

Submitter: Kerry Lisitsky

On Behalf Of:

Committee: Senate Committee On Health Care

Measure, Appointment or Topic: HB3824

Chair and Members of the Committee,

My name is Kerry Lisitsky, I am from Portland, Oregon, and I am writing to you today to give my testimony in strong opposition to HB 3824. As an Occupational Therapist with 30 years of experience in healthcare, a student of Acupuncture and Chinese Medicine, and the spouse of a Physical Therapist who shares my concerns, I am compelled to speak out because the stakes for Oregon patients could not be higher. The inclusion of “needle insertion” in HB 3824 is not a minor technicality; it is a direct threat to patient safety, legal clarity, and the standards that protect every Oregonian. Oregon law is explicit: only licensed acupuncturists and physicians are permitted to perform needle insertion. HB 3824 would create a dangerous loophole, allowing those without the necessary depth of training to perform invasive procedures. This is not just a legal issue- it’s about the trust our patients place in us and the integrity of our entire healthcare system.

Acupuncture is not simply the act of inserting a needle. It is a sophisticated medical practice that demands thousands of hours of training, clinical experience, and a comprehensive understanding of human anatomy and physiology. Licensed acupuncturists in Oregon complete up to 3,500 hours of rigorous preparation. In contrast, physical therapists can perform “dry needling” with only a weekend course. I have seen firsthand the injuries and complications that arise when insufficiently trained providers attempt these procedures. When my husband worked in Seattle, he saw poorly qualified Physical Therapists do “dry needling,” and he witnessed several patients complaining of additional injuries after such treatments. He is now committed to advocating for his co-workers in Oregon to reject such practices.

One of the most serious risks for patients who receive treatment from an untrained practitioner is a pneumothorax, which is a potentially life-threatening condition where a needle punctures the lung, allowing air to accumulate in the pleural space. This complication arises most frequently when needling is performed near high-risk anatomical regions such as the chest, upper back, or supraclavicular area. These specific sites are common areas where Physical Therapists treat patients for neck, shoulder, and upper back pain with dry needling techniques. Research indicates that adverse events, including pneumothorax, surge when standards are compromised- such as when physical therapists or chiropractors perform needling with minimal training.

For the past four years, I have poured my heart and intellect into rigorous, comprehensive training-delving deeply into anatomy, physiology, foundational medical theory, medical ethics, and the vast complexities of Chinese medical philosophy. My education has demanded not only mastery of intricate theoretical frameworks but also the development of precise, hands-on clinical skills essential for

the safe and effective practice of acupuncture. This journey has required unwavering dedication, discipline, and respect for the profound responsibility that comes with treating patients. It is, frankly, inconceivable and deeply troubling to me that the depth and breadth of this expertise could be equated to what is acquired in a mere weekend course. To suggest that a physical therapist, after such limited exposure, could replicate the knowledge, skill, and clinical judgment I have worked so hard to attain is not only an affront to the integrity of my profession but a genuine risk to patient safety.

I urge you in the strongest possible terms: do not let expedience override safety. If HB 3824 passes, it will lower the bar for patient safety and threaten the very foundation of healthcare in Oregon. Oregon patients are counting on you to protect them. Please act swiftly and decisively to uphold the standards and laws that keep all of us safe.