



**CPTBC**

College of Physical Therapists  
of British Columbia

#900 – 200 Granville Street, Vancouver, BC V6C 1S4 • Tel : 604.742.6556 • Fax : 604.357.1862  
Email : [dryneedling@cptbc.org](mailto:dryneedling@cptbc.org) • Website : [cptbc.org](http://cptbc.org)

## APPLICATION TO PERFORM DRY NEEDLING

Applicant's name: \_\_\_\_\_

Registration number: \_\_\_\_\_

Are you currently a full registrant of CPTBC?     YES     NO

Have you practiced for at least 2 years?     YES     NO

Does your registrant profile show that you have reported a minimum of 3900 practice hours?

YES     NO

If you answered "NO" to the question above, how many practice hours have you accrued since last June 1?

\_\_\_\_\_

Which dry needling program did you successfully complete? *(Please attach your certificate)*

- Acupuncture Canada Dry Needling Program Certificate (Certification in Dry Needling- Dry Needling Level 1 and Level 2)
- Acupuncture Canada Certification, Level 1
- Acupuncture the Art and the Science (Manitoba): A Comprehensive Introduction to Acupuncture: the Art and the Science
- \*Evidence in Motion Functional Dry Needling Weekend Intensives- Functional Dry Needling Level 1, Dry Needling: Clinical Integration, Functional Dry Needling Level 2 (3-day version of each course)
- Foundations Health Education Modern Dry Needling ANIMS (formerly AN-IMS 1)
- McMaster University Contemporary Medical Acupuncture
- \*On Point Physiotherapy - On Point Needling - Comprehensive Dry Needling
- OPPQ Puncture Physiothérapique avec Aiguilles Sèches : Cours de Base
- SMART Seminars Certification in Biomedical Dry Needling
- UBC Gunn IMS (Certification) Course
- Uplands Physiptherapy Clinic- Dry Needling Canada Courses Level 1 and 2

\* Course certificates dated on or after August 01, 2023 will be accepted. Courses taken before this date will not be accepted.

### Declaration and Acknowledgement Statements:

- I declare I have read, understand, agree to comply, and demonstrate compliance as required, with the Standards of Practice (e.g. Infection Control, Consent) of the College in the context of dry needling. Failure to do so may result in the loss of the ability to perform dry needling.



**CPTBC**

College of Physical Therapists  
of British Columbia

#900 – 200 Granville Street, Vancouver, BC V6C 1S4 • Tel : 604.742.6556 • Fax : 604.357.1862

Email : [dryneedling@cptbc.org](mailto:dryneedling@cptbc.org) • Website : [cptbc.org](http://cptbc.org)

- I declare I am competent to practice dry needling as part of my physical therapy practice.
- I understand that I may need to fulfill continuing competency requirements in order to continue to perform dry needling.
- I have a documented plan in place for adverse events.
- I certify and declare that the information provided in this application is true.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_