

February 11, 2026

Dear South Dakota Board of Medical and Osteopathic Examiners:

I am an orthopedic surgeon here in Sioux Falls. I recently retired from surgical practice at Sanford Orthopedics and Sports Medicine.

Following my Residency in Orthopedics at the Mayo Clinic, I completed a Hand Fellowship in Los Angeles, CA. I have practiced in Sioux Falls since 1982. Since then, I have served as Clinical Professor and Section Head of Orthopedics at the Sanford School of Medicine. I have also been involved in the Center for Family Medicine Residency teaching program. I also have served as the site director here in Sioux Falls for the University of North Dakota Orthopedic Residency Program.

I am writing on behalf of the athletic trainers in their attempt to add Dry Needling to their approved scope of practice.

On June 13<sup>th</sup>, 2025, a hearing was held by the South Dakota Board of Medical and Osteopathic Examiners to hear a petition filed by the SD Athletic Trainers Association. At that time, the SD Chapter of the American Physical Therapy Association (SDAPTA) testified that the statutory definition of dry needling constitutes the practice of surgery. See the quotation below from that meeting.

6. The South Dakota Chapter of the American Physical Therapy Association (SDAPTA) filed written comments in response to the Petition. The SDAPTA argued that the statutory definition of dry needling constituted surgery which constitutes the practice of medicine. The SDAPTA also asserted that the plain language of SDCL § 36-29-1.1 does not expressly authorize dry needling, and that express authorization through statutory amendments was necessary to authorize athletic trainers to perform dry needling.

As an orthopedic surgeon, I am confused by the SDAPTA testimony that dry needling is the practice of medicine. Do physical therapists perform surgery in their practice? Do they practice medicine?

I have included several definitions including the SD Codified Law definition of surgery.

The South Dakota Codified Laws title 36-4-8.2 defines surgery as:

## 2025 South Dakota Codified Laws Title 36 - Professions and Occupations Chapter 04 - Physicians And Surgeons Section 36-4-8.2 - Surgery constituting practice of medicine.

**Universal Citation:** SD Codified L S 36-4-8.2 (2025) 

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36-4-8.2. Surgery constituting practice of medicine.

Surgery constituting the practice of medicine includes the use of a laser or ionizing radiation for the purpose of cutting or otherwise altering human tissue for diagnostic, palliative, or therapeutic purposes.

**Source:** SL 1995, ch 209, §1.

The Cambridge dictionary defines surgery as

## surgery

*noun*

US  /sɜːr.dʒəri/ UK  /ˈsɜː.dʒəri/

surgery *noun* (MEDICAL OPERATION)

[Add to word list](#) 

**B2** [U]

**the treatment of injuries or diseases in people or animals by cutting open the body and removing or repairing the damaged part:**

- **have/undergo surgery on** *The patient had/underwent surgery on his heart.*
- **surgery to** *He made a good recovery after surgery to remove a brain tumor.*

I started my orthopedic residency in 1977 (49 year ago). In my opinion, **dry needling is not surgery**. It is more akin to acupuncture: feel free to do a Google search and see who can do acupuncture in South Dakota.

In order to practice as a licensed athletic trainer in South Dakota, the athletic trainer needs to have a MS degree in Athletic Training (a 2-year program following a 4-year undergrad degree). If you look at the MS program for athletic trainers, it is similar to the PT program (except the PTs receive a **Doctorate** degree).

The South Dakota Medical Association discussed this topic at their Fall meeting. The policy statement states that dry needling should be “performed by practitioners with standard training and familiarity with routine use of needles in their practice, including licensed medical physicians, licensed acupuncturist, licensed physical therapists, and **licensed athletic trainers with appropriate certification or training**.”

Please see the attached Policy statement.

Based on my experience with our ATs, I would feel comfortable having a trained athletic trainer perform dry needling on myself or my family.

Feel free to contact me if you have questions.

Sincerely,

A handwritten signature in black ink that reads "Robert Van Demark, Jr". The signature is written in a cursive, slightly slanted style.

Robert E. Van Demark, Jr., M. D.

Cell 605-359-8820

Robert.VanDemarkjr@sanfordhealth.org

SOUTH DAKOTA STATE MEDICAL ASSOCIATION  
POLICY

Subject: Acupuncture and Dry Needling  
Document Number: PS-134-0  
Effective Date: June 10, 1975  
Revision Date(s): November 5, 2021; May 30, 2025; November 7, 2025

POLICY STATEMENT

The SDSMA recognizes acupuncture and dry needling as minimally invasive procedures and maintains they should only be performed by practitioners with standard training and familiarity with routine use of needles in their practice, including licensed medical physicians, licensed acupuncturists, licensed physical therapists, and licensed athletic trainers with appropriate certification or training.

The SDSMA believes patient safety and the quality of care are paramount and therefore, patients should be assured that individuals who perform these procedures meet the appropriate professional standards.

AUTHORITY

South Dakota State Medical Association Council of Physicians, 5/30/2025; Reaffirmed by South Dakota State Medical Association Board of Directors 5/30/2025.

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February 11, 2026

Re: South Dakota Dry Needling Practice  
Letter of Support  
South Dakota Board of Medical and Osteopathic Examiners

Dear SDBMOE Review Committee,

I am writing in regard to the petition hearing on March 12, 2026 by the SD Athletic Trainers Association. It has come to my attention that there are discussions and reviews at the SDBMOE regarding the scope of practice for dry needling treatments performed by Athletic Trainers Certified (ATC). I offer this letter of support to improve the care available to the patients in our state by ATCs.

My name is Nathan Skelley, and I am an orthopaedic surgeon and sports medicine specialist in Sioux Falls, South Dakota. I am also the head team physician for the University of South Dakota Athletics Department. I do not perform dry needling in my medical practice. However, I have become familiar with this treatment through the Athletic Trainers Certified at the University of South Dakota (USD). USD has a geographically diverse student-athlete population. We have many athletes from across the USA and internationally that attend the school in South Dakota. Several of these athletes have experienced dry needling treatments in the past and are requesting that treatment at the University.

We have a comprehensive ATC team at USD, however, state policies have made it challenging for our ATCs to offer this care. Some of the USD ATCs have been formally trained in the practice of dry needling. They have taken and completed the same dry needling courses as physical therapists that also perform this treatment. However, in South Dakota, we have been limited in our ability to offer this treatment to our student athletes. I have received several first-hand accounts from our athletes about their positive and beneficial experience with receiving dry needling treatments. As with any treatment, there are potential risks and potential benefits. We must continue to research and review outcomes data in this area to determine the ideal patient, ideal treatment scenario, and value provided for the treatment--similar to any other area of medicine. However, at this time, there is a need for this treatment in our care area, and we have the trained personnel to perform this therapy. Unfortunately, our USD ATCs have not been able to easily provide this service as part of the comprehensive medical treatment we offer to our flagship University athletes. I would respectfully request that you allow our ATC scope of practice to include this therapy to better serve our patients based on the ATC education and training.

Thank you very much for your time and consideration of this information. I am optimistic that we can continue to elevate and improve the comprehensive, compassionate, and cutting-edge medical treatments that we offer in the state of South Dakota. Please do not hesitate to contact me if I may be of any further assistance to you or your committee. My personal cell phone number is 607-351-4354.

*The thoughts and comments in this letter are my own opinions and viewpoints. This letter is not an official statement of any of the professional affiliations with which I am associated.*

Sincerely,



-Nathan Skelley, MD

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Associate Professor  
Sanford Health Orthopaedics & Sports Medicine  
The Sanford - University of South Dakota Medical Center  
Head Team Physician for University of South Dakota Athletics  
Medical Director of Orthopaedic Research and Innovation  
President of South Dakota State Orthopaedic Society 2026  
Email: Nathan.Skelley@SanfordHealth.org

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To: Board of Medical and Osteopathic Examiners  
From: Grant Rohrig, M.S.Ed, ATC  
Date: 2/4/2026

Dear Members of the Board of Medical and Osteopathic Examiners,

I am writing to express support for the inclusion of dry needling within the scope of practice for licensed Athletic Trainers in the state of South Dakota, only after following the successful completion of rigorous, in-person lab-based education. This education should include a practical exam in addition to a written exam. As healthcare professionals dedicated to the prevention, evaluation, and rehabilitation of musculoskeletal injuries, Athletic Trainers possess the foundational expertise and clinical experience necessary to safely integrate dry needling into their therapeutic intervention toolbox.

I have completed 43 hours of in-person lab-based education through the provider Structure and Function Education. I have successfully completed SFDN 1 (Foundations in Dry Needling for Orthopedic Rehab and Sport Performance) which is a 27-hour course. In this course I learned alongside Physical Therapist, Occupational Therapists, Athletic Trainers and Chiropractors. In addition, I completed SFDN-LPH (Comprehensive Approach to the Lumbo-Pelvic-Hip Complex) which is a 16-hour course. Again, I attended this course with fellow allied healthcare professionals including 5 Athletic Trainers, 3 Physical Therapists and 2 Chiropractors in a small course size to ensure education and safety standards are met.

I have practiced in the states of Wisconsin and Nebraska who both have dry needling included within the scope of practice for Athletic Trainers. In Wisconsin, dry needling is included in the Athletic Trainers scope of practice in the category of manual therapy if it is approved by the consulting physician and filed with the Wisconsin Athletic Trainers Affiliated Credentialing Board. In Nebraska, an Athletic Trainer can perform dry needling within their scope of practice by completing a Nebraska Department of Health and Human Services approved course (20 hour minimum) and is included in their protocol from their overseeing physician.

When utilizing dry needling in authorized states, each patient receiving dry needling as a treatment intervention goes through an intake form process. This includes repeat treatments on the same anatomical area. The intake form is completed by the practitioner and includes evaluation notes with anatomical landmarks outlining the justification for use of dry needling, needle length to be used, needle application angle and number of needles used. A waiver is signed by the patient outlining the risks and benefits of dry needling. In addition, the patient completes a new medical history to evaluate health status to identify contraindications.

With approved education that is lab-based, an Athletic Trainer holds the knowledge within anatomy, injury evaluation, prevention and rehabilitation to safely apply dry needling as a treatment intervention.

Thank you,  
Grant Rohrig, M.S.Ed, ATC



Dear Members of the Board of Medical and Osteopathic Examiners,

We, the undersigned student athletes, submit this letter in support of licensed athletic trainers being authorized to perform dry needling within their scope of practice.

Athletic trainers oversee injury prevention, evaluation, treatment, and rehabilitation, and they possess an in-depth understanding of the physical demands placed on our bodies through training and competition. Their proximity to our care allows for timely, informed, and individualized treatment decisions. Dry needling has proven to be an effective intervention for managing neuromuscular pain, reducing muscle tension, restoring mobility, and supporting safe return to activity. Permitting licensed athletic trainers to perform dry needling enhances continuity of care and access to treatment. Without this option, student-athletes may experience delays in care, increased financial burden, or disruption to academic and athletic responsibilities. These barriers are particularly impactful during competitive seasons when timely treatment is critical.

We recognize and support the importance of appropriate regulation to ensure patient safety. We believe that athletic trainers who meet training and competency standards are well qualified to perform dry needling safely and effectively. We urge the Licensing Board to consider the perspectives of the student-athletes directly affected by this decision, and to support the inclusion of dry needling within the scope of practice for athletic trainers.

Thank you for your consideration.



**DEPARTMENT OF ATHLETICS**

University of South Dakota • DakotaDome • 414 East Clark Street • Vermillion, SD 57069

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February 26, 2026

Dear South Dakota Board of Medical and Osteopathic Examiners:

I am submitting this letter prior to the hearing scheduled on March 12, 2026 regarding the South Dakota Athletic Trainers and offering my support in allowing properly educated and trained athletic trainers to perform dry needling as part of their South Dakota licensed scope of practice.

My name is Verle Valentine, and I am a sports medicine physician in Sioux Falls at Sanford Health. As part of my duties, I serve as a team physician for the South Dakota State University Athletics Program as well as the Sioux Falls Skyforce of the NBA G-League and the Sioux Falls Canaries which is a minor league baseball team. I also work with athletic trainers on a daily basis in my clinic setting and other settings through Sanford Health. I also serve on the sports medicine advisory committee for the SD High School Activities Association (SDHSAA) and the National Federation of State High School Associations (NFHS). I recently served the state of South Dakota for ten years as a commissioner and the chairman of the South Dakota Athletic Commission. Lastly, I serve as the official supervisor for numerous athletic trainers for their licensure through the SDBMOE.

Athletic trainers are essential members of the healthcare workforce who specialize in the prevention, evaluation, and intervention of emergent, acute, and chronic medical conditions that can impact sports, work, and everyday life. They provide advanced patient-centered care to individuals across their lifespan and in a wide range of practice settings. Those who utilize dry needling complete additional post-professional education and competency-based training specific to the technique.

Dry needling is an intervention used in the management of neuromuscular pain, movement dysfunction, and functional impairments. It is commonly incorporated into comprehensive treatment plans for physically active and working populations. When performed by qualified healthcare professionals, dry needling is a safe and effective modality that enhances patient care. Dry needling is not a surgical technique, and it is not considered the practice of medicine.

I fully support athletic trainers performing dry needling as it is within their scope of practice which happens under the direct supervision of a physician. Thus, I encourage the Board to recognize dry needling within the scope of practice for athletic trainers who meet established education, training, and competency requirements, and to adopt rules that allow for its appropriate use in clinical practice. Thank you for your consideration and commitment to protecting the public while supporting evidence-based, patient-centered healthcare.

Sincerely,



Verle Valentine, MD, FACSM, FAMSSM  
Sports Medicine Physician, Sanford Orthopedics & Sports Medicine  
Assistant Professor, Sanford School of Medicine, University of South Dakota  
Team Physician: South Dakota State University, Sioux Falls Skyforce, Sioux Falls Canaries  
Email: [verle.valentine@sanfordhealth.org](mailto:verle.valentine@sanfordhealth.org)  
Cell: 605-254-3443

**From:** [Mccloskey,Carrie](#)  
**To:** [SDBMOE](#)  
**Subject:** [EXT] Support letter for Athletic Trainers Declaratory for Dry Needling  
**Date:** Thursday, March 5, 2026 10:33:45 AM  
**Attachments:** [To whom it may concern.docx](#)

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Hello Please see the attached letter from Dr. Wilkinson, in regards to the Athletic Trainers Declaratory Ruling on Dry Needling. Dr. Wilkinson is a Podiatrist at Sanford Orthopedics and Sports Medicine. Please add this to the public record for the hearing on 3/12/26.

Thank you  
Carrie McCloskey, ATC

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Confidentiality Notice: This e-mail message, including any attachments, is for the sole use of the intended recipient(s) and may contain privileged and confidential information. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender by reply e-mail and destroy all copies of the original message.

To whom it may concern:

I am submitting this correspondence in support of allowing properly educated and trained athletic trainers to perform dry needling as part of their South Dakota licensed scope of practice.

Dry needling is an intervention used in the management of neuromuscular pain, movement dysfunction, and functional impairments. It is commonly incorporated into comprehensive treatment plans for physically active and working populations. When performed by qualified healthcare professionals, dry needling is a safe and effective modality that enhances patient care.

Athletic trainers are essential members of the healthcare workforce who specialize in the prevention, evaluation, and intervention of emergency, acute, and chronic medical conditions that can impact sports, work, and everyday life. They provide advanced patient-centered care to individuals across their lifespan and in a wide range of practice settings. Those who utilize dry needling complete additional post-professional education and competency-based training specific to the technique.

Authorizing athletic trainers to perform dry needling is consistent with contemporary healthcare delivery models that emphasize interprofessional collaboration, access to care, and practice to the top of one's education and training. Prohibiting or unduly restricting this modality does not improve public protection and may instead limit timely access to effective musculoskeletal care.

We respectfully encourage the Board to recognize dry needling as within the scope of practice for athletic trainers who meet established education, training, and competency requirements, and to adopt rules that allow its appropriate use in clinical practice. Thank you for your consideration and commitment to protecting the public while supporting evidence-based, patient-centered healthcare.

Joseph Wilkinson, DPM

A handwritten signature in black ink, appearing to read 'J. Wilkinson', written in a cursive style.



GO BIG. GO BLUE. GO JACKS.  
SOUTH DAKOTA STATE UNIVERSITY ATHLETICS

South Dakota State University  
Sports Medicine Department  
Stanley J Marshall HPER Ctr. 150, Box 2820  
Brookings, SD 57007  
2/19/26

SDBMOE  
101 N. Main Avenue, Suite 301  
Sioux Falls, SD 57104

To whom it may concern,

We, the undersigned student athletes, submit this letter in support of licensed athletic trainers being authorized to perform dry needling within their scope of practice.

Athletic trainers oversee injury prevention, evaluation, treatment, and rehabilitation, and they possess an in-depth understanding of the physical demands placed on our bodies through training and competition. Their proximity to our care allows for timely, informed, and individualized treatment decisions. Dry needling has proven to be an effective intervention for managing neuromuscular pain, reducing muscle tension, restoring mobility, and supporting safe return to activity. Permitting licensed athletic trainers to perform dry needling enhances continuity of care and access to treatment. Without this option, student-athletes may experience delays in care, increased financial burden, or disruption to academic and athletic responsibilities. These barriers are particularly impactful during competitive seasons when timely treatment is critical.

We recognize and support the importance of appropriate regulation to ensure patient safety. We believe that athletic trainers who meet training and competency standards are well qualified to perform dry needling safely and effectively. We urge the Licensing Board to consider the perspectives of the student-athletes directly affected by this decision, and to support the inclusion of dry needling within the scope of practice for athletic trainers.

Thank you for your consideration.

*Luke T Luskey*  
LUKE T LUSKEY

*Travis Finney*  
Travis Finney

*Luke Wroblewski*  
Luke Wroblewski  
*Ben Sigafoos*  
Ben Sigafoos

*Grace Herkes*  
Grace Herkes

*Coraline Rache*  
Coraline Rache  
*Isabelle Mott*  
Isabelle Mott  
*Brooke Borgers*  
Brooke Borgers  
*Becky Meyer*  
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We, Sioux Falls Yankees professional baseball organization, submit this letter in support of licensed Athletic Trainers being authorized to perform dry needling within their scope of practice.

Athletic trainers oversee injury prevention, evaluation, treatment, and rehabilitation. They possess an in-depth understanding of the physical demands placed on our bodies through training and competition. Their proximity to our care allows for timely, informed, and individualized treatment decisions. Dry needling has proven to be an effective intervention for managing neuromuscular pain, reducing muscle tension, restoring mobility, and supporting safe return to activity. Permitting licensed athletic trainers to perform dry needling enhances continuity of care and access to treatment. Without this option, Yankees athletes may experience delays in care, increased financial burden, or disruption to athletic/job responsibilities. These barriers are particularly impactful during competitive seasons when timely treatment is critical.

We recognize and support the importance of appropriate regulations to ensure patient safety. We believe that athletic trainers who meet training and competency standards are well qualified to perform dry needling safely and effectively. We urge the Licensing Board to consider the perspectives of the Sioux Falls Yankees professional baseball athletes directly affected by this decision, and to support the inclusion of dry needling within the scope of practice for Athletic Trainers.

Thank you for your consideration.

A handwritten signature in blue ink, appearing to read 'Duell Higgs', with a stylized, cursive script.

Duell Higgs - General Manager