Dry Needling:

Clarifications on what it is and the process of performing it
“With superficial needling, the needle is just slightly into a muscle in the vicinity of a TrP (myofascial trigger point), but LTRs (latent twitch responses) are not elicited. The needle is kept in place for approximately 30 seconds. At that time, the needle is withdrawn to the subcutaneous tissue. The therapist assesses whether the sensitivity of the TrP has decreased. If so, the DN (dry needling) needling can be discontinued. If the TrP is still sensitive, the needle is guided again into the muscle in the vicinity of the TrP and left in place for approximately 2 minutes. The superficial DN procedure is usually repeated over several TrPs in a given region. LTRs are not elicited with superficial needling techniques.”
“Our AMA recognizes dry needling as an invasive procedure and maintains that dry needling should only be performed by practitioners with standard training and familiarity with routine use of needles in their practice, such as licensed medical physicians and licensed acupuncturists.”
Utah Physical Therapy Act

Section 58-24b-102 definition; Subsection;
(10)(b) "Physical therapy" or "physiotherapy" does not include:

(iii) performing acupuncture;

Subsection(14)(a.)"Trigger point dry needling" means the stimulation of a trigger point using a dry needle to treat neuromuscular pain and functional movement deficits. (b) "Trigger point dry needling" does not include the stimulation of auricular or distal points”
A physical therapist may practice trigger point dry needling if the physical therapist: (a) has held a license to practice physical therapy under this chapter, and has actively practiced physical therapy, for two years; (b) has successfully completed a course in trigger point dry needling that: (i) is approved by the division; and (ii) includes at least 300 total course hours, including at least: (A) 54 hours of in-person instruction; and (B) 250 supervised patient treatment sessions; (c) files a certificate of completion of the course described in Subsection (1)(b) with the division; (d) registers with the division as a trigger point dry needling practitioner; and (e) meets any other requirement to practice trigger point dry needling established by the division.
“Dry needling is an invasive procedure. **Needle length can range up to 4 inches in order to reach the affected muscles.** The patient can develop painful bruises after the procedure and adverse sequelae may include hematoma, pneumothorax, nerve injury, vascular injury and infection. Post procedure analgesic medications may be necessary (usually over the counter medications are sufficient). There has been controversy in the United States as to who is qualified to practice dry needling. **Since it is an invasive procedure using needles, many take the position that it should only be performed by licensed acupuncturists or licensed medical physicians (M.D. or D.O.).** There are other practitioners performing this procedure who have taken a course or courses in this technique but do not routinely use needles otherwise in their practices. **The American Academy of Physical Medicine and Rehabilitation recognizes dry needling as an invasive procedure using acupuncture needles that has associated medical risks.** Therefore, the AAPMR maintains that this procedure should only be performed by practitioners with standard training and familiarity with routine use of needles in their practice, such as licensed acupuncturists or licensed medical physicians.”

American Academy of Physical Medicine & Rehabilitation
If there is needle retention or e-stim used, only the acupuncture codes are appropriate.

Physical therapists are allowed to do dry needling only!!

Duration of needle retention should be approximately 30 seconds
Myths and Misinformation

About Dry Needling and Acupuncture
Myth: Dry Needling is Not Acupuncture

Fact: Dry needling techniques fall under a subset of techniques used in orthopedic and myofascial acupuncture systems. Originators of dry needling identify it as acupuncture and dry needling utilizes acupuncture needles.
Fact: There are no standards for physical therapy dry needling curriculum or examination. There are no standards for clinical mentorship. In short, there is no current definition of the practice referred to as dry needling and no standardized system of demonstrating either minimal competency or safety.
Fact: 95% of trigger points are in fact acupuncture points.

It has been determined that 95% of trigger points correspond to acupuncture points. “Ashi point” needling is acupuncture trigger point needling, and this is described in Chinese medical texts dating from 200 BCE – 200 CE.
Meta-analyses of acupuncture data received for a total of 20,827 patients from 39 trials conclude that acupuncture is effective for the treatment of chronic pain, with treatment effects persisting over time. Acupuncture is currently one of the most widely studied medical interventions, and much of the literature used to justify the clinical legitimacy of dry needling is drawn from acupuncture research studies.
PT Use of E-Stim

Acupuncturists use direct electrical needle stimulation and physical therapists use transcutaneous nerve stimulation or other similar devices that are not connected to a needle.
This is not dry needling because:

- The needles are clearly being retained for more than two minutes since there are six e-stim leads
- Needles are in classic acupuncture points
- Needles have electrical stimulation connected to them which would require acupuncture CPT codes
Physical Therapist in Salt Lake City

• Unsafe practice of dry needling by a physical therapist in Salt Lake

• Needles are buried to the hub
Wasatch Physical Therapy

This is not dry needling because:

These two points are classic acupuncture points
Needles are being retained
Needles are in distal points
Is This Dry Needling?

PT claiming this is dry needling. This is clearly acupuncture because the needles are being retained longer than 30 seconds and the needle is not being manipulated in the in and out fashion indicative of the technique dry needling.
“Licensed acupuncturists have practiced and documented this acupuncture technique, now referred to as “dry needling”, for decades in the US. Some physical therapists and other healthcare providers have claimed that “dry needling” is “new” and “not acupuncture”, because the point locations and needling style are based on anatomical structures and physiological function rather than on traditional Chinese medicine acupuncture theory. In fact, licensed acupuncturists receive training in the application of both traditional foundations of acupuncture and modern biomedical theories and have done so since long before the term “dry needling” was invented. “Dry needling” is an advanced and invasive procedure. In the hands of a practitioner who has received limited and/or substandard training, it has the potential to cause great harm. It can be considered safe only when performed by properly trained and experienced acupuncturists.”

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