| Submitter: | susan freohlich |
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| On Behalf Of: | |
| Committee: | Senate Committee On Health Care |
| Measure, Appointment or Topic: | HB3824 |

Dear Chair Patterson, Member Hayden, Linthicum, Campos, Reynolds,

I was scheduled to speak but as this is a big issues, did not have the opportunity . I will try to be available toay, but hope that you will read my testimony.

I stongly oppose HD 3824 which seeks to expand the scope of practice for physical therapst to include dry needling/acupuncture. While I respect the role physical therapists play in rehabilitation and healthcare, this bill raises significant concerns regarding patients saftey, education adn training, and regulatory issues that must be adddressed BEFORE this expansion of scope. I am a bit untrusting as the headline of this bill does not even mention the true reason for this bill -0 it is to slide dry needling into the scope of practice with minimal training and no oversight other than the PT board.

Training and expertise -0 Acupuncture and dry needling are invasive procedures requiring extenasive knowledge of anatomy, needle technique, and potential risks. Licensed acupunturists complete 3000-4000 hours of accredited education, including hundresds of hours in needling practice, theory, and safety protocols. In ccontrast, PTs often receive only 20-40 hours of dry needling training - far below the standards for safe, competent, practice. This discrepancy creates an unacceptable risk of harm to patients.

Over sight - Who will oversee these new abilities for PTS? Their Board? This is like a fox guarding the chicken coop! If an invasive procedure as well as other increases in the scope of practice for PTs should occur, then PTs should be overseen by the Oregon Bd OF Medical Examiners, for more rigourous oversight and limitations on what they can and cannot do. They will not want this, of course, but it should be a requirement. IN addition, the Bd. of Medicl Examiners could help sort out what is and is not good for patients.

Oversight - If PTs are using acupuncture needles, aren't they in fact doing acupunture? How does a person know the difference? And if they are doing acupuncture, can't they just ehlp me with my headache that came on? This is not dry needling, it now becomes acupuncture with no oversight! I strongly urge you to encourage PTs to do what they do best and to leave acupuncture to well trained and competent acupuncturists!

Patient safty risks - Improprer needling can lead to serious and long lasting

complications including infections, nerve damage, organ puncture (pneumothorax and hematomas. I would recommend at the minimum 300 hrs od additional training in dry needling practice and theory.

Collaboration over expansion. Rather than diluting standards, we should continue to encourage collaboration between adn among providers. Patients would then receive better care, safe care.

I urge you to oppose HR 3824 for these reasons and more. Mandate PTS to go through the same 2500-3000 hours of training that Licensed Acuuncturists must do - then we all would benefit.