

Dear Committee Chairs,

My name is Sarah Pancoast and I am a Doctor of Physical Therapist and I have been practicing physical therapy for 5 years. I am writing in support of HB 3824, as it will align Oregon with national best practices to enhance patient safety, improve accessibility, and reduce healthcare costs.

I urge you to support HB 3824 for the following reasons:

- Allow physical therapists to certify a patient's disability placard or license plate application. This ability is vitally important especially given Oregon's shortage of providers and can help ensure that patients get adequate accommodations quickly and without unnecessary delay. This care also aligns with privileges that PTs have in 13 other states.
- Improve access to and timeliness of patient imaging by allowing PTs to order and interpret imaging. Over 10 other states have taken this action to help reduce patient cost burdens and improve patient outcomes by ensuring timeliness of care.
- Ensures patient safety by protecting the title "Doctor of Physical Therapy or DPT" to ensure that only those holding a doctoral degree in physical therapy are permitted to use this title and abbreviation. Currently, some entities are inappropriately utilizing "DPT", as an abbreviation for dynamic personal training, which is misleading for patients in Oregon. The title Doctor of Physical Therapy and DPT should be reserved solely for those individuals who have gone through that level of rigorous training and education.
- Enhances patient safety by adopting statutory language included in the PT Model Practice Act related to sexual misconduct to ensure that the PT licensing board has appropriate authority related to misconduct that is verbal, physical, and also through electronic means.

Lastly, I urge you to bring Oregon in line with 46 other states and the Federation of State Boards of Physical Therapy to make the practice of dry needling by a certified and licensed physical therapist legal in the state for the following reasons:

- Dry needling has been safely practiced by physical therapists since the 1990s with extremely low adverse event rates (less than 0.1% according to multiple large-scale studies), and PT liability insurers report no increased claims related to this practice.
- Physical therapists receive comprehensive doctoral-level anatomical training, with the Federation of State Boards of Physical Therapy confirming that 88% of competencies required for safe dry needling are already included in accredited DPT curricula.
- Multiple Supreme Courts in other states have affirmed that dry needling is distinct from acupuncture and properly within physical therapy scope, recognizing that health professions naturally have overlapping practices that benefit patient choice.
- In our current healthcare climate where Oregonians struggle with access to care, allowing qualified physical therapists to perform dry needling would increase availability of this evidence-based intervention that has been incorporated into clinical practice guidelines.

- Dry needling specifically targets functional changes in anatomical structures using western medical principles, which is fundamentally different from acupuncture's approach based on Chinese medicine principles of meridians and energy flow.
- Supporting HB 3824 in its entirety ensures Oregonians have access to safe, effective care from licensed providers while aligning our state with national best practices.

In summary, I urge you to support HB3824 in its entirety. Oregonians deserve access to safe, effective, evidence based care by licensed providers.

Sincerely,

*Paul Pama* PT, DPT