The majority of respondents (n=45) reported that their practice setting had a policy regarding the measurement of vital signs. Of the 45 participants, 66.7% (n=30) reported that 81-100% of their caseload over the last 6 months involved patients whose primary problems were musculoskeletal in nature. A significant number of respondents believed it was important to measure vitals (“Extremely Important”); HR n=20; BP n=21; Spo2 n=18) on patients with a cardiovascular condition but few believed it was important to measure vitals on each patient at every visit (“Extremely Important”; HR n=4, BP n=4, Spo2 n=3). When asked the reasons for not measuring vital signs, the most frequently chosen responses were “not important for my patient population” (40.0%; n=18) and “lack of time” (22.2%; n=10).

Participants included PTs currently practicing at an adult outpatient clinic, in the State of Florida, for at least six months. A to the survey was made available for a 3 week period on the FPTA’s website.

The instrument was designed to evaluate clinical practice, beliefs of the therapist, and demographic data.

The 13 item survey questionnaire was developed after a thorough review of current literature and with the help and expertise of the committee chair.

The 13 item survey questionnaire addressed the frequency of HR, BP, and Spo2 measurement in the six months prior to taking the survey; beliefs about the importance of measuring, reasons for not measuring, and an estimate of how long it takes to measure HR, BP, and Spo2; primary area of practice within the adult outpatient setting, ownership of the clinic, clinic policies, characteristics of patients treated in the six months prior to taking the survey, entry level degree, highest degree earned, ABPTS certification, years in practice, and APTA membership status.

The majority of respondents (n=22, 48.9%) reported having a Bachelor’s Degree as their entry degree level and 11 of the 22 had gone on to earn either a Master’s Degree or Doctorate. Out of the 45 respondents, 13.6% (n=6) reported having an American Board of Physical Therapy Specialties (ABPTS) Certification (orthopedics n=5; Pediatrics n=1). The 3 most commonly selected ranges for years of experience as a PT were 6-10 years (n=7), 16-20 years (n=7), and 26-30 years (n=7). 62.2% (n=28) were current members of the APTA. Most respondents (n=25; 55.6%) worked in outpatient clinics that were part of a hospital system and the remaining 20 worked either in a PT owned clinic (n=14; 31.1%) or for a corporation (n=6; 13.3%).

This study provides useful information about the gaps between the APTA’s recommendations for measuring vitals and current clinical practices. Additional data analysis will be conducted to determine if any correlations exist between demographic data, beliefs about measuring vitals, and behaviors for measuring vitals. PTs are responsible for ensuring the safety of each patient being treated. Measuring vitals allows clinicians to screen for undiagnosed conditions, monitor existing conditions, and facilitate safety through prevention.