

Intramuscular Needling

Patient Information Sheet

What is intramuscular needling?

Intramuscular needling, also known as *intramuscular stimulation (IMS)*, or *dry needling*, is a treatment where a thin, sterile needle is inserted into the skin to stimulate trigger points, muscles, and connective tissues. This can help us evaluate and manage pain and movement issues related to muscles and nerves. Intramuscular needling requires an examination and diagnosis.

How is intramuscular needling different from acupuncture?

Intramuscular needling and acupuncture both involve needles, but they are very different. Acupuncture and Eastern medicine are healthcare methods used to diagnose and treat health problems. This includes a variety of traditional and modern acupuncture and Eastern medicine therapeutic treatments, such as the practice of acupuncture techniques and herbal medicine. These treatments aim to promote wellness, manage pain, and treat substance use disorders.

Intramuscular needling targets specific muscle trigger points, causing muscles to twitch. This treatment eases pain, reduces tightness, and improves mobility. IMS focuses only on treating specific areas of the body being targeted and does not involve stimulating areas outside from the site of pain. Needles are not left in the body without electrical stimulation during this procedure.

What are the benefits of intramuscular needling?

When combined with other physical therapy treatments, intramuscular needling can improve circulation, relax muscles, increase motion, decrease pain, and improve nerve function.

What are the risks of intramuscular needling?

There are some common side effects that should be resolved within a few days. These include:

- Soreness
- Fatigue
- Bruising
- Dizziness or faintness
- Nausea
- Headaches
- Pain during treatment
- Risk of bleeding

More serious risks include infection, an allergic response, or a *pneumothorax*, which is when the needle penetrates the lung area.

Call your doctor **immediately** if you experience shortness of breath, sudden and sharp chest pain, or dry and hacking cough. These could be signs of pneumothorax. If your doctor is not available, **go to urgent care or call 911**.

What does my physical therapist need to know?

Before your treatment, tell your physical therapist if you have any of the conditions listed below.

- If you have a fear of needles or have fainted around needles in the past
- If you are on blood thinners or have difficulty with blood clotting
- If there is a chance you are pregnant
- If you are immunocompromised, or if you have an autoimmune disease, or an active infection
- If you have a disease or infection that can be transmitted through bodily fluids
- If you have had surgery within the last 4 months
- If you are a cancer survivor or are currently being treated for cancer
- If you have breast implants
- If you use an implanted stimulator, such as a spinal stimulator

Are there alternatives to intramuscular needling?

Yes, there are many effective alternative treatment strategies you can try. Physical therapy treatment options include exercise, stretching, manual therapy, and functional training. If your physical therapist recommends intramuscular needling, you can decide if you want to include it as part of your treatment.

If you no longer want to have intramuscular needling, you can notify your care team at any time.

Is intramuscular needling covered by insurance?

Your insurance may not cover intramuscular needling codes. It is your responsibility to understand your insurance coverage. Please contact your insurance company if you have questions about your coverage. The codes for this treatment are listed below:

- 20560 — Needle insertion(s) without injection(s); 1 or 2 muscle(s)
- 20561 — Needle insertion(s) without injection(s); 3 or more muscle(s)
- 97032 – Application of a modality to one or more areas; electrical stimulation (manual), each 15 minutes

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Attachment: UW Medicine Non-surgical consent form [U2224 \(uwmedicine.org\)](https://uwmedicine.org)