

## Position Statement- North Carolina Board of Physical Therapy Examiners

### 13. NCBPTE Position Statement on Pelvic Health in the NC Physical Therapy Scope of Practice (also includes 13. Performance of soft tissue mobilization using biofeedback, electrical stimulation and internal pelvic floor muscle techniques vaginally or rectally by a PTA)

*Adopted - June 8, 2022*

*Reviewed by the Board – June 5, 2024*

The Board reviews and makes determinations scope of practice questions for licensees based on several criteria including what is taught in entry level PT academic education and meets the criteria outlined in Board rule 21 NCAC 48C .0101 Permitted Practice: 21 NCAC 48C .0101 PERMITTED PRACTICE

(a) Physical therapy is presumed to include any acts, tests, procedures, modalities, treatments, or interventions that are routinely taught in educational programs or in continuing education programs for physical therapists and are routinely performed in practice settings. The Board must consider training and practice throughout the state for consistency by allowing the Board to meet its legislative mandate of protecting the safety and welfare of the citizens of North Carolina and establishing minimum standards for the practice of physical therapy.

In the CAPTE Standards, 7C, is a required element that programs must respond to:

*The physical therapist professional curriculum includes content and learning experiences about the cardiovascular, endocrine and metabolic, gastrointestinal, genital and reproductive, hematologic, hepatic and biliary, immune, integumentary, lymphatic, musculoskeletal, nervous, respiratory, and renal and urologic systems; system interactions; differential diagnosis; and the medical and surgical conditions across the lifespan commonly seen in physical therapy practice.*

After careful review of the literature, discussion with subject matter experts, and consulting with educational institutions, the Board has determined that not only is it within the scope of PT practice, PTAs, and PT/PTA students who are trained and competent to do so may perform delegated portions of a PT plan of care related to pelvic health, both external and internal, rectal and vaginal, under the supervision of a qualified pelvic health trained PT. PT licensees supervising PTAs, PT/PTA students who are performing internal pelvic interventions should assure they comply with Board rules regarding student supervision and possess the education, training and competence to perform any aspect of the scope of practice they are performing. The ultimate responsibility for patient care rests with the NC licensed physical therapist.

To further clarify, “APTA Pelvic Health advises that physical therapy examination of and interventions to the internal pelvic muscles be taught to physical therapists, supervised physical therapist students and PTAs. PTAs may be instructed in examination and interventions of the internal pelvic muscles under the provision that this education is intended for foundational knowledge and that examination of the pelvic dysfunction should remain within the scope of the licensed physical therapist.” “Furthermore, interventions for pelvic dysfunction including, but not limited to, therapeutic exercise, neuromuscular re-education, manual therapy and behavioral retraining may require immediate and continuous examination and evaluation throughout the intervention while at other times may be relatively routine. In routine circumstances, those interventions may be delegated to PTAs and student physical therapists under direct supervision. When immediate and continuous examination and evaluation is necessary, those interventions should be performed only by a licensed physical therapist” (APTA Pelvic Health).

The NCBPTE strongly encourages the following principles be satisfied whenever internal pelvic health evaluation and interventions are utilized:

- Informed consent and permission to treat be discussed with any patient and consent obtained prior to any internal pelvic health interventions
- The supervising PT needs to be appropriately trained in pelvic health in order to appropriately supervise PTAs, and student PT/PTAs, as this PT is legally, ethically, and professionally responsible for the oversight. Appropriate training, at a minimum, consists of: (see below \*\*\*)
- The educational institution's Clinical Coordinators of Clinical Education needs to ensure the student has proper training in pelvic health prior to a rotation specializing in pelvic health issues, and that the clinic Clinical Instructor is also properly trained to supervise in this area.
- Pessaries can be fitted by a PT if the PT possesses the requisite knowledge, skills, and training in women's health issues in order to fit female patients/clients with pessaries. Coordination of care with a qualified medical healthcare provider is recommended.
- Biofeedback, electrical stimulation, internal pelvic floor muscle techniques to perform soft tissue mobilization, using dilators or internal sensors vaginally or rectally, are all consistent with pelvic health techniques.

Any clinic can invoke additional standards and restrictions above the minimum position statement standards of PTA and student participation in pelvic health.

\*\*\*Appropriate training and resources:

- Graduate of CAPTE approved DPT program and/or coursework as suggested below:
- [APTA Pelvic Health Level 1](#)
- [Herman and Wallace Pelvic Floor Level 1](#)
- Other Board approved courses that include, but are not limited to, the following topics:
  - Anatomy of the pelvic girdle
  - Physiology of micturition
  - Dysfunctions of the lower urinary tract
  - Dysfunctions of the pelvic muscles
  - Patient history examination
  - Testing and treatment interventions for the patient with underactive pelvic floor muscle conditions.
  - Urogynecologic surgeries
  - Medication
  - Prevention of pelvic floor dysfunction
  - Documentation

Resources:

- [CAPTE](#)
- [APTA Pelvic Health, an Academy of the American Physical Therapy Association](#)
  - [Position statement on Internal Physical Therapy Pelvic Examinations and Interventions](#)
  - [Position statement on Pessary Fitting and Management](#)

*Kathy Arney, PT, MA, Executive Director  
NC Board of Physical Therapy Examiners  
8300 Health Park, Suite 233, Raleigh, NC 27615  
Phone: 1-919-490-6393/800-800-8982  
[karney@ncptboard.org](mailto:karney@ncptboard.org) / [www.ncptboard.org](http://www.ncptboard.org)*