Submitter:	Ariel Touchet
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 Dr. Ariel Touchet. I am from Portland, and 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 am both a naturopathic doctor and acupuncturist and work in private practice in northeast Portland. I have been in practice for twelve years and have unfortunately heard anecdotally about needle injuries over the years when performed by nonacupuncture providers. I have safety concerns and also feel that there is no need for this added scope in a state that has numerous well trained acupuncture providers for this skill.

I refer to physical therapists every day in my medical practice. If this change to physical therapy scope is approved and broadened, it will hinder my ability to make safe referrals for my patients. It is concerning to me that I will not have confidence in the type of care my patients might receive.

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).

Citations:

ORS 677.757-677.785: Licensing and regulation of acupuncture in Oregon

Sincerely, Ariel Touchet N.D., L.Ac.