

By the Committee on Health Policy; and Senator Calatayud

588-02423-26

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A bill to be entitled  
An act relating to dry needling; amending s. 468.203,  
F.S.; defining the terms "dry needling" and  
"myofascial trigger point"; creating s. 468.222, F.S.;  
requiring the Board of Occupational Therapy to  
establish minimum standards of practice for the  
performance of dry needling by occupational  
therapists, including specified standards; requiring  
the board, if it deems it necessary for patient  
safety, to adopt additional supervision and training  
requirements for occupational therapists to perform  
dry needling on specified areas; requiring the  
Department of Health to submit a report of specified  
information to the Legislature by a specified date;  
providing construction; providing an effective date.

Be It Enacted by the Legislature of the State of Florida:

Section 1. Present subsections (3) through (8) of section  
468.203, Florida Statutes, are redesignated as subsections (5)  
through (10), respectively, and new subsections (3) and (4) are  
added to that section, to read:

468.203 Definitions.—As used in this act, the term:

(3) "Dry needling" means a skilled intervention, based on  
Western medicine, that uses filiform needles and other apparatus  
or equipment to stimulate a myofascial trigger point for the  
evaluation and management of neuromusculoskeletal conditions,  
pain, movement impairments, and disabilities.

(4) "Myofascial trigger point" means an irritable section

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of soft tissue often associated with palpable nodules in taut bands of muscle fibers.

Section 2. Section 468.222, Florida Statutes, is created to read:

468.222 Dry needling.—

(1) The board shall establish minimum standards of practice for the performance of dry needling by occupational therapists, including, at a minimum, all of the following:

(a) Completion of 2 years of licensed practice as an occupational therapist.

(b) Completion of 50 hours of face-to-face continuing education from an entity approved by the board on the topic of dry needling. To satisfy this requirement, the instructor of the continuing education must make a determination that the occupational therapist demonstrates the requisite psychomotor skills to safely perform dry needling. The continuing education must include instruction in all of the following areas:

1. Theory of dry needling.

2. Selection and safe handling of needles and other apparatus or equipment used in dry needling, including instruction on the proper handling of biohazardous waste.

3. Indications and contraindications for dry needling.

4. Psychomotor skills needed to safely perform dry needling.

5. Postintervention care, including care for adverse responses, adverse incident recordkeeping, and any reporting obligations.

(c)1. Completion of at least 25 patient sessions of dry needling performed under the supervision of an occupational

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59 therapist, a physical therapist, or a chiropractic physician who  
60 holds an active license to practice in any state or the District  
61 of Columbia and has actively performed dry needling for at least  
62 1 year. The supervising practitioner must document that the  
63 occupational therapist under his or her supervision has met the  
64 supervision and competency requirements specified by board rule  
65 and does not need additional supervised sessions to safely  
66 perform dry needling; or

67 2. Completion of 25 patient sessions of dry needling  
68 performed as an occupational therapist, physical therapist, or  
69 chiropractic physician licensed in another state or in the  
70 United States Armed Forces.

71 (d) A requirement that dry needling be performed only if  
72 the patient consents to the treatment and it is part of the  
73 patient's documented plan of care.

74 (e) A requirement prohibiting the delegation of dry  
75 needling to any person other than an occupational therapist who  
76 is authorized to perform dry needling under this part.

77 (2) The board shall establish additional supervision and  
78 training requirements that an occupational therapist must meet  
79 before performing dry needling on the head, neck, or torso if  
80 the board deems such requirements necessary for patient safety.

81 (3) The Department of Health shall, within existing  
82 resources, submit a report to the President of the Senate and  
83 the Speaker of the House of Representatives on or before  
84 December 31, 2028, detailing the total number of occupational  
85 therapists licensed in this state, the number of occupational  
86 therapists who perform dry needling in this state, any increases  
87 or decreases in the number of occupational therapists in this

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88 state by geographic area, and the number of any adverse  
89 incidents, as defined by board rule, involving the performance  
90 of dry needling by occupational therapists in this state.

91 (4) The performance of dry needling in the practice of  
92 occupational therapy may not be construed to limit the scope of  
93 practice of other licensed health care practitioners not  
94 governed by this chapter.

95 Section 3. This act shall take effect July 1, 2026.