

STATE OF MAINE
Professional and Financial Regulation
Office of Professional and Occupational Regulation
Board of Examiners in Physical Therapy
35 State House Station, Augusta, Maine 04333
ADVISORY RULING

No. 2016-01

Advisory Ruling Requested by:

Dustin Hurd, DPT, CMP
OA Centers for Orthopaedics
33 Sewall Street
Portland ME 04102

Topic:

“Dry Needling” technique in the practice of physical therapy

REQUEST FOR ADVISORY RULING

By email communication dated February 18, 2014, Mr. Hurd (P.T.) requests an opinion on the practice of “dry needling” by licensed Maine physical therapists. Pursuant to the authority granted in 5 M.R.S.A. § 9001 and Board of Examiners in Physical Therapy, chapter 3, the Board considered Mr. Hurd’s request at its March 13, 2015, meeting and now issues the following advisory ruling.

FACTS

Mr. Hurd stated that a number of states support the technique of “dry needling” in the practice of physical therapy. Mr. Hurd commented that the Maine Physical Therapist Practice act, 32 MRS chapter 45-A does not specifically address this technique and is seeking the Board’s opinion on this matter. Mr. Hurd provided a publication, Forum, summer 2012, issued by the Federation of State Boards of Physical Therapy on the matter, “Can Physical Therapists Do Dry Needling?” According to the publication “dry needling” is also known as “intramuscular manual therapy, trigger point dry needling, or intramuscular needling.”

In addition to 32 MRS chapter 45-A, the Maine Physical Therapist Practice act, the Board reviewed documents on the subject of dry needling issued by the Federation of State Board of Physical Therapist.

APPLICABLE LAW

32 M.R.S. §3111-A. Scope of practice reads in applicable part as follows:

“The practice of physical therapy includes the evaluation, treatment and instruction of human beings to detect, assess, prevent, correct, alleviate and limit physical disability, bodily malfunction and pain from injury, disease and any other bodily condition; the administration, interpretation and evaluation of tests and measurements of bodily functions and structures for the purpose of treatment planning; the planning, administration, evaluation and modification of treatment and instruction; and the use of physical agents and procedures, activities and devices for preventive and therapeutic purposes; and the

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provision of consultative, educational and other advisory services for the purpose of reducing the incidence and severity of physical disability, bodily malfunction and pain.”

DISCUSSION AND RULING

The Board agrees with the statement stated on page 3 of the FSBPT Dry Needling Resource Paper, 4th edition, July 2013, which states, “dry needling continuing education and use as an intervention has grown dramatically in the last few years, but overall, is still a relatively unique part of physical therapy practice.” While the Board agrees with the statement, an important factor for this advisory ruling consideration is the Maine Physical Therapist Practice act (32 MRS §3111-A). The Board voted in full agreement that “dry needling” is a recognized technique associated with the practice of physical therapy and is an appropriate technique when used during the course of a physical therapy treatment. The Board reasons that this physical therapy treatment technique is further substantiated in the scope of practice in that it references, “...activities and devices for preventive and therapeutic purposes...”

SCOPE OF ADVISORY RULING

The Board recognizes that the Maine Physical Therapist Practice Act does not state that a physical therapist is required to obtain additional knowledge and experience over and above the physical therapist educational requirements to perform specific techniques or to use practice related devices. The Board considered whether to mandate training prior to a licensee engaging dry needling techniques and concluded that licensed physical therapists are individually responsible for obtaining and maintaining the necessary knowledge, skill and competency to safely practice any area of their physical therapy profession. The training should be informed by evidence of research that substantiates the approach that is being taught and completion of such training should be affirmed by a certificate demonstrating completion of the educational training and available upon request. Further, the Board advises that any device used when rendering a treatment should be recorded in the patient’s documentation of the physical therapy plan of care.

The appropriate term to use by a physical therapist is “dry needling.” Use of the term “acupuncture” is not appropriate. Dry needling is separate and distinct from acupuncture techniques and the use of the term “acupuncture” should not be used with patients as it could create confusion.

This advisory ruling is not binding upon the Maine Board of Examiners in Physical Therapy, but justifiable reliance upon this ruling shall be considered in mitigation of any penalties sought to be assessed in any subsequent enforcement action initiated by the Board.

SIGNED Leslie Anderson P.T.M.S.B. **Dated** 6/17/2016
Leslie Anderson, P.T., Board Chair, Maine Board of Examiners in Physical Therapy

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