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BOARD OF PHYSICAL THERAPY

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**ADVISORY COMMITTEE ON DRY NEEDLING
MEETING MINUTES
February 6, 2018**

Item 1 - Call to Order/Roll call: The meeting was called to order at 1:02 pm, by Chairperson Smith.

Advisory Committee Members in attendance: Sherise Smith, Chairperson, Nevada Physical Therapy Board; Dr. Maggie Tracey, President, Nevada Oriental Medicine Board; Katania Taylor, Doctor of Oriental Medicine in Reno; Tina Baum, Nevada Physical Therapy Board Member; Jenelle Lauchman, DPT, Committee Member; Sharon Roth, Doctor of Oriental Medicine in Las Vegas

Advisory Committee Members via telephone: Mary Anne-Brown, Registered Nurse, Nevada Board of Nursing

Staff in attendance: Charles Harvey, Executive Director, Nevada Physical Therapy Board; Merle Lok, Executive Director, Oriental Medicine Board; Sarah Bradley, Senior Deputy Attorney General, Attorney for the Nevada Physical Therapy Board; Asheesh Bhalla, Deputy Attorney General, Attorney for the Oriental Medicine Board.

Item 2 - Public Comments: None

Item 3 - Advisory Committee Introductions (For Discussion)

Item 4 - Review and Discussion of Advisory Committee Purpose (For Discussion)

Chairperson Smith presented the Advisory Committee Purpose statement as follows: The Committee’s purpose is to further identify regulations to ensure dry needling is performed competently, safely and within a physical therapist’s scope of practice.

Discussion on the purpose of the Advisory Committee, timeline to create regulations, meeting dates, Oriental Medicine Board position, differentiation between acupuncture and dry needling, training, knowledge and skills necessary to perform dry needling.

AG Bradley answered questions regarding the Physical Therapy Board's current review of NAC and timelines regarding the submission. AG Bradley stated that the Physical Therapy Board had been working on updating their regulations and had until June 30, 2018 to submit changes to LCB for a permanent regulation. Her hope was that the Advisory Committee could work together to draft regulations that the PT Board could submit to the LCB. The draft would contain the requirements for competence and safe practice of dry needling by physical therapists.

Chairperson Smith noted that Advisory Committee on Dry Needling meetings had been scheduled for the first Tuesday of the next three months. She polled the members to see if there were any scheduling conflicts. After discussion the following meeting dates were selected: March 20, 2018, 1:00 pm; April 10, 2018, 1:00 pm; May 8, 2018, 1:00 pm.

Members representing the OMB expressed concern about whether dry needling was actually in the physical therapy scope of practice, sighting the following concerns: 1) Whether the definition of dry needling was different than acupuncture; 2) Existing NRS that regulates acupuncture; 3) Invasive nature of dry needling; 3) Previous Board decisions involving dry needling, including a 2008 decision that dry needling was not in the scope of practice, followed by a 2012 reversal that it was in the scope of practice.

Members representing the Physical Therapy Board commented on the following: 1) Education level of PT's; 2) Invasive techniques performed by PT's such as wound debridement; 3) HumRRO study which concluded that "86% of the knowledge requirements needed to be competent in dry needling is acquired during the course of PT entry-level education, including knowledge related to evaluation, assessment, diagnosis and plan of care development, documentation, safety, and professional responsibilities."

The Deputy Attorney Generals representing both boards reviewed the overall intent and purpose of the formation of this committee. AG Bhalla questioned why it was necessary to distinguish that acupuncture and dry needling were different, when the issue is whether or not there are sufficient standards, education and oversight in place by the Board in order to protect the public. The questions is what standards, education and experience does a physical therapist need to perform dry needling safely, and whether there are reasonable standards that we can all agree on. AG Bhalla stated that the language was intended to move the discussion forward and establish common ground. AG Bradley added that we are trying to set out a standard. We need to establish clear regulations and guidelines so we can determine if someone is competent, and whether they are practicing safely. AG Bradley stated that if we come up with standards that we can all live with, that ensure that it is performed competently and safely, we will have something that helps protect the citizens of Nevada. So we wanted to include representatives from the Oriental Medicine Board.

Item 5 - Identify and discuss topics to expand on related to competence and safety (For Discussion and Possible Action)

- A. Consent form
- B. Required training to demonstrate competence and safety

C. Other topics

Discussion on the above topics. Chairperson Smith handed out assignments for the March 2018 meeting, as follows:

- Consent Form – Jenelle Lauchman, Dr. Taylor, Dr. Roth
- Required Training – Each member provide documentation on competency and safety
- Dissemination of HumRRO Dry Needling Report and Arizona Requirement – Director Harvey
- Members will send input to Director Harvey by March 10, 2018, for review and dissemination.

Item 6 - Public Comment - None

Item 7 - Adjournment – Meeting adjourned by Chairperson Smith at 2:35 p.m.