



LEGISLATIVE ACTION

Senate

House

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The Committee on Health Policy (Calatayud) recommended the following:

1                   **Senate Amendment**

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3                   Delete lines 41 - 80

4 and insert:

5 education from an entity approved by the board on the topic of  
6 dry needling. To satisfy this requirement, the instructor of the  
7 continuing education must make a determination that the  
8 occupational therapist demonstrates the requisite psychomotor  
9 skills to safely perform dry needling. The continuing education  
10 must include instruction in all of the following areas:



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11       1. Theory of dry needling.

12       2. Selection and safe handling of needles and other

13 apparatus or equipment used in dry needling, including

14 instruction on the proper handling of biohazardous waste.

15       3. Indications and contraindications for dry needling.

16       4. Psychomotor skills needed to safely perform dry

17 needling.

18       5. Postintervention care, including care for adverse

19 responses, adverse incident recordkeeping, and any reporting

20 obligations.

21       (c)1. Completion of at least 25 patient sessions of dry

22 needling performed under the supervision of an occupational

23 therapist, a physical therapist, or a chiropractic physician who

24 holds an active license to practice in any state or the District

25 of Columbia and has actively performed dry needling for at least

26 1 year. The supervising practitioner must document that the

27 occupational therapist under his or her supervision has met the

28 supervision and competency requirements specified by board rule

29 and does not need additional supervised sessions to safely

30 perform dry needling; or

31       2. Completion of 25 patient sessions of dry needling

32 performed as an occupational therapist, physical therapist, or

33 chiropractic physician licensed in another state or in the

34 United States Armed Forces.

35       (d) A requirement that dry needling be performed only if

36 the patient consents to the treatment and it is part of the

37 patient's documented plan of care.

38       (e) A requirement prohibiting the delegation of dry

39 needling to any person other than an occupational therapist who



40 is authorized to perform dry needling under this part.

41 (2) The board shall establish additional supervision and  
42 training requirements that an occupational therapist must meet  
43 before performing dry needling on the head, neck, or torso if  
44 the board deems such requirements necessary for patient safety.

45 (3) The Department of Health shall, within existing  
46 resources, submit