to crutches or a cane without consulting the PT
 - **even if** the patients balance improves or the weight bearing restriction is lifted.

Intervention Changes within the POC

- But, if the POC was written as “gait training with or without an assistive device”, then
 - The PTA could make changes in the assistive device based on changes in the patient’s status.
 - These changes would be consistent with the PT POC.

Intervention Changes Within the POC Example 2

- If a PT goal is to increase strength from 3/5 to 5/5 the PT could write a specific POC to include straight leg raises, short arc quads, then
 - The PTA would need to consult the PT before changing these exercises in response to a change in the patient’s strength

Intervention Changes Within the POC Example 2

- But if the PT POC was written as “strengthening exercises to meet PT goals”, then
 - The PTA could modify the exercises within the POC as the patient’s strength increased based on information obtained from data collection using MMT

POC Example 3

- POC 1: Thermal Ultrasound
 - In this situation, A PTA could not legally or ethically change the modality from ultrasound to hot pack without consulting the PT.
 - The PT would have to change the POC before the PTA could change the modality.

POC Example 4

- POC 2 Modality for tissue elongation
 - In this situation, the PTA could legally and ethically select the appropriate modality within the POC based on patient changes.
 - The PT wrote the POC broad enough to allow the PTA to change the modality within the POC as needed in response to data collection.

Plan of Care

- A PTA can not add something to the POC that was not already there.
- For example, if the PT POC includes strengthening and transfer training but does not include gait training, a PTA could NOT perform gait training with the patient until the patient was seen by the PT and the PT determined if gait training should be included in the POC.

Role of PTA - Intervention

- In summary, according to the APTA
 - the PTA can modify specific interventions within the PT POC,
 - but each PT determines how broad a range the PTA can have in modifying the patient treatment interventions for each specific patient by how the PT chooses to write the PT POC.
 - PTA's are trained to recognize when a change in status indicates the interventions in the POC should not be provided and notifies the PT
 - In all cases the PTA is responsible for notifying the supervising PT of any changes.

Mary Peter, PTA NWACC Graduating Class of 1999

- “As a PTA you have to learn to be flexible and adjust to different Physical Therapist treatment styles. When in Rome, do as the Romans do!”

Mary Peter, PTA

PTA Education Criteria

- We have looked at some of the APTA criteria, now lets take a look at the criteria established by the accrediting body for Physical Therapist and Physical Therapist Assistant educational programs.

Commission on Accreditation in Physical Therapy Education (CAPTE)

- The accrediting body for Physical Therapist and Physical Therapist Assistant educational programs is CAPTE.

CAPTE
1111 North Fairfax Street
Alexandria, VA 22314
(703) 706-3245
<http://www.apta.org> in the Education Folder

Plan of Care CAPTE Criteria

- Although the PTA can modify interventions “within the POC” based on the patient’s response, the PTA would be responsible for reporting these changes to the supervising PT.
- CAPTE Criteria 3.3.2.9. states the PTA can “Adjust interventions within the POC established by the PT in response to patient clinical indications and report this to the supervising PT.”

Plan of Care

- According to CAPTE Criteria, in addition to PTA’s being able to adjust interventions within the POC established by the PT in response to patient clinical indications, PTA’s should also be trained to:
- CAPTE Criteria 3.3.2.10.
 - “Recognize when intervention should not be provided due to changes in the patient’s status and reports this to the supervising physical therapist.”
- CAPTE Criteria 3.3.2.11.
 - “Report any changes in the patient’s status to the supervising physical therapist.”

CAPTE PTA Accreditation
Handbook, Appendix A-22

Plan of Care

- The following example was provided by Jon Lee, PT
- "I can recall an incident where I was working with a patient that had knee surgery and was doing fairly well. On one particular visit the PTA was seeing the patient and noted an increase in warmth, redness and tenderness to the patient's proximal calf and popliteal area. The PTA stopped all exercises at that time and asked me to take a look at the patient. This kind of baseline knowledge that PTA's possess helps me feel confident that my patient's are in good hands. It's comforting to know that having graduated from an accredited program, on their first day on the job; they will practice safely and professionally."

APTA Guide of Conduct for the PTA

If we look again at the APTA Code of Ethics for the PTA, Standard 3.1 D states:

"A PTA may modify specific interventions within the plan of care established by the PT in response to changes in a patient's/client's status."

CAPTE & APTA Criteria

- Thus, both the APTA and CAPTE indicate the PTA can modify interventions "within" the PT POC, based on changes in the patient's status.
- Examples of changes in a patient's status include:
 - a change in weight bearing status
 - an increase in strength
 - a decrease in ROM
 - a change in cognition

Plan of Care PTA Role Summary

- The PT maintains as much control as they feel is indicated for a specific patient in the way they write the POC.
- If the PT writes specific interventions - the PTA must follow them and CANNOT change them without consulting the PT.
- If the PT writes the POC in a way that allows the PTA to progress or make changes within the POC, the PTA can make those changes within the POC based on data collection, then inform the supervising PT.

How does the PT determine if they should write a very specific and narrow POC or a broader POC that would allow the PTA to make some adjustments to the treatments based on the patient's response?

APTA Recommendations

- The APTA recommends that the PT consider the following when deciding if the patient can be seen by the PTA instead of the PT:
 - PTA's experience
 - Patient stability & complexity
 - Setting
 - Federal and state law
 - Liability & risk management concerns
 - Predictability of the consequences
 - Mission
 - Frequency needed for reexamination

APTA HOD 05-18-26 Direction & Supervision of PTA

APTA Recommendations

- The APTA's recommendations to assist the PT in determining when the patient should be seen by the PT rather than the PTA, can also be used as guidelines for determining how narrow or broad the POC should be written.

Writing the POC

- As with many things, there is not one clear answer – it depends on the:
 - situation,
 - complexity of the patient,
 - PTA's experience,
 - PT's confidence in the PTA's decision making ability, and
 - PTA's ability to make appropriate changes within the POC.

Writing the POC

- What a PT would delegate to a PTA that is a new grad might be very different than what they would delegate to a PTA with 3 or more years of experience.
- But, if the PTA's 3 years of experience was in an OP setting, and this was their first experience in acute care – then the years of experience might not be the best consideration.

Physical Therapist's Role

- A PT's role is to perform a comprehensive evaluation of a patient – to include
 - Social History
 - Living Environment
 - General Health Status
 - Social / Health Habits
 - Family History
 - Medical / Surgical History
 - Functional Status / Activity Level
 - Clinical Tests & Medications
 - Systems Review
 - Individual Tests & Measures

Physical Therapist's Role

- PT's evaluate each patient as an individual, then use their knowledge and critical thinking abilities to determine the individuals:
 - Physical Therapy Diagnosis
 - Prognosis
 - Goals
 - Plan of Care

Physical Therapist's Role

- The PT can use these same critical thinking abilities to assess the PTA's
 - knowledge,
 - experience, and
 - ability to make good decisions within the POC.
- Based on the PT's assessment of each PTA's abilities, they can then decide how narrow or broad they want to write the POC when working with that particular PTA.

Teamwork

- To ensure the best quality of care, it is important that the PT and PTA work as a team which requires:
 - Trust,
 - Respect, and
 - Communication.

Arkansas Practice Act & Rules & Regulations

- We have looked at APTA and CAPTE criteria and guidelines for PT's and PTA's, but we must also understand and follow the state rules & regulations, laws, and practice act.
- We will look only at the Arkansas Physical Therapy Practice Act, and Arkansas Rules & Regulations in this course.

www.arptb.org

Arkansas Practice Act & Rules & Regulations

- If you practice in a state other than Arkansas, you should review the practice act, and state board rules and regulations for your state.
- The following website provides links to other state physical therapy licensing boards:
<http://www.fsbpt.org>

Arkansas Licensure

- Physical Therapist Assistants must meet the following criteria to attain Arkansas licensure:
 - Graduate from an accredited program
 - Pass a national licensure exam (NPTAE)
 - Be at least 18 years of age
 - Be of good moral character

AR PT Practice Act 17-93-102(4B)

Arkansas Physical Therapy Practice Act

- The Physical Therapy Practice Act describes the function of a PTA as
 - Assisting the PT in patient-related activities
 - Performing procedures delegated to them by the PT based on the PTA's education and training
 - Team member who contributes to patient care and assists the PT in performing procedures and programs

www.arptb.org

Arkansas Physical Therapy Practice Act

- (4)(B) The physical therapist assistant's function is to:
- (i) Assist "the physical therapist in the patient-related activities;
 - (ii) Perform procedures delegated to him or her by the licensed physical therapists that are commensurate with his or her education and training;
 - (iii) Function as a participating team member who contributes to total patient care and assists the physical therapist in carrying out complete procedures and programs; and
 - (iv) Observe and report to his or her supervisor conditions, reactions, and responses related to his or her assigned duties.

AR PT Practice Act

Arkansas Physical Therapy Practice Act

- The PTA “shall not interpret the orders, perform evaluation procedures, or assume responsibility for planning patient care.”

AR PT Practice Act 17-93-102(C)

PT & PTA Roles

- The APTA, CAPTE, and Arkansas Physical Therapy Practice Act all consider the PTA as a team member and allows them to perform procedures the PT delegates to them that are within the PTA’s education and training.

PT & PTA Roles

- To assist the Physical Therapist with determining what they can delegate to PTA’s, we need to look further into the PTA’s education to answer the following questions:
 - What is a Physical Therapist Assistant trained to do?
 - What is their educational background?
 - What should not be delegated to a PTA?

PTA Education

- Let’s begin with a review of the type and extent of education PTA’s receive.

PTA Education

- PTA’s must attend and graduate from an accredited program.
- CAPTE (Commission on Accreditation in Physical Therapy Education) mandates PTA’s earn an Associate Degree
- Associate Degrees are defined as a 2 year degree – usually consisting of 60 - 70 credit hours
- Associate degrees are usually earned at Community Colleges

PTA Education

- CAPTE mandates PTA programs must complete the program in 5 semesters and culminates in an associate degree in physical therapist assistant.

CAPTE Standards & Expectations

- PTA's graduating from an accredited program should be able to:
 - Apply interventions within the plan of care (POC) established by the PT
 - Adjust and progress interventions in response to patient clinical indications
 - Recognize when interventions should not be provided due to a change in the patient's status based on data collection related to the application of the interventions

CAPTE Handbook pg E-9

CAPTE Expectations

- To be accredited a PTA Program must be in compliance with **each** CAPTE standard
- PTA Programs must educate PTA students to meet these standards.

PTA Education

- In the example of the POC written
 - “Gait training with or without an assistive device”

What would PTA's need to know to be able to adjust or progress an intervention within this POC?

PTA Education

- Would knowledge of gait patterns with each assistive device be enough?
- Would PTA's need to know how to adjust the height of assistive devices?
- Would the PTA need to be able to assess balance?
- Would the PTA need knowledge of the specific condition or disease?

PTA Education

- It is critical for the PT to understand the PTA's educational background in order to fully utilize the PTA in patient care.
- It would be impossible to answer the question “What is the role of the PTA” without describing the PTA's educational background.

PTA Education

- CAPTE provides clear instructions and standards for PTA education.
- CAPTE mandates the material and time frame the PTA Programs must follow, but each PTA program develops the curriculum and design of the program to meet the standards.

PTA Education

- In this course, we will:
 - look at the curriculum and design of the Northwest Arkansas Community College (NWACC) PTA Program
 - list the interventions and data collections CAPTE mandates PTA Programs teach student Physical Therapist Assistants (SPTA)

NWACC PTA Program

- Accredited by CAPTE
- Students earn an Associate Degree in Applied Science (AAS)
- Classified as a 1+1 program
 - General education courses are taken prior to the technical component of the program
 - Students in the technical component begin the technical component at the same time each year and progress through the courses on a full time basis

NWACC PTA Program Prerequisite / General Education Requirements

- 28 credit hours which may be taken on a full- or part-time basis
- Courses may be taken by any student admitted to NWACC
- General Education courses form the first year of the 1+1 program
- General Education courses may also be taken at other community colleges, colleges, or universities and transferred to NWACC

NWACC PTA Program Prerequisite / General Education Course Requirements

- College Algebra OR Math for an Associate of Applied Science
 - Anatomy & Physiology I & II
 - General Psychology
 - English Composition I
 - English Composition II OR Technical Writing
 - Introduction to Computer Information
 - Introduction to Physics OR College Physics I
- *Biology or chemistry is a pre-requisite course for A&P I

Prerequisite / General Education

- The purposes of the general education courses are:
 - to provide the PTA student with the basic knowledge needed in foundational sciences and behavioral sciences
 - to provide training in basic written and oral communication
 - to prepare them for the PTA course content

Technical Education Component

- Each PTA Program has to provide education specifically outlined by CAPTE in the “Evaluative Criteria for Accreditation of Education Programs for the Preparation of Physical Therapy Assistants” in order to meet and maintain an accredited program.
- How each program chooses to organize this information into specific courses and curriculum is left up to the program.

Technical Component of NWACC PTA Program

- This course will briefly describe the technical component of the PTA Program offered at NWACC.
- For more information about the NWACC PTA Program, please visit our website at: www.nwacc.edu/academics/alliedhealth

Admission into the Technical Component of the PTA Program at NWACC

- Students must meet admission requirements and submit an application to be considered for acceptance into the NWACC PTA Program.
- CAPTE mandates the number of students each PTA Program can accept based on space, resources, and staff.

NWACC PTA Program Requirements for Admission into the Technical Component

- Completion of the required pre-requisite courses with a grade of C or better
- 9 hours of observation at 3 different physical therapy facilities
- Essay on what the applicant learned, liked and disliked about their observations
- HOBET exam (Health Occupations Basic Entrance Exam)
- Submission of an application by the first Monday in March

NWACC PTA Program Requirements for Admission into the Technical Component

- Applicants are ranked based on their total score using the following system
 - 60% GPA of required prerequisite courses
 - 20% Essay
 - 20% HOBET
- 12 to 14 qualified applicants are accepted each year based on a competitive admission process

PTA Technical Education

“As a new instructor, I was actually quite surprised at the depth of knowledge the PTA’s were required to have”.

Deanna Fletcher, PT, DPT, MPH

NWACC PTA Technical Component

- In the next few slides, we will look at:
 - The NWACC curriculum and provide a short summary of some of the courses to provide PT’s with an idea of the type information PTA’s are taught.
 - Specific interventions and data collection entry-level PTA’s are taught as mandated by CAPTE

NWACC PTA Technical Component

- 1st Summer Courses
 - Clinical Kinesiology Lecture
 - Students learn the muscles origins, insertion, nerve innervation and actions.
 - They also learn how the muscles are working during exercises or functional activities.
 - Clinical Kinesiology Lab
 - Students learn how to perform MMT and ROM for all peripheral joints.
 - Basic Principles of Physical Therapy
 - Provides training in history of physical therapy, APTA, ethics, Arkansas Physical Therapy Practice Act, CPR, taking vital signs, infection control and isolation techniques.

NWACC PTA Technical Component Fall Semester

- Documentation & Communication:
 - Students learn a variety of documentation formats with an emphasis on the SOAP note
 - Students learn about verbal and non-verbal behaviors, and teaching techniques
- Gait Analysis and Gait Training
 - Students learn normal gait pattern
 - Gait deviations and possible causes
 - Prosthetic gait training, and
 - Of course the fitting of assistive devices and various gait patterns.

NWACC PTA Technical Component Fall Semester

- Life Span
 - Students learn what happens in normal development starting with birth and progressing to old age.
 - This allows them to differentiate between pathology and what is normal development & aging.
- Pathophysiological Conditions
 - This course covers pharmacology, lab values, and diagnostic tests
 - A wide variety of diseases from cardiovascular & pulmonary diseases, Diabetes Mellitus, COPD, and more....
 - Working in critical care

NWACC PTA Technical Component Fall Semester

- Physical Therapy Procedures I & Lab
 - In this class students learn indications, precautions, and contraindications for various modalities,
 - Physiological justifications for modality selection,
 - How to administer the modality, and
 - How to select the appropriate modality & to modify parameters to meet the goals set by the PT within the POC.

NWACC PTA Technical Component Fall Semester

- By now you are probably wondering when this part of the presentation is going to end – just like our students are wondering how many more courses they can handle in the fall!
- They take 17 credit hours – so we aren't quite done yet!

NWACC PTA Technical Component Fall Semester

- Theory & Treatment Techniques & Lab
 - Basic exercise theory
 - Exercise techniques: stretching, strengthening & aerobic
 - Exercises for a variety of orthopedic conditions to include total hip and total knee arthroplasty, sprains, strains, arthritis, and herniated disc to name a few
 - Special tests for orthopedic conditions

NWACC PTA Technical Component Fall Semester

- Ok, the last fall semester class is:
- Clinical Experience I:
 - This is where the students go out into the clinic and primarily observe one day a week for 6 weeks at 2 different clinical sites – one site for 3 days total then another site for 3 days total

And finally – the fall semester is over!

NWACC PTA Technical Component Spring Semester

- Spring Semester is much better for several reasons
 - The students only take 14 credit hours which is a relief after 17 credit hours in the fall
 - For 3 weeks of the semester the students attend a full time 40 hour a week clinical experience at a clinical site!
 - They remember why they are doing all of this hard work!

NWACC PTA Technical Component Spring Semester

- Much of the course work in the spring semester focuses primarily on neurological conditions and treatment. Students take courses which cover all things neuro!

NWACC PTA Technical Component Spring Semester

- Neurophysiology and Lab:
 - Dermatomes, spinal tracts, areas of the brain and their function, cranial nerves, sensory testing
 - Pathology and treatment of patients with Multiple Sclerosis, Parkinson's Disease, CVA, traumatic brain injury, and spinal cord injury
 - Treatments taught include basic NDT, PNF, and motor control theory.
 - Students also learn the Ranchos Los Amigos Cognitive Functioning Scale and Glasgow Coma Scale.

NWACC PTA Technical Component Spring Semester

- Therapeutic Procedures II & Lab
 - Students learn about wound care,
 - Exercise with special populations such as pregnancy, cardiac rehabilitation, chest physical therapy, aquatic therapy
 - Massage
- Special Topics in PT
 - Students learn about the roles & responsibilities of the PTA,
 - Supervisory relationships
 - Ethical conduct
 - HIPAA
 - Conflict management
 - Billing and more.....

NWACC PTA Technical Component 2nd Summer

- Clinical Internship I & II
 - The PTA students go off for their 2 five week full time clinical internships in the summer.
 - They are required to attend one out-patient facility and one in-patient facility to provide a variety of experiences.

PTA Interventions

- Now, lets move on to the physical therapy interventions PTA's are trained to perform.
 - For details of each intervention refer to the Guide to Physical Therapist Practice

CAPTE Criteria on PTA Interventions

“Demonstrates competence in implementing selected components of interventions identified in the plan of care established by the physical therapist.”

CAPTE Accreditation Handbook
PTA Criteria Appendix A-20

Interventions

- The following slides will list the interventions all PTA Programs are required to teach their students as mandated by CAPTE in the Accreditation Handbook PTA Criteria Appendix A-20.

Interventions

- Functional Training
 - Activities of Daily Living
 - Assistive/Adaptive Devices
 - Body Mechanics
 - Developmental Activities
 - Gait and Locomotion Training
 - Prosthetics and Orthotics
 - Wheelchair Management Skills

Interventions

- Infection Control Procedures
 - Isolation Techniques
 - Sterile Technique
- Manual Therapy Techniques
 - Passive Range of Motion
 - Therapeutic Massage

Interventions

- Physical Agents and Mechanical Agents
 - Athermal Agents
 - Biofeedback
 - Compression Therapies
 - Cryotherapy
 - Electrotherapeutic Agents
 - Hydrotherapy
 - Superficial and Deep Thermal Agents
 - Traction

Interventions

- Therapeutic Exercise
 - Aerobic Conditioning
 - Balance & Coordination Training
 - Breathing Exercises & Coughing Techniques
 - Conditioning and Reconditioning
 - Posture Awareness Training
 - Range of Motion Exercises
 - Stretching Exercises
 - Strengthening Exercises

Interventions

- Wound Management
 - Application & Removal of Dressing or Agents
 - Identification of Precautions for Dressing Removal

PTA Education of Interventions

- The PTA is not only trained to provide interventions, but PTA's also have knowledge of indications, precautions and contraindications to interventions.
- It is this knowledge that allows them to modify specific interventions within the POC or consult the PT if a change in status warrants not performing the interventions.

- The next few slides will provide some sample exam questions that help to demonstrate the PTA's knowledge of contraindications, precautions, and pathology to provide the BEST intervention within the PT POC.

Example Exam Question

Which of the following would be **CONTRAINDICATED** in a patient with a C6 SCI?

- A. Hamstring stretching with SLR past 90 degrees
- B. PROM of hip and knee flexion past 90 degrees
- C. Performing long sitting mat activities with patient's fingers flexed
- D. Performing long sitting mat activities with patient's fingers extended

Example Exam Question

Dx: CVA.
POC: gait training
Goal: Independent gait

The patient is ambulatory with minimum assistance. The PTA observes the patient has a decreased step length with their unaffected LE. Which of the following treatment strategies would **MOST LIKELY** increase the patient's step length with their unaffected LE?

- A. Instruct patient to take a longer step with their unaffected LE
- B. Promote weight shift to the affected LE during stance
- C. Promote weight shift to the unaffected LE during stance
- D. Provide an AFO for the affected LE

Example Exam Question

A PTA is working with a patient with the diagnosis of C7 SCI. Following a transfer from the wheelchair to the mat, the patient begins to complain of a headache. The PTA observes some sweating. Which of the following actions should the PTA take?

- A. Continue treatment and inform nurses after returning patient to their room
- B. Keep patient in sitting, monitor blood pressure and check for catheter obstruction
- C. Lay patient flat, monitor blood pressure and call for help
- D. Lay patient flat, monitor blood pressure and check for catheter obstruction

Example Exam Question

A PTA is setting the ultrasound parameters for a patient with an acute ankle sprain.

Goal: Promote healing

Plan of Care: Non-thermal ultrasound to the lateral ligament

The BEST parameters to meet the PT goals of this patient are: 20 % duty cycle,

- A. 1 MHz @ 1.5 W/cm²
- B. 1 MHz @ 0.5 W/cm²
- C. 3 MHz @ 1.5 W/cm²
- D. 3 MHz @ 0.5 W/cm²

Example Exam Question

A patient presents with a chronic shoulder tendinitis of the pectoralis major. The patient has a history of a total knee replacement.

Goal: decrease pain & increase ROM
POC: modalities & therapeutic exercise
The MOST therapeutic modality is:

- A. Cold Pack
- B. Hot Pack
- C. Pulsed short-wave diathermy
- D. Thermal Ultrasound

Example Exam Question

- It is this knowledge that separates the PTA from the PT tech or PT Aide

APTA Procedural Interventions Exclusively Performed by Physical Therapists

Procedural Interventions Exclusively Performed by Physical Therapists
HOD P06-00-30-36

- "Interventions that require immediate and continuous examination and evaluation throughout the intervention are performed exclusively by the physical therapist. Such procedural interventions within the scope of physical therapist practice that are performed exclusively by the physical therapist include, but are not limited to, spinal and peripheral joint mobilization/manipulation, components of manual therapy, and sharp selective debridement, which is a component of wound management."

<http://www.apta.org/AM/Template.cfm?Section=Home&CONTENTID=25681&TEMPL>

PTA Education Data Collection

- Now, lets look at CAPTE's expectations for PTA's performing data collections, and the types data collection a PTA is trained to collect.

CAPTE Data Collection Skills

- CAPTE criteria 3.3.2.8. "Demonstrates competency in performing components of data collection skills essential for carrying out the plan of care."
 - For details of each data collection skill refer to the Guide to Physical Therapist Practice

CAPTE Data Collection Skills

- "These data collection skills are performed within the context of the interventions implemented by the PTA under the direction and supervision of the PT.
- This means a PTA would not perform data collection that is not directly related to the POC.
 - For example, if the POC was for ROM and exercise, then the patient's status improved, the PTA could not assess gait at that time because it would not meet the above statements. In that case the PTA would notify the PT.

CAPTE Data Collection

- These data collections skills are performed for the purpose of monitoring the response of a patient or client to the interventions delegated to the PTA by the PT.
 - For example, if the POC calls for gait training, the PTA may need to monitor the patient's vital signs in order to monitor the patient's response to ambulation.

PTA Programs Data Collection as mandated by CAPTE

- The following slides will list the data collection skills all PTA Programs are required to teach their students as mandated by CAPTE in the Accreditation Handbook PTA Criteria Appendix A-20.

PTA Data Collection Skills

- Aerobic Capacity & Endurance
 - Measures standard vital signs
 - Recognizes & monitors responses to positional changes & activities
 - Observes and monitors thoracoabdominal movements & breathing patterns with activity

PTA Data Collection Skills

- Anthropometrical Characteristics
 - Measures height, weight, length & girth
- Arousal, Mentation & Cognition
 - Recognizes changes in the direction & magnitude of patient's state of arousal, mentation & cognition

PTA Data Collection Skills

- Assistive, Adaptive, Orthotic, Protective, supportive & Prosthetic Devices
 - Identifies the individual's and caregiver's ability to care for the device
 - Recognizes changes in skin condition while using devices & equipment
 - Recognizes safety factors while using the device

PTA Data Collection Skills

- Gait, Locomotion & Balance
 - Describes the safety, status, and progression of patients while engaged in gait, locomotion, balance, wheelchair management & mobility

PTA Data Collection Skills

- Integumentary Integrity
 - Recognizes absent or altered sensation
 - Recognizes normal & abnormal integumentary changes
 - Recognizes activity, positioning & postures that aggravate or relieve pain or altered sensations, or that can produce associated skin trauma
 - Recognizes viable versus nonviable tissue

PTA Data Collection Skills

- Joint Integrity & Mobility
 - Recognizes normal & abnormal joint movement
- Muscle Performance
 - Measures muscle strength by manual muscle testing
 - Observes the presence or absence of muscle mass
 - Recognizes normal & abnormal muscle length
 - Recognizes changes in muscle tone

PTA Data Collection Skills

- Neuromotor Development
 - Recognizes gross motor milestones
 - Recognizes fine motor milestones
 - Recognizes righting & equilibrium reactions
- Pain
 - Administers standardized questionnaires, graphs, behavioral scales or visual analog scales for pain
 - Recognizes activities, positioning, and postures that aggravate or relieve pain or altered sensation.

PTA Data Collection Skills

- Posture
 - Describes resting posture in any position
 - Recognizes alignment of trunk and extremities at rest and during activities
- Range of Motion
 - Measures functional range of motion
 - Measures range of motion using a goniometer

PTA Data Collection Skills

- Self-care & Home Management and Community or Work Reintegration
 - Inspects the physical environment and measures physical space
 - Recognizes safety and barriers in home, community and work environments
 - Recognizes level of functional status
 - Administers standardized questionnaires to patients and others

PTA Data Collection Skills

- Ventilation, Respiration & Circulation Examination
 - Recognizes cyanosis
 - Recognizes activities that aggravate or relieve edema, pain, dyspnea or other symptoms
 - Describes chest wall expansion & excursion
 - Describes cough & sputum characteristics

PTA Data Collection

- If the PTA is to use the data they collected to monitor and/or progress the patient within the POC, or know when they should not perform the interventions in the POC due to a change in status – then the PTA must know how to perform the data collection, and what the data means.

PTA Education – Data Collection

- The next few slides, are examples of test questions which might be on the national exam a PTA is required to pass to obtain licensure.
- This information should be helpful to PT's working with PTA's.

Sample Exam Questions

Dx: Right BKA 8 weeks ago
POC: Gait training with prosthetic limb
Goal: Safe, independent ambulation

Which of the following is the MOST LIKELY cause for decreased stance time on the prosthetic limb during gait?

- A. Long Prosthesis
- B. Low shoe heel
- C. Pain in socket
- D. Short Prosthesis

Sample Exam Question

Dx: 3 days post TKA PWB RLE
POC: gait training with an assistive device (A.D.)
Goal: Independent ambulation with an A.D.
PMH: Rheumatoid Arthritis

The above patient complains of increased pain in their hands, wrist, and shoulders today limiting their ability to ambulate more than 5 feet. The patient has been ambulating with a standard walker. Based on the above information, which of the following BEST describes the action the PTA should take:

- A. Change A.D. to roll walker
- B. Change A.D. to quad cane
- C. Change A.D. to roll walker with forearm attachments
- D. Continue ambulation with standard walker

Sample Exam Questions

POC: Modalities and therapeutic exercises
Goal: Decrease pain and muscle spasm

A patient has been receiving a hot pack in the prone position to the cervical area prior to exercise with a good response. The patient reports to the PTA that she has just found out that she is 6-weeks pregnant. The PTA SHOULD:

- A. Add additional insulation to the hot pack
- B. Continue with the treatment without change
- C. Discontinue the hot pack and notify the physical therapist
- D. Position the patient in sidelying

Sample Exam Questions

Diagnosis: Osteoarthritis both hands
Mild cardiac insufficiency

Goal: Increase tissue extensibility

Plan of Care: Modalities & therapeutic exercise

The patient received Fluidotherapy @ 100 F for 15 min. Blood pressure before the treatment was 135 / 78 mmHg and heart rate was 76 bpm. After the treatment the patients' heart rate was 68 bpm. The BEST response by the PTA is to:

- A. Apply cold packs instead of Fluidotherapy
- B. Continue with the treatment without modification
- C. Decrease the temperature to 92 F at the next Rx
- D. Discontinue Fluidotherapy

Sample Exam Questions

History: Nerve root impingement on the left at L4 – L5 with radiation to the LLE. Pain is 9/10 in both the low back and LLE before treatment. After 5 minutes of traction the patient reports that the pain in the LLE is now 0/10. Patient weighs 200 pounds

Plan of Care: lumbar traction

Goal: disc reduction with joint separation

Parameters: static traction at 50 pounds

What is the BEST INITIAL response by the PTA?

- A. Decrease force to 25 pounds & continue for 5 minutes
- B. Discontinue traction & apply a cold pack
- C. Discontinue traction & check sensation
- D. Modify angle of pull & continue for 5 minutes

Sample Exam Questions

While a 68 year-old patient with Diabetes Mellitus Type I is at rest in the supine position, the patient's blood pressure is 144/ 84 mmHg with a heart rate of 78 bpm. In sitting the patient's blood pressure is 120/82 mmHg with a heart rate of 86 bpm. These responses indicate:

- A. Early signs of hypoglycemia
- B. Normal blood pressure and heart rate response
- C. Orthostatic hypotension
- D. Resting hypertension with normal resting heart rate in supine

Sample Exam Questions

Diagnosis: 2 days post-CABG

Co-morbidity: Diabetes Mellitus Type II & Venous Insufficiency

Goal: Independent ambulation on level surfaces

Plan of Care: Bed mobility & gait training

During the initial bed to chair transfer the patient becomes light-headed and dizzy with blurred vision. What is the BEST initial action by the PTA?

- A. Activate the Emergency Medical System
- B. Encourage the patient to perform ankle pumps
- C. Give the patient a simple carbohydrate
- D. Lay the patient down with the head above feet

Sample Exam Questions

Which of the following BEST describes a pressure ulcer that presents as a deep crater with full thickness tissue loss and damage to the subcutaneous tissue?

- A. Stage I
- B. Stage II
- C. Stage III
- D. Stage IV

Sample Exam Questions

A PTA is scheduled to instruct a patient in their HEP. The patient is diagnosed with glaucoma. Which of the following actions would BEST help this patient read their written HEP? Place HEP

- A. Farther away from patient's face
- B. Closer to patient's face
- C. In patient's peripheral vision range
- D. In patient's central vision range

Sample Exam Questions

Diagnosis: ORIF right hip following fracture
PMH: 78 year old male with hypertension
POC: Gait training, monitor vitals
Goal: Independent ambulation with an A.D.

During ambulation the patient complains of a headache. The PTA takes the patient's BP which is 150/85mmHg. Which of the following BEST describes the action the PTA should take?

- A. Alert the nurses and PT, and document BP readings and who was notified
- B. Contact the patient's physician by phone and cancel PT
- C. No action as blood pressure readings are WNL for patient's age
- D. No action as patient has history of hypertension

Recap CAPTE Criteria for PTA's performing Data Collection

- **CAPTE criteria 3.3.2.8. "Demonstrates competency in performing components of data collection skills essential for carrying out the plan of care."**
- "These data collection skills are performed within the context of the interventions implemented by the PTA under the direction and supervision of the PT. These data collections skills are performed for the purpose of monitoring the response of a patient or client to the interventions delegated to the PTA by the PT."

- So far, we have looked at criteria from the APTA, CAPTE, and Arkansas Practice Act and the educational background of the PTA to assist PT's in understanding the role of the PTA.
- Now lets look at the supervision requirements as outlined by the APTA, CAPTE, Medicare, and the Arkansas Physical Therapy Practice Act.

Supervision Requirements

- The APTA, CAPTE, and Arkansas Practice Act state the PT is responsible for directing patient care and supervising the PTA.

Supervision for PTA

- The type supervision recommended or required for a PTA depends on:
 - APTA
 - State Practice Acts
 - Law: such as Medicare
 - Patient care setting

APTA's Supervision Definitions for PTA

- The APTA provides definitions of 3 levels of supervision:
 - General Supervision
 - Direct Supervision
 - Direct Personal Supervision

APTA General Supervision Definition

- General Supervision:
 - PT does not have to be on site
 - PT must be available by telecommunications

APTA Direct Supervision Definition

- Direct Supervision
 - PT is on-site
 - PT is immediately available for direction & supervision
 - PT will have direct contact with patient during each visit
- The PT being available by telecommunications does NOT meet direct supervision

APTA Direct Personal Supervision Definition

- Direct Personal Supervision
 - PT (or PTA if allowable by law) is physically present & immediately able to direct and supervise patient interventions
- The PT being available by telecommunications does NOT meet direct personal supervision

APTA Supervision Requirements for PTA

- The APTA states the Physical Therapist does not have to be on site but:
 - PT must be available by phone at all times
 - PT & PTA must have regular scheduled & documented conferences
 - Supervisory visits
 - If PTA requests reexamination due to changes in pt's medical status
 - Minimum of once per month

APTA HOD 05-18-26 Direction & Supervision of PTA

Supervision for PTA Medicare

- In addition to the APTA having preferred supervision requirements of PTA's by the PT, Medicare also has supervision requirements.
- Medicare's supervision requirements of PTA's by PT's vary in the different physical therapy settings

Medicare Supervision Requirements for Physical Therapist Assistant

- Medicare Requirements according to the APTA website as of May 2006 were listed for the following settings:
 - Certified Rehabilitation Agency (CRA)
 - Comprehensive Outpatient Rehabilitation Facility (CORF)
 - Home Health Agencies (HHA)
 - Inpatient Hospital Services
 - Outpatient Hospital Services
 - Physical Therapist in Private Practice (PTPP)
 - Physician's Office
 - Skilled Nursing Facility (SNF)

Medicare Supervision Regulations for PTA's

- Settings that require General Supervision
 - Home Health Agencies (HHA)
 - Skilled Nursing Facilities (SNF)
- Settings that require Direct Supervision
 - Physical Therapist in Private Practice (PTPP)
 - Physician's Office

Medicare Supervision Regulations for PTA's

- Other Settings
 - Medicare doesn't clearly specify the type supervision but instead states the PT should only delegate services that could be performed safely and effectively by the PTA under the supervision of the PT
 - Refers PT's to the State Practice Act to determine the type supervision required
 - In-patient Hospitals
 - Out-patient services provided in hospital setting

Medicare Supervision Regulations for PTA's Other

- Medicare specifies the practitioner must meet conditions of participation in the 42 CFR Ch. IV 485.705 to determine supervision regulations in these settings
- Under the supervision of a qualified PT, a qualified PTA may provide services planned, delegated & supervised by the therapist, assist in preparing clinical notes & progress reports, and participate in educating the patient and family.
 - Certified Rehabilitation Agency
 - Comprehensive Outpatient Rehabilitation Facility (CORF)

Summary Of Medicare Supervision for PTA's in Various Settings

- Refer to state practice act for inpatient and outpatient services at an inpatient hospital
- Practitioner must meet conditions of participation in the CFR Ch IV 485.705
 - Certified Rehabilitation Agency
 - Comprehensive Outpatient Rehabilitation Facility (CORF)
- "Direct Supervision"
 - Private Practice Setting
 - Physician's Office setting
- "General Supervision"
 - Home health
 - Skilled Nursing Facilities

Additional Supervision Regulations State Level

- In addition to supervision requirements of the APTA and Medicare, each PT and PTA must know the supervision regulations at the state level.

Arkansas Physical Therapy Practice Act

- Supervision Requirements for Licensed PTA
- The Arkansas Code 17-93-102 (7) (A) states supervision "means that the supervising therapist retains moral, ethical, and legal responsibility for patient care and is readily available for consultation".
- Arkansas Code 17-93-102 (7) (B) states the Physical Therapist is not required to be on-site, but must be available by telecommunications

Arkansas Physical Therapy Practice Act Rules and Regulations

- X. Physical Therapist Assistant Supervision
- A. The practice of the PTA shall be performed only under the supervision of the licensed PT who retains moral, ethical, and legal responsibility for patient care.
- B. The supervising therapist must be readily available for consultation, evaluations, and establishment of each program.

Arkansas Physical Therapy Practice Act Rules and Regulations

- X. Physical Therapist Assistant Supervision cont'd
- C. In direct consultation with the (supervising) PT, the PTA may:
 - 1. Recommend changes in the treatment, POC or goals as appropriate.
 - 2. Within the POC, recommend appropriate equipment, assistive devices or modification of architectural barriers
 - 3. Within the POC, perform appropriate examination procedures
- D. The PTA may alter treatment in response to adverse changes in the patient's physiological state.

Student Physical Therapist Assistant

- Now that we have covered supervision requirements in a variety of settings based on federal and state regulations, lets look at the supervision requirements for student physical therapist assistants (SPTA).

NWACC Supervision of SPTA's

- For the NWACC PTA Program, both PT's and PTA's can serve as a clinical instructor for NWACC PTA students if the following criteria are met:
 - 1 year experience in the area of practice
 - Current licensure as PT or PTA
 - Completion of Clinical Site Information Form or an abbreviated resume

Supervision and Billing of SPTA Interventions

- Supervision Requirements for student Physical Therapist Assistants to receive Medicare Reimbursement in the following:
- Medicare A
Skilled Nursing Facility
 - Physical Therapist must provide line-of-sight supervision
- Medicare B – all types of settings:
 - Patients with Medicare B cannot be billed for student services
 - Students can assist the Physical Therapist with the treatment, but the PT must be in charge and present during the treatment.

- In summary, the PT is responsible for the care the patient receives. The PTA can be an integral part of the PT team by performing interventions and data collection within the POC to meet the PT goals.

Quote from Jon Lee, PT on the Role of the PTA

- "I feel that the PTA is an integral part of PT practice primarily due to their educational background. In today's PT environment, it's unrealistic for a PT to be able to participate in a patient's rehab one on one throughout the course of the rehab. We simply don't have the resources to do that effectively. In order to do our jobs efficiently, we have to have an extension of ourselves. This individual has to not only be aware of contraindications of a given treatment, disease processes and adverse reactions to treatment in order to safely administer care; but also has to have the knowledge to progress the person through the rehab process and be able to challenge the client to improve. This is where the PTA, with their knowledge base comes in."

Quote from Jon Lee, PT on the Role of the PTA cont'd

- "A PT can feel confident that the PTA will know the essentials of patient care and will practice in a safe manner. It's important that PT's understand that the PTA has formal education regarding modalities, indications, contra-indications, therapeutic exercise, anatomy, kinesiology etc. Personally, I feel confident in the PTAs that I have worked with."

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11. 42 CFR Ch IV. Available at:
<http://www.law.cornell.edu/cfr/cfr.php?title=42>
Accessed June 7, 2006

Main Web Site Addresses

Arkansas State Board of Physical Therapy
<http://www.arptb.org>
Click on Arkansas Practice Act & Rules & Regulations

North West Arkansas Community College
PTA Program
www.nwacc.edu
Go to the site index and click on Physical Therapy Program

The Federation of State Boards of Physical Therapy
<http://www.fsbpt.org>
To find a states licensing boards website, click on licensing authorities, then the correct state