

CHAPTER 101

Department of Labor, Licensing and Regulation— State Board of Physical Therapy Examiners

(Statutory Authority: 1976 Code § 40–45–10, et seq.)

ARTICLE 1 DEFINITIONS

101–01. Definitions.

Definitions found in Section 40–45–20 apply to this chapter.

(1) “Continuing education” means an organized educational program designed to expand a licensee’s knowledge base beyond the basic entry level educational requirements for physical therapists and physical therapist assistants. Course content must relate to patient care in physical therapy whether the subject is research, treatment, documentation, education, or management.

(2) “CEU” or “continuing education unit” means ten (10) contact hours of participation in an organized continuing experience.

(3) “Contact hour” means a minimum of fifty (50) minutes of instruction.

(4) “Academic semester credit hour” means fifteen (15) contact hours.

(5) “Academic quarter credit hour” means ten (10) contact hours.

HISTORY: Added by State Register Volume 24, Issue No. 5, eff May 26, 2000. Amended by State Register Volume 33, Issue No. 2, eff February 27, 2009.

ARTICLE 2 OFFICERS OF BOARD; MEETINGS

101–02. Officers of Board.

At the first meeting of each calendar year, the Board shall elect from among its members a chairman, vice-chairman, and other officers as the Board determines necessary.

HISTORY: Added by State Register Volume 24, Issue No. 5, eff May 26, 2000. Amended by State Register Volume 33, Issue No. 2, eff February 27, 2009.

101–03. Meetings.

(1) The Board shall meet at least two (2) times a year and at other times upon the call of the chairman or a majority of the Board members.

(2) A majority of the members of the Board constitutes a quorum; however, if there is a vacancy on the Board, a majority of the members serving constitutes a quorum.

(3) Board members are required to attend meetings or to provide proper notice and justification of inability to do so. Unexcused absences from meetings may result in removal from the Board as provided in Section 1–3–240.

HISTORY: Added by State Register Volume 24, Issue No. 5, eff May 26, 2000. Amended by State Register Volume 33, Issue No. 2, eff February 27, 2009.

ARTICLE 3
LICENSING PROVISIONS

101–04. General Licensing Provisions for Physical Therapists.

An applicant for licensure as a physical therapist must:

(1) be a graduate of a physical therapy educational program approved by the Board; or, if foreign educated, must have a credentials evaluation by a Board approved credentialing evaluation agency that determines the applicant's education is substantially equivalent to the education of physical therapists educated in an accredited entry level program as determined by the Board. To determine substantial equivalency, the approved credentialing evaluation agency shall use the appropriate Course Work Tool ("CWT") adopted by the Federation of State Boards of Physical Therapy. The appropriate CWT means the CWT in place at the time the foreign educated physical therapist graduated from their physical therapy program;

(2) submit an application on a form approved by the Board, along with the required fee; and

(3) speak the English language as a native language or demonstrate an effective proficiency of the English language in the manner prescribed by and to the satisfaction of the board; and

(4) pass an examination approved by the Board; and

(5) submit proof of not less than one thousand (1000) clinical practice hours under the on-site supervision of a licensed physical therapist on a form approved by the Board if the applicant is not a graduate of an approved school.

HISTORY: Added by State Register Volume 24, Issue No. 5, eff May 26, 2000. Amended by State Register Volume 33, Issue No. 2, eff February 27, 2009; State Register Volume 36, Issue No. 6, eff June 22, 2012.

101–05. General Licensing Provisions for Physical Therapist Assistants.

An applicant for initial licensure as a physical therapist assistant must:

(1) be a graduate of a physical therapist assistant program approved by the Board; and

(2) submit an application on a form approved by the Board, along with the required fee; and

(3) pass an examination approved by the Board; and

(4) speak the English language as a native language or demonstrate an effective proficiency of the English language in the manner prescribed by and to the satisfaction of the board.

HISTORY: Added by State Register Volume 24, Issue No. 5, eff May 26, 2000. Amended by State Register Volume 33, Issue No. 2, eff February 27, 2009; State Register Volume 36, Issue No. 6, eff June 22, 2012.

101–06. Reactivation of Inactive or Lapsed Licenses for individuals who do not meet the statutory criteria for active licensure in another state.

(1) A physical therapist (PT) or physical therapist assistant (PTA) whose license has lapsed for more than three (3) years may be granted a provisional license to obtain the appropriate supervised clinical practice hours and must demonstrate one thousand (1000) hours of qualified supervised practice before the license can be reactivated.

(2) A PT or PTA whose license has lapsed for more than five (5) years must also demonstrate successful completion of seventy-five (75) hours of continuing education in organized programs of learning (to include a workshop or symposium) which contribute directly to the professional competency of the licensee and meet the criteria of Regulation 101–07(3).

(3) A PT or PTA whose license has lapsed for more than ten (10) years must also successfully pass an examination approved by the Board.

HISTORY: Added by State Register Volume 24, Issue No. 5, eff May 26, 2000. Amended by State Register Volume 33, Issue No. 2, eff February 27, 2009.

101–07. Continuing Education.

Continuing education requirements become effective upon approval by the Governor and must first be reported beginning in 2002 and thereafter.

(1) Every licensed physical therapist and physical therapist assistant shall earn 3.0 CEUs or thirty (30) hours of acceptable continuing education credit per biennium year.

(2) Physical therapists and physical therapist assistants licensed in South Carolina will not have a CEU requirement for the first biennium renewal period in which they are initially licensed. Graduates of a Board approved educational program and initially licensed are said to have met the CEU requirement for the first biennium renewal year.

(3) Standards for approval of continuing education. A continuing education activity which meets all of the following criteria is appropriate for continuing education credit:

(a) it constitutes an organized program of learning (including a workshop or symposium) which contributes directly to the professional competency of the licensee; and

(b) it pertains to common subjects or other subject matters which integrally relate to the practice of physical therapy; and

(c) it is conducted by individuals who have a special education, training, and experience by reason of which said individuals should be considered experts concerning the subject matter of the program and is accompanied by a paper, manual, or outline which substantively pertains to the subject matter of the program and reflects program schedule, including:

(1) fulfilling stated program goals or objectives, or both;

(2) providing proof of attendance to include original certificate with participant's name, date, place, course title, presenter(s), and number of program contact hours; and

(d) the Board will not grant prior approval but each licensee will be responsible for ensuring that each course submitted for continuing education credit meets these standards.

(4) The following courses are automatically approved for required contact hours:

(a) APTA (American Physical Therapy Association) and SCAPTA (South Carolina American Physical Therapy Association) sponsored courses. APTA home study courses, and courses sponsored by other state professional physical therapy associations; and

(b) college course work which is judged germane to the practice of physical therapy and is conducted or sponsored by accredited institutions of higher education; and

(c) AMA (American Medical Association) continuing education courses that involve physical therapy; and

(d) in-service hours totaling 0.4 CEUs maximum per biennium; and

(e) CPR of 0.4 CEUs per biennium; and

(f) any appropriate physical therapy continued competency tools developed by the Federation of State Boards of Physical Therapy (FSBPT) and/or the American Physical Therapy Association; the Board will assign contact hour credit to each appropriate tool on a case by case basis;

(g) achievement or renewal of any Clinical Specialist Certification through the American Physical Therapy Association will be considered as meeting the education requirement for the entire licensure biennium in which the certification or renewal is received; and

(h) such other providers as approved by the Board.

(5) Unacceptable activities for continuing education include, but are not limited to:

(a) presenting at professional meetings, conferences, or conventions; and

(b) teaching or supervision; and

(c) participation in or attending case conferences, grand rounds, informal presentations, etc.; and

(d) non-educational, entertainment, or recreational meetings or activities; and

(e) committee meetings, holding of office, serving as an organizational delegate, or fulfilling editorial responsibilities (publications); and

(f) meetings for purposes of policy-making; and

(g) visiting exhibits or poster presentations; and

(h) informal self study, e.g. self selected reading, participation in a journal club, listening to audio tapes; and

(i) published research.

(6) Report Requirements:

(a) reports shall be submitted on forms available from the Board. The Board shall routinely distribute its continuing education report forms with the biennial renewal notice. By signing the biennial report of continuing education, the licensee signifies that the report is true and accurate; and

(b) licensees shall retain original corroborating documentation of their continuing education courses and official transcripts of college course work with passing grade of C or better for no less than three (3) years from the beginning date of the licensure period.

(7) Audit of continuing competency:

(a) each licensee shall be responsible for maintaining sufficient records in a format determined by the Board; and

(b) these records shall be subject to a random audit by the Board to assure compliance with this section; and

(c) the Board may audit a percentage of the continuing education reports.

(8) In the event of denial, in whole or part, of credit for continuing education activity, the licensee shall have the right to request a hearing in accordance with the Administrative Procedures Act.

HISTORY: Added by State Register Volume 24, Issue No. 5, eff May 26, 2000. Amended by State Register Volume 33, Issue No. 2, eff February 27, 2009; State Register Volume 36, Issue No. 6, eff June 22, 2012.

ARTICLE 4 CONTINUING EDUCATION

101-08. Fees.

(A) The Board may charge fees as shown in South Carolina Code of Regulations Chapter 10-30 and on the South Carolina Board of Physical Therapy Examiners website at <http://lir.sc.gov/POL/PhysicalTherapy/>.

(B) A check which is presented to the Board as payment for a fee which the Board is permitted to charge under this chapter and which is returned unpaid may be cause for denial of a license or for imposing a sanction authorized under this chapter or Section 40-1-50(G).

(C) The Board may direct applicants to pay an examination fee directly to a third party who has contracted to administer the examination.

(D) Fees are nonrefundable and may be prorated in order to comply with a biennial schedule.

HISTORY: Added by State Register Volume 24, Issue No. 5, eff May 26, 2000. Amended by State Register Volume 33, Issue No. 2, eff February 27, 2009; State Register Volume 36, Issue No. 6, eff June 22, 2012; State Register Volume 39, Issue No. 6, Doc. No. 4512, eff June 26, 2015.

ARTICLE 5 FEES

101-09. Supervision Guidelines.

It is recommended that a physical therapist should not concurrently supervise more than three (3) full-time equivalent physical therapist assistant positions. The Board, in its discretion, may permit supervision of more than three (3) full-time equivalent physical therapist assistant positions, for a short, defined period of time, if a situation arises in a physical therapy treatment setting that makes compliance impossible. Relief from this supervision ratio is allowable if there is no immediate risk to public health or safety as determined by the Board.

HISTORY: Added by State Register Volume 24, Issue No. 5, eff May 26, 2000. Amended by State Register Volume 33, Issue No. 2, eff February 27, 2009; State Register Volume 36, Issue No. 6, eff June 22, 2012.

ARTICLE 6
STANDARDS OF PRACTICE

101–10. Use of Aides in the Practice of Physical Therapy.

Aides are non-licensed personnel who assist the physical therapist or physical therapist assistant but whose duties do not require an understanding of physical therapy or formal training in anatomical, biological, or physical sciences. Education or training of the physical therapy aide shall not exceed the scope of activities described in Section 40–45–290. Aides are not to be assigned duties that may be performed only by a licensed physical therapist or licensed physical therapist assistant. When aides are utilized in the treatment of patients, the following guidelines shall apply:

(1) when applying hydrotherapy, heat or cold treatments, a physical therapist or physical therapist assistant may allow an aide to assist patients in dressing and undressing, drape and position the patient in preparation for treatment, clean and fill the whirlpool, attend the patient during treatment, wrap the patient's extremities after a paraffin bath, and place the hot packs on the patient; and

(2) when applying electrotherapy, a physical therapist or physical therapist assistant may allow an aide to prepare the area to be treated and to prepare equipment and apply electrodes as specified by the physical therapist and physical therapist assistant; and

(3) when applying traction, a physical therapist or physical therapist assistant may allow an aide to prepare the patient for treatment, position the patient, and apply the cervical or pelvic harness; and

(4) when applying therapeutic exercise, a physical therapist or physical therapist assistant may allow an aide to set up the patient's exercise equipment, prepare the equipment, and give the patient established amount of weights for resistive exercise; and

(5) when applying gait training, a physical therapist or physical therapist assistant may allow an aide to prepare equipment such as crutches, walkers, parallel bars, and braces and to assist the physical therapist or physical therapist assistant in gait training of the patient.

HISTORY: Added by State Register Volume 24, Issue No. 5, eff May 26, 2000. Amended by State Register Volume 33, Issue No. 2, eff February 27, 2009; State Register Volume 36, Issue No. 6, eff June 22, 2012.

101–11. Referral.

A physical therapist may not continue treatment after the initial thirty (30) days has expired unless the physical therapist receives a referral orally or in writing by a licensed medical doctor or dentist.

HISTORY: Added by State Register Volume 24, Issue No. 5, eff May 26, 2000. Amended by State Register Volume 33, Issue No. 2, eff February 27, 2009.

101–12. Practice of Physical Therapy.

The practice of physical therapy will be considered to occur in the licensing jurisdiction where the patient is physically located at the time that the services are rendered.

HISTORY: Added by State Register Volume 33, Issue No. 2, eff February 27, 2009.

ARTICLE 7
CODE OF ETHICS

101–13. Code of Ethics for Physical Therapists.

Principle 1: Physical Therapists respect the rights and dignity of all individuals.

Principle 2: Physical Therapists comply with the laws and regulations governing the practice of physical therapy.

Principle 3: Physical Therapists accept responsibility for the exercise of sound judgment.

Principle 4: Physical Therapists maintain and promote high standards for physical therapy practice, education, and research.

Principle 5: Physical Therapists seek remuneration for their services that is deserved and responsible.

Principle 6: Physical Therapists provide accurate information to the consumer about the profession and about those services they provide.

Principle 7: Physical Therapists accept the responsibility to protect the public and the profession from unethical, incompetent, or illegal acts.

Principle 8: Physical Therapists participate in efforts to address the health needs of the public.

HISTORY: Added by State Register Volume 24, Issue No. 5, eff May 26, 2000. Amended by State Register Volume 33, Issue No. 2, eff February 27, 2009.

101–14. Code of Ethics for Physical Therapist Assistants.

Standard 1: Physical Therapist Assistants provide services under the supervision of a physical therapist.

Standard 2: Physical Therapist Assistants respect the rights and dignity of all individuals.

Standard 3: Physical Therapist Assistants maintain and promote high standards in the provision of services, giving the welfare of patients their highest regard.

Standard 4: Physical Therapist Assistants provide services within the limits of the law.

Standard 5: Physical Therapist Assistants make those judgments that are commensurate with their qualifications as physical therapist assistants.

Standard 6: Physical Therapist Assistants accept the responsibility to protect the public and the profession from unethical, incompetent, or illegal acts.

HISTORY: Added by State Register Volume 24, Issue No. 5, eff May 26, 2000. Amended by State Register Volume 33, Issue No. 2, eff February 27, 2009.

101–15. Sexual Misconduct.

Engaging in sexual misconduct constitutes grounds for disciplinary action. Sexual misconduct for the purposes of this section includes the following:

(1) Engaging in or soliciting sexual relationships, whether consensual or non-consensual, while a physical therapist or physical therapist assistant/patient relationship exists.

(2) Making sexual advances, requesting sexual favors, or engaging in other verbal conduct or physical contact of a sexual nature with patients or clients.

(3) Intentionally viewing a completely or partially disrobed patient in the course of treatment if the viewing is not related to patient evaluation or treatment under current practice standards.

HISTORY: Added by State Register Volume 24, Issue No. 5, eff May 26, 2000. Amended by State Register Volume 33, Issue No. 2, eff February 27, 2009.