

Submitter:

Lisa Mae Osborn

On Behalf Of:

Committee:

Senate Committee On Health Care

Measure, Appointment or Topic:

HB3824

As a licensed acupuncturist in Oregon for over 25 years, I vehemently oppose this bill and its vague, dangerous language, specifically the inclusion of “needle insertion” (Page 3, Line 37) in the physical therapy scope of practice. This is called dry needling, a practice that utilizes acupuncture needles to stimulate muscle, skin or nerve tissue. This is the very definition of acupuncture in Oregon law, and has very strict and specific training mechanisms attached for the safety of the public that the language and spirit of this bill ignore.

Under ORS 677.757(1)(a), “acupuncture” is explicitly defined as the stimulation of specific points on the body “by the insertion of needles”. The statute further affirms that acupuncture includes the use of electrical or mechanical devices with or without needles, which are also marketed under dry needling protocols.

In Oregon, acupuncture may only be practiced by those licensed by the Oregon Medical Board under ORS 677.759. Unauthorized practice of acupuncture—including any unlicensed needle insertion—is considered the unauthorized practice of medicine under ORS 677.765 and is subject to penalties.

This bill therefore directly conflicts with established state law by proposing to allow non-OMB-regulated practitioners (physical therapists) to perform a procedure that falls squarely within the legal definition of acupuncture.

ORS 677.780–785 is specifically about the high standards for education, licensure, and scope of practice for acupuncture in order to protect the public. There is no place for untrained physical therapists to co-opt the tools of acupuncture for their scope of practice without the same/equivalent rigorous training. It is unsafe for the public.

Licensed acupuncturists in Oregon must complete 2,500 to 3,500 hours of training, including 800–1,000 hours of supervised clinical education. This far exceeds the 20–100 hours of training typically offered in dry needling courses for physical therapists. This discrepancy has serious implications for patient safety. There are many health hazards that are avoided when trained providers use the tools that they are experts in, and many things go wrong when those standards are ignored.

For these reasons, the term “needle insertion” should be removed from HB 3824 without reservation. It is legally inconsistent with Oregon law, compromises patient safety and the safety of Oregonians, and bypasses established licensure and oversight standards put in place to protect the public.

Thank you for your consideration.

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