Moving Beyond the Classroom and Preparing for Success in the Real World

Let APTA help you get the most out of your career

Leadership
Networking
Volunteerism
Entrepreneurship

2018 Student Conclave Program & Student Handbook
Welcome to the 2018 Student Conclave hosted by the DC and Maryland Chapters of the APTA.

The APTA is the voice of our profession. As you spend this day and the days ahead, consider how you might help make our profession stronger by becoming more involved in the Association. There are many opportunities to participate for only a few hours or for greater commitment. No service is too small and no volunteers are ever turned away. The rewards are immense. If you would like to find out how your talents can be used please talk to DCPTA and APTAMD Student and Chapter leadership at today’s event or reach out to our Executive Director at 1-800-306-5596.

Today you get to:

🌟 Network with peers, mentors, employers, and APTA leaders.
🌟 Learn practical information not typically covered in the classroom.
🌟 Discover your role as a member of APTA and how you can make the most of your membership and make a difference.

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DCPTA Rising Star Student Leader Awards

Congratulations to our 2018 Rising Stars

CiAnna Kreighish
Elony May
Haley Yohn

GW Health Sciences

School of Medicine & Health Sciences

Congratulations for your leadership with the DCPTA Student Special Interest Group

Tyla Bates
Roxanne Eugene
Jordyn Glover
Tiphani Jackson
APTA of Maryland Rising Star
Student Leader Awards

The Chesapeake Area Consortium Congratulates Adalia Cubie, SPTA as an outstanding leader and student.

On behalf of the CACHE PTA Program we congratulate you on your achievement.

PTRS Congratulates
Maria Balarezo, SPT
Ray Gergen, SPT
Nicole Grabowski, SPT
Stephanie Oscilowski, SPT
Sheina Singer, SPT
Tim Smith, SPT

We are incredibly proud of our PT students for their leadership, initiative and enthusiasm.

We look forward to your continued advancement in the Association as the future leaders of our profession.

MC Congratulates Ben Greene, SPTA as a 2018 APTA of Maryland Student Leader and Rising Star
Panelists & Leadership Bios

Jason Dring PT, DPT, GCS is currently serving his second term as president of DCPTA. Prior to becoming president, Jason served as the chapter’s State Policy and Advocacy Chair and Federal Affairs Liaison. In 2017, he was awarded the chapter’s Menora Simpson Service Award. Jason has represented DC as a delegate to the APTA House of Delegates in 2015, 2016, and 2017. Jason is also an active member of the Academy of Geriatric Physical Therapy where he is involved in the Falls and Balance Special Interest Group. Dr. Dring is a board-certified geriatric clinical specialist and has worked across the continuum of care, including founding a private practice that focuses on the health and wellness needs of older adults. He currently works for a large health system where he focuses on reducing hospital re-admissions for patients living with congestive heart failure and COPD. Dr. Dring graduated from GWU Doctor of Physical Therapy Program in 2008. He continues to maintain close ties with the program as adjunct faculty and received the program’s Outstanding Alumni Award in 2011. Prior to becoming a physical therapist, Jason worked in public affairs and political communications in Washington DC. jasondring@mac.com

Cara Felter, DPT, NCS, PCS, MPH is the Director for Education for the APTA of Maryland. Cara graduated summa cum laude from Shorter University with a major in biology and was awarded the H.Y. Benedict Fellow Award for Excellence in Undergraduate Research. Dr. Felter and earned her DPT form Belmont University School of Physical Therapy and was honored as an “Outstanding Alumnus” in 2014. She went on the complete a masters’ degree in Public Health form the Johns Hopkins School of Public Health. Cara completed a residency in Pediatrics at Kennedy Krieger Institute/Johns Hopkins Hospital. She is Board Certified in Neurologic Physical Therapy and in Pediatric Physical Therapy. Cara is also a Certified Brain Injury Specialist (CBIS) and an APTA Certified Clinical Instructor. After earning her DPT, she worked in various physical therapy clinics in the District of Columbia area before joining the physical therapy department at Kennedy Krieger Institute in 2007. In 2011, she joined the faculty at the University of Maryland, School of Medicine, Department of Physical Therapy as an adjunct instructor. In 2016, Cara joined the faculty full-time, as an assistant professor. Cara was recognized by the APTA and received the Emerging Leader Award in 2009 and Henry O. and Florence P. Kendall Award in 2018. cfelter@som.umaryland.edu

Kala Flagg, MPT, ATC, CSCS graduated from Howard University Department of Physical Therapy in 2000. Shortly after graduation she also received her certification as an athletic trainer, and certificate as a Strength and Conditioning Specialist in 2006 through NSCA. Since graduating from the program 18 years ago Ms. Flagg has held many positions in various settings including outpatient clinics, nursing homes, pediatric, and even some inpatient hospitals. The majority of her experience, however, has been in what she likes to call “non-traditional environments” which has allowed her a tremendous amount of growth, creativity, and opened unexpected doors in the field. Most notably, in 2005 she became the first-ever physical therapist to work directly within the Athletic Department of the University of Maryland, College Park where she helped establish a multi-disciplinary approach to within the continuum of care. She is also part of a team of PTs that travels with the Alvin Ailey American Dance Theater in NYC, and about 2 years ago she opened a small cash-based clinic to focus on providing one-on-one care to and educating athletes, dancers and performers of all ages. As a small business owner, she’s experienced a lot of ups and downs that she’s not afraid to share in order to help others, but she also believes that, as physical therapists, we should do more to educate the public about our scope of practice and offer prevention just as often as post-injury treatment. Currently, Ms. Flagg is a full-time faculty member at Howard University Department of Physical Therapy where she serves as ACCE and Co-Instructor of Advanced Musculoskeletal Systems. She will begin her doctoral degree studies in 2019. kalateam@verizon.net

Fred Gilbert DPT, OCS practices in the DMV. Dr. Gilbert is currently serving as the Chief People Officer (CPO) and treating clinician with MovementX. MovementX (@MovementXinc) is a mobile Physical Therapy, fitness, and wellness company that is working to transform the way that care is delivered to clients and the way that providers are able to deliver that care. Dr. Gilbert completed his orthopedic residency with the North American Institute of Orthopedic Manual Therapy (NAIOMT) in 2017, received his doctorate from the University of Alabama at Birmingham (UAB) in 2015, and was graduated from Clemson University in 2011. Dr. Gilbert’s APTA involvement has included serving as President of the Student Assembly Board of Directors, serving on the Board of Directors for the Alabama Chapter, and currently serving on the Early Career Team task force. fred@movement-x.com

Linda B. Horn, PT, DSc, MHS is an Assistant Professor and Director of Academic Affairs at the University of Maryland School of Medicine, Department of Physical Therapy and Rehabilitation Science. Dr. Horn has over 30 years of clinical experience in a variety of clinical settings including acute care, outpatient and home care. She is an ABPTS Board-Certified Clinical Specialist in Geriatrics since 2015 and Neurology since 1993. She also is a Certified Exercise Expert for Aging Adults from the Academy of Geriatric Physical Therapy. Dr. Horn is a national lecturer on fall prevention as well as balance and vestibular disorders in the adult population. She received a BS in Physical Therapy from the University of Maryland Baltimore in 1984, Master of Health Science from the University of Indianapolis Krannert School of Physical Therapy in 2004, and Doctor of Science in Physical Therapy from the University of Maryland Baltimore in 2007. She has received several awards including Alumni of the Year from University of Maryland Baltimore PTRS, APTA of Maryland’s Henry O. and Florence P. Kendall and Stephen M. Levine Awards, and the APTA Lucy Blair Service Award. She is active in the APTA at the state and national level. She served two terms as President for the APTAoF Maryland and currently is a member of the Continuing Education and Government Affairs Committees, Chief Delegate, and Federal Affairs Liaison. She also is a member of the Advocacy and Consumer Affairs Committee for the Academy of Neurologic Academy and the Maryland Falls Free Coalition. lhorn@som.umaryland.edu
Panelist & Leadership Bios Continued

Tiphani Jackson, SPT is a third-year student in the DPT program at Howard University. Prior to attending Howard, Tiphani earned her Bachelor of Science degree with a concentration in Athletic Training from North Carolina Central University. Tiphani is a Board-Certified Athletic Trainer, the President of her cohort at Howard University and serves as the current Chair for the DC Student Special Interest Group. tiphani.jackson@bison.howard.edu

Heather Jennings PT, DPT is the President of the APTA of Massachusetts. Heather is a graduate of Simmons College where she quickly learned the value of APTA through attending National and State Conference. She has maintained a strong belief that membership in our professional organization is vital to the future of the Physical Therapy profession. She has committed to life-long learning and evidence-based practice. Heather is a Board Certified Neurological Clinical Specialist working in the acute care and acute rehab setting with Veterans in the New England area. She serves as a program coordinator and mentor to VA Boston’s Neurological Physical Therapy Residency program and as adjunct faculty in the neurological curriculum at Simmons College. She also holds a position on the Academy of Acute Care Physical Therapy Finance Committee.

Kevin Platt, PT, DPT, MBA, FACHE has been a PT since 1989 - a graduate of the University of Scranton. He started his career at REHAB Hospital in Honolulu, specializing in traumatic brain injury, amputee care, ortho-trauma, and industrial rehab. Platt worked for University of Hawaii, participating in post-Polio research, and developing training programs for rehab techs in Micronesia, and he also served as a PTA Program Instructor. After leaving paradise, Platt spent four years crisscrossing the country as a traveling PT, collecting licenses in six states, and experiencing a variety of practice settings, before settling in Maryland. He became a “fiscal therapist” by studying accounting and business at Loyola University, where he earned an MBA. For the past 20 years, Platt has held various administrative positions in post-acute care, outpatient clinic operations, and hospital leadership. As a Fellow of the American College of Healthcare Executives, he is board certified in healthcare management, and as an advocate for quality and safety in healthcare, he earned the Certified Professional in Healthcare Quality (CPHQ) credential. He is a 2014 graduate of the University of Montana’s transitional DPT Program, and an active member of APTA of Maryland, serving as current president, former treasurer and delegate. In his current role with MedStar National Rehabilitation Network, Platt is based at MedStar Good Samaritan Hospital, and is responsible for inpatient rehabilitation, physical medicine & rehabilitation, and psychology services in the Baltimore region, and he is a home care physical therapist (PRN) with MedStar VNA kevin.c.platt@medstar.net

Stephanie Oscilowski, SPT is a second year DPT student at University of Maryland, Baltimore. She is the Chair of the Maryland Student Special Interest Group (SIG), and the Maryland DPT Student Delegate. Her interest in getting involved with APTA was sparked at the National Student Conclave, Portland in 2017. As chair of the Student SIG, Stephanie organized a National Advocacy Dinner, and with the help of the SIG team, gets the word out about events for students in the area. As student Delegate, Stephanie attending the 2018 House of Delegates session in Orlando. Since starting the DPT program, she has volunteered over 110 hours of her time to help improve the city, and with the APTA, and continues to manage her dance school in Pennsylvania on the weekends.

Stephanie.Oscilowski@som.umaryland.edu

Student Special Interest Groups (SSIG)

APTAMD and DCPTA are giving you the opportunity to expand your professional abilities through networking allowing you to be the best PT and PTA you can be!

There are many reasons to become involved in an SSIG:
• Networking
• Mentorship
• Education
• Volunteer
• And much more!

The mission of the DC SSIG is to promote and advocate for the physical therapy profession through networking, mentorship, education and volunteerism within the District of Columbia and surrounding areas.

DC SSIG Officers:
President: Tiphani Jackson
Vice President: Jordyn Glover
Secretary: Tyla Bates
GWU Student Representative: Elony May
HU Student Representative: Roxanne Eugene
Core Ambassadors: CiAnna Kreigish & Haley Yohn
aptasa.coreDC@gmail.com

2018 DC SSIG Fall Meeting/Elections
November 30, 2018 at 5:00pm-6:00pm
Contact: Roxanne Eugene
roxanne.eugene@bison.howard.edu

The APTA of Maryland SSIG is a group that has been created to benefit Maryland DPT and PTA students by providing a state-level resource for students to network and develop relationships that will last a lifetime. The SSIG works to promote student membership, participation and leadership of students within the Chapter and to foster communication and collaboration of students between schools. There are many opportunities to get involved with the SSIG. If you are interested in joining a project committee or being a committee chair, please send an email to aptaofmdssig@gmail.com.

Check out our Facebook page APTA of Maryland Student Special Interest Group. Elections are in June 2019

APTAMD SSIG Officers
Chair: Stephanie Oscilowski
Vice Chair: Jessica Werth
Secretary: Maria Balarezo
Social Media: Tim Smith
Core Ambassador: Sean McComiskey
aptasa.coreMD@gmail.com

Core Ambassadors are the primary link and communication between PT and PTA students in a particular district and their Student Assembly Board Directors. Core Ambassadors goals include create awareness of advocacy efforts at the state and national level and increase opportunities for student to have greater participation with the APTA.
Below are descriptions of areas of physical therapy practice that may be beneficial to your patients. This is not an exclusive list – this list is based off student feedback for focus areas for the speed dating session.

**Acute Care**
Acute care physical therapists and physical therapy assistants provide skilled services for the individual with acute health problems, resulting in limitations in mobility, loss of function, and/or skin integrity issues. While the majority of patients are hospitalized, others are children with developmental disabilities or individuals of all ages who need physical therapy because of injury or acute illness. Acute care PTs and PTAs are experts in the evaluation and treatment of those with medically complex conditions. Acute care physical therapy may be provided in an emergency room, hospital, intensive care unit, long-term acute care facility, a skilled nursing or residential facility, group home, hospice, patient residence, caregiver’s home, or in a community setting.

The following are health conditions commonly treated by acute care PTs and PTAs:

- Total joint replacements
- Fractures or multiple trauma
- Stroke and spinal cord injuries
- Fall risk or balance issues
- Cancer-related debility
- Medical problems and/or surgical procedures
- Acute infection/wound care/burn care
- Cardiovascular and pulmonary conditions
- Transplantation (both pre- and post-transplant)

**Cardiovascular and Pulmonary**
Cardiovascular and pulmonary physical therapy is the provision of health, wellness, prevention and rehabilitation services in a variety of practice settings to individuals of all ages at risk for, or diagnosed with, cardiovascular or pulmonary impairments. Health conditions commonly treated by cardiovascular and pulmonary physical therapists and physical therapy assistants include:

- Chronic Obstructive Pulmonary Disease (COPD)
- Acute and chronic respiratory disorders
- Diabetes
- Vascular disease
- Arterial disease
- Cystic Fibrosis
- Hypertension
- Heart disease

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**Three Questions to Choosing a Practice Area**

1. **What Patient Population Interests You Most?**
   If you can think of a specific patient population that is most interesting, this may be an indication on the type of practice setting you will excel in.

   If you are drawn towards a caseload full of kids, a focus in pediatric physical therapy may interest you most. If you are drawn to treating patients after a stroke or spinal cord injury, consider a career in neurologic physical therapy.

   First ask yourself what patient population interests you most.

2. **What Patient Diagnoses Interest You Most?**
   You may already have this answered with the first question. If you have specific patient diagnoses that you are interested in treating, this will also clue you in on what setting suits you.

   Interested in post-operative patient diagnoses? Consider an orthopedic employment setting.

3. **What Practice Environment Interests You Most?**
   The practice environment you choose will help gear you to treating those diagnoses and patient populations you are most interested in.

   A sub acute rehabilitation environment will allow you a higher chance of treating stroke or brain injury patients. A nursing home environment will allow you a higher chance of treating geriatric patients.

*Physical Therapy Connect.com.*
Geriatrics
Geriatric physical therapy is a rapidly growing specialty area focused on optimizing aging. Physical therapists and physical therapy assistants who work in this area treat a broad range of individuals, including:

- healthy adults who want to continue to safely pursue recreational activities as they age
- individuals who are at risk for injuries from falls or other adverse events
- persons with medical conditions that limit their mobility or ability to perform activities independently
- critically ill or injured older individuals requiring acute hospital care
- older persons who need rehabilitation after surgery
- frail individuals requiring short-term skilled nursing or long-term care
- older persons in hospice care who want to remain as independent as possible

Health conditions commonly treated by geriatric PTs and PTAs include:

- Cancer-related complications
- Complications from hypertension
- Fall risk
- Fractures
- Heart & lung disorders
- Joint replacement surgery
- Neurological conditions (e.g., stroke, Parkinson disease, multiple sclerosis, vestibular disorders)
- Osteoarthritis & rheumatoid arthritis
- Osteopenia & osteoporosis
- Overweight & obesity
- Pre-diabetes & diabetes
- Sports related injuries
- Wounds & amputations

Home Health
Home health physical therapy is the provision of skilled services in the patient's place of residence. While the majority of patients are senior citizens, there are pediatric patients with developmental disabilities and other conditions, and individuals of all ages who need rehabilitation due to injury or illness. Home care may be provided in the patient’s residence, the caregiver's home, a hospital emergency room, skilled nursing facility, residential facility, group home, hospice, or elsewhere in the community.

The following are health conditions commonly seen by home health PTs and PTAs:

- Total joint replacements
- Fractures
- CVA
- Progressive neurological conditions
- Fall risk
- Dementia
- Chronic pain
- Incontinence
- Wounds
- COPD
- Heart failure

Neurology
Neurologic physical therapy includes the evaluation and treatment of individuals with movement problems due to disease or injury of the nervous system. PTs and PTAs who practice in neurology provide services to individuals of all ages with the goal of improving function and overall ability to participate in personal roles and activities that are important to the individual. Neurologic PTs and PTAs assistants practice in many settings, including acute care hospitals, rehabilitation centers, outpatient clinics, skilled nursing and long-term care facilities, schools, patients’ homes, and other community locations.

The following health conditions are commonly treated by PTs and PTAs specializing in the area of neurology:

- Balance and vestibular disorders
- Pediatric conditions, including cerebral palsy, spina bifida, and genetic disorders
- Cerebrovascular accident
- Central & peripheral nervous system tumors
- Traumatic brain injury
- Parkinson Disease
- Multiple Sclerosis
- Amyotrophic Lateral Sclerosis
- Acute or chronic peripheral neuropathies, including Guillan Barre, chronic inflammatory neuropathy
- Spinal cord injury

Oncology
Oncologic physical therapy is the provision of skilled therapy services for patients with cancer. Oncologic PTs and PTAs treat patients of all ages and practice in acute care and rehabilitation hospitals, skilled nursing units, outpatient and home health settings, and health/wellness centers. They are often involved during the early stages of an individual's cancer diagnosis and can be vital throughout the course of a patient’s treatment by helping maintain/gain strength, flexibility, and endurance and maximizing function.
The following are health conditions commonly treated by oncologic PTs and PTAs:
- Breast cancer
- Colon cancer
- Lung cancer
- Lymphedema related to cancer
- Bone cancer
- Brain cancer
- Leukemia
- Multiple myeloma
- Skin cancer

**Orthopedics**

Orthopedic physical therapy is the provision of care for those individuals of all ages with disorders or dysfunction of the musculoskeletal system. Orthopedic physical therapists and physical therapy assistants are skilled in the diagnosis, management, and prevention of musculoskeletal disorders. They are experts in the assessment of movement and can help individuals move better, often with less pain, through skilled manual therapy, therapeutic exercise and patient education. Orthopedic physical therapy is often provided in an outpatient rehabilitation setting; however, orthopedic physical therapy extends into many other health care settings, including hospitals, homes, sports clinics, and industrial sites.

The following health conditions are often managed by orthopedic PTs and PTAs:
- Low back and neck pain
- Rotator cuff injuries and other shoulder problems
- Osteoarthritis
- Plantar fasciitis
- Post-operative rehabilitation from orthopedic surgical procedures
- Muscle strains
- Joint sprains/pain/swelling, including knee and ankle injuries
- Chronic pain
- Tennis/golfer’s elbow
- Carpal Tunnel Syndrome

**Pediatrics (Including School Based and Early Intervention)**

Pediatric PTs and PTAs provide support and services for children (birth to 21 years) with developmental disabilities, and their families, aimed at developing, restoring and improving mobility to improve quality of life. These services are provided in homes, schools, and community settings, as well as in hospitals and clinics. Pediatric physical therapy benefits children and their families/caregivers by promoting activity and participation in everyday routines, increasing functional independence, enhancing learning opportunities, improving strength and endurance, facilitating motor development and mobility, and easing the challenges of daily caregiving. In addition to direct intervention and consultation, pediatric physical therapists and physical therapy assistants promote health and fitness for children with all levels of ability and provide information to and collaborate with families and other medical, developmental, and educational specialists.

The Individuals With Disabilities Education Act (IDEA) is a federal law, with state education agency oversight, that supports the provision of public education for all children—regardless of the nature or severity of their disability. Part B of IDEA mandates the education of children, 3-21 years old, who have a disability that interferes with their educational performance and their ability to benefit from their educational program. As a member of the Individualized Education Plan team, physical therapists design and implement physical therapy interventions—including teaching and training of family and education personnel and measurement and documentation of progress—to help the student achieve his/her IEP goal.

- Physical therapists assist students in accessing school environments and benefiting from their educational program.
- Physical therapists may be hired through the school district, an intermediate unit, or a contract with an outside agency or private practice.

Part C of IDEA is an optional federal program that supports early intervention for infants and toddlers (birth up to 3 years). All states currently are participating in Part C. Physical therapists can be employed by a Part C lead agency or be hired by a contract with an outside agency or private practice.

The following are health conditions commonly treated by pediatric PTs and PTAs:
- Developmental delay
- Cerebral palsy
- Spina bifida
- Down syndrome and other genetic disorders
- Neuromuscular disorders
- Orthopedic conditions or injuries
- Pulmonary disorders
- Brain injury
- Juvenile rheumatoid arthritis
• Burns or other injuries
• Autism spectrum disorders

**Sports**

Sports physical therapy is a specialized practice that focuses on prevention, evaluation, treatment, rehabilitation, and performance enhancement of the physically active individual. This includes pre-participation screenings, equipment recommendations, prescribed fitness programs, and much more. Sports physical therapists and physical therapy assistants incorporate the most current research into their practice to help the active individual fully participate in sports and recreation.

The following are interventions often provided by sports physical therapists and physical therapy assistants:

- Performance enhancement
- Injury prevention
- On-site evaluation and management of acute sports injuries
- Treatment and rehabilitation
- Research

**Women's Health**

Women's health physical therapy is the evaluation and treatment of musculoskeletal disorders and the prevention of disorders in women across the life span. This includes young female athletes, women of child bearing age, and menopausal and elderly women. While the majority of patients are women, specialized physical therapists and physical therapy assistants can also provide evaluation and treatment to male patients with pelvic floor disorders including pain and incontinence.

The following are health conditions commonly treated by women's health physical therapists and physical therapy assistants:

- Urinary incontinence
- Bowel incontinence
- Pelvic pain
- Constipation
- Pregnancy/post-partum pain and weakness
- Breast cancer
- Lymphedema
- Osteoporosis
- Fibromyalgia

**Specialty Certification**

Specialization is the process by which a physical therapist builds on a broad base of professional education and practice to develop a greater depth of knowledge and skills related to a particular area of practice. Clinical specialization in physical therapy responds to a specific area of patient need and requires knowledge, skill, and experience exceeding that of the physical therapist at entry to the profession and unique to the specialized area of practice.

The specialist certification program was established to provide formal recognition for physical therapists with advanced clinical knowledge, experience, and skills in a special area of practice and to assist consumers and the health care community in identifying these physical therapists.

The American Board of Physical Therapy Specialties (ABPTS) has certified more than 24,000 individuals who have demonstrated advanced clinical knowledge and skills in physical therapy specialty areas. Currently, the ABPTS offers board-certification in nine specialty areas of physical therapy:

- Cardiovascular & Pulmonary
- Clinical Electrophysiology
- Geriatrics
- Neurology
- Oncology
- Orthopaedics
- Pediatrics
- Sports
- Women's Health

**PTA Advanced Proficiency Pathways (APP)**

The Physical Therapist Assistant Advanced Proficiency Pathways (PTA APPs) are educational guides to help the licensed PTA gain advanced proficiency knowledge and skill in a selected area of work. Using the PTA APPs, participants complete online core courses common to all of the APPs; content specific courses for the selected area of work; and mentoring experiences with a qualified clinical mentor of the participant's choosing. The program has 3 components:

1. APTA courses that are completed regardless of area of proficiency with knowledge checks.
2. Proficiency area-specific content with knowledge/skill checks.
3. Mentored clinical experiences with skills checks.

Participants receive guidance from a self-designated clinical mentor that has expertise in the content area.

**Initial content areas include:** Acute Care, Cardiovascular and Pulmonary, Geriatric, Oncology, Orthopedics, Pediatrics, Wound Mngt,

*Additional content areas will be added as they are completed.*

[www.abpts.org](http://www.abpts.org)


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*How to Chose your Practice Setting and Area of Specialization Continued*
Licensure & Regulations

PTs are licensed in all 50 states and the District of Columbia, Puerto Rico, and the US Virgin Islands. Licensure is required in each state in which a physical therapist practices and must be renewed on a regular basis, with a majority of states requiring continuing education as a requirement for renewal. PTs must practice within the scope of physical therapy practice defined by these state licensure laws (physical therapy practice acts). The entire practice act, including accompanying rules, constitutes the law governing physical therapy practice within a state.

Physical therapist assistants (PTAs) are licensed or certified in all 50 states and the District of Columbia, Puerto Rico, and the US Virgin Islands. Licensure or certification is required in each state in which a PTA works and must be renewed on a regular basis, with a majority of states requiring continuing education as a requirement for renewal. PTAs' scope of work and supervision requirements are defined by the physical therapy practice act in each state.

Minimum Education and Training Necessary to Perform Dry Needling in Maryland

In order to perform dry needling, a physical therapist shall have at least 80 total hours of training (40 hours of instruction and 40 hours of practical hands on). A physical therapist shall have practiced physical therapy for at least 2 years before performing dry needling in the State.

For additional information and instruction on the regulations, go to: https://www.aptamd.org/dry-needling/
PT and PTA Licensure Application in the District of Columbia
If you have any questions, call HPLA Customer Service at 1-877-672-2174, Monday through Friday, 8:30AM to 4:30PM EST.

DC Criminal Background Check Information
A separate payment is required for each applicant. To schedule an appointment (Call 1-877-783-4187 or www.L1enrollment.com).

New LGBTQ Education Requirement for Licensure
To qualify for a license, licensees shall submit proof of having completed two hours of LGBTQ continuing education within the two (2) year period preceding the date of the application for reactivation of that applicant’s license.

Licensure by Examination: U.S Graduates
A complete signed application for DC License & Supplemental Information Form
Application fee of $264 made payable to D.C. Treasurer
Completed Criminal History Records Check
Official; in a sealed envelope – Transcript from a CAPTE Accredited School of Physical Therapy with degree and date conferred.
On-line registration to sit for NPTE through FSBPT (confirmation of national exam registration must be sent with application)
On-line registration to sit for DC Jurisprudence Exam through FSBPT (confirmation of Jurisprudence Exam registration must be sent with application)
Social Security Number or a Sworn Affidavit
Copy of an official government-issued I.D. such as a driver's license, passport, etc.
Copies of legal documents supporting all name changes.
Photograph: 2 Recent Passport Photos 2x2

About the National Physical Therapy Examination
The Federation of State Boards of Physical Therapy (FSBPT) administers the National Physical Therapy Examination (NPTE), the examination that every graduate of a physical therapy or physical therapist assistant education program must pass to become a licensed physical therapist or licensed/certified physical therapist assistant (or to regain licensure/certification if lapsed) in the United States (US). Foreign-educated candidates who wish to become licensed in the US must also take and pass this examination.

The NPTE is a computer-administered examination. The physical therapist licensure examination has five sections each with 50 questions. Of the 250 multiple choice questions, only 200 are scored. The other 50 questions are being pretested to see if they meet the standards to be included in future exams. The physical therapist assistant licensure examination has four sections with a total of 200 multiple choice questions. As in the physical therapist examination, 50 of these questions are being pre-tested and are not scored.

There is one scheduled 15 minute break during the examination. A candidate may take up to three unscheduled breaks between sections, but these breaks use time that is allotted for test-taking. Additional information about the examinations can be found at www.apta.org/Licensure/NPTE/
### 2019 Dates & Deadlines for PTs

All deadlines are 11:59 PM Eastern Time.

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<th>Jurisdiction Approval Deadline</th>
<th>Seats are reserved for candidates until:</th>
<th>Scores Reported to Jurisdictions</th>
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This is the latest date that your state board can notify FSBPT that you are eligible for the examination. It is your responsibility to ensure your jurisdiction has what it needs to approve you to sit for the NPTE by this date. NOTE – Some states may have earlier application deadlines.

The July PT examination will be given on 2 consecutive days. Candidates registering for this exam will **automatically be assigned** to a test date during registration.

### 2019 Dates & Deadlines for PTAs

All deadlines are 11:59 PM Eastern Time.

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<td>October 3</td>
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This is the latest date that your state board can notify FSBPT that you are eligible for the examination. It is your responsibility to ensure your jurisdiction has what it needs to approve you to sit for the NPTE by this date. NOTE – Some states may have earlier application deadlines.

**IMPORTANT NOTES ABOUT DATES AND DEADLINES**

Make sure you register and pay for the exam **before** the registration deadline passes. Your jurisdiction cannot approve your registration for the NPTE and you will not receive an Authorization to Test until your registration AND payment are received by FSBPT.

Candidates who are unable to test on the date they were scheduled due to a problem with the Prometric testing center (power outage, computer malfunction, etc.) should call FSBPT to be rescheduled as soon as possible.
### 2020 Dates & Deadlines for PTs

All deadlines are 11:59 PM Eastern Time.

<table>
<thead>
<tr>
<th>Test Date</th>
<th>Registration &amp; Payment Deadline</th>
<th>Jurisdiction Approval Deadline</th>
<th>Seats are reserved for candidates until:</th>
<th>Scores Reported to Jurisdictions</th>
<th>Free Candidate Report Available Online</th>
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<td>Dec. 26</td>
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</table>

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The July PT examination will be given on 2 consecutive days. Candidates registering for this exam will automatically be assigned to a test date during registration.

### 2020 Dates & Deadlines for PTAs

All deadlines are 11:59 PM Eastern Time.

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<th>Test Date</th>
<th>Registration &amp; Payment Deadline</th>
<th>Jurisdiction Approval Deadline</th>
<th>Seats are reserved for candidates until:</th>
<th>Scores Reported to Jurisdictions</th>
<th>Free Candidate Report Available Online</th>
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<td>Sept. 8</td>
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**IMPORTANT NOTES ABOUT DATES AND DEADLINES**

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Negotiations

How to Talk about Salary in the Job Interview?

Answering the salary question doesn’t have to be as daunting a task as it feels if you respect where the employer is coming from.

Salary Expectations and Ranges

One of the hardest questions on a job application or interview is “what are your salary expectations?”. So what’s the strategy for getting it right?

Negotiating Salary and Other Benefits

Come across as more confident in the way you convey yourself during an interview.
The odd thing about our society is that money is the thing that makes the world go round, but it's the last thing that people want to discuss. Your decision to take or decline a job offer will, in many cases, be based on the salary. An employer will make the same judgment about you based on the same reason. So it's important to understand the goals of both sides.

As a jobseeker, you don't want to sell your skills short. You were earning a certain salary at your last position, and you'd like a bump in that based on your additional experience. Or maybe you were earning too much at your last position and you know that you were paid above "market value."

As an employer, the company has a budget for how much they are able to pay for a position. Just like you have a budget for how much you are able to pay for a car or an apartment. Employers want to maximize the quality of the person they're getting for the salary they are paying, it's only natural.

The other aspect to consider is that there are certain phases of the interview stage. In the beginning stages, the employer just needs to know a salary range that you're expecting. Yes, in some cases you'll need to provide this on the job application. It's also a good idea to keep track of those positions that require you to provide that information, so when you are contacted for an interview, you know what you put on the application.

When asked in an interview, your first bet should be to send the question back to the employer and ask them what their budget range is for the position. This is a great strategy because in most cases they will have a set budget range, and very few job seekers use this strategy. Once you know their range, you can decide if you would like to continue with the interview.

However, if they reply that they are open or haven't decided, then you will need to provide a range. There's no other way to avoid the question.

Providing them a range shouldn't be a three-act play. Please don't do the "I would expect a salary in line with my skills and experience over 20 years of blah, blah, blah," because chances are you're the third person who has tried that windup today. Just give them a range. A range is fine because during the first interviews, you don't know much about them, and they don't know much about you. They are simply trying to figure out if you are within their range.

Also keep in mind that there is definitely a range in the market for certain types of positions with certain types of companies. Looking for a mid-level IT position with a large company, those positions will tend to fall within a certain salary range. Interviewing with a smaller company for a similar position, you may want to adjust your salary range lower. You must keep track of the data you collect for every interview and you'll start to notice patterns in the salaries.

Above all, don't take it personally if an employer mentions a lower budget range than what you're looking for. Sometimes they are limited by their bosses, how well the company's been doing that year, or some other factors they have no control over.

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Get connected with our career centers and upload your resume so employers can find you.

Your anonymous resume gets listed in the resume bank for employers to view. They will see everything you put in except for your name and contact information. When an employer reviews your anonymous resume and decides they want to consider you for an opportunity, they will construct an overview that will be emailed to you and placed in the "My Contact Requests" section of your account. You will be able to review these opportunities and decide whether you want to be considered for the position.

You can also use your resume to apply for job postings currently posted on the job board that have the "Allow Online Applications" button enabled.
One of the hardest questions on a job application or interview is “what are your salary expectations?” Ask for too much and you risk not getting the job; ask for too little and you risk being underpaid and undervalued. So what’s the strategy for getting it right?

Unfortunately, there is no magic answer for what you should make, unless you know people in HR within the company where you are applying. Even then, they can only offer a range, but what is a candidate to do when he or she knows nothing about the salary scale?

1. The first step is research. There are plenty of sites that will give you an average salary for your field within your country, your town, even your level of expertise. It is strongly recommend you utilize at least three of these, though, because there are random factors that can affect these ranges. Once you have an average among sites, though, you have a starting point and you can begin thinking about additional factors specific to your circumstances.

2. Secondly, what are you currently making or were you making in your last position? While this is not always a clear factor in determining salary, it’s still going to play a role. Career changers or those moving levels will find this is tougher, but it’s still a good base. If you are making $40K, but the new role would be at least twice as much work, $50K isn’t a reasonable estimate. At the same time, if you were making $220K and you are making a significant career change to an entry level role, you need to realize you are starting over. Employers will also consider this in offering you a salary. If you are well above their salary range, they may be wary about hiring you, thinking you are going to leave as soon as you find something that pays more. If you are open about knowing that it’s a significant pay cut, you save everyone the time of wondering if you are expecting more from the position.

3. Now, the third thing is to try to monetize your value. Taking into consideration your recent salary and responsibilities, how does this new opportunity look in comparison? Again, if you were working a standard 40-hour workweek but held minimal responsibility, taking on a position where you are now accountable for a team of 10 and are looking at 50-60 hours of work a week should come with an increase in pay.

4. Take into consideration benefits, too. A $60K salary with health insurance covered 100% by the employer, a matched 401(k), and four weeks of vacation may, in many ways, be better than $100K with two weeks of vacation and basic insurance. Just as you are monetizing your time and responsibilities, monetize things like company culture, benefits, job security, commuting or travel time, etc. The number on the paper may sound perfect, but there are other factors at work.

5. Finally, when you are ready, create a scale. Based on what you think you should earn, find a number below and above your ideal. If you want $80K, asking for $70K-$90K is a good start for negotiations. Your lower number should be the lowest you will be satisfied taking (not necessarily the lowest you can take, but the lowest you will take without being disappointed), while the top number should be a little hopeful but still realistic. This way, you have room for negotiation. If you say $70K-$90K and they offer $80K, perfect. If they offer $70K, you may be able to negotiate additional benefits, a bonus option, a raise in six months, etc. At the end, though, you are still in a place where you are satisfied and it’s ideally matching what they were hoping you would say was your expectation.

### Salary Ranges

Salary ranges can vary widely depending on many important factors, including education, certifications, additional skills, and the number of years you have spent in your profession.

#### Physical Therapist

The average Physical Therapist salary in the United States is $84,618 as of October 31, 2018, but the range typically falls between $77,948 and $91,813.

- Alexandria, VA  $80,131 to $94,383
- Baltimore, MD  $70,131 to $81,209
- Frederick, MD  $63,304 to $77,948
- Washington, DC  $67,802 to $84,618

#### Physical Therapy Assistant

The average Licensed Physical Therapy Assistant salary in the United States is $53,341 as of October 31, 2018, but the range typically falls between $48,304 and $58,877.

- Alexandria, VA  $53,729 to $65,489
- Baltimore, MD  $49,657 to $60,525
- Frederick, MD  $51,858 to $63,209
- Washington, DC  $53,729 to $65,489
Come across as more confident in the way you convey yourself during an interview. So you have a job offer and you get excited about the new company for which you may be working. But the salary offer is lower than you expected and the vacation time is not quite what you had hoped for. Is it a wise idea to negotiate for a higher salary or better benefits? How do you go about making the case for these things?

The key is to be reasonable with your requests and, above all, do some market research and know what you are worth. Starting salaries depend on many factors and employers simply may not want to talk money. However, you may be able to agree on other things to bridge the gap. Here are a few things to think about.

Market Research
As you approach the negotiating table, arm yourself with knowledge. It is important to know what the job you have been offered is paying on average. Take all factors into account, such as where the company is located, company size and industry standard. As you make your requests, show interest in working for the company. This may sway the employer to meet your requests amicably.

Think About More than Just Money
Benefits have a cash value to both you and the employer. This is where your market research is important. If you can show a gap between the industry standard pay scale and what you are offered, you may be able to negotiate a hiring bonus to close that gap. This is a onetime payment to you that is made on the first day of work.

Vacation Time
For the most part, you can expect two weeks of paid vacation time to start. Negotiating an extra week is more common than you may think. If you can show that you had accrued more than the two weeks at your previous job, you will most likely be awarded the request.

Short Term Performance Review
By negotiating an early performance review, you may be able to kill two birds with one stone. A positive review will earn you an early increase in base pay. This can serve to settle a lower than expected salary offer. This strategy also shows an employer that you are willing to prove your worth and are extremely interested in the position.

Schedule Flexibility
This is a fairly big factor for many people. If you see that you need flexibility in your work schedule, inquire about an alternate schedule such as four 10 hour days. Perhaps you need an early starting or quitting time to allow for family obligations. Telecommuting is becoming much more prevalent, so asking if that is an option is not unreasonable. All of these are viable options.

When you are truly ready to start moving your career forward, take charge and make it happen, you are the only one who can.

Physical Therapy Professionals:
INTERESTED IN A NEW OPPORTUNITY?
Find exclusive job opportunities available only through the APTA - MD and DC Career Center. Utilize the tools and resources to optimize your job search experience.

- POST your resume and allow employers to contact you with new opportunities
- FILTER your search to see relevant jobs, and send to your inbox as a job alert
- ASK experts career advancement and networking questions
- REGISTER easily using your LinkedIn, Google or Facebook credentials

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Maryland- pt.md.associationcareernetwork.com