

## North Carolina Board of Physical Therapy Examiners

### Scope of Practice Questions Considered by Board at December 11, 2019 Board Meeting

**Dry Needling Connective Tissue-** Randal Lazicki, PT, attended the Board Meeting to provide information and clarifications regarding his question,

#### **Is dry needling connective tissue within the scope of PT practice?**

After discussing the NCBPTE Declaratory Ruling and NC Supreme Court decision regarding dry needling, the Board determined that the definition in the Supreme Court decision included relieving “myofascial pain.” To the extent relief of myofascial pain includes connective tissue it may be included in the practice of dry needling for PTs in North Carolina. The Board responded to Mr. Lazicki with the following:

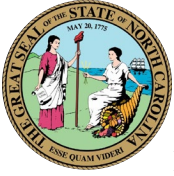
The Board determined that as noted in the North Carolina Supreme Court decision issued on December 7, 2018, in the case brought by the Acupuncture Board, “dry needling is a treatment that uses physical or rehabilitative procedures, with assistive devices, for the purpose of correcting or alleviating myofascial pain...” Therefore, any utilization of dry needling techniques that satisfy the foregoing language is within the scope of physical therapy practice in North Carolina. As the Board has previously noted, dry needling is an advanced skill for which training beyond entry level education is required. It is incumbent upon the licensee to obtain the appropriate training and education to be competent to perform dry needling. For your reference, the Board has posted document links related to the litigation brought by the Acupuncture Board on the announcements page of the Board's website. <https://www.ncptboard.org/Announcements/Announcements.php> - scroll down the page.

**Blood Flow Restriction Training** - Presentation via teleconference –Robert Bruzga, PT and Mike Essa, PT, ATC. Mr. Essa and Mr. Bruzga joined the NCBPTE by Skype to provide additional information and clarification of their question,

#### **Is blood flow restriction training part of the scope of practice of PT in North Carolina?**

After discussing the materials and content of the presentation provided, and whether this technique is routinely taught in entry level and continuing education and routinely performed in practice, the Board determined the following:

“...Blood Flow Restriction training satisfies the criteria to be included within the scope of physical therapy practice in North Carolina because it is an advanced skill being taught in entry level PT education, taught routinely in continuing educational programs and routinely performed nationally in PT practice. It is incumbent upon the licensee to obtain the appropriate



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training and education to be competent to perform this technique in a manner that is considered safe and effective for the patient.”

**Musculoskeletal Ultrasound**– Benjamin James Massey, PT attended Board Meeting via teleconference

to educate and answer questions from the Board on Musculoskeletal Ultrasound and its diagnostic and therapeutic uses in physical therapy in response to two questions posed by licensees:

1. **Is Musculoskeletal Ultrasound within the scope of PT Practice in NC?**
2. **Can musculoskeletal Ultrasound be used to guide needle placement when performing dry needling?**

After the discussion, Board and review of information available, the Board provided this response: “...The standard for making this determination is contained in Board Rule 48C .0101 (a) Permitted Practice, which states, “Physical therapy is presumed to include any acts, test, procedures, modalities, treatments, or interventions that are **routinely** taught in educational programs, or in continuing education programs for physical therapists and are **routinely** performed in practice settings.”

The Board determined that the standards of Board Rule 48C .0101 (a) are not met at this time. Therefore, the use of Musculoskeletal Ultrasound for diagnostic purposes or guiding needle placement during dry needling and physical therapy documentation requirements is not currently within the scope of physical therapy practice in North Carolina. Further, clients receiving this technique should not be advised or led to believe they are receiving physical therapy.

If new or additional information is provided to the Board regarding where this is taught in entry-level or continuing education and is routinely practiced by physical therapists, it will review the new information and make a determination.

Radial pressure shockwave - The question was asked by a licensee H. Abrams,

### **Is Radial Pressure Wave treatment in the PT scope of practice in North Carolina?**

After reviewing available information and discussing the matter the Board determined a response to the licensee would be the following: The standard against which the question must be analyzed is contained in Board Rule 48C .0101 (a) Permitted Practice - “Physical therapy is presumed to include any acts, test, procedures, modalities, treatments, or interventions that are **routinely**



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taught in educational programs, or in continuing education programs for physical therapists and are **routinely** performed in practice settings.”

At this time, the Board was unable to determine that Radial Pressure Wave treatment satisfies the standards of Board Rule 48C .0101 (a) based on the information reviewed. If new or additional information is provided to the Board regarding where this is taught in entry-level or continuing education and is routinely practiced by physical therapists, it will review the new information and make a determination.

Rigid Casting - The question was asked by D. Fowler,

### **Are PTs allowed to cast patients with rigid cast material?**

After reviewing available information and discussing the matter the Board determined a response to the licensee would be the following: “The standard against which the question must be analyzed is contained in Board Rule 48C .0101 (a) Permitted Practice - “Physical therapy is presumed to include any acts, test, procedures, modalities, treatments, or interventions that are **routinely** taught in educational programs, or in continuing education programs for physical therapists and are **routinely** performed in practice settings.” At this time, the Board was unable to determine that PTs casting patients with the use of rigid cast material satisfies the standards of Board Rule 48C .0101 (a). If new or additional information is provided to the Board regarding where this is taught in entry-level or continuing education and is routinely practiced by physical therapists, it will review the new information and make a determination. It would be helpful if we could speak on the phone to provide additional information or clarification.”

### North Carolina Board of Physical Therapy Examiners – Statement on Telehealth

In response to your emailed question below to the NC Board of PT Examiners, the information below is the response the Board has provided to general questions on this topic since September 2018.

The NC PT Practice Act and Board’s Rules apply to the delivery of physical therapy services via telehealth. In response to your emailed question below, at its September Board meeting - 2018, NC Board of Physical Therapy Examiners considered some questions regarding the parameters of using telehealth in the provision of physical therapy services in North Carolina; the Board determined the following general principles will apply:

- Telehealth is a delivery model for physical therapy services and as such it is not a question of scope of physical therapy practice.



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- PT licensees must comply with the NC PT Practice Act and Board rules when performing physical therapy services using telecommunications.
- In order to provide physical therapy services to a patient geographically located in NC, the provider of telehealth services must possess an active NC PT license.
- To address questions of whether a PT licensee or other healthcare provider or non-healthcare individual must be with the patient in the remote location and the level of expertise that person needs, the answer depends on various factors, including the status and safety of the patient, whether it is an initial evaluation or ongoing treatment, and the complexity of the services being provided.
- For questions related to the use of telehealth in physical therapy practice in North Carolina that are not answered by these general principles, the Board will continue to respond to questions on a case-by-case basis.

As the use of telehealth in healthcare practice continues to evolve the Board must keep the protection of North Carolina citizens in mind. The Board will utilize current information based on education, training and routine clinical practices of PT licensees to inform responses to questions. I am not able to address reimbursement questions as the Board does not have jurisdiction over payers or payer policy.