

STATE OF TENNESSEE

OFFICE OF THE
ATTORNEY GENERAL
PO BOX 20207
NASHVILLE, TENNESSEE 37202

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Opinion No. 07-55

Performance of Spinal Manipulation

QUESTION

Under current law, may physical therapists legally perform spinal manipulation, as that term is defined in Tenn. Code Ann. § 63-43-101(c)(1)?

OPINION

No person licensed under Title 63, Professions of the Healing Arts, including licensed physical therapists, may perform a spinal manipulation or spinal adjustment, as those terms are defined in Tenn. Code Ann. § 63-4-101(c)(1), without first having fulfilled the requirements of that section.

ANALYSIS

The term “spinal manipulation” appears to be a term of art used with respect to chiropractic practice. Tenn. Code Ann. § 63-4-101 defines “chiropractic” and “chiropractic physicians,” and addresses chiropractic education and training and scope of practice. Tenn. Code Ann. § 63-4-101(c)(1) defines “spinal manipulation” and “spinal adjustment” as interchangeable terms that identify a “method of skillful and beneficial treatment where a person uses direct thrust to move a joint of the patient’s spine beyond its normal range of motion, but without exceeding the limits of anatomical integrity.” That section prohibits any person licensed under Title 63, Professions of the Healing Arts, from performing such spinal manipulation or spinal adjustment without first having the “legal authority to differentially diagnose, and having received a minimum of four hundred (400) hours of classroom instruction in spinal manipulation and spinal adjustment,” as well as having received a “minimum of eight hundred (800) hours of supervised clinical training at a facility where spinal manipulation or spinal adjustment is a primary method of treatment.” *Id.* Further, Tenn. Code Ann. § 63-4-101(c)(1) provides that a violation of this section is an unlawful practice of chiropractic and is “grounds for the offending health care provider’s licensing board to suspend, revoke, or refuse to renew such provider’s license or take other disciplinary action allowed by law.”

Tenn. Comp. R. & Regs. 0260-2-.02(3), “Spinal manipulation/Spinal adjustment,” further regulates performance of this treatment technique, and provides, in pertinent part, as follows:

- (a) Training must be performed in chiropractic institutions or institutions that specialize in spinal manipulative therapy. Spinal manipulation is a highly skilled maneuver that requires adequate training. Four hundred (400) hours of classroom instruction and eight hundred (800) hours of supervised clinical training are considered a minimum level of education to properly administer the techniques.
- (b) Spinal manipulation must be performed by hand or with the use of instruments such as Activator, Grostic, Pettibon, or Sweat instrumentation.
- (c) Manipulation moves the spinal segments beyond their normal range of motion for the correction of nerve interference and articular dysfunction, but without exceeding the limits of anatomical integrity.
- (d) A chiropractic diagnosis is necessary to properly establish the indications and contraindications before the administration of the spinal manipulation procedure.

Both the above regulation and statute address the scope of practice of chiropractic physicians. The term “chiropractic” is defined as “the science and art of locating and removing interference with nerve transmission and nerve function,” while a chiropractic physician “diagnoses and treats neuromuscular and musculoskeletal conditions through physical agent modalities and manipulative therapies.” Tenn. Code Ann. § 63-4-101(a). The adjustment, manipulation, or treatment “shall be directed toward restoring and maintaining the normal neuromuscular and musculoskeletal function and health of the patient,” and a chiropractic physician “will also make appropriate health referrals for conditions that may not be treated by physical agent modalities and manipulative therapies.” *Id.*

On the other hand, Tenn. Code Ann. § 63-13-103(15) defines the “practice of physical therapy” as including, among other things, “[e]xamining, evaluating and testing individuals with mechanical, physiological and developmental impairments, functional limitations, and disability or other health and movement-related conditions in order to determine a physical therapy treatment diagnosis, prognosis, a plan of therapeutic intervention, and to assess the ongoing effect of intervention.” Tenn. Code Ann. § 63-13-103(15)(A). Moreover, Tenn. Code Ann. § 63-13-103(15)(B) also includes the following in the definition of the “practice of physical therapy”:

Alleviating impairments and functional limitations by designing, implementing, and modifying therapeutic interventions that include, but are not limited to: therapeutic exercise; functional training; *manual therapy*; therapeutic massage; assistive and adaptive orthotic, prosthetic, protective and supportive equipment; airway clearance techniques; debridement and wound care, *physical agents or modalities*, mechanical and electrotherapeutic modalities; and

patient-related instruction.

(Emphasis added).

Thus, it appears to us that there are at least certain semantic similarities between the scope of practice applicable to chiropractors, and the scope of practice applicable to physical therapists. For example, a chiropractic physician diagnoses and treats neuromuscular and musculoskeletal conditions “through physical agent modalities and manipulative therapies,” Tenn. Code Ann. § 63-4-101(a), while a physical therapist alleviates impairments and functional limitations by designing, implementing, and modifying therapeutic interventions that include “manual therapy” and “physical agents and modalities,” Tenn. Code Ann. § 63-13-103(15)(B). Further, it appears to us that in some respects, at least, the definition of the term “manipulation” in the Board of Chiropractic Examiners’ Rules, Tenn. Comp. R. & Regs. 0260-2-.01(18), may be similar in meaning to the definition of the term “manual therapy techniques” found in the Committee on Physical Therapy’s Rules, Tenn. Comp. R. & Regs. 1150-1-01(26).¹

Yet, clearly the practice of chiropractic and the practice of physical therapy are two separate and distinct health care professions, each operating under different boards, each with separate licensure requirements. Moreover, Tenn. Code Ann. § 63-4-101(c) expressly provides that “spinal manipulation” and “spinal adjustment” may be provided only by health care providers who have fulfilled the specific requirements of that section of the chiropractic practice act. Further, Tenn. Code Ann. § 63-13-109(a), concerning the unauthorized practice of medicine and the scope of practice of physical therapists, provides that “[n]othing in that chapter shall be construed as allowing physical therapists to practice medicine, osteopathy, podiatry, chiropractic, or nursing.”² Therefore, while the physical therapy scope of practice might include performing manual therapy techniques on a patient’s spine, or using physical agents and modalities on a patient’s spine, nevertheless, a licensed physical therapist may not perform or hold himself or herself out as performing “spinal manipulation,” as that term is used in Tenn. Code Ann. § 63-4-101(c)(1), without first having fulfilled the requirements of that section.

¹Tenn. Comp. R. & Regs. 0260-2-.01(18) defines “manipulation” as a “passive movement for the purpose of testing joint space mobility and/or a manual intervention utilized for releasing muscles and less contractible structures that have lost elasticity with their effects on joint function, and which is not designed to bring about articular change when locked out of its physiologic joint space and/or range of motion.” Tenn. Comp. R. & Regs. 1150-1-01(26) defines “manual therapy techniques” as consisting of “a broad group of passive interventions in which physical therapists use their hands to administer skilled movements designed to modulate pain, increase joint range of motion; reduce or eliminate soft tissue swelling, inflammation, or restriction; induce relaxation; improve contractile and noncontractile tissue extensibility; and improve pulmonary function. These interventions involve a variety of techniques, such as the application of graded forces.”

²Tenn. Code Ann. § 63-13-109(b) further provides that the “scope of practice of physical therapy shall be under the written or oral referral of a licensed doctor of medicine, chiropractic, dentistry, podiatry or osteopathy, with exceptions as stated in § 63-13-301 [63-13-303].”

ROBERT E. COOPER, JR.
Attorney General and Reporter

MICHAEL E. MOORE
Solicitor General

SARA E. SEDGWICK
Assistant Attorney General

Requested by:

Gary Odom
House Majority Leader
18A Legislative Plaza
Nashville, TN 37243-0167