

Submitter: Rachel Hemphill
On Behalf Of:
Committee: Senate Committee On Health Care
Measure, Appointment or Topic: HB3824

To Members of the Senate Committee on Health Care,

My name is Rachel Hemphill, and I am a licensed acupuncturist. I'm writing today to express my strong opposition to HB 3824, specifically the inclusion of "needle insertion" on page 3, line 37, within the physical therapy scope of practice.

As someone trained extensively in acupuncture, I want to emphasize that the technique referred to as dry needling is functionally identical to acupuncture as defined in Oregon law. It involves the insertion of acupuncture needles into the body to stimulate muscles or nerves. This is not a new or separate modality, it's acupuncture, plain and simple.

Legal Concerns

Oregon law (ORS 677.757(1)(a)) clearly defines acupuncture as "the stimulation of specific points on the body by the insertion of needles." It also includes related modalities like electrical stimulation, which are commonly used in dry needling protocols. Under current law, only those licensed by the Oregon Medical Board (OMB) under ORS 677.759 can legally practice acupuncture.

By allowing physical therapists—who are not regulated by the OMB—to perform "needle insertion," HB 3824 creates a direct conflict with existing law and undermines the legal framework designed to protect patient safety.

The Acupuncture Advisory Committee was created to ensure practitioners meet specific education and licensure standards. HB 3824 completely bypasses this structure, which I believe is a serious risk to the public.

Education and Patient Safety

To become licensed, acupuncturists in Oregon are required to complete 2,500 to 3,500 hours of training, including 800 to 1,000 hours of supervised clinical practice. By contrast, dry needling certification courses for physical therapists typically offer just 20 to 100 hours of training, and often with no live patient supervision.

That disparity is not just academic, it directly impacts patient safety. Studies have shown significantly higher rates of adverse events when dry needling is performed by inadequately trained providers:

One study reported 36.7% of dry needling treatments caused adverse events,

including major complications such as pneumothorax and nerve damage (Boyce et al., 2020).

A 2022 Polish study found 3% pneumothorax, 14% nerve palsy, and even cases requiring hospitalization (Majchrzycki et al.).

Multiple case reports document life-threatening outcomes like bilateral pneumothorax (Sahin et al., 2020; Boissonnault et al., 2013).

As someone who has spent years studying how to safely and effectively use acupuncture needles, I am deeply concerned by the prospect of this tool being placed in the hands of practitioners without adequate training. Patients deserve better.

In Closing

For the safety of Oregonians and the integrity of established medical law, I respectfully urge you to remove the phrase “needle insertion” from HB 3824. It poses serious risks, contradicts Oregon’s current statutes, and circumvents the oversight of the Oregon Medical Board.

Thank you for your time and for considering the voices of licensed acupuncturists like myself.

Sincerely,

Rachel Hemphill, DACM, L.Ac., FABORM