

RETIRED DOCUMENT

This document is retired, effective April 1, 2026, corresponding with the *Health Professions and Occupations Act* (HPOA) in-force date. As this document is retired, it is not considered **standard** or **guidance** under the HPOA. However, until it is replaced by a HPOA-compliant resource, licensees may find it useful as general information for their practice.



College of

HEALTH AND CARE PROFESSIONALS OF BC



Physical Therapists

Advice to Consider: Shockwave

Do I need special training to provide shockwave therapy to my clients?

As outlined in the Standard of Practice: Continuing Competence, when practising in any new area - either new to the profession or new to the physical therapist (PT) - the PT is required to “actively participate in self-directed learning ... to acquire competence in new and emerging areas of practice relevant to their practice setting and client population served”. This requires physical therapists (PTs) to seek out appropriate training, mentorship or other ways of acquiring competence before incorporating a new treatment or modality into practice. It is up to the professional judgement of the PT to determine their learning needs in the new area and to determine how to meet these needs in order to gain competence. (The College does not evaluate or “validate” specific education courses).

When should shockwave be used?

As with all modalities or treatment approaches, shockwave should only be used when there is appropriate evidence to indicate that it could be of benefit to the client. The Standard of Practice: Evidence Informed Practice is important when determining whether any treatment is an appropriate modality for clients. Some questions that might be useful to consider include:

- Is there evidence that shockwave is safe for this client?
- Are there any contraindications to the proposed application?
- Is there clinical evidence for the effectiveness of shockwave for this specific purpose / client goal, and if so what dosage / duration / number of treatments may be appropriate?
- Are there any device-related safety risks specific to the application of shockwave and have risks been transparently disclosed to the client?

It is important to note, that even if there is evidence to support shockwave for a specific condition, it would still be up to the physical therapist to perform a thorough, client specific assessment to determine whether shockwave is indicated for the client and their current clinical presentation.



What equipment should I buy?

The College does not advise on purchasing equipment. The Standard of Practice: Risk Management and Safety outlines the requirements for safe practice, however does not directly address safety standards or criteria for various types of electrical equipment (points 7 & 10 may be the most relevant). The determination of what equipment to use and the responsibility of determining that it is safe and meets Canadian standards lies with the registrant. Checking to ensure the device has an approved BC Safety Authority label and a Health Canada device licence is a good place to start. As with any equipment used in physical therapy practice, electrophysical agents must be maintained, inspected, and calibrated according to manufacturer guidelines, and a record of calibration and service should be kept

Does my insurance coverage include provision of shockwave?

This would be a question for your insurance provider; policies may differ.

Can I charge higher fees for shockwave or other treatments?

The College does not set or advise on fees for treatments. The Standard of Practice: Funding Fees and Billing provides the regulatory requirements related to setting fees and billing. The Standard requires that prior to a client being subject to any fee, they are provided with a comprehensive fee schedule, while they still have the opportunity to decline the service.

Can a PTSW (Physical Therapy Support Worker) apply shockwave?

Whilst the Standard of Practice: Supervision does not directly address supervision of specific techniques or modalities, it does state that “any physical therapy treatment that would require the physical therapist support worker to employ clinical reasoning, analysis and decision- making to change the established plan of care without the input of the supervising physical therapist” cannot be assigned to a PTSW. As with any treatment, it is up to the supervising therapist to use clinical judgement to determine what is appropriate to assign to a PTSW, bearing in mind the risk level to the client, PTSW competence, and the clinical context.

Keep in mind that any physical therapy treatment assigned to a PTSW must be supervised by the physical therapist. If a technique or an electrophysical agent (EPA) is new to you and to the PTSW, this will impact your supervision model. Having experience with a technique or EPA helps determine scenarios where it is, or is not, appropriate to assign to a PTSW.

For more information on the appropriate use of EPAs in practice, please see the Advice to Consider - “Emerging Electrophysical Agents – Informed Decision Making”.