

Dear Baltimore City Legislators,

On behalf of the 100 patients I treat as a Maryland Licensed Acupuncturist, I am writing to you today for your help, and IN OPPOSITION to the expansion of acupuncture being added to the scope of Athletic Trainers in our state. We agree with the Athletic Trainers in their [recent petition](#) seeking support for the efforts, that without adding “dry needling” to their scope, it will hinder their ability to provide the **highest quality of care** for their patients. However, we disagree that a “4-day course with over 25 hours of hands on training that include physical therapists and chiropractors,” who also don’t learn more than 80-100 hours of training in acupuncture or dry needling techniques and theory, is a benchmark for high quality delivery of acupuncture services. Acupuncture is an invasive procedure that if performed by those without extensive training will ultimately put the public at risk for procedural complications that include, but are not limited to, pneumothorax. This dangerous condition can lead to collapsed lungs, difficult surgeries that require extended medical attention, and can lead to fatalities. The Athletic Trainers did not include this information in their bills, which is either an admission of the gravity of performing an invasive procedure which they should be trained for; or worse: they didn’t know the information to list for contraindication beyond bruising, swelling and localized pain at the injection site.

By comparison, Traditional Asian Medicine practitioners, who are Licensed Acupuncturists by statute, require a minimum of 3-4 YEARS of didactic/clinical training in a whole health medical system that is practiced globally and throughout the United States. Prior to our Practice Act, Maryland acupuncturists were jailed and fined for practicing surgery without a medical license. If it was important to safeguard the public from an invasive procedure then, it should be equally important now that others want to perform it without learning the medical system in which the technique serves the greatest purpose for better health outcomes. Also of note, MDs who perform acupuncture in the state (and nationwide,) receive 300 hours of training and are a much more extensive education in medical theory in general. Why would we accept anything less for patients from other practitioner groups with less medical education in this arena?

We not only understand, like all other healthcare professionals seeking to add acupuncture to scope, THAT Acupuncture works. We understand how and why. If sports teams, the US Olympic circuit, or anyone else wants to deliver the highest quality of care when PERFORMING ACUPUNCTURE, they should hire acupuncturists or develop a strong referral network with the more than 1100 Acupuncturists currently licensed by the state of Maryland, or the 35,000 Licensed Acupuncturists nationwide. We are not denigrating the education that Athletic Trainers, Physical Therapists, or Chiropractors receive when learning their craft. However, they are dismissive of the extensive training licensed acupuncturists receive. If better health outcomes are the purpose of their expansion of scope, then they should be equally sincere about the education and training needed to keep the public safe. Please reach out to the members of the [Senate Finance Committee](#) & [House Health & Government Operations Committee](#) to tell them to **PUT YOUR CONSTITUENTS’ SAFETY FIRST!** Vote NO on [SB232](#) TUESDAY FEBRUARY 7TH and [HB172](#) on February 15TH!!! Tell the stakeholders to WORK TOGETHER to ensure patient best practices for safety and come up with a solution that doesn’t negatively impact any of the practitioner groups or the patients they provide medical services for.

ENDING SALUTION,

Lillian Cooperman, L.Ac., Dipl.Ac.
MD Constituent)
410-926-8008