

Submitter: Stacey Guggino

On Behalf Of:

Committee: Senate Committee On Health Care

Measure, Appointment or Topic: HB3824

My name is Stacey Guggino and I am a dually licensed acupuncturist and naturopathic physician in Oregon. I've had the opportunity to observe & collaborate with a wide range of HCPs in my current role and, from this vantage point, I can offer a considered perspective on the evolving role of physical therapists (PTs) within the healthcare landscape. I urge you to support HB3824.

Regarding the ability of PTs to order diagnostic imaging, it strikes me as a logical progression in their scope of practice, particularly within the realm of orthopedic care. PTs are highly skilled in musculoskeletal assessment and their detailed understanding of biomechanics, movement dysfunction, and orthopedic conditions often leads them to a strong clinical suspicion regarding the need for imaging. Granting them the authority to order relevant imaging, such as X-rays or MRIs in specific orthopedic cases, could expedite the diagnostic process, reduce delays in treatment, and potentially lower overall healthcare costs by streamlining referrals. Their focused clinical lens can ensure that imaging is targeted and appropriate, avoiding unnecessary procedures.

Similarly, providing PTs with the autonomy to order necessary DME aligns with their commitment to patient safety & effective rehabilitation. When a therapist identifies a clear need for specific equipment – be it for safe transfers, gait training, or home exercise programs – the ability to directly order it would eliminate cumbersome intermediary steps. This direct access would empower them to create more efficient & tailored treatment plans, ensuring patients receive the tools they need promptly to progress safely & effectively.

The practice of dry needling (DN) by PTs, especially in the context of orthopedic work, is an area where their extensive knowledge of anatomy, physiology, and musculoskeletal dysfunction is directly applicable. DN, when performed by appropriately trained and licensed PTs, can be a valuable adjunct to their manual therapy skills. It targets myofascial trigger points and aims to reduce pain and improve function, directly supporting the orthopedic rehabilitation goals they are already addressing through exercise prescription and manual techniques. Their deep understanding of movement patterns and biomechanics allows them to integrate dry needling seamlessly into a comprehensive treatment approach.

Finally, the capacity for PTs to contribute to disability paperwork warrants serious consideration. Their hands-on, detailed assessment of a patient's mobility limitations and functional capabilities provides a unique and valuable perspective. While the

ultimate determination of disability often involves multiple factors, the insights of a PT, who spends significant time directly evaluating a patient's physical abilities in relation to daily activities, could offer crucial information. Their assessment of functional limitations is often more granular and activity-specific than what might be gleaned from less frequent medical evaluations. This direct knowledge could contribute to a more comprehensive and accurate understanding of a patient's disability status.

In conclusion, from my perspective as both an acupuncturist and naturopathic physician, expanding the scope of practice for PTs to include the ability to order diagnostic imaging in specific orthopedic cases, order DME, practice dry needling within their orthopedic specialization, and contribute to disability assessments reflects their advanced training, specialized knowledge, and the critical role they play in optimizing musculoskeletal health and functional independence. Such expansions have the potential to enhance patient care, improve efficiency, and ensure that Oregonians benefit fully from the expertise of these highly skilled practitioners. Please support HB3824. Thank you.

Stacey Guggino, ND, LAc, MSOM