Members of the Senate Committee on Health Care,

My name is Janene Mitchell. I am a licensed acupuncturist, currently practicing in Portland. I have been in practice for 24 years and am licensed in both California and Oregon. I am here in opposition to HB 3824, specifically the inclusion of "needle insertion" (Page 3, Line 37) in the physical therapy scope of practice. This is another way to describe dry needling, a technique using acupuncture needles to penetrate the skin and stimulate muscle or nerve tissue. Dry needling is functionally equivalent to acupuncture as defined in Oregon law and should remain only within the scope of practice of licensed acupuncturists, who have received the appropriate training to safely perform this technique.

## **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 also **includes the use of electrical or mechanical devices with or without needles**. Such devices are currently marketed under dry needling protocols.

In Oregon acupuncture may only be practiced by those licensed by the **Oregon Medical Board** under **ORS 677.759**. The unauthorized practice of 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 practitioners who are not regulated by the Oregon Medical Board (physical therapists) to **perform a medical 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.** 

**Acupuncture** performed by licensed practitioners has one of the **highest safety records**. The National Institute of Health found that serious acupuncture related **adverse events are rare**, occurring at a rate of approximately **0.04-0.08 per 10,000 treatments**.

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 (Sahin 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 as overseen by the Oregon Medical Board.

Thank you for your time and consideration for this very important measure.

Janene Mitchell, LAc

## Citations:

- ORS 677.757–677.785: Licensing and regulation of acupuncture in Oregon
- Huang C, et al. Acupuncture: A Review of the Safety and Adverse Events and the Strategy of Potential Risk Prevention Am J Chin Med, 2024;52(6):1555-1587. doi: 10.1142/S0192415X24500617. Epub 2024 Oct 26.
- 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.
- Boissonnault WG, et al. *Traumatic Pneumothorax Following Acupuncture: A Case Series. Western Journal of Emergency Medicine.* 2013.

• Sahın N, et al. A Rare Complication Caused by Dry Needling: Bilateral Pneumothorax. JournalAgent. 2020.