

Dry Needling During the COVID-19 Pandemic

Additional Recommendations Relevant to Patient Care - Specific to Gunn IMS

This checklist is intended to accompany content found on our website at <https://www.gunnims.com/home/covid-19-and-dry-needling>

Please note: this information is intended to be considered in addition to health authority advisories regarding the provision of direct care to patients in the community. Before reviewing the dry needling specific recommendations below, ensure all relevant health authority advisories are met regarding provision of direct patient care during the current stage of COVID-19 pandemic - including use of personal protective equipment (PPE). The Canadian Physiotherapy Association has a page dedicated to providing updated references regarding clinic reopening guidelines. <https://physiotherapy.ca/provincial-clinic-reopening-guidelines-including-ppe-and-infection-control>

Treating with Gunn IMS typically involves:

1. The practitioner remaining in close proximity to patients for prolonged periods.
2. Piercing of the skin - often in multiple locations.
3. Stimulation of the autonomic nervous system - which can be very pronounced.

At this stage of the COVID-19 pandemic many unknowns remain regarding the nature of the SARS-CoV-2 virus. This situation prompts reinforcing aspects of existing health authority guidelines. We also recommend taking additional precautions for the provision of direct care in the community. Please find these considerations below.

□ Screen for additional Gunn IMS precautions specifically related to increased risk of serious COVID-19 illness:

This point relates to autonomic nervous system stimulation by Gunn IMS treatment and the interrelated nature of the autonomic nervous system and the immune system (please see accompanying video on our website).

- At-risk due to a compromised immune system from a medical condition or treatment (e.g. chemotherapy)
- Older adults, especially older men
- At-risk due to underlying medical conditions:
 - Heart disease, hypertension, diabetes, chronic respiratory disease, cancer
(Health Canada - <https://www.canada.ca/en/public-health/services/publications/diseases-conditions/vulnerable-populations-covid-19.html>)
 - Cancer, cardiac disease, diabetes, liver disease, neurological/neuromuscular disorder, renal disease, respiratory disease
(BC Data - May 4, 2020, https://news.gov.bc.ca/files/Covid-19_May4_PPP.pdf)

Please note: science regarding at-risk populations continues to emerge. As Gunn IMS practitioners, we must individually continue to monitor the emerging data regarding this aspect of the COVID-19 pandemic.

□ Disinfect plinth and all touch surfaces in accordance to local guidelines for SARS-CoV-2

- Ensure your cleaner is verified by Health Canada (or appropriate government body) to kill SARS-CoV-2
<https://www.canada.ca/en/health-canada/services/drugs-health-products/disinfectants/covid-19/list.html>
- Allow cleaner to sit for appropriate amount of time (eg: Cavicide is 3 minutes)
<https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2>

The following are dry needling-specific requirements. All additional requirements such as PPE and equipment protocols must also be met as per health authority guidelines:

□ Wash hands and forearms to above level of elbows

- Forearms are often used to stabilize the patient and may become contact surfaces

□ Don gloves, disinfect gloves with 70% alcohol-based hand sanitizer

□ Disinfect patient skin (needle insertion site) with 70% isopropyl alcohol

□ Strongly consider having masks available for both practitioner and patient

- Due to prolonged close proximity between the practitioner and Gunn IMS patient
- NB: May also be a provincial requirement for provision of direct care

See accompanying video and text for explanation at <https://www.gunnims.com/home/covid-19-and-dry-needling>

