



HB 1260 / SB 5642 - Physical Therapists and Intramuscular Needling

What is Intramuscular Needling (also known as dry needling)?

- Intramuscular needling is a well-established Western medical intervention involving the insertion of a solid filament needle without medication through the skin to stimulate underlying connective and muscular tissue for the treatment of neuromuscular pain and movement impairments. Intramuscular needling is used in conjunction with other physical therapy therapeutic interventions.

Do other states allow physical therapists to perform intramuscular needling?

- Yes, in 42 states physical therapists perform intramuscular needling. Additionally, physical therapists in all branches of the United States military utilize intramuscular needling.

Why do physical therapists use intramuscular needling?

- Physical therapists use intramuscular needling in their treatments to directly target sources of pain and movement impairments in neuromuscular conditions. Intramuscular needling is used to relieve pain, relax tense and tight muscle tissue and help restore normal movement. Intramuscular needling is an effective non-pharmacological alternative to the use of opioids.

Is intramuscular needling the same as acupuncture?

- No, the practice of acupuncture and the performance of intramuscular needling by physical therapists differ in terms of historical, philosophical, indicative and practical context. Intramuscular needling utilizes the physical therapist's in-depth understanding of the musculoskeletal and nervous systems, substantial training in examination, medical screening, anatomy, and pathophysiology to directly treat sources of pain and movement dysfunction. Intramuscular needling isn't listed, identified or defined under the East Asian Medicine practice act.

Is intramuscular needling safe when performed by physical therapists?

- Yes, physical therapists have demonstrated that it is a safe technique. Evidence repeatedly shows a very low rate of serious adverse events from physical therapists performing intramuscular needling in the states, US Military, and Canada.

Did the Department of Health (DOH) conduct a sunrise review of this topic?

- Yes, DOH conducted a sunrise review of physical therapists performing intramuscular needling in August of 2016. DOH determined that with adequate training, including a clinical component, intramuscular needling may fit within the physical therapist's scope of practice in treating neuromusculoskeletal conditions.

What are the components of HB 1260/SB 5642?

- HB 1260 and SB 5642 require a physical therapist to perform 300 hours of didactic, in-person instruction, and clinically reviewed intramuscular treatment sessions to receive an endorsement to perform intramuscular needling. The proposed training standard will be the most robust in the United States for physical therapists performing intramuscular needling.
- A physical therapist may not delegate intramuscular needling and must remain in constant attendance of the patient for the entire intramuscular needling treatment.

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