

Submitter: Elizabeth Bergum
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 Elizabeth. I live in Portland, and I oppose 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.

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. Not only has my education presented me with a rich history of theory and the evolution of acupuncture beyond treating the physical structures of the body, but through such intensive training, I've been taught and tested on insertion depth, angle, and techniques that make needling over structures such as the lungs, internal organs, arteries, nerves, and spinal cord safe. While physical therapists are well-trained in anatomy, taking a workshop on dry needling is not enough training to guarantee safe and appropriate needling. I believe allowing dry needling discounts the rigorous training acupuncturists receive and infringes on our scope of practice.

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 (S,ahin 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.

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.

S,ahin 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