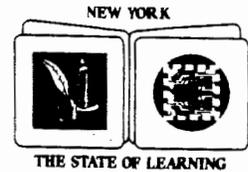


TRIGGER POINT
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THE STATE EDUCATION DEPARTMENT / THE UNIVERSITY OF THE STATE OF NEW YORK / ALBANY, N.Y. 12230

DEPUTY COMMISSIONER FOR THE PROFESSIONS
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EXC
Melanie Gillard

April 29, 1992

TO: Neil LaForest, PT, State Board for Physical Therapy
Londé Selmon-Givan, PT, State Board for Physical Therapy
Primitivo T. Cruz, M.D., State Board for Medicine
Thomas K. Wu, M.D., State Board for Medicine
Leon Hammer, M.D., State Board for Acupuncture
Myung Dui Bae, Ph.D, State Board for Acupuncture

FROM: Henry A. Fernandez

SUBJECT: Trigger Point Needling

I have now had an opportunity to review the recommendations and the summary of the discussions of the joint practice committee which met twice on Friday, August 23, 1991 and Monday, November 25, 1991. That review included the proposal to teach the technique of trigger point needling at Touro College, a review of the scope of practice of acupuncture, medicine, and physical therapy, and the advice of the practitioners concerning the current application of the technique by practitioners currently licensed to practice acupuncture, medicine, and physical therapy. Consistent with our authority under §6507 of the Education Law, I wish to share with you our determination concerning the appropriateness of trigger point needling falling within the scope of practice of acupuncture, medicine, and physical therapy.

The technique of dry needling as a part of trigger point therapy appropriately falls within the scopes of practice of acupuncture and medicine. The scientific and philosophical rationale for using the technique may be different for practitioners in these two professions; nevertheless, the law permits, and it is clear, that the technique has been applied for a considerable period of time by practitioners of acupuncture and medicine. Finally, it is an established part of the educational preparation for practitioners of acupuncture and medicine.

Physical therapists have traditionally treated pain associated with trigger points by a variety of modalities, such as pressure, myofascial stretching, or application of heat. However, the use of an invasive modality such as dry needling technique is not specifically

authorized as are other techniques in the physical therapy law. Finally, and perhaps most importantly, it has not been widely established or accepted by the physical therapy profession as a part of physical therapy practice.

The practice of physical therapy is defined in Section 6731(a) of the Education Law as "The evaluation, treatment or prevention of disability, injury, disease, or other condition of health using physical, chemical, and mechanical means including, but not limited to heat, cold, light, air, water, sound, electricity, massage, mobilization, and therapeutic exercise with or without assistive devices, and the performance and interpretation of tests and measurements to assess pathophysiological, pathomechanical, and developmental deficits of human systems to determine treatment, and assist in diagnosis and prognosis." Except for the invasiveness of the procedure, the portion of the definition which refers to treatment by "mechanical means", in our judgment, would allow for the possibility that dry trigger point needling could become recognized as a part of physical therapy practice in the future. A legislative amendment giving explicit authority for use of the technique would be desirable. However, the profession of physical therapy must demonstrate that dry trigger point needling has evolved to become an accepted part of the body of knowledge of physical therapy as evidenced by its inclusion within the systematic training offered in academic programs. The latter is a typical path by which restricted modalities are recognized as incorporated in professional scopes of practice. Where the statute is broad, as in medicine, that determination may be made administratively. Where the law is narrow, legislative amendments may be necessary.

It has not been established that trigger point therapy by use of dry needling technique is currently a part of the scope of practice of physical therapy. Accordingly, it would not be appropriate for Touro College, or any other higher education institution, to offer courses where students perform the technique as a part of the practice of physical therapy.

In coming to these conclusions, we have been guided by the Department's long-standing policy that scope of practice in the professions is determined by statutory authority, custom, usage, and evolution. Over time, as the educational base of professional expertise evolves, new modalities gradually become accepted as safe and appropriate.

We are very grateful to all of you for the time, effort, and expertise you have shared with us as we have grappled with this challenging and complex issue. Your advice and recommendations have been invaluable to our deliberations.

cc: Frank Muñoz
Daniel W. Szetela
Ronnie Hausheer
Milene A. Megel
Thomas J. Monahan
Anne Marie Rainville