



MARYLAND
Department of Health

MARYLAND BOARD OF PHYSICAL THERAPY EXAMINERS

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OFFICE USE	
Date Received: _____	Date Reviewed: _____
Reviewed By: _____	Date Replied: _____
Date Entered in Database: _____	

SCOPE OF PRACTICE QUESTIONS AND INQUIRIES

The Maryland Board of Physical Therapy Examiners is here to answer inquiries related to the practice of physical therapy in the State of Maryland.

If you have questions please fill out this form and return it to the Board. You may either mail it to the Board at the address listed above or you may email it to the Board's Executive Director, Laurie Kendall-Ellis at Laurie.Kendall-Ellis@Maryland.Gov.

Once the question is received it will be reviewed and answered. You will receive a reply to the email address you provided. The Board strives to answer all questions within five (5) business days of receipt. If the answer will take longer to research you will be notified of the need for additional time.

Some questions may be placed on the Board's open session agenda for discussion. You will receive a notification which will include the date of the Board's open session meeting. Once the Board answers your question, Executive Director, Laurie Kendall-Ellis will provide you with the answer at the email address you provided.

If additional information is needed to answer your question we appreciate your prompt response.

If you have multiple questions they may be asked on one form. Please clearly define each question.

INQUIRER'S INFORMATION			
Please print or type all information			
Name: _____ <i>(First & Last)</i>	PT: _____	PTA: _____	Other: _____ <i>(Select One)</i>
MD License #: _____ <i>(If Applicable)</i>	Email: _____		
Home Phone: _____	Cell Phone: _____	Work Phone: _____	
Type of Practice Setting: _____ <i>(Home Health, Nursing Home, Private Practice, N/A, Etc.)</i>			

INQUIRY

When submitting more than one question, please number each question.

BOARD'S RESPONSE

Date of Board Meeting: _____ Inquirer: _____

When answering the question (s) clearly define the section of the Maryland Practice Act that applies.

H.O.A.

1st Section

2nd Section

3rd Section

4th Section

COMAR:

1st Section

2nd Section

3rd Section

4th Section