

Delegate Joseline Pena-Melnyk, Chair

Room 241
House Office Building
Annapolis, Maryland 21401

February 13, 2023

Re: HB172 – UNFAVORABLE – Health Occupations – Licensed Athletic Trainers – Dry Needling Approval

Dear Chairwoman Pena-Melnyk and Members of the Committee:

To protect and support the patients I treat as a Maryland Licensed Acupuncturist and Registered Nurse; I am writing to you today as a Maryland constituent IN STRONG OPPOSITION to the expansion of the appropriated technique described as dry needling being added to the scope of Athletic Trainers in our state.

Multiple medical boards, professional organizations, and certifying bodies including CMS, AMA, AAMA, AAPMR, have all concluded that not only is dry needling the practice of acupuncture, but that it's practice should be limited to providers with extensive training in the use of filiform needles such as trained physicians and licensed acupuncturists going back to 2012. Also of note, MDs who perform acupuncture in Maryland are required to have 300 hours of training and are a much more extensive education in medical theory in general. Why would we accept anything less (80 hours proposed for athletic trainers) for patients from other practitioner groups with less medical education in this arena?

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.

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, and includes biomedicine. 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. We not only understand, like all other healthcare professionals seeking to add acupuncture to scope, THAT Acupuncture works. We understand how and why.

I am not denigrating the education that Athletic Trainers receive when learning their craft. However, there has been a consistent effort to falsely describe acupuncture practice, re-brand it as dry needling, while simultaneously claiming dry needling is a more scientific, effective medical procedure USING ACUPUNCTURE RESEARCH to support their argument. This tactic is representative of the consistent structural, racial bias facing the acupuncture profession. Evidence based practice requires us to balance research, provider experience, and patient values and preferences.

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 House Health & Government Operations Committee to tell them to PUT YOUR CONSTITUENTS' SAFETY FIRST!

Vote NO on HB172 WEDNESDAY 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.

LYNNE VANCE, DACM, BSN, LAC, RN

DOCTOR OF ACUPUNCTURE & REGISTERED NURSE

15837 HAYNES ROAD, LAUREL, MD 20707