

**Kellie Cannon, PT, DPT**

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**Date:** 05/07/2025

**To:**

Chair and Members of the House Committee on Behavioral Health and Health Care  
Oregon State Legislature  
900 Court St. NE  
Salem, OR 97301

**RE: Testimony in Support of HB 3824 – Advancing Modern, Accessible Physical Therapy Practice**

Dear Chair and Members of the Committee,

My name is Kellie Cannon, and I am a licensed Doctor of Physical Therapy (DPT) practicing in Eugene, Oregon. I am writing to express my strong support for House Bill 3824, which updates outdated statutory language and expands the scope of physical therapy practice to better reflect our training, qualifications, and the evolving healthcare needs of Oregonians.

HB 3824 is more than a policy update—it's a commitment to modern, patient-centered care. Physical therapists are doctoral-trained providers who serve as first-line clinicians for musculoskeletal conditions. This bill acknowledges that role by allowing PTs to:

- Prescribe durable medical equipment (DME),
- Allows for the use of dry needling for musculoskeletal purposes
- Protects our professions use of DPT
- Utilize sonographic imaging for physical therapy purposes without unnecessary licensure
- Certify applications for disabled parking permits.

This last point—the authority to sign off on disabled parking permits—is both practical and overdue. Physical therapists frequently evaluate patients with mobility impairments and functional limitations. Allowing us to complete this certification streamlines access for patients who may otherwise face unnecessary delays or duplicate visits, especially those with chronic or progressive conditions. It's a simple step that improves efficiency, access, and patient satisfaction without compromising safety.

The bill also takes a proactive stance in allowing the use of dry needling, a skilled and evidence-based intervention that was one allowed for PTs. PTs in Oregon receive rigorous training in anatomy, safety, and technique while in school and continuing education training. Dry

needling has become a vital tool in addressing pain and dysfunction in our professions in the majority of other states and was once allowed for Oregon PTs. Ensuring that physical therapists have the ability to provide this service is a matter of both clinical autonomy and patient access.

By allowing physical therapists to utilize sonographic equipment for physical therapy purposes without the need for additional licensing, HB 3824 promotes efficient use of healthcare resources. This change will facilitate timely diagnostics and treatment, leading to better patient outcomes and reduced healthcare costs.

Additionally, HB 3824 affirms the use of the Doctor of Physical Therapy (DPT) title. This is not about claiming to be physicians—it's about reflecting the level of education and clinical expertise required of today's physical therapists. It is also about not allowing the use of the acronym for personal trainers or other careers to avoid confusion and misrepresentation for the community. Patients deserve clarity and transparency when choosing their providers, and this bill helps reinforce that trust.

In summary, HB 3824 responsibly modernizes physical therapy regulation in Oregon, increases healthcare accessibility, and aligns our laws with national standards. I urge the committee to pass this bill and help Oregon lead the way in delivering efficient, effective, and forward-thinking healthcare.

Thank you for your consideration.

Sincerely,  
Kellie Cannon, PT, DPT  
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