

# Special Meetings Agenda

Revised March 11, 2020



WASHINGTON  
**Medical  
Commission**  
Licensing. Accountability. Leadership.

Department of Health, Town Center 2, 111 Israel Rd. SE, Tumwater, WA

Wednesday, April 8, 2020

## Open Meetings

- 1:30 pm **Rules Workshop** Room 145  
to Proposed Clinical Support Program – WSR #18-06-007
- 3:00 pm
- Review and revise draft language
  - Public comments on draft language
  - Next steps
- 3:15 pm **OMT Interpretive Statement Workgroup** Room 145  
to The purpose of this meeting will be to collaborate with stakeholders,  
5:00 pm Commissioners, and members of the public in developing the language in  
the interpretive statement.

***The Commissioners and staff will participate in this meeting via GoToMeeting and phone.***

In Person  
Department of Health  
Town Center 2 – Room 145  
111 Israel Road SE  
Tumwater, WA 98501

Via GoToMeeting  
Please join my meeting from your computer, tablet or smartphone.

<https://global.gotomeeting.com/join/432650909>

Via Phone  
United States: +1 (646) 749-3122  
Access Code: 432-650-909

In accordance with the Open Public Meetings Act, this meeting notice was sent to individuals requesting notification of the Department of Health, Washington Medical Commission (Commission) meetings. This agenda is subject to change. To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email [civil.rights@doh.wa.gov](mailto:civil.rights@doh.wa.gov).

# Workgroup Meeting Notice



WASHINGTON  
**Medical  
Commission**  
Licensing. Accountability. Leadership.

***Revised March 11, 2020***

## **Interpretive Statement**

The Washington Medical Commission (Commission) is developing an interpretive statement regarding [RCW 18.71.011](#), [RCW 18.57.001\(4\)](#), and RCW [18.25.005](#).

The Commission is developing this interpretive statement to address the practice of allopathic physicians performing musculoskeletal physical examination.

## **Proposed Interpretive Statement Meeting**

The Commission will conduct an open public meeting on Wednesday, April 8, 2020 beginning at 3:15 pm:

***The Commissioners and staff will participate in this meeting via GoToMeeting and phone.***

### *In person*

Department of Health  
Town Center 2 – Room 145  
111 Israel Road SE  
Tumwater, WA 98501

### *Via GoToMeeting*

Please join my meeting from your computer, tablet or smartphone.

<https://global.gotomeeting.com/join/432650909>

### *Via phone*

Dial: 1 (646) 749-3122  
Access Code: 432-650-909

The purpose of this meeting will be to collaborate with stakeholders, Commissioners, and members of the public in developing the language in the interpretive statement. Interested parties, stakeholders, and the general public are invited to participate in these workgroup meetings to provide comments on draft language.

For more information or to provide written comments prior to the meeting, please contact Amelia Boyd, Program Manager, at (360) 236-2727 or by email at [amelia.boyd@wmc.wa.gov](mailto:amelia.boyd@wmc.wa.gov).

Attachments:

Special Meetings Agenda

Original Draft Interpretive Statement

Proposed Draft Interpretive Statement

# Original Draft Interpretive Statement

Department of Health  
Washington Medical Commission

## Interpretive Statement

Title:	Allopathic Physicians Scope of Practice Relating to Osteopathic Manipulative Therapy	INS2019-0X
References:	<a href="#">RCW 18.71.011</a> ; <a href="#">18.57.001(4)</a> ; <a href="#">18.25.005</a>	
Contact:	Washington Medical Commission	
Phone:	(360) 236-2750	E-mail: <a href="mailto:medical.commission@wmc.wa.gov">medical.commission@wmc.wa.gov</a>
Effective Date:		
Approved By:		

The Washington Medical Commission (Commission) interprets [RCW 18.71.011](#), [RCW 18.57.001\(4\)](#) and [RCW 18.25.005](#) to permit an allopathic physician to perform a musculoskeletal physical examination, regardless of the anatomy being examined, and to perform any treatment of a patient's back or spine, including osteopathic manipulative therapy, so long as it does not involve manual adjustment of the spine that would be considered the practice of chiropractic.

RCW 18.71.011 defines the practice of allopathic medicine:

A person is practicing medicine if he or she does one or more of the following:

- (1) Offers or undertakes to diagnose, cure, advise, or prescribe for any human disease, ailment, injury, infirmity, deformity, pain or other condition, physical or mental, real or imaginary, by any means or instrumentality;
- (2) Administers or prescribes drugs or medicinal preparations to be used by any other person;
- (3) Severs or penetrates the tissues of human beings;
- (4) Uses on cards, books, papers, signs, or other written or printed means of giving information to the public, in the conduct of any occupation or profession pertaining to the diagnosis or treatment of human disease or conditions the designation "doctor of medicine," "physician," "surgeon," "m.d.," or any combination thereof unless such designation additionally contains the description of another branch of the healing arts for which a person has a license: PROVIDED HOWEVER, That a person licensed under this chapter shall not engage in the practice of chiropractic as defined in RCW [18.25.005](#).

RCW 18.57.001(4) describes the scope of practice of an osteopathic physician as follows:

(4) "Osteopathic medicine and surgery" means the use of any and all methods in the treatment of disease, injuries, deformities, and all other physical and mental conditions in and of human beings, including the use of osteopathic manipulative therapy; ....

RCW 18.25.005 defines the scope of chiropractic practice. It provides, in part:

"Chiropractic" defined.

(1) Chiropractic is the practice of health care that deals with the diagnosis or analysis and care or treatment of the vertebral subluxation complex and its effects, articular dysfunction, and musculoskeletal disorders, all for the restoration and maintenance of health and recognizing the recuperative powers of the body.

(2) Chiropractic treatment or care includes the use of procedures involving spinal adjustments and extremity manipulation. Chiropractic treatment also includes the use of heat, cold, water, exercise, massage, trigger point therapy, dietary advice and recommendation of nutritional supplementation, the normal regimen and rehabilitation of the patient, first aid, and counseling on hygiene, sanitation, and preventive measures. Chiropractic care also includes such physiological therapeutic procedures as traction and light, but does not include procedures involving the application of sound, diathermy, or electricity.

...

(5) Nothing in this chapter prohibits or restricts any other practitioner of a "health profession" defined in RCW [18.120.020\(4\)](#) from performing any functions or procedures the practitioner is licensed or permitted to perform, and the term "chiropractic" as defined in this chapter shall not prohibit a practitioner licensed under chapter [18.71](#) RCW from performing medical procedures, except such procedures shall not include the adjustment by hand of any articulation of the spine.

It is clear from the above statutes that only osteopathic physicians and chiropractors can perform manual adjustment of the spine. Allopathic physicians are specifically excluded. The Commission understands there is uncertainty about what other procedures involving the spine that allopathic physicians can legally perform. The Commission wishes to clarify this issue.

Allopathic physicians frequently evaluate and treat patients for back pain. Standard treatment involves a diagnostic physical examination that includes assessing the patient's ability to sit, stand, walk and lift their legs, as well as having the patient rate their pain and describe how they are functioning with the pain. The physical examination typically also includes palpating the patient's back, including the spine, to help determine the area of the pain. All of this is done to properly diagnose the cause of the pain, decide if additional testing is required, and determine an appropriate plan of treatment. Treatment can include physical therapy, exercise, medication,

and, in some cases, surgery. This treatment may involve manual adjustment of the spine, but it is the practice of medicine and is not considered the practice of chiropractic.

The confusion may arise because the legal scope of practice for osteopathic physicians, RCW 18.57.001(4), permits osteopathic physicians to perform osteopathic manipulative therapy (OMT). The osteopathic practice act does not define OMT. According to the American Osteopathic Association, OMT “is a set of hands-on techniques used by osteopathic physicians (DOs) to diagnose, treat, and prevent illness or injury. Using OMT, a DO moves a patient’s muscles and joints using techniques that include stretching, gentle pressure and resistance.” OMT involves much more than a manual adjustment of the spine.

The Commission is cognizant of the increasing blurring of the distinction between allopathic and osteopathic physicians. Osteopathic physicians and allopathic physicians are training in the same residency programs on an increasing basis. In 2020 accreditation for allopathic and osteopathic residencies will transition from two separate accreditation systems into a single accreditation system with the Accreditation Council for Graduate Medical Education. In these residencies, osteopathic physicians are teaching allopathic physicians to perform OMT as they have been for years. The Commission supports any physician doing what he or she has been trained to do. This may include OMT depending upon the training and experience of the physician.

The Commission interprets [RCW 18.71.011](#), [RCW 18.57.001\(4\)](#) and [RCW 18.25.005](#) to permit an allopathic physician to perform a musculoskeletal physical examination, regardless of the anatomy being examined, and to perform any treatment of a patient’s back or spine, including osteopathic manipulative therapy, so long as it does not involve manual adjustment of the spine that would be considered the practice of chiropractic. Manipulation of the spine that is incidental to the treatment of the patient is not considered the practice of chiropractic.

# Proposed Draft Interpretive Statement

The Washington Medical Commission (Commission) interprets RCW 18.71.011, RCW 18.57.001(4) and RCW 18.25.005 together, in contemporary context, to permit an allopathic physician to perform a musculoskeletal physical examination, regardless of the anatomy being examined, and to perform any treatment of a patient's back or spine, including osteopathic manipulative therapy (OMT), so long as the treatment does not involve treatment techniques that would be considered the practice of chiropractic, or the physician being viewed or designated as practicing chiropractic.

RCW 18.71.011 defines the practice of allopathic medicine:<sup>1</sup>

A person is practicing medicine if he or she does one or more of the following:

- (1) Offers or undertakes to diagnose, cure, advise or prescribe for any human disease, ailment, injury, infirmity, deformity, pain or other condition, physical or mental, real or imaginary, by any means or instrumentality;
- (2) Administers or prescribes drugs or medicinal preparations to be used by any other person;
- (3) Severs or penetrates the tissues of human beings;
- (4) Uses on cards, books, papers, signs' or other written or printed means of giving information to the public, in the conduct of any occupation or profession pertaining to the diagnosis or treatment of human disease or conditions the designation "doctor of medicine," "physician," "surgeon," "m.d.," or any combination thereof unless such designation additionally contains the description of another branch of the healing arts for which a person has a license:  
PROVIDED HOWEVER, That a person licensed under this chapter shall not engage in the practice of chiropractic as defined in RCW 18.25.005.

RCW 18.57.001(4) defines the scope of practice of an osteopathic physician as follows:<sup>2</sup>

- (4) "Osteopathic medicine and surgery" means the use of any and all methods in the treatment of disease, injuries, deformities, and all other physical and mental conditions in and of human beings, including the use of osteopathic manipulative therapy....

RCW 18.25.005 defines the scope of chiropractic practice.<sup>3</sup> It provides, in part:

"Chiropractic" defined.

- (1) Chiropractic is the practice of health care that deals with the diagnosis or analysis and care or treatment of the vertebral subluxation complex and its effects, articular dysfunction, and musculoskeletal disorders, all for the restoration and maintenance of health and recognizing the recuperative powers of the body.
- (2) Chiropractic treatment or care includes the use of procedures involving spinal adjustments and extremity manipulation. Chiropractic treatment also includes the use of heat, cold, water, exercise, massage, trigger point therapy, dietary advice and recommendation of nutritional supplementation, the normal regimen and rehabilitation of the patient, first aid, and counseling on hygiene, sanitation, and preventive measures. Chiropractic care also includes such physiological

---

<sup>1</sup> New section added to chapter 18.71 RCW in 1975

<sup>2</sup> New section added to chapter 18.57 RCW in 1979

<sup>3</sup> New section added to chapter 18.25 RCW in 1974

therapeutic procedures as traction and light but does not include procedures involving the application of sound, diathermy, or electricity.

- .....
- (5) Nothing in this chapter prohibits or restricts any other practitioner of a “health profession” defined in RCW 18.120.020(4) from performing any functions or procedures the practitioner is licensed or permitted to perform, and the term “chiropractic” as defined in this chapter shall not prohibit a practitioner licensed under chapter 18.71 RCW from performing medical procedures, except such procedures shall not include the adjustment by hand of any articulation of the spine.

The Commission has become cognizant of the increasingly blurred distinction between allopathic and osteopathic physicians in recent years. Allopathic physicians and osteopathic physicians are training together in residency programs on an increasing basis, effectively amalgamating their respective philosophies. In 2020, accreditation for allopathic and osteopathic residencies will transition from two separate accreditation systems to a single system under the Accreditation Council for Graduate Medical Education (ACGME). Especially in the field of sports medicine, continuing medical education presentations that teach osteopathic manipulative therapy (OMT) techniques to mixed allopathic and osteopathic audiences are increasingly common. Thus, in contemporary medical practice, many allopathic physicians have received instruction and become proficient in OMT techniques, while most osteopathic physicians base significant portions of their practice on allopathic philosophies. This evolution of practice is of distinct benefit to patients, and should be encouraged, but it gives the impression of being in conflict with the relatively outdated and conflicting statutory definitions cited above. Each of the practices referred to in the above statutes employ techniques of physical examination and treatment that are common to, or resemble, those used in the other two, and appropriate use of these should not be a source of contention. The Commission believes that a licensed allopathic physician and surgeon (and a licensed osteopathic physician and surgeon or chiropractor) should be entitled to exercise any skills and techniques in the examination and treatment of patients for which the physician has been appropriately trained and which the physician can perform safely with competence.

The Commission notes the very broad language in the statutory definition of osteopathic medicine and surgery and believes that such language accurately reflects the current practice of allopathic medicine and surgery as well. The Commission further notes the dates of adoption of the statutory definitions for allopathic, osteopathic and chiropractic practice cited above, concludes that they are outdated and in conflict with much of current practice, and respectfully urges the legislature to review them at its earliest convenience to bring them into conformity with present-day practice and each other.