

Submitter: Cecile Gladden  
On Behalf Of:  
Committee: Senate Committee On Health Care  
Measure, Appointment or Topic: HB3824

My name is Cecile Gladden and I have been practicing as a DPT for 1 year, and have been working in the PT profession for 5 years. I'm writing in support of HB3824 because it will allow the profession to provide safe, effective, and holistic care that is currently not available to us due to certain restrictions.

There have been many instances where I have determined through my clinical and educational expertise that a patient would benefit from obtaining DME, but I'm required to navigate different avenues and pathways that are time consuming and costly, not only for me but also for patients and physicians, due to being unable to prescribe equipment directly. A part of a Doctor of Physical Therapy's entry-level education includes identification of the most appropriate DME, indications/contraindications for specific aspects of the DME, and fitting the DME. DPTs fundamentally possess the knowledge and skill to prescribe DME, and it would be a direct detriment to patients for this bill not to be passed.

I have also seen Dry Needling used in states where it is allowed for a PT to perform this modality and have personally seen the benefits of this treatment. While acupuncturists are the experts in needles, PTs can safely and effectively perform dry needling with the proper training that many states around the country have already adopted. The intent behind dry needling is different than solely acupuncture and emerging literature shows that there is a <1% chance of serious adverse events occurring when performed by a PT. Opposition to this practice misrepresents the rigorous standards we uphold as doctoral-level providers having undergone extensive training in differential diagnosis, anatomy, and neuromusculoskeletal care.

Passing this bill would also protect the Doctorate of Physical Therapy name and licensure from other professionals that may use it in a way that may be misleading. For example, I have heard of personal trainers labelling themselves as "PTs", which can be confusing for the general population that doesn't understand the difference and discredits our training and expertise. DPTs complete rigorous graduate level education with over 1,000 hours of clinical experience to ensure that they are well-qualified to make evidence-based decisions and manage complex patient needs, which other professions don't.

We are also qualified to order imaging in response to patient presentation. We undergo an entire course in school that teaches us when imaging is indicated, what type of imaging is warranted, how to read different types of imaging, and how to make basic clinical decisions as a result of findings. Additionally, there is an growing

body of evidence highlighting that physical therapists can make these decisions and reduce overall healthcare costs, reduce the frequency of excessive and unnecessary ordering, and do so in a safe and informed manner. With the growing stress on the current healthcare system, this is another area where we can reduce the burden on other physicians and improve efficiency and costs associated with imaging.

This bill is important in leading the Physical Therapy profession into the modern age, reflects and respects our current capabilities, and aligns with the Model Practice Act established by the Federation of State Boards of Physical Therapy. Restricting PTs in these areas limits patients' access to care, delays appropriate treatment, and puts unnecessary strain on our already-overwhelmed healthcare system.

I strongly encourage you to vote YES and pass HB3824. Thank you for your consideration.

Cecile Gladden, PT, DPT