



North Carolina Board of Physical Therapy Examiners NEWSLETTER

ISSUE 27

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What's in a Name?

by JUDY A. WHITE, PT, Chair



A rose is a physical therapist is a physical therapist. Are you a "RPT, LPTA, MSPT, MPT, DPT, PhD, BSPT, SPT?"

Do your patients address you as "Mister," "Ms.," "Doctor"? Look at your nametag. What name and designation(s) do you have printed? The public deserves our assistance getting through this quagmire of professional alphabet soup. Imagine being a hospital patient (not in the United States) where you are unfamiliar with the language and titles used for the health care professionals. You are clueless as to what the suffix professional letters mean and you noticed that the male medical doctors are called "mister," not "doctor." Is there any reason to believe that patients are not equally confused? If we were to explain the plethora of mix n' match letters, as well as the multiple entry-level and post-graduate degrees available for a physical therapist, we would waste an entire intervention session with the patient.

There are three areas of concern that I would like to address about our professional

identifier... the "name," the "degree," and the "license."

Should my nametag indicate "Judy" or "Judith"? In my case, "Judy" would be correct as that is my legal name. How about "Buddy" Smith instead of "Norman" Smith? It doesn't matter that everyone, including his mother and friends, refer to Mr. Smith as "Buddy" and no one has ever called him otherwise. The fact is that he is licensed as "Norman" and by law, he is required to present himself to the public with his official and licensed name. GS 90-640.

Ah, the academic degree dilemma has become more complex ever since physical therapy expanded beyond the bachelor's degree. Entry-level physical therapy degrees now have a variety of designations, from BSPT to MPT to DPT. However, no matter what the degree, these "letters" are specifically and only academic degrees. In fact, an academic degree is not a license to practice physical therapy and, therefore, should NOT be used as the professional designation in a practice setting in which the public perceives that they are interacting with a licensed physical therapy professional. Given a choice of using "Judy White, PT" or "Judy White, MPT", the former would be appropriate as the "PT" is the clinical designation associated with licensure, not the academic degree. In addition, the designation "SPT/STPA" is not accepted as an official professional designation for students in

physical therapy. Students are also not licensed as a "student physical therapist" I would advise that a student's name tag should read as, for example, "Judy White, UNC-CH physical therapy student".

Now back to the "PT/PTA" designation as the license. Although "RPT" (registered PT) and "LPT/LPTA" (licensed PT/PTA) were once the norm for licensure, they are NOT the current appropriate designation. For once, we have evolved to simplicity. "PT/PTA" is really all that is needed to indicate that we are licensed physical therapy professionals.

So, you have a "Ph.D" and are accustomed to being called "Doctor". Save it for the hallowed halls of academia. And there are those of you who have a "DPT" degree. Once again, this is an academic degree, not licensure. I would recommend that the essential emphasis to the public should be that you are a "physical therapist", so introduce yourself as such. If you choose to identify yourself as "Doctor", you would be doing not only a disservice to the patient, but also to the profession, if you also failed to clarify in the same breath that you are the physical therapist. It is simply neither fair nor professional to confuse the public with letters and jargon that could be only a smoke screen for professional status.

What's in a name? Simply put, a licensed physical therapist is a "PT"... nothing more, and nothing less.

Disciplinary Actions

by BEN F. MASSEY, Jr., PT, Executive Director

In meeting its responsibility of public protection, one of the primary responsibilities of the Licensure Board is to discipline individuals who have violated the Practice Act. This is also the toughest job for Board members. It is such an agonizing job to decide the fate of a colleague and determine what is an appropriate disciplinary action for the violation that has been committed. To meet that fine line between punishment and a willingness to show compassion for genuine remorse is at

times heart wrenching. Most of the licensees who appear before the Board are basically "good people" who made very poor choices, some under extenuating circumstances and although somewhat understandable, still not acceptable.

I have had the pleasure of serving the Board as Executive Director (ED) for almost six years. In my role as ED, I serve as a member of and coordinator for the Investigative Committee (IC). In addition, as a physical therapist, I assist the Board's Investigator (Doug Kearns) in conducting investigations and interviews. In NC, the

Investigative Committee serves as a Probable Cause Committee to determine if there is probable cause for the Board to discipline a licensee. The Investigative Committee was established by a change in the Board's rules in 1995 and it consists of the ED and one member of the Board appointed by the Chair. Over the past six years, NC has been fortunate to have had three extremely dedicated individuals (J. Herman Bunch, Geraldine K. Highsmith, and Patricia Stavrakas Hodson) who were

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More Initials

JOHN M. SILVERSTEIN, Attorney



Board Chair Judy White has written an interesting and informative article regarding the suffix professional letters physical therapy professionals should use in various professional settings. This article addresses the types of business entities physical therapists can utilize in providing physical therapy services, and the initials that can be used to describe these entities.

The Board office frequently is asked whether a physical therapist or a group of physical therapists can form a professional corporation or a professional association. In North Carolina, these entities are designated by the initials "P.C." or "P.A." The use of these business forms is not available to physical therapists in North Carolina. Chapter 55B of the North Carolina General Statutes is the Professional Corporation Act. Pursuant to G.S. §55B-5, professional corporations may use the words "professional association," "P.A.," "professional corporation," or "P.C." However, the use of those names is limited to those professional services listed in G.S. §55B-2(6) which include architects, attorneys, accountants, physicians, dentistry, optometry, osteopathy, chiropractic, nursing, veterinarians, podiatrists, psychologists, occupational therapists, professional counselors, engineers and land surveyors, landscape architects, social workers, geologists and foresters. For those professions, corporate organizational documents must not only be filed with the Office of the North Carolina Secretary of State, but also with the appropriate licensing Board before the designations listed in G.S. §55B-5 can be utilized. However, if a profession is not listed in G.S. §55B-3(6), then the designations specified in G.S. §55B-5 cannot be used,

and the corporation must be formed pursuant to Chapter 55 of the General Statutes, which contains the requirements for forming a general business corporation in North Carolina. For professions that are not listed in G.S. §55B-(6), no filing with or approval by the appropriate licensing board is necessary prior to the formation of a corporation that offers professional services.

Another business entity, the limited liability company ("L.L.C.") can also be used for the delivery of professional services. G.S. §57C-2-01(c) makes the provisions of Chapter 55B controlling for professional limited liability companies. Thus, those professions that would be entitled to utilize the designation "P.C." or "P.A." are the only ones that would be eligible to use the designation "P.L.L.C." As is the case with forming corporations, physical therapists would be able to form general limited liability companies, but not professional limited liability companies, and no filing with the Board is required.

G.S. §59-45(b) deals with professionals who operate as limited liability partnerships ("P.L.L.P."). Although the language is not as extensive as the statutory provisions dealing with professional associations, professional corporations, and professional limited liability companies, the statute seems to imply that only those professions governed by Chapter 55B are eligible to offer their services as professional limited liability partnerships. Once again, physical therapists would be eligible to offer services in the limited liability partnership form, but not in the professional limited liability partnership form.

In conclusion, physical therapists can form an "Inc." or "Co.," but not a "P.A." or "P.C." A "L.L.C." or a "L.L.P." would be permitted, but a "P.L.L.C." or a "P.L.L.P." would not. As is the case for licensees who use professional designations in dealing with the public, the licensee must also know what initials can be used in connection with the business entity.

Disciplinary Actions

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willing to serve in this challenging role. There is nothing tougher or more emotionally draining than deciding how long to suspend a colleague's license, which has a direct impact on their livelihood, and ability to support themselves or their family. However, the IC never wavers from its responsibility to the public.

Initially, the IC met monthly as we cleared a backlog of cases. Currently, the IC meets approximately every six weeks. There are usually between fifty and sixty new complaints each year. Of these, approximately twenty-five are advertising complaints, ten may be licensees who fail to renew their license by the February 1st deadline, and the remaining fifteen to twenty complaints are bona fide complaints against licensees for various reasons, usually phantom visits (documenting

or charging for visits not made), sexual misconduct, supervision issues, and on rare occasions, incompetent care.

After conducting its investigation, if the IC has determined that there is sufficient evidence to believe that a license revocation or suspension is warranted, the IC will invite the licensee to its next meeting to discuss the complaint with the licensee and try to reach a Consent Agreement to be presented to the full Board for their approval. In the majority of cases that come before the IC, the licensee is represented by legal counsel. Approximately 95% of the complaints end in a Consent Agreement.

If a Consent Agreement cannot be reached, then the licensee has the right to a contested case hearing before the full Board for their final decision. At that point, if the licensee still contests the decision of the Board, he/she may appeal it through the NC Court system. In the past six years, the Board has publicly disciplined 41 licensees. To date, only one

licensee has appealed this decision to a higher court and that case is currently active in the NC Court of Appeals.

I would like to close by saying that I believe that your Board, attorney, investigator, and IC, take their roles in addressing complaints and assessing disciplinary actions for physical therapy licensees very seriously. The investigations are conducted thoroughly and professionally. The evidence is carefully weighed as each case is different. Extenuating circumstances, willingness of the licensee to be forthcoming, and remorse are all factored in. How the public will be best served plays a major role. The disciplinary actions have been appropriate and consistent. In the end, over the years, your Board has consistently done an outstanding job maintaining the delicate balance of serving as the protector of the public, and dealing with the misconduct, hoping in most cases, to act in the best interest of both the public and the profession.



North Carolina Board of Physical Therapy Examiners – 2001

Back Row – Left to Right: *Joanna W. Nicholson, PTA*; *J. Herman Bunch, Jr., PT*; *Randall C. Stewart, PT*; *James C. Harvell, Jr., MD*; *John M. Silverstein, Board Attorney*; Front Row – Left to Right: *Patricia S. Hodson, PT*; *Eric J. Smith, PTA, Sec-Treas*; *Judy A. White, PT, Chair*; *Gloria Lewis, Public Member*; *Ben F. Massey, Jr., PT, Executive Director*

North Carolina Board of Physical Therapy Examiners

Board Orders / Consent Orders / Other Board Actions July 2001 – December 2001

Suspension

Angela W. Casper, PTA (Suspension)

Location: Washington, NC, Beaufort County

License #: A-1292

Conduct: Obtaining and using controlled substances prescribed for a patient.

Discipline: 1 year suspension, 3 months active and the remaining period stayed with conditions (executed Oct 1, 2001)

Pradeep D. Pilakel, PT (Suspension)

Location: Albemarle, NC, Stanly County

License #: P-4468

Conduct: Inappropriate conduct during physical therapy treatment.

Discipline: 18 months suspension, 1 month active and the remaining period stayed with conditions (executed Nov. 1, 2001)

Blair A. Frye, PT (Suspension)

Location: Hickory, NC, Catawba County

License #: P-8392

Conduct: Documenting and billing for treatments that were not performed.

Discipline: 36 months suspension, 15 months active and the remaining period stayed with conditions (executed Dec. 13, 2001)



Change of Address/Name Changes/E-mail Address Changes

Don't forget to keep the Board updated of changes in home and work addresses. This can now be done by the licensee on the Licensure Board's web page (www.ncptboard.org) or by letter, fax (919-490-5106), or call the Board's office @ 919-490-6393 or 800-800-8982.

North Carolina Board of Physical Therapy Examiners

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Calendar of Events

Jan 1, 2002Recommended deadline for license renewal
 Jan 10, 2002Investigative Committee Meeting*
 Jan 31, 2002Final deadline for license renewal
 Feb 1, 2002Licenses not renewed, lapse
 Mar 21, 2002 ...Board Meeting*
 June 13, 2002 ...Board Meeting*

*Dates are tentative / please confirm on web page

Summary of Fees

Renewal (PT & PTA)	\$60.00
Revival Fee and Renewal Fee	90.00
Application Fee PT & PTA	120.00
Exam Cost (PT & PTA)**	285.00
Exam Retake Fee	50.00
Verification/Transfer Fee	25.00
Licensee Directory	10.00
License Card	10.00
Labels of Licensees (PT or PTA)	60.00
Certificate Replacement	20.00

**plus PT or PTA Application Fee

Licensure Statistics (As of Dec 12, 2001)

	Licensed in NC	Reside in NC	Work in NC
PTs	4,821	3,648	3,020
PTAs	2,140	1,869	1,518

Forum: Questions and Answers

Q: Does North Carolina allow direct access (practice without the legal requirement of a physician's referral)?

A: North Carolina has had direct access since 1985 when the Practice Act was revised in 1985 by the NC General Assembly.

**G.S. 90-270.24-90-270.39 / PHYSICAL THERAPY PRACTICE ACT: NORTH CAROLINA
 Effective: December 30, 1985 / Article 18B Physical Therapy**

90-270.24. Definitions.—In this Article, unless the context otherwise requires, the following definitions shall apply:

(4) "Physical therapy"..."Physical therapy does not include the application of roentgen rays or radioactive materials, surgery, manipulation of the spine unless prescribed by a physician licensed to practice medicine in North Carolina, or medical diagnosis of disease."

90-270.35. Unlawful practice.—Except as otherwise authorized in this act, if any person, firm, or corporation shall:

(4) Practice physical therapy and fail to refer to a licensed medical doctor or dentist any patient whose medical condition should have, at the time of evaluation or treatment, been determined to be beyond the scope of practice of a physical therapist;

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