Allied Health Professionals Consumer Fact Sheet

Board of Registration of Allied Health Professionals

The Board of Registration in Allied Health evaluates the qualifications of applicants for licensure and grants licenses to those who qualify. It establishes rules and regulations to ensure the integrity and competence of licensees. The Board is the link between the consumer and the allied health professional and, as such, promotes the public health, welfare and safety.

Allied health professionals are occupational therapists and assistants, athletic trainers, and physical therapists and assistants.

Occupational Therapists/Occupational Therapist Assistants

Occupational therapists are health professionals who use occupational activities with specific goals in helping people of all ages to prevent, lessen or overcome physical, psychological or developmental disabilities.

Occupational Therapists and Occupational Therapist Assistants help people with physical, psychological, or developmental problems regain abilities or adjust to handicaps. They work with physicians, physical and speech therapists, nurses, social workers, psychologists, teachers and other specialists. Patients may face handicaps, injuries, illness, psychological or social problems, or barriers due to age, economic, and cultural factors.

Occupational Therapists:

- Consult with treatment teams to develop individualized treatment programs.
- Select and teach activities based on the needs and capabilities of each patient
- Evaluate each patient's progress, attitude and behavior.
- Design special equipment to aid patients with disabilities.
- Teach patients how to adjust to home, work, and social environments.
- Test and evaluate patients' physical and mental abilities.
- Educate others about occupational therapy.

The goal of occupational therapy (OT) is for persons to achieve the highest level of independence after an injury or illness. OT addresses the whole person - cognitive, physical and emotional status. Unlike physical therapy (PT), where the primary treatment focus is usually on the lower extremities, walking or stamina (e.g., leg lifts), OT incorporates cognition, visual perception, and upper extremity gross and fine motor skills as related to functional abilities (e.g., lift leg to don pants and fasten.)
Home health OT maximizes independence and safety in common environments. Treatment focus in the home varies, and is guided by the goals of the client and family. Most often, current abilities, limitations, safety issues and desired areas of improvement are determined.

A home OT evaluation looks at structural barriers, accessibility, and the need for energy conservation/ work simplification. Recommendations might include removal of throw rugs, installation of grab bars, plywood under the mattress for firmer support, or rearranging cabinets for efficiency.

OT also involves the use of adaptive equipment. Therapists might demonstrate equipment, practice with a client or review a catalog and make recommendations. Family/caretaker training is an important component for follow through of treatment programs and to keep clients challenged for continued improvement. OT's also make sure caretakers practice good safety awareness and body mechanics when assisting clients.

When is OT indicated? Most people readily consider occupational therapy as an appropriate intervention post-surgery, post-radiation, after an inpatient rehabilitation stay, or if the client is homebound.

To locate an OT, ask your physician for a referral.

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**Physical Therapists**

Physical therapists and assistants are health professionals who help restore function, improve mobility, relieve pain, and prevent or limit permanent physical disabilities of patients suffering from injuries or disease.

Physical therapists and physical therapist assistants provide rehabilitative care for patients with physical disabilities or dysfunction. They provide services that help restore function, improve mobility, relieve pain, and prevent or limit permanent physical disabilities of patients suffering from injuries or disease. They restore, maintain, and promote overall fitness and health. Their patients include accident victims and individuals with disabling conditions such as low back pain, arthritis, heart disease, fracture, head injuries, and cerebral palsy.

Physical therapists examine patients' medical histories, then test and measure their strength, range of motion, balance and coordination, posture, muscle performance, respiration, and motor function. They also determine patients' ability to be independent and reintegrate into the community or workplace after injury or illness. Next, they develop treatment plans describing the treatment strategy, its purpose, and the anticipated outcome. After devising a treatment strategy, physical therapists often delegate specific procedures to physical therapists assistants and aides.

Treatment often includes exercise for patients who have been immobilized and lack flexibility, strength, or endurance. They encourage patients to use their own muscles to further increase flexibility and range of motion.
before finally advancing to other exercises improving strength, balance, coordination, and endurance. Their goal is to improve how an individual functions at work and home.

Physical therapists also use electrical stimulation, hot packs or cold compresses, and ultrasound to relieve pain and reduce swelling. They may use traction or deep-tissue massage to relieve pain. Therapists also teach patients to use assistive and adaptive devices such as crutches, prostheses, and wheelchairs. They may show patients exercises to do at home to expedite their recovery.

As treatment continues, physical therapists document progress, conduct periodic examinations, and modify treatments when necessary. Such documentation is used to track the patient's progress, and identify areas requiring more or less attention.

Physical therapists often consult and practice with a variety of other professionals, such as physicians, dentists, nurses, educators, social workers, occupational therapists, speech-language pathologists, and audiologists. Some physical therapists treat a wide range of ailments; others specialize in areas such as pediatrics, geriatrics, orthopedics, sports medicine, neurology, and cardiopulmonary physical therapy.

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**When should I see a Physical Therapist?**

You should see a physical therapist when:

- You have suffered an injury - to decrease pain and restore movement and function, (ask your allied health professional for a referral to physical therapy.)
- After surgery - to restore strength, range of motion, balance and function.
- Your illness or injury interferes with your daily normal tasks and your ability to function.
- Your child has had birth defects.
- Before accidents or injuries occur to prevent difficulties in the future.

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**Athletic Trainers**

Athletic trainers are health professionals who work with clients in preparation for, or participation in, sports activities. They work to treat, rehabilitate and prevent athletic injuries.
The American Medical Association recognizes athletic training as an Allied Health profession that is concerned with the prevention, care and treatment of athletic injuries. Athletic training is a subdivision of sports medicine that is specifically concerned with the health and safety of the athlete.

The athletic trainer's job is divided into five main areas including 1) prevention of athletic injuries, 2) recognition, evaluation and immediate care of athletic injuries, 3) rehabilitation and reconditioning of athletic injuries, 4) health care administration, and 5) education and counseling. The athletic trainer works under the direction of a licensed physician and in conjunction with other health care professionals, coaches, athletic directors and the athlete to make up the sports medicine team. The athletic trainer serves as a liaison between the athlete and the medical community and the athlete and the coaching staff.

The Certified Athletic Trainer is a highly educated and skilled professional specializing in athletic health care. In cooperation with physicians and other allied health personnel, the athletic trainer functions as an integral member of the athletic health care team in secondary schools, colleges and universities, sports medicine clinics, professional sports programs and other athletic health care settings.

The most fundamental requirement for becoming an athletic trainer is a sincere interest in athletics and the athlete's well being. Today's athletic trainer is a highly trained individual who plays an integral role in a comprehensive athletic program. The athletic trainer's duties consist of implementing injury prevention programs, immediate first aid treatment, and establishing rehabilitation protocols for the injured athlete under the direction of a team physician.

The athletic trainer's skills are varied. He or she must have a thorough knowledge of anatomy, physiology, psychology, hygiene, nutrition, taping, conditioning, prevention of injury, and protective equipment. In addition to these many skills and abilities, the athletic trainer must have an excellent rapport with the team physicians, coaches, administrators, and athletes in order to perform effectively.

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**Filing a Complaint**

While the majority of licensees conduct themselves as true professionals, the Division of Professional Licensure will take action against those who fail to maintain acceptable standards of competence and integrity.

In many cases, complaints are made by dissatisfied consumers - but, dissatisfaction alone is not proof of incompetence or sufficient grounds for disciplinary action.

If you have a serious complaint against a licensed allied health professional, call or write the Division's Office of Investigations and ask for a complaint form. Or download a copy of the [complaint form](https://example.com/complaint_form).