

SENATE BILL REPORT

SB 6374

As of February 1, 2016

Title: An act relating to allowing physical therapists to perform dry needling.

Brief Description: Allowing physical therapists to perform dry needling.

Sponsors: Senators Dammeier, Becker, Cleveland, Warnick and Jayapal.

Brief History:

Committee Activity: Health Care: 2/01/16.

SENATE COMMITTEE ON HEALTH CARE

Staff: Evan Klein (786-7483)

Background: Dry Needling. Dry needling is a general term used for a therapeutic treatment procedure that involves advancing either acupuncture needles or hollow-core hypodermic needles into human muscle to relieve pain. There is no injectable solution, and typically the needles used are very thin.

Acupuncture. Acupuncture is a form of traditional Chinese medicine involving thin needles inserted into the body at acupuncture points, or meridians, for the relief of pain.

Physical Therapists. Licensed physical therapists (PT) may perform a variety of services, including the following:

- examining, evaluating, and testing individuals with mechanical, physiological, and developmental impairments, functional limitations in movement, and disability or other health and movement-related conditions;
- alleviating impairments and functional limitations in movement;
- performing wound care services;
- reducing the risk of injury, impairment, functional limitation, and disability related to movement;
- engaging in administration, consultation, education, and research; and
- spinal manipulation – after being issued an endorsement.

A person must either be a licensed physician or have other statutory authority to penetrate human tissue with a needle.

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Summary of Bill: Dry needling is defined as a skilled intervention that uses a thin needle to penetrate the skin and stimulate trigger points, and muscular and connective tissues for the management of pain and movement. Dry needling does not include the stimulation or treatment of acupuncture points and meridians.

A PT, after attaining a dry needling endorsement from the secretary of health, may perform dry needling. To receive an endorsement, a PT must show evidence of adequate education and training, including a minimum of 55 hours of dry needling education, and at least one year of licensed practice as a PT. A PT may not delegate dry needling.

Appropriation: None.

Fiscal Note: Not requested.

Committee/Commission/Task Force Created: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony: PRO: Using similar techniques for diagnostic and therapeutic purposes makes sense. Using needles in different ways, for therapeutic purposes, could be useful. Dry needling in the physical therapy model makes sense. Finding ways to get better care to our citizens makes sense, and drawing artificial boundaries between professions does not help the public. Physical Therapists asked for a meeting with East Asian Medicine Practitioners to negotiate a bill, but they declined such a meeting. Dry needling by physical therapists is allowed in 25 states. Only those PTs that have had additional training would be able to practice. This is the same approach taken with other procedures within the PT scope of practice. Dry needling is also part of the PT scope of practice in other countries, including Australia and Canada. The University of Washington currently offers training in dry needling to acupuncturists. Physical Therapists do not require training in acupuncture. Physical Therapy is the best suited practice to provide dry needling to patients. Special operations service personnel have benefited from the targeted use of dry needling. Dry needling is currently legal in the states of Colorado and North Carolina, both represented in this year's Super Bowl. The Department of Defense allows physical therapists with appropriate training to practice dry needling. Dry needling has helped return soldiers to combat faster.

CON: The bill includes a number of imperfections that jeopardize public safety. The danger is that dry needling would be established as a separate system of medicine outside of acupuncture. This bill would prohibit EAMPs from performing dry needling. PTs would be able to dry needle with far less training than EAMPs. The American Academy of Medical Acupuncture agrees that this bill would affect patient safety. The EAMP association did meet with the PT Association but still disagrees. Treating trigger points is Chinese medicine. Needling a trigger point with a dry needle has been considered part of acupuncture for thousands of years. Dry needling is indeed a form of acupuncture. In 2008, medical doctors established that of the 255 trigger points, 93 percent were actual acupuncture points. Prominent physical therapists admit that dry needling is acupuncture. Physical therapists use acupuncture studies to support claims of dry needling. Should this bill move forward, it should at the least go through a sunrise review process. The level of training proposed by the

Physical Therapists is unsafe. Medical doctors, even with the rigor of their education, must still take an additional 300 hour course to become certified in the use of acupuncture. It is clear that a 55 hour course cannot be justified. The line between dry needling and acupuncture is so unclear that no one will know when a PT crosses this imaginary line. Even with skilled use, filiform needles have plenty of associated risks, which would be just as prevalent in dry needling as in acupuncture. Needling can lead to internal bleeding, punctured lungs, or damage to the brain stem. A PT could easily cause a miscarriage. Over a dozen points in the lower back could stimulate uterine contractions, which is a very real risk. The King County Superior Court has ruled that dry needling is not within a physical therapist's scope of practice. The lack of historical research behind this bill is racist and insulting.

Persons Testifying: PRO: Senator Dammeier, Prime Sponsor; Erik Moen, PTWA President; Steven Goodman, St. Luke's Rehabilitation Institute; Nancy Mansell, Physical Therapy Association of Washington; Jon Neumann, Physical Therapy Association of Washington.

CON: Curtis Eschels, WA East Asian Medicine Association; Andrew McIntyre, WA East Asian Medicine Association; Zeyiad Elias, WA East Asian Medicine Association; Jianfeng Yang, Acupuncture and Oriental Medicine Centers; Ashley Goddard, Nine Needles Acupuncture and Wellness Center; John Frostad, East Asian Medicine Practitioner; Zachary Fulton, 180 Health Care; John Moore; Dan Dingle; Susan Shultz, Cascadia Health Care; Dan Tennenbaum, Bellevue Acupuncture; Heather Spencer, Heather Spencer EAMP/LAc.

Persons Signed In To Testify But Not Testifying: No one.