

Tennessee Code

Title 63

Professions of the Healing Arts

Chapter 13

Occupational and Physical Therapy

[Part 1 —General Provisions](#)

[Part 2 —Certification of Occupational Therapists and Assistants](#)

[Part 3 —Licensure of Physical Therapists and Assistants](#)

Part 1 —General Provisions

[63-13-101. Short title. —](#)

[63-13-102. Legislative intent. —](#)

[63-13-103. Chapter definitions. —](#)

[63-13-104. \[Repealed.\]](#)

[63-13-105. \[Repealed.\]](#)

[63-13-106. \[Repealed.\]](#)

[63-13-107. \[Repealed.\]](#)

[63-13-108. \[Repealed.\]](#)

[63-13-109. Unauthorized practice of medicine — Scope of practice. —](#)

63-13-101. Short title. —

This chapter shall be known and may be cited as the “Occupational and Physical Therapy Practice Act.”

[Acts 1984, ch. 921, § 2; T.C.A., § 63-13-201; Acts 1999, ch. 528, § 2.]

63-13-102. Legislative intent. —

This chapter is enacted for the purposes of protecting the public health, safety, and welfare, and providing for state administrative control, supervision, licensure and regulation of the practice of physical therapy and occupational therapy. It is the general assembly's intent that only individuals who meet and maintain prescribed standards of competence and conduct may engage in the practice of physical therapy and occupational therapy as authorized by this chapter. This chapter is intended to promote the public interest and to accomplish the purposes stated in this section.

[Acts 1984, ch. 921, § 2; T.C.A., §§ 63-13-205, 63-13-105; Acts 1999, ch. 528, § 3.]

63-13-103. Chapter definitions. —

As used in this chapter, unless the context otherwise requires:

- (1) “ACOTE” means the Accreditation Council for Occupational Therapy Education, a nationally recognized accrediting agency for professional programs in the field of occupational therapy;
- (2) “AOTA” means the American Occupational Therapy Association;
- (3) “Board” means:
 - (A) As used in part 2 of this chapter, the board of occupational therapy; and
 - (B) As used in part 3 of this chapter, the board of physical therapy;
- (4) “Division” means the division of health related boards of the department of health;
- (5) “NBCOT” means the National Board for Certification in Occupational Therapy;
- (6) “Occupational therapist” means a person licensed to engage in occupational therapy practice under this chapter;
- (7) “Occupational therapy assistant” means a person licensed to assist in occupational therapy practice under the supervision of an occupational therapist;

(8) (A) “Occupational therapy practice” means the therapeutic use of everyday life activities (occupations) for the purpose of enabling individuals or groups to participate in roles and situations in home, school, workplace, community and other settings. Occupational therapy addresses the physical, cognitive, psychosocial and sensory aspects of performance in a variety of contexts to support engagement in occupations that affect health, well-being and quality of life. “Occupational therapy practice” includes, but is not limited to:

- (i) The screening, evaluation, assessment, planning, implementation and discharge planning of an occupational therapy program or services in consultation with the client, family members, caregivers and other appropriate persons;
- (ii) Selection and administration of standardized and nonstandardized tests and measurements to evaluate factors affecting activities of daily living, instrumental activities of daily living, education, work, play, leisure and social participation, including:
 - (a) Body functions and body structures;
 - (b) Habits, routines, roles and behavior patterns;
 - (c) Cultural, physical, environmental, social and spiritual context and activity demands that affect performance; and
 - (d) Performance skills, including motor, process and communication/interaction skills;
- (iii) Methods or strategies selected to direct the process of interventions, such as:
 - (a) Modification or adaptation of an activity or the environment to enhance performance;
 - (b) Establishment, remediation or restoration of a skill or ability that has not yet developed or is impaired;
 - (c) Maintenance and enhancement of capabilities without which performance in occupations would decline;
 - (d) Health promotion and wellness to enable or enhance performance and safety of occupations; and

- (e) Prevention of barriers to performance, including disability prevention;
- (iv) Interventions and procedures to promote or enhance safety and performance in activities of daily living, instrumental activities of daily living, education, work, play, leisure and social participation, including:
 - (a) Therapeutic use of occupations, exercises and activities;
 - (b) Training in self-care, self-management, home management and community/work reintegration;
 - (c) Development, remediation or compensation of physical, cognitive, neuromuscular and sensory functions and behavioral skills;
 - (d) Therapeutic use of self, including an individual's personality, insights, perceptions and judgments as part of the therapeutic process;
 - (e) Education and training of individuals, family members, caregivers and others;
 - (f) Care coordination, case management, discharge planning and transition services;
 - (g) Consulting services to groups, programs, organizations or communities;
 - (h) Assessment, recommendations and training in techniques and equipment to enhance functional mobility, including wheelchair management;
 - (i) Driver rehabilitation and community mobility; and
 - (j) Management of feeding and eating skills to enable feeding and eating performance;
- (v) Management of occupational therapy services, including the planning, organizing, staffing, coordinating, directing or controlling of individuals and organizations;
- (vi) Providing instruction in occupational therapy to students in an accredited occupational therapy or occupational therapy assistant

educational program by persons who are trained as occupational therapists or occupational therapy assistants; and

(vii) Administration, interpretation and application of research to occupational therapy services;

(B) Occupational therapy services are provided for the purpose of promoting health and wellness to those clients who have, or are at risk of developing, illness, injury, disease, disorder, impairment, disability, activity limitation or participation restriction and may include:

(i) Training in the use of prosthetic devices;

(ii) Assessment, design, development, fabrication, adaptation, application, fitting and training in the use of assistive technology and adaptive and selective orthotic devices;

(iii) Application of physical agent modalities with proper training and certification;

(iv) Assessment and application of ergonomic principles; and

(v) Adaptation or modification of environments, at home, work, school or community, and use of a range of therapeutic procedures, such as wound care management, techniques to enhance sensory, perceptual and cognitive processing, and manual therapy techniques, to enhance performance skills, occupational performance or the promotion of health and wellness;

(C) Occupational therapy practice may occur in a variety of settings, including, but not limited to:

(i) Institutional inpatient settings, such as acute rehabilitation facilities, psychiatric hospitals, community and specialty hospitals, nursing facilities and prisons;

(ii) Outpatient settings, such as clinics, medical offices and therapist offices;

(iii) Home and community settings, such as homes, group homes, assisted living facilities, schools, early intervention centers, daycare centers, industrial and business facilities, hospices, sheltered

workshops, wellness and fitness centers and community mental health facilities;

(iv) Research facilities; and

(v) Educational institutions;

(D) "Occupational therapy practice" includes specialized services provided by occupational therapists or occupational therapy assistants who are certified or trained in areas of specialization, that include, but are not limited to, hand therapy, neurodevelopmental treatment, sensory integration, pediatrics, geriatrics and neurorehabilitation, through programs approved by AOTA or other nationally recognized organizations;

(9) "Occupations" means everyday life activities, named, organized, and given value and meaning by individuals and their culture. "Occupations" includes everything that people do to occupy their time, including caring for their needs, enjoying life, and contributing to the social and economic fabric of their communities;

(10) "On-site supervision" means the supervising physical therapist or physical therapist assistant must:

(A) Be continuously on-site and present in the department or facility where assistive personnel are performing services;

(B) Be immediately available to assist the person being supervised in the services being performed; and

(C) Maintain continued involvement in appropriate aspects of each treatment session in which a component of treatment is delegated to assistive personnel;

(11) "Physical therapist" means a person who is licensed pursuant to this chapter to practice physical therapy;

(12) "Physical therapist assistant" means a person who meets the requirements of this act for licensure as a physical therapist assistant and who performs physical therapy procedures and related tasks that have been selected and delegated only by the supervising physical therapist;

(13) "Physical therapy" means the care and services provided by or under the direction and supervision of a physical therapist who is licensed pursuant to this chapter;

(14) "Physical therapy assistive personnel":

- (A) "Other assistive personnel" means other trained or educated health care personnel not defined in subdivision (13) and (15)(B), who perform specific designated tasks related to physical therapy under the supervision of a physical therapist. At the discretion of the supervising physical therapist, and if properly credentialed and not prohibited by any other law, "other assistive personnel" or "other support personnel" may be identified by the title specific to their training or education; and
 - (B) "Physical therapy aide," inclusive of the terms "aide," "technician" and "transporter," means a person trained by and under the direction of a physical therapist who performs designated and supervised routine physical therapy tasks;
- (15) "Practice of physical therapy" means:
- (A) Examining, evaluating and testing individuals with mechanical, physiological and developmental impairments, functional limitations, and disability or other health and movement-related conditions in order to determine a physical therapy treatment diagnosis, prognosis, a plan of therapeutic intervention, and to assess the ongoing effect of intervention;
 - (B) Alleviating impairments and functional limitations by designing, implementing, and modifying therapeutic interventions that include, but are not limited to: therapeutic exercise; functional training; manual therapy; therapeutic massage; assistive and adaptive orthotic, prosthetic, protective and supportive equipment; airway clearance techniques; debridement and wound care, physical agents or modalities, mechanical and electrotherapeutic modalities; and patient-related instruction;
 - (C) Reducing the risk of injury, impairments, functional limitation and disability, including the promotions and maintenance of fitness, health and quality of life in all age populations; and
 - (D) Engaging in administration, consultation, education and research;
- (16) "Restricted physical therapist assistant license" means a license on which the committee has placed any restrictions due to action imposed by the committee;
- (17) "Restricted physical therapy license" means a license on which the committee places restrictions or conditions, or both, as to scope of practice, place of practice,

supervision of practice, duration of licensed status, or type of condition of patient to whom the licensee may provide services;

(18) "Supervision" of the physical therapist assistant means the supervising physical therapist will be readily available to the physical therapist assistant being supervised. When the physical therapist assistant is practicing in an offsite setting, the supervising physical therapist will be immediately accessible by telecommunications; patient conferences will be regularly scheduled and documented and supervisory visits will be made as further outlined in the rules and regulations; and

(19) "Unlicensed person working in occupational therapy" means a person who performs specific supportive tasks related to occupational therapy practice under the direct supervision of an occupational therapist or an occupational therapy assistant, and whose activities do not require professional or advanced training in the basic anatomical, biological, psychological and social sciences involved in the provision of occupational therapy services. Such persons are often referred to as aides, technicians, transporters or support staff.

[Acts 1984, ch. 921, § 2; T.C.A., § 63-13-202; Acts 1988, ch. 824, §§ 1-4; 1988, ch. 1023, §§ 1, 2; 1991, ch. 245, §§ 1, 2; 1993, ch. 225, § 1; T.C.A., § 63-13-102; Acts 1999, ch. 415, § 1; 1999, ch. 528, § 4; 2006, ch. 765, § 1; 2007, ch. 115, § 1.]

63-13-104. [Repealed.]

63-13-105. [Repealed.]

63-13-106. [Repealed.]

63-13-107. [Repealed.]

63-13-108. [Repealed.]

63-13-109. Unauthorized practice of medicine — Scope of practice. —

- (a) Nothing in this chapter shall be construed as allowing physical therapists to practice medicine, osteopathy, podiatry, chiropractic, or nursing.
- (b)(1) The scope of practice of physical therapy shall be under the written or oral referral of a licensed doctor of medicine, chiropractic, dentistry, podiatry or osteopathy, with exceptions as stated in § 63-13-303.
- (2) The scope of practice of physical therapy shall not include the performance of treatment where the physical therapist or physical therapist assistant uses direct thrust to move a joint of the patient's spine beyond its normal range of motion without exceeding the limits of anatomical integrity.

[Acts 1999, ch. 528, § 10; 2007, ch. 423, § 1.]

Part 2 —Certification of Occupational Therapists and Assistants

[63-13-201. Legislative purpose. —](#)

[63-13-202. Applicants for licensure — Qualifications — Examinations. —](#)

[63-13-203. Determining qualifications of applicants — Granting licenses and permits. —](#)

[63-13-204. Licenses — Issuance — Fees — Revocation — Reinstatement — Renewal. —](#)

[63-13-205. Limited permits — Failure of initial examination. —](#)

[63-13-206. Supervision of an occupational therapy assistant by an occupational therapist. —](#)

[63-13-207. Delegation of tasks to unlicensed personnel. —](#)

[63-13-208. Construction of part — Activities not prohibited. —](#)

[63-13-209. Denial, suspension or revocation of license. —](#)

[63-13-210. Administrative procedure. —](#)

[63-13-211. Unlawful practices — Penalty. —](#)

[63-13-212. License requirement. —](#)

[63-13-213. Reciprocity. —](#)

[63-13-214. Internationally trained applicants. —](#)

[63-13-215. Retirement — Inactive status. —](#)

[63-13-216. Board of occupational therapy. —](#)

63-13-201. Legislative purpose. —

(a) This part is enacted to:

- (1) Safeguard the public health, safety and welfare;
- (2) Protect the public from being misled by incompetent, unscrupulous and unauthorized persons;
- (3) Assure the highest degree of professional conduct on the part of occupational therapists and occupational therapy assistants; and
- (4) Assure that the available occupational therapy services are of high quality to persons in need of such services.

(b) It is the purpose of this part to provide for the regulation of persons offering occupational therapy services to the public.

[Acts 1984, ch. 921, § 3; T.C.A., § 63-13-301; Acts 1999, ch. 415, § 2.]

63-13-202. Applicants for licensure — Qualifications — Examinations. —

An applicant for licensure as an occupational therapist or as an occupational therapy assistant shall file an application showing, to the satisfaction of the board of occupational therapy, that the applicant:

- (1) Is of good moral character;
- (2) Has successfully completed the academic requirements of an educational program accredited by ACOTE or its predecessor organization. The accredited program shall be a program for occupational therapists or a program for occupational therapy assistants, depending upon the category of licensure for which the applicant is applying;
- (3) Has successfully completed the period of supervised fieldwork experience required by ACOTE; and
- (4) Has made an acceptable score on a written or computerized examination designed to test the applicant's knowledge of the basic and clinical services related to occupational therapy, occupational therapy techniques and methods, and other subjects that may help to determine an applicant's fitness to practice. The board of occupational therapy shall approve an examination for occupational therapists and an examination for occupational therapy assistants and shall establish standards for

acceptable performance on each examination. The board is authorized to use the entry level national examinations prepared and administered by NBCOT as the examinations used to test applicants for licensure as occupational therapists or occupational therapy assistants, and is authorized to use the standards of NBCOT in determining an acceptable score on each examination.

[Acts 1984, ch. 921, § 3; T.C.A., § 63-13-302; Acts 1999, ch. 415, § 2; 2006, ch. 765, § 4; 2007, ch. 115, § 7.]

63-13-203. Determining qualifications of applicants — Granting licenses and permits. —

- (a) In determining the qualifications of an applicant for licensure as an occupational therapist or as an occupational therapy assistant, only a majority vote of the board of occupational therapy shall be required.
- (b) Licenses and permits issued by the board shall be granted by the board as provided in § 63-13-104(2) [repealed].

[Acts 1984, ch. 921, § 3; T.C.A., § 63-13-303; Acts 1999, ch. 415, § 2; 2007, ch. 115, § 7.]

63-13-204. Licenses — Issuance — Fees — Revocation — Reinstatement — Renewal. —

- (a)(1) The board of occupational therapy shall issue a license to any person who meets the requirements of this part upon payment of the appropriate fees.
- (2) Each licensed occupational therapist or occupational therapy assistant shall pay a biennial renewal fee to the board as prescribed in this part, payable in advance, for the ensuing year. The secretary of the board shall notify each licensee.
- (3) When any licensee fails to register and pay the biennial registration fee within thirty (30) days after registration becomes due, as provided in this section, the license of such person shall be administratively revoked at the expiration of the thirty (30) days after the registration was required, without further notice or hearing. Any person whose license is automatically revoked, as provided in this section, may make application in writing to the board for the reinstatement of such license and, upon good cause being shown, the board in its discretion may reinstate such license upon payment of all past-due renewal fees.

(b) For purposes of implementing § 63-13-108(b), the board shall prescribe and publish nonrefundable fees.

(c)(1) Notwithstanding any provision of this chapter to the contrary, the division, with the approval of the commissioner, shall establish a system of license renewals at alternative intervals that will allow for the distribution of the license workload as uniformly as is practicable throughout the calendar year. Licenses issued under the alternative method are valid for twenty-four (24) months and shall expire on the last day of the last month of the license period; however, during a transition period, or at any time thereafter when the board shall determine that the volume of work for any given interval is unduly burdensome or costly, either the licenses or renewals, or both of them, may be issued for terms of not less than six (6) months nor more than eighteen (18) months. The fee imposed for any license under the alternative interval method for a period of other than twenty-four (24) months shall be proportionate to the biennial fee and modified in no other manner, except that the proportional fee shall be rounded off to the nearest quarter of a dollar (25¢).

(2) No renewal application will be accepted after the last day of the month following the license expiration date under the alternative method authorized in this subsection (c).

(d) The board is authorized to establish requirements for assessing continued competence of licensees.

[Acts 1984, ch. 921, § 3; T.C.A., § 63-13-304; Acts 1989, ch. 360, §§ 43, 44; 1989, ch. 523, § 32; 1999, ch. 415, § 2; 2003, ch. 109, § 1; 2007, ch. 115, § 7.]

63-13-205. Limited permits — Failure of initial examination. —

(a) A limited permit may be issued by the board to an applicant who has applied for a license under § 63-13-202, has successfully completed the educational and field experience requirements of § 63-13-202(2) and (3), and is scheduled to take the examination required by § 63-13-202(4).

(b) An applicant who has received a limited permit shall take the examination within ninety (90) days of the date the applicant received the limited permit. If the applicant does not take the examination within that ninety-day period, the limited permit expires at the end of the ninety-day period.

- (c) If an applicant fails the examination, the applicant's limited permit expires upon the board's receipt of notice that the applicant failed the examination.
- (d) If an applicant passes the examination, the applicant's limited permit remains effective until the board grants or denies a license to the applicant.
- (e) An applicant may obtain a limited permit only once.
- (f) A limited permit allows an applicant to engage in occupational therapy practice under the supervision of a licensed occupational therapist.
- (g) The board shall adopt rules governing the supervision of persons to whom a limited permit has been issued. The rules shall address, at a minimum, initial and periodic inspections, written evaluations, written treatment plans, patient notes, and periodic evaluation of performance.

[Acts 1984, ch. 921, § 3; T.C.A., § 63-13-305; Acts 1999, ch. 415, § 2; 2006, ch. 765, § 5; 2007, ch. 115, § 7.]

63-13-206. Supervision of an occupational therapy assistant by an occupational therapist. —

- (a) A licensed occupational therapy assistant shall practice under the supervision of an occupational therapist who is licensed in Tennessee.
- (b) The supervising occupational therapist is responsible for all services provided by the occupational therapy assistant, including, but not limited to, the formulation and implementation of a plan of occupational therapy services for each client, and has a continuing responsibility to follow the progress of each client and to ensure the effective and appropriate supervision of the occupational therapy assistant according to the needs of the client.
- (c) The supervising occupational therapist shall assign to the occupational therapy assistant only those duties and responsibilities that the occupational therapy assistant is qualified to perform.
- (d) The board shall adopt rules governing the supervision of occupational therapy assistants by occupational therapists. Those rules may address the following:
 - (1) The manner in which the supervising occupational therapist oversees the work of the occupational therapy assistant;

- (2)The ratio of occupational therapists to occupational therapy assistants required under different conditions and in different practice settings; and
 - (3)The documentation of supervision contacts between the supervising occupational therapist and the occupational therapy assistant.
- (e)The rules adopted by the board shall recognize that the frequency, methods, and content of supervision of occupational therapy assistants by occupational therapists may vary by practice setting and are dependent upon the following factors, among others:
- (1)Complexity of the client's needs;
 - (2)Number and diversity of clients;
 - (3)Skills of the occupational therapy assistant and the supervising occupational therapist;
 - (4)Type of practice setting; and
 - (5)Requirements of the practice setting.

[Acts 1999, ch. 415, § 2; 2006, ch. 765, § 6.]

63-13-207. Delegation of tasks to unlicensed personnel. —

- (a)A licensed physician, occupational therapist or licensed occupational therapy assistant may delegate to an unlicensed person specific routine tasks associated with nontreatment aspects of occupational therapy practice that are not evaluative, assessive, task selective, or recommendational in nature and do not require making decisions or making assessment or treatment entries in official patient records, if the following conditions are met:
- (1)The physician, occupational therapist or occupational therapy assistant accepts professional responsibility for the performance of that duty by the person to whom it is delegated. In the case of duties delegated by an occupational therapy assistant, the occupational therapy assistant, the physician, and occupational therapist who supervises the occupational therapy assistant shall be responsible;
 - (2)The unlicensed person does not perform any duties that require licensure under this chapter; and
 - (3)The physician, occupational therapist or occupational therapy assistant ensures that the unlicensed person has been appropriately trained for the performance of the tasks.
- (b)Tasks that may be delegated may include:
- (1)Transporting of patients;

- (2) Preparing or setting up a work area or equipment;
- (3) Routine department maintenance or housekeeping activities;
- (4) Taking care of patient's personal needs during treatments; and
- (5) Clerical, secretarial or administrative duties.

[Acts 1999, ch. 415, § 2; 2006, ch. 765, § 7.]

63-13-208. Construction of part — Activities not prohibited. —

- (a) Nothing in this part shall be construed as preventing or restricting the practice, services or activities of:
 - (1) Any person licensed under any chapter of this title;
 - (2) Any person employed as an occupational therapist or occupational therapy assistant by an agency of the United States government, while providing occupational therapy services in that capacity;
 - (3) Any person pursuing a course of study leading to a degree or certificate in occupational therapy in an educational program accredited or granted developing program status by ACOTE, if:
 - (A) The activities and services constitute a part of a supervised course of study; and
 - (B) The person is designated by a title that clearly indicates the person's status as a student;
 - (4) Any person fulfilling the supervised fieldwork experience requirements of § 63-13-202(3), if the activities and services constitute a part of the experience necessary to meet the requirements of § 63-13-202(3);
 - (5) An occupational therapist or occupational therapy assistant who is licensed or certified to practice in another state that has licensure or certification requirements at least as stringent as the requirements of this part, while in Tennessee for the purpose of providing educational, consulting or training services for no more than fourteen (14) days in a calendar year; and
 - (6) Any person who is certified by the National Council for Therapeutic Recreation Certification as a certified therapeutic recreation specialist, while engaged in practicing the profession of recreation therapy.

(b) Nothing in this part shall prevent certified orthotists from designing, fabricating and fitting orthotic devices.

(c) Nothing in this part shall prevent any person employed by a physician from performing activities related to casting and splinting or teaching exercises related to specific treatment by the employing physician.

[Acts 1984, ch. 921, § 3; T.C.A., § 63-13-306; Acts 1994, ch. 901, § 2; T.C.A., § 63-13-206; Acts 1999, ch. 415, § 2; 2006, ch. 765, § 8.]

63-13-209. Denial, suspension or revocation of license. —

(a) The board of occupational therapy has the power, and it is its duty to deny, suspend or revoke the license of, or to otherwise lawfully discipline, a licensee whenever the licensee is guilty of violating any of the provisions of this part or is guilty of any of the following acts or offenses:

- (1) Unprofessional, dishonorable or unethical conduct;
- (2) Violation or attempted violation, directly or indirectly, or assisting in or abetting the violation of, or conspiring to violate, any provision of this part or any lawful order of the board issued pursuant thereto, or any criminal statute of the state of Tennessee;
- (3) Making false or misleading statements or representations, being guilty of fraud or deceit in obtaining admission to practice, or being guilty of fraud or deceit in the licensee's practice;
- (4) Gross malpractice, or a pattern of continued or repeated malpractice, ignorance, negligence or incompetence in the course of professional practice;
- (5) Habitual intoxication or personal misuse of any drugs or the use of intoxicating liquors, narcotics, controlled substances or other drugs or stimulants in such a manner as to adversely affect the person's ability to practice;
- (6) Conviction of a felony, conviction of any offense under state or federal drug laws, or conviction of any offense involving moral turpitude;
- (7) Making or signing in one's professional capacity any certificate that is known to be false at the time one makes or signs such certificate;
- (8) Engaging in practice when mentally or physically unable to safely do so;

- (9) Solicitation by agents or persons generally known as “cappers” or “steerers” of professional patronage or profiting by the acts of those representing themselves to be agents of the licensee;
- (10) Division of fees or agreeing to split or divide fees received for professional services with any person for bringing or referring a patient;
- (11) Conducting practice so as to permit, directly or indirectly, an unlicensed person to perform services or work that, under the provisions of this part, can be done legally only by persons licensed to practice;
- (12) Professional connection or association with any person, firm or corporation in any manner in an effort to avoid and circumvent the provisions of this part, or lending one's name to another for illegal practice;
- (13) Payment or acceptance of commissions, in any form or manner on fees for professional services, references, consultations, pathological reports, prescriptions or on other services or articles supplied to patients;
- (14) Giving of testimonials, directly or indirectly, concerning the supposed virtue of secret therapeutic agents or proprietary preparations, such as remedies, or other articles or materials that are offered to the public, claiming radical cure or prevention of diseases by their use;
- (15) Violating the code of ethics adopted by the board;
- (16) Any other unprofessional or unethical conduct that may be specified by the rules duly published and promulgated by the board, or the violation of any provision of this part;
- (17) On behalf of the licensee, the licensee's partner, associate, or any other person affiliated with the licensee or the licensee's facility, use or participate in the use of any form of public communication containing a false, fraudulent, misleading or deceptive statement or claim; or
- (18) Disciplinary action against a person licensed to practice occupational therapy by another state or territory of the United States for any acts or omissions that would constitute grounds for discipline of a person licensed in this state. A certified copy of the initial or final order or other equivalent document memorializing the disciplinary action from the disciplining state or territory shall constitute prima facie evidence of violation of this section and be sufficient grounds upon which to deny, restrict or condition licensure or renewal and/or discipline a person licensed in this state.

(b) In enforcing this section, the board of occupational therapy shall, upon probable cause, have the authority to compel an applicant or licensee to submit to a mental or physical examination, or both, by a designated board of at least three (3) practicing physicians, including a psychiatrist, where a question of mental condition is involved. The applicant or licensee may have an independent physical or mental examination, which examination report shall be filed with the board for consideration. The physicians' board shall submit a report of its findings to the board for use in any hearing that may thereafter ensue.

(c) The board, on its own motion, may cause to be investigated any report indicating that a licensee is or may be in violation of the provisions of this part. Any licensee, any occupational therapist or occupational therapy-related society or association, or any other person who in good faith reports to the board any information that a licensee is or may be in violation of any provisions of this part shall not be subject to suit for civil damages as a result thereof.

[Acts 1984, ch. 921, § 3; T.C.A., §§ 63-13-307, 63-13-207; Acts 1999, ch. 415, § 2; 2006, ch. 765, § 9; 2007, ch. 115, §§ 7, 8.]

63-13-210. Administrative procedure. —

All administrative proceedings for disciplinary action against a licensee under this part shall be conducted by the board of occupational therapy in accordance with the Uniform Administrative Procedures Act, compiled in title 4, chapter 5.

[Acts 1984, ch. 921, § 3; T.C.A., §§ 63-13-308, 63-13-208; Acts 1999, ch. 415, § 2; 2007, ch. 115, § 7.]

63-13-211. Unlawful practices — Penalty. —

(a) It is unlawful for any person to violate the provisions of this part. It is unlawful for any person who is not licensed under this part as an occupational therapist or an occupational therapy assistant or whose license has been suspended or revoked to use, in connection with the person's name or place of business, the words "occupational therapist," "occupational therapist registered," "licensed occupational therapist," "occupational therapy assistant," "certified occupational therapy assistant," "licensed occupational therapy assistant," or the

letters “OT,” “OTA,” “OTR,” “OT/L,” “OTA/L,” “COTA,” or any other words, letters, abbreviations or insignia indicating or implying that the person is an occupational therapist or an occupational therapy assistant or who in any way, orally, in writing, in print or by sign, directly or by implication, claims to be an occupational therapist or an occupational therapy assistant.

(b)A violation of this part is a Class B misdemeanor.

[Acts 1984, ch. 921, § 3; T.C.A., § 63-13-309; Acts 1989, ch. 591, § 112; T.C.A. § 63-13-209; Acts 1999, ch. 415, § 2; 2006, ch. 765, § 10.]

63-13-212. License requirement. —

No person shall practice occupational therapy or act as an occupational therapy assistant, nor claim to be able to practice occupational therapy or act as an occupational therapy assistant, unless the person holds a license and otherwise complies with the provisions of this part and the rules adopted by the board.

[Acts 1984, ch. 921, § 3; T.C.A., §§ 63-13-310, 63-13-210; Acts 1999, ch. 415, § 2.]

63-13-213. Reciprocity. —

The board of occupational therapy may grant a license to an applicant who presents proof of current licensure or certification as an occupational therapist or occupational therapy assistant in another state, the District of Columbia, or territory of the United States and who possesses educational and experiential qualifications that meet or exceed the requirements for licensure in Tennessee, as determined by the board of occupational therapy.

[Acts 1984, ch. 921, § 3; T.C.A., §§ 63-13-311, 63-13-211; Acts 1999, ch. 415, § 2; 2006, ch. 765, § 11; 2007, ch. 115, § 7.]

63-13-214. Internationally trained applicants. —

Applicants for licensure who have completed educational programs outside the United States shall furnish proof of good moral character and of completion of an educational program and

supervised fieldwork substantially similar to those contained in § 63-13-202(2) and (3) and shall satisfy the examination requirements of §63-13-202(4).

[Acts 1984, ch. 921, § 3; T.C.A., §§ 63-13-312, 63-13-212; Acts 1999, ch. 415, § 2; 2006, ch. 765, § 12.]

63-13-215. Retirement — Inactive status. —

(a)Any person licensed by the board of occupational therapy to practice in this state, who has retired or may retire from such practice in this state, shall not be required to register as required by this chapter, if such person files with the board an affidavit on a form to be furnished by the board, which affidavit shall state the date on which the person retired from such practice and any other facts, as the board shall consider necessary, that tends to verify such retirement. If such person thereafter reengages in practice in this state, such person shall apply for registration with the board as provided by this chapter and shall meet such continuing education requirements that are established by the board, except for good and sufficient reasons as determined by the board.

(b)Any person licensed by the board of occupational therapy may place the person's license on inactive status by filing the proper forms with the board and by paying a biennial fee in accordance with rules adopted by the board. If the person thereafter reengages in active practice in this state, the person shall apply for relicensure with the board, as provided by this part, and shall meet the continuing education requirements that are established by the board, except for good and sufficient reasons as determined by the board.

[Acts 1984, ch. 921, § 3; T.C.A., §§ 63-13-313, 63-13-213; Acts 1999, ch. 415, § 2; 2006, ch. 765, § 13; 2007, ch. 115, § 7.]

63-13-216. Board of occupational therapy. —

(a)There is created a board of occupational therapy, which shall perform the same functions and have the same duties and responsibilities that were performed by the committee of occupational therapy prior to July 1, 2007.

(b)The board shall consist of five (5) members appointed by the governor, each of whom shall be a resident of this state. Three (3) members of the board shall be licensed occupational

- therapists who have had at least five (5) years of experience in the actual practice or teaching of occupational therapy immediately preceding their appointment. One (1) member of the board shall be a licensed occupational therapy assistant who has had at least five (5) years of experience in the actual practice of occupational therapy or teaching of an occupational therapy assistant curriculum immediately preceding the appointment. One (1) member of the board shall be a person who is not engaged in the practice of occupational therapy and who is not professionally or commercially associated with the health care industry.
- (c)The Tennessee Occupational Therapy Association may submit to the governor a list of at least three (3) nominees for each appointment or vacancy to be filled pursuant to this section. The governor may make the appointment from the list.
- (d)The occupational therapists and the occupational therapy assistant who are serving on the committee of occupational therapy on July 1, 2007, shall continue to serve as members of the board until the expiration of their terms.
- (e)The board shall organize annually and select a chair and a secretary. Meetings shall be held as frequently as may be required.
- (f)A quorum of the board shall consist of at least three (3) members.
- (g)The division shall provide administrative, investigatory, and clerical services to the board.
- (h)Each member of the board shall be reimbursed for actual expenses incurred in the performance of official duties on the board and shall be entitled to a per diem of one hundred dollars (\$100) for each day of service in conducting the business of the board. All reimbursement for travel expenses shall be in accordance with the comprehensive travel regulations promulgated by the department of finance and administration and approved by the attorney general and reporter.
- (i)All regular appointments to the board shall be for terms of three (3) years each. Each member shall serve until a successor is appointed. Vacancies shall be filled by appointment of the governor for the remainder of the unexpired term.
- (j)The governor may, at the request of the board, remove any member of the board for misconduct, incompetence, or neglect of duty.
- (k)In making appointments to the board, the governor shall strive to ensure that at least one (1) member is sixty (60) years of age or older, that at least one (1) member is a racial minority,

and that the gender balance of the board reflects the gender balance of the state's population.

(l)The board shall have the power and duty to:

(1)Promulgate, in accordance with the Uniform Administrative Procedures Act, compiled in title 4, chapter 5, all rules reasonably necessary for the performance of its duties and the proper administration of this part;

(2)Grant, in the board's name, all licenses approved by the board; and

(3)Collect and receive all fees, fines, and moneys owed pursuant to the provisions of this part and to pay the fees, fines and moneys into the general fund of the state.

(m)After July 1, 2007, the board shall assume and fulfill all powers and duties previously assigned to the committee of occupational therapy, and the rules adopted by the committee of occupational therapy shall become the rules of the board without further action by the board.

[Acts 2007, ch. 115, § 9.]

Part 3 —Licensure of Physical Therapists and Assistants

[63-13-301. License requirement. —](#)

[63-13-302. Referrals — Ethical standards. —](#)

[63-13-303. Exceptions to referral requirements. —](#)

[63-13-304. Board powers. —](#)

[63-13-305. Claims and practices of other licensed professionals — Exemptions from licensure. —](#)

[63-13-306. Application — Examinations. —](#)

[63-13-307. Qualifications of applicants — Reciprocity. —](#)

[63-13-308. License renewal — Changes in name or address — Retirement — Inactive status —](#)

[Exemption from continuing education requirements. —](#)

[63-13-309. Reinstatement of license — Failure to renew license. —](#)

[63-13-310. Unlawful use of titles or designations indicating licensure. —](#)

[63-13-311. Supervision of students and assistive personnel. —](#)

[63-13-312. Denial, suspension or revocation of licenses. —](#)

[63-13-313. Disciplinary actions of the board. —](#)

[63-13-314. Administrative procedure of disciplinary actions — Jurisdiction of board. —](#)

[63-13-315. Penalties. —](#)

[63-13-316. Peer assistance program — Fees. —](#)

[63-13-317. Disclosures to patient — Confidentiality of information — Complaints — Display of
license. —](#)

[63-13-318. Board of physical therapy. —](#)

63-13-301. License requirement. —

- (a) A physical therapist licensed under this chapter is fully authorized to practice physical therapy as defined in this chapter.
- (b) No person shall practice, or in any manner claim to be engaging in the practice of physical therapy or designate as being a physical therapist unless duly licensed as a physical therapist in accordance with this chapter.

[Acts 1999, ch. 528, § 12.]

63-13-302. Referrals — Ethical standards. —

- (a) A physical therapist shall refer persons under the physical therapist's care to appropriate health care practitioners, after consultation with the referring practitioner, if the physical therapist has reasonable cause to believe symptoms or conditions are present that require services beyond the scope of practice or when physical therapy treatment is contraindicated.
- (b) Physical therapists shall adhere to the recognized standards of ethics of the physical therapy profession and as further established by rule.

[Acts 1999, ch. 528, § 13.]

63-13-303. Exceptions to referral requirements. —

- (a) The practice of physical therapy shall be under the written or oral referral of a licensed doctor of medicine, chiropractic, dentistry, podiatry or osteopathy, except a licensed physical therapist may:
 - (1) Conduct an initial evaluation of a patient without referral;
 - (2) Provide physical assessments or instructions, including a recommendation of exercise to an asymptomatic person, without the referral of a referring practitioner;
 - (3) (A) In emergency circumstances, including minor emergencies, provide assistance to a person to the best of a therapist's ability without the referral of a referring practitioner. Except as provided in subdivision (a)(4), the physical therapist shall refer the person to the appropriate health care practitioner, as indicated, immediately after providing assistance;

(B) For the purposes of subdivision (a)(3)(A):

(i) "Emergency circumstances" means instances where emergency medical care is required; and

(ii) "Emergency medical care" means bona fide emergency services provided after the sudden onset of a medical condition manifesting itself by acute symptoms of sufficient severity, including severe pain, such that the absence of immediate medical attention could reasonably be expected to result in:

(a) Placing the patient's health in serious jeopardy;

(b) Serious impairment to bodily functions; or

(c) Serious dysfunction of any bodily organ or part; and

(4) Treat a patient without a referral when all of the following apply:

(A) When a patient provides the name of a licensed doctor of medicine, chiropractic, dentistry, podiatry or osteopathy and expressly wants the physical therapist to inform that physician, the physical therapist shall inform the patient's licensed doctor of medicine, chiropractic, dentistry, podiatry or osteopathy no later than five (5) business days after the evaluation. A consultation shall occur between the physical therapist and the patient's licensed doctor of medicine, chiropractic, dentistry, podiatry or osteopathy within the first six (6) visits or fifteen (15) business days, whichever comes first, of the findings of the patient's initial visit for physical therapy and any subsequent visits. Should that consultation not take place, no further therapy beyond the six (6) visits or fifteen (15) days, whichever comes first, shall be delivered;

(B) When a patient does not provide the name of a licensed doctor of medicine, chiropractic, dentistry, podiatry or osteopathy or expressly states to the therapist that the patient does not want a licensed doctor of medicine, chiropractic, dentistry, podiatry or osteopathy informed of the initiation of therapy services, the therapist shall have the patient sign a consent form that confirms the patient either does not have a licensed doctor of medicine, chiropractic, dentistry, podiatry or osteopathy or does not want a licensed doctor of medicine, chiropractic, dentistry, podiatry or osteopathy informed of the initiation of therapy treatment. The consent form shall be maintained in the patient's record;

- (C) If the patient presents to the physical therapist for a problem for which the patient has been seen by a licensed doctor of medicine, chiropractic, dentistry, podiatry or osteopathy within the past twelve (12) months, the consent of the patient is not necessary to inform that licensed doctor of medicine, chiropractic, dentistry, podiatry or osteopathy of the presentation for the physical therapy treatment. If the patient has no licensed doctor of medicine, chiropractic, dentistry, podiatry or osteopathy, then the physical therapist shall make a suggestion from the list of available providers and shall inform the patient of the thirty-day limitation in subdivision (a)(4)(E);
- (D) If the physical therapist determines, based on reasonable evidence, that no substantial progress has been made with respect to that patient within fifteen (15) calendar days or six (6) visits, whichever occurs first, immediately following the date of the patient's initial visit with the physical therapist, the physical therapist shall not provide any additional physical therapy services and shall refer the patient to a licensed physician, doctor of chiropractic, dentist, podiatrist or osteopath. If the patient previously was diagnosed with chronic, neuromuscular, or developmental conditions by a physician, doctor of chiropractic, dentist, podiatrist or osteopath and the evaluation, treatment or services are being provided for problems or symptoms associated with one (1) or more of those previously diagnosed conditions, then this subdivision (a)(4)(D) shall not apply. If a patient returns to the physical therapist within ninety (90) days of treatment with the same complaint, then the physical therapist shall make an immediate referral to the appropriate health care provider;
- (E) When a patient's licensed doctor of medicine, chiropractic, dentistry, podiatry or osteopathy has not been notified of the physical therapy services, under no circumstances should therapy services continue beyond thirty (30) days immediately following the date of the patient's first visit;
- (F) (i) It shall be considered unprofessional conduct for the purposes of § 63-13-312 for a physical therapist to knowingly initiate services for the same complaint for which a patient:
- (a) Has started therapy services but another therapist did not inform a licensed doctor of medicine, chiropractic, dentistry, podiatry or osteopathy within

five (5) business days of the initial evaluation in accordance with subdivision (a)(4)(A);

(b)Has reached the fifteen (15) day and six (6) visit limit imposed by subdivision (a)(4)(D) where no substantial progress has been made from another physical therapist; or

(c)Has reached the thirty-day limit imposed by subdivision (a)(4)(E);

(ii)This subdivision (a)(4)(F) does not apply if a referral from a licensed doctor of medicine, chiropractic, dentistry, podiatry or osteopathy is made; and

(G)If, at any time, the physical therapist has reason to believe that the patient has symptoms or conditions that require treatment or services beyond the scope of practice of a physical therapist, the physical therapist shall refer the patient to a licensed health care practitioner acting within the practitioner's scope of practice.

(b)No person shall practice physical therapy other than upon the referral of a patient by a person who is licensed in this or another state to practice medicine, chiropractic, dentistry, osteopathic medicine, or podiatric medicine, within the scope of those practices, and whose license is in good standing and who holds a CPR certificate, or its equivalent, unless one of the following conditions is met:

(1)The person holds a master's or doctorate degree from a professional physical therapy program that is accredited by a national accreditation agency recognized by the United States department of education and by the board of physical therapy and the person has completed at least one (1) year of experience as a licensed physical therapist;

(2)The person has successfully completed a residency or clinical fellowship in physical therapy at a program approved by the board; or

(3) (A) The person has completed at least three (3) years of experience as a licensed physical therapist; and

(B)The person has completed a course approved by the board of physical therapy and offered by an accredited university of at least fifteen (15) hours, designed to enable the physical therapist to identify signs and symptoms of systemic disease, particularly those that can mimic cardiological, neurological, oncological, or musculoskeletal disorders, and to recognize conditions that require timely referral to a physician, dentist, osteopath, podiatrist or chiropractor.

[Acts 1999, ch. 528, § 14; 2007, ch. 115, § 10; 2007, ch. 423, § 2.]

63-13-304. Board powers. —

The board of physical therapy has the power and authority to:

- (1) Evaluate the qualifications of applicants for licensure and provide for the examination of physical therapists and physical therapist assistants;
- (2) Adopt passing scores for examination;
- (3) Issue licenses to those who qualify under this chapter;
- (4) Regulate the practice of physical therapy by interpreting and enforcing the provisions of this statute, including disciplinary action;
- (5) Adopt and revise rules, as it deems necessary and appropriate, consistent with this law, for the discharge of its obligation under this section. Such rules, when lawfully adopted, shall have the effect of law;
- (6) Establish requirements for assessing continuing competence of licensees; and
- (7) Assess all license and registration fees.

[Acts 1999, ch. 528, § 15; 2007, ch. 115, § 10.]

63-13-305. Claims and practices of other licensed professionals — Exemptions from licensure. —

- (a) Nothing in this chapter shall be construed as restricting a person licensed or certified under any other law of this state from engaging in the profession or practice for which the person is licensed or certified; provided, that the person does not claim to be a physical therapist, a physical therapist assistant or a provider of physical therapy.
- (b) The following persons shall be exempt from licensure as a physical therapist or physical therapist assistant under this chapter:
 - (1) A person who is pursuing a course of study leading to a degree as a physical therapist or physical therapist assistant in a professional education program approved by the board and is satisfying supervised clinical education requirements related to physical therapy education;
 - (2) A physical therapist or physical therapist assistant while practicing in the United States armed services, United States public health service or veterans administration as based on requirements under federal regulations for state licensure of health care providers;

- (3) A physical therapist or physical therapist assistant licensed in another United States jurisdiction, or a foreign-educated physical therapist credentialed in another country, performing physical therapy as part of teaching or participating in an educational seminar of no more than sixty (60) days in a calendar year; and
- (4) A physical therapist or physical therapist assistant licensed in another United States jurisdiction who is temporarily performing physical therapy for members of established athletic teams, athletic corporations, or performing arts companies that are training, competing, or performing in Tennessee; provided, however, that a person performing physical therapy in this state pursuant to this subdivision (b)(4) shall agree to use the secretary of state for service of process pursuant to title 20, chapter 2, part 2.
- (c) Nothing in this chapter shall be construed as restricting persons licensed under any other law of this state from performing physical agent modalities for which they have received education and training.

[Acts 1999, ch. 528, § 16; 2003, ch. 8, § 1; 2007, ch. 115, § 10.]

63-13-306. Application — Examinations. —

- (a) An applicant for licensure as a physical therapist or physical therapist assistant shall file an application as required by the board. A non-refundable application fee and the cost of the examination shall accompany the completed written application. Fees shall be established by the rules promulgated by the board.
- (b) After the application process has been completed, an applicant shall take the examination for physical therapist licensure that covers current physical therapy practice.
- (c) After the application process has been completed, an applicant shall take the examination for physical therapist assistant licensure that covers current technical application of physical therapy services.
- (d) Examinations shall be available within the state at such time and place as the board shall determine. The board shall determine the passing score.
- (e) Applicants who do not pass the examination after the first attempt may retake the examination one (1) additional time without re-application for licensure. This must occur within six (6) months of initial board approval to take the examination. Prior to being approved by the board for subsequent testing beyond two (2) attempts, individuals shall

submit a new application with all applicable fees and demonstrate evidence satisfactory to the board of having successfully completed additional clinical training and/or course work as determined by the board and defined in the rules.

[Acts 1999, ch. 528, § 17; 2007, ch. 115, § 10.]

63-13-307. Qualifications of applicants — Reciprocity. —

(a) An applicant for licensure as a physical therapist shall have the following qualifications:

- (1) Must be at least eighteen (18) years of age;
- (2) Be of good moral character;
- (3) Have completed the application process;
- (4) Be a graduate of a professional physical therapy education program accredited by an accreditation agency approved by the board; and
- (5) Have successfully passed an examination approved by the board.

(b) An applicant for license as a physical therapist assistant shall meet the following requirements:

- (1) Must be at least eighteen (18) years of age;
- (2) Be of good moral character;
- (3) Have completed the application process;
- (4) Be a graduate of a physical therapist assistant education program accredited by an accreditation agency approved by the board; and
- (5) Have successfully passed an examination approved by the board.

(c) The board shall issue a license to a physical therapist or physical therapist assistant who has a valid unrestricted license from another United States jurisdiction in which such person, when granted such license, previously met all requirements as specified in subsections (a) and (b), and as further established by rules promulgated by the board.

(d) An applicant for licensure as a physical therapist who has been educated outside the United States shall meet the following qualifications:

- (1) Must be at least eighteen (18) years of age;
- (2) Be of good moral character;
- (3) Have completed the application process;

- (4) Provide satisfactory evidence that the applicant's education is substantially equivalent to the requirements of physical therapists educated in accredited educational programs as determined by the board. If the board determines that a foreign-educated applicant's education is not substantially equivalent, it may require completion of additional course work before proceeding with the application process;
 - (5) Provide written proof that the school of physical therapy education is recognized by its own ministry of education;
 - (6) Provide written proof of authorization to practice as a physical therapist without limitations in the country where the professional education occurred;
 - (7) Provide proof of legal authorization to reside and seek employment in the United States or its territories;
 - (8) Have the applicant's educational credentials evaluated by a board-approved credential evaluation agency;
 - (9) Have passed the board approved English proficiency examinations, if the applicant's native language is not English;
 - (10) Have participated in and completed an interim supervised clinical practice period prior to licensure; and
 - (11) Have successfully passed the examination approved by the board.
- (e) Notwithstanding the provisions of this section, if the foreign-educated physical therapist applicant is a graduate of a professional physical therapy education program accredited by an agency approved by the board, the requirements in subdivisions (d)(4), (5), (8), and (10) may be waived.
- (f) In determining the qualifications of an applicant for licensure as a physical therapist or as a physical therapist assistant, only a majority vote of the board of physical therapy shall be required.

[Acts 1999, ch. 528, § 18; 2007, ch. 115, § 10.]

63-13-308. License renewal — Changes in name or address — Retirement — Inactive status — Exemption from continuing education requirements. —

- (a) A physical therapist or physical therapist assistant licensed under the provisions of this part shall renew such person's license as specified in the rules. An individual, who fails to renew

- the license by the date of expiration, shall not practice physical therapy or function as a physical therapist assistant in the state of Tennessee.
- (b) Each licensee shall report to the division a name change and changes in business and home address within thirty (30) days of the change.
- (c) Any person licensed by the board to practice in this state, who has retired or may retire from such practice in this state, is not required to register as required by this part, if such person files with the board an affidavit on a form to be furnished by the board, which affidavit states the date on which the person retired from such practice and any other facts, as the board considers necessary, that tends to verify such retirement. If such person thereafter reengages in practice in this state, such person shall apply for licensure with the board as provided by this part, and shall meet such continuing education requirements that are established by the board, except for good and sufficient reasons as determined by the board.
- (d) Any person licensed by the board may place their license on inactive status by filing the proper forms with the board, and by paying a biennial fee in accordance with rules. If such person thereafter reengages in active practice in this state, such person shall apply for relicensure with the board as provided by this part, and shall meet such continuing education requirements as are established by the board, except for good and sufficient reasons as determined by the board.
- (e) A licensee who has been continuously licensed in this state since 1960 and who is at least seventy-one (71) years of age shall be exempt from any continuing education requirements imposed by the board under this chapter.

[Acts 1999, ch. 528, § 19; 2005, ch. 51, § 1; 2007, ch. 115, § 10.]

63-13-309. Reinstatement of license — Failure to renew license. —

- (a) Reinstatement of a lapsed license following a renewal deadline requires payment of a renewal fee, a late renewal penalty fee and a reinstatement fee, in accordance with rules promulgated by the board.
- (b) Reinstatement of a license that has lapsed for more than three (3) consecutive years requires reapplying for a license and payment of fees in accordance with board rules. The individual shall successfully demonstrate to the board competency in the practice of physical therapy

or shall serve an internship under a restricted license or take remedial courses as determined by the board, or any combination of the preceding, at the board's discretion. The board may also require the applicant to take an examination.

- (c) When any license holder fails to renew and pay the biennial renewal fee within sixty (60) days after renewal becomes due, as provided in this section, the license of such person shall be administratively revoked at the expiration of the sixty (60) days after the renewal was required, without further notice or hearing. Any person whose license is administratively revoked, as provided in this subsection (c), may make application in writing to the board for the reinstatement of such license and, upon good cause being shown, the board, in its discretion, may reinstate such license upon payment of all required fees.

[Acts 1999, ch. 528, § 20; 2007, ch. 115, § 10.]

63-13-310. Unlawful use of titles or designations indicating licensure. —

- (a) A physical therapist shall use the letters “PT” in connection with their name or place of business to denote licensure under this part.
- (b) It is unlawful for any person, or for any business entity, its employees, agents or representatives to use in connection with such person's name, or the name or activity of the business, the words, “physical therapy,” “physical therapist,” “physiotherapy,” “physiotherapist,” “registered physical therapist,” “licensed physical therapist,” or the letters “PT,” “LPT,” “RPT,” or any other words, abbreviations or insignia indicating or implying directly or indirectly that physical therapy is provided or supplied, including the billing of services labeled as physical therapy, unless such services are provided by or under the direction of a physical therapist licensed in accordance with this part.
- (c) Nothing in this chapter shall be construed as restricting a person licensed or certified under any other law of this state from engaging in the profession or practice for which the person is licensed or certified; provided, that the person does not claim to be a physical therapist, a physical therapist assistant or a provider of physical therapy.
- (d) A physical therapist assistant shall use the letters “PTA” in connection with their name to denote licensure.
- (e) No person shall use the title “physical therapist assistant” and use the letters “PTA” in connection with the person's name, or any other words, abbreviations or insignia indicating

or implying, directly or indirectly, that the person is a physical therapist assistant unless the person is licensed as a physical therapist assistant in accordance with this part.

[Acts 1999, ch. 528, § 21.]

63-13-311. Supervision of students and assistive personnel. —

- (a) Physical therapists are responsible for the patient care given by physical therapist assistants, assistive personnel, and students on clinical affiliations under their supervision. The physical therapist may delegate to the physical therapist assistant, assistive personnel, and clinical students selected acts, tasks or procedures that fall within the scope of their education or training.
- (b) Physical therapist assistants shall at all times be under the supervision of a licensed physical therapist as defined in § 63-13-103 and as further set forth in the rules promulgated by the board.
- (c) Physical therapy aides, other assistive personnel, and clinical students shall at all times perform patient care activities under the on-site supervision of a licensed physical therapist or physical therapist assistant as defined in § 63-13-103.
- (d) Physical therapist students and physical therapist assistant students shall at all times be under the supervision of a physical therapist as further set forth in the rules promulgated by the board.

[Acts 1999, ch. 528, § 22.]

63-13-312. Denial, suspension or revocation of licenses. —

The board has the power, and it shall be its duty, to deny, suspend, revoke the license of, or to otherwise lawfully discipline, a licensee who is guilty of violating any of the provisions of this part or is guilty of the following acts or offenses:

- (1) Practicing physical therapy in violation of the provisions of this chapter or any rule or written order adopted by the board;
- (2) Practicing or offering to practice beyond the scope of physical therapy practice as defined in this chapter;

- (3) Making false or misleading statements or representations, being guilty of fraud or deceit in obtaining admission to practice, or being guilty of fraud or deceit in the licensee's practice;
- (4) Engaging in the performance of substandard care by a physical therapist due to ignorance, incompetence, or a deliberate or negligent act or failure to act regardless of whether actual injury to the patient is established;
- (5) Engaging in the performance of substandard care by a physical therapist assistant, which includes exceeding the authority to perform the task selected and delegated by the supervising physical therapist regardless of whether actual injury to the patient is established;
- (6) Inadequately supervising or delegating duties that exceed the scope of practice for assistive personnel in accordance with the chapter and rules adopted by the board;
- (7) Conviction of a felony or any offense involving moral turpitude in the courts of this state or any other state, territory or country. "Conviction," as used in this subdivision (7), includes a finding or verdict of guilt, or a plea of nolo contendere;
- (8) Practicing as a physical therapist or working as a physical therapist assistant when physical or mental abilities are impaired by the use of controlled substances, other habit-forming drugs, chemicals or alcohol;
- (9) Disciplinary action against a person licensed to practice as a physical therapist or physical therapist assistant by another state or territory of the United States for any acts or omissions that would constitute grounds for discipline of a person licensed in this state. A certified copy of the initial or final order or other equivalent document shall constitute prima facie evidence of a violation of this section and be sufficient grounds upon which to deny, restrict or condition licensure or renewal and/or discipline a person licensed in this state;
- (10) Engaging in sexual misconduct. "Sexual misconduct," for the purpose of this section, includes:
 - (A) Engaging in or soliciting sexual relationships, whether consensual or non-consensual, while a physical therapist or physical therapist assistant/patient relationship exists;

(B) Making sexual advances, requesting sexual favors, and engaging in other verbal conduct or physical conduct or physical contact of a sexual nature with patients;
and

(C) Intentionally viewing a completely or partially disrobed patient in the course of treatment, if the viewing is not related to patient diagnosis or treatment under current practice standards;

(11) Directly or indirectly requesting, receiving, or participating in the dividing, transferring, assigning, rebating or refunding of an unearned fee, or profiting by means of a credit or other valuable consideration, such as an unearned commission, discount, or gratuity in connection with the furnishing of physical therapy services. Nothing in this subdivision (11) prohibits the members of any regularly and properly organized business entity recognized by law and comprised of physical therapists from dividing fees received for professional services among themselves as they determine necessary to defray their joint operating expense. Physical therapists employed by or contracting with a physician, physician group, as defined in accordance with the federal Physician Self-Referral Law, codified in 42 U.S.C. § 1395nn, or entity primarily owned by physicians, and receiving wages or other compensation and/or benefits pursuant to the employment or contract, shall not be deemed to be in violation of any provision under this chapter solely by virtue of the employment or contract, and shall not be subject to licensure denial, suspension, revocation, or any other disciplinary action or other penalty described under this chapter solely by virtue of the employment or contract. This subdivision (11) shall not be interpreted in such a way as to create a prohibition on the corporate practice of any health care professional where no such prohibition previously existed;

(12) Failing to adhere to standards of ethics of the physical therapy profession;

(13) Charging unreasonable or fraudulent fees for services performed or not performed;

(14) Making misleading, deceptive, untrue or fraudulent representations in violation of this act, or otherwise, in practice of the profession;

(15) Being under a current judgment of mental incompetency rendered by a court of competent jurisdiction;

(16) Aiding or abetting a person not licensed in this state who directly or indirectly performs activities requiring a license;

- (17) Failing to report to the board any act or omission of a licensee, applicant, or any other person, which violates the provisions of this chapter;
- (18) Interfering with, or refusing to cooperate in, an investigation or disciplinary proceeding, including willful misrepresentation of facts or by the use of threats or harassment against any patient or witness to prevent the patient or witness from providing evidence in a disciplinary proceeding or any legal action;
- (19) Failing to maintain patient confidentiality without prior written consent or unless otherwise required by law;
- (20) Failing to maintain adequate patient records that contain a minimum of an evaluation of objective finding, a physical therapy treatment diagnosis, the plan of care including desired outcomes, the treatment record, a discharge plan including results of intervention, and sufficient information to identify the patient;
- (21) Promoting unnecessary devices, treatment intervention or service for the financial gain of the practitioner or of a third party;
- (22) Providing treatment intervention unwarranted by the condition of the patient, nor shall the licensee continue treatment beyond the point of reasonable benefit;
- (23) A violation or attempted violation, directly or indirectly, or assisting in or abetting the violation of or conspiring to violate, any provisions of this chapter or any lawful order of the board issued pursuant thereto, or any criminal statute of the state of Tennessee;
- (24) Division of fees or agreeing to split fees or divide fees received for professional services with any person for bringing or referring a patient, outside the scope of § 63-13-315; or
- (25) Payment or acceptance of commissions, in any form or manner, on fees for professional services, references, consultations, pathological reports, prescriptions, or on other services or articles supplied to patients.

[Acts 1999, ch. 528, § 23; 2006, ch. 875, § 3; 2007, ch. 115, § 10.]

63-13-313. Disciplinary actions of the board. —

The board may, upon proof of the violation of any provision of this chapter, take the following disciplinary actions singly or in combination:

- (1) Deny an application for a license to any applicant who applies for the same through reciprocity or otherwise;
- (2) Permanently or temporarily withhold issuance of a license;
- (3) Suspend, limit or restrict a previously issued license for such time and in such manner as the board may determine;
- (4) Issue a letter of reprimand;
- (5) Reprimand or take such action in relation to disciplining an applicant or licensee including, but not limited to, informal settlements and letters of warning as the board, in its discretion, may deem proper;
- (6) Revoke a license;
- (7) Refuse to issue or renew a license; or
- (8) Impose civil penalties for violation of this chapter pursuant to § 63-1-134. In addition, the board may, in its discretion, assess and collect the reasonable costs incurred in a disciplinary hearing, when action is taken against a person's license.

[Acts 1999, ch. 528, § 25; 2007, ch. 115, § 10.]

63-13-314. Administrative procedure of disciplinary actions — Jurisdiction of board. —

- (a) All proceedings for disciplinary action against a licensee shall be conducted in accordance with the Uniform Administrative Procedures Act, compiled in title 4, chapter 5.
- (b) The board retains jurisdiction to modify or refuse to modify, upon request of any party, any of its orders issued pursuant to this section.

[Acts 1999, ch. 528, § 26; 2007, ch. 115, § 10.]

63-13-315. Penalties. —

- (a) A person commits a Class B misdemeanor if the person engages in an activity requiring a license issued according to this chapter and who fails to obtain the required license, who violates any other provision of this chapter or who uses any word, title, or representation implying that the person is licensed to engage in the practice of physical therapy. A person claims to be a physical therapist when using a title, letters, or any description of services

- that incorporates one (1) or more of the terms, designations or abbreviations specifically restricted under §§ 63-13-103 and 63-13-310.
- (b)The board may authorize an investigation of any person to the extent necessary to determine if the person is engaged in the unlawful practice of physical therapy.
 - (c)The board may, through the office of the attorney general and reporter, apply for injunctive relief in any court of competent jurisdiction to enjoin any person from committing an act in violation of this chapter. Injunctive proceedings are in addition to, and not in lieu of, all penalties and other remedies prescribed in this chapter.
 - (d)A person who aids or requires another person to directly or indirectly violate this chapter or rules, who permits the person's license or a license issued by this board to be used by any person other than the licensee, or who acts with the intent to violate or evade this chapter or rules is subject to a civil penalty of not more than one thousand dollars (\$1,000) for each violation.

[Acts 1999, ch. 528, § 27.]

63-13-316. Peer assistance program — Fees. —

- (a)In lieu of a disciplinary proceeding as set forth in this chapter, the board may permit a licensee pursuant to this part to actively participate in a board approved peer assistance program under the following conditions:
 - (1)The board has evidence that the licensee is impaired;
 - (2)The licensee has not been convicted of a felony relating to a controlled substance in a court of law of the United States or any other territory or country;
 - (3)The licensee enters into a written agreement with the board for a restricted license and complies with all the terms of the agreement, including making satisfactory progress in the program and adhering to any limitations on the licensee's practice imposed by the board to protect the public. Failure to enter into such an agreement shall activate an immediate investigation and disciplinary proceeding by the board; and
 - (4)As part of the agreement established between the licensee and the board, the licensee shall sign a waiver allowing the peer assistance program to release information to the board if the licensee does not comply with the requirements of this section or is unable to practice with reasonable skill or safety.

(b)The board shall establish fees for all licensees to effect the purposes of this section.

[Acts 1999, ch. 528, § 28; 2007, ch. 115, § 10.]

63-13-317. Disclosures to patient — Confidentiality of information — Complaints — Display of license.

(a)Physical therapists shall inform the patient of any financial arrangements connected to the referral process.

(b)Physical therapists shall disclose in writing any financial interest in products they endorse and recommend to their patients.

(c)The licensee has the responsibility to ensure that the patient has knowledge of freedom of choice in services and products.

(d)Information relating to the physical therapist-patient relationship is confidential and may not be communicated to a third party not involved in that patient's care without the prior written consent of the patient. The physical therapist-patient confidentiality does not extend to cases in which the physical therapist has a duty to report information as required by law.

(e)Any person may submit a complaint regarding any licensee or any other person potentially in violation of this chapter. Confidentiality shall be maintained subject to law.

(f)The department shall keep all information relating to the receiving and investigation of complaints filed against licensees confidential until the information becomes public record as required by law.

(g)Each licensee shall display a copy of the licensee's license or current renewal verification in a location accessible to public view at the licensee's place of employment.

[Acts 1999, ch. 528, § 29.]

63-13-318. Board of physical therapy. —

(a)There is created a board of physical therapy, which shall perform the same functions and have the same duties and responsibilities that were performed by the committee of physical therapy prior to July 1, 2007.

(b)The board shall consist of five (5) members appointed by the governor, each of whom shall be a resident of this state. Three (3) members of the board shall be licensed physical

- therapists who have had at least five (5) years of experience in the actual practice or teaching of physical therapy immediately preceding their appointment. One (1) member of the board shall be a licensed physical therapist assistant who has had at least five (5) years of experience in the actual performance of physical therapy procedures and related tasks or teaching of a physical therapist assistant curriculum immediately preceding the appointment. One (1) member of the board shall be a person who is not engaged in the practice of physical therapy and who is not professionally or commercially associated with the health care industry.
- (c)The Tennessee Physical Therapy Association may submit to the governor a list of at least three (3) nominees for each appointment or vacancy to be filled pursuant to this section. The governor may make the appointment from the list.
- (d)The physical therapists and the physical therapist assistant who are serving on the committee of physical therapy on July 1, 2007, shall continue to serve as members of the board until the expiration of their terms.
- (e)The board shall organize annually and select a chair and a secretary. Meetings shall be held as frequently as may be required.
- (f)A quorum of the board shall consist of at least three (3) members.
- (g)The division shall provide administrative, investigatory, and clerical services to the board.
- (h)Each member of the board shall be reimbursed for actual expenses incurred in the performance of official duties on the board and shall be entitled to a per diem of one hundred dollars (\$100) for each day of service in conducting the business of the board. All reimbursement for travel expenses shall be in accordance with the comprehensive travel regulations promulgated by the department of finance and administration and approved by the attorney general and reporter.
- (i)All regular appointments to the board shall be for terms of three (3) years each. Each member shall serve until a successor is appointed. Vacancies shall be filled by appointment of the governor for the remainder of the unexpired term.
- (j)The governor may, at the request of the board, remove any member of the board for misconduct, incompetence, or neglect of duty.
- (k)In making appointments to the board, the governor shall strive to ensure that at least one (1) member is sixty (60) years of age or older, that at least one (1) member is a racial minority,

and that the gender balance of the board reflects the gender balance of the state's population.

(l)After July 1, 2007, the board shall assume and fulfill all powers and duties previously assigned to the committee of physical therapy, and the rules adopted by the committee of physical therapy shall become the rules of the board without further action by the board.

[Acts 2007, ch. 115, § 11.]