

American Physical Therapy Association

1790 Broadway, New York 19, N. Y.

MEMO To: Mr. William Neill, Secretary
Maryland Chapter

Date: October 20, 1953

Re:

From: Mildred Elson
Executive Director

Miss Haskell has told me of her recent conversation with Mrs. Kendall in regard to a letter she had received from the Registry.

According to our information the new Code of Ethics of the Registry is still in preparation. There is no doubt that it will spell out quite clearly that the maintenance of a private office by a physical therapist is unethical. As you no doubt know the Registry has always stated that, but discovered that there were loopholes which it now proposes to close.

I would like to emphasize that the American Registry of Physical Therapists is a voluntary non-profit corporation, just as the American Physical Therapy Association is a non-profit corporation. Each have their own by-laws and code of ethics which members or registrants must abide by if they are to maintain their registration and/or membership.

A great many American Physical Therapy Association members are registered with the American Registry for Physical Therapists and many registrants are American Physical Therapy Association members. Whereas both organizations have in common maintenance of standards of physical therapy education and service they are in fact quite dissimilar.

We are a professional membership association with by-laws and code of ethics voted on by the membership, thru their duly elected delegates to the legislative body, the House of Delegates. Our purposes are broad and services many and all subject to membership approval.

The Registry is governed by an appointed Board which has full autonomy. Seven are physicians appointed by the Congress of Physical Medicine and Rehabilitation and two physical therapists appointed by the American Physical Therapy Association. Provision for the latter representation was made two years ago. It acts in a similar capacity to a state registration or licensing board except it has no legal authority. Registrants to maintain status must abide by the by-laws and ethical laws of the Board, otherwise they are subject to discipline or expulsion.

The American Physical Therapy Association, as you know, is deeply concerned with ethical practice, i.e., that we treat only by prescription and under the direction of a physician and this is spelled out in our code. Any member not adhering to it is subject to discipline.

We as an Association are not in agreement with the concept that the maintenance of a private office or owning equipment is in itself unethical, but rather how does the physical therapist conduct himself. However the registry does maintain it is unethical.

There is in my mind only two things to do, one, resign from the Registry if you are in disagreement with its policies and purposes and two,

American Physical Therapy Association
1790 Broadway, New York, N. Y.

1790 Broadway, New York 19, N. Y.

MEMO To:

Date
Re
Re

From:

- 2 -

if you believe that the Registry is important to you protest as a registrant, not as an American Physical Therapy Association member, to the Board.

I'll be happy to talk with the group there. I could do it sometime the first week in November or sometime the week of the 22nd.

AMERICAN PHYSICAL THERAPY ASSOCIATION

1790 Broadway, New York 19, N. Y.

January 22, 1958

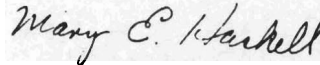
Dear Member:

An editorial in the January issue of the Archives of Physical Medicine and Rehabilitation contains implications regarding the professional conduct of American Physical Therapy Association members and raises questions which relate to our professional development and its relationship with a medical specialty.

At this time our only comment is to express confidence in your compliance with the APTA Code of Ethics for Members. The basic principles of this Code are that physical therapy is a medical service; that the physical therapist shall carry on the techniques of the profession only with adequate and specific medical direction; and that the profession of physical therapy is devoted to the best welfare of the patient.

In order to understand the issues you will wish to have background information. This material is being compiled from our official records and will be distributed to Chapters and Districts as soon as possible.

Sincerely yours,



Mary E. Haskell
Executive Director



AMERICAN PHYSICAL THERAPY ASSOCIATION

1790 BROADWAY

NEW YORK 19, N. Y.

COLUMBUS 5-0430

E. JANE CARLIN, *President*

MARY E. HASKELL, *Executive Director*

BOARD OF DIRECTORS

Louise A. Bailey
Chicago, Ill.

E. Jane Carlin
Jenkintown, Pa.

Dorothy A. Graves
Los Angeles, Calif.

Susanne Hirt
Richmond, Va.

Dorothy G. Hoag
Denver, Colo.

Harriet S. Lee
Washington, D. C.

Mary E. Nesbitt
Boston, Mass.

Agnes P. Snyder
Washington, D. C.

Helen H. Vaughn
Arlington, Va.

VISORY COUNCIL

Thomas F. Hines, M.D.
New Haven, Conn.

Wesley G. Hutchinson, Ph.D.
Philadelphia, Pa.

Robert L. Leopold, M.D.
Philadelphia, Pa.

Charles U. Letourneau, M.D.
Chicago, Ill.

A. R. Shands, Jr., M.D.
Wilmington, Del.

April 29, 1958

Mrs. Florence P. Kendall, *President*
Maryland Chapter
2 East Read Street
Baltimore 2, Maryland

Dear Florence:

The attached informal summary of relations between the Registry and APTA was prepared two or three years ago and is from our records. It is unfortunately all too apparent that a conflict of functions and philosophy continues and was further aggravated by Dr. Kottke's editorial in the January Archives of Physical Medicine and Rehabilitation.

We have been preparing more detailed background information for presentation to the Delegates at our Seattle meeting. It is anticipated that prior to the House of Delegates meeting the Board of Directors will reach a decision regarding continued relations with the Registry which will also be reported.

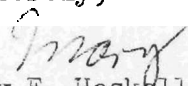
In view of this and the pressure of other commitments I regret that it will not be possible for one of us to attend the Maryland Chapter meeting. It is entirely, however, a matter of time and circumstance and should anyone have been able to come there would have been no expense to the Chapter.

I do not know which officers retain their registration in the Registry since this is a personal matter. I resigned about three years ago.

If after reviewing the enclosed material you would like some further clarification please feel free to either write me or phone collect when I will try to furnish the information you might need for your meeting.

All best wishes to the Chapter and to you and Mr. Kendall. We hope that many of you will be in Seattle.

Sincerely,


Mary E. Haskell
Executive Director

MEH:ep

AMERICAN REGISTRY OF PHYSICAL THERAPISTS

Organized 1935

*History 1932- Representatives of the American Congress of Physical Therapy (now Physical Medicine and Rehabilitation) and its affiliated organizations, New York Physical Therapy Society and Pacific Physical Therapy Society, met and decided that it was the prerogative and duty of medical specialists in physical therapy to prescribe qualifications of their technicians and formulate the relationship of the latter to the medical profession.

The American Physiotherapy Association did not at once fall in with this decision though in justice to that body it should be stated that this was in part owing to certain misunderstandings.

*Excerpts- Archives of Physical Therapy, October 1936

Letter 1937 from Dr. John Coulter to Miss Green, President

"The Registry of Physical Therapists Technicians was created to protect the interests of the members of the American Physiotherapy Association....It was created to prevent a group of physicians from trying to create a new technicians' society."

Background - During the year 1933 the American Physiotherapy Association removed two schools from its list of approved courses. These schools were not connected with universities or colleges but were conducted for profit. They were removed because in the opinion of the Executive Committee they did not meet the educational requirements for membership.

This was protested at the next meeting of the Congress of Physical Therapy particularly the New York section who said they as physicians would not submit to technicians telling specialists in physical therapy now to educate their employer. The Eastern Section of the Congress wanted to approve schools and to start a technicians' section of the Congress to conduct a campaign to employ only members of this section. The American Physiotherapy Association opposed this.

Dr. Coulter as a member of the Congress and Chairman of the Advisory Board of the American Physiotherapy Association called an informal meeting of physicians and members of the A.P.A.

It was decided not to establish a technicians' section. The Congress decided that they would advocate a registry.

The first plan submitted by Dr. Coulter included a Board of five members. Two from the Congress - Sec. of the Council on Physical Therapy of the American Medical Association, Director of Hospital Activities, American College of Surgeons, and a member of the American Physiotherapy Association. It was later changed and the Board organized as were the laboratory and x-ray technicians under the aegis of the Congress and an advisory committee provided on which there was one member of the Association.

The Association continued to be not in accord with having the Registry under the aegis of the Congress. Although support was obtained from individual orthopedists, officially they would take no action and in effect supported the placement of the Registry under the Congress.

The Council on Medical Education and Hospitals continued to make it clear that they had no jurisdiction over organization of physical therapists or the Registry.

The Council was consulted by the American Physiotherapy Association and the Congress and because of the precedent established with the laboratory and x-ray technicians the Council went along with the premise that the Registry should be controlled by physicians and gave guidance in the setting up of educational qualifications.

In 1936 the Executive Committee of the Association expressed its willingness to cooperate with the Congress in forming a registry and noted that the Registry Board as outlined to them included a representative of the Association.

In 1937 the Registry decided to offer registration without examination to members of the American Physiotherapy Association in good standing as of August 29, 1936.

During the intervening years until 1952, the only representation the Association had with the Registry was one member on the Advisory Council which met once a year at lunch during the Annual Meeting of the Congress. The A.P.T.A. representatives during the years protested to us and to the Congress that their function was most perfunctory since they never received any communications during the year or an agenda prior to the luncheon meeting and that the latter was primarily social.

After the war the American Physical Therapy Association suggested that there be a joint committee to consider some desirable changes in the Registry, namely change of name, representation on the Board and joint efforts on examination-interpretation and what constituted unethical practices. The first two were eventually achieved. There was a joint committee on the examination but no real progress was made.

The American Physical Therapy Association has continued to question practices effecting its members but realizes that the Registry is a separate corporation and may set down whatever rules it wishes. To be or not to be a registrant is still a matter of individual choice.

It is emphasized, however, that neither the American Physical Therapy Association nor the American Medical Association requested that the Registry be organized.

SOME COMPONENT GROUPS OF:

American Medical Association

1. Standing Committees of House of Delegates

- a. Council on Medical Education and Hospitals (accrediting body for so-called "professional" part of physical therapy programs)
Advisory Committee on Physical Therapy Education - 9 physicians and 3 physical therapists

Others

2. Standing Committees of Board of Trustees

- a. Council on Medical Physics (organized following dissolution of Council on Physical Medicine and Rehabilitation)

Others

3. Sections - on medical specialties as

- a. Section on Anesthesiology
- b. Section on Physical Medicine (Note: Physical Medicine, not Physical Medicine & Rehabilitation)

4. Constituent Associations - (State Medical Societies)

American Physical Therapy Association

1. Standing Committees

- a. Conference Program
- b. Finance
- c. Judicial
- d. Nominating

2. Advisory and ad hoc Committees - see REVIEW, March 1957, pp 160-161

3. Sections (meet at annual conference)

- a. Education
- b. Public Health
- c. Self-employed

4. Constituent Associations - 58 Chapters; 47 Districts

OTHER ORGANIZATIONS, not COMPONENT GROUPS OF EITHER THE AMA OR APTA

1. American Congress of Physical Medicine and Rehabilitation

- a. Established and conducts American Registry of Physical Therapists

2. American Academy of Physical Medicine and Rehabilitation (formerly American Society of Physical Medicine and Rehabilitation) - members are certified by American Board of P.M. & R.

3. American Boards - "The official status of the American Boards is established by their sponsorship from the recognized national societies in each specialty and the corresponding section of the American Medical Association, by their conformity with the regulations of and election to membership in the Advisory Board for Medical Specialties, and by the approval from the Council on Medical Education and Hospitals of the American Medical Ass'n."*

4. Conference of Medical Directors of Courses in Physical Therapy

5. Council of Physical Therapy School Directors

*Directory of Medical Specialists Holding Certification by American Boards.

Vol. VII, Marquis-Who's Who, Chicago, 1955