



**Progress Rehabilitation Network, LLC**  
**Db a Elite Sports Medicine and Physical Therapy**  
**Intramuscular Manual Therapy (IMT)**  
**Trigger Point Dry Needling (TDN)**  
**Consent Form**

IMT/TDN involves placing a small needle into the muscle at the trigger point which is typically the area which the muscle is tight and may be tender with the intent of causing the muscle to contract then release, improving the flexibility of the muscle therefore decreasing symptoms. The performing therapist will not stimulate any distal or auricular point during the needling treatment.

Dry needling is a focal technique used in physical therapy practice to treat trigger points in muscles. You should understand that this dry needling technique should not be confused with a complete acupuncture treatment performed by a licensed acupuncturist.

IMT/TDN is a valuable treatment for musculoskeletal related pain such as soft tissue and joint pain, as well as increased muscle performance. Like any treatment there are possible complications. While these complications are rare in occurrence, it is recommended you read through the possible risks prior to giving consent.

**Risks of the procedure:**

Though unlikely, there are risks associated with this treatment. The most serious risk associated with IMT/TDN is accidental puncture of a lung (pneumothorax). If this were to occur, it may require a chest x-ray and no further treatment as it can be resolved on its own. The symptoms of pain and shortness of breath may last for several days to two weeks. A more severe lung puncture can require hospitalization and re-inflation of the lung. This is a rare complication and in skilled hands should not be a concern. If you feel any related symptoms, immediately contact your IMT/TDN provider. If a pneumothorax is suspected you should seek medical attention from your physician or if necessary go to the emergency room.

Other risks may include bruising, infection, and nerve injury. Please notify your provider if you have any conditions that can be transferred by blood, require anticoagulants or any other conditions that may have an adverse effect to needle punctures. Bruising is a common occurrence and should not be a concern unless you are taking blood thinners. As the needles are very small and do not have a cutting edge, the likelihood of any significant tissue trauma for IMT/TDN is unlikely.

Please consult with you practitioner if you have any questions regarding the treatment above.

Do you have any known disease or infections that can be transmitted through bodily fluids?

**YES NO**

**If yes, please discuss with your practitioner**

**Please print your name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

TPDN is not covered by insurance, therefore there is an out of pocket fee. The out of pocket fees for TPDN are listed below.

- TPDN for less than one unit (i.e. less than 7 minutes) is \$25
- TPDN for one unit (i.e.8-22 minutes) is \$50
- TPDN for two units (i.e. 23-37 minutes) is \$100

Payment for other Covered procedures also performed during a visit is required. There are two payment options to ensure all procedures performed during a visit are paid.

Please initial the billing option that you choose.

1. Pay the appropriate amount listed above for TPDN at the time of service, and have the remaining covered procedures billed to your insurance. This means that you are also responsible for whatever your insurance requires based on your benefits package (i.e. copay vs. deductible).

I select Option #1: \_\_\_\_\_ Date: \_\_\_\_\_  
Patient's or Representative's Initials

2. Pay only for TPDN at the time of service. No other procedures will be billed to your insurance. Since nothing else is billed to your insurance, the visit or payment for TPDN does not count towards visit limitations, your deductible, or your out of pocket maximum.

I select Option #2: \_\_\_\_\_ Date: \_\_\_\_\_  
Patient's or Representative's Initials