

ICMART LEXICON of Medical Acupuncture

ICMART

International
Council of
Medical
Acupuncture and
Related
Techniques





ICMART *LEXICON* OF MEDICAL ACUPUNCTURE

DEDICATION

It gives me great pleasure to present the ICMART *Lexicon* of Medical Acupuncture. The *Lexicon* is the product of many hours of reflection and effort and is offered in the spirit of international cooperation and understanding.

In a rapidly shrinking world, this Second Edition of our *Lexicon* is a tribute to our commitment to the health and well-being of our patients and to the validity and necessity of Medical Acupuncture internationally.

Marshall H. Sager

Chair, Education Chapter

April, 2011



INTRODUCTION

The Beijing Declaration, Adopted by the WHO Congress on Traditional Medicine, Beijing, China, 8 November 2008, affirmed the uniqueness of traditional medical practices among the various Member States. The Declaration recognized that Member States have different domestic legislation, approaches, regulatory responsibilities and delivery models and that these distinctions result in therapies and practices which may vary greatly from country to country and from region to region. The Declaration stated the need for action and cooperation by the international community, governments, health professionals and workers, to ensure proper use of traditional medicine as an important component contributing to the health of all people, in accordance with national capacity, priorities and relevant legislation. The Declaration left the establishment of systems for the qualification, accreditation or licensing of traditional medicine practitioners to individual governments.

Acupuncture is one of the oldest and most widely practiced forms of “traditional medical practices” referred to in the Beijing Declaration. Acupuncture has been used as a healing modality for at least 5,000 years, pre-dating recorded history. It was not just practiced in China. Ancient Egyptian scripts indicated the use of acupuncture as early as 1550 B.C. . The South African Bantu tribesman, Arabs, Inuits, South Indians and Eskimos have evidence suggesting the use of acupuncture to cure disease. Throughout the world, ancient legends describe the discovery of acupuncture when a soldier, injured by an arrow on the battlefield, noted relief from medical conditions in places other than which the arrow struck.

In recognition of the Beijing Declaration, and with the goal of implementing its directives, the ICMART Lexicon of Medical Acupuncture has been created to detail the appropriate education, training and practice requirements for safe, competent and effective physician practiced acupuncture, internationally referred to as “Medical Acupuncture,” for use in public and private health services throughout the world.



The basis of all Medical Acupuncture practice is Western physician education and training. This *Lexicon* will not address medical school/university training. Rather, it will use the education and training of a licensed physician as a starting point from which to add specialized training in Medical Acupuncture and Related Techniques.

The uniqueness of physician practiced acupuncture, Medical Acupuncture, lies in the numerous benefits of having a practitioner who has the ability to use Medical Acupuncture alone, as an alternative or compliment to conventional therapies, or in addition to conventional, mainstream therapies, in what is referred to as an integrative approach.

As stated in the Beijing Declaration, by custom and tradition, physician practiced acupuncture has developed according to national and regional standards. While some terms and methodologies may appear universal, what seems to be identical terminology among various international practices could, in fact, reflect strongly divergent ideologies and techniques.

PURPOSE AND GOALS

The past decades have shown an exponential increase in the use of complementary and alternative medical therapies throughout the world. The Model Guidelines for the Use of Complementary and Alternative Therapies by Medical Doctors in the European Union recognized that all complimentary and alternative therapies, including Medical Acupuncture, must be practiced in a manner consistent with safe and responsible medicine.

Affirming that objective, and recognizing the uniqueness of Medical Acupuncture, the purpose of the ICMART Lexicon of Medical Acupuncture is to protect the health, safety and welfare of the public by codifying national and/or regional Medical Acupuncture



education, training and practice requirements for physicians. The goal of the *Lexicon* is to become the accepted standard for Medical Acupuncture education, training and practice throughout the various regions and nations of the world.

ACKNOWLEDGMENT

I would like personally to thank each of the representatives of participating ICMART organizations for their contributions to the *Lexicon*.

Finally I would like to thank Dr.med.Walburg Maric-Oehler MD, ICMART General Secretary, for her trust in me and most importantly for her continuing friendship.



AUSTRALIA



AUSTRALIA

NATIONAL/REGIONAL PRACTICES

A. Type(s) of Medical Acupuncture most commonly practiced:

1. Traditional Chinese body acupuncture
 - Using the points on the body
2. Auricular acupuncture
 - Using points on the ear
3. Trigger point acupuncture
 - Treating tender trigger points which may not be traditional
4. Laser acupuncture
 - Treatment given using a laser

B. Education/Training Requirements

Medical Acupuncture Modality	Theoretical Hours	Clinical Hours	Proficiency Testing	Preliminary Practice
All Modalities	100	30	Y	N
Fellow Status	250	30	Y	N

In Australia a doctor must achieve accreditation before he/she can practise medical acupuncture. Accreditation is granted by the JCCMA (Joint Consultative Committee for Medical Acupuncture). This committee of six is made up of two representatives from the Australian Medical Acupuncture College (AMAC), the Royal Australian College of General Practitioners (RACGP) and the Australian College of Rural and Remote Medicine. Application for accreditation to practice medical acupuncture in Australia is adjudicated by this committee.



The requirements for accreditation are attendance at an accredited course (accredited by JCCMA), 100 hours of lectures and seminars, 30 hours of mentoring with an approved mentor, and then passing part 1 of the FAMAC exam (Fellowship of the Australian Medical Acupuncture College). The mentor is usually a full Fellow of the College. This training covers all aspects of acupuncture, i.e., TCM diagnosis and treatment, laser, neurophysiology, safety etc.

The part 2 of FAMAC cannot be sat until 2 years after passing part 1, and requires 250 hours of lecture and seminars and a literature review of a chosen acupuncture topic. Both part 1 and part 2 have a written exam. Part 1 includes a clinical exam. Part 2 includes a viva exam.



Australian Medical Acupuncture College Education Standards 2008

Glossary

ACRRM	Australian College of Rural and Remote Medicine
AMAC	Australian Medical Acupuncture College
AMAS	Australian Medical Acupuncture Society
CPD	Continuing Professional Development
FAMAC	Fellow of the Australian Medical Acupuncture College
JCCMA	Joint Consultative Committee on Medical Acupuncture
PDP	Professional Development Program
QA&CPD	Quality Assurance & Continuing Professional Development
RACGP	Royal Australian College of General Practitioners

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Introduction

Medical acupuncture is acupuncture treatment provided by a medical practitioner who:

- is registered with the medical board to practice medicine



- has the skills to take an appropriate history
- has the skills to perform an appropriate physical examination
- has the knowledge, training and ability to perform ancillary tests including but not restricted to the following: blood tests, urine tests, x-rays, CT scans, MRI scans and nuclear imaging scans
- has the ability to make a medical diagnosis using the findings from the history, examination and ancillary tests
- has the ability to provide treatment which may include acupuncture if appropriate

Medical Acupuncture has been practised in Australia for at least thirty-five years. The Australian Medical Acupuncture Society (AMAS) was founded in Victoria in 1973 by three medical practitioners with a common interest in acupuncture. The AMAS developed over the subsequent years as doctors in each state sought training from fellow doctors experienced in medical acupuncture. As the AMAS membership grew it established standards for education and formal examination culminating in the establishment of the Fellowship in Medical Acupuncture.

It became the Australian Medical Acupuncture College (AMAC) in 1999 following a revision of the constitution with an emphasis on its role in setting national education standards for medical acupuncture. In recent years the AMAC has come to represent its members in negotiations with the Federal Government in developing new item numbers for medical acupuncture in the Medicare Schedule, establishing standards of practice in co-operation with the Royal Australian College of General Practitioners and in providing advice to Medicare Australia through the Professional Review Division.

AMAC is the peak body for Medical Acupuncture.



AMAC Education Program

Aims of Education Committee

1. To develop best practice standards of education and training for all doctors, uniformly, in all states of Australia.
2. To develop a core-curriculum for training of doctors in acupuncture by the AMAC and for other AMAC accredited courses.
3. To provide appropriate Continuing Medical Education programs for doctors at all stages of their training.
4. To provide educational activities to members as preparation for the Fellowship Examinations of the Australian Medical Acupuncture College.
5. To develop undergraduate and postgraduate tertiary training programs in acupuncture for all states.
6. To advise government and non-government organisations on matters regarding standards in education and training for acupuncture practice by medical practitioners.
7. To establish Medical Acupuncture as a specialty.
8. To make recommendations to the Board of the AMAC for consideration and ratification.
9. To liaise with the other AMAC Subcommittees in the implementation of the above aim.
10. To further research the neurophysiological and pharmacological effects of acupuncture.



Objectives of Education Program

1. An understanding of the conceptual basis of acupuncture
2. An understanding and application of the physiological basis for acupuncture
3. Acquisition of the necessary critical appraisal skills to evaluate the literature and to apply the current best available evidence to clinical practice
4. The ability to locate and define the function of acupuncture points
5. An understanding of, and the ability to competently use, the various modalities of acupuncture treatment
6. Ability to take an appropriate medical history and perform a focused physical examination, skills which are integral to medical management using acupuncture
7. Safe and ethical application of medical acupuncture

Pre-requisites for Medical Acupuncture Training

(see appendix for more detailed discussion)

The training of medical practitioners in Australia in the practice of acupuncture is premised on:

- I. a detailed theoretical knowledge of basic and biomedical sciences and the pathophysiology and treatment of disease, acquired in either undergraduate and/or post-graduate tertiary training at recognised universities.
- II. supervised clinical training at undergraduate or post-graduate level, a minimum of two years supervised hospital training and a three year minimum specialist-level training leading to a nationally accredited examination set by the appropriate specialist college.



- III. registration by the Medical Board of each state, which is renewed annually and which requires the completion of a minimum number of compulsory continuing professional development and quality assurance points, verified by the appropriate college.

Only after these criteria have been fulfilled, can the medical practitioner commence basic medical acupuncture training.

Basic Medical Acupuncture Training Program

History and Philosophy

The three thousand year history of Chinese Medicine and the philosophy underlying the concepts which have led to the development of a system of medicine, one aspect of which is the practice of acupuncture, will be introduced in this section.

Principles of Traditional Chinese Medicine (TCM)

The principles of Traditional Chinese Medicine (TCM) and physiological concepts on which they are based, which form part of the practice, will be described in this section. Concepts such as Yin and Yang and Qi will be explored here. The pathophysiology of illness and its role in the pathogenesis of disease will be described.

Channels and Points

The twelve regular Channels and their internal connections, the eight Extraordinary Channels, the Luo, Divergent and Tendinomuscular Channels will be presented in this section. Microacupuncture systems e.g. scalp and ear will also be presented. Location of acupuncture points, function and usage of these points will be described and clinically demonstrated.

Methods of point selection and use of point combinations will be described. Classical theories of point selection and their use according to “correspondences” and organ function will be included.



Neurophysiology of Acupuncture

The neurophysiology of acupuncture and the responses elicited by stimulating acupuncture points will be described. The physiology of needle insertion and electrical stimulation will be covered. Neurological pathways and neurotransmitters in the peripheral and central nervous systems will be outlined. Non-specific acupuncture effects and an understanding of the placebo effect will be discussed.

Modalities of Stimulation

Modalities of stimulation of acupuncture point include needling, electrical stimulation, laser, moxibustion and cupping. These will be taught in terms of their application, indication and mechanisms of action.

Safety, Precautions, Side Effects and Contraindications

The practice of medical acupuncture has unique medico-legal aspects that need to be recognised and understood. Issues, such as informed consent, note taking and management of adverse events will be taught. An understanding of the precautions in the use of acupuncture and the range of mild to potentially serious complications that can arise from treating patients with acupuncture will be taught. This will include consideration of HIV and hepatitis, transmission and precautions. Contraindications to acupuncture, in particular medically hazardous situations where acupuncture is not appropriate, will be included in this section.

Evidence Based Acupuncture

The ability to critically evaluate acupuncture literature to guide clinical practice is an essential requirement for medical acupuncture, as it is for medical practice.

Differentiating the anecdotal and empirical application of traditional knowledge from scientifically based knowledge is a cornerstone of medical acupuncture. The principles of evidence-based medicine as applied to the clinical practice of medical acupuncture will be taught.



Clinical Practice of Acupuncture This will include techniques in the practical application of acupuncture, the use of different modalities, complications and safety aspects, ethical and legal considerations and therapeutics. “Best available evidence” as it applies in each clinical encounter will be taught.

Clinical Attendance in Acupuncture

A minimum number of 30 hours of clinical training is required with supervision by a Fellow of AMAC or an accredited medical practitioner with equivalent acupuncture experience and expertise. A log book of attendance is to be kept by the attendee and signed by the mentor. At each attendance, the mentor will assess the attendee’s clinical acumen, knowledge of acupuncture therapeutics and knowledge of point selection. Video case presentation can be developed as an option for rural and remote members.

Assessment Criteria

At nominated stages during the basic medical acupuncture course, assessments will be made of a student’s performance with both written and oral examinations. At completion of the course, including compulsory clinical attendance, the student is eligible to sit for Part 1 of the Fellowship of the Australian Medical Acupuncture College examination. Part 1 of the examination (or its equivalent) is now the “Entry” level qualification required to achieve accreditation for the practice of medical acupuncture.

Part 2 requires the doctor to have incorporated medical acupuncture into his/her medical practice. At this level the doctor is expected to be a role model for others aspiring to practise medical acupuncture, be a teaching resource, and mentor.

Additional Requirements

Continuing Professional Development

There is a compulsory requirement for CPD points for Medical Acupuncture in each CPD triennium which ensures ongoing education in acupuncture.



Accreditation Requirements

All Medicare Registered General Practitioners practising Medical Acupuncture and billing against Medicare Item numbers 193, 195, 197 and 199 must be accredited by the JCCMA and participate in ongoing CPD requirements to maintain eligibility with Medicare Australia.

The following criteria for accreditation and ongoing Medical Acupuncture CPD requirements have been developed by the JCCMA. This program aims to encourage peer interaction, case discussion and the critical appraisal of acupuncture treatment taking into account latest research, rather than an individual reflection on acupuncture practice in isolation.

To qualify for Medical Acupuncture accreditation medical practitioners must:

- Have successfully completed a JCCMA accredited training course in Medical Acupuncture. This would include a minimum of 100 hours of formal teaching, 30 hours of face-to-face teaching with an assigned mentor who must be a Fellow of the AMAC or an accredited medical practitioner with equivalent acupuncture experience and expertise
- Have successfully completed Part 1 of the AMAC Fellowship examination.
- Participate in a recognised continuing medical education program for the maintenance of ongoing Medical Acupuncture requirements each triennium.

Either the RACGP QA&CPD program or the Australian College of Rural and Remote Medicine (ACRRM) PDP is appropriate.



Core Curriculum

1. History and Philosophy

2. Basic Principles

2.1 The Principle of Qi, Blood and Body Fluids

2.2 The Eight Principles

2.3 Five Element theory

2.4 Functions of Zang-Fu Organs

2.4.1 Liver-Gallbladder (LR-GB)

2.4.2 Spleen-Stomach (SP-ST)

2.4.3 Kidney-Bladder (KI-BL)

2.4.4 Heart-Small Intestine (HT-SI)

2.4.5 Lung –Large Intestine (LU-LI)

2.4.6 Pericardium-Triple Energiser (PC-TE)

2.5 Levels of disorders of Qi, Blood, Viscera

3. Channels and Points on the 12 Paired Channels

3.1 Lung (LU)

3.2 Large Intestine (LI)

3.3 Stomach (ST)

3.4 Spleen (SP)

3.5 Heart (HT)



3.6 Small Intestine (SI)

3.7 Bladder (BL)

3.8 Kidney (KI)

3.9 Pericardium (PC)

3.10 Triple Energiser (TE)

3.11 Gall Bladder (GB)

3.12 Liver (LR)

4. Extraordinary Channels and Special Points

4.1 Extraordinary Channels (including Conception and Governing Channels)

4.2 Other internal connecting Channels

4.3 Back Shu, Front Mu points (Associated and Alarm points)

4.4 Source points

4.5 Xi Cleft points

4.6 Influential points

4.7 Area of influence points

4.8 Luo points

4.9 Extra points

4.10 Confluent points

4.11 Ah-Shi points



5. Microacupuncture Systems

5.1 Ear

5.2 Scalp

6. Physiology - Scientific Aspects of Acupuncture

6.1 Physiological pathways of pain

6.2 Neuro-transmitters and neuro-modulators

6.3 Autonomic nervous system and its role in acupuncture

6.4 Other theories

7. Clinical Practice of Acupuncture

7.1 Clinical attachment to FAMAC mentor, at hospital outpatient clinic and/or at private clinic

7.2 Clinical case studies

7.3 Clinical audit

7.4 Methods of Stimulation

The following items will be taught and demonstrated; indications and contraindications will be discussed:

- Needling - types of needles, methods of insertion, consideration of sterility, methods of manipulation of the needle once inserted
- Massage of acupuncture points
- Moxibustion - the use of heat, either directly applied, or used to heat needles
- Electrical stimulation



- Laser - parameters of the various devices available
- Cupping
- Other methods of diagnosis & treatment

8. Safety, Side Effects, Precautions and Contraindications

Acupuncture is an extremely safe method of treatment when used by appropriately trained medical practitioners. The following list of possible problems will be discussed. Prevention and management of these will be taught:

- Haemorrhage
- Organ puncture
- Infection
- Hypotension / vasovagal reactions
- Lymphoedema
- Somnolence
- Pregnancy
- Strong responders and children

9. Therapeutics

9.1 Neurology

9.2 Respiratory

9.3 Ear, Nose and Throat (ENT)

9.4 Cardiovascular

9.5 Gastroenterology



9.6 Gynaecology and Obstetrics

9.7 Paediatrics

9.8 Psychiatry - including addictions, smoking, obesity

9.9 Dermatology

9.10 Haematology

9.11 Ophthalmology

9.12 Sports medicine, orthopaedics, rheumatology, musculo-skeletal
medicine (including trigger points)

9.13 Genito-urinary

9.14 Endocrinology

9.15 Miscellaneous – Chronic fatigue syndrome, immunological disorders, cancer

Appendix

Pre-requisite requirements prior to undertaking basic Acupuncture training:

- Undergraduate medical course or postgraduate medical course including anatomy, physiology, biochemistry and molecular biology, physics, cell biology, microbiology, pharmacology and toxicology, orthopaedics, emergency medicine, endocrinology, psychiatry, haematology, pathology, cancer medicine, ENT, neurology, general surgery, general medicine, immunisation, paediatrics, infectious diseases, obstetrics and gynaecology, geriatrics, community medicine, dermatology, radiology including MRI, CT, Ultrasound, Xray and nuclear imaging followed by
- Hospital training followed by
- General Practice or other Specialties training.



Hours of Training:

- Medical course 6 years
- Hospital 1-4 years
- General Practice training 4 years • Specialist training 4-8 years
- CPD requirements, compulsory and ongoing for both general practice and acupuncture or any medical specialty and acupuncture
- Medical acupuncture training, minimum of 100 hours of lectures, clinical demonstrations and clinical attachments

Recommended Texts

Basic texts

- Medical Acupuncture: A Western Scientific Approach.
Ed: Filshie J. & White A. Churchill Livingstone. 1998.
- Chinese Acupuncture and Moxibustion.
Foreign Languages Press, Beijing. 1999.
- Practice of Acupuncture: Point location, Treatment Options, TCM Basics.
Hecker H.U. Thieme International. 2005.
- The Channels of Acupuncture.
Maciocia G. Churchill Livingstone. 2006.
- Acupuncture: A Scientific Appraisal.
Ernst E. & White A. Butterworth Heinemann. 1999.
- How to Read a Paper: The Basics of Evidence-Based Medicine.
Greenhaigh T. Blackwell Publications. 2005.



- Microsystems Acupuncture: A complete guide; Ear, Scalp, Mouth, Hand.
Hecker H.U. Thieme International. 2006.
- Close to the Bone.
Legge D. Sydney College Press. 2000

Journals

- Journal of the British Medical Acupuncture Society.
- American Journal of Acupuncture (online).
- Journal of the Australian Medical Acupuncture College.



AUSTRIA



AUSTRIA

NATIONAL/REGIONAL ACUPUNCTURE PRACTICES

A. Type(s) of Medical Acupuncture most commonly practiced:

1. TCM

- Traditional Chinese Medicine (TCM): a diagnostic and therapeutic system, established in china more than 2000 years ago.

2. Scalp Acupuncture

- Yamamoto's New Scalp Acupuncture

3. Hand Acupuncture

- Korean

4. Auricular Acupuncture

- a microsystem as described by Paul Nogier

B. Education/Training Requirements

Medical Acupuncture Modality	Theoretical Hours	Clinical Hours	Proficiency Testing	Preliminary Practice
TCM	120	60	Y	N
Scalp Acupuncture	-	-	-	-
Hand Acupuncture	-	-	-	-
Auricular Acupuncture	-	-	-	-

20 hours of case reports and oral and written test will complete the education.



CORE CURRICULUM

Traditional Chinese Medicine (TCM)

Theory starts with general scientific knowledge of acupuncture, definition of an acupuncture point, meridians, segmental influence, analgetic effect, indications, contraindications. Within two lessons pupils get to know the localisation and indications of 120 acupuncture points. Instructions of different needling techniques, different forms of stimulation and the use of laser or moxa are issued. Basic theories of TCM such as Yin-Yang, Qi, Xue, JinYe, Shen, Zang Fu are explained. Different constitution types, syndromes according to Ba Gang, pulse and tongue diagnostics complete the theoretical part.

In the outpatient acupuncture clinic of the “Kaiserin Elisabeth” Hospital students are trained in anamnestic criterias like the Sizhen and how to generate an energetic acupuncture program. They are allowed to treat patients with acupuncture under the supervision of two general practitioners.

Acupuncture Microsystems (Scalp, Hand, Auricular)

Scalp acupuncture practiced is according to Yamamoto.

Hand acupuncture practiced is Korean.

Auricular acupuncture is taught according to the book of Rudolf Bucek (Praxis der Ohrakupunktur, ISBN-13: 978-3830470281).



BELGIUM



BELGIUM

NATIONAL/REGIONAL PRACTICES

A. Type(s) of Medical Acupuncture most commonly practiced:

1. Traditional Medical Acupuncture

- Based on the Traditional Chinese Medicine with the meridians and classical points as a beginning and the Zang Fu theory as a guideline for treatment. Modern western aspects as neurophysiology and trigger points complete our course.

2. Auriculotherapy

- Based on Nogier but now a day also on the modern view of David Alimi in France who makes the correlation between auriculo and neuro-anatomy.

3. Scalp Acupuncture

- Scalp Acupuncture based on Chinese and Japanese (mainly Yamamoto New Scalp Acupuncture) theory

4. Electroacupuncture and laser

- Electroacupuncture on basis of the Traditional Chinese Medicine

B. Education/Training Requirements

Medical Acupuncture Modality	Theoretical Hours	Clinical Hours	Proficiency Testing	Preliminary Practice
3 years	100x3	24	Each year	M.D.



CORE CURRICULUM

Instructors are MD's with qualified acupuncture training and experience

The assessment procedures with the theoretical courses involves patient presentations. Every year there is an examination that is obligatory to follow the next year.

ACUPUNCTURE COURSE of the Belgian Medical Acupuncture Association.

First Year

SCHEDULE:

First session:	9.30 - 11.00
Second session:	11.15 - 12.45
Third session:	14.00 - 15.30
Fourth session:	16.00 - 17.30

First WE :

Saturday : First session :

Welcome, general introduction in acupuncture and history of Chinese Medicine

Development of the course

Literature list

Second session and third session :

Generalities about YIN-YANG, Five Elements, Fundamental Substantions, Zang FU etc.

Elemental notions about TCM pathology:

disturbance of YinYang/Xue-Qi, Zang Fu,

Pathogen Factors,

General knowledge about Acupuncture points, Meridians,

Indications for acupuncture

Fourth session :

Modern scientific data concerning acupuncture, current state of research

Sunday : First session :

Study of the LUNG Meridian (Positioning in

TCM, meridian path of principal meridian and

secondary vessels, anatomy, physiology interims



- of TCM, elemental pathology and indications,...)**
- Second session :
- LARGE INTESTINE-Meridian: idem**
- Second WE :
- Saturday: First , second and third session :
- STOMACH and SPLEEN-meridians : theory and practice**
- Fourth session:
- Generalities about ethiopathogandese of illnesses and practical exercises in localization of already known points**
- Sunday: First and second session:
- TRIPLE HEATER and PERICARDIUM-meridians : theory and practice including the physiology of SAN JIAO**
- Third WE :
- Saturday: First, second, third and fourth session:
- LIVER and GALBLADDER-meridian: theory and practice**
- Sunday: First session:
- General notions about diagnostic (the four phases of examination)**
- Second session:
- Modern scientific data and neurophysiology (continuation)**
- Fourth WE :
- Saturday: First, second, third and fourth session :
- KIDNEY and BLADDER-meridian : theory and practice**
- Sunday: First and second session:
- HEART and SMALL INTESTINE-meridian : theory and practice**
- Fifth WE :
- Saturday: First and second session:
- General knowledge about Extraordinary Vessels; RAND MAI and DU MAI**
- Third and fourth session:
- Acupuncture instrumentarium (needles, moxa, cupping, ...)**
- Practice**
- Sunday: First and second session:
- Extra-meridian points**
- Ma-Dan-Yang-points**
- Sixth WE :
- Saturday: First session and second session:
- Overview of the most main acupuncture points**

**(slides of Chand Kai-Yan)**

Third session:

Introduction in Chinese scalp acupuncture

Fourth session:

Practice

Sunday: First and second session:

The ACUPUNCTURE SESSION**Simple acupuncture recipes to spur on the pupils to start using acupuncture in their own practice**

Seventh WE:

Saturday: Four sessions:

Repetition and eventually addition of theoretically and practically data like meridian pathology and secondary vessels**Occasion to ask questions about the exams****Treatment of patients with simple problems**

Sunday: First and second session:

Repetition

Eighth WE :

Saturday: Four sessions:

Auriculotherapy – first degree**Second year**

First WE:

Saturday: First, second, third and fourth session:

Introduction to the patho-physiology of Zang Fu in TCM

Sunday: First and second session

TONGUE-diagnosis

Second WE:

Saturday: First and second session:

Dialectic diagnosis: The EIGHT PRICIPLES (BA GANG). The FOUR PHASES of the clinical examination, except the Tongue and the Pulse

Third and fourth session:

Pathology of ZANG FU: HEART and LIVER

Sunday: First session:

Ethiopathology or Causes of the diseases in T.C.M.

Second session:

Pathology of the ZANG FU : KIDNEY

Third WE:

Saturday: First and second session :

Ritmology and chrono-acupuncture (brief overview)



Patho-physiology of mental illnesses.

Third and fourth session:

Pain treatment through AH-SHI or TRIGGER points

Sunday: First and second session:

Continuation of AH-SHI points with practice

Fourth WE:

Saturday: First and second session:

Pathology of ZANG FU: SPLEEN

Pathology of ZANG FU: STOMACH

Third and fourth session :

Continuation and clinic of SPLEEN and STOMACH

Sunday: First and second session:

Pathology of ZANG FU: LUNG

Clinic and practice of LUNG

Fifth WE:

Saturday: First and second session:

Peripheral and External pathology (Introduction and symptomatic treatments)

Third and fourth session:

Introduction to the Physiopathology of the concepts WIND (FANDG), COLT (HAN), DAMP (SHI) and PHLEGM (TAN)

Sunday: First and second session:

PULSE-diagnosis

Sixth WE:

Saturday: First and second session:

BI – SYNDROMES (theory and practice)

Third and fourth session:

Electro-acupuncture and laser, theory and practice

Sunday: First and second session :

Practice of Tongue and Pulse

Seventh WE:

Saturday: First, second, third and fourth session:

Treatment of BACKPAIN by Traditional Acupuncture

Treatment of HEADACHE by Traditional Acupuncture

Clinic and practice

Repetition

Sunday: First and second session:

Electro-acupuncture (continuation) with clinic and practice



Third Year

First WE :

Saturday: First session:

Cardiovascular pathology

Second session:

Clinic of Cardiovascular pathology

Third and fourth session:

Pathology of Phlegm

DIGESTIVE PATHOLOGY (part1) (diarrhea, constipation, abdominal pain, nausea, vomiting,...)

Sunday: First session:

DIGESTIVE PATHOLOGY (part 2)

Second session:

Clinic of digestive pathology

Second WE :

Saturday: First and second session:

Feeding and dietetics in TCM (feeding and the Five Phases, feeding and YIN/YANG, ...)

Third and fourth session :

Acupuncture in PEDIATRICS (needling children, pediatric pathology,)

Sunday : First and second session:

LUNG PATHOLOGY and ASTHMA

Third WE :

Saturday: First session:

The SIX LEVELS and the penetration of Pathologic Factors according to the SHANG HAN LUN.

Second session:

Psychic diseases

Third and fourth session:

Clinic

Sunday: First and second session:

COMBINED SYNDROMES

Fourth WE :

Saturday: First and second session:

Penetration of the Pathologic Factors according to the WAND BING (Four layers)

Clinic

Third and fourth session:

PAIN CLINIC : difficult pain syndromes (phantom pain, post zoster pain, trigeminal neuralgia,)

Sunday: First and second session:



ANDT pathology : theory and practice (rhinitis, hayfever, hoarseness, Meunière,...)

Fifth WE :

Saturday: First and second session:

Gynecological pathology (menstrual problems, premenstrual syndrome, menopausal syndrome, etc..)

Clinic

Third and fourth session:

Acupuncture during pregnancy and partum

Sunday: First and second session:

EXTAORDINARY VESSELS (repetition and pathology)

Clinic

Sixth WE :

Saturday: First and second session:

PATHOLOGY of the BLOOD (hypertension, CVA,..) clinic

Clinic

Third session:

Ophthalmology (conjunctivitis, iritis, blurred vision, glaucoma,)

Clinic

Fourth session:

Dermatology (urticaria, eczema, psoriasis, zona, .)

Clinic

Sunday : First and second session:

LIN-SYNDROMES (urinary pathology: cystitis, prostatitis...)

Enuresis, impotency, infertility, etc...)

Seventh WE :

Saturday: Four sessions:

Clinic

Repetition of asked subjects (for back pain, headache...)

Discussion and examinations

Eighth WE:

Saturday: First, second, third and fourth session:

Auriculotherapy – second degree



BULGARIA



BULGARIA

NATIONAL/REGIONAL ACUPUNCTURE PRACTICES

A. Type(s) of Medical Acupuncture most commonly practiced:

1. TCM

- Stimulation by needling of specific points on the body surface with intention by restoring and maintenance the Yin Yang balance to obtain particular therapeutic effects or influence capacity of the body to correct physical and energetic dysfunctions.

2. AURICULAR ACUPUNCTURE

- Microsystems are a subset of Acupuncture Theory where the whole body is treated by using a single part . The most well known and widely practiced Microsystem acupuncture is Auricular Acupuncture which fundament is Dr. Nogier's theory of the somatotopic correspondence of specific parts of the body to the ear based upon the concept of an inverted foetus. In the auricular microsystem acu - points on the outer ear are treated either needles or other devices to help relieve many chronic complains

3. SU JOK ACUPUNCTURE

- Similarity (Homo) is the basic principle of this method. Our entire body in miniature is represented in our hands and feet. In view of the exact similarity of the hands and feet any place and problem in the body can be influenced using the Su Jok correspondence treatment.



B. Education/Training Requirements

Medical Acupuncture Modality	Theoretical Hours	Clinical Hours	Proficiency Testing	Preliminary Practice
TCM	500	500	Y	Y
Auricular Acupuncture	40	40	Y	N
Su Jok Acupuncture	30	30	N	N

CORE CURRICULUM

TCM

The education in TCM is divided into two practically undividable/ like Yin and Yang/ parts - Theory and Practice in TCM , following several steps :

1. TCM Theory:

A. Historical overview of TCM .The philosophy of Chinese Medicine. Introduction to the basic theories-Yin Yang, Five Elements / Phases/, Zang Fu , Qi and Blood. Deqi.

B. A thorough study of The Acupuncture Channels and Collaterals. Acu-points. Classification of points-the top most commonly used points,Back Shu and Front Mu points, Connecting Luo Points, Eight Opening and Coupled Points,The six Divisions, etc.

C. Principles of Chinese diagnosis and treatment- Etiopathogenesis of the disease from the TCM point of view. Syndrome analysis /Yin-Yang, Excess- Deficiency , Heat-



Cold, Chinese and Western approach. Special emphasis on Chinese pulse and tongue diagnosis.

D. Contemporary scientific explanation of the mechanism and action of acupuncture. Modern related techniques – electroacupuncture, laserpuncture.

E. Microsystems in acupuncture-auriculopuncture, scalp acupuncture-special courses.

F. The educational program continues with some courses in Chinese herbs application and using the food as a drug according to Five Elements.

2. TCM Practice:

A. Education in the practical application of acupuncture starts with detailed understanding of the Acupuncture channels and Collaterals. Extraordinary points. Locating the acu-points, their action and most common indications. Principles of point selection /according to area, to syndromes, to diseases and to empirical knowledge and clinical practice.

B. Needling considerations-techniques, depth, angles, contraindications. Needle sizes and types. Cun measurements.

C. Moxibustion and cupping therapy-general cautions, methods, points contraindicated for moxibustion.

D. Clinical acupuncture practice.Treatment by means of TCM of common illnesses from different fields of the medicine-internal medicine, neurology, psychiatry, dermatology, gynecology, sport medicine, ORL,ophthalmology, etc. The practice is supervised by highly educated and experienced medical acupuncture doctors.

TCM training in Bulgaria is a part of the postgraduate education for medical and dental doctors. Though acupuncture has not got the status of separate medical speciality, we have confidence and ambition to educate theoretically and practically skilled, clinically thinking medical acupuncturists.



AURICULAR ACUPUNCTURE

The training covers :

1. Anatomy, embryology, innervation and pathology of the ear.

Detailed learning of Nogier's theory and Auricular maps and examining approximately 120 auricular points. Development of the Auricular model to Three Phase System. Ear and its interrelationship with treating chronic conditions and pain management .

2. Safe Auricular Acupuncture needling practice. Related techniques- electrical and laser devices, magnets and pellets.

3. Training the students to administer 5-point Detox Protocol - specialized program for treating Mental Health problems - Stress, Anxiety, Depression, Insomnia, Drug and Alcohol addiction.

4. Clinical practice under supervision of skilled medical acupuncturists that is helping to obtain clear and correct diagnosis and acupuncture treatment.

SU JOK ACUPUNCTURE - NEW KOREAN HAND AND FOOT ACUPUNCTURE

The educational course includes:

1. First level.

A. Main correspondence system-each organ and part of the body have their own projection on the hand and the foot.

B. Correspondence system "Insect"-save on the hole hands and feet the miniature body image is also located on each toe and finger separately.

2. Second level.



The Meridian system present in the body is also reflected in the hands and feet. This phenomenon makes possible to do metaphysical energy manipulation therapies using Six Ki, Six Emotions and Six Reasons theories.

Su Jok Acupuncture is simple and convenient to use. During all the course there are a lot of clinical examples and practical cases to discuss which makes the method easy to acquire.



CANADA



CANADA

NATIONAL/REGIONAL PRACTICES

A. Type(s) of Medical Acupuncture most commonly practiced:

1. Classical Traditional Chinese Acupuncture

- Classical Traditional Chinese Acupuncture is based on Traditional Chinese philosophy (Yin/Yang, five elements, organ systems, Qi, blood essence and fluid, organ clock, and others)

2. Neuro-Anatomical Acupuncture

- Neuro-Anatomical Acupuncture is based on central, autonomic, sympathetic, para-sympathetic nervous systems, and dermatome nerve roots

3. Body, Mind, and Spirit Acupuncture

- Body, Mind, and Spirit Acupuncture is based on vital energetic alignment. The key therapy is to re-align the energy of the body.

4. Micro-System Acupuncture

- Micro-System Acupuncture is based on various micro-systems such as (auricular, scalp, nose, hand, and feet). The most popular practice is auricular scalp and hand acupuncture.



B. Education/Training Requirements

Medical Acupuncture Modality	Theoretical Hours	Clinical Hours	Proficiency Testing	Preliminary Practice
Classical Traditional Chinese	120	135	Y	Y
Neuro-Anatomical Acupuncture	?	?	?	?
Body, Mind, and Spirit Acupuncture	?	?	?	?
Micro-System Acupuncture	?	?	?	?

CORE CURRICULUM

1. Classical Traditional Chinese Acupuncture

Core curriculum covers essential topics such as TCM theory and philosophy, TCM etiology and pathogenesis, Yin and Yang, Qi (vital energy) circulation, Tao, the organ/meridian system, Five Elements/Phases theory, the nature of acupoints, the location of acupoints, and TCM diagnostics.

Students will develop practical skills in various TCM therapies and Traditional Chinese medical diagnosis. Topics include the indications, contraindications, complications, and precautions of acupuncture as well as the differentiation of syndromes, and various diagnostic procedures (tongue, pulse, ryodoraku and accu-o-matic). Ancillary techniques are also covered, including acupressure, moxibustion, cupping, electroacupuncture and plum blossom needling.

Core training would help students develop an understanding of the TCM theory of microsystems, which pertains to holographic representation of physiology in various peripheral localizations on the human body. Training encompasses the theory and



application of the major microsystems, including the hand, nose, foot, scalp, and ear (auricular acupuncture).

Core curriculum provides basic “hands on” experience in TCM diagnostic and therapeutic skills in the clinical application of acupuncture. It covers the basic principles for the prescription and selection of acupuncture points and the development of viable treatment plans for various disorders in order to enhance the well-being and quality of life of patients. TCM clinical problem-solving in a spirit of genuine compassion is emphasized.

Teachers are trained in TCM and Western Medicine. They would *tend* to have an undergraduate medical degree (M.D., O.M.D., or C.M.D.).

Assessment would be done by written and oral examination.

2. Neuro-Anatomical Acupuncture

NO INFORMATION PROVIDED

3. Body, Mind, and Spirit Acupuncture

NO INFORMATION PROVIDED

4. Micro-System Acupuncture

NO INFORMATION PROVIDED



CROATIA



CROATIA

NATIONAL/REGIONAL ACUPUNCTURE PRACTICES

A. Type(s) of Medical Acupuncture most commonly practiced:

1. TCM

- TCM is an ancient system of health care from China. TCM is based on a concept of balanced Qi that is believed to flow throughout the body. The main purpose of Qi is to regulate a persons emotional, mental and physical balanced and to be influenced by the opposing forces of Yin and Yang. Disease is proposed to result from the flow of Qi being disrupted and Yin and Yang becoming imbalanced. Components of TCM are acupuncture, massage, physical exercises herbal and nutritional therapy.

2. AURICULAR ACUPUNCTURE THERAPY

- Auriculotherapy, ear acupuncture applies the principles of acupuncture to specific points on the ear. Healing processes can be promoted by working with these points on the ear because the ear contains many blood vessels and nerve endings, that when stimulated, influence the organs and bodily functions. In modern times auriculotherapy has been advanced by Dr Paul Nogier of France. Dr Nogier believed that the ear is shaped like an upside down human fetus. The acupuncture points on the ear correspond to the body parts of the fetus shape. Stimulating these points on the ear the corresponding organs and bodily processes would be stimulated by nerve impulses.



B. Education/Training Requirements

Medical Acupuncture Modality	Theoretical Hours	Clinical Hours	Proficiency Testing	Preliminary Practice
TCM	250	100	Y	N
Auricular	32	32	N	N

CORE CURRICULUM

TCM ACUPUNCTURE

AURICULAR ACUPUNCTURE

The educational program includes Chinese classic texts like Nei Jing, and Nan Jing and modern scientific studies on the mechanism and action of acupuncture and Auriculoacupuncture.

The process of training starts with the basic theories of Chinese medicine: Yin and Yang theory, Five Phases theory, theory of Zang Fu organs, theory of Qi, Blood and Body Fluid, theory of channels and collaterals, There is a stepwise education in traditional Chinese medical physiology, pathology and pathogenesis then in diagnosis, syndrome analysis, and treatment principles. Therapeutic techniques include acupuncture, moxibustion, cupping therapy, electro-acupuncture, and auricular therapy. The process of training then progresses to a series of courses on clinical acupuncture and auriculoacupuncture practice. These include the common illnesses of internal medicine, dermatology, ENT, obstetrics and gynecology, ophthalmology, neurology, psychiatry.



CYPRUS



CYPRUS

NATIONAL/REGIONAL ACUPUNCTURE PRACTICES

A. Types of Medical Acupuncture most commonly practiced

1. TCM – traditional Chinese medicine

- a. Classic acupuncture
- b. Moxibustion
- c. Cupping
- d. Point massage

2. ACUPUNCTURE MICROSYSTEM

- a. Auriculo acupuncture
- b. Cranical scalp acupuncture
- c. Sujok KOREAN acupuncture
(palmar-plantar acupuncture)

3. NON-INVASIVE METHODS

- a. Transcutaneous electrostimulation
- b. LASER stimulation
- c. Magnetic and electromagnetic field stimulation

4. ELECTROACUPUNCTURE AND ELECTRO-ANESTHESIA

5. NEURAL THERAPY

Point injection or pharmaco-acupuncture



B. EDUCATION

The theoretical and practical program is 250 hours for licenced physicians. Time devoted to theory vs. clinical practice 2:5

CORE CURRICULUM

ACUPUNCTURE AS NON-DRUG THERAPY IN MEDICAL CORE Historical background of acupuncture. Deontology.

TCM ACUPUNCTURE

THEORIES FOR THE EXPLANATION OF THE MECHANISM OF ACUPUNCTURE.

a. **BASIC** Theories of traditional Chinese medicine: Vital Energy – Chi or Qi, YANG-YIN, TSANG-FU, theory of “five elements” pathogenic factors in TCM.

b. **MODERN SCIENTIFIC** views.

Neurophysiological aspects: The role of reflex activation of the somatic sensory and autonomic nervous sensory and automatic nervous system: Receptors, Receptive fields, afferent neurons A and C Fibres, axonal transport.

Chemical basis for synaptic transmission: morphology of synapse gap, biosynthesis of transmitter substances: opioid peptides – endorphines, enkephalines, dynorphin, prostaglandins, substance P, cholecystokinin and other inhibitors.

THE MOST SIGNIFICANT AND BENEFICIAL EFFECTS OF ACUPUNCTURE

Analgesia, vasodilatation, bronchodilatation, immune response, relaxation of spastic muscle.

BASIC PRINCIPLES OF CHINESE MEDICAL DIAGNOSTIC METHODS

a. Listening, examination by questions (interrogation), inspection (visual examination) auscultation.



- b. Identification and classification of syndromes: “eight principles” or four parts YIN-YANG, harmony-disharmony, superficial-internal, emptiness-fullness, deficiency-excess, coldness-hotness”.
- c. Determination of etiology: six external factors (cold, fire, wind, heat, dryness, humidity), SEVEN internal/Emotional factors (excessive joy, anger, worry, overthinking, sadness, fear, surprise).

BASIC KNOWLEDGE of ACUPUNCTURE TREATMENT

Clinical diagnosis and differential diagnosis, selection of points, methods of combining points.

ACUPUNCTURE POINTS

Anatomical and pathophysiological aspects of acupuncture points. Methods of locating points. The points of fourteen meridians. Extraordinary points. Rules for selecting points for therapy.

MERIDIANS (CHANNELS) AND COLLATERALS

- a. The concept of fourteen meridians. The course and their pathological symptoms.
- b. The concept and pathology of extra meridians.

ACUPUNCTURE MICROSYSTEM

Anatomical and pathological aspects, indications and contraindications. Selection of points or zones stimulation.

1. AURICULO ACUPUNCTURE
2. OPHTHALMO
3. CRANIAL-SCALP
4. ORAL
5. NASAL
6. PALMAR
7. VAGINAL
8. PLANTAR



ACUPUNCTURE EQUIPMENT

Needles, cupping, moxa, electro, laser, magnets, ultrasound.

ACUPUNCTURE TECHNIQUES

I. INVASIVE METHOD STIMULATION

- a. Needling acupuncture:
 - GENERAL knowledge
 - Needle selection and sterilization
 - Insertion, direction, depth and manipulation
 - Methods of stimulation, acupuncture.
 - SENSATION-TECHI OR DEQI, BU methods-
 - Reinforcing and XIE-Reducing, and therapeutic effects.
 - Complications which may occur in acupuncture, prevention and management.
- b. Other needling methods:
 - Intradermal imbedding needles.
 - Three edged needle
 - plum blossom needle
 - Long Mang needles.
- c. Point injection or pharmacoacupuncture.
- d. Surgery or strong stimulation method

II. NON-INVASIVE METHOD STIMULATION

- a. Moxibustion and cupping stimulation or thermo-cryoacupuncture stimulation. Definition, indications, manipulation, remarks.
- b. Laser-light or photoneedle stimulation
- c. Ultrasound stimulation
- d. Magnetic and electro-magnetic field stimulation. Micromagnetics.
Electro-acupuncture stimulation.



ACUPUNCTURE ELECTRO-ANESTHESIA

- History, definition, indications and contraindications
- Limoge current and transcutaneous CRANIAL electrical stimulation and neurolept anesthesia for MAJOR SURGERY.

CLINICAL TREATMENT – ACUPUNCTURE THERAPY

Application of acupuncture stimulation in different fields of medicine:

Internal diseases

Pediatric

Neuropsychiatric diseases

Surgical diseases

Gynaecological and obstetric diseases

Urogenital diseases

Sense organ diseases

Acupuncture for quitting smoking, excessive eating, alcohol.



GEORGIA



GEORGIA

NATIONAL/REGIONAL ACUPUNCTURE PRACTICES

A. Type(s) of Medical Acupuncture most commonly practiced:

1. TCM
 - TCM acupuncture is defined as a type of acupuncture which is based on the basic knowledge of Traditional Chinese Medicine theories.
2. Corporal Acupuncture
 - Corporal Acupuncture is defined as a type of Acupuncture, which is based on the system of channels and collaterals.
3. Ear Acupuncture
 - Ear Acupuncture, also known as Auricular Therapy is based on the principles of Traditional Chinese Medicine, that ear is not a separate organ but closely connected with channels and collaterals and zang-fu organs and is a part of the body as an organic whole.
4. Yamamoto New Scalp-acupuncture
 - Yamamoto New Scalp-acupuncture is a complete Acupuncture Microsystem system on the head before and behind the ears representing the entire body in small size.
5. Su-Jok Acupuncture
 - Su-Jok Acupuncture is a system of therapy using only the Hands and feet to effect the same results as body acupuncture. It is a complete correspondence system representing the whole body, on the hands and the feet.



B. Education/Training Requirements

Medical Acupuncture Modality	Theoretical Hours	Clinical Hours	Proficiency Testing	Preliminary Practice
TCM Acupuncture	300	300	Y	Y
Corporal Acupuncture	200	100	Y	N
Ear Acupuncture	30	30	N	N
Scalp Acupuncture	30	30	N	N
Su-Jok Acupuncture	100	100	N	N

CORE CURRICULUM

TCM Acupuncture

The educational programmer includes courses in the history and philosophy of Chinese medicine, introduction to Chinese classic texts and modern scientific studies on the mechanism and action of acupuncture. The basic knowledge of Traditional Chinese Medicine includes the theories of Ying-Yang, The five elements, Zang-Fu, Channels and Collaterals, Qi, Blood and Body Fluids, Etiology, Methods of Diagnosis, and Differentiation of Syndromes. Identification of a syndrome entails making further analysis and synthesis of the clinical data obtained by applying the four diagnostic methods in order to determine the stage to which the disease has developed, its location and the degree of opposing force between body resistance and pathogenic factors. Training in diagnoses and treatment includes importance of integrative methods, specific courses dedicated to teaching the tongue- and pulse-diagnostic. Correct differentiation is requisite to applying correct therapeutic methods and attaining the anticipated clinical results, knowledge of differentiation methods: 1. Differentiation of syndromes according to eight principles, 2. Differentiation of syndromes according to the theory zang-fu, 3. Differentiation of syndromes according to the theory of channels and collaterals.



Clinical training progresses in observation a practitioner at work, gaining valuable experience in the many varied diagnostic skills in Traditional Chinese Medicine, mentioned above. Clinical training is reinforced practical days, where a patient is seen within small groups which enables the student to put the diagnostic skills taught into practice and take on more responsibility in the treatment of a patient. Clinical training is further reinforced for each individual student to take added responsibility for the patients' diagnostic and treatment in common illnesses of internal medicine, pediatrics, dermatology, ENT, ophthalmology, obstetrics and gynecology, trauma under the guidance of senior experienced doctors of TCM.

The goal of the training outlined above is correctly diagnose by integrative methods: classical and traditional, to interpret classical diagnose into the traditional energetic diagnose, which requires much more time and greater number of hours.

Corporal Acupuncture

The educational programmer includes courses in twelve regular channels, the eight extra channels and fifteen collaterals. The twelve regular channels, together the Ren Channel and the Du Channel of the eight extra channels, form the fourteen channels, along each of which are points for applying Acupuncture and Moxibution, extraordinary points, ashi points, specific and trigger points. Detail information about methods of locating points: according to anatomical landmarks, proportional measurement, finger measurement, neurological location by dermatome, myotome and sklerotome. Regional anatomy, vasculature and innervation of points, method of puncturing. The needles and how to use them: manipulation of the filiform needle. Other acupuncture methods: The three edged needle, the cutaneous or tapping needle, the intradermal or imbedding needle. The educational programmer includes the methods of combination acupuncture points according five elements treatment, empiric rules of points combination and detail information and practical skills of moxibution. Clinical training progresses to put the theoretical aspects into practice and take on more responsibility in the treatment of a patient.



Ear Acupuncture

The educational programmer includes history of auricular therapy, ear anatomy, vasculature and innervation. Particularities of ear anatomy parts and difficulties of points locating in these cases. Ear zones by Nogier and location of BAT for each zones.

Durinyan ear system for individual ear.

Principles of choosing and combination of ear BAT. The principles of using various auricular needles, electrical devices, laser devices, magnets, beads and pallets.

Yamamoto New Scalp-acupuncture

The educational programmer includes YNSA indications and contraindications, location of two categories of scalp points: basic points and Ypsilon points. YNSA Special Points. Needling Techniques and YNSA points Selection. YNSA Neck and abdomen Diagnosis Points. YNSA Treatment Protocol and practice.

Su-Jok Acupuncture

The educational programmer includes Hand and foot acupuncture from Korea. Su-Jok acupuncture levels according the types of su-jok therapy:

Correspondence Therapy: macro-mini-, insect.

Six-Ki therapy,

Acupuncture points in traditional Chinese medicine and in Korean su jok acupuncture –

Bell meridians,

Auricular Therapy,

M-Particle Therapy,

Chakra types and treatment principles.



GERMANY



GERMANY

NATIONAL/REGIONAL ACUPUNCTURE PRACTICES

A. Type(s) of Medical Acupuncture most commonly practiced:

1. Body Acupuncture – classical, traditional and neuro scientific approach
 - In Germany only the acupuncture portion of TCM inclusive basic ear acupuncture are officially recognized as a sub specialization/additional specialization and only pain acupuncture is reimbursable by insurances. Other parts of TCM are included as introduction in the curriculum of the sub specialization/additional specialization.
2. TCM
 - All parts of TCM as different treatment methods are taught by German acupuncture associations in advanced programs focused on various aspects.
3. Micro Systems
 - While Ear Acupuncture is the most prevalent, other micro-systems are used, though less frequently. These include: scalp acupuncture (both Yamamoto New Scalp Acupuncture YNSA and Chinese scalp acupuncture), nose acupuncture, mouth acupuncture (by *Jochen Gleditsch*), ECIWO, NPSO New Punctual Pain and Organ Therapy (by *Rudolf Siener*) and various schools of Korean hand acupuncture.

A specialized German tradition of Electro Acupuncture,



according to Vo// EAV, uses the micro system of the first and last points of the channels on the fingers for diagnostic evaluation and for testing the appropriateness of homeopathic remedies.

4. Laser Acupuncture

- Infrared- and Helium Neon-Laser are used in varying powers.

Approximately 10% to 15% of German Medical Acupuncture physicians use soft-laser primarily for babies and children under 16 years, patients with heavy deficiency and/or patients who cannot tolerate needling. Laser treatments are also used in the treatment of scars, wound healing and for injuries and orthopedic conditions

B Education/Training Requirements - Summary

Medical Acupuncture Modality	Theoretical Hours (EU)	Clinical Hours (EU)	Proficiency Testing	Prelim Acu Practice
Additional Specialization Acupuncture	120 Additional specialization/ Subspecialization Acupuncture	80	Y Internal audit by acupuncture associations Final examination by Medical chambers	Y
Diploma B	Plus 150 (200 +150)	Inclusive practice/ clinical practice	Y Final examination by acupuncture	Y



			associations	
DAEGFA Master of Acupuncture	200 plus 230	Inclusive practice/ clinical practice	Y Internal audit	Y
DAEGfA Master of East Asian Medicine	plus 300 (200+230+300)	inclusive practice/ clinical practice	Internal audits	Y
CPC Certified Physician of CM (Witten Herdecke University and SMS)	1000	inclusive practice/ clinical practice	Written, oral and practical examination	Y
Masters Program M.Sc.TCM (TU Munich)	6 university semesters	inclusive practice/ clinical practice	Y Audits, Final examination	Y



CORE CURRICULUM

Acupuncture education and practice in Germany is based on traditional acupuncture concepts combined with a modern, scientific, conventional Western medical point of view. It is focused on the clinical mind-body relevance and experience and includes new knowledge stemming from all fields of science. Acupuncture in Germany is broad-based and embracing of new indications and paradigms. Its objective is to integrate acupuncture treatment concepts with mainstream Western medicine.

The following subjects are integrated in education as well as in clinical practice:

Items #1 to #4 comprise the main part of the basic curriculum of acupuncture education. #5 and #6 comprise additional specialties and/or sub-specialties within acupuncture

1. Acupuncture according to TCM (reflecting acupuncture education in China today)
2. Classical acupuncture
3. Neurophysiological acupuncture
4. Introduction to ear acupuncture
5. Micro System acupuncture

An introduction to ear acupuncture is included in the curriculum of the Additional specialization / Sub-Specialization Acupuncture. Advanced ear acupuncture and the other micro systems are taught in advanced programs and special seminars. Please note that the number of education hours and types of certificates differ from acupuncture society to society within Germany.

Ear acupuncture / auriculo acupuncture
Yamamoto New Scalp Acupuncture YNSA
Chinese scalp acupuncture
Mouth acupuncture (according to *Gleditsch*)
Korean hand acupuncture / Su Jok
ECIWO Embryo Containing the Information of the Whole Organism

6. Special forms of stimulation, in addition to acupressure, moxibustion and cupping are part of the basic education program and are also taught in all advanced programs.

Laser (acu) puncture

Laser (acu) puncture is taught in an advanced certification program.



Electro acupuncture, electro (acu) puncture
injection acupuncture / mesotherapy
gua sha

Education by associations

Education in acupuncture and other disciplines of Chinese medicine is primarily offered by independent acupuncture associations within Germany. There are non-profit acupuncture associations in Germany, with a combined total of approximately 30 000 members. Each individual association has special areas of focus.

These medical acupuncture associations offer acupuncture education programs geared toward getting the Additional Specialization / Sub Specialization certifications by Medical Chambers established in 2003. Further, some of them also offer basic acupuncture education.

The responsible acupuncture societies have combined their efforts to establish the credibility and viability of acupuncture and their unified efforts have led to the official recognition of acupuncture in Germany.

1. Additional Specialization / Sub Specialization (Medical) Acupuncture

Beginning in 2003, and in the subsequent two years, the Continuous Medical Education Program of the General Medical Chamber and the various federal Medical Chambers confirmed the following:

Conditions:

Two years education time

200 EU (Education Units, 1 EU = 45 min)

120 EU theory

60 EU practical education

20 EU case reports

(including the former Diploma A of the acupuncture associations)

Final examination by the Medical Chambers

Curriculum:

Edited by the Federal Medical Chamber, mandatory:

Including only the basics of acupuncture, general introduction, history of Chinese Medicine, scientific and traditional fundamentals, meridians, points, practical exercises, case reports, ear acupuncture

German General Medical Chamber - Curriculum/Course-Book Additional Specialization / Subspecialization Acupuncture – see page 67



The Additional Specialization / Sub Specialization Acupuncture is one of the necessary qualifications a physician requires in order for him/her to receive payment from the state insurances.

2. Advanced Acupuncture Education Programs

Offered by medical acupuncture associations

Diploma B

350 EU Education Units

Deepening of the TCM theory and practice, micro systems, laser acupuncture, as well as Chinese herbal medicine / phytotherapy, dietetics, tui na, qi gong, psychosomatics and other special topics use in different conventional medical specializations.

Additional Certifications

There are additional special certification programs in Chinese herbal medicine / phytotherapy, Chinese dietetics, laser puncture, and in other Asian medical systems like Japanese and Tibetan Medicine as well as in other related techniques e.g. neural therapy.

Special Master Programs

DAEGFA Master of Acupuncture

230 EU Education Units

Offered by the German Medical Acupuncture Association DAEGfA founded 1951, after finishing the Additional Specialization / Subspecialization Acupuncture. Deepening of traditional and modern scientific approaches, classical and neurophysiological acupuncture, special techniques, laser ESA (electro stimulation acupuncture), trigger point acupuncture, microsystems (ear, YNSA, scalp, mouth, hand, ECIWO (Embryo Containing the Information of the Whole Organism) and others), physiology and pathophysiology of the Chinese organ systems, psychosomatics, Chinese herbal medicine/phytotherapy, dietetics, tui na, qi gong, use in different conventional medical specializations

DAEGfA Master of East Asian Medicine

300 EU Education Units (2,5 to 3 years)

Offered by the German Medical Acupuncture Association DAEGfA founded 1951, after finishing the Additional Specialization / Subspecialization Acupuncture (200 EU) and the DAEGfA Master of Acupuncture (230 EU).

Further deepening of acupuncture in theory and practice (traditional, modern and scientific approach)

Besides of acupuncture 2 other items out of 6:

Chinese herbal medicine, tui na, qi gong, Chinese dietetics, Japanese Kampo medicine, Japanese acupuncture

*Certified Physician of Chinese Medicine CPC*

1000 EU Education Units postgraduate cooperation program of the SMS Societas Medicinae Sinensis with the university Witten-Herdecke with a common curriculum in all disciplines of Chinese medicine and dietetics (acupuncture, diagnostics, physiology and Chinese herbal medicine / phytotherapy, Chinese dietetics, tui na, qi gong)

Master Program M.Sc.TCM Traditional Chinese Medicine

Postgraduate Master Program, 6 university semesters,
TU Technical University Munique, faculty of sports and health sciences,
according to the Bologna standards.
Including all parts of TCM in clinic and practice, acupuncture, Chinese herbal
Medicine / phytotherapy, Chinese dietetics, use in different medical
specializations, tui na, qi gong, tai ji

Education for medical students

Programs for medical students are offered by various acupuncture societies and
optional programs at universities

DAEGfA Summer School of Acupuncture (2 times a year 1 week training),
International Summerschool of Acupuncture in progress



(Model) Curriculum Acupuncture

English Version Course Book of the German General Medical Chamber/ Bundesaerztekammer

Methodological recommendations and course description for the advanced training program leading to the certificate of additional specialization/subspecialization in “Acupuncture”

In accordance with the (Standard) Advanced Education Training Guidelines of the German Federal Medical Chamber Regulations

As per: 20 January 2006

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Contents

1. Introduction
2. Conducting the course
3. Course design
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1. Introduction

At the meeting of the German Medical Assembly (Deutscher Aerztetag) in 2003, the additional term “acupuncture” was introduced into the Advanced Education Training Regulations. The objective of the additional further education training is to achieve expert medical competence and practical skills in acupuncture after completion of the prescribed further education training period and courses. Within the scope of the restructuring of the advanced education training regulations, the German Medical Assembly in 2003 also extended the conditions for acquiring additional advanced education training program qualifications. Prerequisite for acquiring the advanced education training qualification “acupuncture” is recognition as a medical specialist. Acupuncture requires theoretical knowledge and practical skills taught in structured courses by advanced education training instructors qualified to do so. Recognition of the course and its instructor must be obtained from the competent Land Medical Chamber beforehand.

The course content is laid down in this course book. The further education training regulations demand a total of 200 hours *within 2 years (added in 2012 by the German General Medical Chamber/Bundesaerztekammer)* divided into:

120-hour advanced education training course program in accordance with Article § 4 Para. 8. This includes the fundamental theoretical principles and practical exercises on acupuncture and the localisation of the listed points. The practical exercises are conducted in small groups under the supervision of qualified instructors.

The listed acupuncture points in the course blocks are relevant for the examination.

- . • 60 hours of practical acupuncture treatments on patients by the course participant personally under the supervision of the authorised advanced education training instructors.
- . • 20 hours of case study seminars distributed over at least 5 sessions *within the last 24 months (deleted in 2012 by the German General Medical Chamber/Bundesaerztekammer)*. Presentation of patients treated by participants themselves with symptoms, examination findings, treatment plan and symptom changes.

The advanced education training is completed with a **final examination before the competent Land Medical Chamber.**



2. Conducting the course

The advanced education training institutions must have suitable rooms for the theoretical instruction as well as rooms for practical exercises with an adequate number of suitable medical examination tables. The size of the practical training group should not exceed 20 participants, smaller groups being desirable. The number of course participants per instructor should not exceed 15.

Instruction comprises:

- theory lectures
- practical demonstrations
- practical sessions.

Following the theoretical introduction in each individual section with the elucidation of indications and contraindications, special emphasis is laid on the practical instruction in the examination and therapeutic techniques taught. These are not only demonstrated by the instructors, but also practiced by each of the participants.

As a general rule, the course should be evaluated by the participants.

Acupuncture treatments on patients and the case seminars only begin after completion of the 120-hour course.

The course instructor and part-time lecturers must also have successfully completed the advanced educational training and the course instructors must be authorised as further education training instructors in addition.



3. Course design

The further education training is conducted in courses, whose design and sequence are to be laid down on the basis of the content and regulations of this course book by the advanced education training institution concerned and to be approved by the competent Federal Medical Chamber.

The learning objectives and course content given in the course book represent a framework for the course instructors. Within this framework, the main emphases of the individual courses may be varied as long as the basic outline is adhered to. Thus, the sequence for taking courses A – E is not stipulated. The course blocks A – E are dividable into 3 x 8 EU education units each.

For didactic reasons, as a general rule, no more than
8 EU education units of 45 minutes
should be conducted per day.

The German Federal Medical Chamber “Recommendations for Medical Advanced Educational Training” are to be observed.

Practical teaching units in small groups can be integrated into the theoretical instruction.

Practical acupuncture treatment of patients and the case study seminars are taught separately from the advanced education training courses in small groups.

The course advanced education training is divided into 5 blocks of 24 EU each plus practical acupuncture treatments and case study seminars

The courses must cover the following education units (EU) comprising blocks A – G at least. Certification of participation and EU attended in the individual courses must be presented in the individual areas A – G indicating the course content.

A.	24 EU
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Fundamental scientific principles of acupuncture.
Presentation of the fundamental acupuncture-relevant principles of TCM. Performing acupuncture treatment

B.	24 EU
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Systematics of the organ systems of the channels lung, large intestine, stomach, spleen, the conception vessel, their acupuncture points, practical treatment exercises

C.	24 EU
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Systematics of the organ systems of the channels heart, small intestine, bladder, kidney, the governing vessel, their acupuncture points, practical treatment exercises

D.

24 EU

Systematics of the organ systems of the channels pericardium, triple burner, gallbladder, liver, their acupuncture points, additional points, practical treatment exercises

E.

24 EU

Therapeutic concepts incl. ear acupuncture/microsystems

F.

60 EU

Practical acupuncture therapies

G.

20 EU

Case study seminars



4. Course content

Corresponding to blocks A-G

A Fundamental principles of acupuncture (24 EU)

Presentation of fundamental scientific and acupuncture-relevant principles of Traditional Chinese Medicine (TCM)

- Introduction to acupuncture
- Fundamental principles of medical history
- Fundamental neurophysiological and humoral principles and results of clinical research
- Fundamental physiological principles (humoral, peripheral, central mechanisms), effect on endogenous opioid system, non-opioid neurotransmitters
- Fundamental anatomical principles, of vasculoneural bundles, fascial chains, muscle function chains at least
- Clinical research, basic research, placebo research
- Quality standards in research, clinical and medical practice
- Traditional concepts of Chinese medicine, 8 principles (Ba Gang), pathogenic factors, theory of the Five Elements/Phases

Performing acupuncture treatment

- Diagnosis and integration of acupuncture in therapeutic concepts
- Diagnosis, contraindications, undesirable effects of acupuncture, patient elucidation, documentation and quality management
- Practical acupuncture treatment (standards for organisation, storage, medical practice equipment and fittings), duration of treatment, frequency of treatment, courses of treatment
- Comparison of western (morphological) and acupuncture-specific (functional) diagnostics
- Point localisation on the body according to anatomical structures, tenderness, proportional size (cun)
- Simple needling techniques and stimulation procedures, moxibustion and cupping
- Development of simple therapeutic concepts

B Systematics of the organ systems of the ventral channels, the conception vessel, their acupuncture points, practical treatment exercises (24 EU)

- Channel circulation, channel axes, conception vessel
- Control points of this meridian (sedation and tonification point, Yuan, dorsal Shu points, ventral Mu points, lower influential points, master points, trigger points at least)
- Lung channel with points 1, 5, 7, 9 at least
- Large intestine channel with points 4, 10, 11, 15, 20 at least
- Stomach channel with points 2, 6, 8, 25, 34, 35, 36, 37, 38, 40, 44 at least
- Spleen channel with points 3, 4, 6, 9, 10 at least
- Conception vessel (Ren Mai) with points 3, 4, 5, 6, 12, 17 at least
- Practical demonstration by the course instructor, interparticipant practical exercises



C Systematics of the organ systems of the dorsal channels, the governing vessel, their acupuncture points, practical treatment exercises (24 EU)

-

D Systematics of the organ systems of the lateral channels, their acupuncture points, additional points, practical treatment exercises (24 EU)

- Channel circulation, channel axes, additional points
- Control points of this meridian (sedation and tonification point, Yuan, dorsal Shu points, ventral Mu points, lower influential points, master points, trigger points at least)
- Pericardium channel with points 3, 6, 7 at least
- Triple burner channel with points 3, 5, 14, 17, 21, 23 at least
- Gallbladder channel with points 2, 8, 20, 21, 30, 34, 39, 41 at least
- Liver channel with points 2, 3, 8, 13, 14 at least
- Additional points, Ex-HN 1, 3, 5, EX-B 1, 2, 8, Ex-LE 1, 5, 10, 11 at least
- Practical demonstration by the course instructor, interparticipant practical exercises
- Headache and facial pain, tension headache, migraine, trigeminal neuralgia at least

E Therapeutic concepts (24 EU)

1. Ear acupuncture and introduction to other microsystems /or somatotopias

- Fundamental scientific principles of ear acupuncture and of one other microsystem, historical overview
- Anatomy, innervation, study status, fundamental conceptual principles of microsystems
- Indications, contraindications, undesirable effects of ear acupuncture and other microsystems
- Outer ear cartography, systematics of the projection zones und points (possibly of other microsystems as well)
- Techniques of point localisation on the ear or another microsystem by tenderness
- Needle material, puncture technique
- Projections of the musculoskeletal system
- Projections of the inner organs
- Topographical position of additional characteristic points/correspondence points
- Important individual points: Correspondence points: eye, inner nose, forehead (33), back of the head (29), maxilla/mandible, orolingival; uterus, ovary; characteristic points: Shen Men (55), thalamus (26a), analgesic point, allergy point, thymus, interferon; vegetative points: Veg. I, Veg. II, weather point, Jérôme (29b), psychotropic points 1-4, omega main point, zero point (82)
- Therapeutic concepts in combination with acupuncture of the body

2. Integrated therapeutic concepts

- Headache and facial pain, tension headache, migraine, trigeminal neuralgia at



- least
 - Simple pain disorders of the musculoskeletal system, cervical, thoracic and lumbar spine syndrome, pain in the joints at least
 - Chronic pain disorder
- 3. Introduction to the diagnostics and treatment of myofascial trigger points
 - Comparison of western (morphological) and acupuncture-specific (functional) diagnostics
- 4. Integrated therapeutic concepts
 - Simple therapeutic concepts in obstetrics as well as gynaecological disorders, dysmenorrhoea at least
 - Therapeutic concepts in allergies
 - Psychosomatic disorders, functional disturbances, pain associated with functional disturbances, psychovegetative syndromes, treatment of disturbed sleep, simple concepts of addiction therapy

F Practical acupuncture therapy (60 EU)

This begins only after completing the 120 hours of training courses. This is performed under the supervision of the authorised advanced education training instructor in training institutions suitable for patient therapy.

G Case study seminars (20 EU)

In these seminars, theory and practice of acupuncture is discussed based on the participants own case study presentations. They are organised in small groups. The 20 EU must be distributed over at least 5 seminars.



GREECE



GREECE

NATIONAL/REGIONAL ACUPUNCTURE PRACTICES

A. Type(s) of Medical Acupuncture most commonly practiced:

1. TCM Acupuncture – Ear Acupuncture
 - The practitioners apply acupuncture according to the theory of TCM. Main points are: yin-yang balance, meridians, location of the acupoints, ear points and Chinese diagnostics and treatments.
2. Simplified Acupuncture
 - The practitioners apply acupuncture according to the modern neuropsychological theories and mostly for the main indications, for example pain problems. Main point is the neurophysiologic response.
3. Electroacupuncture
 - Practitioners use electro- machines connected with the needles at the acupoints to treat several problems.
4. Laser Acupuncture
 - Practitioners use laser machines at several acupoints to treat certain problems.

B. Education/Training Requirements

Medical Acupuncture Modality	Theoretical Hours	Clinical Hours	Proficiency Testing	Preliminary Practice
TCM and Ear Acupuncture	300	100	Yes and No	N
Simplified Acupuncture	200	100	Yes and No	N
Electro or Laser Acupuncture	30	30	N	N



CORE CURRICULUM

1. The training schedule includes the TCM theory: a brief history of TCM, yin-yang and five elements theory, zang-fu organs, qi, blood and body fluid, meridians, acupoints, diagnostic methods, differentiation of syndromes, acupuncture needling techniques, acupuncture treatment, diseases, ear acupoints, and ear treatments.
2. The training schedule includes: a brief introduction of TCM theory (yin-yang theory, five elements, meridians, acupoints, major diagnostic theories) needling techniques, and, mostly, neurophysiologic theories. The diagnostic procedures and treatments are interpreted according to the neurophysiologic theory.
3. Electro acupuncture and Laser acupuncture: practitioners, apart from their main education (1 or 2), receive special training on the operation of these machines.

Instructors should bare a degree from an Acupuncture University or Acupuncture College and long-term practice experience.



HUNGARY



HUNGARY

NATIONAL/REGIONAL PRACTICES

Type(s) of Medical Acupuncture most commonly practiced:

1. Traditional Chinese Medicine
2. Auriculomedicine in accordance Nogiere and latest development on auriculomedicine.
3. Microsystems (Yamamoto New Scalp Acupuncture, Oral-acupuncture, Su-jok system, e.t.)
4. Related techniques: Neuraltherapy, Electroacupuncture, EAV, Magnetotherapy, Soft-Laser therapy, Bioresonance therapy, as special form of physiotherapy

Definitions

1. Traditional Chinese Medicine: The current name for an ancient system of health care from China. Traditional Chinese medicine (TCM) is based on a concept of balanced qi (pronounced "chee"), or vital energy, that is believed to flow throughout the body. Qi is proposed to regulate a person's spiritual, emotional, mental, and physical balance and to be influenced by the opposing forces of yin (negative energy) and yang (positive energy). Disease is proposed to result from the flow of qi being disrupted and yin and yang becoming imbalanced. Among the components of TCM are herbal and nutritional therapy, restorative physical exercises, meditation, acupuncture, and remedial massage.

2. Auriculomedicine : Auriculotherapy is a clinically effective treatment modality utilized for the relief of acute/ chronic pain and the alleviation of substance abuse. The external ear has been shown to have a somatotopic organization in an inverted fetus pattern, wherein each part of the auricle corresponds to a specific part of the body. Detection of electrical conductance and tenderness palpation can reveal specific auricular reflex points which can be stimulated to alter pathological reflex patterns in the brain, in internal organs, and in different peripheral regions of the musculoskeletal body.



3. Microsystems: The development, systems, theory, clinical uses, and holograms of microacupuncture. Every part of the body can function as an energetic reflection of the body as a whole, both diagnostically and therapeutically. The Front Mu points and back Shu are an early microsystem. Each of the 12 Mu-Shu levels defines a torso reflex zone. The tongue and radial pulses function classically as diagnostic microsystems. Anatomy, as well as Sheng and Ke cycle 5-element phases, can be reflected in pulses. The ear microsystem developed first by Nogier is discussed above mentioned.. A table outlines 42 microsystems and is accompanied by 13 pages of sketches of the holograms involved in each system. Details of each system, from scalp (YNSA), face, and nose, to foot and hand, are discussed. Sometimes 2 or more holograms can exist for 1 body part, as with Nogier's 3 phases and a Chinese system for the ear. There is also the Fitzgerald-Ingham foot and hand system contrasted with Yoo's Korean Koryo Chim hand approach that is very detailed and exacting in use. A US and German tooth system (Gleditsch oral system) coincide. A metacarpal linear system (Zhang Ying-Qing) is proposed as embryo containing the information of the whole organism (ECIWO). It is proposed that every long bone of the body might contain this 12-point system.

Almost a half century of investigations by many researchers backs the validity of microsystems. These many systems make us give less credence to the conventional premise that there are definite acupuncture points and therefore, non-acupuncture points. Micro-acupuncture systems could be used to treat body conditions of pathology. These micropoints, like their larger meridian cousins, have relatively high electrical permeability and they appear to consist of energy networks. Some systems, such as hand and foot, could be taught to the public and even used by children as first aid procedures (eg, finger acupressure).

4. Neural therapy is an injection technique known to provide instant relief of pain, increased motion and return of function for some problems not able to be helped by other methods. In 1925, two German physicians, Ferdinand and Walter Huneke discovered that procaine and lidocaine anesthetics caused immediate resolution of pain symptoms when injected into scars, nerves and tissues. Nowadays we use Xyloneural injection.



Nerves work by having a normal nerve flow. Nerves monitor and control all the body's parts. Muscles move because of nerve flow to them. The heart beats because of nerve flow controlling it. All the special senses and internal organs work due to the control of the nerves. The nerve flow is critical to the sensation, function and movements of the entire body. When nerves become damaged through surgery, injury, falls, burns, and so forth, this vital nerve flow is broken. The broken nerve flow is like a short circuit in your house wiring. Pain, lack of motion, loss of function, poor endurance and many other body control malfunctions result from broken nerve flow and remain until the nerves are fixed. Everyone knows that local anesthetics block pain. The new information is that local anesthetics restore normal nerve flow. When the nerve flow is restored, the function and energy are instantly corrected. The pain and other sensory problems also instantly improve or resolve entirely. The nerve flow is restored by the exact placement of local anesthetic into and around the precise nerves involved. The injections are done with a very thin needle by a physician specifically trained in post-doctoral work in neural-fascial therapy. Cortisone is never used by doctors specifically trained in neural-fascial therapy. Fascial means tissue. This fascial tissue interconnects all the body's parts. In science there is a law which states that structure determines function. Thus a pain and lack of function can result. In falls, hits and pulling injuries, structure is altered without visible scar formation. Tissue becomes squished or compressed. Since the structure has been changed, the function becomes abnormal. Neural-fascial therapy is often ideal for this problem. The tiny needle injecting a volume of local anesthetic restores the structure similar to a bicycle pump blowing up a flattened tire. Once the structure is restored, the function returns quickly and without side effects. The exact palpation leads to points to be needled, which are often acupuncture points.

5. Other related techniques: As the mechanic energy can be applied to the bioactive points as acupuncture, so could be applied other energy: magnetic, electric, electromagnetic, as a part of special physiotherapy for having effect to the body.



C. Education/Training Requirements

Medical Acupuncture Modality	Theoretical Hours	Clinical Hours	Proficiency Testing	Preliminary Practice
TCM	600	600	Y	Y
Auriculoth-	80	120	Y	Y
Microsystems	60	60	Y	Y
Related techn.	40	40	Y	Y

CORE CURRICULUMTCM:

Yin-Yang Theory: The basic concept of the Yin-Yang theory; applications of Yin-Yang theory in TCM

Five Element Theory: the basic concepts of the Five Element theory; applications of the Five Element theory in TCM; classification of objects according to Five Element theory

Causes of disease in TCM:

* External causes: Six Vicious Energies

* Internal causes: Seven Emotions

Pathological changes in TCM: Ba-Gang theory, pathological changes in Six Meridians

The principles of treatment in TCM

Terminology of TCM

Basic theory in Acupuncture Meridians

Diagnosis in TCM

Four methods of diagnosis

Diagnosis by observation (including tongue diagnosis)

Diagnosis by hearing and smelling

Diagnosis by interrogation

Diagnosis by palpitation (pulse diagnosis)

Bagan Bian Zheng (8 Principle Syndromes Diagnosis)



Organ Diagnosis (Zang/Fu Bian Zheng)

Qi and Xue Diagnosis

4 Level Diagnosis (Wei, Qi, Ying, Xue Bian Zheng)

6 Channel Diagnosis (Liu Jing Bian Zheng)

Chinese Herbology

Introduction to Chinese Herbology:

* Brief history

* four Energies of herbs

* Five Flavours of herbs

* connection between energies & flavours of herbs, movement of herbs

* meridian-directing herbs

* conventional pairing of herbs

* methods of taking herbs

* dosage of herbs

* storage of herbs

* processing of herbs

Classification of herbs: approximately 200 of the most frequently used herbs will be discussed in detail

Chinese Acupuncture I

Distribution and functions of the meridians:

* the 12 meridians

* the 15 main collateral meridians

* the branches of the 12 meridians

* the 12 muscular meridians

* the twelve skin areas

Clinical applications of meridians in diagnosis and treatment

Classification of acupuncture points, including the acupuncture points on the 14 major meridians; extraordinary points, pressure points

Action of acupuncture points

Specially marked points



Locating acupuncture points of the 12 meridians

History, Terminology of TCM and Chinese Language (only short)

Brief introduction to the history of TCM, Chinese language pinyin writing and the spoken Mandarin form, as well as commonly-used TCM terms.

Clinical Observation, Qi Gong Practice

Observation of doctors' or senior students' clinical practice

Preparing Acupuncture treatment

Practicing Qi Gong

Practicing Moxibustion

Learning basic needle techniques

Learning basic Tui-na (Chinese Massage) techniques

Understanding clinical procedures

Communication Skills, Ethics

Regulations of Traditional Chinese Medicine practitioners and acupuncturists

Communication skills with patients, within and across health care providers groups

Ethics in TCM, and acupuncture

Clean needle technique

Clinical training program (practice management)

Acupoint Locations

Discussing the main 12 channel locations by using different acupoint location methods, functions, symptoms and clinical applications.

Focus on the acupoints anatomic locations and point combinations

TCM Internal Medicine

Introduction of basic concepts of disease mechanism, symptoms and treatment of internal diseases. The following diseases will be discussed as to causes, pathological mechanisms, symptom differentiation, treatment principles and methods:

- | | |
|-------------------------------|----------------------------------|
| * Heart diseases | * Liver and gallbladder diseases |
| * Lung diseases | * Kidney diseases |
| * Spleen and Stomach diseases | * Other organ diseases |



TCM Gynecology

The characteristics of women's physiology

Causes and pathological changes in women's diseases

Diagnosis in women's diseases

5 broad categories of women's diseases:

- * Diseases of menses
- * Diseases of morbid leucorrhoea
- * Diseases of pregnancy
- * Postpartum diseases
- * Women's miscellaneous diseases

Common children's diseases: cold and flu, cough, asthma, pneumonia, vomiting, diarrhea, abdominal pain, indigestion, convulsion, epilepsy, urinary disorders, blood diseases, perspiration, infectious diseases, slow development, etc.

Formulas (most important ones)

- * Formulas for relieving the exterior syndrome
- * Purgative formulas
- * Harmonizing formulas
- * Formulas for eliminating heat
- * Formulas for eliminating summer heat
- * Formulas for warming the interior
- * Formulas for eliminating both exterior and interior syndrome
- * Tonification formulas
- * Formulas for calming the mind
- * Formulas for opening the orifice
- * Formulas with astringent effects
- * Formulas for regulating qi
- * Formulas for regulating blood
- * Formulas for relieving wind syndromes
- * Formulas for dryness
- * Formulas for eliminating dampness



* Formulas for eliminating phlegm

* Formulas for relieving food stagnation

* Formulas for eliminating mass and accumulation

* Parasite expelling formulas

* Emetic formulas

* Formulas for relieving carbuncle

Chinese Acupuncture II

Acupuncture insertion and technique

Scalp acupuncture

Ear acupuncture

Extra points and updated new points

Eight extra meridians and their points

Channel syndrome diagnosis and treatment

Five Senses Diseases and Pediatrics

Etiology and pathogenesis of the five sense organs; diagnosis and treatment of common disorders in them. Common children's diseases: cold and flu, cough, asthma, pneumonia, vomiting, diarrhea, abdominal pain, indigestion, convulsion, epilepsy, urinary disorders, blood diseases, perspiration, infectious diseases, slow development, etc.

Tui Na I

This subject provides students with general information in terms of Tui Na. The basic anatomy and Tui Na techniques will be discussed in classes based on different areas of the body. Indications and contraindications of Tui Na will be introduced as well.

Clinical Pre-practice

Qi Gong practice

Chinese Acupuncture III

Treating internal diseases by using acupuncture therapy, digestive disorders, respiratory disorders, heart and blood vessel disorders, nutritional disorders, urinary disorders, male symptoms

Treating women's and children's disorders using acupuncture therapy

Treating other diseases using acupuncture therapy



TCM Dermatology

Common diseases in TCM surgery will be discussed

Common skin diseases: eczema, psoriasis, herpes, urticaria, pelade, chilblain, callosity, mites, zona, lupus, dermatitis, acne, scleroderma, verruca, impetigo, drug rashes, lichen

Diet Therapy

An introduction to the traditional Chinese concept of food and nutrition. Important aspects of food are discussed which include the energies, flavours and actions. Chinese diet therapy provides a detailed and clinically proven method of deciding if a given food is appropriate for any individual's personal condition, for prevention of illness and balance of the body.

Clinical Practice

In this course, the students will have an opportunity to practice acupuncture, moxibustion, herbology and Tui na intensely under supervision, building up clinical skills.

Tui Na II

This subject provides students with knowledge of Tui Na in different kinds of clinical situations. The diagnosis and treatments of diseases of the neck, back, upper extremities and lower extremities will be discussed, especially focusing on Tui Na techniques.

Application of Diagnosis and Treatment in Acupuncture & TCM

This class will have demonstrations of diagnosis, treatment and techniques in acupuncture and TCM. Clinical case studies will also be presented.

Modern Herbal Pharmacology/Toxicology in Chinese herbs

Up-to-date pharmacological information of Chinese herbs, relevant Chinese herbal scientific experiments and clinical reports will be offered here. This is an opportunity for students to acquire in-depth study in ancient and modern pharmacology, as well increasing their knowledge of Chinese herb applications.

Chinese Acupuncture IV

Acupuncture formula studies are according to TCM differentiation. A collection of case studies recorded by famous TCM doctors will be examined. A viewpoint from each doctor explains how patients with the same disease are treated with different acupuncture point combinations.



TCM Gerontology

This course will discuss the diagnosis and treatments of common clinical situations in TCM Gerontology. The special features of TCM Gerontology will be emphasized as well.

TCM Psychology

This course focuses on the disorders of both the physical body and the mind with TCM and other special therapies working as modern holistic medicine. Students will learn the concept of the new model of medicine, the social-psychological model, and therapies like music therapy combined with TCM for depression and other disorders involving both the body and the mind.

Single and Double Acupoints

This is a basic introduction course covering the theory and principles of the single point acupuncture therapy and double point acupuncture therapy. Ancient Asian methods are combined with modern theory on acupuncture treatments. The most effective points are chosen to treat various common diseases by using single point or double points. This has become a popular therapy currently being used in China and throughout the world. In this class, we will examine information on new research and development of acupuncture.

TCM Classic Texts (short course only)

This course is a study of important articles of TCM literature, a huge treasure that serves as foundation for TCM today. We will discuss the originals in those classics like Huan Di Nei Jing, Jin gui Yao Lue, Shan Han Lun, and other works that help students to acquire a better understanding of traditional thought in TCM.

Case Study, Clinically-Proven Formulas, and Licensing Exam Review

This subject will provide students with the ability to deal with difficult clinical situations and introduce clinically-proven formulas used in China and worldwide. It covers all clinical subjects. Licensing exam review may be introduced.

Clinical Practice

In this course, students will have an opportunity to practice acupuncture, moxibustion, herbology and Tui Na intensely under supervision to build up their clinical practicing skills. Students will develop their ability to deal with various clinical situations.



Modern Clinical Development and Research in TCM

This subject provides student with modern clinical development and research in the field of internal medicine, acupuncture and Tui Na. It also provides students with knowledge and ability to deal with various clinical situations and the ability to do further research or education in TCM.

Urology and Male Sexual Dysfunction

This course will introduce TCM etiology, pathological development, diagnosis and TCM treatment (herb formulae and acupuncture) of common male sex disorders and related disorders, such as impotence, male infertility, disorders of ejaculation, prostate disorders, etc.

Gynecology

This course will introduce TCM new achievements, which include herb formulae, single herbs, acupuncture and treatments in common difficult to treat female illnesses, such as female infertility, amenorrhea and metrorrhagia, etc.

Clinical Practice

In this course, students will practice acupuncture, moxibustion, herbology and Tui Na intensely and independently to build up clinical practice skills. Students will also develop their ability to deal with a broad range of various clinical situations.

Internship in China: (with co-operation with Tangshan Medical University, Hebei, China

It is very important for students to get some clinical experience in China before final graduation; for this reason, the college takes every step to insure that all students have such an opportunity to improve their clinical skills. Although the clinical study tour to China in the second year.

Traumatology of TCM

This subject provides students with knowledge of diagnosis and treatment of common diseases in trauma such as the general introduction to injury, dislocations and introduction to fractures, as well as injury of various parts of the body: how can be treated with acupuncture.

Auriculotherapy:

- 1 Anatomy, topography
2. Original Nogier, 3 phase
3. Diseases which can be treated by auriculotherapy, indications.
4. NADA
5. Ethical questions.

Yamamoto New Scalp acupuncture: state of art course:

1. Introduction.
2. Microsystems, theory, explanation
3. Anatomy: basic, organ, somatosensoric, nervpoints, extra somatotopies.
4. Cases: living outpatients treated by YNSA with active presence of students

Neuraltherapy:Anatomy, sympathetic-parasympathic nervous systemIndications-contraindicationsCases.Other related techniques: lectures, practice with small groups.Examination in TCM and other topics:

- 3 midterm test-examination
- 3 times small practice examination
- Final examination: test, verbal, case- solutions, practice.
- Certification: title: "MSc. of TCM and related techniques"
- Precondition for exam: MD-diploma and specialization in any kind of medicine!
- Exam: on Medical University.



INDONESIA



INDONESIA

NATIONAL/REGIONAL ACUPUNCTURE PRACTICES

A. Type(s) of Medical Acupuncture most commonly practiced:

1. Medical Acupuncture Specialist

- Medical Acupuncture Specialist is defined Medical Doctor based on education, training and practice requirement in University and Hospital base. Total education and training : 2000 hours (continuous model : 6 semester)

2. Acupuncture as a part and complementary in Medical Practice

- Acupuncture as a part and complementary in Medical Practice is defining Medical Doctors various discipline specialist (e.g. Anesthesia, Pediatrician, Psychiatrist, Neurologist, Internist, Obstetric-Gynecologist, etc) on education and training to specific requirement to support in practices. Total education and training : 960 hours (multiple entry – multiple exit model)

B. Education/Training Requirements

Medical Acupuncture Modality	Theoretical Hours	Clinical Hours	Proficiency Testing	Preliminary Practice
SPECIALIST				
Basic theory and clinical practice	400	600	100	200
Acupuncture physiology anatomy correlation	48	36	16	-
Advance clinical acupuncture	240	200	60	100
COMPLEMENTARY				
Basic theory and clinical practice	244	194	92	70
Acupuncture physiology anatomy correlation	40	10	10	-
Advance clinical acupuncture (homepage & face to face tutorial)	120	100	30	50

**Education content:**

1. Acupuncture in basic science : Biomolecular, Biophysics, Anatomy – Physiology – Acupuncture correlation
2. Pathophysiology of medical acupuncture: Neuroscience, Bioenergetic, Endocrinology, Immunology, Metabolism, Reproduction, Aging Process, Pain Medicine.
3. Acupuncture in clinical practice :
 - a. Major: internal medicine, paediatric, neurology, medical rehabilitation, obstetrics, gynaecology, anaesthesia.
 - b. Minor : dermatology, aesthetic cosmetic, psychiatric and drug abuse

Research:

- a. Basic science research
- b. Clinical research

CORE CURRICULUM

Acupuncture in Indonesia integrated to our health care and medical science is gain value and quality of medical doctor to do in health services, in the field neuroscience medical rehabilitation, obstetric – gynecology, internal medicine, pediatric, pain medicine and drug abused. The scientific explanation of acupuncture given by medical practitioner could hardly acceptance by integrated eastern and western model based on evidence based of medicine usage modern scientific research produces on acupuncture and combine basic medical and scientific investigation lead in the best care to model that can explain all known observation and not contradiction with only of them.

In November 1996, the Department of Health of Republic Indonesia endorsed regulation about acupuncture therapy in formal health services as it is based of supporting role in general acceptance of acupuncture as one of curative discipline in health field.



LATVIA



LATVIA

NATIONAL/REGIONAL ACUPUNCTURE PRACTICES

A. Type(s) of Medical Acupuncture most commonly practiced:

1. Traditional Chinese Medicine

- Traditional Chinese medicine (TCM) is a comprehensive part of the entire medical "Art of Healing", based on the concept of mutual and constant interaction among the main five substances of the Universe directly affecting the normal physiology of the Humans.

2. Medical Acupuncture

- Medical acupuncture is one but the most important part of TCM, based on the system of channels and points, directly corresponding to the certain Zang-Fu organs. The fundamental concepts of TCM are integrated within the modern Academic medicine knowledge and successfully applied in modern clinical practice.

3. Auricular Acupuncture

- Auricular acupuncture is the autonomous part of the Acupuncture system and the most common microsystem among the others. It involves the neuro-physiological mechanisms of the interaction between the main functional systems of the Human and auricular acu-points.

4. Laser Acupuncture

- This is the modern modification of the conventional acupuncture, obtaining the specific response from the Acu-macrosystem.



B. Education/Training Requirements

Medical Acupuncture Modality	Theoretical Hours	Clinical Hours	Proficiency Testing	Preliminary Practice
TCM	580	250	Y	N
Medical Acupuncture	280	120	Y	N
Auricular Acupuncture	80	40	N	N
Laser Acupuncture	50	30	N	N

CORE CURRICULUM

TCM ACUPUNCTURE

There is a step-by-step education covering the wide range of information including Chinese philosophy, normal and pathological physiology, theory of fundamental substances, etiology and pathogenesis, syndromes and patterns differentiation, differential diagnosis and pattern-oriented treatment.

The course starts with the introduction of the Taoist philosophical principles that are the essence of TCM emphasizing the Taoist approaches to the cultivation of the healthy mind, body and spirit. A survey of medical history in China, significant personalities and events are presented in chronological or conceptual order, as well as the presentation of various schools of thought and models of healing strategies are covered.

Historical and scientific overview of acupuncture as a part of TCM and its significance in modern academic medicine.

The basic knowledge of Acupuncture system, channels, points, anatomy and physiology and indications for the major Acu-points.



Deep understanding of the principles of the Five Phases with the emphasize on the indications for and identification of the Wu Shu Xue system points in various pathological conditions.

The main classical Chinese and modern needling techniques to harmonize the movement of Qi.

Introducing the basic knowledge of Qi, principles and techniques to become aware of Qi to promote its circulation along the Jing-Luo system in order to improve health by balancing the internal organs.

Application of acupuncture as a main part of TCM is emphasized on a detailed understanding of the treatment and prevention of common diseases according to the fundamentals and experience of TCM.

Therapeutic techniques include not only acupuncture itself, but moxibustion, cupping, dermal acupuncture, long needle techniques and etc.

The clinical part of the education program includes series of courses on main patterns differentiation, symptoms obtained discussions and practical application of proper acupuncture techniques under the guidance and supervision of the experienced and certified acupuncture doctors.

The theoretical as well as clinical parts of the core curriculum finalizes with the examinations necessary to obtain the state approved certificate on Medical Acupuncture Doctor valid for the period of running 5 years.

AURICULAR, ELECTRICAL AND LASER ACUPUNCTURE

The neuro-physiological characteristics of the auricular microsystem through the concepts of evolution of the auricular and the 3-phase system and P. Nogier's 7 frequencies.

Auricular zones and master points are discussed in details.



After completing the examination in theoretical background of the auricular neuro-physiology multiple clinical practice sessions are taken under the supervision of the certified and experienced acupuncture doctors.

Essentials of the biological action of the electrical frequency modulated current and low power laser radiation of the different spectrum are discussed through the introductory part of the course.

The specific response of the biological tissues and the acu-points is carefully studied in the second part of the theoretical part of the core curriculum.

The substantiation of the optimum physiological parameters for the EAP and LPLR finalize the theoretical part of the curriculum. The evaluation of the theoretical skills (oral examination) concludes the first part of the course.

Multiple clinical practice sessions of the application of electrical (or laser) acupuncture supervised by the experienced staff are aimed at gearing the students to the proper understanding the operation of the main modern technical devices for the related techniques in medical acupuncture.



THE NETHERLANDS



THE NETHERLANDS

NATIONAL/REGIONAL PRACTICES

A. Type(s) of Medical Acupuncture most commonly practiced:

1. TCM

- Chinese philosophical principles are used to describe phenomena in history and examination. Life and body are described as a landscape with hills, valleys and rivers. Energy, the Qi, is flowing in the rivers. Phenomena are described in terms of Yin/Yang (cold/warm, male/female, outside/inside,...), five elements (Water, Wood, Fire, Earth, Metal and as Organs; Kidney, Liver, Heart, Spleen, Lungs) and the twelve meridians. Pulse- and Tongue-diagnosis is used. Dynamic balance and its disturbances is described and treated. TCM includes Acupuncture, Moxa, Chinese Herbs, Food, Qi Gong and Tuina.

2. Auriculo Medicinæ

- The whole body is projected on the ear (somatotopy). The vegetative nervous system is used for measuring and detection and for the treatment of energetic and pathological disorders on somatic and psycho-emotional level. There are different possibilities for treatment, both for acute as for chronic and constitutional disturbances

3. EAV (Electro-Acupuncture according to Voll).

- This is a biophysical method of measurement. Electrical resistance of acupuncture points are used to give diagnosis and treatment. Principles of Traditional Chinese Medicine like the energetic relations between organs and the concept of dynamic balance between organs are used and translated in homeostasis of the internal and external cellular environment.

4. Segmental Acupuncture

- Neuro-physiologic knowledge is the basis of this form of acupuncture. No philosophical basis outside western science is needed. There is a simple connection with regular diagnosis and therapy. Other segmental methods like trigger point-therapy, manual therapy and Neural therapy are linked. Simple neuro-anatomic and neuro-physiologic explanations are often possible for classic acupuncture treatments.



B. Education/Training Requirements

Medical Acupuncture Modality	Theoretical Hours	Clinical Hours	Proficiency Testing	Preliminary Practice
TCM	366	366	Y	N
Auriculo-Medicinae	108	108	Y	N
EAV	108	108	Y	N
Segmental Acupuncture	108	108	Y	N

CORE CURRICULUM

TCM:

Training begins with education in the basic theories of Chinese medicine which includes the theory of Yin and Yang and Five Phases, theory of Zang Fu and their manifestations, theory of Qi, Blood and Body Fluid, the basic substances, theory of channels and collaterals, theory of etiology and pathology, theory of pathogenesis, theory of differentiation of syndromes, theory of functional disorders, therapy-strategy. There is necessarily a stepwise education, first in traditional Chinese medical physiology, pathology and pathogenesis, then in diagnosis, syndrome analysis, and treatment principles. Training in diagnosis includes specific courses dedicated to teaching the nuances of tongue and pulse diagnosis. Starting with local treatment, local points and Ah Shi points, then meridians and outer disorders, organs and inner disorders, functional disorders, causes of illness and pathogenic factors, the Ba Gang principle, Zang Fu organs, extraordinary meridians, tendino-muscular meridians.

Education in the practical application of acupuncture therapy also progresses in a stepwise manner beginning with study of the channels and collaterals, point location and actions, then basic and advanced needle technique and acupuncture treatment principles. Therapeutic techniques include moxibustion and other techniques derived from



acupuncture including cupping therapy, electro-acupuncture and auricular therapy. Training is integrated in the courses. Clinical hours are followed with experienced acupuncture-doctors supervising in their own practice.

Auricular Therapy:

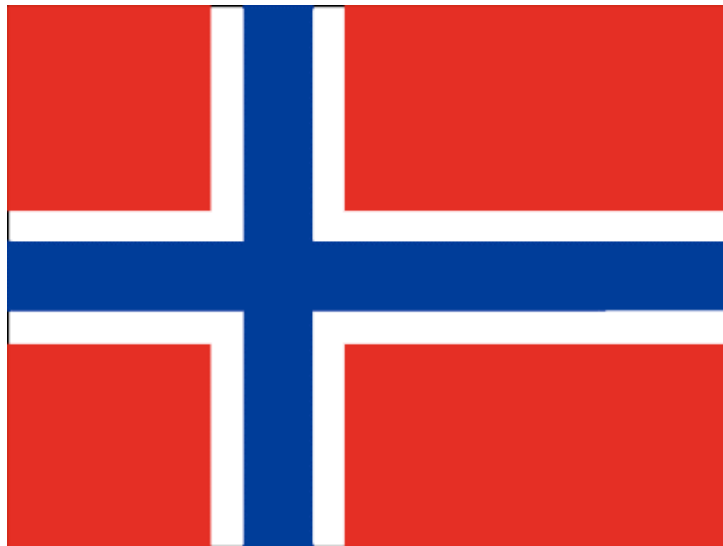
The curriculum begins with a review of the history of auricular acupuncture all over the world. The curriculum also addresses the anatomy, the embryology and the innervations of the ear. It also addresses the details of Nogier's discovery and its evolution to the three-phase system. The curriculum addresses the characteristics of the acupuncture microsystem in general and the bases of their ability to holographically reflect the memory retention pattern of the brain. The concept of auricular territories and auricular phases are discussed including the evolution of the auricular system from the simple inverted fetus presentation to the sophisticated 3-phase system. The concept of the 7 Nogier frequencies and the auricular zones with the various master points are also addressed. The projection somatotopy of the three embryological tissues (mesoderm, endoderm and ectoderm) are fully discussed with their relative clinical application to acute, chronic and chronic degenerative pathology. The curriculum then takes the students to multiple clinical practice sessions of point identification and clinical applications of three-phase auricular therapy. Identification and treatment of energetic blockages are discussed. The students are guided on how to conduct a proper auricular consultation and the application of treatment principles. The anatomical and the physiological principles of choosing the appropriate ear for treatment are discussed together with the principles of using the various auricular needles, electrical devices, laser devices, magnets, beads, and pellets. Multiple sessions of clinical practice are aimed at gearing the students to appropriately examine, diagnose, and treat various clinical and energetic problems, like resistance to therapy, focus-therapy, addiction therapy, pain treatment.

**EAV:**

EAV, Electro Acupuncture according to Voll, is a western development of acupuncture. It is an bio-electrical and electromagnetic measurement and treatment system. The Basic Bio Regulation System has the “Grundsystem von Pischinger” as fundamental. In recent years this form of therapy is developing more to a specific form as biophysical medicine. The principles and theory is studied and practical training done. Further study is necessary for those who choose to.

Segmental Acupuncture:

Western medical diagnosis is the starting point of segmental diagnosis. Translating western diagnosis by neuro-anatomic and neuro-physiologic theory into segmental diagnosis and then therapy is the goal. The locomotor disorders of upper and lower extremities and disorders of thorax and abdomen are treated. The relation of segmental acupuncture, Trigger point-acupuncture, manual therapy and neural therapy are treated. Scientific outcomes are discussed. Principles of theory and treatment are trained.



NORWAY



NORWAY

NATIONAL/REGIONAL ACUPUNCTURE PRACTICES

A. Type(s) of Medical Acupuncture most commonly practiced:

1. Medical Acupuncture

- Medical acupuncture is use of acupuncture by health personnel where the diagnosis is based on Western medicine and the effect are explained by modern neurophysiologic understanding. The choice of treatment is based on a combination of Western medicine and the system of TCM (Traditional Chinese Medicine).

Medical acupuncture includes Myofascial Trigger Point Treatment and Electroacupuncture.

2. TCM (Classical acupuncture)

- TCM acupuncture is defined as a type of acupuncture which is based on creating a balance between and among the eight principles of complementary opposites (yin/yang, internal/external, excess/deficiency, hot/cold).

3. Microtechniques

- Micro techniques are different therapeutic systems where the organs are projected to different parts of the body making a kind of “map” and where treatment in the map will affect the representing organ.

Different micro techniques most used in Norway is Auricular Acupuncture Therapy and Yamanoto New Scalp Acupuncture (YNSA).



4. Intramuscular Stimulation (IMS) ad modum Gunn

- IMS is an examination and treatment of chronic pain in the muscle- and skeletal system accompanied by sensory, motor and autonomic manifestations. This indicates a functional and/or a pathologic change in the peripheral nervous system. This is called neuropathy or radiculopathy.

B. Education/Training Requirements

Medical Acupuncture Modality	Theoretical and Clinical	Proficiency Testing	Preliminary Practice
Medical acupuncture	172 +172	Y	N
TCM	3 years	Y	N
Auricular Therapy	24	N	Y
YNSA	24 + 24	N	Y
IMS	24	N	Y

CORE CURRICULUM

MEDICAL ACUPUNCTURE

The education in Medical Acupuncture in Norway is open for physicians, dentists, physiotherapists, chiropractors and nurses. The education is divided in two parts and each part lasts one year. There are arranged 5 separate courses of 3-5 days through the year, and the students will practice needling between the courses. The courses are both theoretical and practical. Before exam of each year the students have to visit an experienced acupuncturist for 2 days in practice and deliver 3 protocols, each of a case in their own practice.



The first year the education is focusing on treatment of the muscle- and skeletal system and pain. The students get to learn the neurophysiologic mechanisms of the pain modulating systems and how acupuncture works, what experimental and clinical research has told us about the effect of acupuncture, the basic principles of TCM, especially about the meridians, they learn a clinical model for individual acupuncture treatment, the theory of myofascial triggerpoints, electroacupuncture, the examination and treatment of the different clinical indications within physical medicine.

The second year the students learn more of the TCM theory, "The Medicine of Systematic Correspondences". The education present the treatment model which is based on the eight principles, the principle of pathogenic factors and the syndromes.

TCM ACUPUNCTURE

There is a separate education in TCM acupuncture which leads to a bachelor degree at Norwegian Acupuncture College. This is a 3 year full time program (or 4 year part time) for everyone that is qualified for college. Health personnel don't need to follow the lessons in basic anatomy and pathology (40/180 study points).

AURICULAR ACUPUNCTURE THERAPY

There is not a specific school for auricular therapy in Norway, but the Norwegian Society of Medical Acupuncture arranges courses of Auricular therapy for their members who has fulfilled the education in Medical acupuncture. Usually the course lasts 3 days.

YNSA (Yamanoto New Scalp Acupuncture)

YNSA is also taught to members of the Norwegian Society of Medical Acupuncture by weekend courses, one basic course and one advanced course. This Japanese scalp acupuncture is a popular microtechnique.



IMS (Intramuscular stimulation ad modum Gunn)

This education can be learned by doctors or physiotherapists without the knowledge of acupuncture, but the courses can be shorter when the student has been practicing acupuncture earlier.



PORTUGAL



PORTUGAL

NATIONAL/REGIONAL PRACTICES

A. Type(s) of Medical Acupuncture most commonly practiced:

1. TCM and related techniques

- TCM acupuncture is defined as a type of acupuncture which is based on creating a balance between and among the eight principles of complementary opposites (yin/yang, internal/external, excess/deficiency, hot/cold)

2. Contemporary Medical Acupuncture and related techniques

- Contemporary Medical Acupuncture focuses on the medical diagnosis in terms of peripheral and central sensitization phenomenon, and the normalization of those states by needling specific neuro-reactive locations, with the objective of modulating abnormal nervous system activity. The main focus of this approach is to treat muscle-skeletal pathology and internal organ dysfunction, based in the knowledge of the peripheral nerve distribution and segmentation patterns.

3. Related Techniques -Microsystems (auriculotherapy, craniopuncture,

- Auricular Acupuncture Therapy is a therapeutic system utilizing the human ear where organs are projected as transitory holographic reflections of the brain's memory. This medical model enables the detection and the treatment of energetic and pathological disturbances on both the somatic and the psycho-emotional levels. This is achieved through the use of a complex physical and energetic reflex system and a unique somatotopic correspondence organization.

Craniopuncture is a system using areas of the scalp to treat specific problems of the CNS.

Laserpuncture consists on the use of low level laser potency on the points or areas of acupuncture, instead of the use of needles.



In the teaching, these techniques (related techniques) are included in the main curriculum and on special workshops. They do not give for themselves enough curriculum to get the degree on medical acupuncture.

B. Education/Training Requirements

Medical Acupuncture Modality	Theoretical Hours	Clinical Hours	Proficiency Testing	Preliminary Practice
TCM	250	50	Y	N
Contemporary Medical Acupuncture	200	100	Y	N
Related techniques	-	-	-	-

CORE CURRICULUM

According to the Portuguese Medical Council rules, all the acupuncture courses must be at the Universities, all the teachers and instructors must be medical doctors and the students should have the degree on medicine recognized.

1. TCM

Training is organised in modules and begins with education in the basic theories of Chinese medicine which includes the theory of Yin and Yang and Five Phases, theory of Zang Fu and their manifestations, theory of Qi, Blood and Body Fluid, theory of channels and collaterals, theory of etiology and pathology, theory of pathogenesis, theory of differentiation of syndromes. There is necessarily a stepwise education, first in traditional Chinese medical physiology, pathology and pathogenesis, then in diagnosis, syndrome analysis, treatment principles and the study of the channels and collaterals, point location



and actions, then basic and advanced needle technique and acupuncture treatment principles.

Therapeutic techniques include moxibustion and other techniques derived from acupuncture including cupping therapy, electro-acupuncture, scalp acupuncture, and auricular therapy.

Some knowledge of contemporary acupuncture is also included, as the neurophysiology of acupuncture, mechanism of action, scientific understanding of traditional concepts and general clinical approach.

The clinical practice is under supervision on a consultation inside the Hospital, or, if it is not possible, under the supervision of a doctor with the degree on acupuncture recognized by the Portuguese Medical Council.

Every two modules are assessed in terms of knowledge of the students and appreciation of the teachers and teaching. In one of the Universities, at the end of the course each student has to present a thesis.

2. Contemporary Medical Acupuncture

The focus of the Contemporary Medical Acupuncture Course is on how to use needling in order to correct Peripheral and Central Nervous System dysfunction, with the objective to treat MSK problems and internal Organ dysfunctional states.

The course instructs students on the evolution of Acupuncture throughout the ages and core TCM Acupuncture concepts in a historic context, so that students can better understand recent advances in knowledge of acupuncture.

Subjects of efficacy and safety, as regulation of acupuncture practice in Portugal are addressed early in the course. Also, in the beginning of the course, students learn basic needling techniques by practicing on each other under instructor supervision, learning how to perform safe and effective needling. Both manual and electro-acupuncture



techniques are taught. The International Nomenclature is also taught in the beginning of the course.

The students are then presented to the Mechanisms of Action of acupuncture, in a unique scientific perspective, relating to anatomy and physiology concepts.

The core of the course being the treatment of myofascial syndromes and dysfunctional states of the Peripheral and Central Nervous System, the training has its main subject on the correct evaluation and treatment of those syndromes and states, teaching specific manual palpation techniques, as well as techniques for diagnosing segmental and autonomic nervous system dysfunction. ROM articular testing and muscle strength testing for signs of segmental dysfunction are also a significant part of the physical evaluation taught to the students, as is kinesiology of the locomotor apparatus.

Anatomy lab workshops enhance the knowledge students have acquired in the Acupuncture Point location classes. In these classes, the attention is directed both at the superficial and deep anatomy, with reference to segmental concerns, location of relevant nerves, neuro-vascular bundles and other neuro-reactive structures. For each Acupuncture Point needling techniques are taught, as well as safety concerns. Those techniques will be trained by the students in the needling workshops, under supervision of the instructors.

The course is divided in Contact Modules, in which the main focus is training the diagnostic and needling skills, and Homework Modules, in which students review the physiology and anatomy concepts that are fundamental to understanding the effectiveness of acupuncture, and to perform treatments in a safe and effective way. Most of the time of the Contact Modules is dedicated to evaluation and needling workshops, theoretical lectures being as succinct as possible. Students will spend most of the time of the Homework Modules learning those theoretical concepts. Learning between the Contact Modules is directed by specific tasks and constantly monitored.

All of the teachers involved in teaching are medical doctors, with the degree in Medical Acupuncture recognized by the Portuguese Medical Council, or leading portuguese or foreign specialists in the fields of Medical Acupuncture, Anatomy or Phisiology.



Evaluation: in each of the Contact Units but the first, the progression of each student is evaluated with a written test. In the last Contact Unit, the students are evaluated also in an anatomy lab test, and in a proficiency test, in which they must demonstrate correct evaluation techniques and safe and effective needling techniques. Continuous proficiency evaluation is performed in all of the needling workshops during the Course. Homework Study Modules are evaluated by the completion of all of the assignments, verified by submission of a written report per Module.

Evaluation of the course by the students is performed by the completion of a report at the end of the Course.



SPAIN



SPAIN

NATIONAL/REGIONAL ACUPUNCTURE PRACTICES

A. Type(s) of Medical Acupuncture most commonly practiced:

1. Traditional medical acupuncture

- Acupuncture based on traditional Chinese Medicine, TCM acupuncture, is defined as a type of acupuncture which is based on creating a balance between and among the eight principles of complementary opposites (yin/yang, internal/external, excess/deficiency, hot/cold). 5 phases. Channels and collaterals.

2. Contemporary acupuncture

- Acupuncture based on neurophysiology, trigger points and modern medicine basis. Acupuncture based on physiological basis.

B. Education/Training Requirements

Medical Acupuncture Modality	Theoretical Hours	Clinical Hours	Proficiency Testing	Preliminary Practice
TCM	300	150	Yes	
Contemporary	50	-	Yes	



CORE CURRICULUM

Training begins with education in the basic theories of Chinese medicine which includes the theory of Yin and Yang and Five Phases, theory of Zang Fu and their manifestations, theory of Qi, Blood and Body Fluid, theory of channels and collaterals, theory of etiology and pathology, theory of pathogenesis, theory of differentiation of syndromes. There is necessarily a stepwise education, first in traditional Chinese medical physiology, pathology and pathogenesis, then in diagnosis, syndrome analysis, and treatment principles. Training in diagnosis includes specific courses dedicated to teaching the nuances of tongue and pulse diagnosis.

Education in the practical application of acupuncture therapy also progresses in a stepwise manner beginning with study of the channels and collaterals, point location and actions, then basic and advanced needle technique and acupuncture treatment principles. Therapeutic techniques include moxibustion and other techniques derived from acupuncture including cupping therapy, electro-acupuncture, scalp acupuncture, and auricular therapy.

The process of training then progresses to a series of courses on clinical acupuncture practice. These clinical acupuncture practice courses teach a detailed understanding and treatment of common diseases according to the theory and experience of traditional Chinese medicine. These include the common illnesses of internal medicine, pediatrics, dermatology, ENT, ophthalmology, and obstetrics and gynecology and trauma.

The educational program includes some courses in the history and philosophy of Chinese medicine, introduction to Chinese classic texts, (Nei Jing, Nan Jing) and in modern scientific studies on the mechanism and action of acupuncture.

During the period of supervised practice the doctor in training assumes the responsibilities of diagnosis and treatment under the supervision of experienced doctors of acupuncture.



The goal of the training outlined above is to produce physicians whose theoretical and practical knowledge and proficiency in acupuncture therapy is at a level commensurate with what is required for any specialty of medicine. Training physicians in TCM acupuncture requires much more time than styles of acupuncture that utilize acupuncture primarily within the theoretical framework of modern medical theories, hence the greater number of hours required.

We spend 50 hours explaining contemporary acupuncture and trigger points with the acupuncture treatment, as well.

We have a master in the University of Barcelona and another in the Llieda University , only for doctors, 500 hours.

We have an accreditation for the doctors who have pass the exam from the Official Medical College in Barcelona valid in Spain.



TURKEY



TURKEY

NATIONAL/REGIONAL ACUPUNCTURE PRACTICES

A. Type(s) of Medical Acupuncture most commonly practiced:

1. Medical Acupuncture widely used in Europe
 - Medical Acupuncture widely used in Europe is defined as a type of acupuncture which were treated meridian patterns. So, the movement of energy is emphasized to promote healing. Trigger points are also treated with this concept.
2. TCM
 - TCM acupuncture is defined as a type of acupuncture which is based on creating a balance with using Traditional Chinese Medicine Diagnostic Examinations.
3. Auricular Therapy
 - Auricular Acupuncture Therapy is a therapeutic system utilizing the human ear where organs are projected as transitory holographic reflections of the brain's memory. This medical model enables the detection and the treatment of energetic and pathological disturbances on both the somatic and the psycho-emotional levels.

B. Education/Training Requirements

Medical Acupuncture Modality	Theoretical Hours	Clinical Hours	Proficiency Testing	Preliminary Practice
Medical Acupuncture widely used in Europe	100	50	Y	N
TCM	200	100	Y	Y
Auricular Therapy	30	20	Y	N



CORE CURRICULUM

Medical Acupuncture widely used in Europe

Acupuncture application in modern medicine involves the combination of physiology, pathology, channel and point location, palpation of trigger points, needling technique, gross anatomy of major acupuncture points and indication and identification of the acupuncture channels and points.

Clinical instruction offers supervised experience in critical thinking, patient evaluation and application by trained instructors who are physician acupuncturists. Diagnosis is based on determining the level and intensity of the energy circulation disturbance.

TCM ACUPUNCTURE

Training begins with education in the basic theories of Chinese medicine which includes the theory of Yin and Yang and Five Phases, theory of Zang Fu and their manifestations, theory of Qi, Blood and Body Fluid, theory of channels and collaterals, theory of etiology and pathology, theory of pathogenesis, theory of differentiation of syndromes. Therapeutic techniques include moxibustion and other techniques derived from acupuncture including cupping therapy, electro-acupuncture, scalp acupuncture, mouth, hand, foot, ECWO and auricular therapy. These clinical acupuncture practice courses teach a detailed understanding and treatment of common diseases according to the theory and experience of traditional Chinese medicine.

AURICULAR ACUPUNCTURE THERAPY

The curriculum addresses the anatomy, the embryology and the innervations of the ear. It also addresses the details of Nogier's discovery and its evolution to the three-phase system. The concept of the 7 Nogier frequencies and the auricular zones with the various master points are also addressed. The anatomical and the physiological principles of choosing the appropriate ear for treatment are discussed together with the principles of using the various auricular needles, electrical devices, laser devices, magnets, beads, and pellets.



UNITED KINGDOM



UNITED KINGDOM

NATIONAL/REGIONAL ACUPUNCTURE PRACTICES

A. Type(s) of Medical Acupuncture most commonly practiced:

Western medical acupuncture (WMA)

- Western medical acupuncture is a therapeutic modality involving the insertion of fine needles; it is an adaptation of Chinese acupuncture using current knowledge of anatomy, physiology and pathology, and the principles of evidence based medicine.

B. Education/Training Requirements

Medical Acupuncture Modality	Theoretical Hours	Clinical Hours	Proficiency Testing	Preliminary Practice
BMAS CoBC	85	40*		
BMAS SaCA	300	40*		
BMAS Diploma	300	110*		
WMA PG Cert	600	40*		
WMA PG Diploma	1200	100*		
WMA MSc	1800	100*		

* estimated minimum number of hours spent in clinical practice to complete the requirements for this award – these hours are included within the total in the Theoretical hours” column.



CORE CURRICULUM

Regulations for the Certificate of Basic Competence in Medical Acupuncture

The following general notes for guidance to candidates should be read in conjunction with the more detailed *CoBC Assessment Instructions*, found in the Portfolio materials and on the website.

Prior qualifications

Candidates must be health professionals who are registered with their appropriate statutory regulatory body and must be a current Member of the British Medical Acupuncture Society (BMAS).

Outcomes, competences and their assessment

<i>Outcomes</i>	<i>Assessment</i>
Basic awareness of the historical and philosophical background of acupuncture	Certificate of Attendance on BMAS Foundation Course (or equivalent) and completed portfolio workbook
Working understanding of the procedures for the safe and effective use of medical acupuncture	
Working understanding of safety principles, and possible contraindications and cautions	Safety test and points checklists, signed off by suitably qualified assessor in workshop or appropriate assessment setting. Candidates must complete and return a short assessment paper on the safety aspects of acupuncture (for CoBC). Notes and textbooks may be referred to when completing this paper.
Factual knowledge of the use of: ⇒ trigger points ⇒ neurophysiology of acupuncture ⇒ segmental acupuncture	Points checklists 1 to 4 Case studies 1 to 12 (in two sets) and case presentations. Final quiz and ongoing self-reflection questions A logbook of 30 <i>short</i> cases that the candidate has treated, and two <i>long</i> cases written in detail.



University of Hertfordshire module

The first module towards the Postgraduate Certificate in Western Medical Acupuncture is called Western Medical Acupuncture in Clinical Practice. It is a 30-credit module, and has been designed around the CoBC requirements with additional academic discussion at Masters level (M-level). This module may be undertaken following the CoBC or instead of the CoBC.

Outline syllabus for the BMAS Diploma in WMA

Note: those who have studied the Foundation Course and achieved CoBC will have already covered some areas of this syllabus, but will revisit them at a new level of sophistication through Intermediate-level study. The first section of this indicative syllabus should be covered in order to achieve the National Professional Standard.

Western medical acupuncture

Acupuncture history
Clinical aspects in general

Traditional acupuncture

Historical aspects
Overview of concepts
Development of appropriate attitudes to the subject

Professional issues

Professional practice (eg ethics, communicating with patients, relationships with colleagues)
Regulation
Safe practice
Running clinics

Practical skills

Needling (classical, trigger point, periosteal, superficial)
Safe needling techniques
Electroacupuncture and TENS
Auriculotherapy



Treatment of clinical conditions in musculoskeletal medicine 1 (knowledge and skills)

Headache and neck pain

Shoulder pain

Lumbogluteal pain

Knee and ankle pain

Scientific aspects of acupuncture

Neurophysiological pathways of pain

Mechanisms of action of acupuncture in pain modulation

Pathophysiology of Myofascial Trigger points

Potential mechanisms of other effects eg wound healing, autonomic modulation, immunological modulation

Methodology of point-selection

Neurophysiological rationale for point selection

Segmental acupuncture

Approach to general complaints

Approach to areas with insufficient clinical data on efficacy or effectiveness of acupuncture

Research and audit

Audit

Critical reading relevant to WMA

The role of acupuncture in the medical systems: clinical topics

Addictions

Allergies

Anaesthetics and Pain Medicine

Cardiology

ENT and Respiratory Medicine

Gastroenterology

Gynaecology

Neurology

Obstetrics



Palliative Medicine
Psychiatry and Psychology
Rheumatology
Urology

Studying for the Diploma in Medical Acupuncture (accreditation)

Accreditation will involve two elements: Training and Clinical Experience.

The training will be a minimum of 100 'training hours', normally achieved by a combination of participation at courses and meetings, and distance learning.

The clinical experience will be assessed by inspection of a logbook of at least 100 case histories and by a clinical assessment.

Practitioners who have had long clinical experience in acupuncture (perhaps through practice outside the UK) may be granted exemption from part or all of the requirements for accreditation, by special agreement of the Competence, Accreditation and Examining Board (CAEB).

Advice may be sought on suitability of distance learning from the CAEB via the BMAS office.

Training

(100 hours)

The following list of educational activities should not be regarded as prescriptive, but rather as a guide. Your BMAS Portfolio and the completed workbook pages should provide a useful structure to organise evidence of your learning in the different modes detailed below.

In general, if CPD time has been granted for a course or meeting, this will be used as the training hours; if not, the length of the programme will be used. Programmed discussion time is accepted, but not meal times. A limited element of (not more than 10 hours) non-acupuncture training will be accepted in relevant medical topics, but a reasonable case must be made for the inclusion of subjects outside those given in the list.

For distance learning with some commonly used textbooks and journals, including acupuncture related material from non-acupuncture books and individual articles from other journals, a short synopsis should be submitted and training hours will be awarded on receipt.



It should be noted that the BMAS does not accredit courses, and any non-BMAS hours used towards accreditation need to be detailed. For courses or meetings a copy of the programme and certificate of attendance should be supplied. Western medical acupuncture (WMA) training is expected to make up the majority of the hours towards accreditation. TCM-based training is allowable for a maximum of 50% of the hours required (ie 50 of the 100 hours required for accreditation), and each TCM-based course will be allowable for half of the programmed hours.

A Participation learning (Minimum of 50 hours)

1. Courses

- ⇒ BMAS Courses (CPD time - generally 6 hours per day)
- ⇒ Non BMAS WMA Courses (PGEA/CME time, but if not PGEA/CME approved – programme time)
- ⇒ Non BMAS TCM-based Courses (half of programme time)

2. BMAS and national meetings

- ⇒ BMAS Scientific Meetings (PGEA/CME time - generally 6 hours per day)
- ⇒ ICMART and International Symposia (Programme time)
- ⇒ Non BMAS WMA Meetings (PGEA/CME time, but if not PGEA/CME approved – programme time)
- ⇒ Non BMAS TCM-based Meetings (half of programme time)

3. Acupuncture clinics

- ⇒ BMAS London Teaching Clinic – attendance as trainee or observer (Clinic time)
- ⇒ Clinics run by BMAS member with the DipMedAc – attendance as trainee or observer (Clinic time)
- ⇒ Other clinics – up to 1 hour per nominal half day session by submission of learning objectives and outcomes

B Distance learning (maximum of 30 hours)

1. BMAS DVDs/CDs/Videos

- ⇒ as running time, by submission of listed learning outcomes, critique or synopsis

2. Acupuncture books

- ⇒ up to 2 hours per item, by submission of listed learning outcomes, critique or synopsis

3. Acupuncture In Medicine ISQs

- ⇒ hours awarded by marking scheme



4. Other journals

- ⇒ up to 2 hours per item, by submission of listed learning outcomes, critique or synopsis

C Preparation learning (maximum of 10 hours)

1. Presentation of lecture, research paper or poster

- ⇒ to BMAS or ICMART (3 hours)
 - ⇒ to medical audience or nursing, physiotherapy, dental or veterinary audience (3 hours)
 - ⇒ to lay audience (2 hours)

2. Media interview

- ⇒ Broadcast TV or Radio (1 hour)

3. Publication of article

- ⇒ if based on a presentation the maximum combined time of 4 hours is awarded
 - ⇒ in an acupuncture journal (3 hours)
 - ⇒ in any other medical journal (3 hours)
 - ⇒ in the lay press (2 hours)

4. Research and audit

- ⇒ Preparation (2 hours)
- ⇒ Publication (+1 hour)

D Related medical learning (maximum of 10 hours)

Basic Medical Sciences
 Neurophysiology
 Pain Management
 Neurology
 Rheumatology
 Orthopaedics
 Sports Injuries

- ⇒ Lectures or case presentations (CME or CPD time)
 - ⇒ Out-patient observer (Clinic time)
 - ⇒ Non-acupuncture books & journals – up to 2 hours per item by submission of listed learning outcomes



Clinical experience: requirements for submission

(Minimum 100 Cases)

Case history records

A copy of a logbook must be submitted consisting of a minimum of 100 cases treated with acupuncture. A good variety of diseases treated, and acupuncture points and techniques used will normally be expected.

The number of cases needed for accreditation may include the 30 presented for the Certificate of Basic Competence. There is a range of submission options, giving a different balance between short and detailed cases and publications: it is very important that you review the notes, below, before you decide on your options. You must present your work to a standard that is considerate of your assessors and appropriate to a professional award.

Completing the logbook

This is the same logbook as that used for the COBC and a sample is available at the BMAS Website and in the FC Portfolio Workbook.

The logbook should only include treatments that you have carried out yourself, and you must sign the attached declaration to that effect.

It is useful to indicate the nature of the population from which the patients are selected, ie urban/rural primary care, pain clinic, private, etc.

Logbooks should have anonymous patient data.

Cases must be grouped and presented in diagnostic categories ie back pain, knee pain, etc.

A success rate for each category should be given, as should an overall success rate.

It is easier to accomplish this grouping if a database is used for the Dip Med Ac logbook.

Outcome categories should be simple, and you should provide a key defining each one (see sample).



If you are using the sample key provided, this should be copied and included with the logbook.

Logbook entries should be typewritten to aid legibility.

Detailed case reports

(See also Appendix A for assessment criteria)

Detailed reports should demonstrate that you have a deeper understanding of the principles of acupuncture treatment.

These detailed case histories should all describe treatments that you have carried out yourself and must be your own original work except where stated otherwise. You must sign the declaration to that effect.

You should choose a wide variety of cases and present each one separately, typewritten on A4 size paper.

It is easier to read a case history that is written in narrative form than note form. Narrative is expected at Dip Med Ac level.

It is sometimes helpful to use the diagnostic category as a title, eg Case One – Tennis Elbow.

Discuss the relevance of the past history including family history, social history and occupational history.

Pay particular attention to the presenting complaint and the history of the presenting complaint with other treatments tried and the results of the treatment.

List any investigations and results.

Examine the patient and record your findings with extra emphasis on the aspects of the examination related to acupuncture treatment.



If myofascial trigger points are present, specify which muscles are affected.

A pain diagram marked on a body outline is recommended, if relevant. Colour may be used to differentiate between symptoms, and various symbols may be used for trigger points, acupuncture points, etc.

Set out a treatment plan, and include your rationale for the points selected. It is good practice to decide what you are going to do, and how you are going to assess outcomes, before you start treatment. Your documented treatment plan should include length of proposed course of treatment, frequency of sessions, style of intervention, and how outcomes are to be assessed.

WHO standard abbreviations should be used to describe points.

Accurately record the treatments given and discuss the response to the treatment, though it is not necessary to list every point and every session in detail. You should give an impression of the approach used, any changes to treatment resulting from the response, and the strength of stimulus used.

A discussion section is a crucial part of the case report. It allows you to convey your background knowledge of the area, and give a considered analysis of the case. It should show that you understand the evidence-based approach, and that you are prepared to be flexible in your approach and analysis. Other relevant topics may include potential adverse effects, assessment of outcome, service management implications, potential questions for audit, and your educational needs.

Provide references to support your treatment rationale, set out in the standard format used for publication. (See the back page of *Acupuncture in Medicine – Instructions for Authors*)

At the Dip Med Ac level long cases should be adequately referenced. Reference to and informed discussion of the latest research from medical literature should be presented, and relevant knowledge of standard textbooks should be demonstrated. This does not mean that you are expected to perform a systematic review for each condition, but citing



the recent papers of relevance to the case is required. You will find AIM and the online discussion groups helpful in keeping abreast of latest research.

Published papers (optional)

Under Application Option B, ten of the fifteen detailed cases required under Option A may be replaced by submission of two papers which have been published in peer reviewed journals.

The papers must reflect the practice of the candidate or must involve clinical acupuncture research.

Suitable papers would include:

- ⇒ case reports
 - ⇒ evidence based case reports
 - ⇒ case series
 - ⇒ audits
 - ⇒ clinical acupuncture studies (cohorts, CCTs, RCTs)

Submission to CAEB

Please check that you are submitting:

Option A:

- ⇒ a logbook of 100 cases treated
 - ⇒ fifteen detailed case histories
 - ⇒ a signed declaration of originality

Option B:

- ⇒ a logbook of 150 cases treated
 - ⇒ five detailed case histories
 - ⇒ two published papers
 - ⇒ a signed declaration of originality

Candidates must keep a copy of all paperwork submitted.

Digital submissions should be as Word documents.



UNITED STATES of AMERICA



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NATIONAL/REGIONAL ACUPUNCTURE PRACTICES

A. Type(s) of Medical Acupuncture most commonly practiced:

1. French Energetics

- French Energetic Acupuncture is defined as a type of acupuncture which emphasizes the movement of energy to promote healing. Meridian patterns, in particular the yin-yang pairs of primary meridians are stressed.

2. TCM

- TCM acupuncture is defined as a type of acupuncture which is based on creating a balance between and among the eight principles of complementary opposites (yin/yang, internal/external, excess/deficiency, hot/cold).

3. Auricular Therapy

- Auricular Acupuncture Therapy is a therapeutic system utilizing the human ear where organs are projected as transitory holographic reflections of the brain's memory. This medical model enables the detection and the treatment of energetic and pathological disturbances on both the somatic and the psycho-emotional levels. This is achieved through the use of a complex physical and energetic reflex system and a unique somatotopic correspondence organization.



B. Education/Training Requirements

Medical Acupuncture Modality	Theoretical Hours	Clinical Hours	Proficiency Testing	Preliminary Practice
French Energetics	200	100	Y	N
TCM	500	500	Y	Y
Auricular Therapy	30	30	N	N

CORE CURRICULUM

FRENCH ENERGETIC ACUPUNCTURE

Beginning with an historical and scientific overview of acupuncture and its application in modern medicine, the core curriculum involves the combination of physiology, pathology, channel and point location, palpation of trigger points, needling technique, gross anatomy of major acupuncture points and indication and identification of the acupuncture channels and points. It encompasses traditional models of acupuncture, including the circulation of Qi energy, characteristics and symptoms of the energy axes, the action of command points and the five phases model as well as classical and/or specialty applications of acupuncture.

Clinical instruction offers supervised experience in critical thinking, patient evaluation and application by trained instructors who are physician acupuncturists. Instruction involves review of point and meridian locations, hands-on patient evaluation and interval testing with a final examination.

Diagnosis is based on determining the level and intensity of the energy circulation disturbance. Therapy is directed at accessing the concomitant axes and subsystems involved.



TCM ACUPUNCTURE

Training begins with education in the basic theories of Chinese medicine which includes the theory of Yin and Yang and Five Phases, theory of Zang Fu and their manifestations, theory of Qi, Blood and Body Fluid, theory of channels and collaterals, theory of etiology and pathology, theory of pathogenesis, theory of differentiation of syndromes. There is necessarily a stepwise education, first in traditional Chinese medical physiology, pathology and pathogenesis, then in diagnosis, syndrome analysis, and treatment principles. Training in diagnosis includes specific courses dedicated to teaching the nuances of tongue and pulse diagnosis.

Education in the practical application of acupuncture therapy also progresses in a stepwise manner beginning with study of the channels and collaterals, point location and actions, then basic and advanced needle technique and acupuncture treatment principles. Therapeutic techniques include moxibustion and other techniques derived from acupuncture including cupping therapy, electro-acupuncture, scalp acupuncture, and auricular therapy.

The process of training then progresses to a series of courses on clinical acupuncture practice. These clinical acupuncture practice courses teach a detailed understanding and treatment of common diseases according to the theory and experience of traditional Chinese medicine. These include the common illnesses of internal medicine, pediatrics, dermatology, ENT, ophthalmology, and obstetrics and gynecology and trauma.

The educational program includes some courses in the history and philosophy of Chinese medicine, introduction to Chinese classic texts, (Nei Jing, Nan Jing) and in modern scientific studies on the mechanism and action of acupuncture.

During the period of supervised practice the doctor in training assumes the responsibilities of diagnosis and treatment under the supervision of experienced doctors of acupuncture.



The goal of the training outlined above is to produce physicians whose theoretical and practical knowledge and proficiency in acupuncture therapy is at a level commensurate with what is required for any specialty of medicine. Training physicians in TCM acupuncture requires much more time than styles of acupuncture that utilize acupuncture primarily within the theoretical framework of modern medical theories, hence the greater number of hours required.

AURICULAR ACUPUNCTURE THERAPY

The curriculum begins with a review of the history of auricular acupuncture all over the world. The curriculum also addresses the anatomy, the embryology and the innervations of the ear. It also addresses the details of Nogier's discovery and its evolution to the three-phase system.

The curriculum addresses the characteristics of the acupuncture micro-system in general and the bases of their ability to holographically reflect the memory retention pattern of the brain. The concept of auricular territories and auricular phases are discussed including the evolution of the auricular system from the simple inverted fetus presentation to the sophisticated 3-phase system. The concept of the 7 Nogier frequencies and the auricular zones with the various master points are also addressed.

The projection somatotopy of the three embryological tissues (mesoderm, endoderm and ectoderm) are fully discussed with their relative clinical application to acute, chronic and chronic degenerative pathology. The curriculum then takes the students to multiple clinical practice sessions of point identification and clinical applications of three-phase auricular therapy.

Identification and treatment of energetic blockages are discussed in full. The students are guided on how to conduct a proper auricular consultation and the application of treatment principles. The anatomical and the physiological principles of choosing the appropriate ear for treatment are discussed together with the principles of using the various auricular needles, electrical devices, laser devices, magnets, beads, and pellets.



Multiple sessions of clinical practice are aimed at gearing the students to appropriately examine, diagnose, and treat various clinical and energetic problems.



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International Congress of Medical Acupuncture and Related Technologies (ICMART)

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