Intramuscular Manual Therapy/Dry Needling Regulations

The practice guidelines for intramuscular manual therapy (dry needling) were adopted by the Mississippi State Board of Physical Therapy on September 10, 2012. These regulations are found in Part 3101 Rule 1.3 (c) (A-K):

c. Intramuscular manipulation may be performed by a licensed physical therapist who has met the criteria as described hereunder:

A. Intramuscular manual therapy is a physical intervention that uses a filiform needle no larger than 25 gauge needle to stimulate trigger points, diagnose and treat neuromuscular pain and functional movement deficits; is based upon Western medical concepts; requires an examination and diagnosis, and treats specific anatomic entities selected according to physical signs. Intramuscular manual therapy does not include the stimulation of auricular or distal points or any points based upon areas of Eastern (Oriental) medicine and acupuncture.

B. Intramuscular manual therapy as defined pursuant to this rule is within the scope of practice of physical therapy.

C. A physical therapist must have the knowledge, skill, ability, and documented competency to perform an act that is within the physical therapist’s scope of practice.

D. To be deemed competent to perform intramuscular manual therapy a physical therapist must meet the following requirements:

1. Documented successful completion of a intramuscular manual therapy course of study; online study is not considered appropriate training.
   a. A minimum of 50 hours of face-to-face IMS/dry needling course study; online study is not considered appropriate training.
   b. Three years of practice as a licensed physical therapist prior to using the intramuscular manual therapy technique.

2. The physical therapist must have Board approved credentials for providing intramuscular manipulation which are on file with the Board office prior to using the treatment technique.

E. The provider of the required educational course does not need to be a physical therapist. A intramuscular manual therapy course of study must meet the educational and clinical prerequisites as defined in this rule, D(1)(a)&(b) and demonstrate a minimum of two years of intramuscular manual therapy practice techniques.

F. A physical therapist performing intramuscular manual therapy in his/her practice must have written informed consent for each patient where this technique is used. The patient must sign and receive a copy of the informed consent form. The consent form must, at a minimum, clearly state the following information:

1. Risks and benefits of intramuscular manual therapy.
2. Physical therapist’s level of education and training in intramuscular manual therapy.

3. The physical therapist will not stimulate any distal or auricular points during intramuscular manual therapy.

G. When intramuscular manual therapy is performed, this must be clearly documented in the procedure notes and must indicate how the patient tolerated the technique as well as the outcome after the procedure.

H. Intramuscular manual therapy shall not be delegated and must be directly performed by a qualified, licensed physical therapist.

I. Intramuscular manual therapy must be performed in a manner consistent with generally accepted standards of practice, including but not limited to, aseptic techniques and standards of the center for communicable diseases.

J. Failure to provide written documentation of appropriate educational credentials is a violation of this rule, and is prima facie evidence that the physical therapist is not competent and not permitted to perform intramuscular manual therapy.

K. This rule is intended to regulate and clarify the scope of practice for the physical therapist.