

# **Inner Balance Physical Therapy**

## **Nervous System & Musculoskeletal Dry Needling Consent Form**

### **How does it work?**

Integrative dry needling is not acupuncture (traditional Chinese medicine), it is based on neuro-anatomy and modern scientific study of the musculoskeletal and neuromuscular systems. A very fine filament needle is inserted through the skin and into the deeper tissues that are considered trigger points to your pain. Dry needling works by causing a micro lesion within the pathological tissue thus breaking up shortened tissues, inhibiting a reflex arc from the nervous system to the tissue, normalizing the inflammatory response, and centrally mediating the pain. This mechanical and neuromuscular effect provides an environment that enhances the body's ability to heal which ultimately reduces pain.

### **What conditions can be treated?**

Conditions include, but are not limited to neck, back and shoulder pain, arm pain (tennis elbow, carpal tunnel, golfer's elbow), headache to include migraines and tension- type headaches, jaw pain, buttock pain and leg pain (sciatica, hamstrings strains, calf tightness/spasms), and nervous system regulation.

### **Are the needles sterile?**

Yes, we only use sterile disposable needles.

### **Is the procedure painful?**

The fine filament needle is very thin, solid, and flexible, which allows for the needle to be pushed through the skin versus cutting the skin. This helps reduce any discomfort that may occur with the procedure. We strive to make the treatment virtually painless however at times a local twitch response of the muscle may be felt. When the needle is inserted into the pathological tissue the local twitch response sensation is normal and is felt only momentarily. Many patients describe this twitch response as a little electric shock, cramp or an ache sensation. These sensations are perfectly normal and even a desirable response. Your PT will make every effort to make your experience comfortable and therapeutic.

### **How will I feel after the Dry Needling treatment?**

This will vary but many patients experience immediate relief of their symptoms and an increase in range of motion. Soreness can also be a common response from the needling but does not occur with all people. Some individuals may experience an immediate achiness or a delayed soreness the next day. The soreness, if present, will usually last 1-2 days, use of heat and light massage and movement will be beneficial. Mild bruising may occur at the needling sites and is more prevalent in certain parts of the body. Application of ice on the bruise will help with the soreness and the skin discoloration will last several days but is not harmful.

It is uncommon but possible that the treatment may temporarily increase your symptoms. This is not unusual but if this continues past the 1-2 day window, inform your PT to allow adjustment of your program to enhance your comfort the next time. This does not mean that needling will not be beneficial to your condition.

### **How many treatments will I need?**

It typically takes several sessions to have a positive effect from dry needling. The more chronic the pain, the longer it will take to feel the results so the sooner you come in, the faster it will work. Everyone heals at a different rate so it is difficult to say. However, if we see no positive effects from the dry needling by the fourth session, the treatment will be discontinued.

### **Is Dry Needling treatment covered by my insurance?**

No, dry needling is not covered by insurance despite the benefits. By signing this consent, you understand it is not a covered service. Payment is due at time of service.

### **What should I do to prepare for the treatment?**

Do not eat 30 minutes before the treatment, be well hydrated, empty your bladder prior to treatment if need be, and wear loose fitting clothing, shorts, or bathing suit for easy access to your painful areas.

Dry Needling (DN) involves inserting a thin/flexible monofilament needle into symptomatic tissue to reduce pain and improve function. Benefits from DN can be experienced immediately or over a few days to weeks. DN is not Traditional Chinese Acupuncture. DN is based on anatomy, neurology, and physiology. DN has some risks that can occur with the treatment. In the hands of a skilled professional, these risks are small, but you should still be aware of the potential adverse events. The most likely adverse events are listed below by their level of severity (“Serious”, “Significant”, and “Mild”) and how often it may occur (“Common” <10%, “Uncommon” <1%, and “Rare” < 0.1%).

**Some symptoms may occur with dry needling like:**

- Pneumothorax, fainting, skin irritation (rare, less than 0.1%)
- Hematoma (bleeding under skin), temporary nerve symptoms (numbness, tingling, weakness, or sensation changes, drowsiness, soreness (uncommon, less than 1%)
- Bleeding (drop of blood), brushing, sweating, dizziness, fatigue, temporary symptom increase, needle discomfort during/after (common, less than 10%)

**There are other conditions that require consideration so please answer the following questions:**

- Are you taking blood thinners? Yes / No
- Have you ever fainted or had seizures? Yes / No
- Are you pregnant or actively trying to become pregnant? Yes / No
- Are you currently taking any antibiotics? Yes / No
- Are you receiving any treatments or have a medical condition effecting your immune system? Yes / No
- Do you have any known disease or infection (ex. HIV, HEP B/C, etc) that can be transmitted through bodily fluids? Yes / No
- Are you diabetic or suffer from impaired wound healing? Yes / No
- Do you have breast implants? Yes / No
- Have you experienced an allergic skin reaction to metals like chromium or nickel (needles)? Yes / No
- Do you have any medical devices or implants anywhere in your body (ex. Pacemaker)? Yes / No
- Do you have a damaged heart valve or a metal prosthesis? Yes / No

**Patient's Consent:**

I have read and fully understand this consent form and attest that no guarantees have been made on the success of this procedure related to my condition. I am aware that multiple treatment sessions may be required, thus this consent will cover this treatment as well as subsequent treatments by this facility. All of my questions, related to the procedure and possible risks, were answered to my satisfaction. My signature below represents my consent to receive dry needling and my consent to any measures necessary to correct complications, which may result. I am aware I can withdraw my consent at any time.

I, \_\_\_\_\_, read and understand the risks, all of my questions have been answered, and I am willing to be treated with dry needling.

\_\_\_\_\_  
Patient or Authorized Representative Signature

\_\_\_\_\_  
Date