

# ***Health Policy Newsletter***

---

**Volume 16 Number 3**

**September, 2003**

**Article 4**

---

## **The Doctor of Physical Therapy (DPT): A New Standard for Entry-Level Physical Therapy Preparation**

**Margaret E. Rinehart Ayres, PT, PhD\***

\* Thomas Jefferson University

Copyright ©2003 by the author. *Health Policy Newsletter* is a quarterly publication of Thomas Jefferson University, Jefferson Medical College and the Office of Health Policy and Clinical Outcomes, 1015 Walnut Street, Suite 115, Philadelphia, PA 19107.

**Suggested Citation:**

Ayers MER. The Doctor of Physical Therapy (DPT): A new standard for entry-level physical therapy preparation. *Health Policy Newsletter* 2003; 16(3): Article 4. Retrieved [date] from <http://jdc.jefferson.edu/hpn/vol16/iss3/4>.

## The Doctor of Physical Therapy (DPT): A New Standard for Entry-Level Physical Therapy Preparation

---

Health care needs of society are ever changing and, therefore, the educational preparation of professionals must be modified to meet the new demands. Physical therapy educational programs, including the Jefferson College of Health Professions Department of Physical Therapy, are currently preparing graduate physical therapists to enter the profession at the Master's level; however, that will change in the fall of 2004. Because of the increasing demands on the profession and the fact that 36 states, including Pennsylvania and New Jersey, now allow physical therapists to evaluate and treat patients without the need for a referral/prescription from a physician, in June 2000, the American Physical Therapy Association (APTA) and the House of Delegates of the APTA endorsed the following Vision Sentence for Physical Therapy 2020<sup>1</sup> :

**By 2020, physical therapy will be provided by physical therapists who are doctors of physical therapy, recognized by consumers and other health care professionals as the practitioners of choice to whom consumers have direct access for the diagnosis of, interventions for, and prevention of impairments, functional limitations, and disabilities related to movement, function and health.**

This means that the APTA envisions that the doctor of physical therapy (DPT) will be the preferred entry-level degree for physical therapists by 2020. (The DPT is a clinical doctorate, as opposed to a PhD, which is a research degree.)

The APTA<sup>2</sup> suggests that there are a number of factors that led to the adoption of this vision for the profession. Some of the factors include:

- The level of practice inherent to the patient/client management model in the *Guide to Physical Therapist Practice*<sup>3</sup> requires considerable breadth and depth in educational preparation, a breadth and depth not easily acquired within the time constraints of the typical MPT program.
- Societal expectations that the fully autonomous healthcare practitioner with a scope of practice consistent with the *Guide to Physical Therapist Practice* be a clinical doctor.
- The realization of the profession's goals in the coming decades, including direct access, "physician status" for reimbursement purposes, and clinical competence (consistent with medicine, osteopathy, dentistry, veterinary medicine, optometry and podiatry).
- Many existing professional (entry-level) MPT programs already meet the requirements for the clinical doctorate. In such cases, the graduate of a professional (entry-level) PT program is denied the degree most appropriate to the program of study.

Because many states now have “practice without the referral of a physician,” proponents of the new degree believe that it will result in patients receiving more timely and effective treatments. Physical therapists will continue to consult and interact with physicians so that the patients receive the best possible care.

As a result of changes in the laws governing practice, physical therapy educational programs must enhance the diagnostic and clinical skills of their graduates. Thus, in the fall of 2004, the Physical Therapy Program in the Jefferson College of Health Professions, a nationally recognized program, will enter the first class of students who will earn a DPT. Students will enter the program with a bachelor’s degree and will receive their DPT at the end of the three-year program. The curriculum will include additional content in critical inquiry, differential diagnosis, pharmacology, radiology/imaging, and health care management, as well as additional time for clinical education. The additional courses allow more time in the curriculum to address the processing and integration of information needed for enhanced professional abilities in differential diagnosis, case management, entrepreneurial and leadership skills, critical analysis, interpretation and clinical application. Graduates will be better prepared to adapt to the constant changes in healthcare and to practice in all environments for patient related care including prevention and wellness services. The Department is planning to develop a Transitional DPT educational program for Jefferson graduates in the near future.

## **References**

1. Massey BF. Straight talk about the DPT. *Phys Ther Mag* 2001;9:26-28.
2. American Physical Therapy Association. Doctor of Physical Therapy (DPT) Degree Frequently Asked Questions. Available at: [www.apta.org](http://www.apta.org). Accessed May 12, 2003.
3. American Physical Therapy Association. Guide to Physical Therapist Practice. *Phys Ther* 2001; 81:9-744.

## **About the Author**

Margaret E. Rinehart Ayres, PT, PhD, is Associate Professor and Director of Clinical Education at Jefferson College of Health Professions, Thomas Jefferson University. Please address comments and questions to [margaret.ayres@jefferson.edu](mailto:margaret.ayres@jefferson.edu).