Chehalem Acupuncture
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RE: HB 3824

To: Senate Committee on Health Care

This testimony is submitted in opposition to HB 3824, specifically the inclusion of "needle insertion" (Page 3, Line 37) in the physical therapy scope of practice. The term refers to dry needling, a technique that uses acupuncture needles to penetrate the skin and stimulate muscle or nerve tissue—functionally equivalent to acupuncture, as defined in Oregon law.

The Oregon Association of Acupuncturists (OAA) has already fought mulitple legal battles about this specific issue in the past. Chiropractors and Physical Therapists in Oregon have been pushing to practice acupuncture without proper training and licensing for many years. It has already been decided by the legislature and the Oregon Medical Board that acupuncture is only allowed to be performed by licensed acupuncturists. Please take this into account when deciding on HB 3824 and stop wasting time with an issue that has already been decided on.

Legal and Regulatory Conflict

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**.

The **Acupuncture Advisory Committee** established in **ORS** 677.780–785 was specifically tasked with recommending standards for education, licensure, and scope of practice in order to protect the public. HB 3824 undermines this structure by bypassing OMB oversight entirely.

Education and Patient Safety

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.

Numerous studies highlight increased risks of adverse events when dry needling is performed by inadequately trained providers:

- 36.7% of dry needling treatments resulted in adverse events, with 20 major complications such as pneumothorax and nerve injury (Brady et al., *PM&R*, 2014).
- A Polish study reported 3% pneumothorax, 14% nerve palsy, and 1% hospitalization (Majchrzycki et al., MDPI, 2022).
- Multiple case reports confirm life-threatening events, including bilateral pneumothorax and prolonged nerve damage (Şahın et al., Journal Agent, 2020; Western Journal of Emergency Medicine, 2013).

For these reasons, the term "needle insertion" should be removed from HB 3824. It is legally inconsistent with Oregon law, compromises patient safety, and bypasses established licensure and oversight standards put in place to protect the public.

Citations:

- ORS 677.757–677.785: Licensing and regulation of acupuncture in Oregon
- Brady S, et al. Adverse events following trigger point dry needling: a prospective survey of 20,000 treatments. PM&R. 2014;6(9):847–852.
- Majchrzycki M, et al. Adverse Reactions to Dry Needling Therapy: Insights from Polish Practitioners. MDPI. 2022.
- Şahın N, et al. A Rare Complication Caused by Dry Needling: Bilateral Pneumothorax. JournalAgent. 2020.
- Boissonnault WG, et al. Traumatic Pneumothorax Following Acupuncture: A Case Series. Western Journal of Emergency Medicine. 2013.

Thank you for your time and consideration in this matter.

Sincerely,

Matthew Frey, L.Ac.