

ABOVE & BEYOND

— Physical Therapy, Dry Needling & Pilates —

DRY NEEDLING CONSENT & INFORMATION FORM

What is Dry Needling?

Dry needling is a form of therapy in which fine, filiform needles are inserted into myofascial trigger points (painful knots in muscles) and connective tissues in order to stimulate a pain-inhibiting response in painful neuro-musculoskeletal conditions. It has been shown to reduce pain related to trigger points and other neuromusculoskeletal sources. Dry needling is a modern, evidence-based intervention and is not acupuncture or Oriental Medicine. Only sterile, single-use, disposable needles are used for this procedure. Dry needling is a valuable treatment for neuromusculoskeletal pain and for improving muscle performance.

Is Dry Needling Safe?

Overall, dry needling is considered to be very safe. As with any treatment, there are possible risks associated with dry needling. It is important that you understand the possible risks prior to giving consent to treatment. Mild side effects associated with dry needling have been reported in approximately 20% of treatments, with bleeding, bruising, and temporary pain being the most common.¹ Other mild side effects include aggravation of symptoms, drowsiness, feeling faint, headache, and nausea, which have each been reported in less than 1% of dry needling treatments.¹

Significant side effects associated with dry needling are rare, estimated to occur in less than .04% of treatments, and could include fainting, vomiting, prolonged aggravation of symptoms or pneumothorax (lung puncture).¹

- Symptoms of pneumothorax may occur after the treatment session; sometimes taking several hours to develop.
- Symptoms of pneumothorax include shortness of breath, increased breathing rate, chest pain, dry cough, excessive sweating, and bluish coloration of the skin.
- **In the event such symptoms occur, you are advised to seek immediate medical attention.**

Please notify your provider if you experience any of the above side effects or symptoms.

Please respond to the following medical questions:

Do you have any known disease or infection that can be transmitted through bodily fluids?	NO	YES
Are you currently taking anticoagulants (blood thinners e.g. Warfarin, Coumadin)?	NO	YES
Are you diabetic or suffer from impaired wound healing?	NO	YES
Have you ever had joint replacement surgery?	NO	YES

(If you answer yes to any of these questions, please discuss with your therapist)

STATEMENT OF CONSENT

I confirm that I have read and understand the above information, have had an opportunity to ask questions, understand the risks involved, and I consent to have dry needling treatments. I understand that I can refuse treatment at any time.

Signature: _____ Date: _____

Printed Name: _____

¹ Brady S, McEvoy J, Dommerholt J, Doody C. Adverse events following trigger point dry needling: a prospective survey of chartered physiotherapists. J Man Manip Ther. 2014; 22(3):134-140.