



MILDRED T. WITTAN

JUNE 1, 1923 TO DECEMBER 7, 2010

It is sad to report that the Board's first Executive Director, Mildred T. Wittan passed away on December 7, 2010 at the age of 87.

Millie is survived by her husband of 61 years, William Wittan, two daughters, Joan and Susan, two sons-in-law and four grandchildren. She took the temporary, part-time position of the Board's Executive Director when her youngest daughter entered high school. She served in that capacity until 1989 when she retired. She loved the job and earned the respect and admiration of her colleagues. She worked closely with the late Florence Kendall, PT; Ernest Burch, PT and Charles Dilla, PT and many others from the physical therapy community. She championed the physical therapy profession, fought for legislative changes to the Practice Act, and fought off encroaching professions to the best of her abilities. She was a perfectionist and ran the Board office with precision and confidence.

Mildred was a strong, vibrant and interesting woman who embraced her roles as wife, mother, professional administrator, and grandmother with enthusiasm and joy. Mildred, you are missed by all who knew you. Donations in her memory may be made to The Barker Foundation, 7979 Old Georgetown Road, 1st. Fl., Bethesda, MD 20814, earmarked for the International Adoption Fund.

Continuing Competence Committee

We will be forming a continuing competence committee to assess a conversion from CEU based renewal requirements to

a continuing competence model. If you are interested in participating in this committee or would like more information please email Lori Mizell at lori.a.mizell@medstar.net.



BOARD MEETINGS

January 18, 2011	July 19, 2011
February 15, 2011	August 16, 2011
March 15, 2011	September 20, 2011
April 19, 2011	October 18, 2011
May 17, 2011	November 15, 2011
June 21, 2011	December 20, 2011

The Open Session of the Board meeting is open to the public. The meetings are held at

4201 Patterson Avenue
Baltimore, Md. 21215
Room #108/109



Please be sure to review our new
Chapter 05
Rules of Procedure of Board Hearings
Found on our website at www.dhmf.state.md.us/bphte

RECENT DISCIPLINARY ACTIONS

Entire Final Orders and Consent Orders can be viewed on our website at: www.dhmf.state.md.us/bphte under Disciplinary Actions.

Please read specific Orders online



Jeffrey Eades Maupin, PT #22136
Summary Suspension 12/21/2010

Ricardo Johnson, PTA #A3330
Modification of Terms of Probation
11/16/2010

Pamela West, PT #15422
Summary Suspension 11/19/2010

Peter Backe, PT #17348
Probation for 2 years 11/26/2010

Joseph J. Nichols, PT #18065
Reprimand, Fine 5/18/2010

Robert Boyle, PT #19315
Removed from Probation 4/20/2010

Mary Carter-Rucker, PTA #A1222
Revocation for minimum of 4 years
4/20/2010

Emma Quitain Dapul, PT #19078
Probation 3/16/2010

Kristina L. Garcia, PTA #A2749
Summary Suspension 2/8/2010

Edward Muir, PT # 21514
Removed from Probation 4/20/2010

Tejal Mukesh Sanghvi, PT #21350
Surrender of License 4/20/2010

Stephen Smith, PT #20664
Reprimand 2/16/2010

Mary Carter-Rucker, PTA #A1222
Revocation for min of 4 years 4/20/2010

PLEASE BEAR WITH US

The Board is currently experiencing some staffing shortages.

E-mails to specific staff is the preferred manner of communication. Please bear with us if you have any telephone inquiries. We will try

our very best to answer your questions expeditiously.

Again, refer to our website. The site may very well answer your question prior to initiating an inquiry.

WATCH OUR WEBSITE

The Board's website found at www.dhmf.state.md.us/bphte includes much valuable information for licensees, especially postings under "News".

Please refer to this site regularly.

RETIREMENT

The Maryland Board of Physical Therapy Examiners bids good bye to Patricia Y. Miller who has served the Board in administrative capacities since March 1, 2006. She was an office secretary and then assumed the duties of Licensing Administrator when that position became vacant. Ms. Miller has been outstanding in her work performance and has always demonstrated professionalism to our applicants, licensees and others with whom she has come in con-

tact with in carrying out her duties for the Board.

Ms. Miller's retirement was effective February 1, 2011. Thank you, Patricia, for a job well done. Enjoy many years of health, happiness and leisure.



ALL STANDARDS OF PRACTICE INQUIRIES MUST COME IN WRITING TO THE BOARD OFFICE. THE INQUIRY WILL BE PRESENTED AT THE BOARD'S NEXT BOARD MEETING, AND A RESPONSE WILL COME TO YOU IN WRITING.

PRESCRIPTION MEDICATIONS

Licensees please be aware that compounding of prescription medications is within the purview of Pharmacists. While you may deliver drugs such as dexamethasone and ultrasound gel in your iontophoresis treatments, you may not compound or mix those medications. You may store a compounded medication that is patient specific so long as your office has policies and procedures in place for appropriate storage and security of prescription medication. This medication may only be used on that patient to which it was prescribed.

Alarming Oversight Trends in Physical Therapy Management

By Dr. John Baker, PT, DPT

Clinical practice by physical therapists within Maryland continues to move through a transformative process as we address the added stresses of increasing patient populations with limited healthcare dollars. The Maryland Physical Therapy Board of Examiners is primarily interested in protecting the public's interest in regard to physical therapy care. This article is intended to address concerns arising from pressures to maximize reimbursement, staffing limitations, and shrinking budgets. We must always remember, good ethics and accurate and honest documentation are never optional, and are the responsibility of the physical therapist and physical therapist assistant to aggressively protect. Here are some "real life" scenarios to consider:

1. Physical therapist's "open the case and the PTA will follow."

Some organizations may have policies that the PT opens the case or does the physical therapy initial evaluation and the PTA follows the patient and the PT does the discharge. COMAR 10.38.03.02 states the physical therapist is ultimately responsible for the client's physical therapy care. The physical therapist MAY use a PTA if the PT and PTA agree it is appropriate and within the competency of the assistant and "within the scope of the practice of limited physical therapy." The physical therapist must "Provide direction and instruction for the physical therapist assistant that is adequate to ensure the safety and welfare of the patient;" Also, remember, the PT has to "Reevaluate the patient as the patient's condition requires,

but at least every 30 days, unless the physical therapist, consistent with accepted standards of physical therapy care, documents in the treatment record an appropriate rationale for not reevaluating the patient." Quality patient care may be compromised if a physical therapist merely performs evaluations and discharges and the physical therapist assistant performs all the treatments. Therefore, the Practice Act requires that the physical therapist and physical therapist assistant engage in documented ongoing communications regarding changes in a patient's status and treatment plan. COMAR 10.38.03.02-1E. The use of assistants should be assessed on a case by case basis.

2. "My facility policy already determines how often they need PT or how many minutes they are expected to do. I just go along with it. There is so much pressure!"

COMAR 10.38.03.02.A(3)(a) states a physical therapist may "enter into an agreement or employment relationship provided that such agreement or relationship does not impede the physical therapist's exercise of independent judgment in the treatment of a patient or cause the physical therapist to practice physical therapy contrary to the Maryland Physical Therapy Act..." including if "treatment is contraindicated or unjustified..." The physical therapist determines, based on appropriate consultations with the client and caregivers, the manner and frequency in which physical therapy services will be provided.. A physical therapist can not relinquish this responsibility to a manager or billing specialist. Furthermore, a physical therapist may be subjected to very close scrutiny if billing for services NOT clearly substantiated in the

treatment documentation.

3. "We do creative billing. I don't worry about it."

Ouch! Don't put your head in the sand. Again, make sure your billing and documentation reflects the services you provide. Anything else may put your license to practice at risk.

It's the beginning of a new year. One resolution might be to read the Code of Maryland regulations related to the practice of physical therapy again. I find this very helpful in my own private practice, and I believe it is something we all need to continue to think about to help guide clinical practice and protect ourselves legally. It's easy, just do a search for Maryland Physical Therapy Board of Examiners and click on Code of Maryland Regulations on the left side bar.

That's it. Enjoy the read!

NEW BOARD MEMBER

Rhea Cohn, PT, DPT is the Board's newest member of the Board. She was appointed by Governor O'Malley in December to fill the remaining term of Stephen D. Ryan, PT who resigned because of business pressures. Dr. Cohn will be a valued member of the Board for her standards of practice and reimbursement expertise. She will be eligible to be reappointed to serve a full term in 2013. Welcome to you, Rhea.



**Unit #93
Board of Physical Therapy
4201 Patterson Avenue
Baltimore, MD 21215**

PT NEWS

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