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### **When PTs Take the PTA Exam**

By Jeanne DeKrey and Dargan Ervin

Through laws or regulations, most jurisdictions prohibit someone who is educated as a physical therapist from taking the PTA exam. The major assumption or hypothesis we have heard from these jurisdictions is that individuals trained as PTs who practice as PTAs will practice beyond their scope of practice as compared to individuals who are educated, licensed and working as PTAs.

Still, there are currently at least five jurisdictions that do not prohibit the practice. What are the advantages, the disadvantages – and their assumptions? Are we ensuring public protection by taking either of these positions?

From a practice standpoint, one might think that an individual who is licensed or authorized to practice at a lower level than their educational level might have a tendency to practice outside their regulated scope.

- One might even question whether it is appropriate for a physician to work under a physician assistant.
- There may also be a supervisor issue where someone is not being supervised appropriately.

- On the other side, there are certainly PTAs who are very smart and who would make wonderful PTs, but they may not have had the opportunity to attend a PT school or chose not to go to PT school.

There can be many assumptions about this practice.

There are no published studies or literature that supports one position over the other for allowing PTs to sit for the PTA exam. So instead, we first reviewed the difference between what we know about our PT and PTA education and mined that database to find support or information. Is there content in PTA programs that differs or is presented at a different depth or more in-depth than in a PT program education?

If one reviews the [PTA Coursework Tool](#), all of the content within PTA education is also within the PT education. Truthfully, we would have been surprised to have found anything different.

Nonetheless, CAPTE criteria for PT programs also include the direction of the PTA; consideration of the needs of the patient/client; the assistant's ability; jurisdictional law, practice guidelines policies, codes; ethics; and facility policies. The PTA in all jurisdictions is still subject to supervision by the physical therapist, so the PT needs to know how supervisory relationships work. The normal model of education for a PT includes a lot of information about rules, directions and supervision.

Do American-educated PTAs receive more in-depth education than the PT in some areas? For example, do PTs receive as much education about the role of PTAs as PTAs receive? On occasion, some PTAs have to check on PTs to let them know what's appropriate. There are not many specifics to the depth of content, but it keeps coming back to the point that supervising physical therapists have the overriding responsibility.

It certainly makes sense to hypothesize that PTAs with a PT education might have a harder time with scope of practice boundaries. The three big states - California, New

York and Texas - all allow PT-educated candidates to sit for the PTA exam and apparently have statutory authority do to that. They all participate in the Federation's Exam, Licensure & Disciplinary Database (ELDD), so we feel we captured all of those populations. Just 2.6% of disciplinary action taken for PTA licensees was for those who had been educated as a PT. ***And there were no violations for exceeding scope of practice for PT-educated PTAs.*** It is a pretty clear answer. There doesn't seem to be any evidence to support that the PT-educated working as PTAs are having that issue.

Another hypothesis is that a person who would chose to work as a PTA after being educated as a PT would only do so because he had multiple failures of the test. That's not necessarily true according to data from the ELDD.

And that brings us back to the philosophical question. Does over-qualification mean that these folks shouldn't practice, or does the focus really need to go to the supervisor? We would love to have a larger sample so we could go back to those individuals and have a better understanding of why they chose that path.

In New Hampshire, the board still had some concerns relative to an individual's ability to understand the scope and the role of the PTA. It contacted a PTA educator and asked if he would spend some time with the individual, interview him and file a report. The program director said it appeared, based on the interview and the review of the candidate's history, that this person understood the differences in practice between the PT and the role as the PTA. The PTA program director supported allowing this person to sit for the exam and the board subsequently allowed the individual to sit for the NPTE.

It's certainly reasonable that a board makes sure it is doing all it can before this person has access to one of the determinants for entry-level competence.



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