



State of Louisiana
Department of Health and Hospitals
Louisiana Physical Therapy Board
104 Fairlane Drive, Lafayette, LA 70507
(337) 262-1043 FAX (337) 262-1054

June 19, 2013

- 6:30 Call Meeting to order
6:35 April Board Meeting Minutes
May Board Meeting Minutes
7:00 Reports
Chairman's Report
Treasurer's Report
 - April 2013 actual vs. budget
 - May 2013 actual vs. budget
 - Securities – April 2013
 - Securities – May 2013Executive Director's Report
 - Renewal issues – payment issues - update
 - Renewal issues – lacking ethic course – update
 - Late renewals - procedure7:45 Unfinished Business
 - Task Tracker for May 20138:30 Monitoring Disciplined Therapists Report
9:00 Correspondence
 - PT_INR test
 - Flr
 - Utilization and supervision of techs
 - Buck's Traction
 - 10th visit requirements and screens
 - Save the Date Leadership Issues ForumRecess

June 20, 2013

- 9:00 Meeting with Adam Lafleur
9:30 Legal
 - Louisiana Public Records Doctrine (5-2013)10:00 Lindsey Hunter - PT Regulation Issue
11:00 New Business
11:30 Statutes, Rules and Regulations Issues
11:45 Board Monthly Call Discussion
12:00 Adjournment

LOUISIANA PHYSICAL THERAPY BOARD

June 19, 2013 ACCEPTED

Proceedings for the Louisiana Physical Therapy Board, taken in regular session on Wednesday, June 19, 2013, at 104 Fairlane Drive, Lafayette, LA 70507. Donna "Dee" Cochran, Chairman called the meeting to order at 6:30 p.m. A quorum of members was present. Board members present were: Donna "Dee" Cochran, Teresa Maize, Kristina Lounsberry, Al Moreau, III, Danny Landry, and Gerald Leglue. Cheryl Gaudin, Executive Director, George Papale, general counsel and Courtney P. Newman, attorney were also present.

ADOPTION OF MINUTES OF PREVIOUS MEETING

Minutes of the April and May Board meeting were accepted as written.

CHAIRMAN'S REPORT

Donna "Dee" Cochran discussed the need to have a booth at the LPTA Fall Meeting to be available to licensees in attendance.

TREASURER'S REPORT

Cash on hand for the month of April was \$1,254,233.94. Receipts for April totaled \$103,541.89 and expenses totaled \$36,268.72.

Cash on hand for the month of May was \$1,219,213.76. Receipts for May totaled \$63,638.42 and expenses totaled \$30,351.52.

EXECUTIVE DIRECTOR REPORT

Cheryl Gaudin reported staff is still attempting to obtain payment from licensees who owe for the second year of renewal and late fees as well as obtaining ethic course requirements from licensees who renewed without providing that information. The Board chose not to discipline those renewal applicants. Those individuals would receive a letter giving them 30 days to meet that requirement and provide proof of completion of the ethics course.

Discussion regarding applications for reinstatement of licensees for those who missed the April 30th deadline took place. Motion was made by Jerry Jones, Jr., seconded by Teresa Maize; "To authorize the Executive Director to send out a proposed consent agreement to licensees who have been practicing without a license after April 30th with a \$250 administrative assessment in conjunction with the renewal fee for renewing the licenses." All in favor were Jerry Jones, Jr., Teresa Maize, Kristina Lounsberry, Al Moreau, III, Gerald Leglue, and Donna "Dee" Cochran. No one opposed the motion.

MONITORING DISCIPLINED THERAPISTS

STATUTE, RULES, AND REGULATIONS

NEW BUSINESS

LEGAL

Courtney P. Newton, legal counsel to the board presented an educational session regarding Louisiana Public Records Doctrine. The presentation provided information as to what constitutes a public document as well as how to address requests for public documents.

CORRESPONDENCE

Karen T. Barkman, PT, CCCE Supervisor of Rehab. Services at Ochsner Medical Center-NS reported she has worked at several acute care facilities over the years where the question of who should be applying Buck's traction was brought up. Some of the facilities require it to be done a) by "ortho techs" in the nursing department, b) by rehab techs in the therapy department, or c) by a PT without an actual evaluation. There have been cases where PTA's have been involved as well. Barkman reported she read the declaratory

statement allowing a PT to perform this function 1) with a doctor's order, and 2) following an evaluation. What about scenarios b and d? Can a rehab technician apply Buck's traction if there is no PT involvement? (the order would come as Buck's traction) Can a PTA participate in the application of Buck's traction without the involvement of a PT? The service would not be documented or billed as PT. Also, since there are no facilities that have PT services 24 hours a day, how can an order differentiate who will perform the function of applying Buck's traction depending upon the time of day it is ordered? Al Moreau will draft a response to Barkman.

Jennifer Champagne, PTA reported practicing about a year questioned if it is within the scope of practice for a PTA to do screens on patients in a SNF/nursing home? When it comes to progress notes only done once a week, how often is the PT required to write a progress note? Can the PTA do all of them now that the PT has to treat the patient every tenth visit? Jerry Jones, Jr. will draft a letter to Champagne.

Roger Martin, PT reported he practices in several SNF/LTC facilities. A new procedure at these facilities is to consult PT on every patient admitted, readmitted from a short hospital stay or that has experienced a fall. This is a "standing order", which often occurs prior to the ordering physician meeting, treating or reviewing the patient's medical history. The problem arises when based on chart review, patient interview or previous course of treatments with the patient, it is determined that the patient is not appropriate for therapy. This occurs without any type of actual physical evaluation or exam. The most common occurrence is the patient is observed by staff or it is documented in the chart that the patient is at their baseline level of function. It is my opinion that the physician should be contacted and be informed of findings and the order discharged/cancelled. It is the facility and/or the program manager's decision that it is outside of the PT's scope of practice to make the determination that a Doctors order should be discharged and that a full evaluation should be completed with the finding that PT is not indicated. Part of their reasoning is that it is an "order" from the doctor for and Evaluation and treatment and we are not doctors and cannot make a contrary decision to the order. It is my opinion that we are independent practitioners, and it is our responsibility to determine if a patient would benefit from skilled PT intervention either by an evaluation or treatment. Charging for and completing a complete evaluation seems inappropriate in these situations, as it would be contrary to the PT's professional findings and would result in unnecessary and unneeded evaluation and charge to the patient or the patients payor. What is the board's opinion on these situations and which statutes and rules of the practice act apply? Kristina Lounsberry will draft a response to Martin.

Lloyd Vale, PT asked if a therapist should assess and complete functional limitation report as Medicare FLR mandates on every tenth (10th) visit? Can a PTA treat the patient on the tenth visit FLR assessment or is this a requirement of the PT? Danny P. Landry will draft a response to Vale.

Dr. J. Christian Armetta, SLP.D., CCC-SLP Doctor of Speech-Language Pathology, Director of Rehabilitation Services at Beauregard Memorial Hospital asked if a PT/OT can use the Cellu M6 machine from the LPG systems company (also known as Endermologie Treatment) as a tool when conducting massage CPT 97124. The therapist would use this machine as a tool in conjunction with his/her hands to improve joint motion or for relief of muscle spasm. Kristina Lounsberry will draft a response to Dr. Armetta.

Elizabeth Madden, RN Clinical Educator at Ochsner Home Health, Kenner asked for clarification if a physical therapist practicing in a home care work setting can perform a PT/INR test on a patient using a coag monitor device once the therapist is provided with proper training and passes a competency test? I read the declaratory statement indicating the PT can perform a glucose monitoring with training. Danny P. Landry will draft a response letter.

John Maggio, PT requested clarification regarding utilization and supervision of PT Techs availability to assist a PTA in day to day patient care and operations of the clinic. As previously documented by Declaratory Statement on the board's website, during the daily operation of the department the PTA will have to give general direction to the technician as it relates to patient care. The Board determined it is appropriate if the technician assist the PTA in maneuvering IV poles, catheters, etc., with a PT on the premises. The question specifically pertains to the scenario

in which PTA's are assigned to see patients that are "double booked" at the same time--can a PT tech be utilized by the PTA to assist with the set up and performance of an established exercise program with one patient while the PTA provides hands on care with the other patient? The Rules and Regulations for supervision of PT Techs indicates: *A. The level of responsibility assigned to a PT technician is at the discretion of a Supervising PT of Record who is ultimately responsible for the care provided by the technician. Documentation of education or inservice training completed by the physical therapy technician shall be maintained in the technician's personnel file.*

- 1. In all practice settings, during the provision of physical therapy services, the supervising PT shall provide continuous, in-person supervision of the physical therapy technician.*
- 2. A physical therapy technician may assist a PTA only with those aspects of patient treatment which have been assigned to the physical therapy technician by a PT.*

In the above scenario, it appears that it would be permissible for the technician to assist the PTA with a patient's exercise program if it is approved by the supervising PT.

Maribeth Decker, Associate to Senior Staff at FSBPT reported each summer, the Board of Directors schedules a Leadership Issues Forum (LIF) and invites representatives from jurisdiction member boards, FSBPT committees, the FSBPT Council of Board Administrators and the Foreign Credentialing Commission on Physical Therapy (FCCPT) along with external stakeholders to attend. This year, we will have an update from LIF 2012, focus on the delegate assembly motions related to portability AND discuss the outcome of the NPTE eligibility task force. The invitation was extended as a representative, to either Delegate or Administrator. The Leadership Issues Forum was scheduled for Friday and Saturday, August 9 & 10, 2013 in Alexandria, VA. Both the Chairman and Executive Director declined the invitation.

OTHER BUSINESS

UNFINISHED BUSINESS TASK TRACKER

Staff mailed certified letters to licensees who did not provide completion of an ethics course.

Kristina Lounsberry drafted a letter to forward to all licensees who voiced concerns with assessment of late fees. Cheryl Gaudin will forward letters.

Teresa Maize drafted a letter in response to Bert Lindsey, PT IP Rehab Services Supervisor at St Tammany Parish Hospital clarifying PT discharges as it pertains to the age of electronic documentation.

Teresa Maize drafted a letter in response to Erin Comeaux regarding her question if a tech at a hospital can legally place a patient in a knee CPM without immediate supervision of a PT or without the assistance of a PTA. Also, is she authorized to place a patient in a CPM with the assistance of a CNA?

Richard Villemarette, PT is looking for guidance to comply with the PT/PTA case conference requirement. Currently, they are documenting these meetings on paper but are in the process of making the transition to paperless documentation. The current software they use has a section on the note to document if a face to face conference took place but it does not allow for both licensees to electronically sign the note, only the one completing it. Is this in compliance with the rule? Teresa Maize will draft a response to Villemarette.

Noelle G. Moreau, PhD, PT Assistant Professor in the Department of Physical Therapy at LSUHSC New Orleans campus indicated she will be participating in a research study, which is a joint venture with Columbia University, along with another therapist, Ashley Dew. They will be collecting data offsite from July 14-18th in Florence, Alabama. After contacting the Alabama board, it was determined that we would need temporary licensure for those dates, and they waived the licensure fees but request a written verification of licensure from Louisiana. The online verification was not sufficient. The request was for the board's consideration to waiving the fees for this project. Donna "Dee" Cochran will speak with Moreau for more information.

Kristina Lounsberry drafted a response to Dr. Christian Armetta, SLP_D, CCC-SLP Doctor of Speech-Language Pathology, Director of Rehabilitation Services at Beauregard Memorial Hospital regarding her question if licensed PTs/OTs are allowed to use the Cellu M6 machine from the LPG systems company (also known as Endermologie Treatment) as a tool when conducting a massage CPT 97124. Their therapists would use this machine as a tool in conjunction with his/her hands to improve joint motion or for relief of muscle spasm.

Al Moreau drafted a response to Krystal Hart at Analgesic Healthcare asked if in state of Louisiana, is it considered within the scope of license for a PT, DPT, MSPT, NPT to prescribe electrotherapy products (specifically TENS and Mstim) and orthotics for home use, without a supervising MD Rx?"

BOARD MEMBER MONTHLY CALLS

The meeting was recessed at 1:00 pm.

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