

Submitter: Eric Grey
On Behalf Of:
Committee: Senate Committee On Health Care
Measure, Appointment or Topic: HB3824

Members of the Senate Committee on Health Care,

My name is Eric Grey, MS, LAc. I live and work in Astoria, OR, where I run a large holistic health clinic providing critical support to rural Oregonians and Washingtonians. I am also an acupuncturist, herbalist, and former professor at National University of Natural Medicine in Portland, OR. I am writing 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 reality of this equivalency, and the reasons for opposing it strenuously, have been debated so many times I am surprised that these bills continue to be advanced.

I oppose this bill on multiple grounds - any of which alone should be more than sufficient for this bill to go down in defeat. I am sincerely hoping you will look into this issue carefully & vote NO on HB3824.

Legal / 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. This is a classic scope of practice conflict that should be rejected forcefully. Otherwise, what is the point of establishment of scope of practice in the first place? This bill strikes at the heart of professional ethics & the meaning of medical profession regulation.

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). Multiple case reports confirm life-threatening events, including bilateral pneumothorax and prolonged nerve damage (S,ahin et al., JournalAgent, 2020; Western Journal of Emergency Medicine, 2013).

A final note is that this kind of thing confuses patients. Patients already face many barriers in finding care and understanding what various care providers can safely offer. Physical therapists are wonderful healthcare providers and bring critical services - I refer to them often. How confusing would it be for a patient to follow my referral to see a PT and then to find they offer needling? I would simply stop referring to PTs in order to avoid this confusion for patients. PTs are not acupuncturists, and should not be inserting needles unless they obtain similar training as I have obtained.

Thank you for your time and consideration. Citations can be provided on request, and I know multiple individuals will be sharing useful references with you. Please do not hesitate to reach out with questions now or in the future. I am at your disposal.

Sincerely,

Eric B Grey, MS, LAc
Watershed Wellness
Astoria, OR