AN ACT Relating to allowing physical therapists to perform dry needling; reenacting and amending RCW 18.74.010; and adding a new section to chapter 18.74 RCW.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

Sec. 1. RCW 18.74.010 and 2014 c 116 s 3 are each reenacted and amended to read as follows:

The definitions in this section apply throughout this chapter unless the context clearly requires otherwise.

1. "Authorized health care practitioner" means and includes licensed physicians, osteopathic physicians, chiropractors, naturopaths, podiatric physicians and surgeons, dentists, and advanced registered nurse practitioners: PROVIDED, HOWEVER, That nothing herein shall be construed as altering the scope of practice of such practitioners as defined in their respective licensure laws.

2. "Board" means the board of physical therapy created by RCW 18.74.020.

3. "Close supervision" means that the supervisor has personally diagnosed the condition to be treated and has personally authorized the procedures to be performed. The supervisor is continuously on-site and physically present in the operatory while the procedures are performed.
performed and capable of responding immediately in the event of an
emergency.

(4) "Department" means the department of health.

(5) "Direct supervision" means the supervisor must (a) be
continuously on-site and present in the department or facility where
the person being supervised is performing services; (b) be
immediately available to assist the person being supervised in the
services being performed; and (c) maintain continued involvement in
appropriate aspects of each treatment session in which a component of
treatment is delegated to assistive personnel or is required to be
directly supervised under RCW 18.74.190.

(6) "Dry needling" means a skilled intervention that uses a thin
filiform needle to penetrate the skin and stimulate underlying
myofascial trigger points, muscular, and connective tissues for the
management of neuromusculoskeletal pain and movement impairments. Dry
needling does not include the stimulation or treatment of acupuncture
points and meridians. "Dry needling" is also known as intramuscular
manual therapy or trigger point manual therapy.

(7) "Indirect supervision" means the supervisor is not on the
premises, but has given either written or oral instructions for
treatment of the patient and the patient has been examined by the
physical therapist at such time as acceptable health care practice
requires and consistent with the particular delegated health care
task.

(8) "Physical therapist" means a person who meets all the
requirements of this chapter and is licensed in this state to
practice physical therapy.

(a) "Physical therapist assistant" means a person who
meets all the requirements of this chapter and is licensed as a
physical therapist assistant and who performs physical therapy
procedures and related tasks that have been selected and delegated
only by the supervising physical therapist. However, a physical
therapist may not delegate sharp debridement to a physical therapist
assistant.

(b) "Physical therapy aide" means a person who is involved in
direct physical therapy patient care who does not meet the definition
of a physical therapist or physical therapist assistant and receives
ongoing on-the-job training.

(c) "Other assistive personnel" means other trained or educated
health care personnel, not defined in (a) or (b) of this subsection,
who perform specific designated tasks related to physical therapy under the supervision of a physical therapist, including but not limited to licensed massage practitioners, athletic trainers, and exercise physiologists. At the direction of the supervising physical therapist, and if properly credentialed and not prohibited by any other law, other assistive personnel may be identified by the title specific to their training or education.

(9) "Physical therapy" means the care and services provided by or under the direction and supervision of a physical therapist licensed by the state. Except as provided in RCW 18.74.190, the use of Roentgen rays and radium for diagnostic and therapeutic purposes, the use of electricity for surgical purposes, including cauterization, and the use of spinal manipulation, or manipulative mobilization of the spine and its immediate articulations, are not included under the term "physical therapy" as used in this chapter.

(10) "Practice of physical therapy" is based on movement science and means:

(a) Examining, evaluating, and testing individuals with mechanical, physiological, and developmental impairments, functional limitations in movement, and disability or other health and movement-related conditions in order to determine a diagnosis, prognosis, plan of therapeutic intervention, and to assess and document the ongoing effects of intervention;

(b) Alleviating impairments and functional limitations in movement by designing, implementing, and modifying therapeutic interventions that include therapeutic exercise; functional training related to balance, posture, and movement to facilitate self-care and reintegration into home, community, or work; manual therapy including soft tissue and joint mobilization and manipulation; therapeutic massage; assistive, adaptive, protective, and devices related to postural control and mobility except as restricted by (c) of this subsection; airway clearance techniques; physical agents or modalities; mechanical and electrotherapeutic modalities; and patient-related instruction;

(c) Training for, and the evaluation of, the function of a patient wearing an orthosis or prosthesis as defined in RCW 18.200.010. Physical therapists may provide those direct-formed and prefabricated upper limb, knee, and ankle-foot orthoses, but not fracture orthoses except those for hand, wrist, ankle, and foot fractures, and assistive technology devices specified in RCW
18.200.010 as exemptions from the defined scope of licensed orthotic and prosthetic services. It is the intent of the legislature that the unregulated devices specified in RCW 18.200.010 are in the public domain to the extent that they may be provided in common with individuals or other health providers, whether unregulated or regulated under this title (18 RCW), without regard to any scope of practice;

(d) Performing wound care services that are limited to sharp debridement, debridement with other agents, dry dressings, wet dressings, topical agents including enzymes, hydrotherapy, electrical stimulation, ultrasound, and other similar treatments. Physical therapists may not delegate sharp debridement. A physical therapist may perform wound care services only by referral from or after consultation with an authorized health care practitioner;

(e) Reducing the risk of injury, impairment, functional limitation, and disability related to movement, including the promotion and maintenance of fitness, health, and quality of life in all age populations; and

(f) Engaging in administration, consultation, education, and research.

"Secretary" means the secretary of health.

"Sharp debridement" means the removal of devitalized tissue from a wound with scissors, scalpel, and tweezers without anesthesia. "Sharp debridement" does not mean surgical debridement. A physical therapist may perform sharp debridement, to include the use of a scalpel, only upon showing evidence of adequate education and training as established by rule. Until the rules are established, but no later than July 1, 2006, physical therapists licensed under this chapter who perform sharp debridement as of July 24, 2005, shall submit to the secretary an affidavit that includes evidence of adequate education and training in sharp debridement, including the use of a scalpel.

"Spinal manipulation" includes spinal manipulation, spinal manipulative therapy, high velocity thrust maneuvers, and grade five mobilization of the spine and its immediate articulations.

Words importing the masculine gender may be applied to females.

NEW SECTION. Sec. 2. A new section is added to chapter 18.74 RCW to read as follows:
A physical therapist may perform dry needling only after being issued a dry needling endorsement by the secretary. The secretary, upon approval by the board, shall issue an endorsement to a physical therapist who has shown evidence of adequate education and training that includes a minimum of fifty-four hours of dry needling education and training and at least one year of licensed practice. A physical therapist may not delegate dry needling.

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