Positions Statements Related to Physical Therapy
Issued by the Physical Therapy Examining Board

CAN A PHYSICAL THERAPIST IN WISCONSIN EVALUATE AND TREAT A PATIENT WITHOUT A REFERRAL?

With regard to physical therapy referrals, Wisconsin is considered a Direct Access state. A written referral is not required for the following physical therapy services related to the work, home, leisure, recreational and educational environments: conditioning, injury prevention and application of biomechanics and treatment of musculoskeletal injuries with the exception of acute fractures or soft tissue avulsions (Ch PT 6.) Per Wis. Stat. s. 448.56 a written referral is also not required if a physical therapist provides services in schools to children with disabilities, as part of a home health care agency, to a patient in a nursing home or to an individual for a previously diagnosed medical condition after informing the individual’s health care practitioner who made the diagnosis.

MAY A PHYSICAL THERAPIST NOT LICENSED IN THE STATE OF WISCONSIN PERFORM A HOME EVALUATION?

Those who wish to conduct a physical therapy evaluation in Wisconsin, regardless of the setting, must have a valid Wisconsin physical therapy license in order to do so. Wis. Stat. s. 448.51.

MAY A PHYSICAL THERAPIST LICENSED IN WISCONSIN PERFORM NEEDLE EMG?

Consistent with Wis. Stat. s. 448.50(4) the Board has determined that a Wisconsin licensed physical therapist may perform needle EMG (electromyography), surface EMG and nerve conduction studies, provided that he or she has the appropriate education, training, and experience to perform them.
CAN A WISCONSIN PHYSICAL THERAPIST OR PHYSICAL THERAPIST ASSISTANT DO INR (INTERNATIONAL NORMALIZED RATIO) MONITORING?

The scope of practice for Physical Therapy is defined by Wis. Stat. s. 448.50 (4) (a) 1-4 and (b). The Board considers any physical therapist or physical therapist assistant performing INR monitoring or Prothrombine Time testing to be acting outside the scope of their practice as stated in the Wisconsin Statutes. INR is used to monitor the effectiveness of blood thinning drugs. It involves collecting a blood sample by inserting a needle into a vein or from a fingerstick. It is typically measured along with Prothrombine Time which is a lab test used to evaluate the ability of blood to clot properly. Prothrombine Time or Pro Time is commonly abbreviated as “PT” which can be a source of confusion if this is misunderstood to mean Physical Therapy.

ARE WISCONSIN PHYSICAL THERAPISTS ALLOWED TO PROVIDE INJECTIONS AS BEING WITHIN THE SCOPE OF THEIR LICENSURE?

Wis. Stat. s. 448.50(4)(b) states that “Physical therapy” does not include…prescribing drugs. Wis. Stat. s. 448.50(4)(a) and (6) describe the “therapeutic intervention(s)” that are within the scope of practice. While administering a medication by iontophoresis is considered to be a physical therapy procedure or technique, administering a medication by injection is not and should be considered as outside a PT’s scope of practice.

MAY A PHYSICAL THERAPIST ASSISTANT LICENSED IN WISCONSIN PERFORM JOINT MOBILIZATION AND MUSCLE ENERGY TECHNIQUES UNDER THE DIRECT SUPERVISION OF A LICENSED PHYSICAL THERAPIST?

As long as a licensed physical therapist assistant has the appropriate experience and has been properly educated and trained in appropriate portions of the treatment plan and program to be delegated, he or she may perform them under the direct or general supervision of a licensed physical therapist. The supervising physical therapist maintains primary responsibility for the physical therapy care rendered by the physical therapist assistant (per Wis. Stat. s. 448.56(6) and Ch PT 5.01 (2)(a)(g))

HOW MANY PHYSICAL THERAPIST ASSISTANTS MAY PRACTICE UNDER THE GENERAL SUPERVISION OF A PHYSICAL THERAPIST IN WISCONSIN?

No physical therapist may at any time supervise more than two (2) physical therapist assistants (full-time equivalents) practicing under general supervision, see Ch PT 5.01 (2)(j). In addition,
the total number of physical therapist assistants, unlicensed personnel, and those who have temporary licenses may not exceed a combined total of four (4) under supervision by a licensed physical therapist (See Ch PT 5.02 (2)(k).

**IN THE STATE OF WISCONSIN CAN A PHYSICAL THERAPIST ASSISTANT SUPERVISE A PT AIDE?**

_Wis. Stat. s. 448.56(6) does not specifically speak to this topic. While unlicensed personnel (in this case a physical therapy aide) may assist the physical therapist assistant in patient related tasks, under Ch. PT 5.02(1) they must be under the direct on-premises supervision of a physical therapist. The guidelines for “direct on-premise supervision” are outlined in PT 5.02(2). Direct supervision does not specify that the physical therapist needs to be in the same room during the appointment, but does need to be on-site and “be available at all times for direction and supervision.”*

**CAN A PHYSICAL THERAPIST PRACTICING IN A SCHOOL IN THE STATE OF WISCONSIN PROVIDE SERVICES AT A UNIVERSAL LEVEL (I.E. OFFER INTERVENTION STRATEGIES FOR STUDENTS NOT IDENTIFIED AS STUDENTS WITH DISABILITIES OR PROVIDING SERVICES RELATED TO PREVENTION, FITNESS AND WELLNESS)?**

_Wisconsin 448.50(4)(a)3 supports the meaning of physical therapy in the context of reducing risk of injury, impairment, functional limitation, or disability, including the promotion or maintenance of fitness, health, or quality of life in all age populations. Written referral for physical therapy services for children with disabilities in schools is not required as stated in Wisconsin 448.56(1) The statutes do not address the need for written referral when providing services to individuals without disabilities that are meant to address fitness, health or quality of life.*

**IS REHABILITATIVE ULTRASOUND IMAGING (RUSI) CONSIDERED WITHIN THE SCOPE OF PRACTICE FOR PHYSICAL THERAPISTS LICENSED IN THE STATE OF WISCONSIN?**

_Consistent with Wis. Stat. s. 448.50 (4)(6), the Board has determined that this intervention is within the physical therapy scope of practice as a therapeutic and assessment tool.*

**WHO CAN SUPERVISE A PT /PTA WITH A TEMPORARY LICENSE?**

_PT 3.01 (3) and (4) state that PTs or PTAs with a temporary license must be supervised by “a person validly holding a regular license as a physical therapist.”*
CAN A PT /PTA WITH A TEMPORARY LICENSE HAVE MORE THAN ONE SUPERVISING PT?

Yes, if necessary. The PT who signs the temporary license application is considered the primary PT for purposes of supervision. In the event that the primary PT is absent (illness, vacation, etc), another primary PT must be identified to supervise the temporary licensed PT or PTA. The important issue is that at any point in time, a primary supervising PT is formally identified within the practice. The PTEB does not need to be informed of changes in supervising PTs, however it may be prudent to document the change in supervisors. It is the responsibility of the temporary licensed PT /PTA and primary PT to assure that supervisory rules are satisfied.

WHAT ARE THE SUPERVISORY REQUIREMENTS OF A PT /PTA WITH A TEMPORARY LICENSE?

PT 3.01 (3) and (4) state that PTs and PTAs with a temporary licensed must receive direct, immediate and on premises supervision by “a person validly holding a regular license as a physical therapist.” Direct supervision does not mean “line of sight”, but does require that the supervisor be on the premises when services are provided. The supervisor must be available for immediate intervention if intervention becomes necessary.

CAN A PTA WITH A TEMPORARY LICENSE WORK UNDER GENERAL SUPERVISION?

PT 3.01 (3) and (4) state that PTs and PTAs with a temporary licensed must receive direct, immediate and on premises supervision by “a person validly holding a regular license as a physical therapist.” Direct supervision does not mean “line of sight”, but does require that the supervisor be on the premises when services are provided. The supervisor must be available for immediate intervention if intervention becomes necessary.

CAN A TEMPORARY LICENSED PT SUPERVISE A LICENSED PTA?

A temporary licensed PT can supervise a licensed PTA on premise as long as a validly licensed PT provides direct, immediate and on site supervision of the temporary licensed PT. A temporary licensed PT can supervise a licensed PTA off premise as long as a validly licensed PT provides direct, immediate and on site supervision of the temporary licensed PT. In this case, the regularly licensed PT is supervising the licensed PTA under general supervision “one step removed” through the temporary licensed PT. While this is a legally acceptable practice, it is advised that the regularly licensed PT clearly understand their responsibility under these circumstances and be secure in the skills of all personnel who they are supervising.