Submitter:	Noah Horan
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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 Noah Horan. I am from Portland, and I am writing to you 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.

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** 

Legal and Regulatory Conflict

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.

I have personally seen my mother, a student of acupuncture and Chinese medicine at the National University of Naturopathic Medicine, spend the last four years in a rigorous, doctoral-level program studying this medicine. The untold hours of work she has put into the pursuit of this knowledge is, by her own words, the hardest thing she has ever done in her life. Learning the techniques to use the needles and other tools properly is only a part of the learning process, as she must also learn the indescribably vast and complex theory behind the needling of certain points for specific indications. Allowing this kind of practice to be performed by physical therapists who lack the adequate training not only in the techniques but in the theory of Chinese medicine could lead to potentially disastrous outcomes for their patients. 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<sub>a</sub>hin 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.