But to define it thoroughly, it is essential to also present a brief history of the development of physical therapy. A review of the past will demonstrate how the profession has responded to societal needs and gained respect as an essential component of the rehabilitation team. It will also link some current trends and practices with past events.

**DEFINITION**

Part of the confusion regarding the definition of physical therapy results from the variety of legal definitions which vary from state to state. Each state has the right to define this field and regulate the practice in its jurisdiction. These definitions are commonly included in legislation known as a “Practice Act” which pertains to the specific profession.

To limit this variety, a model definition (Box 1-1) was created by the American Physical Therapy Association (APTA) and was recently amended by the Board of Directors of that organization in 1995.

**Box 1-1**

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**Model Definition of Physical Therapy for State Practice Acts**

Physical therapy, which is the care and services provided by or under the direction and supervision of a physical therapist, includes:

1. Examining and evaluating patients with impairments, functional limitations, and disability or other health-related conditions in order to determine a diagnosis, prognosis, and intervention; examinations include but are not limited to the following:
   - aerobic capacity or endurance
   - anthropometric characteristics
   - arousal, mentation, and cognition
   - assistive, adaptive, supportive and protective devices
   - community or work reintegration
   - cranial nerve integrity
   - environmental, home, or work barriers
   - ergonomics or body mechanics
   - gait and balance
   - integumentary integrity
   - joint integrity and mobility
   - motor function
   - muscle performance
   - neuromotor development and sensory integration

(Continued)
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- orthotic requirements
- pain
- posture
- prosthetic requirements
- range of motion
- reflex integrity
- ventilation, respiration and circulation
- self care and home management
- sensory integrity

2. Alleviating impairments and functional limitations by designing, implementing, and modifying therapeutic interventions that include, but are not limited to
- therapeutic exercise (including aerobic conditioning)
- functional training in self care and home management (including activities of daily living and instrumental activities of daily living)
- functional training in community or work reintegration (including instrumental activities of daily living, work hardening, and work conditioning)
- manual therapy techniques, including mobilization and manipulation
- prescription, fabrication, and application of assistive, adaptive, supportive, and protective devices and equipment
- airway clearance techniques
- debridement and wound care
- physical agents and mechanical modalities
- electrotherapeutic modalities
- patient-related instruction

3. Preventing injury, impairments, functional limitations, and disability, including the promotion and maintenance of fitness, health, and quality of life in all age populations.

- Engaging in consultation, education, and research.


This definition identifies several activities which are inherent in the practice of physical therapy. First and foremost, physical therapy begins with an evaluation to determine the nature and status of the condition. Findings from the evaluation are interpreted to establish the diagnosis, goals, and treatment plan. Treatment is then administered and modi-
fied in accordance with the patient's responses. The interventions used are physical and focus on the musculoskeletal, neurological, cardiopulmonary, and integumentary systems. Other activities which are also important for effective practice include: consultation, education, and research. Finally, it should be noted that physical therapists not only provide treatment to reduce physical disability, movement dysfunction, and pain, but also services which prevent these conditions. (See Chapter 2 for a more detailed description of the activities of a physical therapist.)

The model definition provides a comprehensive description of the practice of physical therapy. A companion document addresses the profession of physical therapy. This was adopted by the House of Delegates (policy-making body) of the APTA in 1983 (Box 1-2).²

Box 1-2

Philosophical Statement on Physical Therapy

Physical therapy is a health profession whose primary purpose is the promotion of optimal human health and function through the application of scientific principles to prevent, identify, assess, correct or alleviate acute or prolonged movement dysfunctions. Physical therapy encompasses areas of specialized competence and includes the development of new principles and applications to more effectively meet existing and emerging health needs. Other professional activities that serve the purpose of physical therapy are research, education, consultation and administration.


Two significant features of this Statement which embellish the model definition are that physical therapy is a profession and that it promotes optimal health and function. The latter feature—promotion of optimal health and function—is a goal established with patient/client/family input. Optimal function may meet or exceed the level prior to injury/disease or may be severely diminished as a result of impairment. The former feature of this statement—that physical therapy is a profession—warrants further discussion.

It is generally agreed that a profession demonstrates three characteristics: knowledge in a specific area, social value and recognized autonomy.¹¹ Figure 1-1 indicates that these characteristics are the most valued features of a profession.³ It also demonstrates that a hierarchy exists with two additional traits possessing lower values. In any case, they are all important to consider.