

Submitter:

Jessica Belknp

On Behalf Of:

Committee:

Senate Committee On Health Care

Measure, Appointment or Topic:

HB3824

I am a Licensed Acupuncturist based in Bend, Oregon, currently practicing in a large physical therapy clinic where I specialize in orthopedic and pain management acupuncture. I write today to express my strong opposition to 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.

Dry Needling Is Acupuncture

Dry needling involves the insertion of fine, solid filiform needles (acupuncture needles) into muscle trigger points to relieve pain and improve musculoskeletal function. Despite different terminology, the technique is identical in practice to acupuncture. This is not only my professional opinion, but also the position of several medical authorities:

- * The World Health Organization (WHO) and National Institutes of Health (NIH) both recognize dry needling as a form of acupuncture.

- * A 2011 NIH-funded Cochrane Review concluded that “dry needling is an acupuncture technique using acupuncture needles.”

- * In 2016, the American Medical Association (AMA) stated that “dry needling is an invasive procedure and should only be performed by licensed professionals with standard training in acupuncture.”

Training Disparity and Patient Safety Concerns

The educational gap between Licensed Acupuncturists and Physical Therapists performing dry needling is stark:

- * Licensed Acupuncturists undergo a four-year graduate-level program totaling 3,000+ hours of academic and clinical training. Our curriculum includes anatomy, physiology, pathology, sterile technique, and detailed needle safety protocols.

- * Physical Therapists are often certified to perform dry needling after completing weekend workshops with only 20–60 hours of instruction and no standardized national curriculum.

This disparity directly impacts patient safety. Documented complications of improperly performed needling include pneumothorax, nerve injury, infection, and persistent pain. A 2014 study published in the Journal of Manual & Manipulative

Therapy reported increasing adverse effects when dry needling is conducted by inadequately trained providers.

Professional, Personal and Economic Impact

This legislation would severely impact my profession and career. If physical therapists are allowed to offer acupuncture services, I risk losing my position in a physical therapy setting as well as my primary source of income. As a parent, homeowner, and provider, this is not a theoretical concern—it's a very real threat to my livelihood.

Beyond the economic impact, this bill sets a dangerous precedent: allowing one profession to adopt the techniques of another without undergoing equivalent training or licensure. If I were to seek licensure as a physical therapist, I would be required to complete a Doctor of Physical Therapy (DPT) degree. Fairness demands the same standard apply to any provider wishing to perform acupuncture.

Conclusion

I respectfully urge you to reject this legislation. It threatens patient safety, undermines professional standards, and puts highly trained Licensed Acupuncturists at an unfair disadvantage.

Thank you for your time, attention, and commitment to ensuring safe, evidence-based healthcare for Oregonians.