

*State of*  *Maryland*

*Board of Physical Therapy Examiners*

*201 West Preston Street Baltimore, Maryland 21201 Area Code 301 383-3248*

February 15, 1979

TO: *Committee on Environmental Matters*  
FROM: *The Maryland State Board of Physical Therapy Examiners*  
RE: *House Bill 346*

*The Maryland State Board of Physical Therapy Examiners requests your support for House Bill 346.*

*Of the amendments proposed, two are editorial, one is for a per diem increase, four are for clarification of language or meaning without change of intent, and one for elimination of a grace period for license renewals. The others which are substantive relate to 1) amending the definition of physical therapy, 2) decreasing the restriction relating to referral, and 3) adding occupational therapists in the exclusion section.*

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*In every health field, the body of knowledge continues to expand and, consequently, the responsibilities of the provider increase.*

*It is not enough that a physical therapist know how to rehabilitate a patient's muscle strength, he must be able to observe certain vital functions and be alert to the signs that indicate undue stress. There are a number of evaluation procedures in the cardiovascular and pulmonary fields that the therapist performs as an adjunct to treatment. Other tests which relate to effectiveness of treatment that are the product of advanced technology, and for which the therapist is specially trained, ought to be within the province of the physical therapist to perform. To have the definition adequately cover accepted procedures, the Board has requested the addition of cardiovascular and pulmonary among the tests listed in the definition.*

*The major change proposed in House Bill 346 provides, in essence, that a physical therapist may do certain tests and measurements as well as make recommendations for treatment prior to physician referral. The Board has requested this change in order to meet the needs of the consumer.*

Federal legislation in the form of Public law 94-142 has mandated care of the handicapped child in the public education system. Since other licensed and unlicensed persons have no restrictions requiring that they must wait for referral before initiating evaluation of the school child there is no delay on their part in initiating treatment. On the other hand, in this educational setting, physical therapists, who are among the best qualified to deal with the problems of the handicapped child, must wait for medical referral which in some instances is impossible to obtain. The plain truth is that many children do not have a family physician and schools do not have a school doctor. The child and the parents are denied the help of a qualified group of people and there is unfair discrimination against the physical therapist as a provider of health care. Additionally, there is discrimination in the hiring practices at Federal, State and City government level. At the present time, due to the impact of the public law, special education teachers and other educational and health related personnel are being thrust into a situation where they are being held accountable for program planning and implementation for severely and profoundly handicapped children in such areas as motor development for which their training has not prepared them. They are justifiably reluctant to assume a role they feel is more appropriately that of a physical therapist.

In situations other than the public school system there is concern, also.

One aspect of health care in which physical therapists rightfully claim expertise is in the areas of evaluation and treatment of musculoskeletal disorders. A large part of the population suffers, at one time or another, from problems of muscular disorders or restrictions of joint motion. It is important that early care be instituted and this bill would allow the consumer access to persons qualified to help perform certain initial evaluations and provide the consumer another means of entry into the health care system.

The Board requests that the Committee on Environmental Matters amend Article 43, Section 614, exclusion clause, by inserting the words "occupational therapy" after the word "nursing".

TESTIMONY BY HARRY M. BRAFMANN  
IN OPPOSITION TO H.B. 346 AS AMMENDED

I, HARRY M. BRAFMANN, A LICENSED PHYSICAL THERAPIST IN MARYLAND FOR FIFTEEN YEARS AND DIRECTOR OF PHYSICAL THERAPY AT BALTIMORE COUNTY GENERAL HOSPITAL, WOULD LIKE TO SPEAK IN OPPOSITION TO THE AMENDMENT TO H.B. 346 SECTION 609 A-6.

I OPPOSE THE AMENDMENT AS PRESENTED FOR THE FOLLOWING REASONS. IT GIVES PHYSICAL THERAPISTS THE AUTHORITY TO TREAT A PATIENT WITHOUT THE WRITTEN OT VERBAL CONSENT OF A PHYSICIAN. THIS NECESSITATES A PHYSICAL THERAPIST MAKING A DIAGNOSIS IN ORDER TO PROVIDE THE PROPER TREATMENT FOR THE PATIENT'S PROBLEM. P.T.S ARE NEITHER TRAINED NOR EDUCATED IN MAKING DIAGNOSES NOR ARE THEY PERMITTED BY THE MEDICAL PRACTICE ACT TO REQUEST ADDITIONAL DATA PERTINENT TO MAKING DIAGNOSES (LABORATORY TESTS, X-RAYS, BONE-SCANS,ETC.). AS THE PRACTICE OF MEDICINE BECOMES MORE COMPLEX AND SOPHISTICATED, THE PHYSICIAN IS THE ONLY INDIVIDUAL BECAUSE OF HIS TRAINING AND EDUCATION, WHO HAS THE SKILL TO INTERPRETE THE DATA AND THE PRIVILEGE TO REQUEST IT.

FURTHERMORE, MR CHAIRMAN AND MEMBERS OF THE COMMITTEE, THIS BILL WOULD SUBSTANTIALLY INCREASE MY INCOME SINCE I WOULD BE PERMITTED TO SEE PATIENTS WITHOUT A PHYSICIAN'S REFERRAL. HOWEVER, MY CONCERN FOR THE HEALTH CARE, SAFETY, AND WELFARE OF THE CITIZENS OF MARYLAND SUPERSEDES MY OWN ECONOMIC GAIN.

THEREFORE, MR. CHAIRMAN AND MEMBERS OF THE COMMITTEE, I SINCERELY REQUEST THAT YOU OPPOSE THIS AMENDMENT.

RESPECTFULLY SUBMITTED,  
HARRY M. BRAFMANN, P.T.  
DIRECTOR OF PHYSICAL THERAPY, BALTIMORE COUNTY GENERAL HOSPITAL

Testimony Covering HB346

February 16, 1979

Diane Maslen, President Maryland Occupational Therapy Association

The Maryland Occupational Therapy Association supports HB346  
in its present language.