To Whom It May Concern,

I am writing to express my strong opposition to the inclusion of "needle insertion" in HB3824 and its attempt to allow PTs to perform "dry needling". This technique is a form of acupuncture, and it belongs within the scope of practice of licensed acupuncturists, who are regulated by the Oregon Medical Board.

It is troubling that this change has been quietly embedded in an 18-page bill focused on durable medical equipment. Hiding a major scope-of-practice expansion reflects a lack of transparency and undermines public and professional trust. This type of legislative maneuvering bypasses open discussion, clinical scrutiny, and community input—all of which are essential for responsible policymaking, especially when patient safety is at stake.

Dry needling is a form of acupuncture. Trigger points directly overlap with traditional Chinese medicine's ah shi points. As acupuncture advanced and transitioned into the Western world, acupuncturists happily adopted modern terminology to describe what we have been doing for centuries including eliciting muscle fasciculation, releasing trigger points, increasing blood flow, modulating pain, and releasing endorphins. Today, physical therapists recognize the immense therapeutic value of orthopedic acupuncture, yet they often attempt to adopt these techniques without affording them the recognition or professional respect they require. Rebranding orthopedic acupuncture as "dry needling" does not change the fact that it is acupuncture—and it should be treated and regulated accordingly.

Acupuncturists have received specialized education in assessing when a more aggressive orthopedic style is the best option for a patient—and <u>MOST importantly, when it is not.</u> Our decisions are grounded in a comprehensive understanding of biomedical anatomy and physiology, combined with a nuanced clinical framework to diagnose that draws from thousands of years of medical tradition. The isolated use of dry needling is significantly less effective than when it is applied as part of a comprehensive acupuncture treatment.

Allowing PTs to perform dry needling with minimal training strips patients of this depth of care. It reduces a complex intervention to a mechanical procedure, ignoring the clinical judgment that determines whether it should be used at all in the best interest of the patient. This risks patient outcomes and dilutes the quality of care Oregonians deserve.

As written, this legislation undermines integrative care. Instead of maintaining the current practice of PTs working collaboratively with acupuncturists, it encourages the siloing and dilution

Oregon should foster true interprofessional collaboration, keeping patients' best interests at the center of all scope-ofpractice decisions. Why wouldn't physical therapists—if truly acting in the best interest of their patients—want to study and draw from the thousands of years of clinical wisdom and empirical evidence that acupuncture offers? We all share the goal of expanding access to care, but that care must also be safe, informed, and of the highest quality.

Again, I urge you to oppose any legislation that authorizes dry needling by physical therapists. **Acupuncture is a regulated medical practice for a reason**. Expanding it outside its current framework risks patient safety, devalues professional training, diminishes and opens the door to confusion and harm.

Thank you for your time, consideration, and commitment to evidence-based, transparent, and patient-centered healthcare in Oregon.

Sincerely, Annie Simpkins Doctor of Acupuncture and Chinese Medicine Licensed Acupuncturist