

## ARTICLE 6. PHYSICAL THERAPISTS AND PHYSICAL THERAPISTS' ASSISTANTS

### Rule 1. General Provisions

#### 844 IAC 6-1-1 Abbreviations defined (Repealed)

Sec. 1. *(Repealed by Medical Licensing Board of Indiana; filed Sep 22, 1994, 4:30 p.m.: 18 IR 266)*

#### 844 IAC 6-1-2 Definitions

Authority: IC 25-27-1-5

Affected: IC 25-27-1-2; IC 25-27-1-8

Sec. 2. (a) The definitions in this section apply throughout this article.

(b) "Board" refers to the medical licensing board of Indiana.

(c) "Bureau" refers to the health professions bureau.

(d) "Committee" refers to the Indiana physical therapy committee.

(e) "Direct supervision" means that the supervising physical therapist or physician at all times shall be available and under all circumstances shall be absolutely responsible for the direction and the actions of the person supervised when services are performed by the physical therapist's assistant or holder of a temporary permit issued under IC 25-27-1-8(d). For the holder of a temporary permit issued under IC 25-27-1-8(d), unless the supervising physical therapist or physician is on the premises to provide constant supervision, the holder of a temporary permit shall meet with the physical therapist or physician at least once each working day to review all patients' treatments. This meeting must include the actual presence of the physical therapist or physician and the holder of a temporary permit. The patient's care shall always be the responsibility of the supervising physical therapist or physician. Reports written by the holder of a temporary permit for inclusion in the patients' record shall be countersigned by the physical therapist or physician who may enter any remarks, revisions, or additions as the physical therapist or physician deems appropriate. With respect to the supervision of physical therapist's assistants under IC 25-27-1-2(c), unless the supervising physical therapist or physician is on the premises to provide constant supervision, the physical therapist's assistant shall consult with the supervising physical therapist or physician at least once each working day to review all patients' treatments. The supervising physical therapist or physician shall examine each patient not less than:

(1) every fourteen (14) days for inpatients in either a hospital or comprehensive rehabilitation facility;

(2) the earlier of every ninety (90) days or six (6) physical therapy visits for patients in a facility for the mentally retarded (MR) and developmentally disabled (DD) and school system patients; and

(3) the earlier of every thirty (30) days or every fifteen (15) physical therapy visits for all other patients;

to review the patients' treatment and progress. If this daily consultation is not face-to-face, the physical therapist or physician may not supervise more than the equivalent of three (3) full-time physical therapist's assistants. A consultation between a supervising physical therapist or a physician and the physical therapist's assistant may be in person, by telephone, or by a telecommunications device for the deaf (TDD), so long as there is interactive communication concerning patient care.

(f) "Physical therapist's assistant" means a person who is registered by the committee to assist in the practice of physical therapy under the direct supervision of a licensed physical therapist or under the direct supervision of a physician by performing those assigned physical therapy procedures identified in subsection (g)(3), but not those specified in subsection (g)(1) or (g)(2).

(g) "Physical therapy" includes, but is not limited to, such measures as the following:

(1) Performing and interpreting tests and measurements of neuromuscular, musculoskeletal, cardiac, and pulmonary functions as a part of treatment, interpretation of physician referrals, initial patient evaluation, initial and ongoing treatment planning, periodic reevaluation of the patient, and adjustment of the treatment plan.

(2) Planning initial and subsequent treatment programs on the basis of test findings and within the orders of a referring practitioner who is licensed to practice medicine, osteopathic medicine, dentistry, podiatry, or chiropractic.

(3) Administering treatment through the use of physical, chemical, or other properties of heat or cold, light, water, electricity, massage, mechanical devices, and therapeutic exercise, which includes all types of physical rehabilitative techniques and procedures.

*(Medical Licensing Board of Indiana; 844 IAC 6-1-2; filed Mar 10, 1983, 3:59 p.m.: 6 IR 773; filed Jun 11, 1984, 1:02 p.m.: 7 IR 1937; filed Mar 6, 1986, 3:00 p.m.: 9 IR 1662; filed Aug 6, 1987, 3:00 p.m.: 10 IR 2731; filed Apr 14, 1994, 5:00 p.m.: 17 IR 2077; filed Sep 22, 1994, 4:30 p.m.: 18 IR 261; readopted filed Nov 9, 2001, 3:16 p.m.: 25 IR 1325; filed Aug 26, 2004, 10:15 a.m.: 28*

IR 209)

**844 IAC 6-1-3 Standards of practice for physical therapy services**

Authority: IC 25-27-1-5

Affected: IC 25-27-1-1

Sec. 3. (a) A physical therapy service shall be under the direction of a licensed physical therapist who is qualified by experience, demonstrated ability, and specialized education.

(b) A physical therapist shall develop a plan of care for each patient referred and shall be responsible for the plan implementation and modification. A physical therapist shall consult with the referring practitioner regarding any contraindicated or unjustified treatment.

(c) The physical plant shall be planned, constructed, and equipped to provide adequate space and proper environment to meet the service needs with safety and efficiency. (*Medical Licensing Board of Indiana; 844 IAC 6-1-3; filed Mar 10, 1983, 3:59 p.m.: 6 IR 773; filed Jun 11, 1984, 1:02 p.m.: 7 IR 1938; filed Sep 22, 1994, 4:30 p.m.: 18 IR 262; readopted filed Nov 9, 2001, 3:16 p.m.: 25 IR 1325*)

**844 IAC 6-1-4 Accreditation of educational programs**

Authority: IC 25-27-1-5

Affected: IC 4-22-2-21; IC 25-27-1-1

Sec. 4. (a) The committee shall maintain a list of physical therapy and physical therapist's assistant educational programs that the committee has approved. This list shall be available in written form from the Health Professions Bureau, 402 West Washington Street, Room W066, Indianapolis, Indiana 46204.

(b) An approved program is one maintaining standards equivalent to those adopted by the Commission on Accreditation in Physical Therapy Education (CAPTE), Accreditation Handbook, April 2002 edition. These standards are hereby adopted as those of the committee and are hereby incorporated by reference under IC 4-22-2-21 and do not include any amendments or subsequent editions. A copy of such standards shall be available for public inspection at the office of the Health Professions Bureau, 402 West Washington Street, Room W066, Indianapolis, Indiana 46204. Copies of such standards are available from the American Physical Therapy Association, 1111 North Fairfax Street, Alexandria, Virginia 22314 or at <http://www.apta.org/Education/accreditation>.

(c) An educational program, or a graduate or candidate for graduation from an educational program, which is not on the list of approved programs maintained by the committee, may apply to the committee for approval by petition demonstrating that the educational program meets the committee's standards for approval.

(d) The committee may remove an educational program from its list of approved programs upon the grounds that the educational program no longer meets its standards for approval. (*Medical Licensing Board of Indiana; 844 IAC 6-1-4; filed Aug 6, 1987, 3:00 p.m.: 10 IR 2732; filed Sep 22, 1994, 4:30 p.m.: 18 IR 263; readopted filed Nov 9, 2001, 3:16 p.m.: 25 IR 1325; filed Oct 7, 2002, 11:51 a.m.: 26 IR 377; filed Aug 26, 2004, 10:20 a.m.: 28 IR 203*)

**Rule 2. Fees**

**844 IAC 6-2-1 Fees for licensed physical therapists and certified physical therapists' assistants (Repealed)**

Sec. 1. (*Repealed by Medical Licensing Board of Indiana; filed Feb 11, 2002, 4:35 p.m.: 25 IR 2247*)

**844 IAC 6-2-2 Fees**

Authority: IC 25-1-8-2; IC 25-27-1-5

Affected: IC 25-27-1-7

Sec. 2. (a) The board shall charge and collect the following fees:

Application for licensure/certification      \$100

Application to repeat national examination      \$50

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License/certification renewal	\$100 biennially
Temporary permit	\$50
Verification of licensure/certification	\$10
Duplicate wall license/certification	\$10

(b) Applicants required to take the national examination for licensure shall pay a fee directly to a professional examination service in the amount set by the examination service. (*Medical Licensing Board of Indiana; 844 IAC 6-2-2; filed Feb 11, 2002, 4:35 p.m.: 25 IR 2247*)

**Rule 3. Admission to Practice**

**844 IAC 6-3-1 Licensure by endorsement**

Authority: IC 25-27-1-5

Affected: IC 4-1-8-1; IC 25-1-9; IC 25-27-1

Sec. 1. The committee may issue a license by endorsement to an applicant who completes the following:

- (1) Submits a sworn application in proper form.
- (2) Submits the fee specified in 844 IAC 6-2-2.
- (3) Presents satisfactory evidence that he or she does not have a conviction for an act, within or outside of this state, that would constitute a ground for disciplinary sanction under IC 25-1-9.
- (4) Has been certified by a written examination provided by the committee. The uniform criterion-referenced passing score on the physical therapy and physical therapist's assistant examinations, which has been adopted by the board of directors of the Federation of State Boards of Physical Therapy, is the required passing score. This criterion-referenced passing score shall be a scaled score of six hundred (600). If the applicant was licensed in a state that required an examination, other than an examination provided by the committee, the committee shall determine whether the applicant took and passed a postgraduate written examination substantially equivalent in content and difficulty to the examination adopted by the committee.
- (5) Submits verification from all states in which the applicant has been or is currently licensed-certified. The verification must include a statement verifying whether the applicant has ever been disciplined in any manner.
- (6) Submits an official transcript of grades from a physical therapy school or physical therapist's assistant school evidencing that the applicant is a graduate of a physical therapist or physical therapist's assistant entry-level educational program that meets the requirements of 844 IAC 6-1-4 and that a degree has been conferred. If the transcript is not in English, the applicant must submit a certified copy of an official English translation. Graduates of a foreign physical therapy program must submit notarized copies of their transcripts if official transcripts are unavailable.
- (7) Submits one (1) passport-type quality photograph of the applicant taken within the last eight (8) weeks.
- (8) Submits the applicant's valid United States Social Security number.
- (9) Meets all other minimum requirements as specified in IC 25-27-1.

(*Medical Licensing Board of Indiana; 844 IAC 6-3-1; filed Mar 10, 1983, 3:59 p.m.: 6 IR 774; filed Jun 11, 1984, 1:02 p.m.: 7 IR 1938; filed Aug 6, 1987, 3:00 p.m.: 10 IR 2732; filed Apr 5, 1990, 2:45 p.m.: 13 IR 1413; filed Sep 22, 1994, 4:30 p.m.: 18 IR 263; readopted filed Nov 9, 2001, 3:16 p.m.: 25 IR 1325; filed Aug 26, 2004, 10:20 a.m.: 28 IR 203*)

**844 IAC 6-3-2 Licensure by examination**

Authority: IC 25-27-1-5

Affected: IC 25-1-9; IC 25-27-1-6

Sec. 2. (a) The committee shall issue a license by examination to an applicant who completes the following:

- (1) Submits a sworn application in proper form.
- (2) Submits the fee specified in 844 IAC 6-2-2.
- (3) Presents satisfactory evidence that he or she does not have a conviction for an act, within or outside of this state, that would constitute a ground for disciplinary sanction under IC 25-1-9 and has not been the subject of a disciplinary action as stated in IC 25-27-1-6(a)(2).
- (4) Successfully completes the examination provided by the committee. The uniform criterion-referenced passing score on

the physical therapy or physical therapist's assistant examination, which has been adopted by the board of directors of the Federation of State Boards of Physical Therapy, is the required passing score. This criterion-referenced passing score shall be a scaled score of six hundred (600).

(5) Submits one (1) passport-type quality photograph of the applicant taken within the last eight (8) weeks.

(6) Submits an official transcript of grades from a physical therapy or physical therapist's assistant school showing evidence that the applicant is a graduate of a physical therapy or a physical therapist's assistant program that has been approved by the committee under 844 IAC 6-1-4 and that a degree has been conferred.

(7) Submits a certified copy of an English translation of any document that is not in English.

(8) Meets all other minimum requirements specified in IC 25-27-1.

(b) The committee may issue a license by examination to an applicant who has been educated as a physical therapist in a foreign country who submits the following:

(1) Information required by subsection (a).

(2) A certified copy of all academic records and an evaluation, from an accredited evaluation service approved by the committee, of all academic records and credentials for the committee's consideration in determining educational equivalence, such equivalence to be determined by the committee.

(c) For an applicant who has failed to pass the examination, in this state or any other state, the following apply:

(1) After the first attempt, the applicant may retake the examination at their first available opportunity.

(2) After the second attempt, the applicant must wait at least ninety (90) days before reapplying to take the licensure examination.

(3) After the third attempt or subsequent attempt, the applicant must wait at least one hundred eighty (180) days before reapplying to take the licensure examination.

(4) The applicant must pay the reexamination fee specified in 844 IAC 6-2-2.

*(Medical Licensing Board of Indiana; 844 IAC 6-3-2; filed Mar 10, 1983, 3:59 p.m.: 6 IR 774; filed Jun 11, 1984, 1:02 p.m.: 7 IR 1939; filed Aug 6, 1987, 3:00 p.m.: 10 IR 2733; filed Apr 5, 1990, 2:45 p.m.: 13 IR 1414; filed Sep 22, 1994, 4:30 p.m.: 18 IR 264; readopted filed Nov 9, 2001, 3:16 p.m.: 25 IR 1325; filed Aug 26, 2004, 10:20 a.m.: 28 IR 204)*

#### **844 IAC 6-3-3 Licensure for foreign graduates (Repealed)**

Sec. 3. *(Repealed by Medical Licensing Board of Indiana; filed Aug 6, 1987, 3:00 pm: 10 IR 2736)*

#### **844 IAC 6-3-4 Applications for licensure as a physical therapist or certification as a physical therapist's assistant**

Authority: IC 25-27-1-5

Affected: IC 25-27-1-6; IC 25-27-1-8

Sec. 4. (a) Persons desiring licensure as a physical therapist or certification as a physical therapist's assistant must file a completed application on a form provided by the committee.

(b) Persons submitting a completed application may be issued a temporary permit as provided by IC 25-27-1-8(d).

(c) At the time of submitting an original application to the committee, the applicant shall show to a staff member of the bureau, or to a member of the committee, the original physical therapist's or physical therapist's assistant's diploma or a certified copy of the diploma. A photocopy of the diploma may then be made for the files of the committee. In the event that such diploma has been lost or destroyed, the applicant shall submit the following:

(1) A statement under the signature and seal of the dean of the school from which the applicant graduated verifying that the applicant has satisfactorily completed:

(A) the prescribed course of study;

(B) the actual degree conferred; and

(C) the date the degree was conferred.

(2) An affidavit made before a duly authorized official to administer oaths, fully and clearly stating the circumstances under which the applicant's diploma was lost or destroyed.

(d) The fee for an application as specified in 844 IAC 6-2-2 shall be made payable to the health professions bureau. The fee is nonrefundable if the applicant should decide to withdraw the application. *(Medical Licensing Board of Indiana; 844 IAC 6-3-4;*

*filed Mar 10, 1983, 3:59 p.m.: 6 IR 775; filed Oct 17, 1986, 2:00 p.m.: 10 IR 433; filed Aug 6, 1987, 3:00 p.m.: 10 IR 2733; filed Sep 22, 1994, 4:30 p.m.: 18 IR 265; readopted filed Nov 9, 2001, 3:16 p.m.: 25 IR 1325; filed Aug 26, 2004, 10:20 a.m.: 28 IR 204)*

**844 IAC 6-3-5 Temporary permits**

Authority: IC 25-27-1-5

Affected: IC 25-27-1-6

Sec. 5. (a) For applicants for licensure by endorsement, the committee may not issue more than two (2) temporary permits to an applicant for a license as a physical therapist or a certificate as a physical therapist's assistant where the applicant submits verification of a valid license to practice physical therapy or a valid certificate to act as a physical therapist's assistant from another jurisdiction and meets the requirements of section 1(1) through 1(4) and 1(7) of this rule, except where the applicant has graduated from an educational program in another state, country, or territory, not approved by the committee.

(b) For recent graduates, the committee may issue not more than two (2) temporary permits to an applicant for a license as a physical therapist or a certificate as a physical therapist's assistant who is a graduate of an approved physical therapy program or an approved physical therapist's assistant program that meets the standards set by the committee and who has applied for and been approved by the committee to take the examination for which the applicant has applied for licensure or certification.

(c) A candidate for a license as a physical therapist or for a certificate as a physical therapist's assistant holding a temporary permit under this section shall only work under the direct supervision of a licensed physical therapist and shall report to the committee, on a form provided by the committee, the name of the facility and supervising physical therapists.

(d) A temporary permit shall expire on the earliest date that any one (1) of the following events occurs:

(1) The applicant is licensed or certified.

(2) The application for licensure or certification is disapproved.

(3) Ninety (90) days has passed since the issuance of the temporary permit.

*(Medical Licensing Board of Indiana; 844 IAC 6-3-5; filed Aug 6, 1987, 3:00 p.m.: 10 IR 2734; filed Sep 22, 1994, 4:30 p.m.: 18 IR 265; readopted filed Nov 9, 2001, 3:16 p.m.: 25 IR 1325; filed Oct 7, 2002, 12:02 p.m.: 26 IR 378; filed Aug 26, 2004, 10:20 a.m.: 28 IR 205)*

**844 IAC 6-3-6 Social Security numbers**

Authority: IC 4-1-8-1; IC 25-27-1-15

Affected: IC 25-27-1-6

Sec. 6. (a) An applicant who applies for a license, certificate, or permit under IC 25-27-1 must submit to the committee the applicant's United States Social Security number.

(b) No application for a license, certificate, or permit will be approved before the Social Security number is submitted to the committee.

(c) The bureau and the committee will release the applicant's Social Security number as provided in state or federal law.

(d) The bureau and the boards may allow access to the Social Security number of each person who holds a license, certificate, or permit issued under IC 25-27-1 or has applied for a license, certificate, or permit under IC 25-27-1 to the following:

(1) A testing service that provides the examination for licensure to the bureau or the boards.

(2) An individual state regulatory board or an organization composed of state regulatory boards for the applicant's or licensee's profession for the purpose of coordinating licensure and disciplinary activities between the individual states.

*(Medical Licensing Board of Indiana; 844 IAC 6-3-6; filed Aug 26, 2004, 10:20 a.m.: 28 IR 205)*

**Rule 4. Registration of Licensed Physical Therapists and Physical Therapists' Assistants**

**844 IAC 6-4-1 Mandatory registration; renewal**

Authority: IC 25-27-1-5

Affected: IC 25-27-1-8

Sec. 1. (a) Every physical therapist holding a license issued by the committee shall renew his or her license biennially on or

before July 1 of each even-numbered year.

(b) A licensee's failure to receive notification of renewal due to failure to notify the committee of a change of address or name shall not constitute an error on the part of the committee, board, or bureau, nor shall it exonerate or otherwise excuse the licensee from renewing such license.

(c) Every physical therapist's assistant holding a certificate issued by the committee shall renew his or her certificate biennially on or before July 1 of each even-numbered year.

(d) A certificate holder's failure to receive notification of renewal due to failure to notify the committee of a change of address or name shall not constitute an error on the part of the committee, board, or bureau, nor shall it exonerate or otherwise excuse the certificate holder from renewing such certificate. (*Medical Licensing Board of Indiana; 844 IAC 6-4-1; filed Mar 10, 1983, 3:59 p.m.: 6 IR 775; filed Aug 6, 1987, 3:00 p.m.: 10 IR 2735; filed Sep 22, 1994, 4:30 p.m.: 18 IR 266; readopted filed Nov 9, 2001, 3:16 p.m.: 25 IR 1325; filed Feb 10, 2003, 3:30 p.m.: 26 IR 2372*)

**844 IAC 6-4-2 Address; change of name**

Authority: IC 25-27-1-5

Affected: IC 25-27-1-8

Sec. 2. Each licensee is responsible for providing the committee with a current address, telephone number, and name change as applicable within thirty (30) days of the change. (*Medical Licensing Board of Indiana; 844 IAC 6-4-2; filed Mar 10, 1983, 3:59 p.m.: 6 IR 775; filed Aug 6, 1987, 3:00 p.m.: 10 IR 2735; filed Sep 22, 1994, 4:30 p.m.: 18 IR 266; readopted filed Nov 9, 2001, 3:16 p.m.: 25 IR 1325*)

**844 IAC 6-4-3 Reinstatement of delinquent license**

Authority: IC 25-27-1-5

Affected: IC 25-27-1-8

Sec. 3. (a) A physical therapist or physical therapist's assistant who is less than three (3) years delinquent in renewing a license or certificate shall be reinstated upon receipt of a renewal application, reinstatement fee, and renewal fees.

(b) If more than three (3) years have elapsed since the expiration of a license or certificate, the applicant shall meet all requirements of 844 IAC 6-3-1 except that, where the applicant has not practiced for more than three (3) years, the committee may, after an appearance before the committee, require the applicant to retake and pass the examination provided by the committee. (*Medical Licensing Board of Indiana; 844 IAC 6-4-3; filed Mar 10, 1983, 3:59 p.m.: 6 IR 775; filed Aug 6, 1987, 3:00 p.m.: 10 IR 2735; filed Apr 5, 1990, 2:45 p.m.: 13 IR 1414; readopted filed Nov 9, 2001, 3:16 p.m.: 25 IR 1325; filed Aug 26, 2004, 10:20 a.m.: 28 IR 206*)

**Rule 5. Denial of License**

**844 IAC 6-5-1 Denial of license; cause (Repealed)**

Sec. 1. (*Repealed by Medical Licensing Board of Indiana; filed Aug 6, 1987, 3:00 pm: 10 IR 2736*)

**Rule 6. Reinstatement of Suspended License**

**844 IAC 6-6-1 Evidence for reinstatement (Repealed)**

Sec. 1. (*Repealed by Medical Licensing Board of Indiana; filed Aug 26, 2004, 10:20 a.m.: 28 IR 209*)

**844 IAC 6-6-2 Petitions for reinstatement (Repealed)**

Sec. 2. (*Repealed by Medical Licensing Board of Indiana; filed Aug 26, 2004, 10:20 a.m.: 28 IR 209*)

**844 IAC 6-6-3 Duties of suspended licensees, certificate holders**

Authority: IC 25-22.5-2-7; IC 25-27-1-5

Affected: IC 25-1-9

Sec. 3. In any case where a person's license or certificate has been suspended under IC 25-1-9, said person shall do the following:

(1) Within thirty (30) days from the date of the order of suspension, file with the physical therapy committee an affidavit showing the following:

(A) All active patients then under the licensee's or certificate holder's care have been notified in the manner and method specified by the committee of the licensee's or certificate holder's suspension and consequent inability to act for or on their behalf in a professional capacity. Such notice shall advise all such patients to seek the services of another licensee or certificate holder of good standing of their own choice.

(B) All hospitals and medical and health care facilities where such licensee or certificate holder has privileges or staff status have been informed of the suspension order.

(C) Reasonable arrangements were made for the transfer of patient records, radiographic studies, and test results, or copies thereof, to a succeeding licensee or certificate holder employed by the patient or those responsible for the patient's care.

(2) Prove compliance with this section as a condition precedent to reinstatement.

*(Medical Licensing Board of Indiana; 844 IAC 6-6-3; filed Aug 6, 1987, 3:00 p.m.: 10 IR 2736; readopted filed Nov 9, 2001, 3:16 p.m.: 25 IR 1325; filed Aug 26, 2004, 10:20 a.m.: 28 IR 206)*

**844 IAC 6-6-4 Protection of patients' interests**

Authority: IC 25-22.5-2-7; IC 25-27-1-5

Affected: IC 25-1-9

Sec. 4. Whenever a person's license or certificate has been suspended under IC 25-1-9 and said person has not fully complied with section 3 of this rule and this section or if said licensee or certificate holder has disappeared, died, or is otherwise unable to comply with section 3 of this rule and this section, the physical therapy committee shall request the health professions bureau or the Indiana Chapter of the American Physical Therapy Association to take such action as may be appropriate to protect the interests of that person's patients. *(Medical Licensing Board of Indiana; 844 IAC 6-6-4; filed Aug 6, 1987, 3:00 p.m.: 10 IR 2736; readopted filed Nov 9, 2001, 3:16 p.m.: 25 IR 1325; filed Aug 26, 2004, 10:20 a.m.: 28 IR 206)*

**Rule 7. Standards of Professional Conduct**

**844 IAC 6-7-1 Definitions**

Authority: IC 25-27-1-5

Affected: IC 25-1-9

Sec. 1. For purposes of the standards of professional conduct and competent practice of physical therapy or practice as a physical therapist assistant, the following definitions apply:

"Practitioner" means a person holding a license to practice physical therapy; a person holding a certificate to practice as a physical therapist assistant; or a person holding a temporary permit issued by the committee.

"Professional incompetence" may include, but is not limited to, a pattern or course of repeated conduct by a practitioner demonstrating a failure to exercise such reasonable care and diligence as is ordinarily exercised by practitioners in the same or similar circumstances in the same or similar locality. *(Medical Licensing Board of Indiana; 844 IAC 6-7-1; filed Oct 3, 1988, 2:36 p.m.: 12 IR 386; readopted filed Nov 9, 2001, 3:16 p.m.: 25 IR 1325)*

**844 IAC 6-7-2 Standards of professional conduct and competent practice**

Authority: IC 25-27-1-5

Affected: IC 16-39-1-1; IC 25-1-9-9; IC 25-27-1; IC 34-6-2-99; IC 34-30-15-1

Sec. 2. (a) A practitioner when engaging in the practice of physical therapy shall abide by, and comply with, the standards of professional conduct in this section.

(b) A practitioner shall maintain the confidentiality of all knowledge and information regarding a patient, including, but not limited to, the patient's:

- (1) diagnosis;
- (2) treatment; and
- (3) prognosis;

of which the practitioner has knowledge during the course of the patient-practitioner relationship. Information about a patient shall be disclosed by a practitioner when required by law, including, but not limited to, the requirements of IC 34-30-15-1 et seq. and IC 16-39-1-1 et seq., and any amendments thereto, or when authorized by the patient or those responsible for the patient's care.

(c) A practitioner shall give a truthful, candid, and reasonably complete account of the patient's condition to the patient or to those responsible for the patient's care, except where a practitioner reasonably determines that the information is detrimental to the physical or mental health of:

- (1) the patient; or
- (2) those persons responsible for the patient's care.

(d) The practitioner shall give reasonable written notice to the patient and to the referring physician, podiatrist, psychologist, chiropractor, or dentist when the practitioner withdraws from a case so that another referral may be made by the referring physician, podiatrist, psychologist, chiropractor, or dentist. A practitioner shall not abandon a patient. A practitioner who withdraws from a case, except in emergency circumstances, shall, upon written request, comply with the provisions of IC 16-39-1-1 et seq., and of any subsequent amendment or revision thereof, when a patient requests health records.

(e) A practitioner shall exercise reasonable care and diligence in the treatment of patients based upon generally accepted scientific principles, methods, treatments, and current professional theory and practice.

(f) A practitioner shall not:

- (1) represent;
- (2) advertise;
- (3) state; or
- (4) indicate;

the possession of any degree recognized as the basis for licensure to practice physical therapy unless the practitioner is actually licensed on the basis of such degree in the state or states in which he/she practices.

(g) A physical therapist shall not delegate to supportive personnel any service that requires the skill, knowledge, and judgment of the licensed physical therapist.

(h) A physical therapist's assistant shall not accept a delegation of a service that exceeds the scope of practice of their certificate as defined in 844 IAC 6-1-2(g)(3).

(i) A practitioner who has personal knowledge based upon a reasonable belief that another practitioner holding the same license or certificate has engaged in illegal, unlawful, incompetent, or fraudulent conduct in the practice of physical therapy shall promptly report such conduct to a peer review or similar body, as defined in IC 34-6-2-99 and as provided in IC 34-30-15-1 et seq., having jurisdiction over the offending practitioner and the matter. This provision does not prohibit a practitioner from promptly reporting said conduct directly to the physical therapy committee. Further, a practitioner who has personal knowledge of any person engaged in, or attempting to engage in, the unauthorized practice of medicine or physical therapy shall promptly report such conduct to the medical licensing board or the physical therapy committee.

(j) A practitioner who voluntarily submits himself or herself to, or is otherwise undergoing a course of treatment for:

- (1) addiction;
- (2) severe dependency upon alcohol or other drugs or controlled substances; or
- (3) psychiatric impairment;

where such treatment is sponsored or supervised by a committee for impaired practitioners of a state, regional, or local organization of professional health care providers, or where such treatment is sponsored or supervised by a committee for impaired practitioners of a hospital, shall be exempt from reporting to a peer review committee as set forth in subsection (i) or to the physical therapy committee so long as the practitioner is complying with the course of treatment and making satisfactory progress. If the practitioner fails to comply with or is not benefited by the course of treatment, the practitioner-chief administrative officer, his or her designee, or any member of the committee for impaired practitioners shall promptly report such facts and circumstances to the physical therapy



committee. Subsection (i) and this subsection shall not, in any manner whatsoever, directly or indirectly, be deemed or construed to prohibit, restrict, limit, or otherwise preclude the physical therapy committee from taking such action as it deems appropriate or as may otherwise be provided by law.

(k) Fees charged by a practitioner for his or her professional services shall be reasonable and shall reasonably compensate the practitioner only for services actually rendered.

(l) A practitioner shall not enter into agreement for, charge, or collect an illegal or clearly excessive fee.

(m) Factors to be considered in determining the reasonableness of a fee include, but are not limited to, the following:

(1) The difficulty or uniqueness, or both, of the services performed and the time, skill, and experience required.

(2) The fee customarily charged in the locality for similar practitioner services.

(3) The amount of the charges involved.

(4) The quality of performance.

(5) The nature and length of the professional relationship with the patient.

(6) The experience, reputation, and ability of the practitioner in performing the kind of services involved.

(n) A practitioner shall not pay, demand, or receive compensation for referral of a patient except for a patient referral program operated by a professional society or association.

(o) A practitioner shall be responsible for the conduct of each and every person employed by the practitioner for every action or failure to act by said employee or employees in the course of the employment relationship.

(p) A practitioner shall not, on behalf of:

(1) himself or herself;

(2) a partner;

(3) an associate;

(4) a shareholder in a professional corporation; or

(5) any other practitioner or specific health care provider affiliated with the practitioner;

use, or participate in the use of, any form of public communication containing a false, fraudulent, misleading, deceptive, or unfair statement or claim.

(q) Subject to the requirements of subsection (p), and in order to facilitate the process of informed selection of a practitioner by the public, a practitioner may advertise services through the public media, provided that the advertisement is dignified and confines itself to the existence, scope, nature, and field of practice of physical therapy.

(r) If the advertisement in subsection (q) is communicated to the public by radio, cable, or television, it shall be prerecorded and approved for broadcast by the practitioner, and a recording and transcript of the actual transmission shall be retained by the practitioner for a period of five (5) years from the last date of broadcast.

(s) If a practitioner advertises a fee for:

(1) a service;

(2) a treatment;

(3) a consultation;

(4) an examination; or

(5) any other procedure;

the practitioner must render that service or procedure for no more than the fee advertised.

(t) Except as otherwise provided in these rules, a practitioner shall not contact or solicit individual members of the public personally or through an agent in order to offer services to such person or persons unless that individual initiated contact with the practitioner for the purpose of engaging that practitioner's professional services.

(u) A practitioner may, whenever the practitioner believes it to be beneficial to the patient, and upon approval of the referring physician, podiatrist, psychologist, chiropractor, or dentist, send or refer a patient to a qualified specific professional health care provider for treatment or health care that falls within the specific professional health care provider's scope of practice. Prior to any such referral, however, the practitioner shall examine or consult with, or both, the patient and the referring physician, podiatrist, psychologist, chiropractor, or dentist to ensure that a condition exists in the patient that would be within the scope of practice of the specific professional health care provider to whom the patient is referred or sent.

(v) A practitioner, upon:

(1) his or her retirement;

(2) discontinuation of the practice of physical therapy;

(3) leaving or moving from a community;

shall not sell, convey, or transfer for valuable consideration, remuneration, or anything of value patient records of that practitioner to any other practitioner.

(w) A practitioner, upon:

(1) retiring from private practice;

(2) discontinuation of the private practice of physical therapy;

(3) leaving or moving from a community;

shall notify all of his or her active patients in writing, or by publication once a week for three (3) consecutive weeks in a newspaper of general circulation in the community, that he or she intends to discontinue his or her practice of physical therapy in the community and shall notify the referring physician, podiatrist, psychologist, chiropractor, or dentist of each active patient. The practitioner discontinuing his or her practice shall make reasonable arrangements with his/her active patients for the transfer of his/her records, or copies thereof, to the referring physician, podiatrist, psychologist, chiropractor, or dentist who shall make the records, or copies thereof, available to the succeeding practitioner or to a program conducted by a professional society or association.

(x) As used herein, "active patient" applies and refers to a person whom the practitioner has:

(1) examined;

(2) treated;

(3) cared for; or

(4) otherwise consulted with;

during the two (2) year period prior to retirement, discontinuation of the practice of physical therapy, or leaving or moving from a community.

(y) A practitioner shall not base his fee upon the uncertain outcome of a contingency, whether such contingency be the outcome of litigation or any other occurrence or condition that may or may not develop, occur, or happen.

(z) A practitioner shall not attempt to exonerate himself or herself from or limit his or her liability to a patient for his or her personal malpractice except that a practitioner may enter into agreements that contain informed, voluntary releases or waivers of liability, or both, in settlement of a claim made by a patient or by those responsible for a patient's care.

(aa) A practitioner shall not attempt to preclude, prohibit, or otherwise prevent the filing of a complaint against him or her by a patient or other practitioner for any alleged violation of this title, IC 25-27-1 et seq., or any other law.

(bb) A practitioner shall maintain adequate patient records.

(cc) A practitioner shall not interfere with, or refuse to cooperate in, an investigation or disciplinary proceeding by willful misrepresentation of facts or the use of threats or harassment against any patient or witness to prevent them from providing evidence in a disciplinary proceeding or any legal action.

(dd) A practitioner shall not aid or abet a person not licensed or certified in this state who directly or indirectly performs activities requiring a license or certificate.

(ee) A practitioner shall not practice as a physical therapist or work as a physical therapist's assistant when physical or mental abilities are impaired by the use of:

(1) controlled substances;

(2) other habit-forming drugs;

(3) chemicals; or

(4) alcohol.

(ff) A practitioner shall not engage in the performance of substandard care due to a deliberate or negligent act or failure to act regardless of whether there was actual injury to the patient.

(gg) A practitioner shall not engage in sexual misconduct, including the following:

(1) Making sexual advances.

(2) Requesting sexual favors.

(3) Engaging in verbal conduct or physical contact of a sexual nature with patients, clients, or coworkers.

(hh) A practitioner who has been convicted of a felony, or who has pled no contest or any other finding of guilt as to such felony, in this or any other state, territory, or country, which demonstrates impaired judgment or risk to the public in the practitioner's future provision of physical therapy service, may be deemed to be in violation of this section.

(ii) Failure to comply with the above standards of professional conduct and competent practice of physical therapy may result in disciplinary proceedings against the offending practitioners. Further, all practitioners licensed in Indiana shall be responsible for

PHYSICAL THERAPISTS AND PHYSICAL THERAPISTS' ASSISTANTS

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having knowledge of these standards of conduct and practice. (*Medical Licensing Board of Indiana; 844 IAC 6-7-2; filed Oct 3, 1988, 2:36 p.m.: 12 IR 386; errata filed Oct 11, 1988, 3:00 p.m.: 12 IR 391; readopted filed Nov 9, 2001, 3:16 p.m.: 25 IR 1325; filed Aug 26, 2004, 10:20 a.m.: 28 IR 207*)

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