

Submitter: Jill Layton
On Behalf Of:
Committee: Senate Committee On Health Care
Measure, Appointment or Topic: HB3824

I'd like to express my support of this house bill. As a rehab manager of a therapy department in a very rural location, the ability to dry needle would open significant access to care within our community. Working in rural healthcare creates many obstacles that need to be overcome, and having the limitation and inability to dry needle within Oregon has created a greater barrier to access for appropriate care. Many of our clients need dry needling, but are unable to access those services as our demographic does not support many individuals to drive to obtain that care. Oregon is also only 1 of 4 states that does not allow dry needling.

I have a physical therapist within my department who is certified to dry needle, but cannot utilize her skills in this region and must send people 1.5 hours away to obtain these services across the Idaho border instead. I have seen these patients benefit from this service line on multiple occasions, expressing that they feel much better following that treatment.

I have seen the benefits of dry needling both professionally and personally. I have been dry needled on multiple occasions over the years and have anecdotally noted significant changes following this treatment. I have also received extensive acupuncture treatment. Both have completely different end goals, treating completely different things. Both have significant value, but dry needling is absolutely not acupuncture and should not be considered as such.