President’s Message

“Never believe that a few caring people can’t change the world, for, indeed, that’s all who ever have.” -Margaret Mead

The message I wish to deliver to you as your President in this issue of the Bayou Bulletin harkens back to the real and only reason we all became physical therapists or physical therapist assistants. It's so very simple, because we care. We care about our patients and we want the best possible outcomes for them: reduced or eliminated pain, improved function and performance, decreased fall risk, the ability to age gracefully. We care about our profession, which we all view as the route we have chosen in order to effect the change and those positive outcomes in our patients.

In reviewing the above quote from Margaret Mead, we therapists are the few caring people to whom she is referring. All the battles we are currently fighting on Capitol Hill (therapy cap reform chief among them) and in our legislature (direct access to our services for our deserving patients) boil down to the fact that we as individuals and as a profession truly do care about our patients. We want our patients to get the best care, as quickly as possible, without limitations of time or money. Isn’t that true? Don’t we know that we can help them if we are not so constrained?

Louisiana was the 38th state to achieve direct access. We do have a limited form of direct access here; we can evaluate and treat with a 90-day prescription or diagnosis. This was achieved in 2003 after over 14 years of hard work and over $125,000 in funds raised by caring therapists along the way to communicate our message. Do you utilize the existing form of direct access we already have?

(continued on page 5)

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LPTA MEMBERSHIP

Please continue to encourage your fellow PTs, PTAs and students to join or renew their APTA/LPTA membership!
“Each One Reach One!”

Active members
Current 760

Life Members
Current 31

Students
Current 260

PTAs
Current 89

Total
Current 1,140

Happy Holidays from your favorite face in the LPTA!

Bayou Bulletin Publisher Information

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UPCOMING EVENTS

2014

February 3-6, 2014
APTA Combined Sections Meeting
Las Vegas, NV

March 14-16, 2014
LPTA Spring State Meeting
Lafayette, LA
Hilton Lafayette

April
Federal Advocacy Forum
Washington D.C.
Capitol

June 11-14, 2014
NEXT!
Charlotte, NC

October 30—November 1, 2014
National Student Conclave
Milwaukee, WI

COMBINED SECTIONS MEETING

The Combined Sections Meeting (CSM) focuses on programming designed by all 18 of APTA's specialty sections.

CSM 2014 will bring together more than 9,500 physical therapy professionals from around the nation for 5 stimulating days of exceptional programming, networking opportunities, and an exhibit hall filled with products and services at The Venetian, Las Vegas, Nevada.

NEXT (formerly known as ANNUAL CONFERENCE and EXPOSITION)

Say goodbye to "Annual Conference and Exposition." Say hello to NEXT! Starting in 2014, APTA's annual June conference will have a new name and a new attitude. It's a name change, but it's more than that. It's APTA's commitment to making June conference about looking into the future of physical therapy. "NEXT" isn't an abbreviation, but it does stand for something: It's a name thematic of where this conference and the profession are headed. Like all those "PT" conferences before it, NEXT will continue to offer the visionary McMillan and Maley lectures and the lively Oxford Debate. It will still provide an intimacy to networking that can be a challenge at CSM. It will still occur immediately following APTA's House of Delegates. And it will look to build on the energy of 2013's opening event.

But NEXT will also be a conference that evolves over time, in exciting and engaging fashion. This is your chance to be there for the start of it all! Plan to join us June 11-14, 2014, for the first NEXT conference in Charlotte, North Carolina.

LPTA Members!

The Louisiana Physical Therapy Association now has a YAHOO GROUP to discuss current “hot topics” in Physical Therapy!

Have something to say? Join now!
http://health.groups.yahoo.com/group/LPTA/
District/Component Wrap-Up

Julie Ann Harris, Shreveport District Chair

The Shreveport District had a successful 10th annual “Hustle for Your Health Fun 5K Run and Health Walk” on Saturday, October 12th 2013 to celebrate PT awareness month. The event raised $2100 and the profits were donated to Scott Wells of “Independence Regained,” a nonprofit organization to build a rehab facility for TBI and spinal cord injury patients in Northwest Louisiana. We were thrilled to have donated to such a wonderful cause for our Shreveport area.

We also had our year end Shreveport District Meeting on December 3, 2013 with 31 people in attendance. Scott Wells was present to receive our donation check and to inform us on the status of “Independence Regained.” We were very fortunate to have Sharon Dunn, APTA Vice President, in attendance to give us an update on current Congressional issues that are stirring up the PT world that included the Medicare Therapy Cap repeal, alternative payment system, In-Office Ancillary Services, and Physical Therapy Workforce Patient Access Act. Our guest speakers were Amanda and Adam of Brewer Physical Therapy that presented on Trigger Point Dry Needling. This husband and wife team became the first physical therapists in Louisiana to offer trigger point dry needling, a highly specialized and proven treatment for chronic pain and discomfort. Those present at our meeting were given a great demonstration to several areas of the body along with a question and answer period. Thank you Brewer PT for a job well done!!

Alicia Pruitt, Membership Chair

I hope everyone is enjoying this Holiday season! During this time of year I like to think of all that I am thankful for and all of my blessings. Being a member of an organization that truly is looking out for its professionals such as the APTA/LPTA is surely something to be thankful for. If your membership is up for renewal during this season, please remember the value of being a member of our association (and if funds are a little tight during this time of year....remember to look into the payment options). Also, if you are interested in being a part of our membership efforts, please contact me! alicia_pruitt@att.net I’d like to thank all of those who are active members willing to assist the efforts of the APTA/LPTA. You are a blessing!

Scott Kelley, Alexandria District Chair

On November 12, we had a really good district meeting. We had over 30 people attend which is the most we have had in the almost 2 years I have been the district chair. A big thank you goes to the LA College PTA program for hosting the meeting in their building. Also, Rep. Terry Brown, our reigning Legislator of the Year spoke about the importance of getting involved and talking to your legislators. As the chair I was very encouraged by the turnout. Hopefully this is just the beginning of the Alexandria district waking up.
The recent District Challenge for PAIF (Patient Access Investment Fund) Fundraising, that six-week challenge, was a litmus test designed to enable us as your leaders to gauge your interest in and desire for us to work hard to pursue improved consumer access to physical therapist services without a physician referral. We know through evidence-based literature this will save our patients and the system time and money and improve outcomes for our patients. As a caring profession, this is what we are all about.

At first blush, unless you are a private practice owner, this issue may seem unimportant to you. If you are an acute care therapist in a large, established hospital that provides wonderful benefits and more patients than you can care for in a day, if you do home health where your company keeps you up-to-date on all the new Medicare guidelines, if you work in a nursing home or SNF or inpatient rehab unit where you have physicians that oversee and order patient care, you may think that this issue does not affect you. But guess what? It does!

If, indeed, we are those caring individuals who want the best for our patients, no matter the setting, then we must participate in and contribute to improving the access those patients have to our services, as this only makes our profession stronger.

In order for us to reach our goal, and to enable the LPTA to move forward on any legislation to broaden the consumer access we currently have, everyone, regardless of practice setting, must contribute his or her time and money to make this a reality. We must hire a public relations firm to educate therapists, legislators and the public about this issue. Money allows us to track what is happening and to print materials to disseminate to therapists, legislators, and the public. We must develop better relationships with our legislators and that requires consistency and time in every district.

"The master of the garden is the one who waters it, trims the branches, plants the seeds, and pulls the weeds. If you merely stroll through the garden, you are but an acolyte."
— Vera Nazarian, The Perpetual Calendar of Inspiration

So, when the next big push comes around, and I promise it will, I want to see that all of you appreciate the issues, that all of you want to be the “master of the garden.”
New Practice Guidelines Address Treatment of Torticollis, Ankle Sprain, and Shoulder Mobility

The latest evidence-based clinical practice guidelines for ankle sprain and instability, adhesive capsulitis, and congenital muscular torticollis (CMT) have been added to PT Now, the APTA member resource for evidence-based practice information.

The ankle and shoulder guidelines developed by the Orthopaedic Section establish recommendations for screening, diagnosis, examination, and intervention, as well as appropriate outcome measures. The guidelines also seek to provide information for policymakers and payers on the practice of orthopedic physical therapy.

The Section on Pediatrics took a similar approach to the development of guidelines for treatment of CMT, an idiopathic postural deformity evident shortly after birth. The guidelines are the result of a critical appraisal of literature and expert opinion, and include 16 action statements for screening, examination, intervention, and follow-up. The CMT guidelines also offer resources for classification of severity and flow sheets for referral paths.

In addition to the clinical practice guidelines, PT Now provides APTA members with free access to a wide variety of evidence-based resources including condition-specific clinical summaries, patient cases, and valuable tests and measures. APTA is supporting the sections in the development of clinical practice evidence-based documents as part of the association’s strategic objectives.

Physical Therapist Paris Begins His Bid to Sail Solo Around the Globe

Stanley Paris, PT, PhD, FAPTA, FAAOMPT, would tell you that physical therapists (PTs) are a diverse, multitalented group of professionals, but you’d have to catch him first—or at least wait until he returns from his attempt to become the oldest and fastest person to sail around the world solo.

Paris, 76, began his attempt on December 2, and will attempt to complete the circumnavigation in 120 days. If successful, he will beat the current speed record by 1 month and the current age record by 22 years. Paris is also leveraging his attempt as a way to raise funds for the Foundation for Physical Therapy, where he serves on the Board of Trustees.

The trip is being made on Paris’s 63-foot yacht, the Kiwi Spirit, a craft that runs solely on wind and solar energy. Paris will document his journey and post videos and other information on his website, www.stanleyparis.com.

Paris is a widely known PT who founded the University of St. Augustine (Florida) for Health Sciences. He has written more than 40 research articles and 1 textbook, The Spinal Lesion.

Help Stanley Paris bring more attention to the need for research in physical therapy: find out how to donate in honor of the sail and how your name can be added to the hull of the Kiwi Spirit upon her return. Visit www.foundation4pt.org for details.
UIW Library Renamed in Honor of Geneva Johnson

Physical therapy leader and Catherine Worthingham Fellow Geneva Johnson, PhD, PT, FAPTA was recognized last week when the University of the Incarnate Word (UIW) School of Physical Therapy renamed its library in her honor. The new Geneva R. Johnson Library will include her own holdings as well as materials being received from Case Western Reserve University in Ohio, where she served as the program's first director of the master's program.

Dedication ceremonies took place on November 8 at the library, located on the UIW campus in San Antonio, Texas. Johnson has been an APTA leader for many years, having served in numerous positions including as a member of the CAPTE review panel, the association’s history committee, and in official capacities at the Iowa, Texas, Georgia, and Ohio chapters. In her work as a physical therapy educator, Johnson’s many contributions were instrumental in reshaping curriculum and refining clinical supervision.

In its online announcement of the library dedication, the UIW School of Physical Therapy described Johnson as an inspirational figure in the profession. The posting quoted Johnson as saying that "physical therapy is the work of our hands, of our head, and of our heart," and stated that the library in her name will help students "incorporate this philosophy in their personal and professional lives."

National Faculty Mentor Award Recognizes Dave Pariser

Former APTA Board Member Dave Pariser, PT, PhD, has been posthumously honored as both the inaugural recipient of a national NCAA faculty mentor award and the award’s namesake. Beginning this year, the NCAA Division II Dr Dave Pariser Faculty Mentor Award will recognize faculty who embody the former Bellarmine University instructor’s dedication to student development.

Bellarmine physical therapy student Megan Davis nominated Pariser and delivered a speech on his service to the university and the larger Louisville, Kentucky, community as part of the ceremonies honoring him at the Faculty Athletic Representatives Association meeting in Baltimore, Maryland, on November 8. Also present were Pariser’s wife, Gina Pariser, PT, PhD, and daughters Ada and Kayla. Gina Pariser accepted the award on behalf of her husband.

Pariser was an active member of APTA who served in many capacities at the national as well as the Louisiana and Kentucky chapter levels. In 2011, he was elected to the APTA Board of Directors, where he served until his death in January 2013.

At Bellarmine University, Pariser focused his scholarship and clinical work in the areas of orthopedics/musculoskeletal problems, gerontology, and advocacy/public policy, but he was widely known and respected for his dedication to mentoring student athletes. His work in the community touched on many areas, including coaching youth sports, and serving on boards for a youth camp and his daughters' high school marching band.
APTA Launches Action App in Time for Final Push to Stop the Therapy Cap

Members, patients, and supporters of physical therapy can now stay up-to-date on the latest legislative and regulatory news by downloading the free APTA Action app. The smartphone app was designed to help providers and patients stay engaged in APTA’s advocacy efforts and will be a valuable tool in grassroots efforts to end the therapy cap and fix the sustainable growth rate (SGR).

The APTA Action app allows individuals to:
- Take action on federal issues impacting the physical therapy profession
- Look up members of Congress and see if they have cosponsored APTA’s bills
- Donate to PT-PAC
- Join PTeam to receive e-mail updates on federal legislative and regulatory news, and action alerts when it is time to contact their members of Congress
- Review talking points for issues impacting the physical therapy profession
- Send APTA feedback after a meeting with a legislator, attending a town hall or a fundraiser, or hosting a practice visit
- Share their advocacy activities with friends and colleagues on Facebook, Twitter, and Tumblr
- View the congressional schedule and upcoming APTA events
- View APTA’s Twitter feed and the latest videos from the Public Policy, Practice and Professional Affairs Department

The app debuts at a crucial time in the efforts to end the therapy cap and fix the SGR. APTA will launch the next grassroots push to stop the therapy cap on December 2, 30 days from the expiration of the exceptions process. Supporters who download the app and join PTeam by December 1 will be able to easily contact legislators on December 2 using the app’s "Take Action" button.

The free app can be downloaded by searching “APTA Action” in the iTunes or Google Play stores. For more information about the APTA Action app and how to get involved in the Stop the Therapy Cap campaign, visit APTA’s grassroots webpage or e-mail advocacy@apta.org.

APTA wants to see where you use your APTA Action app. Take a photo using the app in fun, creative places and post it on Twitter using the hashtag #PTAdvocacy. Let’s get a photo from every state to show members across the country getting involved.

Metairie Businessman Appointed to State Workers Compensation Advisory Council

Gov. Bobby Jindal appointed Joe Shine Jr. of Metairie to the Louisiana Workers’ Compensation Advisory Council on October 18. The 17-member panel makes recommendations through the Louisiana Workforce Commission to the governor on administration of the workers compensation system.

Shine is president of Performance Rehabilitation Services and a board-certified physical therapist. He also is vice president of the Louisiana Physical Therapy Association and is an adjunct instructor in physical therapy at Louisiana State University’s School of Allied Health.
Concussion Legislation Reintroduced

Important concussion legislation supported by APTA has been reintroduced in Congress. Developed with input from the association, the Protecting Student Athletes From Concussions Act (HR 3532) establishes guidelines around prevention, identification, treatment, and management of concussions in school-age children, and acknowledges the role that physical therapists (PTs) have in evaluating and treating these injuries.

The legislation has been reintroduced by Reps Tim Bishop (D-NY) and George Miller (D-CA), and would require states to implement concussion safety and management plans that include return-to-play requirements and academic supports. Additionally, the bill requires that any student who suffers a concussion be immediately removed from any participation in school sports until he or she receives a written release from a health care professional. Physical therapists (PTs) are explicitly listed as one of the professionals qualified to make these return-to-play decisions. APTA advocated for the legislation when it was initially introduced in 2011 and worked with members of Congress on the recent reintroduction.

Related work continues around the reintroduction of a similar piece of legislation, the Concussion Treatment and Care Tools Act (ConTACT) (HR 3113/S 1516) introduced by Sen Robert Menendez (D-NJ) and Rep Bill Pascrell (D-NJ). Though not passed into law when it was first introduced, the ConTACT bill helped to establish a workgroup within the Centers for Disease Control and Prevention (CDC) assigned to developing guidelines for mild traumatic brain injury (MTBI). APTA members Anne Mucha, PT, DPT, MS, NCS, and John DeWitt, PT, DPT, SCS, represent the role of PTs on the CDC workgroup.

The latest iteration of the ConTACT Act bill calls for the establishment of national guidelines drawn from the CDC workgroup recommendations on best practices for diagnosis, treatment, and management of MTBI in school-aged children. The legislation also provides for grants to help states implement these guidelines. APTA will continue to advocate for these pieces of legislation as opportunities arise to support the CDC workgroup recommendations and the role of the PT in concussion management.

APTA believes that concussion should be managed and evaluated by a multidisciplinary team of licensed health care providers that includes a PT and offers multiple resources. The association has developed policy resources at both state and federal levels, while practice-focused online concussion resources include a series of podcasts, a PT’s guide to concussions, and access to evidence-based practice research through the PT Now webpage.

Government Affairs Report: Dry Needling Awareness

I would ask that any practitioner that is utilizing dry needling techniques as a treatment technique contact the LPTA, office@LPTA.org, and request that your contact information be added to the Dry Needling Governmental Affairs Interest Group. Your unique perspective using Dry Needling as a treatment technique to physical therapy patients will be valuable as we move forward.

During Physical Therapy Treatments we utilize many techniques to decrease soft tissue restrictions. It is up to the clinical reasoning of the physical therapist to determine which method or technique has the highest efficiency so the patient receives the highest quality of care. Dry Needling is one tool that Physical Therapists in Louisiana are currently safely performing.

Cristina Faucheux, Government Affairs Chairman (continued on page 19)
Chief Delegate Report

Oh what a difference a year can make! After being in attendance at the first 2013 APTA House of Delegates event this year, I knew something was different. You could feel the energy, sense the excitement and see the heightened expressions on everyone’s face. It was going to be a good meeting, I thought. I was not disappointed. Please take time to thank the APTA Leadership for their work this past year. We are on the mend.

This year, the 2013 session of the APTA House of Delegates was one of the best I can recall. The mood was upbeat, the discussions rich and our time was well spent. We elected new officers and directors for the next year and we addressed, discussed and passed motions that will have, I think, a positive affect on our profession over the next few years.

The RC / motion that probably created the most discussion this year was the new vision. We discussed, in depth, two different statements but “Transforming Society by Optimizing Movement to Improve the Human Experience” was the language that the majority of delegates approved. We also provided principles to guide this vision.

Other items discussed and passed included a corresponding membership category for student members and adopting the American Council of Academic Physical Therapy as a component. This new advisory component will take the leadership role in setting the direction for physical therapist academic and clinical education. This component will function separate from the Education Section and will have different membership categories. Academic Institutions will have membership in this component and will be represented by institutional members who are also APTA members. The goal of this Academic Council is to drive policy as the future of physical therapist education changes.

Several other bylaw related RC’s or motions were considered this year even though we are in a non bylaw year. They were allowed to be heard, by the house members, because most of these recommendations / motions came out of the Governance Review Task Force and we did not want to wait until 2015, our next bylaw year. Bylaw recommendations passed included adopting the election cycle of the APTA Board of Directors, basically as it already is. Also, we defined the role of the House of Delegates responsibility so we would be in compliance with our Articles of Incorporation. This was a follow up to a RC / motion passed last year. We further clarified additional roles of the Reference Committee and their use of main motion criteria, bylaw review, and background papers. The component delegate roster is now due by August 30, instead of January 1, as was previously required. Bylaw proposals withdrawn included increasing the size of the APTA Board of Directors and changing the composition of the Reference Committee. Allowing a vote for the Section Delegate, in the House of Delegates, was defeated.

Other non bylaw RC’s / motions passed this year included Principles and Objectives for the United States Healthcare System and Standards of Practice that clarify that patients are not discharged from physical therapy but rather the present episode of care is ended. This allows the physical therapist to develop life long relationships with their patients.

We also rescinded the old 06-05/16-08 policies relating to direct access an obtainment of “Physician status” under the Medicare Program. This was done in favor of a new 19-13 policy that allows our APTA Government Affairs and Regulatory Policy team to support public policy efforts to improve consumer access to physical therapist.

David Qualls, LPTA Chief Delegate

(continued on page 13)
Student Say

The Foundation for Physical Therapy’s inaugural LogNBlog4PT competition recently ended. The competition involved physical therapy schools around the nation logging miles running, biking, and swimming while raising money to support physical therapy research. It was a great success with more than 335,500 total miles logged and $37,000 raised. Physical therapy students at LSUHSC – New Orleans and Shreveport participated after Shreveport issued a friendly in-state challenge to New Orleans.

Both schools leaped at the chance to raise awareness and funds for physical therapy research while promoting a healthy lifestyle. By the end of the competition LSUHSC – New Orleans logged over 3,500 total miles and was the overall 3rd place fundraising team and LSUHSC – Shreveport logged over 3,200 total miles and student Anthony Celio was the 2nd place individual fundraiser. I am sure both schools are looking forward to beginning the competition again in 2014 and seeing who can log the most miles and funds!

Michael Hildebrand, SPT

Health Care Reform

The Affordable Care Act (ACA) was signed into law March 23, 2010, and aims to increase the quality and affordability of health insurance, lower the uninsured rate by expanding public and private insurance, and contain the rising costs of health care for individuals and the government.

APTA has divided the contents of the law into four major themes, which are listed below. The ACA increases access to health care through its expansion of health insurance coverage provisions as well as the creation of new insurance protections; creates new models of care beyond traditional fee for service; shifts payment focus to rewarding providers for the quality of their services; and increases auditing and screening processes to enhance the integrity of federal health care programs.

Expansion of Coverage...The ACA expands health insurance coverage through use of the Health Insurance Marketplaces and the expansion of the Medicaid program population. Additionally, the ACA creates protections for coverage, such as "guaranteed issue” and restrictions on certain coverage limits.

Collaborative Models of Care - Innovation in Programs...Collaborative care models include accountable care organizations (ACOs), bundled payment models, and patient-centered medical homes.

Payment Changes and Linking Payment to Quality...The ACA makes refinements to payment systems and links payment to quality of care. Access resources on Medicare payment for information on changes in new payment rules and programs such as PQRS and hospital readmissions reduction. Access resources on private insurance payment changes and updates on the latest reimbursement issues and trends.

Program Integrity...The ACA provided for funding increases to the program integrity efforts, such as auditing programs.

Dave Pariser Memorial Scholarship Fund

To make an online contribution to the Scholarship fund, go to the Foundation website and at the top right hand side of the page, there is purple box with the words “Donate Now”. Choose the amount of the donation and choose the designated fund, the Dave Pariser Memorial Scholarship Fund.

http://www.lsuhealthfoundation.org/?dt=1360008523433

Or you can mail to the Dave Pariser Memorial Scholarship Fund:
The Foundation for the LSU Health Sciences Center
450A South Claiborne Avenue
New Orleans, LA 70112
Where Does it Say That?

Have you ever wondered why the Business Meeting of the Louisiana Physical Therapy Association (LPTA) is conducted a certain order? If you read the minutes of past meetings you will see that information is presented in a certain order followed at every meeting.

The LPTA is a chapter of the larger American Physical Therapy Association (APTA). The APTA and the LPTA are groups of people who gather together to discuss, promote and implement rules for its members, who are involved in the profession of physical therapy. These groups are governed and organized by utilization of “Robert’s Rules of Order”. These Rules are also known as Parliamentary Law.

Parliamentary Law dates back to the fifth century when the Anglo-Saxon tribes of Germany began their migration to the British Isles. The larger tribes believed that they had the right to dictate law; rules and to administer justice to all the smaller tribes. Each tribe had its own leaders and rules. When all the tribes gathered there was pandemonium. The strongest ruled. These “mass meetings” could not get anything done. They needed some kind of order or guidance on how they would discuss the pro’s and con’s of an idea and eventually get to a commonly agreed upon decision.

In the thirteenth and early fourteenth century the Great Council of Tribes became known as Parliament. Parliament was described as any important meeting held for the purpose of discussion.

“The term “rules of order” refers to written rules of parliamentary procedure formally adopted by an assembly or an organization.”

Since the LPTA is a chapter of the APTA which follows Robert’s Rules of Order, we are also obligated to use these rules to govern the “mass assembly” meetings which we call Chapter meetings. The rights of all members are considered in Roberts’ Rules of Order.

The LPTA Bylaws are included in all packets distributed to those persons attending the Chapter meetings. 2007 was the last year that these Bylaws were amended. These Bylaws must be changed to be in compliance with APTA Bylaws whenever the House of Delegates changes the APTA Bylaws. Next year the LPTA membership will be voting on some bylaw changes necessitated by APTA Bylaw changes passed at the 2013 House of Delegates.

While our Bylaws are “open” to make these changes the Board of Directors has recommended a review of all our Bylaws to see where other changes might be made to address problematic issues contained in the current version. The most problematic rule is the number of persons required to make up a quorum for business to be conducted by the membership.

Our current quorum is set at one-tenth (1/10) of the members eligible to vote. See ARTICLE VI. MEETINGS, SECTION 4. Quorum. Which is found on page 5 of the current bylaws. Who is eligible to vote?

See ARTICLE IV. MEMBERSHIP; SECTION 2. Rights and Privileges of Members. Our bylaws state that “The rights and privileges of the Chapters members shall be identical to those established in the Association bylaws. THEREFORE YOU WILL HAVE TO HAVE A COPY OF THE APTA BYLAWS TO FIND OUT WHO CAN VOTE. The APTA (association) bylaws state in their ARTICLE IV. MEMBERSHIP, Section 2. Rights and privileges of members those members who have voting rights within the chapter, section, assembly and committee meetings. Note that both the LPTA bylaws and the APTA bylaws meeting sections are the numbered the same; ARTICLE IV Membership. Therefore those persons eligible to vote at chapter meetings are Physical Therapist, Retired Physical Therapist and Life Physical Therapist; PTA, Retired PTA and Life PTA.

(continued on page 13...)

Gail Pearce, Chairman LPTA Bylaws Committee
In the past we have not had enough members present at the business meetings to have a quorum. According to Roberts Rules, no business or voting can be done at a duly called meeting at which a quorum is not present. We have had 3 consecutive meetings where there has been no quorum. It is time to review our options on the quorum stipulated in the LPTA bylaws.

There are other policies, guidelines including House Rules and Chapter Reference Manuel used to guide the work of the LPTA. I shall attempt to bring to light these documents in future articles in the Bayou Bulletin.

Ibid, pg.15.

The House agreed that the preferred nomenclature for the prevision of physical therapy should change and be referred to as Physical Therapist Services or Physical Therapist Practice. We also supported the development of clinical guidelines and voted to promote the role of the physical therapist in prevention and management of pediatric over use injuries.

Your House of Delegates agreed to pursue documentation standards for physical therapy services that focus on clinical reasoning and decision making and also supported the development of a training program for physical therapist to perform peer review. The 2013 House of Delegates adopted policy that advocates receiving timely services and equipment support for people with chronic disability. The House also supported physical therapist as authorized prescribers of Durable Medical Equipment (DME) which is integral to the physical therapist management of the patient including access to DME and services allowing patients to live active and productive lives at home and in community.

Last, but surely not least, your 2013 APTA House of Delegates unanimously elected John Stackpole, PhD, PRP CPP as an Honorary Member of the APTA. John was APTA’s long time parliamentarian who retired last year.

As you can see, your delegates were busy again this year. We did complete our agenda. Additionally, Laurie Hack was re-elected as Secretary, Stuart Platt was elected as Vice Speaker, Roger Herr was re-elected as a Board of Director and Carolyn Oddo and Sue Whitney were elected as new Board of Directors. Peggy Newman and Cecilia Graham were elected to the Nominating Committee.

This year your delegates were active and engaged as always. We were able to provide input when needed. We also listened well as we formed our conclusions. The Louisiana Delegation is well respected in the APTA House of Delegates. Please take time to thank your delegates for a job well done. Your 2013 Louisiana Delegates were Kinta LeBlanc, Ashley Henk, Greg LeBlanc, your President, Beth Ward and Amelia Leonardi as your alternate. Jason Oliver served as Louisiana’s PTA Caucus Rep and Brandon Page was our Student Companion Delegate. I served as your Chief Delegate. If you have any questions about this years House activities, please ask any of these delegates. We want you to be informed as we represent your thoughts and ideas to “More Forward”.

Thank you for allowing us to serve!
Is There A Doctor in the House?

Years before I even thought about becoming a physical therapist, I went to a Broadway show where there was a bit more drama than just on stage. One of the actors frantically queried if there was a doctor in the house, as she could see a man near the front of the stage clutching his heart. A few seats down from me and my friend, a lady stood up exclaiming, “Right here!” while pointing down at her companion, a male gentleman who appeared to be in his mid-fifties. He immediately began shaking his head, trying to slouch further into his seat as though he could disappear. Finally he retorted, “No, I am just a radiologist; I can’t help!”

Still clutching his heart, the family assisted this troubled audience member out of the building quickly passing right in front of me. I still remember thinking, “there is nothing a radiologist could do to help?” On TV, they never specified what kind of doctor was needed in these emergency type situations, and I certainly never even thought that it mattered. Later my friend—whose father happened to be an OBGYN—tried to defend the radiologist by saying, “I am sure my dad would not have stepped up unless someone was pregnant; they needed a useful doctor!”

Yet still, I am sure both the aforementioned medical professionals have no problem introducing themselves as Doctor So-and-so, signing their checks, and including it in Christmas cards or wedding invitations. It may even prove an insult when that title is missing from a letter in the mail, especially if personally inscribed. But in the general public for any type of crisis, the answer to the infamous and distressed question seems to be, “Well, it depends.” So that begs the question, is the title to indicate some sort of societal use, or is it truly a status symbol?

The first doctoral degree in physical therapy was awarded over twenty years ago, yet I often hear a DPT introduced with no prestigious title. I myself am famous for replying when asked about my career with, “Oh…I’m a fake doctor,” as though there is some scarlet letter that makes a DPT substandard. A few people have rebuked me, reassuring that I am a “real doctor,” one of whom was actually a burgeoning orthopedic surgeon appalled that I thought of myself as less than that. Yet still I am hesitant to forthright and boldly pronounce, “Dr. Banta” to new acquaintances.

But then I get e-mails about daily deals from chiropractors, dentists, psychiatrists and dermatologists proudly offering steep discounts for their doctoral services. Of course, LA restricted direct access prevents most of our ingenuity from appearing on Groupon®, but does that make us less or more of a doctor? Is the true sign of a doctor whether it can be listed there? Is that how you improve your notoriety, with buy one get one free? Even vets are doctors by title, and they only treat our four-legged friends.

So back to my previous question, is it a status symbol? And to that question I propose that it is indeed just that, but not for a personal matter indicating your place as an individual on a totem pole. It is instead a status symbol for our profession. In a time where the APTA is aspiring for autonomy and direct access (and when it seems the ball is rolling so fiercely for the LPTA), would we not be better equipped to justify that right with our more appropriate and prestigious title? Our profession has evolved and there is no reason that we should keep our verbiage from indicating such.

(continued on page 15...)

ENCOURAGE YOUR COLLEAGUES TO JOIN THE APTA and LPTA!

Every man owes part of his time and money to the business of the industry in which he is engaged. No man has the moral right to withhold his support from an organization that is trying to improve conditions within his sphere. – Teddy Roosevelt
(continued from Soapbox on page 14)

In the past couple of months, as I mustered up the courage to utter “Dr. Banta” more emphatically, my reactions have almost unanimously been positive. Some have even taken an interest to ask me more about my profession. It has been a great segue to a conversation about direct access, where I convinced many listeners that physical therapists deserve direct access. I even had one couple who followed-up with me letting me know they both wrote letters to their state senators in efforts to assist with the LPTA’s campaign.

So I do hope that I convinced those of you with a DPT or transitional DPT to use your well-deserved (and quite expensively earned) title. Our profession continues to evolve and we need our titles to designate its achievements. I try my hardest to not resort back to my comments about being a “fake doctor” anymore; I truly convinced myself of my own merit and that of my profession. Physical therapists provide incredible results for a huge variety of patient populations. We need to absolve any hesitation that we have in feeling like true doctors of the medical profession. After all, we are not the ones who have a daily deal at 60% off.

Robbie Banta, PT, DPT
Why should you donate to the PT-PAC?

The decision is simple: we can either sit and watch from the sidelines, or we can stand up, make our voice heard, and give orthopaedic surgeons the opportunity to help shape legislation that affects their patients and practices.

American Academy Orthopedic Surgeons “What is the Orthopedic PAC”

The American Chiropractic Association - Political Action Committee (ACA-PAC) is the only major political action committee dedicated to electing pro-chiropractic candidates to the U.S. Senate and U.S. House of Representatives. ACA-PAC allows ACA members to pool together financial resources to help elect pro-chiropractic candidates across the country. ACA-PAC is bi-partisan and contributes to pro-chiropractic Democrats and Republicans.

American Chiropractic Association-PAC FAQ

Every year, physicians and friends of medicine confront the challenges in liability, reimbursement, scope-of-practice and administrative burdens. And every year, more and more physicians and friends of medicine realize that involvement in the political process is not a luxury or something to do in your spare time; it is a necessity. Members of the medical community involved in a campaign or considering seeking public office will get the skills and answers they need in AMPAC’s Political Education Programs. AMPAC, a pioneer in membership association political action, has offered these programs for over 25 years. Graduates have gone on to win election to public office at every level across the country, from Alderman and City Councilman to U.S. Congressman and Senator!

American Medical PAC

The AANP Political Action Committee (AANP-PAC) provides an opportunity for members interested in the welfare and future of nurse practitioners to contribute to the support of candidates for national office who believe and have demonstrated their beliefs in the purposes, principles and mission of our organization.

American Association of Nurse Practioners

We are not an island...do not ask for whom the bell tolls.

Please contribute to the PT-PAC. You can donate on the PT-PAC’s website at www.ptpac.org or contact Michael Matlack, Director, Grassroots & Political Affairs michaelmatlack@apta.org fax: 703/706-3246 phone: 703/706-3163.

ANY, and I mean ANY level of contribution is welcomed and needed.

Please contact me at revdrpaul1@cox.net if you have any questions regarding the PT-PAC.

Paul Hildreth, PT PAC Trustee
If Congress fixes the SGR formula before the end of the year but does not repeal the cap, it is likely that there will be a hard cap on therapy services in 2014. Every year, the extension of the exceptions process is included in a larger legislative package, also known as the "doc fix," that addresses the SGR formula. Without the "doc fix," there may not be an opportunity to include the extension of the exceptions process in a larger legislative vehicle before December 31.

How to Take Action...APT A has long supported a full repeal of the Medicare therapy cap. Representatives Jim Gerlach (R-PA) and Xavier Becerra (D-CA), and Senators Ben Cardin (D-MD) and Susan Collins (R-ME) introduced the Medicare Access to Rehabilitation Services Act (HR 713/S 367) in both chambers on February 14, 2013. HR 713 and S 367 would permanently repeal the $1,900 therapy "cap" imposed on physical therapy, occupational therapy, and speech-language pathology services.

APTA is asking members of Congress to show their support for repealing the cap by cosponsoring HR 713 and S 367. With the current exceptions process set to expire on December 31, Congress must take action repeal the therapy cap or at the very least extend the current exceptions process through 2014.

Send Prewritten E-mails...APT A Members: Go to APTA's Legislative Action Center, click "Take Action" under "Stop the Medicare Therapy Cap & Prevent SGR Payment Cuts," and follow the instructions. If you have time, please personalize the e-mail and tell Congress how the cap impacts your patients.

Nonmember PTs/PTAs and Patients: E-mail your legislators using our Patient Action Center. Simply enter your zip code and click "Go!"

Raise Awareness Via Social Media...Join our grassroots efforts to stop the cap.

Meet With Your Member of Congress...Prepare for your meeting by accessing our policy resources below. (Bring copies of these documents for your member of Congress and their staff.)

Also, check the cosponsor lists below to see if your legislator is a cosponsor of the current legislation. If the legislator is a cosponsor, thank him/her for their support. If the legislator is not a cosponsor, ask him/her to cosponsor the bill.

Finally, contact APTA's government affairs department via advocacy@apta.org prior to your meeting. APTA staff can help you prepare and provide useful background information.
Louisiana PT Program Accepts 2013 Challenge to Raise Funds for Research
By: Rachel Sand, SPT and Allison Czaplewski, SPT

A total of 80 schools participated in the 2012-2013 Pittsburgh-Marquette Challenge to raise $222,008 in support of the Foundation for Physical Therapy. The Foundation wishes to thank the students of Louisiana State University Health Sciences Center – Shreveport for their strong support of the Challenge. This year marked the 25th anniversary of the Challenge. Since its inception in 1989, 170 different schools have participated in the Challenge, and PT and PTA students have raised a grand total of $2,530,950!

The annual Marquette Challenge is a grassroots fundraising effort coordinated and carried out by physical therapist and physical therapist assistant students across the country to support the Foundation for Physical Therapy’s mission of providing funding opportunities to outstanding physical therapist researchers. Laura Prosser, PT, MPT, PhD, a research scientist at The Children's Hospital of Philadelphia, is the recipient of the 2012 Pittsburgh-Marquette Challenge Research Grant. Her 1-year project, "Motor Outcomes and Neural Correlates of Asymmetrical Gait Training in Children with Acquired Hemiplegia," will study the motor and neural responses to an asymmetrical gait-training program in children with chronic hemiplegia from prior stroke. Prosser received her master's in physical therapy from the University of Scranton, and her PhD in physical therapy from Temple University, with a specialization in neuroscience and biomechanics. The Challenge also funded a PODS I Scholarship in 2013, which went to Kendra Cherry, PT, DPT of Washington University in St. Louis.

The first place winner of the 2012-2013 Pittsburgh-Marquette Challenge was the University of Miami, whose students raised $28,807. We welcome the University of Miami as co-host for the upcoming 2013-2014 Miami-Marquette Challenge. The University of Pittsburgh won second place, raising $28,450. New York University students raised $16,275 and earned the third place title this year.

The Foundation for Physical Therapy was established in 1979 as a national, independent nonprofit organization dedicated to improving the quality and delivery of physical therapy care by providing support for scientifically-based and clinically-relevant physical therapy research and doctoral scholarships and fellowships.

Miami and Marquette students are launching the "Get on the List" campaign for the 2013-2014 Challenge. PT and PTA schools can get on the The List by donating any amount of money to the annual Challenge effort! We hope that all PT and PTA programs in the State of Louisiana will "Get on The List" for 2013-2014 and support the Foundation for Physical Therapy and physical therapy research. To learn how you can support the Challenge, please visit the Foundation’s Web site at www.Foundation4PT.org/get-involved/Challenge/, call the Foundation at 800/875-1378, or email Marquette student coordinators at Challenge4PT@gmail.com. Contributions for the 2013-2014 Miami-Marquette Challenge should be submitted by April 21, 2014.
CONGRATULATIONS!

NEW ORLEANS is the winner of the LPTA District Challenge for PAIF Campaign! A total of $9,250 was raised in the District Challenge. We still have a long way to go to reach $200,000 so keep spreading the word and donate to the PAIF!

(continued from Government Affairs Report on page 9)

The practice of acupuncture by acupuncturists and the performance of dry needling by physical therapists differ. The performance of modern dry needling by physical therapists is based on western neuroanatomy and modern scientific study of the musculoskeletal system and nervous system. Physical Therapists that perform dry needling do not use traditional acupuncture theories or acupuncture terminology. There are differences in philosophy, rational, and use in treatment of dry needling by physical therapists versus acupuncturists. According to the American College of Acupuncture and Oriental Medicine, the master of Acupuncture and Oriental Medicine Degree Program is based on preserving the ancient theories, principles, and tenets of traditional Chinese Medicine.

The APTA announced that an organization called the National Center for Acupuncture Safety and Integrity (NCASI) has distributed letters to State Licensure and Regulatory Boards regarding the use of acupuncture needles by physical therapists in the performance of dry needling. The letter claims that the sale of FDA regulated acupuncture needles to physical therapists for use in the performance of dry needling is inconsistent with federal law. As of this writing, the APTA has not issued a formal response.

One may argue that Health Care education and practice have developed in such a way that most professions today share some procedures, tools, or interventions with other regulated professions. It is unreasonable to expect a profession to have exclusive domain over an intervention, tool, or modality. One activity does not define a profession but it is the entire scope of activities within the practice that makes any particular profession unique.

We will continue to advocate for the rights of our patients to receive timely treatment techniques and interventions that the therapist has determined is in the best interest of their patients.