

Chapter 1. Part 3. Ethical and Legal Aspects

Chapter 1 • Introduction to Physiotherapy

Part 3 • Ethical and Legal Aspects

(Professional ethics ■ Legal responsibilities ■ Patient rights)

1 Why Ethics & Law Matter in Physiotherapy

Physiotherapists work hands-on with vulnerable people, make autonomous clinical decisions, and increasingly practise as first-contact providers. Ethical lapses or legal ignorance can therefore harm patients **and** jeopardise professional licensure. A sound grasp of ethical principles and statutory duties is as fundamental as anatomy or biomechanics.

2 Professional Ethics in Physiotherapy

Layer	Content	Illustrative Examples
Core Principles (adapted from World Physiotherapy & Bioethics)	Autonomy – respect the patient's right to choose. Beneficence – act in the patient's best interest. Non-maleficence – do no harm. Justice – provide fair, equitable care. Veracity & Fidelity – honesty and faithfulness to commitments.	Gaining <i>informed consent</i> before joint mobilisation (Autonomy). Choosing safest gait-training device (Beneficence + Non-maleficence). Equal appointment slots for insured & uninsured clients (Justice).
World Physiotherapy Code of Ethics (2023 revision)	• Put the patient first. • Practise evidence-based care. • Maintain confidentiality. • Seek informed consent. • Undertake CPD. • Uphold professional honour.	Using validated outcome measures instead of anecdotal methods; encrypting digital notes; attending mandatory CME.
Indian Association of Physiotherapists (IAP) Code	Adds cultural sensitivity, community-health obligations, and prohibition on "miracle" advertising.	Avoid portraying electrotherapy as a "cure-all" in social-media ads.
Ethical Decision Frameworks	<i>RIPS</i> model (Realm-Individual-Process-Situation), <i>PLUS</i> filters (Policies, Legal, Universal, Self).	Analysing a conflict-of-interest when a clinic owner also sells orthotics.
Common Ethical Dilemmas	• Treating friend/family – boundary issues. • Accepting gifts – conflict of interest. • Social-media posting – confidentiality risk. • Productivity targets vs. patient-centred dosing.	Declining a costly gift from an implant vendor; anonymising case photos before online sharing.

3 Legal Responsibilities of a Physiotherapist

3.1 Licensure & Scope of Practice

Aspect	Global Norm	India (Allied & Healthcare Professions Act 2021)
Minimum qualification	Accredited Bachelor/Master's degree + internship	4½-yr BPT + 6-mo internship; registry with State Council/National Commission
Title protection	"Physiotherapist/Physical Therapist" legally protected	Use of title without registration subject to fine/imprisonment
Scope statement	Evaluation, diagnosis, planning, manual therapy, electro- modalities, exercise prescription	Independent assessment allowed; invasive techniques (e.g., dry needling) subject to state guidelines

3.2 Duty of Care & Negligence

- **Duty of care** arises once the physio-patient relationship is established.
- **Breach** = failing to meet the *reasonable physiotherapist* standard (e.g., unsupervised treadmill test in high-risk cardiac patient).
- **Causation & Harm** must be proven for malpractice.
- **Vicarious liability:** Clinics/hospitals are liable for employees' acts within scope.

3.3 Informed Consent

Component	Meaning	Tips
Disclosure	Explain diagnosis, proposed treatment, risks, benefits, alternatives, cost.	Use plain language; supplement verbal with written handouts.
Competence	Patient must understand & decide voluntarily.	Assess cognition; involve caregiver when required.
Documentation	Signed form + chart note.	Time-stamp, store securely (digital or paper).

3.4 Confidentiality & Data Protection

- **HIPAA (USA) / GDPR (EU) / DPPD Act 2023 (India)** govern digital records.
- Share data only with patient consent or when legally mandated (e.g., notifiable diseases, court order).
- Use encrypted EMR, unique log-ins, two-factor authentication.

3.5 Record-Keeping

- SOAP-format or WHO-ICF-based notes; retention 7-10 years (or as per state law).
- Alterations must be traceable; never delete original entries.

3.6 Advertising & Tele-Rehabilitation

Area	Legal Caution
Advertising	No false claims or guarantees ("100 % cure"); indicate credentials clearly; follow IAP/ASCI guidelines.
Tele-physio	Confirm patient identity, location, and emergency contact; obtain e-consent; follow jurisdiction's tele-health rules; maintain secure video platforms.

4 Patient Rights Relevant to Physiotherapy

Right	Practical Implications in the PT Setting
Right to Information	Provide treatment plan, expected outcomes, cost estimate.
Right to Participation (Autonomy)	Shared decision-making; goal-setting meetings.
Right to Dignity & Privacy	Curtains during exposure; same-gender chaperone when requested.
Right to Confidentiality	Discuss progress in a private area; secure EMR access.
Right to Second Opinion / Referral	Facilitate records transfer without prejudice.
Right to Refuse or Withdraw	Honour refusal unless life-saving; document discussion.
Right to Safe & Quality Care	Use calibrated equipment; adhere to infection-control; maintain CPD.
Right to Redressal	Provide grievance mechanism; respond to complaints within statutory timeline.

5 Case Snapshots for Classroom Debate

Scenario	Key Issues	Guiding Questions
A sports physio posts a celebrity client's rehab video on Instagram (with the client's verbal OK).	Privacy, veracity of consent, professional boundaries.	Was consent fully informed and documented? Could the post be perceived as endorsement?



Scenario	Key Issues	Guiding Questions
Home-health PT notices bedsores and caregiver neglect.	Duty of care vs. confidentiality; mandatory reporting.	Must the PT report elder abuse? How to balance patient privacy with safety?
Clinic manager mandates treating 4 patients/hour to increase revenue.	Beneficence vs. productivity; risk of negligence.	How to address unsafe caseload without job loss?

6 Ethico-Legal Decision Checklist (Mnemonic: “CLEAR PATH”)

Consent → Legal scope → Evidence-base → Autonomy → Risk/benefit
Privacy → Accountability → Team consult → Honesty in records

7 Conclusion

Professional ethics and legal literacy are **non-negotiable competencies** for physiotherapists. They safeguard patient welfare, uphold public trust, and protect practitioners from litigation. Mastery involves:

1. Internalising universal bioethical principles.
2. Knowing national statutes, council rules, and institutional policies.
3. Reflecting critically on one’s decisions through structured frameworks.

“Good physiotherapy is ethical physiotherapy; the two are inseparable.”

Suggested Learning Activity

Conduct a **mock disciplinary hearing**: assign roles (ethics board, complainant patient, physiotherapist, legal counsel). Examine a case of alleged treatment without informed consent, apply the CLEAR PATH checklist, and decide the outcome.