

# **Opposition to HB 3824 - A Threat to Patient Safety and Standards in Needle-Based Care**

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

My name is Genna Robinson, and I am a licensed acupuncturist and practitioner of Traditional Chinese Medicine (TCM) in Cincinnati, Ohio. I am writing in strong opposition to HB 3824, which proposes a broad and unsafe expansion of scope for physical therapists in Oregon.

Though I do not reside in Oregon, I work closely with patients managing chronic pain, inflammation, connective tissue disorders, and complex multi-system conditions-many of whom turn to TCM because they have not been well served by conventional approaches. I am deeply concerned that this legislation jeopardizes patient safety and weakens public trust in the quality and oversight of medical interventions involving needle insertion.

## **1. Needle-Based Interventions Require Advanced, Specialized Training**

As a practitioner who performs thousands of needling procedures each year, I can tell you: this is not a benign technique. It requires rigorous anatomical knowledge, precision, and deep understanding of how needling affects not just muscles and fascia, but the nervous system, circulatory system, and organ function.

Licensed acupuncturists in Oregon complete over 2,500 hours of training, including hundreds of hours in supervised clinical settings. By contrast, physical therapy dry needling courses may involve as little as 27 hours-a dangerous gap when performing procedures near the lungs, spine, or major

blood vessels.

Patients deserve providers who are truly trained-not just "certified" by a weekend seminar.

## 2. Scope Expansion Without Standards Is Deregulation-Not Innovation

HB 3824 sets a troubling precedent: expanding scope without matching education or oversight. Courts in other states have ruled that dry needling lies outside PT scope, and in places where it is allowed, it was pushed through largely by lobbying, not safety data or professional consensus.

As a solo practitioner, I cannot compete with the financial lobbying power of large PT networks. But I urge the committee not to confuse volume with validity. This bill is not about collaboration-it is about convenience, and convenience should never come at the cost of patient safety.

## 3. Oregon Should Continue to Lead-Not Lower the Bar

Oregon has long been known for evidence-informed, integrative care. I've looked to Oregon as a national leader in acupuncture licensing, quality standards, and public trust. Authorizing practitioners to perform invasive procedures without equivalent training undermines that legacy.

This bill does not expand access to care-it dilutes the safety and standards of it.

## 4. True Collaboration Honors Each Profession's Strength

In my own practice, I refer patients to PTs regularly for exercise therapy, rehabilitation, and injury prevention. Likewise, I have had PTs refer patients back to me for precise needling and nervous

system support when their toolbox wasn't enough.

This is what respectful, collaborative healthcare looks like. But repeating a service without matching training is not collaboration-it's redundancy.

## Conclusion

I urge you to reject HB 3824. This bill:

- Introduces invasive procedures without adequate training or oversight
- Bypasses regulatory safeguards
- Weakens licensure protections and patient trust
- Risks real harm to people seeking care for pain, injury, and chronic illness

We need more collaboration in healthcare-not more shortcuts.

Thank you for your time and your continued commitment to patient safety and professional integrity.

Warm regards,

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