

William Needum
1604 Pentwood Road, Baltimore, Maryland, 21239
williamneedum@gmail.com
Position: SUPPORT

Dear Chair, Vice-Chair, and Members of the committee:

I am writing in Support of **SB 232/HB 172 - LICENSED ATHLETIC TRAINERS - DRY NEEDLING APPROVAL**

The Athletic Training profession incorporates immediate emergency response, injury prevention, diagnosis and intervention of emergency, acute and chronic medical conditions including impairment, functional limitations, and disabilities.

Athletic Trainers are licensed and board certified healthcare professionals with, at minimum, a bachelor's degree in athletic training from an accredited institution. Most members of the athletic training profession, about 70% to be exact, have a master degree or higher level of education. The athletic training profession has progressively moved their requirements to a master's level degree for entry, which incorporates students with more background in science and broadens the scope of practice and knowledge in the healthcare field.

Dry needling is a therapeutic modality used when hands and fingers of a clinician are unable to palpate all of a soft tissue, including deeper layers of muscles

Maryland COMAR 10.38.12.02 defines Dry Needling as an intramuscular manual therapy that involves the insertion of one or more solid needles, a mechanical device, into the muscle and related tissues to affect change in muscle and related tissues; Deactivation of the trigger points and related tissue can bring immediate relief of symptoms, which cannot be obtained by any other treatment.

Maryland COMAR already has language differentiating between Acupuncture and Dry Needling.

Qualified athletic trainers in 12 states are allowed to dry needle through regulation or the Athletic Training practice act. Qualified athletic trainers in 16 states and the District of Columbia consider dry needling a method of treatment available to Athletic Trainers without specific statutory authority. The adept skill of dry needling is commonly used with other medical professionals such as physical therapists, physicians, and chiropractors. With appropriate training, athletic trainers are very well prepared to administer dry needling treatments.

In the state of Maryland, athletic trainers are currently unable to perform dry needling due to the Maryland State Practice Act. Consequently, certified athletic trainers are prevented from providing the best and up to date standard of care for their current patients. Not only is it affecting certified athletic trainers, it is affecting the athletic training students and their education. Since athletic trainers in Maryland cannot dry needle, there are institutions that are not educating their students on how to dry needle their patients. That puts athletic training students in Maryland at a disadvantage of dry needling competencies compared to other students in states where dry needling is allowed for athletic trainers.

Furthermore, In a state, such as Maryland, where dry needling is not in the state act, has a potential international impact and could limit local Athletic Trainers from being selected as Health Care Providers supporting patients in international or olympic events.

For these reasons, I respectfully request a favorable vote on both HB 172 and SB 232

Sincerely,

William Needum