

**APPLICATION FOR LICENSED PHYSICAL THERAPIST
 AND PHYSICAL THERAPIST ASSISTANT**

Authority: 1978 PA 368

Name (First, Middle, Last)		10-Digit MI Permanent ID/License Number (If Applicable)	
US Social Security # (New Applicants Only)		Date of Birth (New Applicants Only)	
Address			
City	State	Zip Code	Country
Telephone Number		Email Address	
List any other name or alias by which you have ever been known, including maiden name, if applicable: _____			

CHECK THE LICENSE/OBTAINED BY METHOD	FOR OFFICE USE ONLY	
P.T.A. – By Endorsement	\$136.35	5502-09
P.T.A. – By Exam	\$136.35	5502-01
P.T.A. – Relicensure	\$156.35	5502-06
P.T. – By Exam	\$136.35	5501-01
P.T. – By Endorsement	\$136.35	5501-09
P.T. – Relicensure	\$156.35	5501-06
<p>Your check or money order, drawn from a U.S. financial institution and made payable to the STATE OF MICHIGAN, must accompany this request. DO NOT SEND CASH. Fees are non-refundable.</p>		
	License Number	Issue Date

**Professional Education
(Attach additional sheets if necessary)**

Name of School	Name of Education Program

License(s) in Other State(s) and/or Country

List each state or country where you have ever held a physical therapist/physical therapist assistant license, the license or registration number, the date issued, how the license was obtained, and whether sanctions have ever been imposed against that license or registration. *(Attach additional sheets as necessary)*

If you indicate there have been sanctions imposed against a license or registration, you must submit documentation that sanctions are not in force at the time of this application.

State/Country	Permanent License/Registration Number	Date of Issuance	How Obtained (Examination, Endorsement, or Compact)	Have You Ever Had Sanctions Imposed Against this License/Registration?

Good Moral Character Questions

If you answer “yes” to either of the next two questions, you must submit documentation which shows at the current time you have the ability to, and are likely to, serve the public in a fair, honest, and open manner, that you are rehabilitated, or that the substance of the former offense is not reasonably related to the occupation or profession for which you are seeking a license. Documentation may include certificate of employability, if applicable.

Have you ever been convicted of a felony? Yes No

Have you ever been convicted of a misdemeanor punishable by imprisonment for a maximum term of two years a misdemeanor involving the illegal delivery, possession, or use of alcohol or a controlled substance? Yes No

Required Additional Documents:

All Applicants

- Upon review of your application, you will be mailed an Application Confirmation letter containing instructions to complete the Criminal History Check **(except those applicants seeking relicensure/reregistration, if the license/registration expired within the last three years).**
- All applicants for a physical therapist/physical therapist assistant license must take and pass the 25-question jurisprudence examination. The passing score on the exam is 75% (19/25). The jurisprudence examination is included in the application packet and must be completed and returned with your application and fee. The jurisprudence examination covers material that can be found in the Administrative Rules of the Michigan Board of Physical Therapy and in Article 15, parts 161 and 178 of the Michigan Public Health Code.

All Applicants Continued:

- Graduates of education programs **outside** the United States that are not CAPTE-accredited must have their physical therapy education evaluated using the Foreign Credentialing Commission on Physical Therapy (FCCPT) course work evaluation tool for PT's/PTA's. Evaluations may be completed by:
 - FCCPT - <http://fccpt.org> or Telephone: (703) 684-8406
 - International Consultants of Delaware, Inc. - <http://www.icdel.com> or Telephone: (215) 222-8454 Ext. 510
 - International Education Research Foundation, Inc. - <http://www.ierf.org> or Telephone: (310) 258-9451
- An applicant whose physical therapy educational program was taught in a language other than English shall satisfactorily complete the TOEFL (passing score is 570 on written examination or 230 on the computerized exam) and TSE (passing score is 50) examinations or the TOEFLibt (overall passing score of 89 or above). Required section scores on the TOEFLibt are:
 - Not less than 22 on the reading section
 - Not less than 22 on the listening section
 - Not less than 26 on the speaking section
 - Not less than 24 on the writing section
- Results of the above English examination(s) should be sent directly to this office from ETS. You can contact ETS at (609) 771-7100 or at their website at www.toefl.org (email: toefl@ets.org) to arrange to take these examinations or to have results sent to our office. The Institutional Code for physical therapy is 9715.

P.T./P.T.A. by Exam

- Graduates of CAPTE-accredited educational programs must arrange for a final, official transcript of your CAPTE approved physical therapist/physical therapist assistant education to be forwarded to this office directly from your education institution. Transcripts must bear the seal of the school and show a degree and date conferred.
- You are eligible to take the NPTE PT/PTA examination if you are in the final semester, term, or quarter of a CAPTE-accredited PT/PTA Program. The Michigan Board must receive an official letter directly from your PT/PTA Program stating you are in the final semester, term, quarter of your degree program and provides the date you are expected to graduate in order to make you eligible for the NPTE PT/PTA examination. Applicants who have graduated from a CAPTE-accredited educational program will be eligible to take the exam once their final, official transcripts are received.
- Applicants who graduated from a CAPTE-accredited **PTA** program before January 1, 2008, are not required to pass the NPTE PTA examination in order to obtain a Michigan PTA license. Applicants who graduated from a CAPTE-accredited program after January 1, 2008 and all applicants who did not graduate from a CAPTE-accredited program must pass the NPTE PTA examination in order to become licensed as a PTA in Michigan.
- Applicants for the NPTE PT/PTA examination must apply on-line with the Federation of State Boards for Physical Therapy at www.fsbpt.org. You will be sent an Authorization to Test for the NPTE **after** you have registered on-line for the exam and have been made eligible to test by the Michigan Board of Physical Therapy. FSBPT allows an individual to take the licensing examination a maximum of 3 times in any 12-month period.
- If you have already taken the NPTE PT/PTA examination, arrange for the results to be forwarded to this office directly from the FSBPT. You may email requests to scoretransfer@fsbpt.org or go on-line at www.fsbpt.org or call (703) 739-9420.
- Submit a certified passing score for the examination on state laws and rules related to the practice of physical therapy in the state of Michigan.

P.T./P.T.A. Endorsement

Applicants for licensure by endorsement who have been licensed in another state and have practiced as a physical therapist/physical therapist assistant for 5 years or more at the time of application must submit the following:

- Verification/certification of license to be submitted directly to this office by the licensing agency of any state or territory of the United States in which you hold a current license or ever held a license as a physical therapist/physical therapist assistant. Verification includes, but is not limited to, showing proof of any disciplinary action taken or pending disciplinary action imposed.
- Arrange for results of your NPTE PT/PTA passing examination scores to be forwarded to this office directly from the Federation of State Boards of Physical Therapy (FSBPT). The FSBPT website is www.fsbpt.org. FSBPT can also be reached by phone at (703) 739-9420 or email requests may be sent to scoretransfer@fsbpt.org.
- Submit a certified passing score for the examination on state laws and rules related to the practice of physical therapy in the state of Michigan.

Applicants for licensure by endorsement who have been licensed in another state and have practiced as a physical therapist/physical therapist assistant for LESS than 5 years at the time of application must also submit the following to the Michigan Board in addition to the above:

- Graduates of CAPTE-accredited educational programs must arrange for a final, official transcript of your CAPTE approved physical education to be forwarded to this office directly from your education institution. Transcripts must bear the seal of the school and show a degree and date conferred.
- Submit a certified passing score for the examination on state laws and rules related to the practice of physical therapy.

P.T./P.T.A. Relicensure

Applicants for relicensure whose license has been lapsed for LESS than 3 years at the time of application must submit the following:

- Verification/certification of license to be submitted directly to this office by the licensing agency of any state or territory of the United States in which you hold a current license or ever held a license as a physical therapist assistant. Verification includes, but is not limited to, showing proof of any disciplinary action taken or pending disciplinary action imposed.
- Submit a certified passing score for the examination on state laws and rules related to the practice of physical therapy in the state of Michigan.

Applicants for relicensure whose license has been lapsed for MORE than 3 years at the time of application must submit the following:

- Verification/certification of license to be submitted directly to this office by the licensing agency of any state or territory of the United States in which you hold a current license or ever held a license as a physical therapist assistant. Verification includes, but is not limited to, showing proof of any disciplinary action taken or pending disciplinary action imposed.
- Submit a certified passing score for the examination on state laws and rules related to the practice of physical therapy in the state of Michigan.
- You must also satisfy one of the following requirements:
 - a. Submit proof of at least 500 hours of employment as a physical therapist/physical therapist assistant in another jurisdiction recognized by the Federation of State Board of Physical Therapy (FSBPT) during the two-year period immediately preceding the application for relicensure. An official letter from the employer or a copy of pay or tax records are acceptable proof.

OR

- b. Take and pass the National Physical Therapy Examination (NPTE).

- (1) All applicants for the NPTE must apply on-line. Information about exam dates and deadlines as well as the on-line application and payment process is available at www.fsbpt.org. The NPTE is a computerized exam that is offered four times a year at various testing sites. The *NPTE Candidate Handbook* is available at www.fsbpt.org and provides complete exam information and instructions.
- (2) You will receive an Authorization to Test from the FSBPT after registering with them for the NPTE and being made eligible for the exam by the Michigan Board. The Authorization to Test will include information about how to schedule your examination at a testing center.

CERTIFICATION AND SIGNATURE

I understand that it is the policy of this agency to secure a criminal conviction history as part of the pre-licensure screening process. I authorize this agency to use the information provided in this application to obtain a criminal conviction history file search from the Federal Bureau of Investigation, Central Records Division of the Michigan Department of State Police, law enforcement, or judicial record-keeping organization. I consent to the release of information regarding a disciplinary investigation conducted by a similar licensure, registration, or specialty licensure or specialty certification board of this or any other state, of the United States military, of the federal government, or of another country.

I certify that the statements in this application are true and complete. I understand that any omitted statement, misrepresentation, or fraud may be cause for denial of my application, disciplinary action, or may be punishable by law. I further attest that I have a written policy for protecting, maintaining, and providing access to my medical records in accordance with Section 16213 of the Public Health Code, 1978 PA 368, MCL 333.16213, and for complying with Section 16213 in the event that I sell or close my practice, retire from practice, or otherwise cease to practice under Article 15 of the Public Health Code, 1978 PA 368, MCL 333.16101 to 333.18838.

Further, if I am applying for relicensure and sign below, I certify that I have completed the required number of continuing education credits.

Signature

Date

PHYSICAL THERAPIST JURISPRUDENCE EXAM

Authority: 1978 PA 368

Please clearly circle your answers for each test questions. The passing score is 75%

INSTRUCTIONS: Clearly print the information requested. You may reference Article 15 of the Michigan Public Health Code and the Board of Physical Therapy’s Administrative Rules to determine your answers. These resources can be found at the following links:

<http://legislature.mi.gov/doc.aspx?mcl-368-1978-15> and http://w3.lara.state.mi.us/orr/Files/AdminCode/1124_2012-116LR_AdminCode.pdf.

Please sign the certification statement at the end of the examination. Return this exam to the State of Michigan at the address provided above.

Applicant's LAST Name	FIRST Name	Middle Initial	Date of Birth (MM/DD/YYYY)
<p>1. In Michigan, the practice of physical therapy is regulated by:</p> <ul style="list-style-type: none"> A. Federation of State Boards of Physical Therapy B. Department of Licensing and Regulatory Affairs (Department) and the Michigan Board of Physical Therapy C. American Physical Therapy Association D. Michigan Physical Therapy Association 			
<p>2. The actual physical license for a physical therapist MUST be:</p> <ul style="list-style-type: none"> A. Displayed in a prominent place, visible to the public with notice of any limitations, if applicable B. Kept in a facility’s personnel department for safe-keeping C. Stored in a sheet protector for protection D. Turned in to the Department when filing for license renewal 			
<p>3. A physical therapist licensee MUST notify the Department of a change of mailing address within how many days of the change?</p> <ul style="list-style-type: none"> A. 14 B. 21 C. 30 D. 60 			
<p>4. Which of the following is FALSE regarding the Department’s service of a complaint upon a licensee?</p> <ul style="list-style-type: none"> A. The licensee has 30 days from the date of receipt to respond in writing to the complaint B. If the complaint is served by United States Post to the licensee’s last known address, the service is effective 3 days after the date of mailing and non-delivery does not affect the validity of service C. If the licensee ignores the complaint, no sanctions will be imposed D. A failure to respond in writing with 30 days results in the allegation(s) in the complaint being treated as true and disciplinary subcommittee imposing appropriate sanction(s) 			

NAME:

5. A record for each patient shall be maintained for a minimum of how many years?

- A. 2 years
- B. 5 years
- C. 7 years
- D. 10 years

6. Which of the following is an **EXCEPTION** to the requirement that a licensee notify the Department if he or she has knowledge that another licensee violated Michigan's Public Health Code?

- A. The licensee obtained knowledge of the violation while providing professional services
- B. The licensee obtained the knowledge by serving on an ethics or peer review committee of a professional organization
- C. The licensee is serving on a committee assigned a professional review function in a health facility or agency
- D. All of the above

7. A licensee shall notify the Department of a conviction within how many days of the conviction?

- A. 14 days
- B. 30 days
- C. 60 days
- D. Before the next renewal

8. A summary suspension of a license is required in all of the following circumstances **EXCEPT**:

- A. The licensee is convicted of a felony
- B. The licensee is convicted of a misdemeanor punishable by imprisonment for a maximum of 2 years
- C. The licensee leaves the country and is living abroad
- D. The licensee is convicted of a misdemeanor involving the illegal delivery, possession or use of a controlled substance.

9. Which of the following are violations that allow the Board's Disciplinary Subcommittee to impose sanctions against a physical therapist's license?

- A. Incompetence
- B. Practicing outside the scope of a license
- C. False or misleading advertising
- D. Failure to comply with the Medical Records Access Act
- E. All of the above

10. The Department publishes a list of disciplined licensees and send the list to all of the following **EXCEPT**:

- A. Department of Insurance and Financial Services
- B. Professional Associations
- C. State and federal agencies that fiscally administer federal health care programs
- D. Local law enforcement agencies

11. Which of the following is a required for acceptance into the Health Professional Recovery Program?

- A. The health professional acknowledges his or her impairment
- B. The health professional agrees to participate in a treatment plan
- C. The health professional voluntarily withdraws from, or limits the scope of his or her practice, as determined necessary by the Health Professional Recovery Committee
- D. All of the above are true

NAME:

12. An individual who practices physical therapy without a license or under a suspended, revoked, lapsed, or void license, or outside of the provisions of a limited license, is guilty of which of the following:

- A. A felony
- B. A misdemeanor
- C. Perjury
- D. A civil infraction

13. In Michigan, the scope of practice for a physical therapist allows a physical therapist to do all of the following **EXCEPT**:

- A. Prevent a mental disability
- B. Correct a physical condition
- C. Diagnose a medical condition
- D. Alleviate a physical condition

14. In Michigan, a physical therapist may use all of the following physical measures **EXCEPT**:

- A. Cold
- B. Sound
- C. Radiation
- D. Electricity
- E. Water

15. In Michigan, physical therapy includes all of the following **EXCEPT**:

- A. Treatment planning
- B. Performance of tests and measures
- C. Consultative services
- D. Initiation and interpretation of referrals
- E. Prescribing medication

16. All of the following licensed health professionals may issue a prescription for physical therapy **EXCEPT** a/an:

- A. Chiropractor
- B. Medical Doctor
- C. Osteopathic Physician
- D. Dentist
- E. Podiatrist

17. Which of the following words, titles, or letters, is restricted for use only by persons holding a physical therapist license?

- A. Physiotherapist
- B. M.P.T.
- C. L.P.T
- D. Physical Therapist
- E. All of the above

18. When choosing a delegate an act, task or function to an individual, which of the following should be a consideration?

- A. The individual's education
- B. The individual's training
- C. The individual's experience
- D. The level of supervision required
- E. All of the above

NAME:

19. General "supervision" requires all of the following **EXCEPT**:

- A. The continuous availability of direct communication
- B. A review of the practice of the supervised individual
- C. Further education on the supervised individual's performance
- D. The supervisor giving the supervised individual a grade

20. A physical therapist delegates a task to an individual under direct-on-site supervision and the individual negligently performs the task. Which of the following statements is **TRUE**?

- A. The individual is not responsible
- B. The physical therapist's license may be disciplined
- C. The physical therapist is not responsible since the task was performed by another individual
- D. The physical therapist is not responsible since he or she delegated the task

21. Which of the following statements is **FALSE** regarding the delegation of duties?

- A. Any acts, tasks or functions delegated to an unlicensed individual shall be performed under the direct, on-site supervision of the physical therapist
- B. The physical therapist shall maintain a record of names of physical therapist assistants and unlicensed individuals to whom he or she delegates acts, functions or tasks
- C. The physical therapist must examine and evaluate a patient or client prior to delegating acts, tasks or functions.
- D. In an emergency, the physical therapist is not required to adhere to the standards

22. A physical therapist shall not supervise more than how many physical therapist assistants at the same time?

- A. 2
- B. 3
- C. 4
- D. 5

23. A physical therapist may not supervise more than how many unlicensed individuals at one time:

- A. 1
- B. 2
- C. 3
- D. 4

24. A written prescription or electronic order for physical therapy must include all of the following **EXCEPT**:

- A. Patient's name
- B. Patient's diagnosis
- C. Patient's prognosis
- D. Authorized prescriber's signature
- E. Date the prescription was written

25. Which of the following is **NOT** prohibited conduct?

- A. Soliciting or engaging in a sexual relationship with a current patient or client
- B. Engaging in harassment or unfair discrimination based on age, gender, gender identity, race, ethnicity, national origin, religion, sexual orientation, disability, or any basis proscribed by law
- C. Failing to adhere to the patient schedule
- D. Practicing outside of the boundaries of professional competence based on education, training and experience
- E. Taking advantage of a professional relationship to further his or her personal interest.

NAME:

26. How many Professional Development Requirement (PDR) credits are required for renewal of a physical therapist license in a two year renewal cycle?

- A. 12
- B. 24
- C. 30
- D. 18

27. Which of the following is **NOT** an approved PDR activity?

- A. A continuing education course offered by an approved organization
- B. Reading an article related to the practice of physical therapy in a professional or scientific journal
- C. Performing volunteer work related to the field of physical therapy without reimbursement for a public or nonprofit entity
- D. Identifying, researching and addressing an event or issue related to professional practice
- E. None of the above – All the listed items are approved PDR activities

28. Which of the following is **FALSE** regarding the PDR credits required for license renewal?

- A. At least 1 PDR credit shall be earned in the area of pain and symptom management
- B. No more than 12 PDR credits may be earned in the 24 hour prior
- C. All PDR credits may be earned by attending approved continuing education programs under Activity Code 1
- D. A licensee may not earn PDR credit for a continuing education program or activity that is identical or substantially similar to a program or activity for which the licensee has already earned credit for during that renewal period

I certify that I am the applicant whose signature appears below and that the answers provided on this examination are mine alone. Because of the confidential nature of this examination, I agree that I will not copy or retain examination questions, nor transmit them in any form to any other person or entity.

I further certify that I personally conducted my own research to obtain the answers to this examination. I acknowledge that my responses to this examination may be used as evidence in any proceedings concerning my license.

Signature of Applicant

Date



PHYSICAL THERAPIST ASSISTANT JURISPRUDENCE EXAM

Authority: 1978 PA 368

Please clearly circle your answers for each test questions. The passing score is 75%

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- D. The licensee is convicted of a misdemeanor involving the illegal delivery, possession or use of a controlled substance.

9. Which of the following are violations that allow the Board's Disciplinary Subcommittee to impose sanctions against a physical therapist assistant's license?

- A. Negligence
- B. Practicing outside the scope of a license
- C. Lack of good moral character
- D. Conviction of a misdemeanor that is reasonably related to or that adversely affects the licensee's ability to practice
- E. All of the above

10. Which of the following is **TRUE** regarding "incompetence" in a licensed health profession in Michigan:

- A. It means a departure from, or failure to conform to minimal standards of acceptable and prevailing practice
- B. It does not matter if actual injury to an individual occurs
- C. It may result in a sanction against the license
- D. All of the above

11. The Department publishes a list of disciplined licenses and send the list to all of the following **EXCEPT**:

- A. Department of Insurance and Financial Services
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- A. The continuous availability of direct communication
 - B. A review of the practice of the supervised individual
 - C. Further education on the supervised individual's performance
 - D. The supervisor giving the supervised individual a grade

17. A physical therapist delegates a task to a physical therapist assistant and the physical therapist assistant negligently performs the task. Which of the following statements is **TRUE**:
- A. The physical therapist assistant is not responsible because it was the physical therapist who delegated the task
 - B. Both the physical therapist and the physical therapist assistant may have their license sanctioned depending on the facts
 - C. Neither the physical therapist nor the physical therapist assistant are responsible because it was a delegated task
 - D. The physical therapist is not responsible since he or she delegated the task

NAME:

18. Which of the following is **NOT** prohibited conduct?

- A. Soliciting or engaging in a sexual relationship with a current patient or client
- B. Engaging in harassment or unfair discrimination based on age, gender, gender identity, race, ethnicity, national origin, religion, sexual orientation, disability, or any basis proscribed by law
- C. Failing to adhere to the patient schedule
- D. Practicing outside of the boundaries of professional competence based on education, training and experience
- E. Taking advantage of a professional relationship to further his or her personal interest.

19. How many Professional Development Requirement (PDR) credits are required for renewal of a physical therapist assistant license in a two year renewal cycle?

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- B. 24
- C. 30
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20. Which of the following is **NOT** an approved PDR activity?

- A. A continuing education course offered by an approved organization
- B. Reading an article related to the practice of physical therapy in a professional or scientific journal
- C. Performing volunteer work related to the field of physical therapy without reimbursement for a public or nonprofit entity
- D. Identifying, researching and addressing an event or issue related to professional practice
- E. None of the above – All the listed items are approved PDR activities

I certify that I am the applicant whose signature appears below and that the answers provided on this examination are mine alone. Because of the confidential nature of this examination, I agree that I will not copy or retain examination questions, nor transmit them in any form to any other person or entity.

I further certify that I personally conducted my own research to obtain the answers to this examination. I acknowledge that my responses to this examination may be used as evidence in any proceedings concerning my license.

Signature of Applicant

Date