

Chair and Members of the Committee:

My name is Kate Saul, Licensed Acupuncturist, and I stand in strong opposition to HB 3824, which would expand physical therapists' scope of practice to include dry needling in Oregon.

## **Professional Background and Expertise**

I own an orthopedic and sports medicine acupuncture clinic in Portland and previously worked at Portland Athletic Center of Excellence (P.A.C.E.), one of the nation's premier physical therapy clinics serving elite and professional athletes, including Nike's professional running team. As their acupuncturist, I continue to serve on their sports medicine team. My practice receives referrals from physical therapists and top surgeons specifically for orthopedic conditions requiring precise needling techniques.

## **Training Disparity Creates Safety Concerns**

My credentials include over 3,300 hours of specialized training in acupuncture, with nearly 1,000 hours devoted to supervised clinical practice. This level of training should be the minimum standard for anyone inserting needles intramuscularly near vital structures such as lungs, nerves, and blood vessels.

The proposed training requirements for physical therapists to perform dry needling fall dramatically short of this standard. This inadequacy is not theoretical—I have witnessed its consequences firsthand. Nike's sports medicine leadership has specifically requested that I travel to training camps in states where dry needling by PTs is legal because they've observed superior outcomes from acupuncturist-performed intramuscular needling. I have received videos documenting professional athletes unable to walk due to excessive "needle soreness" following dry needling procedures performed by physical therapists—a direct result of insufficient training in the nuanced skill of intramuscular needling.

## **Current PT Practice Models Raise Additional Concerns**

The current economic realities of physical therapy practice compound these safety concerns. Due to low insurance reimbursement rates, many PT clinics have adopted practice models where therapists spend diminished time with each patient, often delegating portions of treatment to assistants or "exercise specialists." This time-constrained environment makes it unrealistic and potentially dangerous to properly assess, prepare, and safely perform intramuscular needling alongside other therapeutic interventions.

## **Maintaining Oregon's Standards for Integrative Care**

Oregon is nationally recognized for its high standards in integrative healthcare. Allowing inadequately trained practitioners to perform procedures requiring specialized expertise would

undermine these standards. Healthcare should be collaborative but not redundant, with clear distinctions between specialized practices.

Intramuscular needling cannot be mastered in brief weekend courses. It requires extensive training and clinical experience to perform safely and effectively. Expanding physical therapists' scope of practice without requiring sufficient training would compromise patient safety and diminish the quality standards of both acupuncture and physical therapy professions.

I urge you to reject HB 3824 and maintain Oregon's commitment to high-quality, specialized healthcare.

Respectfully submitted,

Kate Saul, LAc

Portland, OR