



Board of Physical Therapy and Occupational Therapy

PO Box 110806, Juneau, AK 99811

Phone: (907) 465-2550

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Physical Therapist and Physical Therapist Assistant Continuing Education Worksheet

The State Physical Therapy and Occupational Therapy Board would like to provide guidance to physical therapists and physical therapist assistants regarding continuing education (CE) renewal requirements. While the board understands many courses and activities of interest to PT/PTAs have value to career development, the board will accept completed CE certificates per Alaska statutes and regulations.

The Board has reviewed the statutes and regulations for physical therapy continuing education requirements and provides the following direction to licensees:

All licensees should read the definition of physical therapy AS 08.84.190 and Article 3 of the regulations as the below information has been adapted from the statutes and regulations.

An applicant for renewal of a physical therapist or physical therapist assistant license who has been **licensed for 12 months or more** of the concluding licensing period shall have completed during that period 24 contact hours of continuing education.

An applicant for renewal who has been **licensed for less than 12 months** shall have:

1. completed 12 contact hours of continuing education during that period; or
2. passed the National Physical Therapy Examination (NPTE) within 12 months immediately before the date that the applicant's license is due to lapse.

All applicants for renewal shall complete at least one-half of the required contact hours in courses or programs offered by an accredited academic institution or a professional organization approved by the board under 12 AAC 54.420(a). Review this regulation and identify the approved provider with an X on each certificate of completion.

Continuing education activities are approved for continuing education credit if they meet the requirements of 12 AAC 54.420(c). To be accepted by the board, a continuing education course or activity must contribute directly to the professional competency of a physical therapist or physical therapist assistant and must be directly related to the skills and knowledge required to implement the principles and methods of physical therapy, as that term is defined in AS 08.84.190.

The board will review certificates and activities based on the following, in accordance with Alaska statutes and regulations:

1. Continuing education requirements per 12 AAC 54.410 through 12 AAC 54.420.
2. One half of the contact hours completed must be documented by a qualifying approved provider under 12 AAC 54.420(a).
3. Course content must meet the definition per AS 08.84.190 (5)-(8).
4. The certificate must be complete per centralized regulation 12 AAC 02.960 (1)-(5). Review each certificate and number each of the below directly on the certificate to identify you have a fully complete certificate and to be prepared if audited. If it is not complete, contact the provider to secure a new certificate.
 1. Name of participant
 2. Number of continuing competency credits awarded
 3. Description of the continuing competency activity - *title of the course*
 4. Dates of actual participation or successful completion
 5. Name and internet address or mailing address of course provider, instructor, sponsor or other entity the department may contact to verify attendance (if needed).

Department of Commerce, Community and Economic Development
Division of Corporations, Business and Professional Licensing
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Physical Therapy Continuing Education Worksheet

(Per Article 3 of Regulations)

Printed Name:			
License Type:	<input type="checkbox"/> PT	<input type="checkbox"/> PTA	Alaska License Number:

Course Title and Brief Description of Course Content	Date Course Completed (mm/dd/yyyy)	Approving Organization (Per 12 AAC 54.420)	# Contact Hours Earned	Did This Course Contribute Directly to Physical Therapy Skills and Knowledge? (Per AS 08.84.190 and 12 AAC 54.420(c))	Is the Certificate Complete? (Per 12 AAC 02.960)
				<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Total Hours of Continuing Education:					
Applicant Signature:				Date Signed:	

Do not mail this document or certificates to the board unless requested. Keep all certificates per 12 AAC 54.430 and 12 AAC 02.960.

This form may be copied if additional space is required.