
The American Physical Therapy Association (APTA) recognizes that inappropriate or indiscriminate use of physical and chemical restraints across the life span is harmful to the quality of life of patients and clients. APTA recognizes the role of the physical therapist to provide consultation within an interprofessional team; to examine and evaluate body functions and structures, activity, participation, and rehabilitation potential of individuals; and to implement appropriate therapeutic interventions before considering the use of physical or chemical restraints.

APTA recognizes that restraints may be used in specific circumstances to treat symptoms, in accordance with state and federal regulations and appropriate regulatory agencies, to enhance physical and psychosocial needs. Thus, APTA promotes regular reassessment of individuals who are restrained in order to consider less-restrictive interventions as described by the Centers for Medicare & Medicaid Services, The Joint Commission, and other agencies.

In recognizing that physical therapists assume leadership roles to restore, maintain, and promote overall fitness, health, and optimal quality of life, APTA considers unethical any practice in which restraints are recommended or applied without evidence of the following: appropriate physical examination/evaluation, consideration of alternative interventions, and communication to the individual or responsible parties of any substantial risks.

APTA encourages public awareness of the laws and regulations that govern restraint use across the life span and seeks to promote the unique abilities of physical therapists and physical therapist assistants to educate individuals and caregivers regarding the risks and benefits of restraint and the alternatives to their use.

Explanation of Reference Numbers:
HOD P00-00-00-00 stands for House of Delegates/month/year/page/vote in the House of Delegates minutes; the “P” indicates that it is a position (see below). For example, HOD P06-17-05-04 means that this position can be found in the June 2017 House of Delegates minutes on Page 5 and that it was Vote 4.