

# Recommended Scope of Practice for Federally Employed Physical Therapists



Physical therapists have the responsibility to practice autonomously in all settings, practice environments, and employment relationships. Autonomous physical therapist practice is characterized by independent, self-determined professional judgment within one's scope of practice, consistent with the profession's Code of Ethics for the Physical Therapist and Standards of Ethical Conduct for the Physical Therapist Assistant, and in the best interest of the patient and client. Federal employers should adopt this Recommended Scope of Practice for Federally Employed Physical Therapists to allow physical therapists to practice to the top of their license, optimizing the use of their full skill sets. The scope of practice for physical therapists has 3 components: professional, jurisdictional, and personal.

## Professional Scope of Physical Therapist Practice

The professional scope of practice is grounded in basic, behavioral, and clinical sciences. It is supported by education, based on a body of evidence and linked to existing and emerging practice frameworks. The professional scope of practice evolves in response to innovation, research, collaboration, and changes in societal needs. The professional scope of practice consists of patient and client management, which includes diagnosis and prognosis, to optimize physical function, movement, performance, health, quality of life, and well-being across the lifespan. In addition, the professional scope of practice includes contributions to public health services aimed at improving population health and the human experience. Physical therapists are licensed in all US jurisdictions. The terms "physical therapy" and "physiotherapy" shall be used only in reference to services that are provided by or under the direction and supervision of a licensed physical therapist/physiotherapist. When so used the terms are synonymous.

## Jurisdictional (Legal) Scope of Physical Therapist Practice

Federal agencies may preempt state law when the exercise of state authority conflicts with the exercise of federal authority under the federal statute. The federal agency will comply with federal directives. This jurisdictional scope of practice applies to all federally employed physical therapists while on federal property, on military assignment, or functioning in their official capacity as a federal employee off federal property. This includes, but is not limited to, performing job functions in a patient's or client's home or community, or via telehealth.

## Personal Scope of Physical Therapist Practice

The personal scope of practice consists of activities for which an individual physical therapist is properly trained and credentialed (if required), and that he or she is competent to perform. Federal physical therapists are privileged in the evaluation and treatment of patients and clients recovering from injury or disease and in programs for maintaining wellness and fitness for individuals without apparent disease or injury. Physical therapists provide these patients and clients with services that restore function, improve mobility, relieve pain, prevent or limit permanent physical disability, and promote health and well-being. Services may include, but are not limited to, examination, evaluation, diagnosis, prognosis, providing treatments/interventions based on their evaluation, and providing health and wellness interventions and education.

Examination may include, but is not limited to: strength and range of motion testing and assessment of balance, coordination, posture, muscle performance, respiration, and motor function. Treatment/interventions may include, but are not limited to: therapeutic exercise; strength and conditioning training; joint mobilization; manipulation; soft tissue mobilization; debridement and wound care; gait analysis and training; mobility assessment and training; environmental assessment; therapeutic dry needling; fabrication of assistive, adaptive, orthotic, prosthetic, protective, and supportive devices and equipment; airway clearance techniques;

lymphedema management; application of physical agents or modalities, including mechanical and electrotherapeutic modalities; casting; early intervention in pediatrics; neonatal services; and any other practices that are informed by evidence and linked to existing or emerging practice models.

Physical therapy health education efforts also include injury prevention, human performance optimization, and management of chronic conditions and pain. Physical therapists provide supervision as appropriate to licensed physical therapist assistants. Supervision can occur through an in-person or telehealth visit.

Physical therapists may see a patient or client without a referral and can refer to other specialists. In accordance with individual agency policy, additional privileges may include initiating temporary/limited duty profiles, placing patients and clients on quarters, joint injection/aspiration, electromyographic testing, battlefield/auricular acupuncture, ordering diagnostic imaging and laboratory studies, and prescribing orthotics and braces, durable medical equipment, and/or specific pharmacy and therapeutic policy-approved medications.

Developed by the Federal Section of the American Physical Therapy Association (APTA) and APTA in conjunction with APTA policies and positions.

**Last Updated:** February 2021

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