

From the desk of

Kimberly Shotz, LAc, NP, RN

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Dear Members of the Senate Committee on Health Care,

My name is Kimberly Shotz. I am a Licensed Acupuncturist (LAc) practicing full-time in Portland, Oregon where I have lived since 1993. 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. 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. I have recently seen other terms used for the same procedure, such as *Intramuscular Stimulation (IMS)*, offered by non-LAc practitioners.

For 36 years I have been practicing as either or both a Nurse Practitioner and a Registered Nurse (6 years of advanced education, with degrees of Bachelor of Science in Nursing and Master of Nursing in Women’s Health Care). In addition to this I completed a 4-year Master of Acupuncture and Oriental Medicine degree in 2011 and have held a private, part-time acupuncture practice. I very recently retired from my full-time career as a nurse practitioner and have begun a full-time acupuncture practice. **HB 3824** threatens not only the success and sustainability of my practice and livelihood but threatens the safety of our patients.

#### 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 (Şahin et al., *JournalAgent*, 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.

Thank you for your time and consideration.

Sincerely yours,

Kimberly Shotz, LAc, NP, RN

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.
- Şahin 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.