



# South Dakota Board of Physical Therapy

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## SDBPT Continuing Education Summary Form

**\*Completed Only if PT/PTA is Randomly Selected for CE Hour Auditing**

Refer to the "Guidelines for Acceptable Continuing Education Credit for PTs/PTAs Licensed in South Dakota" document for information about approved continuing education hours compliant with § [20:66:03:01](#) and § [20:66:03:02](#), including details about CE hour equivalents for acceptable Category 2 activities and activities that are not accepted as CE hours.

Licensees Name: \_\_\_\_\_

License Number: \_\_\_\_\_

Professional Designation:  Physical Therapist  Physical Therapist Assistant

Did you graduate from an accredited PT/PTA program within the last 2 years?  Y  N

### Record of Category 1 Activities (add additional page as needed)

Course Title	Date	CE hours <sup>a</sup>
<b>Total</b>		

<sup>a</sup>Convert from CEUs to CE hours using: #CEUs x 10 = CE hours; convert from academic credits (AC) using: #ACs x 15 = CE hours

### Record of Category 2 Activities (add additional page as needed)

Participatory Activity	Date	CE hour Equivalence <sup>b</sup>
<b>Total</b>		

<sup>b</sup>CE hour equivalencies can be found in the "Guidelines for Acceptable Continuing Education Credit for PTs/PTAs Licensed in South Dakota"