

Submitter: Nina Yonezawa
On Behalf Of:
Committee: Senate Committee On Health Care
Measure, Appointment or Topic: HB3824
Re: Opposition to HB 3824 – Inclusion of “Needle Insertion”

Dear Chair Patterson, Vice-Chair Hayden, and Members of the Committee,

My name is Nina Yonezawa, and I am a licensed acupuncturist and resident of Eugene, Oregon. I am writing to express my strong opposition to House Bill 3824, specifically the inclusion of the term “needle insertion” on page 3, line 37, which implies an expansion of scope for physical therapists that raises significant legal, ethical, and public safety concerns.

Needle-based procedures require specialized, rigorous training. Needling often involves insertion into deep muscle tissue and anatomical regions adjacent to critical structures such as the lungs, arteries, and nerves. Improper technique can result in serious harm, including pneumothorax, nerve injury, and vascular trauma. In Oregon, licensed acupuncturists complete between 2,500 and 3,500 hours of education and training, including over 800 hours of supervised in-person clinical practice. In contrast, dry needling courses for physical therapists typically require only 20 to 100 hours. This stark discrepancy in training undermines patient safety and compromises the standards we have worked so hard to establish.

Oregon must uphold its high standards of healthcare. Our state has earned a national reputation for upholding evidence-informed, patient-centered healthcare. The inclusion of minimally trained practitioners performing invasive techniques contradicts these values and diminishes the protections afforded by current regulatory oversight. By authorizing physical therapists to perform dry needling under HB 3824, the legislature would send a message that convenience or professional pressure can override the safety and trust of the public. That is not the Oregon way. We must hold all healthcare providers to consistent, evidence-based standards backed by licensure and competency—not create regulatory loopholes that put patients at risk.

For these reasons, I respectfully urge the committee to amend HB 3824 and strike out references to “needle insertion.” Our shared responsibility is to uphold public safety, professional accountability, and the integrity of Oregon’s healthcare system.

Thank you for your time and careful consideration on this important matter.

Sincerely,
Nina Yonezawa, L.Ac.

Eugene, Oregon