

1 **BEFORE THE STATE OF NEVADA**

2 **BOARD OF PHYSICAL THERAPY**

3  
4 In the Matter of

5 Dr. Susan W. Priestman, DPT

6 **Petitioner**

7  
8 **ADVISORY OPINION 24-01**

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10 This matter was heard at the State of Nevada Board of Physical Therapy ("Board")  
11 regular public meeting via Zoom videoconference on March 15, 2024, and July 25, 2024.  
12 Pursuant to the Board's authority under NAC 640.310, the Board considered a petition  
13 from Dr. Susan Priestman, DPT, on the issue of whether or not it is within the scope of  
14 practice for physical therapists to directly refer patients for diagnostic imaging studies in  
15 the State of Nevada. Dr. Priestman availed herself for the hearing and provided  
16 background for discussion.

17 **DECISION**

18 Based upon the information provided by Dr. Priestman, DPT, and the ensuing  
19 discussion among the Board members reviewing the practice act, they agreed that the  
20 practice act is silent on this specific issue. If a physical therapist does a direct referral  
21 for diagnostic imaging studies (i.e., x-ray, MRI, CT, Imaging Ultrasound), no NRS or  
22 NAC statute has been violated or actionable. Of note is NRS 640.024 "Practice of  
23 physical therapy" defined. "Practice of physical therapy":

24 **1. Does include:**

- 25 (a) The performing and interpreting of tests and measurements as an aid to  
26 evaluation or treatment;
- 27 (b) The planning of initial and subsequent programs of treatment on the  
28 basis of the results of tests;
- (c) The administering of treatment through the use of therapeutic exercise  
and massage, the mobilization of joints by the use of therapeutic exercise  
without chiropractic adjustment, mechanical devices, and therapeutic agents  
which employ the properties of air, water, electricity, sound, and radiant

1 energy; and

2 (d) The performance of dry needling, if a physical therapist is qualified to do  
3 so pursuant to the regulations adopted in accordance with subsection 3  
4 of [NRS 640.050](#).

5 **2. Does not include:**

6 (a) The diagnosis of physical disabilities;

7 (b) The use of roentgenic rays or radium;

8 (c) The use of electricity for cauterization or surgery; or

9 (d) The occupation of a masseur who massages only the superficial soft  
10 tissues of the body.

11 (Added to NRS by [1981, 931](#); [A1985, 1411](#); [1993, 2543](#); [2019, 1586](#))

12 It is clear that a physical therapist has the duty to interpret tests and measurements  
13 to evaluate and formulate a treatment plan that is safe and effective for the patient.  
14 Furthermore, physical therapists may not diagnose physical disabilities or use  
15 (administer) roentenic rays or radium. However, the use of these modalities may be  
16 necessary to substantiate and confirm the physical therapy diagnosis and findings.  
17 Finally, salient points contained within the supplied supporting documents for review  
18 included numerous peer-reviewed publications which demonstrate that entry-level  
19 education for physical therapists supports the educational level and ability to  
20 appropriately order diagnostic imaging, that referral frequency/utilization is less than  
21 that of other healthcare providers, and direct referral by physical therapists decreases  
22 healthcare costs and improves access to healthcare.

23 The Board members agreed that the Practice Act does not exclude physical  
24 therapists from ordering diagnostic imaging or performing point-of-care ultrasound  
25 (POCUS), and the following motion was made and passed unanimously:

- 26
- 27 1. Physical Therapists who have training and competencies to order diagnostic  
28 imaging including plane x-rays, MRI, CT scans, and diagnostic ultrasound, are  
not in violation of the Physical Therapy Practice Act.
  2. Referrals for diagnostic imaging are performed and interpreted by other health  
professionals licensed to provide and diagnose imaging.



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Chair, Nevada Physical Therapy Board