



APTA Guide to Physical Therapist Practice

Educator Module

2023

Educator Module

The goal of these slides is to assist and enhance student learning using the Guide to Physical Therapy Practice. It touches on the main points within the Guide and includes activities for students to work on to increase their understanding of physical therapy.

Chapter 1: Introduction to the APTA Guide to Physical Therapist Practice



Who Are Physical Therapists?

Physical therapists are health professionals who diagnose and manage movement dysfunction as it relates to the restoration, maintenance, and promotion of optimal physical function and the health and well-being of individuals, families, and communities.

Physical therapists possess a distinct body of knowledge that provides a unique perspective on purposeful, precise, and efficient movement across the life span.



What Do Physical Therapists Do?

Based on the person's diagnosis, prognosis, and goals, physical therapists design and implement a customized and integrated plan of care in collaboration with the individual to achieve the individual's goal-directed outcomes.

Physical therapists work towards maximizing an individual's ability to engage with and respond to their environment, emphasizing movement-related interventions to optimize functional capabilities and performance.

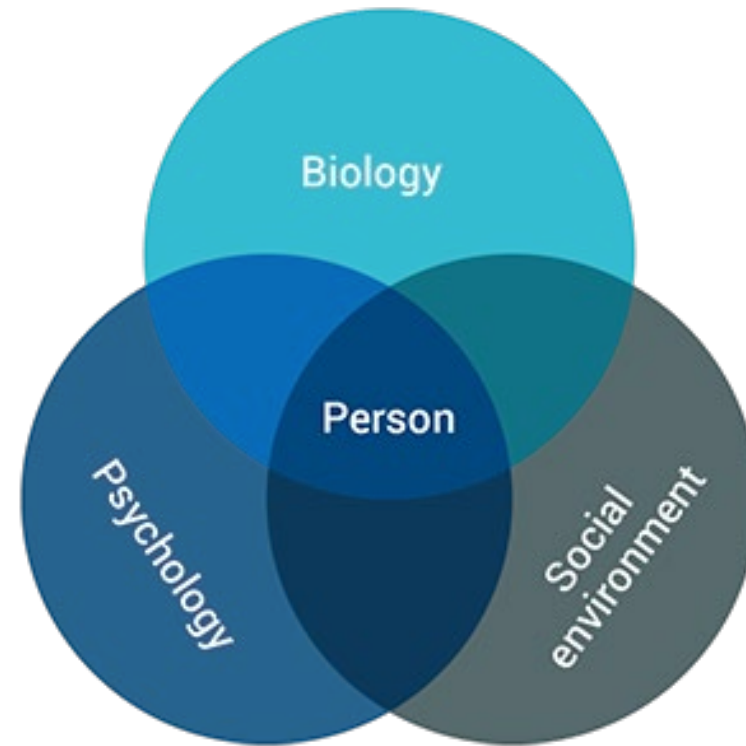


Activity

- In your own terms, describe physical therapist practice.

Biopsychosocial Model

- In this model, a person's health status is determined by the interplay of the biological, psychological, and social domains.



Social Determinants of Health

SDOH are the measure of all the exposures of an individual in a lifetime and how those exposures relate to health.

SDOH influence the environmental context of movement and health.

Social risk factors are the adverse social conditions that may lead to poor health.

Social Determinants of Health

Social determinants of health include items such as economic stability, age, gender, social status, access to health services, quality education, healthy environments, social and community context and support, and healthy environments.

Social Determinants of Health



Social Determinants of Health
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 Healthy People 2030

Activity

- Find a photo that demonstrates a social determinant of health. Write a caption that describes a current goal to address this.

Physical Therapist Practice Core Concepts

Evidence-based practice includes:



Commitment to professional practice includes:

Evidence-based practice

Quality assessment and outcomes

Professional values

Quality Measurement and Outcomes

It is important that physical therapists measure the quality and impact of their services. Physical therapists use quality measures to help record or quantify health service delivery processes, outcomes, and perceptions, and to assess the effectiveness and efficiency of organizational structures and/or health systems.

Core Values

APTA Core Values

- Accountability
- Altruism
- Collaboration
- Compassion and Caring
- Duty
- Excellence
- Inclusion
- Integrity
- Social Responsibility

Core Values: Accountability

Active acceptance of the responsibility for the diverse roles, obligations, and actions of the physical therapist and physical therapist assistant including self-regulation and other behaviors that positively influence patient and client outcomes, the profession, and the health needs of society.



Core Values: Altruism

The primary regard for or devotion to the interest of patients and clients, thus assuming the responsibility of placing the needs of patients and clients ahead of the physical therapist's or physical therapist assistant's self-interest.



Core Values: Collaboration

Working together with patients and clients, families, communities, and professionals in health and other fields to achieve shared goals. Collaboration within the physical therapist-physical therapist assistant team is working together, within each partner's respective role, to achieve optimal physical therapist services and outcomes for patients and clients.



Core Values: Compassion and Caring

Compassion is the desire to identify with or sense something of another's experience, a precursor of caring. Caring is the concern, empathy, and consideration for the needs and values of others.



Core Values: Duty

- The commitment to meeting one's obligations to provide effective physical therapist services to patients and clients, to serve the profession, and to positively influence the health of society.



Core Values: Excellence

The provision of physical therapist services occurs when the physical therapist and physical therapist assistant consistently use current knowledge and skills while understanding personal limits, integrate the patient or client perspective, embrace advancement, and challenge mediocrity.



Core Values: Inclusion

Occurs when the physical therapist and physical therapist assistant create a welcoming and equitable environment for all. Physical therapists and physical therapist assistants are inclusive when they commit to providing a safe space, elevating diverse and minority voices, acknowledging personal biases that may impact patient care, and taking a position of anti-discrimination.



Core Values: Integrity

Steadfast adherence to high ethical principles or standards, being truthful, ensuring fairness, following through on commitments, and verbalizing to others the rationale for actions.



Core Values: Social Responsibility

The promotion of a mutual trust between the profession and the larger public that necessitates responding to societal needs for health and wellness.



Activity

- What is an example of a physical therapist core value you have seen thus far in your education or career?

Code of Ethics for the Physical Therapist

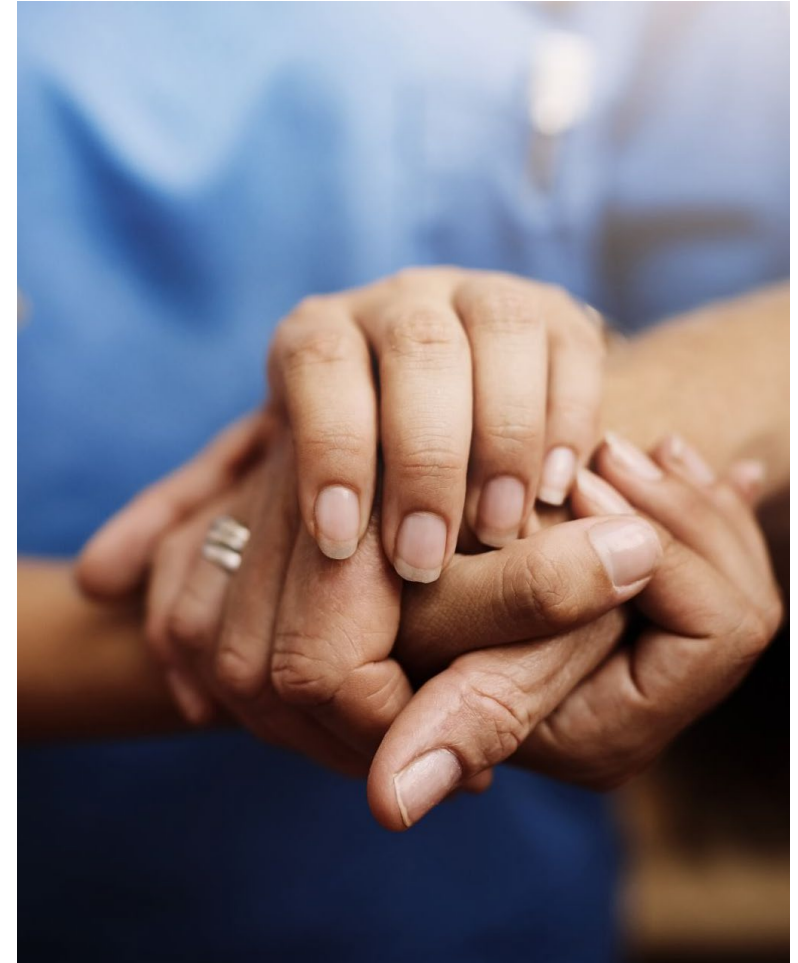
- Delineates the ethical obligations of all physical therapists and defines the ethical principles that form the foundation of practice, consultation, education, research, and administration.

Code of Ethics Purposes

1. Define the ethical principles that form the foundation of physical therapist practice in patient and client management, consultation, education, research, and administration.
2. Provide standards of behavior and performance that form the basis of professional accountability to the public.
3. Provide guidance for physical therapists facing ethical challenges, regardless of their professional roles and responsibilities.
4. Educate physical therapists, students, other health care professionals, regulators, and the public regarding the core values, ethical principles, and standards that guide the professional conduct of the physical therapist.
5. Establish the standards by which APTA can determine if a physical therapist has engaged in unethical conduct.

Code of Ethics for the Physical Therapist

- Physical therapists shall provide:
 - safe,
 - accessible,
 - cost-effective, and
 - evidence-based services.



Standards of Practice for Physical Therapy

The Standards of Practice for Physical Therapy is the profession's statement of conditions and performances that are essential for provision of high-quality professional service to society, and it provides a foundation for assessment of physical therapist practice expected across all settings.

Educational Opportunities for PTs and PTAs

Physical Therapists

- Fellowship
- Residency
- Board Certification

Physical Therapist Assistants

- Advanced Proficiency Pathways

For expanded information regarding PT and PTA professional development opportunities, see Chapter 5.



Physical Therapist Roles Across the Continuum and Through the Life Span

- Access to services for health conditions.
- Direct access and primary care.
- Administration of tests.
- Habilitation and rehabilitation.
- Performance enhancement.
- Prevention and risk-reduction services.
- Direct-to-employer physical therapist services.



Activity

Choose a diagnosis and describe the related roles and activities of the physical therapist.

Example: A patient comes in with an ACL rupture. Identify the roles a physical therapist could play and describe the activities in each role.

- Direct access
- Primary care
- Administration of tests
- Habilitation and rehabilitation
- Performance enhancement
- Prevention and risk-reduction
- Direct-to-employer services

Professional Functions

- Consultant
- Educator
- Researcher
- Administrator/business owner and entrepreneur



Activity

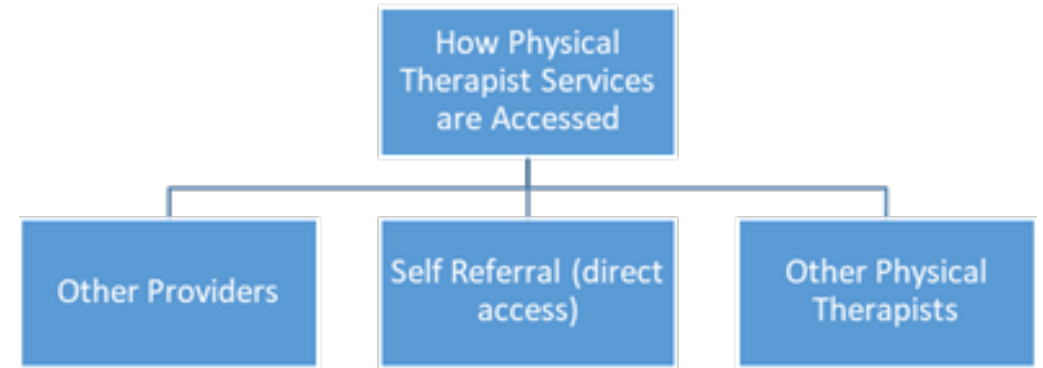
- Divide into small groups. For each professional role, identify job titles and settings that a PT and PTA might hold. Share in the larger group for a comprehensive review:
 - Educator
 - Researcher
 - Consultant
 - Administrator/business owner
 - Entrepreneur

Chapter 2: Accessing Physical Therapist Services and the Elements of Patient and Client Management



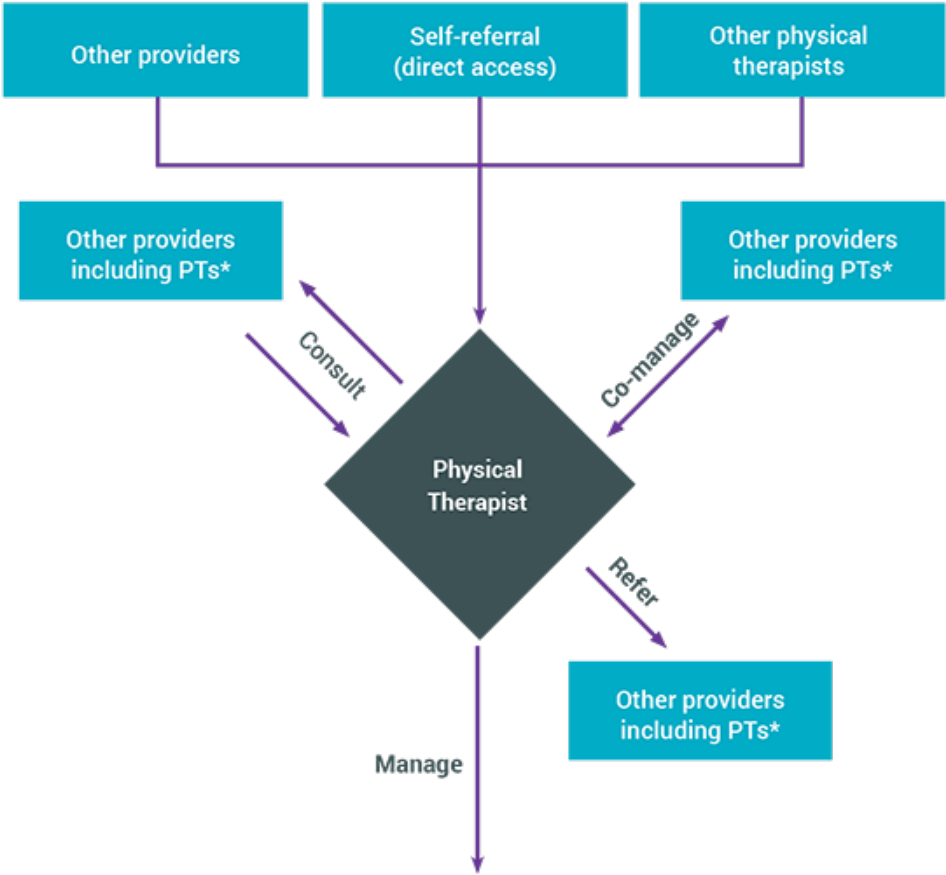
How Do Individuals Access Physical Therapist Services?

- Self-referral (sometimes termed “direct access”)
 - State practice acts vary on allowances for self-referral/direct access
- Provider
 - Other provider type
 - Another physical therapist
 - Intervention for a particular condition



Decision Making

- The physical therapist decides whether to provide interventions for the individual or refer them to another provider or multiple providers for management, co-management, or consultation.



The physical therapist:

- Develops the plan of care/management plan.
- Retains accountability for the plan of care.
- Defines boundaries within which others assisting with service delivery operate.
- Always has the option to perform all elements or to direct and supervise physical therapist assistants, physical therapy aides or technicians, and others.
- Shares information about the management plan with the individual's providers as indicated.

The Physical Therapist May:

Co-manage: Collaborate with other professionals to direct or coordinate an individual's management.

Consult: Render or receive professional expert opinion or advice concerning specialized knowledge and skills to identify problems, recommend solutions, or produce a specified outcome or product on behalf of an individual.

Manage: Manage and remain accountable for the services provided when the physical therapist's management plan involves the use of other recognized assistive personnel.

Refer: Refer an individual to another provider when the individual requires services that are outside of the PT's personal, jurisdictional, or professional scope of practice. Similarly, the PT may choose to refer an individual for specific testing that the therapist deems necessary for the development of a working diagnosis or management plan.

Activity

Review each definition:

- Co-manage
- Consult
- Manage
- Refer
- Describe patient conditions or presentations that would necessitate a PT perform each of the actions.

Episode of Care/Services

- An **episode of care/service** consists of all physical therapist services that are:
 - provided by a physical therapist,
 - provided in an unbroken sequence, and
 - related to management for a given condition or problem.
- A **visit** consists of a physical therapist encounter or session.



Consumers of Physical Therapist Services

- **Patients** are individuals who receive physical therapist services for a disease, disorder, condition, impairment, activity limitation, or participation restriction.
- **Clients** engage the services of a physical therapist and who can benefit from the physical therapist's consultation, interventions, professional advice, or health promotion, fitness, wellness, or prevention services. Clients may include businesses, school systems, and others to whom physical therapists provide services.

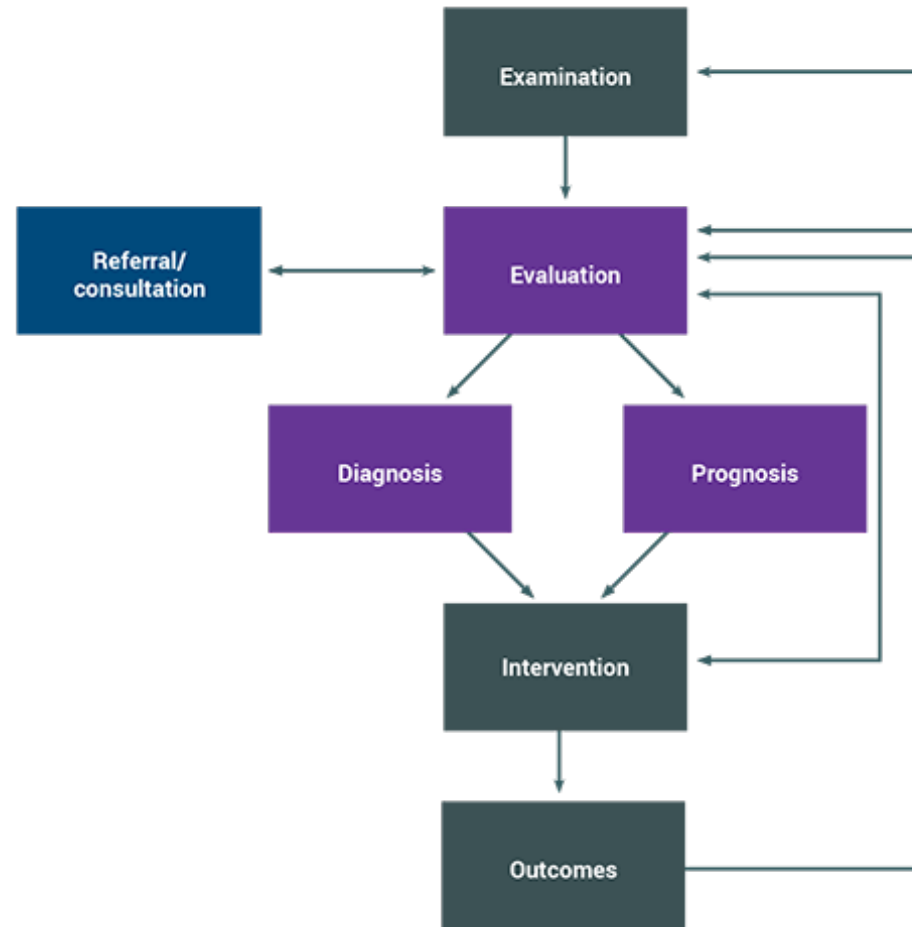
Consumers of Physical Therapist Services

- **Communities** are groups of people that may or may not be spatially connected but who share common interests, concerns, or identities.
- **Populations** are groups of people connected by their demographics and other factors; examples are ethnicity, socioeconomic status, and population density.

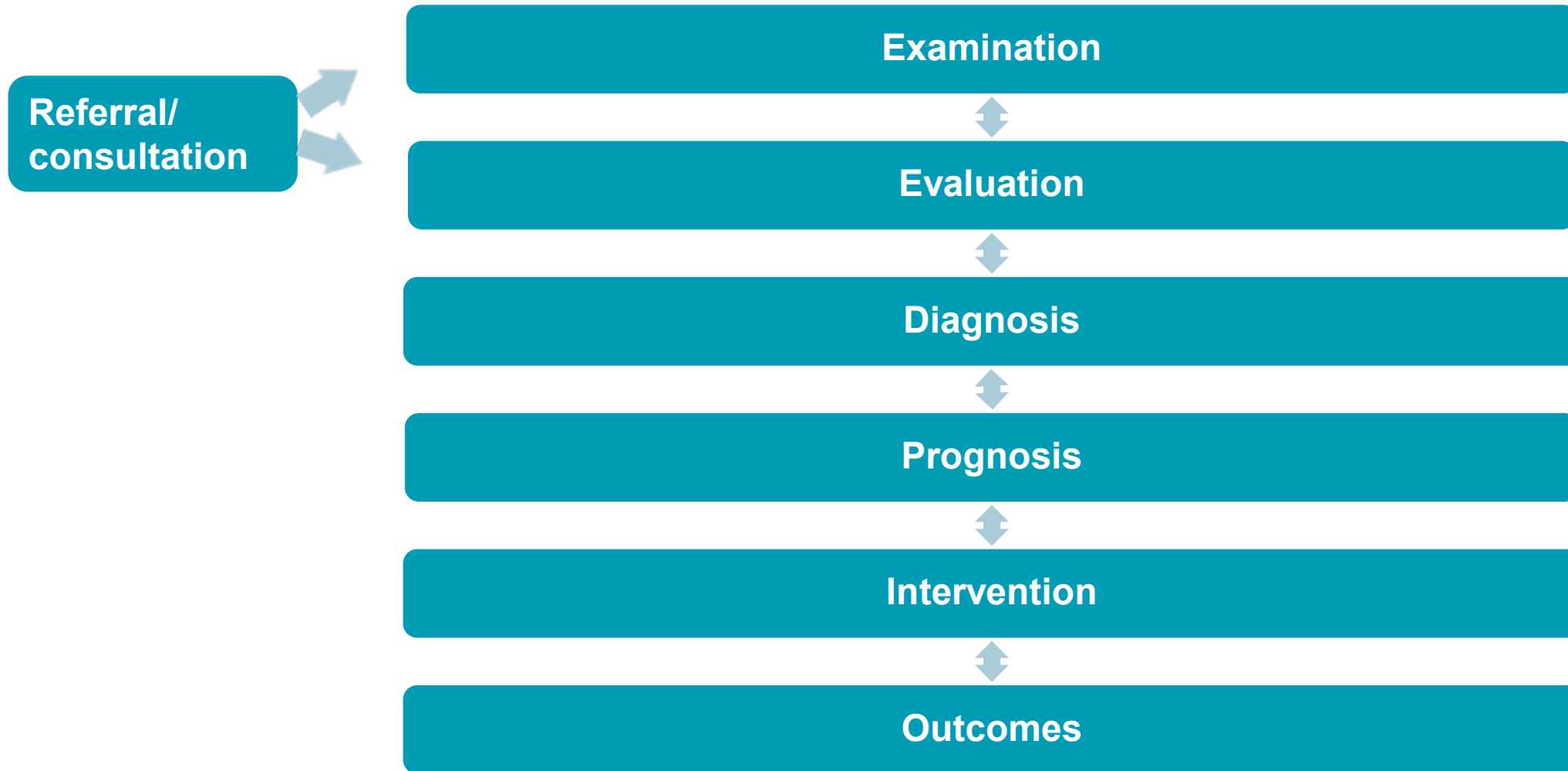
Activity: Group Discussion

- How would your management plan/approach for a population differ from that of a patient?
- How would it differ between a patient and a client?
- How would your preparation and documentation for a patient differ from that of a client?
- Which services would you envision to be beneficial for communities?

Patient and Client Management Model



Elements of Patient and Client Management



Activity

- During the initial evaluation, the physical therapist has determined that the score collected on the Generalized Anxiety Disorder-7 screen (GAD-7) for the patient was 10/21, exceeding the screening threshold for risk of an anxiety disorder. Further evaluation and testing is recommended. What should the PT do?

Activity Continued

- During the history, the PT finds that the individual lives alone and has difficulty in buying food. This finding could impact the person's well-being and the prognosis. What should the PT do?

Chapter 3: Physical Therapist Examination and Evaluation



Examination

- The physical therapist conducts an examination that includes:
 - History.
 - Physical examination.
 - Tests and measures.



Reexamination

- Reexamination includes the application of selected items from the history and physical examination and comparing them with the initial examination findings.
- Reexamination may be indicated more than once during a single episode of care/services and often is performed over the course of a disease, disorder, or condition.

Activity

- Compare the concepts of examination and reexamination.
- Give an example of when a formal reexamination may be indicated.

Subjective History

- Systematic gathering of subjective data obtained (through a comprehensive questioning process or completion of a patient self-administered questionnaire) from the individual and/or caregiver and other members of the health care team, and through a review of available health records.



Red Flags

- Signs and symptoms found in the patient history and physical examination that suggest the presence of a serious pathology.
- Example: Red Flags for Stroke (“Act F.A.S.T.”)
 - **F**ace: Smile and see if one side of the face droops.
 - **A**rms: Raise both arms. Does one arm drop down?
 - **S**peech: Say a short phrase and check for slurred or strange speech.
 - **T**ime: If the answer to any of these is yes, call 911 right away and write down the time when symptoms started.

[Source: Centers for Disease Control and Prevention.](#)

Activity

- Provide a primary hypothesis that would require further, in-depth examination during a more detailed portion of the physical examination.
- A 78-year-old woman has a diagnosis of Parkinson disease and lives alone. Upon further questioning, you discover that she has challenges with communication (due to decreased respiratory function), cognitive decline (based on her son sitting with her during the appointment), limited physical activity, history of falls, and complaints of stiffness. A home health aide helps her with IADL, but she still has to cook and clean her home, which she says is difficult for her. She also notes several falls when attempting to cook in the kitchen for a long period of time, noting she has started bringing a chair to sit on for rest breaks.

Review of Systems

Physical therapists seek information relevant to major body systems through observation and questioning to help determine whether there are symptoms that suggest the need for referral for additional medical evaluation.

- Cardiovascular system.
- Pulmonary system.
- Endocrine system.
- Eyes, ears, nose, and throat.
- Gastrointestinal system.
- Genitourinary/reproductive systems.
- Hematologic/lymphatic systems.
- Immune system.
- Integumentary system.
- Nervous system.
- Musculoskeletal system.
- Overall physical and psychological condition, such as unexplained weight change, fatigue, lethargy, and malaise; cognitive well-being; and emotional well-being, such as anxiety and feelings of hopelessness.

Physical Examination

- Begins with the systems review:
 - Cardiovascular and pulmonary systems.
 - Integumentary system.
 - Musculoskeletal system.
 - Neuromuscular system.
 - Neurologic system.
 - Communication ability, affect, cognition, language, ability to read, and learning style.
 - Movement.

Activity

- Explain the difference between the review of systems and the physical examination/systems review.
- The PT sees in the history that the patient has smoked two packs per day for 10 years, so the PT auscultates the lungs and finds crackles in the right and left lower lobes. (Review of systems or physical exam/systems review?)
- The patient self-referred to physical therapy for generalized joint pain and fear of falling. The PT scans the patient for joint deformities and asks questions about recent falls or loss of balance. (Review of systems or physical exam/systems review?)

Tests and Measures

Physical therapists use measurements (including outcome measures):

- To identify impairments and potential causes of impairments in body structures and functions, activity limitations, and participation restrictions.

The results of tests and measures:

- Inform risk identification and prevention and health promotion activities.
- Contribute to outcome assessment.
- Help the PT determine change in the individual's status.

Tests and Measures

Tests and measures are a component of the physical examination used to:

- Confirm or reject a clinical hypothesis regarding the factors that contribute to making the individual's current level of function less than optimal.
- Support the physical therapist's clinical judgments about the diagnosis, prognosis, and development of an effective management plan.

26 Categories of Tests and Measures

- Aerobic capacity/endurance.
- Anthropometric characteristics.
- Adaptive and assistive technology.
- Balance.
- Circulation (arterial, venous, lymphatic).
- Cognitive and mental function.
- Community, social, and civic life.
- Cranial and peripheral nerve integrity.
- Education life.
- Environmental factors.
- Gait.
- Integumentary integrity.
- Joint integrity and mobility.
- Mobility (e.g., Locomotion).
- Motor function.
- Muscle performance (strength, power, endurance, and length).
- Neuromotor development and sensory processing.
- Pain.
- Posture.
- Range of motion.
- Reflex integrity.
- Self-care and domestic life.
- Sensory integrity.
- Skeletal integrity.
- Ventilation and respiration.
- Work/community integration.

Types of Measures

Performance-based measures involve observing the individual performing an activity.

Self-report measures provide information about the individual's perception of how their impaired body function or structure is limiting activities and participation.

Properties of Tests and Measures

Reliability: Consistent time after time, with as little variation as possible.

Validity: The degree to which a useful (meaningful) interpretation can be inferred from a measurement.

Measuring Outcomes

When standardized tests and measures are used to determine change in outcome status during and at the end of an episode of care, they may be referred to as outcome measures.

These tests may measure:

- Functional status (activity limitations and participation restrictions), including changes in health, wellness, and fitness.
- Impairments of body functions and structures.
- Adverse outcomes and complications.
- Morbidity and mortality.
- The individual's self-reported outcomes.
- The individual's satisfaction with the care/services received.

Activity

- Review five tests and measures from [APTA's list of test and measure summaries](#) and answer these questions for each:
 - Where would the test be categorized (using the 26 categories of tests and measures)? Why?
 - Is the test a performance-based measure or a self-reported measure? Why?

Evaluation

- Evaluation is the interpretation and synthesis of the examination findings that lead to a diagnosis, prognosis, and management plan specific to the individual or community.
- Physical therapists interpret and synthesize the history and the physical examination findings to:
 - Establish a diagnosis from which to develop a management plan.
 - Determine a prognosis, including goals for physical therapist management.
 - Develop a management plan or plan of care if indicated.
 - Develop a working diagnosis list as part of the process used to determine whether a referral to or consultation with another health care provider is indicated.

Activity

- Give an example of a physical therapist examination and evaluation. What are the differences?
- Describe a situation in which a red flag might come up and how you as the clinician will respond.

Chapter 4: Physical Therapist Practice: Diagnosis, Prognosis, Intervention, and Outcomes



Diagnosis

- A label encompassing a cluster of signs and symptoms commonly associated with a disorder or syndrome or category of impairments in body structures and function, activity limitations, or participation restrictions.
- Physical therapists establish a diagnosis in order to make appropriate management decisions for an individual and determine the most appropriate intervention strategy.

Diagnosis

Diagnosis Classifications:

- ICD-10
- ICF
- Movement systems

Prognosis

The physical therapist's determination of the predicted optimal level of improvement in function over a designated time frame.

Prognosis typically includes a prediction of levels of improvement during the episode of physical therapy in determining goals and outcomes.

Can be influenced by contextual factors.



Activity

- Read the Chapter 4 compendium and define a contextual factor. How can this influence a patient's outcome or recovery?
- What are some other resources a clinician might use to guide their prognosis?

Management Plan

- A framework of physical therapist services provided to individuals, groups or populations, based on best available evidence, clinical expertise and the individual's wants and needs.
- May include a plan of care which consists of:
 - Individual's goals.
 - Prognosis.
 - Interventions to be used including duration and frequency.
 - Summary of plans for referral or consultation to other providers.

Goals

The intended impact on functioning as a result of implementing the physical therapist management plan.

Measurable, functionally driven, time-limited, and, when applicable, classified as short term and long term.

Primary criterion for conclusion of physical therapist services is achievement of individual's goals.

Goals

- Example: Patient will ambulate for 100 feet with no assistive device using step-through gait pattern in three weeks in order to walk to mailbox each day.

Activity

- Create a goal for a patient to be achieved in two weeks and a goal for a patient to achieve by the conclusion of physical therapist services.

Interventions

- Physical therapists use interventions to remediate impairments in all major body systems, improve functional performance, and promote improved health and wellness that lead to optimized activity, participation, and quality of life.
- Interventions are based on the PT's examination findings, diagnosis, and the accompanying goals established as part of the management plan and plan of care.
- Factors that influence complexity, frequency, and duration of the intervention and the decision-making process may include:
 - Psychosocial and economic factors.
 - Patient's overall health status.
 - Adherence to the intervention program.

Procedural Interventions

Adaptive and
assistive
technology

Biophysical agents

Functional training

Integumentary
repair and
protection
techniques

Manual therapy

Motor
function/movement
training

Respiratory and
ventilatory
techniques

Therapeutic
exercise

Physical Therapist Prevention Services

- Primary prevention services by physical therapists is centered around a health and wellness program to reduce future injury or disease in an otherwise healthy population.



Activity

- Think of an example of primary prevention services in physical therapist practice.

Outcomes

- Outcomes are the actual results of implementing the management plan that indicate the impact on functioning.
- Physical therapists report outcomes to demonstrate progress, for payment purposes, and to know whether goals have been met.

Activity

- Identify the use of clinical outcomes that are measured and reported by physical therapists to describe the patient's condition and progress.

Using the Compendium

- Enhance learning.
- Dive deeper into a topic.
- Access references.

To open or close the Compendium, click on the + or – sign.

[More Information on Contextual Factors](#)



[More Information on Contextual Factors](#)



The prognosis is the physical therapist's determination of the predicted optimal level of improvement in function over a designated time frame.

Impact of **contextual factors** example: For example, factors collected during the history, such as the duration of the condition (a longer duration often impacts the pace of recovery) or the extent of trauma (a localized area versus multiple areas of involvement may lead to a less-complicated recovery), will influence the physical therapist's judgment on potential recovery. An individual's age, the presence of comorbidities,

