

## PRESIDENT'S MESSAGE

*Bruno U.K. Steiner, PT, DPT, LMT, RMSK*

## IMAGING SPECIAL INTEREST GROUP NEWSLETTER, SPRING 2024

*Bruno U.K. Steiner, PT, DPT, LMT, RMSK,  
President, Imaging SIG, AOPT*

**The APTA's Monumental Declaration Confirms the Role of Diagnostic Ultrasonography as Part of the Professional Scope of Physical Therapy Practice! – The Importance of Institutional Support in the Ongoing Advocacy of PT-administered Ultrasound Imaging and Physical Therapist-Directed Imaging Referral - I-SIG President's Message**

### *Cherished Members of the Mighty Imaging SIG!*

I have some huge news, folks, and it shows why the APTA's partnership with the AOPT's modest but brawling Imaging-SIG is essential. Membership, focus, intention, and attitude matter when you set your goals... I probably do not need to tell you that. When focusing on critical areas of external and internal resistance to our imaging-related goals, be they adversarial stakeholders/rivals or insecure, catastrophizing, and unfounded fearful narratives (some of which are oddly enough generated by our very own colleagues), sometimes we forget to leverage support with some low-hanging fruit, which may advance our agenda. I realized that there was a low-risk, high-reward (a metric that my dear colleague, Mark Krimmel, DPT, RMSK, deftly describes in his deliberations) and overlooked question, which remained unasked. And I needed the APTA brass for a declarative response!

*That question pertained to  
PT-administered ultrasonographic imaging.*

Up to this year, there had been an "assumed" or "intimated" notion that Physical Therapists 'should be able to,' or are 'naturally suited' to the use of musculoskeletal ultrasonography (MSKUS), given our intense educational and professional focus as neuro-musculoskeletal experts in the evaluation and conservative care of our public. Yet, the only language that explicitly entertained the notion, taken from our very own AOPT webpage (<https://www.orthopt.org/content/special-interest-groups/imaging/msk-ultrasound-education-and-credentialing>). While impressive and informative, the document extols the trilateral efforts of the APTA, the gold-standard credentialing body of Inteleos and its offshoot credentialing academies of the APCA (Alliance for Physician Advancement) and POCUS (Point-of-Care US Academy), as well as the supremely important AIUM (American Institute of Ultrasound in Medicine), it stops short at encouraging and exploring physical therapists participation in sonographic imaging. **It does not explicitly state, "Yes, MSKUS is part of your practice!"**

Also available on the AOPT website:

### ***MSK Ultrasound Education and Credentialing Pathway for Education in Diagnostic Ultrasound in Working Toward the RMSK***

*The American Institute for Ultrasound in Medicine (AIUM), Inteleos, and APTA (through the AOPT and Imaging SIG) are working cooperatively to expand the expert utilization of diagnostic ultrasound in physical therapist practice. Part of this effort is establishing an educational pathway consistent with meeting the prerequisites for earning the Registered in Musculoskeletal Sonography (RMSK) credential.*

*The following description of the cooperative agreement has been agreed upon by all three organizations:*

*The American Physical Therapy Association, the American Institute of Ultrasound in Medicine, and Inteleos are committed to a collaborative effort to support the education, performance, certification, and accreditation of physical therapists and their practices in the field of musculoskeletal ultrasound. A structured pathway of education and training will provide physical therapists with quality opportunities to advance their proficiency. By successfully completing the pathway, they can earn the Registered in Musculoskeletal (RMSK) sonography certification and improve their practice's eligibility for AIUM practice accreditation. The combined effort of APTA, AIUM, and Inteleos will help bridge the gap for physical therapists in their pursuit of individual competency and practice accreditation.*

*The resources available from AIUM consistent with the prerequisites for earning the RMSK are published on AIUM's website at: [AIUM Learning : Product Catalog: American Institute of Ultrasound in Medicine](#). Thus, practitioners interested in developing greater depth of knowledge of ultrasonography in practice and working toward meeting the pre-requisites of the RMSK credential are encouraged to become members of AIUM and undertake a self-study plan including these educational resources.*

*Also accompanying is the link to Inteleos, the credentialing body offering the RMSK, with information descriptive of all the requirements to be eligible for the RMSK. Physical therapists earning the RMSK credential is extremely important to the overall imaging in physical therapist practice effort. We can validate our expertise with external entities and strengthen our position for improving reimbursement for diagnostic ultrasound with increasing numbers of qualified physical therapists.*

*All relevant information is available at: <http://www.apca.org/msk>*

*If you have any questions, please contact the APCA Customer Care department via email at [other@APCA.org](mailto:other@APCA.org) or call 1-800-943-1709 ext. 1 Monday through Friday between 9:00am and 4:00pm ET.*

*Additional information on AIUM is available at: <https://www.aium.org/>*

Normally, I revel in text construction that is both **general and non-specific** in narrative, context, and content. For example, I LOVE the spirit and intent of the silent practice act, as it allows breathing room for our ever-evolving profession. Whenever we start specifically 'listing' practice items, I argue that we are implementing naïve language through unprepared legislative approaches that risk putting our profession in a legal straightjacket... and boy, are we good at it, much to the howling derision of laughter from our rivals.

Thanks to all our pioneers who have tried legislative and state board ruling attempts, we have a much clearer picture of what works well, works kinda sorta (but falls short), and, contrarily, shoots us in the beloved metatarsals. It comes down to knowing your audience or adversary and anticipating the possible response to calibrate your approach and question for the desired result.

### Why did the Imaging SIG approach this at this time?

A couple of my dear colleagues in Utah were seeking institutional approval to use Point-of-Care MSKUS for screening purposes. With a characteristic PT-nice-guy approach, they asked permission from an uninformed management structure. My colleagues already had portable US devices and no explicit restrictions from their practice act. Heck, MSKUS as a diagnostic tool was declared standard-of-care in their specialty, where physical therapists were described as well-suited for the acquisition and interpretation of MSKUS images by physicians and radiologists alike. However, frustratingly, management wanted to see explicit approval for their practice act in this case, even though physical therapists have full imaging referral privileges in Utah.

Quelleummer... (translation: Really? sigh... sound of eyeballs rolling).

I decided to look at the Utah PT Practice Act and found that the language included:

- (10)(a) "Physical therapy" or "physiotherapy" means:
  - (i) examining, evaluating, and **testing** an individual who has a physical impairment or injury;
- (13) (a) "**Testing**" means a standard method or technique used to gather data regarding a patient that is generally and **nationally accepted by physical therapists for the practice of physical therapy.**

I felt that this language had the right balance of silent and explicit and that the APTA represented a 'nationally accepted body' to declare MSKUS as an accepted evaluative tool. However, I was disappointed that there wasn't an explicit declaration regarding MSKUS from the APTA, even though there was APTA House of Delegate language that certainly allowed for it.

But the situation at hand, and in anticipation of future fracas with our rivals and uniformly uninformed combatants, demanded the clarion call of clarification with the total weight of our association and Academy.

However, our profession's use of ultrasound imaging has evolved; physical therapists are not only using ultrasound imaging for MSKUS. We are using it for vascular, cardiovascular, and pulmonary applications. We use it for women's and men's pelvic health and rehabilitation. We are using it for neuromuscular corroboration in clinical electrophysiological applications. This is a classic example of how a question has to be crafted to accommodate an expanded vision.

Based on the successes of our distinguished colleagues, Aaron Keil and James Dauber's State Board inquiries, I decided to craft a question for the APTA.

First off, DON'T just ask a 'naked' or 'vulnerable' question! I can't bare them anymore (intentional misspelling and Dad pun). By that, I am referring to a 'mother-father, may I' question to a physical therapist state board member, such as "May we use Dx US?" or the equally ineffective and self-sabotaging question "Is Dx US in our scope of practice?" or "Is imaging referral within our scope of practice?" etc, and all without context, information. Ultimately, dear member, it's an intellectually lazy way for the evidence-based practitioner to ask a question. With such inartful phraseology, we are, in effect, asking the busy board members to perform a literature review to deliberate on an issue that requires much information and thoughtfulness. I don't need to tell you that it is much more likely that they won't, relying on potentially uninformed narratives that should be significantly updated with current evidence.

Seriously, ask yourself if they will perform a thorough, dispassionate legal review given the diminishing hours in the day, week, or year to come up with a response for you. The overwhelming reality is that the board member will look at the practice act and look at every line item only to conclude that imaging or Dx US doesn't appear, and therefore conclude that Evaluative or Dx US or imaging referral is NOT part of our respective practice acts. So, I say to everyone who doesn't work on their game prep at this time:

"Aww, c'mon, man! You're better than that! PLEASE RESIST THE TEMPTATION and consult us first!"

### *Try to model your question with an informative analysis*

**In counterpoint, endeavor to prepare and advance your inquiry, modeling it after successfully executing approaches. The intent of any question should:**

1. Be informative to the reader
2. Provide context for the question... a preamble of sorts
3. Cite supportive evidence
4. Provide evidence of institutional support
5. Then, ultimately, pose the question

For any **given state board inquiry**, the question should address whether PT-imaging referral or Dx-US (or Evaluative US) is **explicitly prohibited**. Depending on the individual board member's bias, asking whether it is expressly in the scope of practice is risky. You may have a mix of board members open to adopting applicable and practice-modernizing technology and techniques. Still, you may be countered by retrograde attitudes that prevent physical therapists from leveraging their true public-health-benefitting potential.

Knowing that the APTA has a modern appreciation of our professional realities, I, as an exception to my rule, committed to an explicit question because I KNEW what the response would be. AND, AND, AND I addressed **Dx Ultrasound generally, not just MSKUS!**

The question was directed to Senior Vice President, Scientific Affairs, Dr. Tara Jo Manal, PT, DPT, FAPTA, on December 12, 2023:

Dear Tara,

Physical therapists increasingly use diagnostic ultrasound imaging for evaluative and rehabilitative purposes in specializations, including orthopedics (MSKUS), pelvic health, and cardiovascular/pulmonary disciplines. Relevantly, the gold standard credentialing body of sonography, Inteleos' Alliance for Physician Credentialization and Advancement (APCA), recognizes Physical Therapist eligibility to sit for the Physician credential of the RMSK. Inteleos' Point of Care Ultrasound Academy (POCUS) also recognizes Physical Therapists to certify for all their curricula and certification, including Cardiovascular/pulmonary, Vascular, Pelvic, upper, and lower extremity musculoskeletal. Additionally, the American Institute of Ultrasound in Medicine (AIUM) recognizes physical therapists as *licensed medical providers of Musculoskeletal ultrasound*.

The APTA already recognizes imaging as being within the scope of practice of a licensed physical therapist. The APTA's official policy is explained in its House of Delegates' position statement HOD P06-12-10-09 concerning 'Diagnosis by Physical Therapists' which states:

*"When indicated, Physical Therapists order appropriate tests, including but not limited to **imaging** and other studies, that are performed and interpreted by other health professions. **Physical Therapists may also perform or interpret selected imaging or other studies.**"*

Furthermore, The FSBPT's *Model Practice Act for Physical Therapy, 7th edition*, states that the practice of physical therapy means determining a diagnosis and plan of intervention and **referring** patients/clients *"to other healthcare providers and facilities for services and testing to inform the physical therapist plan of care."*

Given that the HOD position statement explicitly states that physical therapists may also *perform or interpret selected imaging or other studies*, and the FSBPT's acknowledgment of the diagnostic role of the Physical Therapist, I am asking:

***Is the use of ultrasound imaging for evaluative, diagnostic, and rehabilitative purposes in the scope of physical therapy practice?***

I appreciate your time and due diligence in this query,

Kindest regards,

Bruno

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Physical Therapy and MSKUS Program Manager,  
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## RECAP OF EVIDENCE SUBMITTED TO QUERY DOCUMENT:

1. **The American Physical Therapy Association (APTA):** The APTA already recognizes imaging as being within the scope of practice of a licensed physical therapist. The APTA's official policy is explained in its House of Delegates' position statement HOD P06-12-10-09 concerning 'Diagnosis by Physical Therapists,' which states:  
*"When indicated, Physical Therapists order appropriate tests, including but not limited to **imaging** and other studies that are performed and interpreted by other health professions. **Physical Therapists may also perform or interpret selected imaging or other studies.**"*
2. **The Federation of State Boards of Physical Therapy:** The FSBPT's *Model Practice Act for Physical Therapy, 7th edition*, states that the practice of physical therapy means determining a diagnosis and plan of intervention and **referring** patients/clients *"to other healthcare providers and facilities for services and testing to inform the physical therapist plan of care."*  
The *Model Practice Act* defines "testing" as:  
22. "Testing" means standard methods and techniques used to gather data about the patient/client, including but not limited to **imaging**, electrodiagnostic and electrophysiologic tests and measures.
3. **The American Institute of Ultrasound in Medicine (AIUM) recognizes physical therapists as licensed medical providers of Musculoskeletal ultrasound.** The AIUM, the home of the *Journal of Ultrasound in Medicine*, is a multidisciplinary association dedicated to advancing the use of ultrasound in medicine through professional and public education, research, development of guidelines, and accreditation.
4. **Alliance for Physician Certification and Advancement (APCA) and the Point-of-Care Ultrasound Certification Academy (POCUS):** Physical therapists are recognized providers of musculoskeletal ultrasonography by the Inteleos Foundation family of certification alliances: the Alliance for Physician Certification and Accreditation (APCA), the American Registry of Diagnostic Medical Sonographers (ARDMS), and the Point-of-Care Ultrasound Certification Academy (POCUS). Pertinently, physical therapists are eligible for the gold-standard physician's board certification of the APCA-conferred RMSK distinction, which many physical therapists have achieved, as well as the POCUS certifications in MSKUS and other point-of-care applications.

On January 19, 2024, Doctor Manal, as witnessed by APTA Vice President of Governmental Affairs Justin Elliott, and APTA Vice President of Practice Dr. Anita Bemis-Dougherty, released the following declarative statement:

*Dear Dr. Steiner,*

***Thank you for your inquiry to APTA about whether APTA recognizes ultrasound imaging for evaluative, diagnostic, and rehabilitative purposes as part of the professional scope of the***

**physical therapy practice. APTA does recognize ultrasound imaging as part of the physical therapy professional scope of practice for physical therapists who have the training and competency to perform it, and so in accordance with the laws of the jurisdiction in which they practice.**

Within the APTA position on *Diagnosis by Physical Therapists*, imaging is specifically mentioned: “When indicated, physical therapists order appropriate tests, including but not limited to imaging and other studies, that are performed and interpreted by other health professionals. Physical therapists may also perform or interpret selected imaging or other studies.

Imaging is also included in the *Guide to Physical Therapist Practice 4.0 in Chapter 1*

(Roles) and in *Chapter 4 (Diagnosis)*:

### **Roles Across the Continuum and Through the Life Span**

Physical therapists provide essential services designed to help address many

personal health needs across the continuum of services and throughout the life span,

including:

- Access to services for health conditions.
- Direct access and primary care.
- Administer tests, such as (e.g., imaging and nerve conduction velocities) to aid in the diagnostic process.
- Habilitation and rehabilitation.
- Performance enhancement.
- Prevention and risk-reduction services.
- Direct-to-employer physical therapist services

### **Diagnosis**

In carrying out the diagnostic process, physical therapists may conduct tests such as musculoskeletal ultrasound or EMG. Musculoskeletal ultrasound and electromyography/nerve conduction testing are tools that are within the professional scope of practice for physical therapists. These tests can be helpful in establishing a more specific diagnosis that in turn can assist in the development of appropriate interventions, which can include referring for further medical evaluation. Physical therapists also can refer to other health professionals for additional testing.

In addition, APTA and AOPT have enjoyed a very strong collegial relationship with Inteleos, AIUM, and the Alliance for Physician Certification and Advancement (APAC) in the area of musculoskeletal diagnostic ultrasound certification since 2021. In 2021, a formal memorandum of understanding was signed by all entities with specific deliverables. All of the deliverables that were outlined have been met. AOPT, APTA, APCA, AIUM, and Inteleos have information on their websites about physical therapists and RMSK. The AIUM training guidelines include physical therapists:

[https://www.aium.org/resources/training-guidelines/view/training-guidelines-forlicensed-medical-providers-\(pa-np-nmw-dpt-and-dc\)-who-evaluate-and-interpret-diagnostic-ultrasound-examinations](https://www.aium.org/resources/training-guidelines/view/training-guidelines-forlicensed-medical-providers-(pa-np-nmw-dpt-and-dc)-who-evaluate-and-interpret-diagnostic-ultrasound-examinations)

I hope this information is helpful. Thank you for being a member of APTA.

All the best,

Tara

Tara Jo Manal, PT, DPT, FAPTA

Senior Vice President, Scientific Affairs

American Physical Therapy Association

Alexandria, VA

Et Voila! (translation... Boom!... just like that!... with a hint of ‘yay, Imaging SIG!’ ... emoji high-fives all around)

There may have been a touch of obviousness in the general ask and declaration, but do NOT underestimate the full weight of the APTA, the stout branches of the AOPT, and the howlings of the Imaging SIG.

I am going to leave you here on that note. Just in case you suffered the FOMO from not attending CSM 2024, I will be releasing a webinar recap of the in-person Imaging SIG meeting in the next couple of months, which took place in Boston on February 17th, 2024.

Thanks for your attention, you wonderful Physical Therapy diagnostic ultrasound imagers and Physical Therapy imaging referral aspirants. I will say it again. Continue to beat the deafening drums for autonomous modern physical therapy practice, proudly proclaim our unique skill sets to all-comers, and do NOT shrink in the face of false narratives and misinformed mischaracterizations.

Play nice, but do not back down... The evidence is clear and supports our vision... so repeat after me.

Represent and educate! No more self-sabotage! No more lazy inquiries! We are better than that!

Let’s talk with the I-SIG.

We got this!

Bruno Steiner, PT, DPT, LMT, RMSK

President of the Mighty Imaging SIG

Doctor of Physical Therapy

Registered Diagnostic Musculoskeletal Sonographer

Physical Therapy and MSKUS Program Manager

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## Have you checked out AOPT's YouTube Channel?

**The Imaging SIG has the following content available for you to view:**

- Revolutionizing PT: The Power of MSKUS & PT Imaging Referral
- The World of PT Imaging Referral
- DPT Imaging Education
- Imaging for PTs Passed! Now What? the ND Experience