

Dear Labor and Commerce Committee,

RE: HB 347 Occupational Therapy



November 3, 2025

Re: State of Alaska occupational therapy scope update

To whom it may concern:

On behalf of the Alaska chapter of the American Physical Therapy Association (APTA Alaska), I am writing in support of proposed legislation to update the Occupational Therapy (OT) practice. We at the Board of APTA Alaska, representing our members, support the scope and practice act update as written.

This modernization project will improve the function of Alaskans as it will allow OTs to practice closer to the top of their license.

Thank you.

Sincerely,

Alec Kay, PT, DMT
APTA Alaska, President
United Physical Therapy, President and owner

Dear Labor and Commerce Committee,

RE: HB 347 Occupational Therapy

Brianne Oswald, OTD, OTR/L

Supervisor of Rehabilitative Services | St. Elias Specialty Hospital

President, Alaska Occupational Therapy Association (AKOTA)

[REDACTED]
12/9/2025

Representative Carolyn Hall, Co-Chair
Representative Zach Fields, Co-Chair
House Labor and Commerce Committee
Alaska State Legislature

Dear Co-Chair Hall and Co-Chair Fields,

I am writing to express my strong support for ongoing efforts to modernize the occupational therapy scope of practice currently outlined in **AS 08.84.190 (2–4)**. As a resident of Alaska, a practicing occupational therapist, a supervisor of an inpatient rehabilitation department, and the President of the Alaska Occupational Therapy Association (AKOTA), I have seen firsthand the profound impact that modern, evidence-based occupational therapy services have on the health and wellbeing of Alaskans.

Occupational therapy practitioners work with individuals across the lifespan and in a wide range of settings, supporting patients as they navigate some of the most challenging moments of their lives. In my daily practice, I care for Alaskans recovering from **stroke, brain injury, spinal cord injury, fractures, cardiopulmonary illness, critical illness, and other conditions that result in significant debility**. Our patients come from all regions of the state—urban centers, remote towns, and rural villages—and they depend on us to provide care that helps them return to their communities safely and with the highest possible quality of life.

However, the outdated language in **AS 08.84.190 (2–4)** has increasingly limited our ability to deliver the level of care our training, professional standards, and national evidence-based guidelines require. The current statute focuses primarily on compensatory and adaptive strategies rather than acknowledging occupational therapy's critical role in **restoring and improving functional performance**, which is a core element of modern practice. This narrow framing does not reflect the full scope of our profession and restricts practitioners from providing comprehensive, recovery-oriented rehabilitation.

Modernizing our scope of practice is especially important given Alaska's unique geographical and access challenges. Many of our communities are isolated, and Alaskans frequently face long travel distances and significant barriers to care. Ensuring that the OT scope of practice accurately reflects contemporary training and capabilities allows practitioners across the state to provide high-quality, specialized rehabilitation services **closer to home**, reducing burdens on patients and improving long-term health outcomes.

As both a clinician and a leader in the profession, I believe strongly that the **research, evidence-based practice, and advanced clinical skills** developed within occupational therapy are

Dear Labor and Commerce Committee,

RE: HB 347 Occupational Therapy

tremendous assets to our patients—but only when state law empowers us to fully enact them within our license. Updating this statute will allow OT practitioners to deliver the safe, effective, recovery-focused rehabilitation that Alaskans deserve.

Your commitment to modernizing the OT scope of practice resonates deeply with constituents like myself who are dedicated to strengthening health outcomes across our state. I respectfully urge you to continue championing this essential update to Alaska's occupational therapy practice act. I stand ready to support this effort in any way possible.

Thank you for your leadership and your dedication to improving access to high-quality rehabilitative care for all Alaskans.

Sincerely,

Brianne Oswald, OTD, OTR/L

Supervisor of Rehabilitative Services | St. Elias Specialty Hospital

President | Alaska Occupational Therapy Association (AKOTA)

Dear Labor and Commerce Committee,

RE: HB 347 Occupational Therapy

To: House Labor and Commerce Co chair Rep Carolyn Hall and Rep Zach Fields
Formal Endorsement of Legislative Action

I am writing to express my strong support for efforts to modernize the occupational therapy scope of practice, which is currently defined in Sec. 08.84.790 (2-4). As a resident of Alaska and a licensed occupational therapy practitioner, I have witnessed the value of these services in the health and well-being of Alaskans. OT practitioners care for Alaskans across the lifespan and in many different treatment settings. Our patients are often working on goals to overcome some of the biggest challenges of their lives.

The legislature's commitment to modernizing Sec. 08.84.790 (2-4) directly improves the rehabilitative outcomes of Alaskans in metropolitan and rural communities. Caring for patients in Alaska brings unique geographical challenges, as many of our communities are isolated. By modernizing our scope of practice, we can improve Alaska's ability to access to high-quality, specialized healthcare in these local communities.

In recent years, we have found that Sec. 08.84.790 (2-4) has outdated language, which has impacted our ability to provide high-quality care to par with basic national standards. We have been especially challenged by how the language does not address occupational therapy's role in restoring improving a patient's skills and performance. The current language focuses on compensating/adapting based on a patient's limitations, rather than facilitating a patient's recovery. OT would provide a significant and potentially life-changing service to Alaskans. OT fails to address recovery of function. To provide best care to Alaskans, we need to modernize Sec. 08.84.790 (2-4) and address OT's role in recovery/restoration of function.

Your dedication to our scope of practice modernization resonates deeply with someone like myself who believe that Alaskans deserve access to high-quality services, especially after life-changing medical events or diagnoses. I encourage you to continue championing the OT scope of practice modernization, and I stand ready to offer my support in any way possible.

I am an (circle one) Occupational Therapist, Occupational Therapy Assistant

I would like to share the following personal comment:

Guidance: Share the relevance of OT modernization related to your practice. You could describe your concerns using patient population, community that you serve, etc. You could describe how you work around improving patient's skills/areas, rather than an already working adaptive/compensatory strategies. This is your opportunity to advocate for any specific language in the current statute/proposal that you feel personally affect.

I have been a clinician in this state for 40 years. I am grateful for efforts of all to modernize our language that reflects our current scope of practice. Purposeful functional activity is a key tenet in our treatment approach towards maximizing outcomes. Our language needs to reflect the variety of approach this may require

Sincerely, Tamera Lynn Boyer
Printed name: Tamera Lynn Boyer

Signature: [Handwritten Signature]
Date: 12/07/2025

Community for patient care: Anchorage
Home: Anchorage

Email Address: [Redacted]
Number: [Redacted]

Dear Labor and Commerce Committee,

RE: HB 347 Occupational Therapy

Formal Endorsement of Legislative Action

I am writing to express my strong support for efforts to modernize the occupational therapy scope of practice, which is currently defined in Sec. 08.84.190 (2-4). As a resident of Alaska and a licensed occupational therapy practitioner, I have witnessed the value of these services in the health and wellbeing of Alaskans. OT practitioners care for Alaskans across the lifespan and in many different treatment settings. Our patients are often working on goals to overcome some of the biggest challenges of their lives.

The legislature's commitment to modernizing Sec. 08.84.190 (2-4) directly improves the rehabilitative outcomes of Alaskans in metropolitan and rural communities. Caring for patients in Alaska brings unique geographical challenges, as many of our communities are isolated. By modernizing our scope of practice, we can improve Alaskan's ability to access to high quality, specialized healthcare in their local communities.

In recent years, we have found that Sec. 08.84.190 (2-4) has outdated language, which has impacted our ability to provide high quality care on par with basic national standards. We have been especially challenged by how the language does not address occupational therapy's role in restoring/improving a patient's skills and performance. The current language focuses on compensating/adapting based on a patient's limitations, rather than facilitating a patient's recovery. OT would provide a significant and potentially lifechanging disservice to Alaskans, if OT fails to address recovery of function. To provide best care to Alaskans, we need to modernize Sec. 08.84.190 (2-4) and address OT's role in recovery/restoration of function.

Your dedication to our scope of practice modernization resonates deeply with constituents like myself who believe that Alaskans deserve access to high quality services, especially after lifechanging medical events or diagnoses. I encourage you to continue championing for OT scope of practice modernization, and I stand ready to offer my support in any way possible.

I am an Occupational Therapist with over 25 years of experience serving children and their families. I believe the modernization of language in the OT scope of practice is a much needed revision and I thank you for your consideration of this request.



Cary C Moore, PhD, OTR/L
Eagle River, Alaska
February 20, 2026

Dear Labor and Commerce Committee,

RE: HB 347 Occupational Therapy

Dear Labor and Commerce Committee,

RE: HB 347 Occupational Therapy

Formal Endorsement of Legislative Action

I am writing to express my strong support for efforts to modernize the occupational therapy (OT) scope of practice, which is currently defined in Sec. 08.84.190 (2-4). As a resident of Alaska and a licensed occupational therapy practitioner, I have witnessed the value of these services in the health and wellbeing of Alaskans. OT practitioners care for Alaskans across the lifespan and in many different treatment settings. Our patients are often working on goals to overcome some of the greatest challenges of their lives.

The legislature's commitment to modernizing Sec. 08.84.190 (2-4) directly improves the rehabilitative outcomes of Alaskans in metropolitan and rural communities. Caring for patients in Alaska brings unique geographical challenges, as many communities are isolated. Modernizing our scope of practice could improve Alaskans' access to high quality, specialized healthcare from their local communities.

In recent years, we found that Sec. 08.84.190 (2-4) contains outdated language, which negatively impacts our ability to provide high quality care on par with basic national standards. We have been especially challenged by how the language does not address occupational therapy's role in restoring or improving a patient's skills and performance. The current language focuses on compensating or adapting, based on a patient's limitations, rather than facilitating recovery. OT would provide a significant and potentially lifechanging disservice to Alaskans, if OT fails to address recovery of function. To provide best care to Alaskans, we need to modernize Sec. 08.84.190 (2-4) and address OT's role in recovery and restoration of function.

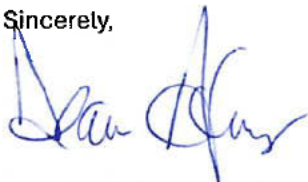
Your dedication to our scope of practice modernization resonates deeply with constituents like me who believe that Alaskans deserve access to high quality services, especially after lifechanging medical events or diagnoses. I support and encourage you to continue championing for the Alaska OT scope of practice modernization legislation.

I am a: Doctor of Occupational Therapy

Personal comment:

I have practiced occupational therapy since 2001 and have experienced the profession's growth as it embraced and implemented evidence-based standards. The verbiage in our current Alaska OT scope of practice is outdated and does not reflect the changes over several years. The problem was most recently evident when certified hand therapists with an occupational therapy education and specialty certification in dry needling procedures were not recognized as qualified to deliver these services to patients. Occupational therapists use a holistic approach to healthcare, which is one quality that uniquely defines the profession and provides a benefit to Alaskans with physiological and psychological challenges. Your support in updating the language in our Statutes and Regulations is imperative to improving access to healthcare for Alaskans of all ages and abilities. Thank you for your consideration.

Sincerely,



Printed name: Deanna Athnos **Date:** 2/23/26

Community for patient care: Anchorage, Fairbanks, Juneau, Wasilla, AK

Home: Eagle River, AK

Email Address: [REDACTED] **Mobile Number:** [REDACTED]

Dear Labor and Commerce Committee,

RE: HB 347 Occupational Therapy

Elizabeth Houseman, OTD, OTR/L
Early Intervention Occupational Therapist
Director of Interior/North, Alaska Occupational Therapy Association (AKOTA)

[Redacted]
12/10/2025

Representative Zach Fields, Co-Chair
Representative Caryolyn Hall, Co-Chair
House Labor and Commerce Committee
Alaska State Legislature

Dear Co-Chair Fields and Co-Chair Hall,

I am writing to express my strong support for efforts to modernize the occupational therapy scope of practice, which is currently defined in Sec. 08.84.190 (2-4). As a resident of Alaska and a licensed occupational therapy practitioner, I have witnessed the value of these services in the health and well-being of Alaskans. OT practitioners care for Alaskans across the lifespan and in many different treatment settings. Our patients are often working on goals to overcome some of the biggest challenges of their lives.

The legislature’s commitment to modernizing Sec. 08.84.190 (2-4) directly improves the rehabilitative outcomes of Alaskans in metropolitan and rural communities. Caring for patients in Alaska brings unique geographical challenges, as many of our communities are isolated. By modernizing our scope of practice, we can improve Alaskans’ ability to access high-quality, specialized healthcare in their local communities.

In recent years, we have found that Sec. 08.84.190 (2-4) has outdated language, which has impacted our ability to provide high-quality care on par with basic national standards. We have been especially challenged by how the language does not address occupational therapy’s role in restoring/improving a patient’s skills and performance. The current language focuses on compensating/adapting based on a patient’s limitations, rather than facilitating a patient’s recovery. OT would provide a significant and potentially life-changing disservice to Alaskans if OT fails to address the recovery of function. To provide the best care to Alaskans, we need to modernize Sec. 08.84.190 (2-4) and address OT’s role in recovery/restoration of function.

Your dedication to our scope of practice modernization resonates deeply with constituents like myself who believe that Alaskans deserve access to high-quality services, especially after life-changing medical events or diagnoses. I encourage you to continue championing for OT scope of practice modernization, and I stand ready to offer my support in any way possible.

I am an: Occupational Therapist

I would like to share the following personal comment:

As an occupational therapist who provides early intervention services to rural and remote communities in Alaska, the current scope of practice language does not accurately reflect the services I provide to families and young children. The current language is outdated—focusing solely on compensatory strategies rather than facilitating, restoring, and improving functional performances for clients. My work with families and children focuses on facilitating developmental skills and abilities. Compensatory strategies are only one component of intervention, and current evidence-based practices and research do not support the sole use of compensatory and adaptive strategies for early intervention practice. Alaska’s scope of practice needs to be modernized to expand interventions and treatments beyond compensation to include the current best practices.

Sincerely,

Elizabeth Houseman

Printed

name: _____


Dear Labor and Commerce Committee,

RE: HB 347 Occupational Therapy

12/10/2025

Signature: _____ Date: _____

Aleutian & Pribilof Islands,
Seward, and Homer Fairbanks, AK
Community for patient care: _____

Home: _____ 

Email Address: _____ Phone Number: _____

Dear Labor and Commerce Committee,

RE: HB 347 Occupational Therapy

Formal Endorsement of Legislative Action

I am writing to express my strong support for efforts to modernize the occupational therapy scope of practice, which is currently defined in Sec. 08.84.190 (2-4). As a resident of Alaska and a licensed occupational therapy practitioner, I have witnessed the value of these services in the health and wellbeing of Alaskans. OT practitioners care for Alaskans across the lifespan and in many different treatment settings. Our patients are often working on goals to overcome some of the biggest challenges **of** their lives. The legislature's commitment to modernizing Sec. 08.84.190 (2-4) directly improves the rehabilitative outcomes of Alaskans in metropolitan and rural communities. Caring for patients in Alaska brings unique geographical challenges, **as** many of our communities are isolated. By modernizing our scope of practice, we can improve Alaskan's ability to access to high quality, specialized healthcare in their local communities.

In recent years, we have found that Sec. 08.84.190 (2-4) has outdated language, which has impacted our ability to provide high quality care on par with basic national standards. We have been especially challenged by how the language does not address occupational therapy's role in restoring/improving a patient's skills and performance. The current language focuses on compensating/adapting based on a patient's limitations, rather than facilitating a patient's recovery. OT would provide a significant and potentially lifechanging disservice to Alaskans, if OT fails to address recovery of function. To provide best care to Alaskans, we need to modernize Sec. 08.84.190 (2-4) and address OT's role in recovery/restoration **of** function.

Your dedication to our scope of practice modernization resonates deeply with constituents like myself who believe that Alaskans deserve access to high quality services, especially after lifechanging medical events or diagnoses. I encourage you to continue championing for OT scope of practice modernization, and I stand ready to offer my support in any way possible.

I am an (circle one): Occupational
Therapist

I would like to share the following personal comment:

Modern occupational therapy practice extends far beyond adaptive strategies. Our **focus** is on **restoring movement, decreasing pain, improving function, and returning people to meaningful life activities**-from work and recreation to caring for family and subsistence activities. Alaska's practice act should reflect current, evidence- based care to ensure that Alaskans continue to receive comprehensive rehabilitation locally, rather than traveling out of state for services.

Dear Labor and Commerce Committee,

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I am currently an OT at Alaska Hand Rehabilitation where we address both impairment and activity limitations. Typical interventions include:

Therapeutic exercise and neuromuscular re-education for strength, coordination, proprioception, and motor control.

Manual therapy and soft-tissue mobilization, including joint and scar mobilization, instrument-assisted techniques, and cupping as clinically appropriate.

Edema and pain management, including compression strategies, graded exposure, and pain science education.

Custom orthotic fabrication and management, including static, serial, and dynamic splints to protect healing tissues and restore function.

Dry needling performed by trained and certified occupational therapists to address neuromuscular pain, muscle tension, and **soft** tissue dysfunction. Dry needling is a safe, evidence-based, and targeted intervention for musculoskeletal dysfunction that complements the work OTS already perform in upper-extremity rehabilitation. At Alaska Hand Rehabilitation, dry needling is performed **only by therapists who have completed advanced, board-recognized training and competency evaluation**.

Physical agent modalities (thermal, electrical, and mechanical agents; photobiomodulation) to assist in pain reduction, circulation, and tissue healing. **Telehealth and caregiver training** for rural access and continuity of post-surgical care.

Dear Labor and Commerce Committee,

RE: HB 347 Occupational Therapy

Updating the practice act to include dry needling and other modern interventions ensures that Alaskans can receive comprehensive, efficient, and evidence-based rehabilitation within the state. It reduces wait times, improves outcomes, and prevents unnecessary referrals or travel for services already safely and effectively provided by qualified occupational therapists.

Sincerely,

Printed name:

Signature:

Jean
Keckhut
Jan
Recklaut

Community for patient care:

dresshandwork
saber:

Dear Labor and Commerce Committee,

RE: HB 347 Occupational Therapy

Email Address

Date:

Home:



Formal Endorsement of Legislative Action

I am writing to express my strong support for efforts to modernize the occupational therapy scope of practice, which is currently defined in Sec. 08.84.190 (2-4). As a resident of Alaska and a licensed occupational therapy practitioner, I have witnessed the value of these services in the health and wellbeing of Alaskans. OT practitioners care for Alaskans across the lifespan and in many different treatment settings. Our patients are often working on goals to overcome some of the biggest challenges of their lives.

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In recent years, we have found that Sec. 08.84.190 (2-4) has outdated language, which has impacted our ability to provide high quality care on par with basic national standards. We have been especially challenged by how the language does

Dear Labor and Commerce Committee,

RE: HB 347 Occupational Therapy

not address occupational therapy's role in restoring/improving a patient's skills and performance. The current language focuses on compensating/adapting based on a patient's limitations, rather than facilitating a patient's recovery. OT would provide a significant and potentially lifechanging disservice to Alaskans, if OT fails to address recovery of function. To provide best care to Alaskans, we need to modernize Sec. 08.84.190 (2-4) and address OT's role in recovery/restoration of function.

Your dedication to our scope of practice modernization resonates deeply with constituents like myself who believe that Alaskans deserve access to high quality services, especially after lifechanging medical events or diagnoses. I encourage you to continue championing for OT scope of practice modernization, **and** I stand ready to offer my support in any way possible.

I am an (circle one): Occupational Therapist,
Occupational Therapy Assistant

I would like to share the following personal comment:

Updating the scope of practice is necessary to adequately reflect the impact our profession makes on helping clients meet their goals. I work in the school system with the pediatric population and I use strength based and evidence based interventions to help students improve their participation, performance and functioning within the school environment.

Dear Labor and Commerce Committee,

RE: HB 347 Occupational Therapy

This includes building upon their current skill set to elicit developmentally appropriate new skills. Using accommodations and modifications is only a small part of my practice to support generalization of skills. Our scope of practice needs to reflect all of the populations we serve as occupational therapists and be in line with the person-environment-occupation model of our practice framework.

Sincerely,

Printed name:

Jeanne Anderson MS, OTR/L

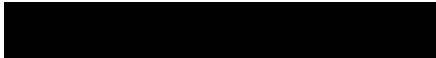
Signature: Jeene

албо

08.OTR/LDate:

Community for patient care: Pediatrics

Home:

Email Address: 

Phone Number: 


Dear Labor and Commerce Committee,

RE: HB 347 Occupational Therapy

Homer, AK

RE: HB 347 Occupational Therapy

Formal Endorsement of Legislative Action

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Your dedication to our scope of practice modernization resonates deeply with constituents like myself who believe that Alaskans deserve access to high quality services, especially after lifechanging medical events or diagnoses. I encourage you to continue championing for OT scope of practice modernization, and I stand ready to offer my support in any way possible.

I am an: Occupational Therapist

I would like to share the following personal comment:

I propose to update the scope of practice to be in line with national organization standards. Please consider adopting language used in the Model Practice Act:

<https://www.aota.org/-/media/corporate/files/advocacy/state/resources/practiceact/final-model-practice-act-2022.pdf>

It would completely modify Sec. 08.84.190. As such: (3) "occupational therapy" means, for compensation, the use of purposeful activity, evaluation, treatment, and consultation with human beings whose ability to cope with the tasks of daily living are threatened with, or impaired by developmental deficits, learning disabilities, aging, poverty, cultural differences, physical injury or illness, or psychological and social disabilities; to maximize independence, prevent disability, and maintain health; "occupational therapy" includes [the therapeutic use of everyday life occupations with persons, groups, or populations (clients) to support occupational performance and participation. Occupational therapy practice includes clinical reasoning and professional judgment to evaluate, analyze, and diagnose occupational challenges and provide occupation-based interventions to address them. Occupational therapy services include habilitation, rehabilitation, and the promotion of physical and mental health and wellness for clients with all levels of ability-related needs. These services are provided for clients who have or are at risk for developing an illness, injury, disease, disorder, condition, impairment, disability, activity limitation, or participation restriction. Through the provision of skilled services and engagement in everyday activities, occupational therapy promotes physical and mental health and well-being by supporting occupational performance in people with, or at risk of experiencing, a range of developmental, physical, and mental health disorders. The practice of occupational therapy includes:] (A) developing daily living, play, leisure, social, and developmental skills; [Evaluation of factors affecting activities of daily living (ADLs), instrumental activities of daily living (IADLs), health management, rest and sleep, education, work, play, leisure, and social participation] (B) facilitating perceptual-motor and sensory-integrative functioning; [Methods or approaches to identify and select interventions, such as (1) Establishment, remediation, or restoration of a skill or ability that has not yet developed, is impaired, or is in decline (2) Compensation, modification, or adaptation of occupations, activities, and contexts to improve or enhance performance (3) Maintenance of capabilities to prevent decline in performance in everyday life occupations (4) Health promotion and wellness to enable or enhance performance in everyday life activities and quality of life (5) Prevention of occurrence or emergence of barriers to performance and participation, including injury and disability prevention (C) enhancing functional performance, prevocational skills, and work capabilities using specifically designed exercises, therapeutic activities and measure, manual intervention, and appliances; [Interventions and procedures to promote or enhance safety and performance in ADLs, IADLs, health management, rest and sleep, education, work, play, leisure, and social participation, for example: 1. Therapeutic use of occupations and activities 2. Training in self-care, self-management, health management (e.g., medication management, health routines), home management, community/work integration, school activities, and work performance 3. Identification, development, remediation, or compensation of physical, neuromusculoskeletal, sensory-perceptual, emotional regulation, visual, mental, and cognitive functions; pain tolerance and management; praxis; developmental skills; and behavioral skills 4. Education and training of persons, including family members, caregivers, groups, populations, and others 5. Care coordination, case management, and transition services 6. Consultative services to persons, groups, populations, programs, organizations, and communities 7. Virtual interventions (e.g., simulated, real-time, and near-time technologies, including telehealth and mobile technology) 8. Modification of contexts (environmental and personal factors in settings such as home, work, school, and community) and adaptation of processes, including the application of ergonomic

Dear Labor and Commerce Committee,

RE: HB 347 Occupational Therapy

principles 9. Assessment, design, fabrication, application, fitting, and training in seating and positioning, assistive technology, adaptive devices, and orthotic devices, and training in the use of prosthetic devices 10. Assessment, recommendation, and training in techniques to enhance functional mobility, including fitting and management of wheelchairs and other mobility devices 11. Exercises, including tasks and methods to increase motion, strength, and endurance for occupational participation 12. Remediation of and compensation for visual deficits, including low vision rehabilitation 13. Driver rehabilitation and community mobility 14. Management of feeding, eating, and swallowing to enable eating and feeding performance 15. Application of physical agent and mechanical modalities and use of a range of specific therapeutic procedures (e.g., wound care management; techniques to enhance sensory, motor, perceptual, and cognitive processing; manual therapy techniques) to enhance performance skills 16. Facilitating the occupational participation of persons, groups, or populations through modification of contexts (environmental and personal) and adaptation of processes 17. Efforts directed toward promoting occupational justice and empowering clients to seek and obtain resources to fully participate in their everyday life occupations 18. Group interventions (e.g., use of dynamics of group and social interaction to facilitate learning and skill acquisition across the life course).] (D) design, fabrication, and application of splints or selective adaptive equipment; (E) administering and interpreting standardized and nonstandardized assessments, including [but not limited to] sensory, manual muscle, and range of motion assessments, necessary for planning effective treatment; and (F) adapting environments for the disabled;

Sincerely,

Printed name: Kerry

Clark _____

Signature: _____ Date: _____

_____ Community for patient care: Anchorage Home: [REDACTED]

 [REDACTED] Email Address: [REDACTED] Phone Number: [REDACTED]

 [REDACTED]