

To: Members of the Board 3-1-67 12:30 to 2:00 A.M.

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msg  
letter  
ch 10  
7/26

~~From: Chairman Dept of P.T. of the~~

Since <sup>numerous</sup> references were made ~~to~~ to "Mr. K's" proposed legis, I find it ~~in~~ <sup>in</sup> ~~advisable~~ <sup>advisable</sup> to remind the Board that the proposed legis is that of the Md Chapter of the A.P.T.A., so stated in the opening <sup>part of the</sup> ~~part of the~~ memorandums. The motion <sup>to</sup> ~~to~~ <sup>propose the legis</sup> ~~was~~ <sup>was</sup> not only adopted but unanimously adopted, at a regular <sup>meeting</sup> ~~meeting~~ of the association.

The question has been raised regarding whether the proposed legis. is urgent. The Chapter believes that it is for at least one important reason. Nationalist <sup>there</sup> are moves to train assistants. In June the National Association may approve such training. We feel very strongly that unless & until P.T. is adequately defined

there are no safeguards against a complete breakdown of the practice if assistants come into the picture. If the occasion demands, we would be prepared, with the proposed definition, ~~we~~ <sup>we</sup> would be prepared ~~to~~ <sup>to</sup> spell out those segments of part ~~of~~ <sup>of</sup> that might logically could be delegated to persons less qualified than the Graduate P.T.

Since our own <sup>Md</sup> Health Dept has been one of the prime ~~inspiration~~ <sup>inspiration</sup> of a plan to train assistants, ~~and~~

the Board, as well as the Chapt, has ~~been~~ already been confronted with ~~this~~ <sup>the</sup> problem, as you well know, the need to face up to this problem realistically.

Unfortunately time has been short this time. We have worked many hours in preparing the ~~material~~ <sup>material</sup> definition, analyzing all aspects of P.T.

In answer to

The criticism re. the absence of reference to med. referral or direction is ~~not warranted~~ in the new definition, ~~it would be noted~~ <sup>the</sup> ~~Board members~~ <sup>that there has been</sup> ~~no reference to such in the~~ <sup>present definition</sup> ~~definition as it has existed for~~ <sup>20 years.</sup> ~~The part of the law~~ <sup>and it seemed</sup> ~~referral still stands as is, and~~ <sup>if, anything, we feel has been</sup> ~~strengthened~~

in this <sup>pro-</sup> ~~section~~ <sup>definition</sup> by the use of the terms para-medical. ~~ref. to P.T.~~

\* To say that the testing, planning & treating will all be done 5 refs, or consult. o, the phy concerned is not a statement of fact because <sup>no</sup> pt. is treated ~~at all~~ <sup>except on med. referral.</sup> Each physician <sup>now,</sup> ~~has~~ <sup>will</sup> continue to have, the <sup>in the future</sup> ~~privilege~~ <sup>right</sup> of indicating what he

wants done so far as P.T. is concerned. The phy. ther. who oversteps the bounds set by each or every M.D. soon loses the referrals!



The failure to define the scope of practice has played havoc in the nursing profession with the result that there are so many levels of performance that the term nurse has ~~come to~~ lost its rightful designation.

~~Phy. therapy has had other problems in trying to survive, with some degree of dignity, and ~~P.T. Department~~ our desire~~

to establish and ~~preserve~~ ~~the profession~~ and ~~the name~~ ~~some dignity~~ with some degree of dignity. The dignity is another reason why we ~~that we also seek to define~~ ~~the~~ ~~to~~ offer the definitions of P.T. and the practice of P.T. as proposed.

Respectfully

F.P.K.

1967

Rewrite & approved by Leg. Com. Bill Rhoods Ruth Peterson Sue Fine E. Bruce FOK. Larry Bartel

To: Members of the Board of P.T. Examiners

From: Chairman Legis Com., A.P.T.A. of Md.

Re: Mr Gainer letter of Feb 24, 1967, A.P.T.A. of Md. H.B. 7361 <sup>as sponsored by the Legis Com.</sup> was introduced on Feb. 28, 1967.

Being cognizant of the questions raised by Mr. Gainer in his letter to the Board, the following I earnestly request your careful consideration of the ~~for~~ subject matter in this ~~letter~~ communication.

First, since there were numerous references to "Mrs. Kendall's proposed legislation," I find it necessary to remind the Board that the proposed <sup>legis.</sup> ~~legis.~~ that of the Md. Chapl. of the A.P.T.A., and introduced as a result of a motion unanimously adopted at a regular business meeting of the association (as ~~pointed out~~ <sup>stated</sup> in the first paragraph of ~~the~~ previous communication to the Board.)

The question has been raised regarding whether the proposed legislation is urgent. <sup>md</sup> The Chapter believes ~~that it is urgent as of this date~~ <sup>as of this date</sup> ~~and~~ <sup>urgency</sup> ~~due to the introduction of some ~~undoubtedly~~ <sup>appropriate</sup> legislation yesterday (H.B. 874) relating to the ~~regulation of P.T. assistants~~ <sup>regulation of P.T. assistants</sup> that the re-definition of physical therapy be considered ~~than ever~~ <sup>more urgent</sup> than ever.~~

Nationally and locally there are moves to train P.T. assistants. In June the A.P.T.A. House of Delegates will consider <sup>ad-hoc committees</sup> the proposals to sponsor and ~~back~~ <sup>back</sup> licensure of two-year-trained, Jr. College-level assistants. We feel strongly that unless, and until, physical therapy is adequately defined, there are no safeguards against a complete breakdown of the practice if assistants come into the picture.

If ~~the~~ <sup>the</sup> occasion demands, we would be prepared, ~~with~~ <sup>through</sup> the proposed definition, to spell out ~~some~~ <sup>some</sup> of those segments ~~listed under~~ <sup>listed under</sup> ~~parts~~ <sup>treatment in item 3 of the</sup> ~~of the~~ <sup>definition</sup> ~~that~~ <sup>might</sup> be delegated to persons less qualified than the <sup>4-year</sup> graduate physical therapist. ~~these~~ <sup>what</sup> segment of P.T. treatment. (~~item 3~~ <sup>parts of item 3</sup>) that might

H. B. 736, <sup>as</sup><sub>1,1</sub> sponsored by the  
A.P.T.A. of Maryland was introduced  
on Feb. 28, 1967. It is ~~the~~ <sup>our</sup> earnest  
desire that questions raised by  
Mr. Gaines' letter be resolved and  
that we secure ~~the approval~~  
~~of the Board's approval~~ for this  
legislation. We ask your careful  
consideration of the subject-matter in  
this communication.

(A)

~~The~~ It is our understanding  
that Mr. O'Farrell pointed out  
~~to the board the urgent~~  
~~the need for ~~our~~ improved~~  
~~definitions at a Board meeting~~  
I need for improved definitions

Since our own Md Health Dept has been one of the prime sponsors of a plan to train assistants, the Board, as well as the Chapter, has already been confronted with the need to face up to this problem realistically.

In answer to the criticism regarding the absence of references to medical direction in the new definition, it should be borne in mind that such a reference does not ~~now exist~~ appear in the present definition.

The part ~~(Sec. 609 part 6) still stands as is~~ (Sec. 609 part 6) regarding "written or verbal order" by the physician still stands as is. ~~It is felt that the strength of this definition section has been weakened in the~~ ~~relationship~~ ~~regard~~ through the use of the term para-medical.

~~In the present~~ ~~helps to eliminate any implication of independent practice.~~

To say that testing, planning and treating will all be done without reference to, or consultation with, the physician concerned is not a statement of fact because no patient is treated ~~without~~ <sup>except by</sup> medical referral. The written or verbal orders of the physician do now, and would continue to, indicate what he wants so far as physical therapy is concerned. The physical therapist who oversteps the bounds set by the referring physician soon loses the referrals!

In the present definition are included the treatment modalities and the neuro-muscular testing - practically the same as in ~~section~~ <sup>items</sup> 1 & 3 of the proposed amendment, but restated in better form. At the request of the Medical Faculty the words "as an aid to treatment" were added at the end of ~~item~~ <sup>item</sup> # 1 ~~related to~~ <sup>to performing</sup> testing ~~program~~ <sup>planning</sup>

~~Part~~ Item # 2 <sup>relating to treatment</sup> appears to be the chief concern to Mr. Gaines and some members of the Board. In regard to this section, I should like to draw attention to the fact that there is the qualifying part of the sentence "on the basis of the test findings". Specifically the reference is to the neuro-muscular and musculo-skeletal ~~tests~~ <sup>tests</sup> as stated in item # 1.

The word "The term para-medical in our proposed definition is that of a..."

This qualifying phrase makes program planning relate almost entirely to treatment to improve muscle strength, range of motion, and functional ability. It is in this area ~~of treatment~~ <sup>of patient care</sup> that physical therapists are especially qualified by their training. The selection of some form of heat and massage as adjuncts, especially in treating tight muscles, is also well within the scope of physical therapy, providing the physician has fulfilled his obligation in giving necessary direction, advice and precautions regarding treatment.

The failure to define the scope of practice has played havoc ~~with~~ in the nursing profession with the result that there are so many levels of performance that the <sup>word "nurse"</sup> ~~term~~ has lost its rightful designation. ~~The~~ <sup>&</sup> ~~Our~~ desire to establish and preserve our profession with some degree of dignity is another reason why we offer the definitions of physical therapy and of the practice of phy. ther. as proposed.

Signed

Florence P. Kendall