

Kinesiotherapist

The kinesiotherapist is academically and clinically prepared to provide rehabilitation exercise and education under the prescription of a licensed physician in an appropriate setting. Kinesiotherapists are qualified to implement exercise programs designed to reverse or minimize debilitation and enhance the functional capacity of medically stable patients in a wellness, sub-acute, or extended care setting. The role of the kinesiotherapist demands intelligence, judgment, honesty, interpersonal skills, and the capacity to react to emergencies in a calm and reasoned manner. An attitude of respect for self and others, adherence to the concepts of privilege and confidentiality in communicating with patients, and a commitment to the patient's welfare are standard attributes. At a minimum, a kinesiotherapist is educated in areas of basic exercise science and clinical applications of rehabilitation exercise. Training is received in orthopedic, neurological, psychiatric, pediatric, cardiovascular-pulmonary, and geriatric practice settings.



History

Kinesiotherapy (formally corrective therapy) emerged as an allied health profession in 1946. In 1953, the American Corrective Therapy Association (which became the American Kinesiotherapy Association in 1987), realizing the need for a credentialing process, formally adopted a certification examination to establish a consistent level of competency. The process of credentialing and establishing academic programs continued to evolve as baccalaureate programs were established, and in 1980 the clinical training requirements increased from 400 to 1,000 clock hours.

In 1982, the Council on Professional Standards was established to oversee accreditation and credentialing activities. In that same year standards and guidelines were set for accrediting academic programs preparing students to enter the kinesiotherapy profession.

In 1985, minimum core competencies for kinesiotherapists were established. In 1986, mandatory continuing education requirements were set to maintain registration, and, in 1987, a contract was established with the Professional Evaluation Service to standardize and administer the national certification examination.

In 1995, the Commission on Accreditation of Allied Health Education Programs (CAAHEP) recognized kinesiotherapy as an allied health profession. In that same year the American Kinesiotherapy Association and the American Academy of Physical Medicine and Rehabilitation joined CAAHEP as cosponsors of kinesiotherapy. In 1997, CAAHEP commissioners voted to formally recognize the Committee on Accreditation of Education Programs for Kinesiotherapy. The *Standards and Guidelines for Accredited Educational Programs for Kinesiotherapy* were approved in 1998.



Career Description

Kinesiotherapy is the application of scientifically based exercise principles adapted to enhance the strength, endurance, and mobility of individuals with functional limitations or those requiring extended physical conditioning.

The kinesiotherapist is a health care professional competent in the administration of musculoskeletal, neurological, ergonomic, biomechanical, psychosocial, and task-specific functional tests and

measures. The kinesiotherapist determines the appropriate evaluation tools and interventions necessary to establish, in collaboration with the client, a goal-specific treatment plan.

The intervention process includes the development and implementation of a treatment plan, assessment of progress toward goals, modification as necessary to achieve goals and outcomes, and client education. The foundation of clinician-client rapport is based on education, instruction, demonstration, and mentoring of therapeutic techniques and behaviors to restore, maintain, and improve overall functional abilities.

The *Scope of Practice for Kinesiotherapy* identifies the job tasks that registered kinesiotherapists are qualified to perform. This document reflects the evaluation procedures and treatment interventions for medically stable individuals who need extended physical conditioning. The individual kinesiotherapist may obtain additional training and credentials in areas beyond the scope of practice. The *Standards of Practice for Registered Kinesiotherapists* serves as a guideline for practicing registered kinesiotherapists and provides a basis for assessment of kinesiotherapy practices.



Employment Characteristics

Registered kinesiotherapists are employed in Department of Veterans Affairs Medical Centers, public and private hospitals, medical fitness facilities, rehabilitation facilities, learning disability centers, schools, colleges and universities, private practice, and as exercise consultants.

The types of treatments carried out by kinesiotherapists focus on but are not limited to

- Therapeutic exercise
- Ambulation training
- Geriatric rehabilitation
- Aquatic therapy
- Adapted fitness and conditioning
- Prosthetic/orthotic rehabilitation
- Psychiatric rehabilitation
- Driver training
- Adapted exercise for the home setting



Salary

Depending on the particular job setting, the average projected starting salary for registered kinesiotherapists is \$36,000 to \$47,000 annually. The overall average is \$55,000; upper-level salaries are in the range of \$70,000. For more information, refer to www.ama-assn.org/go/hpsalary.



Educational Programs

Length. The kinesiotherapy program is 4 to 5 years. The total minimum requirements are 128 semester hours. Minimum requirements for years 1 and 2 are 59 semester hours and for years 3 and 4 are 67 semester hours.

Prerequisites. Applicants should have a high school diploma or equivalent and meet institutional entrance requirements.

Curriculum. The program has a comprehensive academic and clinical curriculum plan that fulfills or exceeds the minimum requirements for kinesiotherapy accreditation.

The curriculum plan includes an organized and sequential series of integrated learning experiences designed to achieve or exceed minimum competencies.

All academic and clinical courses are guided by written measurable behavioral objectives and use case-based, patient-centered, problem-solving activities.

The curriculum plan includes academic learning experiences, which lead to the attainment of all academic competencies listed in the *Minimum Core Competencies of Kinesiotherapists*.

Students must complete the following content areas:

- Human anatomy
- Human physiology
- Exercise physiology
- Kinesiology/biomechanics
- Therapeutic exercise/adapted physical education
- Growth and development
- Motor learning/control/performance
- General psychology
- Organization and administration
- Tests and measurements
- Research methods or statistics
- First aid and cardiopulmonary resuscitation
- Introduction to kinesiotherapy
- Pathophysiology
- Clinical neurology
- Rehabilitation procedures
- Patient assessment and management
- Therapeutic activities

Students are strongly encouraged to complete the following academic courses:

- Abnormal psychology or mental health
- Physiological psychology
- Exercise testing and prescription
- Gerontology
- Medical ethics

- Medical terminology
- Pharmacology
- Health/medical/functional outcomes management
- Health education
- Kinesiotherapy I and II



Inquiries

Careers

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Credentialing

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Program Accreditation

Commission on Accreditation of Allied Health Education Programs
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