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Traditional Chinese
Medicine

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STUDENT CLINIC HANDBOOK

Your guide to OCTCM clinical practice, procedures, and protocol

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OCTCM Student Clinic Handbook

Table of Contents

Table of Contents	2
Student Information	6
Introduction	7
OCTCM Student Clinic Emergency Management.....	8
Safety Protocols.....	8
Emergency Procedure(s)	8
Emergency Phone List	9
Patient Medical Emergency	10
Incident Report.....	10
OCTCM Incident Report Template(Student):.....	11
OCTCM Incident Report Template(Supervising Faculty):	12
OCTCM Student Clinic Room Preparation.....	13
Room Safety	13
Room Preparation	13
Room Cleaning	14
At the end of clinic	16
Cleaning Log Sample:	16
Clinical Policies	17
1. Guidelines for needle manipulation and handling.....	17
Contra-indications to needling.....	17
2. Guidelines for the use of Moxibustion.....	18
Contra-Indications to Moxibustion	18
3. Guidelines for use of Electrical Stimulators	19
Contra-Indications to Electrical Stimulation	19
4. Guidelines for Cupping.....	19
Contra-Indications to Cupping	20
5. Guidelines for the use of Auricular Press Needles	20
Contra- Indications for Auricular Press Needles	21
6. Management of Possible Needle Accidents.....	21
Stuck or Bent Needle.....	22
Broken Needle	23
7. Injury to Organs.....	23

OCTCM Student Clinic Handbook

8. Health Records	25
9. Hand Washing	26
10. Infection Control.....	27
11. Handling Disposal of Sharps	28
12. Disclosure of Student Status	29
13. Clinical Dress Code	29
14. Guidelines on Patient Care.....	30
TCM Practitioners/Herbalists/Massage & Qi Gong Practitioners	34
Appendices	35
Appendix A: Code of Professional Ethics for Acupuncturists/TCM Practitioners	35
Appendix B: Patients' Rights	35
Appendix C: OCTCM Student Clinic Informed Consent Form	38
Risks and Complications of Treatment.....	39
Consent.....	40
Appendix D: Verbal Informed Consent Checklist	42
Appendix E: Accepted Abbreviations and Descriptive Terms for Charting.....	43
TCM Reference for Needling, Moxibustion and Cupping	46
Descriptive terms used for charting.....	47
Appendix F: Acupuncture Needling Safety Policy	48
Appendix G: Universal Precautions and the Use of Gloves	49
Objectives and Student Requirements	50
The Clinical Practicum	50
Objectives	50
Supervision	50
Student Requirements	50
Clinical Practicum	55
Clinical Evaluation Strategies Component	55
Criteria for Successful Completion of Clinical Education	56
Professional Performance Evaluations (PPE)	56
Guidelines.....	56
Successful Completion of All Clinical Practica	57
Demonstration of Safe Practice Throughout All Clinical Practica	57

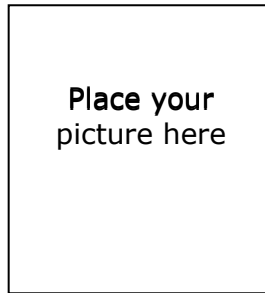
OCTCM Student Clinic Handbook

Demonstration of Ethical Behavior at All Times	58
Clinical Practice Expectation	58
Clinical Practicum Course Outline: Guideline for Acupuncture & TCM Diploma's students:.....	58
Diploma of Acupuncture	58
Diploma of TCMP.....	59
Advanced Diploma of TCM.....	59
Acupuncture Tables	60
Acupuncture Terminology	64
Acupoint Nomenclature Index	66
WHO Standard Nomenclature of Extra Points.....	76
Standard Nomenclature of Scalp Acupuncture.....	77
Index of TCM Illnesses	78
Index of Materia Medica	81
TCM Formula Reference	89
Formulas for relieving superficial syndrome (Jie Biao Ji 解表劑) (8).....	89
Formulas for purgation (Xie Xia Ji 瀉下劑) (7)	90
Formulas for harmonizing (He Jie Ji 和解劑) (6).....	91
Formulas for clearing heat (Qing Re Ji 清熱劑) (25).....	92
Formulas for warming interior 溫裏劑 (8).....	96
Formulas for relieving interior-exterior 表裏雙解劑 (4)	97
Formulas for tonifying 補益劑 (18).....	98
Formulas for tranquilization 安劑 (6)	101
Formulas for astringing 固澀劑 (6)	102
Formulas for regulating Qi 理氣劑 (10)	103
Formulas for regulating blood 理血劑 (12)	104
Formulas for treating wind related diseases 治風劑 (10)	106
Formulas for treating dryness diseases 治燥劑 (8)	108
Formulas for eliminating phlegm 祛痰劑 (11).....	112
Formulas for improving digestion 消導劑 (7)	114
Formulas for parasite diseases 驅蟲劑 (2)	116
Formulas for abscess (yong yang) 癰瘍劑 (7).....	116

OCTCM Student Clinic Handbook

Patient Progress Notes	118
Herbal Prescription Form.....	119
Final Words	121
NOTES	122
Clinical Practicum Competencies	127
Additional Comments:	140
OCTCM Student Clinic Procedure Overview	141
Procedure for receiving a new patient.....	141
Procedure for Initial Intake	141
Procedure for Follow-up intake	141
Before the Treatment Begins	142
Clinic Room Procedures	142
Clinical Assisting	142
Patient Check Out.....	143
Bibliography	144

Student Information



Personal Information

Name : _____

Student No: _____

Title: _____

Office No: _____

Home No: _____

Cell No: _____

Address: _____

e-mail : _____

Clinic Hour Log

Enter the total hours at the end of each term that you have logged to keep track of your progress.

Term1 hrs: _____

Term 2 hrs: _____

Term 3 hrs: _____

Term 4 hrs: _____

Term 5 hrs: _____

Term 6 hrs: _____

Term 7 hrs: _____

Term 8 hrs: _____

Term 9 hrs: _____

Term 10 hrs: _____

Term 11 hrs: _____

Term 12 hrs: _____

Introduction

Welcome to the Clinical Practice of your Acupuncture and TCM education at OCTCM. It is now time to put together all the theoretical knowledge you acquired in the program to benefit others.

Each clinical session has a clinical supervisor who is responsible for organizing all of your activities while you are at a clinical site. You will report directly to the supervisor and must adhere to the Policies and Procedures specifically outlined for that site. The clinical supervisor is also responsible for your evaluations during each rotation.

As in your didactic education, you are advised to keep up with your studies and assignments. If for any reason you get behind during a rotation or you find yourself having difficulties, please discuss it with your clinical supervisor immediately.

Please refer to the OCTCM information brochure regarding attendance expectations and appeals.

The policies and procedures within this handbook are based on the Federal and Provincial legislation as it pertains to Acupuncturists and TCM Practitioners in Ontario. This information can be found on the CTCMPAO website: <http://www.ctcmpao.on.ca/>. Students are required to review these publications regularly for any changes. The ***Safety Program Handbook*** and the ***Jurisprudence Course Handbook***, both available on this site are required reading along with this book. The policies contained herein are subject to change in accordance with Federal or Provincial Legislation.

May you find true happiness as you guide others on the path of healing

OCTCM Student Clinic Emergency Management

Safety Protocols

- fire extinguishers are located throughout the building
- the building is also equipped with a sprinkler system and smoke detectors
- a list of emergency phone numbers is located on the bulletin board by the consultation room and in the Policy and Procedure Manual
- a first aid kit is available from the receptionist
- telephone books containing extensive first-aid instructions are located in the administration area in the shelf by the computer

Emergency Procedure(s)

In the event of an emergency:

- For assistance from the fire department, police department, or ambulance, telephone 9-1-1
- All student practitioners should return to their patients
- The primary student practitioner should immediately evaluate the safety of the situation and remove needles from patients in a calm and orderly fashion. The assisting student practitioner should inform the supervisor immediately if it is unsafe to remove the needles or other medical devices ie. cups.
- After all patients' needles have been removed, students should calmly walk with the patients proceeding to the fire exits. In case of fire, do not use the elevator.
- If the building is unsafe evacuate in an orderly fashion using the emergency exits and fire escape routes.
- The Clinical Supervisor should take the appointment book and class list and check all treatment rooms for patients before exiting
- Instruct people to congregate across the street at our other location at 7100 Warden.
- Instructors will use the appointment book and class lists to conduct a count to ensure that everyone has made it safely out of the building.
- If people are missing, do not go back into the building. Instead, inform emergency personnel as to how many are still in the building and their locations. Remain in a safe location away from the building until emergency personnel authorize re-entrance.

OCTCM Student Clinic Handbook

Emergency Phone List

Police	9-1-1
Fire	9-1-1
Ambulance	9-1-1
Crime-Stoppers	1-800-222-8477
Assault Victim	1-800-263-2240
Mental Health	905-472-7585
Distress Centre	1-800-263-3388
Poison Control Centre	1-800-268-9017
Street Outreach Clinic Crisis Line	905-472-7556
Power Outages	1-877-777-3810
Flooding & Spills	905-477-5530
Gas Emergencies	1-866-763-5427
Taxi	416-777-9222 416-240-0000
Citizens Counseling Centre	1-800-622-6232

Patient Medical Emergency

If a patient experiences a medical or other emergency during student clinic, it is important that all students and clinical supervisors work calmly, quickly and efficiently together to ensure the safety and well being of the patient.

- Primary Student Practitioner should remain with or immediately return to the patient and remove all needles or other treatment instruments so long as it is safe to do so. If the student is trained in first aid or cpr they should administer it if necessary, otherwise they will wait for the clinical supervisor.
- Assisting student practitioners should immediately get the Clinical Supervisor and first aid kit if necessary and/or call 911 and remain on the phone with them. Assisting student practitioners can collect the belongings and look up the emergency contact information in the patient file
- The supervisor should proceed to the patient and assess the situation. Administer first aid or cpr if necessary until EMS arrives.
- All other students should attend to their patients immediately, calmly remove all needles or other treatment instruments so long as it is safe to do so. Explain the situation to the patients and make sure the area is clear for EMS personnel if necessary.
- Primary Student Practitioner must then fill out an Incident Report, detailing all events that took place
- Clinical Supervisor will also fill out an Incident Report

Incident Report

Documenting events near the time of occurrence can prove to be an effective means of reviewing and recollecting the details of events as they occur in emergency situations. Incident Reports must be filled out after any emergency or medical incident including environmental hazards, such as slip and fall, real or perceived medical emergencies, needle accidents, violent or other abnormal behaviours from patients or any other situation that the supervisor deems necessary. In most situations the student(s) and clinical supervisor will file reports and they must be signed and dated. Each incident report must detail the events as they happened and the steps taken to ensure best practices.

OCTCM Student Clinic Handbook

OCTCM Incident Report Template(Student):

To be filled out by individual reporting incident	
Name of person filing report:	
Date Report Filed:	
Date of Incident:	
Time of incident:	
Location of Incident:	
Incident:	
WHAT WERE YOU DOING AND DESCRIBE THE EFFORT INVOLVED?	
SIZE, WEIGHT AND TYPE OF EQUIPMENT OR MATERIALS INVOLVED (IF APPLICABLE)	
WHAT HAPPENED TO CAUSE THE INJURY?	
WHAT STEPS WERE TAKEN?	
WHAT WAS THE RESULT?	
ADDITIONAL INFORMATION ATTACHED?	
Name and contact information of witnesses (if applicable)	
Nature and location of Injury (if applicable)	
Treatment or action provided (CPR, First Aid, 911, etc):	
Date and Signature of person filing report:	

OCTCM Student Clinic Handbook

OCTCM Incident Report Template(Supervising Faculty):

To be filled out by Supervising Faculty	
Name of Faculty filing report:	
Date Report Filed:	
Date of Incident:	
Time of incident:	
Location of Incident:	
Student(s) involved:	
Patient(s) involved:	
Incident:	
WHAT WERE YOU DOING AND DESCRIBE THE EFFORT INVOLVED?	
SIZE, WEIGHT AND TYPE OF EQUIPMENT OR MATERIALS INVOLVED (IF APPLICABLE)	
WHAT HAPPENED TO CAUSE THE INJURY?	
WHAT STEPS WERE TAKEN?	
WHAT WAS THE RESULT?	
Contributing Factors: PLEASE DESCRIBE IN DETAIL THE CAUSE(S) OF EVENT WHICH COULD INCLUDE PHYSICAL CAUSES, HUMAN CAUSES, AND ORGANIZATIONAL CAUSES.	
Corrective Measures: PLEASE DESCRIBE IN DETAIL CORRECTIVE MEASURES TO PREVENT RECURRENCE	
ADDITIONAL INFORMATION ATTACHED?	
Name and contact information of witnesses (if applicable)	
Nature and location of Injury (if applicable)	
Treatment or action provided (CPR, First Aid, 911, etc):	
Date and Signature of person filing report:	

OCTCM Student Clinic Room Preparation

Room Safety

Check for hazards

Check the entire space for potential hazards. Hazards should be understood as anything that may be a potential safety risk to the patient or obstruction to safe and effective administration of treatment during student clinic.

- Wet floors
- Obstructive furniture
- Electrical cords

Check tables

Check the safety of the treatment tables.

- Legs tightened (if adjustable)
- Headrest tightened

Check floor

Visually check the floor for needles or other hazards. Patients will be taking off their shoes in the treatment area. This is a common source of “needle stick”. By checking the floors before your clinic, you can be sure that dropped needles were not from you or your clinic.

Room Preparation

Heat/Ac

- Turn the heat or Ac on or off if necessary giving the room time to adjust before patients arrive. Please note that patients will be disrobing and you should ensure that they are warm enough. Also note that some rooms receive more concentrated heat or Ac than others. Heating lamps and additional blankets can be used if necessary.

Preparation Cleaning

- Wipe down headrests
- Visually check water resistant blue sheets for body fluids and if necessary discard and change them.
- Prepare “clean field”
- Check sink and hand washing area for soap and paper towels

Table Preparation

- Prepare tables with pillows, table paper, and headrest covers.
- Blankets if necessary.
- Additional draping should be prepared on an “as needed” basis after point selection is made (for example: gown or extra sheet)

Supplies checking

- Sharps container
- Check Biohazard garbage and regular garbage
- Dry cotton
- 70% alcohol

OCTCM Student Clinic Handbook

- 90% alcohol
- Lighter
- Needles
 - 1 minimum half full box of .5 cun
 - 1 minimum full box of 1 cun
 - 1 minimum full box of 1.5 cun
 - 1 minimum half full box of 2.5 or 3 cun
- Clean Cups
- Heat lamps

Scheduling check

- Check the clinic schedule to see the number and time of patients. Make sure you know what patients will be with which group

Patient File preparation

- Pull all the files for patients scheduled during the clinic and arrange them according to the scheduled time. These should be kept at the front desk and must not be left unattended (if for example the receptionist is not in that day).
- If a new patient is scheduled (indicated by NP on schedule) prepare the informed consent and health history forms.

Music

- Occasionally you may wish to play music. It often helps create a more relaxed environment and drown out distracting sounds from other treatments. The music should be relaxing in nature and at a quiet level.

Room Cleaning

After each patient

- Clean any treatment supplies (for example needle packaging)
- Clean headrest
- Check for body fluids
- Check area for forgotten belongings
- Check floor for needles
- Change table paper
- Cups and other supplies that are in need of cleaning
 - Cups used on “intact skin” must cleaned with a “intermediate-level disinfectant” after each use.
 - Wear gloves
 - Wash cups in the cleaning sink with sponge, soap and hot water
 - prepare the high level disinfectant
 - Soak cups
 - Record the time started and the time they can be removed
 - Cups used on “non-intact skin” or for bleeding must be “sterilized” after each use
 - Wear gloves
 - Wipe any blood or body fluids from cups with a paper towel and dispose of the paper towel in bio-hazard bag
 - Wash cups in the cleaning sink with papertowel, soap and hot water
 - Dispose of the paper towel in biohazard bag
 - Preform hand hygiene and re-apply gloves

OCTCM Student Clinic Handbook

- Clean instruments must be placed in the appropriate sterilization package and sealed
 - Temperature sensitive chemical indicators must be used with each package
 - Load the sterilizer evenly and avoid overloading the chamber. Follow manufacturer's directions for loading the chamber.
 - Start the sterilization process
 - Record the "time in" and "time out" in the log book
 - After the sterilization cycle has been completed, remove instruments when dry and store in the "clean" area of the clinic
- High Level Disinfectants used at OCTCM
 - Used for "semi-critical devices"
 - cups
 - clamps
 - trays
 - Ortho-phthalaldehyde (OPA) 0.55% > 10 minutes (follow manufacturer's instructions)
 - 1:50 chlorine bleach solution (using 5.25% chlorine bleach) semi-critical devices > 20 minutes
- Intermediate-Level Disinfection used at OCTCM
 - Used for surfaces
 - table
 - headrest
 - supply surface area
 - sink
 - 70–90% isopropyl alcohol for 10 minutes
 - 1:50 chlorine bleach solution (using 5.25% chlorine bleach) for > 10 minutes
- All cups at OCTCM must be treated as if used with non-intact skin and disinfected with an *intermediate-level disinfectant* between patients. This is because the potential for possible contact with blood or body fluids is highly likely when cupping.

From the Safety Handbook:

- *"Cupping is not a sterile procedure. However, cups must be cleaned and disinfected after each patient use."*
 - *Cups used on intact skin is a non-critical item and should be cleaned and disinfected with a low-level disinfectant between patients.*
 - *Cups used on non-intact skin (e.g., used with needling) is a semi-critical item and should be cleaned and disinfected with an intermediate-level disinfectant between patients.*
 - *If bleeding occurs, cupping devices must be autoclaved, or otherwise sterilized.*
 - *Bamboo cups should not be used because of the difficulty in disinfecting.*
- *Lancets or three-edged needles used for blood-letting must be sterile (disposable lancets or three-edged needles are recommended).*
- *Based on use, disinfect or sterilize moxa equipment as required.*
- *When an electro-stimulation machine is used, the clippers that attach to the handle of the needle must be cleaned and disinfected between patients.*
- *Re-useable needle trays should be sterilized after each patient.*

OCTCM Student Clinic Handbook

- *Any item that is used to handle or manipulate the sterile needle before insertion must also be sterile.*
- *Instruments that contact the needle after insertion (forceps, tweezers) must be cleaned and disinfected between patients. Sterilization may be required based on use."*

(P. 68, Safety Program Handbook (NOV 12th))

At the end of clinic

In addition to the post-treatment cleaning

- Double check all treatment areas for belongings
- Double check all floors
- Unplug all heat lamps and store in an unobstructive manner
- Table Paper does not need to be put out
- Check supplies and refill if necessary
- Clean trays and clamps
- Clean Tables
- Clean all surfaces
- Check cups
- Fill out cleaning log

Cleaning Log Sample:

Daily Cleaning Procedure:	<i>Refer to student handbook. This includes a clinic walk through for safety, table, surface, tray, clamps, sink cleaning, etc.</i>		
Additional Cleaning:	<i>Performed as necessary and may include: Washing and soaking cups in bleach, Sterilizing Cups, cleaning a blood or body fluid spill, additional cleaning to prevent spread of infectious diseases, etc.</i>		
Date	Daily Cleaning after Clinic	Additional Cleaning (cupping, blood or body fluid spill, infectious disease prevention, etc.)	Student Signature

Clinical Policies

1. Guidelines for needle manipulation and handling.

Needle manipulation and handling must use aseptic techniques at all times. This requires the practitioner to ensure:

- The use of pre-sterilized needles
- Hand-washing for at least 15 seconds using soap, before and after treatment of a patient
- That finger nails are clean and that any cuts and abrasions are covered
- That immediately before needling, the hands are washed with an approved soap
- That on removal of the needle from the packaging, only the head of the needle is grasped and the shaft of the needle which is to be inserted into the patient's skin is not touched
- The skin of the insertion area is swabbed with an alcohol swab prior to needle insertion
- That needle insertion is swift and painless
- That on removal of the needle, it is placed directly into a Sharps Container, avoiding double handling
- That if a needle stick occurs the practitioner refers to the relevant section in this manual (Infection Control)
- The area of insertion is swabbed with a sterile, dry cotton wool after removal of the needle
- That if there are signs of bleeding after removal of the needle.

Universal Precautions are adopted, including:

- Washing hands before and after procedure
- Barrier protection in the form of eye protection and a gown if there is a risk of splashing, and wearing of disposable gloves if in contact with blood and body fluids
- That all contaminated, blood stained material is placed in the biohazard bag

Contra-indications to needling

Acupuncture should not be carried out under the following conditions:

- If the patient is intoxicated
- On or near infected areas
- Pregnant women (***all needling is to be done under the direct supervision and in accordance with the Clinical Supervisors***)

instructions)

- Patients who are very hungry or who have not eaten
- Patients who are fatigued
- Patients who are frail and weak

2. Guidelines for the use of Moxibustion

All moxibustion techniques must avoid contact with the skin to prevent a burn to the patient. Applicable techniques are:

- Moxa Stick
- Moxa on needle with a foil guard at the bottom of the needle to protect the skin
- Moxa on salt, garlic or ginger (caution with latter two, they are very hot)

Contra-indications to treatment with moxa should be checked and cleared with the clinical supervisor.

Before applying the moxibustion the practitioner should:

1. Ascertain the skin sensitivity
2. Inform the patient that the sensation should be mildly warm
3. Advise the patient that there is a danger of a burn and to notify the practitioner if the sensation of heat is too strong
4. Question the patient to ascertain that she/he has understood the possible side effects
5. Monitor the heat sensation by placing two fingers in the vicinity of the acupoint being treated

If a burn should be experienced, the practitioner should immediately immerse the effected are in cold water and refer the patient to medical care as quickly as possible, then document the incident.

Contra-Indications to Moxibustion

Moxibustion is contra-indicated in the following situations:

- High fever (39° C or higher)
- Abdominal and sacral region of pregnant women
- Acupoints contra-indicated for moxibustion (see point location texts)
- Impaired skin sensation
- Patients taking analgesic medication
- Infections and open wounds

- After using a liniment

3. Guidelines for use of Electrical Stimulators

Before use:

- All leads must be checked for any damage or breakage
- Faulty equipment is to be reported to the Clinical Supervisor immediately
- Contraindications to electrical stimulation should be checked and cleared with the Clinical Supervisor
- Ascertain the skin sensitivity by using a blunt/sharp test. This involves the patient closing their eyes and stating the sensation felt while touching the skin with a sharp and blunt end of a safety pin

Before use, the practitioner should:

- Inform the patient of the sensation to be felt and asked to inform the practitioner if the sensation is too strong
- Question the patient so as to ascertain that they understood the warning
- Constantly monitor the patient during the treatment time

Contra-Indications to Electrical Stimulation

Electrical acupuncture is contra-indicated in the following situations:

- Pregnant women
- Lack of skin sensitivity
- Patients with a cardiac pacemaker
- Arterial disease and deep venous thrombosis
- Infections
- Fever
- Skin conditions

4. Guidelines for Cupping

Pneumatic cups are recommended for use because of the decreased chance of injuring the patient due to the greater control over the suction level.

Before use:

- Check for contraindications
- Wipe down the rims of the cups with an alcohol swab to minimize cross infection
- Inform the patient of the sensation to be felt, and ask them to inform you if the sensation is unpleasant or uncomfortable
- Warn the patient of the possibility of bruising
- Ascertain that the patient understood the warning

After use:

- Wash cups thoroughly in hot soapy water
- Then soak them in soaking solution for the recommended time to disinfect the contact area of the cups

Contra-Indications to Cupping

Cupping Technique is contraindicated with/on:

- Skin ulcerations
- Edema
- Area overlying a large blood vessel
- High fever and convulsion
- Abdominal or sacral areas of pregnant women
- Susceptibility to bleeding

5. Guidelines for the use of Auricular Press Needles

The use of pre-sterilized ear press needles is recommended. If this is not possible, non-invasive devices (e.g. magnetic balls, seeds etc.) should be used. The procedure requires:

- Washing of hands before and after treatment
- Ensuring that forceps/tweezers used are thoroughly cleaned and swab them if they are likely to come into contact with the press needle
- Swabbing the area with alcohol swab before insertion
- Taping the needle to securely (note: all press needles at the Clinic come with a tape attached)
- Warn the patient that if they experience heat, pain, swelling or discomfort around the area of insertion, to remove the press needle immediately as the auricle is prone to infection
- Advising the patient to keep the ear dry (especially if showering),

to avoid the possibility of infection

- The press needle to remain in for no more than five days – 2 days in the hot summer months

Contra- Indications for Auricular Press Needles

Auricular Press needles are contraindicated in/on the following situations/areas:

- Purulent infected areas
- On patients who have cardiac pacemakers and/or heart valves replacements
- Patients who have, or have had, endocarditis
- Susceptibility to bleeding

6. Management of Possible Needle Accidents

For Needling Safety Policies, please refer to Appendix E.

i. Fainting During Insertion or Manipulation

Signs & Symptoms:

- Pale face
- Dizziness
- Nausea
- Sweating
- Palpitations
- Weak pulse
- Cold extremities
- Hypotension (low blood pressure)
- Loss of consciousness

Causes:

- Hunger
- Fatigue
- Weakness
- Nervous tension
- Improper positioning
- Too strong manipulation

Management:

- When signs and symptoms appear, stop needling and withdraw

any needles in place

- Lie the patient down and apply acupuncture First-Aid
- If the patient is not responsive and has no vital signs, call 911 and then notify OCTCM Supervisors & Administration
- Refer for medical treatment and/or
- Fill out an Accident/Incident Report Form and give to Clinic Manager

Prevention:

- Ensure patient is not hungry
- Lie patient down
- Relax patient
- Gentle needle technique
- Check with patient how they feel about being needled before proceeding

Stuck or Bent Needle

Signs & Symptoms:

- Needle is difficult to lift/thrust/rotate/withdraw
- Sometimes the patient may feel pain

Causes:

- Too much/strong manipulation
- Turning the needle in one direction
- Patient is extremely nervous
- Patient changes position after needle is inserted

Management:

a. For a stuck needle:

- Leave needle in place for a few minutes (it may loosen itself)
- Massage around the point
- Insert needle close to stuck needle
- Moxa muscle spasm
- NEVER FORCE a stuck needle

For a bent needle:

- Stop manipulation and very slowly remove the needle following the angle of the bend

- If patient has moved, slowly put him/her into the original position

Prevention:

- Prepare patient for possibility of needle technique
- Ask patient to remain in position and keep still

Broken Needle

Causes:

- Forcefully withdrawing a bent needle
- Poor quality needle (e.g. Using reusable needles)
- Too strong manipulation of needle
- Strong muscle spasm
- Sudden movement of patient when needle is in place
- Deep insertion – handle separates from the shaft

Management:

- If broken above skin (between handle and shaft), pull out quickly using tweezers
- If broken at skin level gently push down surrounding skin and remove with tweezers
- If broken deep in the tissue, mark a circle around the point of insertion, immobilize the limb and send for an ambulance
- Fill out the Accident/Incident Report Form and give to Clinical Manager

Prevention:

- Never forcefully withdraw a bent or stuck needle (inspect needles for quality before using)
- Do not insert needle deeply (do not insert more than $\frac{3}{4}$ of the needle length, if you need to go deeper use a longer needle)
- Take care with strong points because sudden muscle spasm may break or bend needle

7. Injury to Organs

i. Lungs

Signs & Symptoms:

- Pain
- Fullness of chest

- Dyspnea
- Cyanosis (lips, fingernails)
- Hypotension
- Shock symptoms

Causes:

After using points located on chest and upper back areas:

- Epileptic seizure
- Too deep insertion or angle not appropriate
- History of lung problems

Management:

- Call 911 and notifying the OCTCM Supervisor and Administration
- Fill out an Accident/Incident Report Form and give to Clinic Manager

Prevention:

- Correct angle and insertion

ii. Liver/Spleen/Kidney

Cause:

- After using points LV13, LV14, SP21, GB25, GB26

Signs & Symptoms:

- Hypotension
- Pale face/nails
- Dizziness
- Bruising pain radiating towards the back
- Constriction of abdominal muscles
- Shallow breathing
- Shock

Kidney Damage

- Local back pain
- Blood in urine

iii. Nerve Trunk

- Sharp pain, like an electric shock

iv. Brain & Spinal Cord

- Medulla Oblongata (incorrect or too deep needling of points Du 15/16, GB20, BL10)

Signs & Symptoms:

- Headache
- Nausea
- Vomiting
- Flash/pain, electric shock post treatment
- Hypotension
- Shock

Management:

- Call 911 and notify OCTCM Supervisor and Administration
- Fill out an Accident/Incident Report Form and give to Clinic Manager

8. Health Records

A written health record should be completed for every new patient and placed in the patient's folder. It should:

- Be accurate, brief and complete
- Be legibly written
- Be objectively written
- Note any extraordinary incidents or accidents
- Not have any uncommon abbreviations
- Be dated and signed, both printed and written, with each entry
- The patients first and last name should be printed in pencil, on the folder tab and filed under the patient's first name

Health records are legal documents and must be treated as such. All information pertaining to the medical record is confidential and is not to be discussed outside of the treatment area. Health records are not to be taken out of the clinical area for the purpose of documenting a case history. If the health record is to be used as a case study, there should be no reference to any personal details such as name, address, etc.

In addition to the health record and the patient history, the information gathered should be recorded concisely, yet completely. It should:

- Be accurate and complete
- Be objectively and legibly written
- Clearly note any extraordinary incidents or accidents
- Not have any uncommon abbreviations
- Be clearly dated for each treatment
- Be signed in print and written form
- Include standardized abbreviations for points, needle techniques, application of moxa (and method), cupping, etc.
- Indicate any special needle techniques and the reasons for use explained in full
- Identify any contra-indications for needling, moxa, etc.
- Highlight any special messages (e.g. Pregnancy, nervousness, etc.) to pass on to proceeding practitioners
- Indicate the name and phone number of the treating practitioner so that subsequent practitioners can make contact, if needed
- Be kept orderly and filed in alphabetical order (according to patient's first name) immediately after each treatment

Remember that it is important that diagnoses and treatment details are clearly written and understood by all other health care practitioners.

9. Hand Washing

The surface of the hands and nails must be clean before any patient contact is made. Abrasions, cuts or lesions must be completely covered with a waterproof dressing, which must at least be changed daily and/or gloves should be worn during treatment.

Hands should be washed:

- Before and after contact with each patient
- After contact with any blood or fluids
- Immediately prior to putting on new, disposable gloves and attending to a patient
- Immediately after removing disposable gloves for any reason
- After carrying out a treatment on a patient
- After performing any facial treatments
- After smoking
- After going to the toilet
- Immediately before and after handling food or eating

Hand Washing Technique:

- Use soap (liquid soap)
- Rub hands vigorously as you wash them (minimum of 15 seconds)
- Wash hands ALL OVER, including:
 - Back of hands
 - Wrists
 - Between the fingers
 - Under the nails
- Rinse hands thoroughly and turn the taps off using your elbows or paper towel
- Thoroughly dry hands with a new, single use, disposable paper towel

10. Infection Control

To minimize cross-infection between patients and/or practitioners (staff & students)

i. Examination Tables

- If blood is visible on the examination table, treat the blood spill first (refer to Section III below). This is to be attended to at the completion of each patient's treatment if there is evidence of blood visible
- Linen or examination paper used to cover tables or examination tables should be changed between patients
- At the completion of each session, wash treatment tables thoroughly with a general purpose detergent (non-toxic if possible) and hot water. Rinse and dry thoroughly. Change linen

ii. Linen

- Any linen soiled by any body fluids including blood, urine, or feces must be treated as Infectious Material and should be placed in a biohazard bag
- Any used linen which is not contaminated with any of the above should be placed in a separate linen hamper
- When linen hampers and biohazard bag are full they should be drawn closed, removed from the holder and stacked for collection
- A new bag should then be placed on the holder
- Wash hands thoroughly

iii Blood Spills or Droplets

- To be treated with a 70% ethanol solution (kept in each treatment room)
- Wear gloves
- Wipe up spill with paper towel
- Dispose of paper towel and gloves in biohazard bag
- 1:10 dilution of household bleach and leave for at least 10 minutes before drying with a disposable towel
- Wearing gloves, wipe the surface clean with paper towels
- Dispose of paper towels and gloves in the waste bin

iv. Needling Incidents

In case of accidental exposure to infection due to a prick or stab with a needle previously used on a patient, the incident must be reported immediately to the Clinic Supervisor and an Accident/Incident Report Form must be filled out. Then the practitioner must go the closest Emergency Room and be tested and treated according to the hospital's infection control procedures.

11. Handling Disposal of Sharps

i. Syringes and Needles:

- Only approved disposable needles are to be used in the clinic
- Acupuncture needles should always be placed in a sturdy dish or tray for transportation between preparation areas, site of use and disposal areas
- Acupuncture needles should be placed in a sharps container immediately after they are removed from the patient. ***The use of kidney dishes and other such trays to transfer the needles must be avoided***
- Acupuncture needles must not be bent, broken or otherwise manipulated

ii. Sharps Containers

- The person using the sharp is responsible for its proper disposal
- Needles should be placed into the designated Sharps Container with care
- Sharps Containers should be sealed and replaced before becoming overfilled

- Sharps Containers should always be located as close as possible to the area where the sharps are being generated
- Sharps Containers should always be positioned away from other waste containers
- Change Sharps Containers before they become full
- Other infectious (e.g. Swabs) should be placed in the biohazard container

12. Disclosure of Student Status

All students undertaking clinical practice in the Acupuncture & TCM Clinic must inform patients of the following prior to any patient contact:

- Name
- Student Status

All practitioners should wear appropriate identification badges. This is the same as your “Student ID”. If you do not have a student ID, please inform both your clinical supervisor and request one from the office of admissions.

Further responsibilities of students regarding disclosure of status:

- Ascertain that the patient can read and/or verbally communicated in English. If the patient cannot, an interpreter should be requested
- Wear an identification badge while working or studying at the Clinic
- Obtain patient’s consent prior to obtaining an initial history, performing physical examination and initiating any treatment

13. Clinical Dress Code

- A lab coat must be worn at all times when on duty in the clinic
- Shoes must be of the “closed” style, clean and well kept. Running shoes and sneakers are not considered suitable attire
- Neat, well-presented attire of a “conservative or professional” style is expected to be worn at the Clinic. At all sites attire is to be appropriate and the standards required are left to the discretion of the Clinic Manager.
- A student who does not meet the required standards will be refused permission to attend Clinic

- Name tags must be worn at all times so they are visibly to both the supervisor and the patients

14. Guidelines on Patient Care

i. Principles of Patient Care

Patients are the most important people in our clinic. As an Acupuncturist or TCM Practitioner, all effort should be directed toward the patient's well-being. In principle, Acupuncturists, TCM Practitioners and students should:

- 1) Develop the professional responsibilities, including:
 - Pursuing high standards and continuing education
 - Following the code of professional ethics
 - Respecting patient's rights
 - Preserving good health (self-care)
 - Caring for supplies and equipment
 - Demonstrating professional conduct at all times
- 2) Develop the professional attitudes, including:
 - Treating all patients with courtesy, respect and compassion
 - Referring to patients by name
 - Being polite, efficient, sympathetic/empathetic
 - Communicating effectively with patients and co-workers

ii. Management of Patients

In the Acupuncture & TCM Clinic, Acupuncturists, TCM Practitioners and students will experience a variety of patient personalities and patients with special challenges, which will need patience and a great deal of common sense. Acupuncturists, TCM Practitioners and students should:

- 1) Be aware of emotional problems associated with:
 - Illness (dying and death, aggressive patients)
 - Treatment/examination procedures
 - Acupuncture/TCM clinics/hospitals
- 2) Be careful when dealing with:
 - Patient's valuables

- Relatives
- Patients with language barriers

3) Be aware of physical problems associated with:

- Disabilities, i.e. impaired vision, hearing problems, physical and mental challenges
- Age (children, elderly)

iii. Communication with Patients

The practitioner should always do her/his best to communicate with and understand the patient's needs.

- Always give the patient enough time
- Face the patient squarely when talking or listening
- Keep good eye contact, showing interest and concern
- Create the opportunity for personal communication by adopting a natural stance
- Try to be at the same eye level as the patients
- Bring comfort to a distressed patient by touching her/him (but establish first that this is acceptable)
- Share a sense of humor with patients
- Encourage patients to talk of their fears and problems by asking "open ended" questions
- Explain to the patient what is going to happen during the treatment and what the patient is to do during the treatment

iv. Patient Transfer and Positioning

For patient's safety the practitioner should:

- Plan the treatment and prepare the work area
- Enlist the patient's help and co-operation
- Obtain additional help when necessary
- Hold the patients, not the equipment
- Tell the patient what is going to happen

The Patient's positioning should be:

- Safe
- Comfortable
- Supportive
- Padded

v. Preparation of Treatment Room

In general, the treatment room contains:

- Clean bed linen and examination paper
- Clean gowns
- Extra linen for covering and robing
- Sharps Container
- Disposable container
- Hazardous waste container
- Acupuncture/TCM equipment
- Sterile equipment used for aseptic procedures

vi. Patient Preparation for Acupuncture/TCM Treatment

Treatment

Acupuncturists/TCM Practitioners and students should follow the Code of Professional Conduct to prepare their patients for an Acupuncture/TCM treatment.

Before treatment:

- Guide patient to the treatment room
- Give patient instructions for proper exposure and positioning
- Leave the room and let patient undress and put on gown
- Signal the patient before re-entering the room (knock on door, etc.)

During treatment:

- Uncover only the body parts being used in this acupuncture treatment session
- Cover the parts not for treatment to keep the patient warm and comfortable
- Avoid touching the acupuncture needles in use by covering or robbing

After treatment

- Remove needles and put directly into disposable container
- Leave the room and let the patient change in privacy

vii. Unprofessional Conduct

The following conduct is considered “unprofessional”. It has the potential of endangering the health and safety of patients and public:

- Committing a fraudulent or dishonest act as an Acupuncturist/TCM Practitioner resulting in substantial injury to another
- Using any substance such as a dangerous drug, or alcoholic beverage to an extent or in a manner dangerous to himself or herself, to any other person, or to the public
- Conviction of a crime substantially related to the qualifications, functions, or duties of an Acupuncturist/TCM Practitioner, the record of conviction being conclusive evidence thereof
- Improper advertising
- Violating or conspiring to violate patient's rights
- Assault and battery
- False imprisonment
- Invasion of privacy
- Libel and slander
- Gross negligence and repeated negligent acts
- Incompetence and malpractice
- Except for good cause, the knowing failure to protect the patients by failing to follow infection control guidelines of the Acupuncture/TCM Clinic at OCTCM, thereby risking transmission of blood-borne infectious diseases
- Making inappropriate or sexual remarks or actions toward patients or other staff members or students
- Making false claims regarding one's education, experience and professional title

viii. Informed Consent

An informed consent is defined as a full explanation of the procedure, in terms, the patient can understand. Informed consent can be given in both written and verbal form. In most situations both are necessary. In the Acupuncture/TCM Clinic at OCTCM, an informed consent is required for any and all procedures before they are performed. Additional informed consent may be required for :

- Procedures which may involve a special risk
- Procedures which are given by students
- Audio/visual observation/recording

TCM Practitioners/Herbalists/Massage & Qi Gong Practitioners

OCTCM students of TCM, Herbal Medicine, Massage or Qi Gong are expected to follow the same guidelines outlined in this handbook.

Students with appropriate training in herbal medicine are expected to suggest herbal formulas to patients only after consultation with the Clinic Supervisor. When patients do not wish to take Herbal Medicine, the supervisor may require that the Student Practitioner still write a “suggested herbal prescription” for the purpose of the students learning and application of the herbs. Special attention and additional appropriate precautions must be taken when prescribing herbal medicine including:

- special attention to the accurate diagnosis and treatment principle as it pertains to the Herbal Prescription
- any food allergies the patient may have
- any medications the patient may be taking
- any vitamins or supplements the patient may be taking
- any signs of weak organ function especially the heart, liver or kidneys
- Food preferences such as vegetarian or vegan

Massage and Qi Gong students are expected to pay extra attention to:

- Patient’s physical pains and limitations
- Exercise experience
- Breathing/respiratory or Heart problems
- Areas that patient does not want to be touched or exposed
- Allergies (especially to massage oils, etc.)

Appendices

Appendix A: Code of Professional Ethics for Acupuncturists/TCM Practitioners

The practitioners and students of Acupuncture/TCM, who practice within the Ontario College of Traditional Chinese Medicine, honor and uphold the following moral and ethical guidelines of professional practice:

- Provide appropriate Acupuncture and Traditional Chinese Medicine treatments with respect and dignity of all people, regardless of race, gender, age, socioeconomic status or sexual orientation
- Consistently maintain high standards of practice
- Be guided the patient's physical and emotional welfare by placing the healing relationship and well-being of the patient at the center of practice
- Maintain patient confidentiality at all times
- Ensure patient care without any conflict of professional interest
- Provide guidance for patients to reach their own capacity for informed choice
- Encourage collaboration with and respect for all other health care providers
- Be motivated by the heart to be of service to others

Appendix B: Patients' Rights

The patient has the right:

- To considerate and respectful care
- To obtain from her/his Acupuncturist/TCM Practitioner complete current information concerning his diagnosis, treatment, and prognosis in terms the patient can be reasonably expected to understand. When it is not medically advisable to give such information to the patient, the information should be made available to an appropriate person on her/his behalf.
- To know, by name, the Acupuncturist/TCM Practitioner responsible for her/his care
- To receive from her/his Acupuncturist/TCM Practitioner

information necessary to give informed consent prior to the start of any procedure and/or treatment. Except in emergencies, such information for informed consent should include, but not necessarily be limited to, the specific procedure and/or treatment, the medically significant risks involved, and the probable duration of incapacitation. Where medically significant alternatives for care or treatment exist, or when the patient requests information concerning medical alternatives, the patient has the right to such information. The patient also has the right to know the name of the person responsible for the procedures and/or treatment

- To refuse treatment to the extent permitted by law and to be informed of the medical consequences of her/his action
- To every consideration of her/his privacy concerning her/his own medical care program. Case discussion, consultation, examination, and treatment are confidential and should be conducted discretely. Those not directly involved in her/his care must have the permission of the patient to be present
- To expect that all communications and records pertaining to her/his care should be treated as confidential
- To expect that within her/his capacity, a clinic must make reasonable response to the request of a patient for services. The clinic must provide evaluation, service, and/or referral as indicated by the urgency of the case. When medically permissible, a patient may be transferred to another facility only after she/he has received complete information and explanation concerning the needs for and alternatives to such a transfer. The institution to which the patient is to be transferred must first have accepted the patient for transfer
- To obtain information as to any relationship of the clinic to other health care and educational institutions insofar as her/his care is concerned. The patient has the right to obtain information as to the existence of any professional relationships among individuals, by names, who are treating her/him
- To be advised if the clinic proposes to engage in or perform human experimentation affecting her/his care or treatment. The patient has the right to refuse to participate in such research

projects

- To expect reasonable continuity of care
- To know in advance what appointment times and Acupuncturists/TCM Practitioners are available and where
- To expect that the clinic will provide a mechanism whereby the patient is informed by the Acupuncturist/TCM Practitioner or delegate of the continuing health care requirements following discharge
- To examine and receive an explanation of her/his bill, regardless of source of payment
- To know what clinic rules and regulations apply to her/his conduct as a patient

Appendix C: OCTCM Student Clinic Informed Consent Form

1. I understand that the Student Clinic is a teaching clinic designed to introduce students to real practice conditions. Students and their classmates are not professional practitioners, and therefore have limited skills. They will treat within their scope of practice which may limit treatment choices.
2. I understand that students may not be able to anticipate all possible risks and complications of treatment as set out below.
3. I understand that a supervisor will be available at most times and may intervene during any part of treatment. Observation by other students will be required for educational purposes.
4. I understand that "Acupuncture" treatment involves the penetration of skin by sterile, one-time-use, disposable filiform needles. There are additional methods of treatment, within the scope of acupuncture and "Traditional Chinese Medicine" that may be used in addition to, instead, or in combination with needles. The scope includes:
 - Assessment by the collection of data by interviewing, observation, palpation, pulse taking, tongue observation and other methods;
 - Acupressure and therapeutic massage (tui-na, (Chinese massage), stone massage, shiatsu, reflexology);
 - Dietary herbal supplements and Chinese or Western herbal medicine;
 - Nutritional counseling;
 - Energy-flow work, exercises or other prescribed forms of movement (e.g. Reiki, Qigong, Tai Chi);
 - Heat therapy with the use of mugwort (moxibustion) or a heat lamp over localized areas;
 - Glass cups "fire- cupping", plastic suction cups;
 - Gua sha tools for scraping;
 - Electrical stimulation of acupuncture needles
 - LED (Light therapy)
5. I understand that as the patient, I must inform the practitioners of medications, medical history, sensitivities to smoke or scents, if I am currently pregnant, have a bleeding disorder or any communicable or contagious conditions that could be passed to others. I understand that I must lie still during treatment; am responsible to ask questions regarding treatment details if explanations provided are not clear or understood; have a right to refuse treatment at any point; must take any herbal teas or medicines according to the instructions provided orally and in writing.
6. I understand that patients are advised to tell their doctor they are receiving acupuncture and TCM, to avoid possible treatment conflicts. Patients are encouraged to report their outcomes to their doctors.

7. I understand that the assessment, diagnosis, and treatment of medical conditions by TCM varies from Western medicine.
8. I understand that the fees for acupuncture treatment at the Student Clinic are not covered by insurance and it is therefore my responsibility to cover the full cost of my treatment.
9. I understand that I must give the clinic 24 hours' notice of cancellation otherwise I may be charged the full session fee.
10. I understand that acupuncture does not typically provide an instant cure. For most serious or chronic ailments, more than one treatment, along with some lifestyle and dietary changes, may be necessary for noticeable changes to take place. I understand that if I am in need of a professional diagnosis and treatment I may approach a professional acupuncture clinic.

Risks and Complications of Treatment

I understand that there is risk of side effects, which may include:

Pain

Acupuncture needling may cause an initial "prick" as it punctures the skin followed by a temporary achy sensation, numbness, or tingling at or near the needling sites that may radiate. These are all normal needling sensations and may last a few days. Please tell your practitioner if any sensation is too strong so they can adjust the treatment accordingly.

Tuina (Chinese Massage), acupuncture insertion, acupuncture stimulation, electro-acupuncture, cupping, guasha, qigong (exercise), may all cause pain. Patient feedback is important for the student practitioner to adjust the treatment when necessary ;

Electrical stimulation of acupuncture needles produce a mild vibration/tapping sensation on the needles, which may be painful;

Bruising

Bruising may occur anytime we puncture the skin. If you can not have bruises on some area of the body, please inform your practitioner. The normal reaction of cupping and "gua sha" scraping is to leave red marks or bruising. This will usually slowly resolve on it's own with 5-10 days and is part of the intentional therapeutic effect.

Infection

It is possible to develop an infection whenever the skin is punctured despite using single use disposable needles and clean needle technique. Please inform us if you have a known immune problem so we can take special precautions.

Burns & Smoke Irritation

Heat therapy and moxibustion may cause redness, blistering or unintentional burns and/or scarring. It is important to verbally communicate with your practitioner if any heat therapy feels too hot. Smoke from moxibustion may cause coughing, lung irritation, headaches or allergic reactions for those sensitive to scents or smoke;

Feeling of Relaxed or Sleepy

It is common to feel relaxed or sleepy after treatment so avoid getting up too quickly and rushing anywhere directly after treatment. Give yourself time to adjust after treatment before driving or using the stairs or any other potentially dangerous activity.

Dizziness & Fainting

Dizziness or fainting can occur as a result of treatment. Please tell us if you are prone to fainting. Important factors that can decrease this risk include ensuring you have had sufficient food, ensuring you have not had any drugs or alcohol prior to treatment, communicating if the stimulation is uncomfortably strong, and getting up slowly after treatment.

Drug-herb Interactions

Herbal dietary supplements (which are from plant, animal, and mineral sources) may have a strong smell or taste, be toxic in large doses, may be inappropriate during pregnancy and have some side effects such as uneasiness in the stomach, nausea, loose stools or other digestive reactions. If you experience such a reaction to the herbs you should inform your practitioner. Do not take herbs within two hours of taking other medications as they may interfere with each other. If you experience any adverse side effects, stop taking the herbs and contact your practitioner immediately. Severe allergic reactions are rare, however, if you experience severe allergic reactions, seek immediate medical attention. Oils, plasters, or other topical herbs may stain clothing or skin and may cause skin irritation. If the skin is irritated, reduce frequency and quantity. If irritation continues, discontinue use entirely and contact your practitioner for an alternative.

Auricular acupuncture patches need to be removed after 3 days to avoid infection;

Other unusual risks include spontaneous miscarriage, nerve damage, organ puncture, lung puncture (pneumothorax), infection, shock, complication, death and other unknown and unintended side effects;

During the course of treatments some symptoms may temporarily worsen before improving

Consent

Revoking consent

I understand that this initial consent is to educate and explain my treatment and that I may verbally revoke my consent to any treatment at any time.

OCTCM Student Clinic Handbook

I understand that by seeking treatment from the Student Clinic I am paying much less than what I would be paying for treatment from a qualified practitioner and voluntarily accept any risks associated with student treatment.

I therefore agree to waive any rights for legal liability that I could have against "Ontario College of Traditional Chinese Medicine" or any person associated including the student practitioner.

I hereby request and give consent for treatment at the *Ontario College of Traditional Chinese Medicine* using modalities within the scope of "Acupuncture" and "Traditional Chinese Medicine" as described above.

By signing below, I confirm I have read, understood, asked questions and agree to the above Terms of Treatment.

Name of Patient (Printed) _____

Patient Signature _____ Date: _____

Practitioner(s) Signature _____ Date: _____

.....

End of Consent Form

Appendix D: Verbal Informed Consent Checklist

I (Student Therapist) discussed the following with my patient:

The nature of treatment: YES NO

Areas Treated: YES NO

Areas patient does not want touched: YES NO

Expected Benefits: YES NO

Material Risks: YES NO

Possible Treatment Reactions: YES NO

Techniques used (Acupuncture, Auricular
Acupuncture, Scalp Acupuncture, Moxa,
Cupping, Tui Na, WHM) : YES NO

I asked the patient if they had any questions
or concerns: YES NO

Student Therapist's Signature:

Instructor's Signature:

Appendix E: Accepted Abbreviations and Descriptive Terms for Charting

Medical/TCM Abbreviations

A-P	anterior-posterior
AP & Lateral for CXR	anterior, posterior & lateral views
a.c.	before meals
abd.	Abdomen
ABG	arterial blood gas
ad lib	freely, as desired
AF	arterial fibrillation
AI	aortic insufficiency
ALT	alanine aminotransferase
AM	morning
amt.	Amount
ant.	Anterior
ap	before dinner
AQ, aq	water
ARMD	age related macular degeneration
AST	aspartate aminotransferase
AV	atrioventricular
b.i.d.	twice a day
b.i.n.	twice a night
B.R.P.	bathroom privileges
BL*	bladder
BM	bowel movement
BP	blood pressure
BUN	blood urea nitrogen
/c	with
C or cent.	Centigrade
caps.	capsule
cc.	cubic centimeter
CHF	congestive heart failure
cm.	centimeter
CNS	central nervous system
CSF	cerebral spinal fluid
CV	cardiovascular
D and C	dilatation and curettage
D.C.	discontinue
DNA	deoxyribonucleic acid
DNR	do not resuscitate
DPT	diphtheria-pertussis-tetanus (vaccine)
DU*	Du, governing vessel (GV in some texts)
Dx	diagnosis

OCTCM Student Clinic Handbook

ECCG	electrocardiogram
ECT	electroconvulsive therapy
EEG	electroencephalogram
EMG	electromyogram
EMS	emergency medical services
ENT	ear, nose, throat
ER	emergency room
ESR	erythrocyte sedimentation rate
FEV	forced respiratory volume
fld.	Fluid
FP	family practice
FSH	follicle-stimulating hormone
GB*	gallbladder (both TCM and Western)
GI	gastrointestinal
gm.	gram
GRAS	generally regarded as safe
gtt.	drops
GU	genitourinary
Gyn.	gynecology
H2O	water
HA	headache
hgb	haemoglobin
hrs.	hours
hs	bedtime
HT*	heart
I & O	in and out
I.U.	International unit
IM	intramuscular
INF	interferon
IQ	intelligence quotient
IUCD	intrauterine contraceptive device
IV	intravenous
kg	kilogram
KI*	kidney
KUB	kidney, ureters and bladder
L	left
l.	litre
lab.	Laboratory
LBP	low back pain
LE	lupus erythematosus
LH	luteinizing hormone
LI*	large intestine
LLQ	left lower quadrant
Imp	last menstrual period
LP	lumbar puncture
LR*	liver

OCTCM Student Clinic Handbook

LU*	lung
LUQ	left upper quadrant
mcg	microgram
mEq	milliequivalent
mg.	milligram
MI	myocardial infarction
ml	millilitre
MMR	measles-mumps-rubella (vaccine)
MB*	moxibustion
MRI	magnetic resonance imagin
MS	mitral stenosis, multiple sclerosis
MVA	motor vehicle accident
N/S	normal saline
NMR	nuclear magnetic resonance
noct.	at night
NPO	nothing by mouth
NSAID	non-steroidal anti-inflammatory drug
NSR	normal sinus rhythm
Obs.	obstetrics
OC	oral contraceptive
OD	right eye
OJ	orange juice
OPC	out patient clinic
OR	operating room
OS	left eye
oz	ounce
p.c.	after meals
PC*	pericardium
PERRLA	pupils equal, regular, react to light and accommodation
pH	hydrogen ion concentration
PO	by mouth
PP	postprandial, after meals
PRN	when necessary, as needed
q3h	every three hours
q2h	every 2 hours
q.i.d.	4 times a day
q.p.	as much as desired
q.s.	sufficient quantity, as much as needed
qh	every hour
RBC	red blood cells; red blood count
REM	rapid eye movement
RN*	Ren, Conception Vessel (CV in some texts)
RNA	ribonucleic acid
RQ	respiratory quotient
RUQ	right upper quadrant-abdomen

OCTCM Student Clinic Handbook

Rx	therapy
/s	without
SI*	small intestine
SJ*	san jiao (variations: TB-triple burner, TE-triple energizer)
SOB	shortness of breath
SP*	spleen
spec.	specimen
SQ/s.c.	subcutaneous
ss.	one half
ST*	stomach
STAT	at once
t.i.d.	three times a day
TLC	total lung capacity, tender loving care
TPR	temperature, pulse, respiration
TSH	thyroid stimulating hormone
ung.	ointment
URI	upper respiratory infection
UTI	urinary tract infection
UV	ultraviolet
WBC	white blood cells; white blood count
WC	wheel chair
WDWN	well developed, well nourished
Wt.	Weight
x	times

TCM Reference for Needling, Moxibustion and Cupping

+	reinforce
-	reduce
=	even reinforcing-reducing
*	cutaneous needle
↓	three-edged needle
	moxa cone
	moxa stick
	warming needle
	cupping

Descriptive terms used for charting

Areas of abdomen:

1. Right hypochondriac region
2. Epigastric region
3. Left hypochondriac region
4. Right lumbar region
5. Umbilical region
6. Left lumbar region
7. Right iliac region
8. Hypogastric region
9. Left iliac region

Quadrants (abdomen):

1. Right upper quadrant
2. Left upper quadrant
3. Right lower quadrant
4. Left lower quadrant

Areas of the back

Small of back: Lumbar region
End of spine: Sacral region
Buttocks: Gluteal region

Amounts

Large: Excessive, profuse, copious
Moderate: Moderate, usual
Small: Scanty, slight

General appearance

Thin/undernourished: Emaciated
Fat/greatly overweight: Obese
Very sick: Acutely ill

Bleeding

Very little: Oozing
Nosebleed: Epistaxis
Blood in vomitus: Hematemesis
Blood in urine: Hematuria
Coughing/spitting blood: Hemoptysis

Breathing

Difficulty breathing: Dyspnea, dyspneic
Rapid breathing: Hyperpnea

Appendix F: Acupuncture Needling Safety Policy

All acupuncture staff and students must follow the acupuncture needling safety policy in the Acupuncture Clinic and lab sessions.

Objectives:

- To ensure a safe and healthy environment for all staff and students
- To ensure compliance with all relevant legislation
- To prevent accidents

Responsibilities:

- All faculty and students must take every precaution to work in a safe and healthy manner
- Any acupuncture needling procedure on a human body conducted by students must be done under supervision of acupuncture faculty in the OCTCM Clinic or in an assigned acupuncture clinical site
- ONLY sterilized disposable acupuncture needles are used at OCTCM
- Before the needling procedure, all acupuncture needles must be inspected carefully to avoid using poor quality needles that might cause accidents
- If a patient panics, is fatigued or hungry, or has over-eaten at the time of treatment, the acupuncture needling procedure must be delayed
- All sterilization procedures for acupuncture treatment must be strictly followed
- If the skin area has inflammation or recent scar tissue, all acupuncture needling procedures must be avoided
- All acupuncture needles, scalpels and other sharp objects must be discarded into the proper sharps containers for disposal
- All unused acupuncture needles must be stored in a safe and assigned place
- All acupuncture equipment must be handled carefully and stored according to instructions
- In the event of an accident, the student must report the accident/incident immediately to the Clinical Supervisor, to Administration, and complete the Student Incident/Accident

Report Form

- Students must not perform any acupuncture needling procedures on the human body outside the institute of assigned clinical sites
- All faculty and students must wear lab coats in the Acupuncture/TCM clinic

Appendix G: Universal Precautions and the Use of Gloves

Universal Precautions have been adopted in the day-to-day practice of allied health care professionals because screening for all infectious diseases is impractical and because screening does not necessarily preclude the presence of infectious disease.

The policy pertaining to the use of gloves in the clinic is a result of the wide spread concern for potential cross contamination with the use of acupuncture needles. This concern is validated by the Toronto Public Health Communicable Disease Department.

It is strongly recommended to use one glove for needle withdrawal for each patient without exception. The glove should be worn on the non-dominant hand, which swabs and/or applies the cotton ball. The manipulating hand is not gloved.

Although the acupuncture needle is of a small diameter, it is inserted below the level of the dermis and is able to draw blood and/or body fluids out in minuscule amounts not visible macroscopically. The use of acupuncture needles, therefore, is not free of risk of disease transmission during needle withdrawal.

- All students/interns and clinical educators/instructors should use gloves (on the non-dominant hand) whenever withdrawing one or several needles especially if there is any potential bleeding (head, larger needles, patient who bleeds easily). This procedure will be strictly monitored and enforced.
- All gloves are to be disposed into the biohazard bags.
- It is be the duty of the students to maintain an adequate glove supply and report the need for re-ordering to the administrative assistant.
- This policy does not waive the need to wear gloves at all times if the student/intern, and/or patient has open lesions or sores on his/her hands or the area to be needled.

Objectives and Student Requirements

The Clinical Practicum

The clinical component of the Acupuncture/TCM Program at OCTCM commences in the second semester of the first year and continues throughout the program. OCTCM faculty are dedicated to offering its students the most professional, hands-on experience of Acupuncture/TCM, and thus, great value is placed on the clinical practicum and internships.

Objectives

Although the student is gradually introduced to the responsibilities associated with the practice of acupuncture and TCM throughout the clinical practicum, the main goal of the course is for the student to be able to:

- Develop competency as a primary health care practitioner under the guidance of the clinical teachers.
- Develop sound knowledge base to be able to apply appropriate Chinese medical diagnosis in the clinical setting and devise a management strategy from an initial assessment, carrying to all aspects required for a safe practice of acupuncture.
- Interact with patients in a sensitive manner, attend and engage in a dialogue with the patient on issues relevant to their health concerns.
- Develop knowledge of the Canadian health care system and its networks, enabling students to link their patients where necessary into this system.

Supervision

Students undertaking clinical education are offered a variety of settings both on and off campus. Supervision is provided by OCTCM faculty and traditionally trained practitioners associated with the Acupuncture/TCM program. Students who elect to complete their internship overseas must do so either under the college's internship in China or in a location approved by OCTCM.

Student Requirements

During clinical placement, the student should be able to demonstrate abilities in the following areas:

OCTCM Student Clinic Handbook

- Students will be selected during the practical clinic term to be a clinical leader.
- Students are responsible to check the clinical leader list to perform their duties.
- The list will be posted by the Office Manager / Clinical supervisor.
- Each student will be a Clinical Leader at least 1-3 times or more for each clinical rotation depending on the number of students in the clinic.

a) Clinical Leader Responsibilities:

- There will be 1 clinical leader for each clinic.
- Come and leave the clinic on time.
- Check the booking list and prepared the patient files.
- Call to confirm the appointment with patient for the next clinical practice day.
- Make sure all the files are properly stored securely after the treatment.
- Check all rooms for cotton, alcohol, needles, linens, towels, pillows & refill if necessary.
- Inform or write notes regarding supply shortage or any damage or missing equipment in the clinic. Forward the notice to the Office Manager or secretary ASAP.
- Divide students in that clinical day into groups of 3 or 4 (Based on their time of arrival to the clinic).
- Make sure everything is tidy and safe before leaving the clinic.
- Helping the clinical supervisor to overlook the clinic for the day.
- Make sure each group perform their duties such as patient care that have been assigned, booking for appointment, cleaning up treatment bay after each treatment, etc.
- Gently remind the groups about their duties, and if clinical procedures are not followed properly, report to the Clinical Supervisor.

b) Self-Actualization:

- Identify and substantiate his/her diagnosis
- Establish a position in relation to issues important to the patient
- Learn to feel secure within themselves and accept feedback from the patients and colleagues
- Be prepared to take into account other diagnostic interpretations different from their own

c) Ability to Communicate

- Listen and hear what is said
- Show respect, empathy and compassion
- Make an appropriate response to the situation presented and to the patient's emotions
- Be orderly in clinical intervention and treatment
- Identify what needs to be clarified and dealt with in future sessions
- Appropriate questioning to enable correct point selection
- Communicate clearly and specifically and check back with patient to clarify misunderstandings
- Treat the presenting problems and clarify with patients other areas to be treated
- Explain clearly what happens in an acupuncture session and explain how many treatments will be required
- Strictly observed and flow appropriate aseptic procedures
- Write referrals, formal letters and reports to other practitioners and pertinent community resources
- Be punctual, and be able to establish priorities in workload
- Contribute to case history discussions

“The biggest mistake you can make is to always be right.”

d) Ability to Conceptualize

- Assess which is important in the treatment in relation to the patients' health needs
- Understand that there may be more than one way to treat or respond to a patient's needs
- Be able to modify and change ideas, goals and treatments
- Conceptualize classroom learning and be able to interpret practically
- Accept that patients are individuals and all have their differences

e) Use of Learning to Practice

- To accept responsibility for learning and to participate in creating situations where learning can occur
- Seek out information/skills/opinions of others to implement

learning

- Initiate and use a variety of learning patterns e.g. Observation of other practitioners reflections on trial and error, comparison, reading, discussion, and taped interviews
- Be prepared to learn new skills
- Share thoughts and actions with clinical teachers and fellow students
- Be open to new ideas and have an ability to express one's own new ideas
- Show one has an expanding appreciation of people
- Think through actions and issues, accept and give positive feedback and encouraging advise
- Accept and give positive feedback and encouraging advise

f) Attendance Requirements

In order to complete the clinical practicum, students are required to do the following:

- Attend all clinical sessions
- Sign the Student Attendance Record (this must be filled in by each student at the commencement of each clinical session and signed by the supervising practitioner after students have signed their names).
- Students are required to remain in the clinic for the entire clinical session. If student leave early or are lasted, without prior notice, they will be docked marks and hours.
- Be present at least 15 minutes prior to the beginning of the session, to help set up, review patient details and focus on the duties at hand
- Remain at the session until the finish or until given permission to leave by the Clinical Supervisor.

If a student is unable to attend a clinical practicum session for reasons other than illness, the following procedures must be followed:

- Contact the Clinical Supervisor and Office Manager to inform her/him of your absence.
- Find a replacement and let Clinical Supervisor and Office Manager know of the change.
- Inform the Clinical Supervisor and Office Manager as soon as

possible thereafter (within 2 days).

- If unable to find a replacement, make alternative booking for your patients and within 24 hours you are to provide a written statement directly to the Clinical Supervisor and Office Manager, which includes the following information:
 - a. The reason you could not attend.
 - b. Provide details of the people you contacted
 - c. This information must be sent directly to the Clinical Supervisor and Office Manager within 7 days of the date missed at the Clinic.

In case of illness:

- Contact the Clinical Supervisor and Office Manager and advise her/him of the situation.
- Provide medical certificate from an approved practitioner or other suitable corroborative evidence of reason for not attending and send to the Clinical Supervisor and Office Manager within 7 days of the date missed at the Clinic.
- Please refer to the Attendance Policies outlined in the OCTMC brochure.

“What the caterpillar calls the end of the world, the master calls a butterfly.” --- Richard Bach

Failure to follow the above steps could result in a student being removed from Clinical Practicum and/or failed in that particular Clinical Practicum.

- A student who misses more than one rotation session will be expected to come before a staff review and if the staff are not satisfied with the student's explanation, that student will fail the respective Clinical Practice and be barred from Clinical rotations for a nominated period of time.
- As students complete their allotted rotation, they must communicate with patients they have treated on a regular basis that another student practitioner will be taking over from them.
- Students are required to complete all tasks which fall under the heading of TCM treatments e.g. Acupuncture, massage, cupping, moxibustion, etc. when asked to do so by a clinical teacher (unless student feels uncomfortable with her/his abilities of confidence, in which case a meeting with the Academic Advisors,

OCTCM Student Clinic Handbook

Clinical Supervisor and student is required as soon as possible). Failure to do so will mean removal of name from rotations.

General Guidelines for Attending Clinical Practicum Sessions:

- Participate when and how your level requires.
- Remember that the Student Practitioners/Assistants are under the supervision and direction of the Clinical Supervisor and the final word on any issue is the Clinical Supervisor's (if a situation occurs where a student questions the safety and ethical methods of the Clinical Supervisor, the student must write a letter to the Executive Director outlining the situation and reason for concern).
- It is the responsibility of the Student Assistant to negotiate with the Student Practitioner as the type and level of assistance required. Remember what you learn is all up to you.

Clinical Practicum

Clinical Evaluation Strategies Component

Course Evaluation

The student must attain a mark of 70% or higher in ALL Clinical Practice courses in order to successfully complete their Clinical Education. Throughout the courses, the students will be evaluated in numerous ways.

Course Outlines

Students can refer to the OCTCM Catalog for outlines of each practicum rotation. Please Acquaint yourself with these objectives as they serve as a guideline for the supervisor to assess your TCM and technical knowledge. The identified objectives for each rotation must be completed to be successful in that rotation.

Case Studies

Students are evaluated on their competency in performing various skills and on their level of TCM and technical knowledge by the use of case studies and oral presentations. Each student will complete the case studies in the rotations identified in the course outlines. Each case study will be graded (as per case study evaluation checklist) and be assigned a mark out of each Clinical Practice final

mark. The student will be asked to do an oral presentation of their case studies which is mandatory and will be graded.

Professional Performance

You will also receive evaluations on your professional performance. Evaluation reports are given to students at intervals (Interim Evaluations) and at the end of clinical practicum (Summative Evaluations).

Clinical supervisors may employ other methods to cover the rotational objectives and to help in their assessment your medical and technical knowledge. These methods may include post-rotational tests, written assignments, oral presentation, and bedside questioning.

“It’s never too late – never too late to start over, never too late to be happy.” --- Jane Fonda

Criteria for Successful Completion of Clinical Education

1. Courses must be passed according to evaluation strategies outlined in each separate course outline.
2. Acceptable professional performance in all clinical practice
3. Successful completion of all clinical practice
4. Demonstration of safe practice throughout all clinical practice
5. Demonstration of ethical behavior at all times.

Professional Performance Evaluations (PPE)

Guidelines

Professional Performance Evaluations are used to assess the student’s behavior while they are completing their clinical education. A student must have acceptable PPE throughout the program.

These assessments are given during each and every Clinical Practicum. Below are the definitions of “acceptable” and “unacceptable” evaluations.

A professional performance evaluation will be deemed acceptable:

OCTCM Student Clinic Handbook

- A minimum score of 70% is attained for all evaluations received in all Clinical Practicum throughout the Program

A professional performance evaluation will be deemed unacceptable if any of the following occur:

- When a student receives two or more zero scores in any of the categories on any one evaluation.
- A repeat zero in the same category on any subsequent evaluation.
- Any zero score in Ethical Behavior.

Students can ask the Clinical Supervisor for a copy of the Professional Performance Evaluation form.

Successful Completion of All Clinical Practica

Each student must successfully complete the scheduled rotations. The evaluation criteria include specific objectives (refer to course outline) that are to be accomplished during that rotation as well as Professional Performance Evaluations. Every student should read about each clinical practicum before beginning it as there may be pre-reading for the rotation and there are identified “areas for review” that will assist the student in preparing for the rotation.

Demonstration of Safe Practice Throughout All Clinical Practica

A student must demonstrate to their supervisor, acupuncture staff and all to her health care team members that they are competent practitioners. Unsafe practice arises when there is a lack of knowledge and preparation by the students or when the students are not conscientious about their work. Unsafe practice also arises when a student (or any health care worker) fails to recognize the limits of their abilities and does not seek assistance when appropriate to do so. When a student is found to be negligent or found to use unsafe procedures, an Incident Report will be filed to the Clinic/College and Program Coordinator. Any incident of unsafe practice can lead to the dismissal of the student from the program.

***Advice is like snow; the softer it falls the longer it dwells upon,
and the deeper it sinks into the mind
---Samuel T. Coleridge***

Demonstration of Ethical Behavior at All Times

Any student whose behavior is deemed to be unethical, improper or unbecoming of a health care professional may be dismissed immediately from the program.

“Deal with the faults of others as gently as with your own.”
--- Chinese proverb

Clinical Practice Expectation

Students are expected to review the Clinical Practicum course outline in the OCTCM clinical handbook for specific requirements and expectations of each rotation. Students of the OCTCM clinic are expected to assist with the overall smooth running of each clinical session, including recruiting patients for the clinic.

Clinical Practicum Course Outline: Guideline for Acupuncture & TCM Diploma's students:

Diploma of Acupuncture

Direct Supervision

- 30hr – CLI-601: Intro **Clinic** – This is an introductory clinic that reviews in detail the clinical procedures outlined in this handbook.
- 60hr(total 90) – CLI-602: Observation and assistance only. Before 90 hrs, the student should not be doing anything but observing and assisting the senior students or supervisor in treating the patient (treatment bay preparation, clean-up, open needles, etc.)
- 30hr(total 90-120) – CLI 603: Diagnosis and intake should be performed during this time. However: if the student has not completed the first two diagnosis (TCM-104, TCM-105) courses they cannot perform diagnosis. In fact, if the student has not completed the diagnosis courses they should not enroll in more than the initial 90 **hours** of observation.
- 60hr (120-180hrs) – CLI-604: Needling arms and legs. The student must have completed the pre-requisites: Acu-moxa 1(ACU-205) and meridians & acupoints 2 and 3 (ACU-203). If students have not completed these courses then they should not be attending **clinic hours** beyond 120 hrs.

OCTCM Student Clinic Handbook

- 60hr(180-240hrs) – CLI-605: Needle the posterior torso
- 90hr(240-330hrs) – CLI-606: Needle anterior torso and face.

Indirect Supervision

- 210hr(330-540) – CLI-607: Full clinical intern

Off-site

- 60hr(540-600hrs) – CLI-608: Offsite Acupuncture Clinic.

Diploma of TCMP

Off Site

- 60hr(600-660hrs) – CLI-609: Offsite Herbal Clinic.

Indirect Supervision

- 120hr (660-780hrs) – CLI-610: Onsite Clinical practice

Advanced Diploma of TCM

Off Site

- 60hrs (780-840hrs) – CLI-611: Offsite advanced clinic

Indirect Supervision

- 210hrs (840-1050hrs) – CLI-612: On site Advanced Clinical Practice

Off Site

- 60hrs (1050-1110hrs) – CLI-613: Offsite advanced clinic
- *NOTE: regardless of the number of clinical hours completed, the clinical supervisor will have the **full right to stop** the student from needling the patient if the supervisor thinks that the safety of the patient is compromised.*
- *Student will be supervised by clinical supervisor at all time until they graduate.*
- ***Notice:** the OCTCM has the right to change this guideline at any time according to its requirements and possible regulation in the future.*

Acupuncture Tables

Yin Meridians	Jing-well (Wood)	Ying-spring (Fire)	Shu-stream (Earth)	Jing-river (Metal)	He-Sea (Water)
LU	LU 11	LU 10	LU 9	LU 8	LU 5
PC	PC 9	PC 8	PC 7	PC 5	PC 3
HT	HT 9	HT 8	HT 7	HT 4	HT 3
SP	SP 1	SP 2	SP 3	SP 5	SP 9
LV	LV 1	LV 2	LV 3	LV 4	LV 8
KD	KD 1	KD 2	KD 3	KD 7	KD 10
Yang Meridians	Jing-well (Metal)	Ying-spring (Water)	Shu-stream (Wood)	Jing-river (Fire)	He-Sea (Earth)
LI	LI 1	LI 2	LI 3	LI 5	LI 11
TH	TH 1	TH 2	TH 3	TH 6	TH 10
SI	SI 1	SI 2	SI 3	SI 5	SI 8
ST	ST 45	ST 44	ST 43	ST 41	ST 36
GB	GB 44	GB 43	GB 41	GB 38	GB 34
UB	UB 67	UB 66	UB 65	UB 60	UB 40

Lower He-Sea points

Large Intestine	ST 37	-Yang Ming-	Stomach	ST 36
Triple Heater	UB 39	-Shao Yang-	Gall Bladder	GB 34
Small Intestine	ST 39	-Tai Yang-	Urinary Bladder	UB 40

Xi Cleft Points

LU	LU 6	UB	UB 63	Yin Qiao	KD 8
LI	LI 7	KD	KD 5	Yang Qiao	UB 59
ST	ST 34	PC	PC 4	Yin Wei	KD 9
SP	SP 8	TH	TH 7	Yang Wei	GB 35
HT	HT 6	GB	GB 36		
SI	SI 6	LV	LV 6		

Yuan Source Points

Lung	LU 9	Urinary Bladder	UB 64
Large Intestine	LI 4	Kidney	KD 3
Stomach	ST 42	Pericardium	PC 7
Spleen	SP 3	Triple Heater	TH 4
Heart	HT 7	Gall Bladder	GB 40
Small Intestine	SI 4	Liver	LV 3

OCTCM Student Clinic Handbook

Luo Connecting Points

Lung	LU 7	Urinary Bladder	UB 58
Large Intestine	LI 6	Kidney	KD 4
Stomach	ST 40	Pericardium	PC 6
Spleen	SP 4	Triple Heater	TH 5
Heart	HT 5	Gall Bladder	GB 37
Small Intestine	SI 7	Liver	LV 5

Back Shu Points

Lung	UB 13	Urinary Bladder	UB 28
Large Intestine	UB 25	Kidney	UB 23
Stomach	UB 21	Pericardium	UB 14
Spleen	UB 20	Triple Heater	UB 22
Heart	UB 15	Gall Bladder	UB 19
Small Intestine	UB 27	Liver	UB 18
Governing Vessel	UB 16	Diaphragm	UB 17
Qihai (Sea of Qi)	UB 24	Guanyuan	UB 26
Zhonglu	UB 29	Baihuan (White Ring)	UB 30
Gaohuang (Vital Region)	UB 43		

Front Mu Points

Lung	LU 1	Urinary Bladder	CV 3
Large Intestine	ST 25	Kidney	GB 25
Stomach	CV 12	Pericardium	CV 17
Spleen	LV 13	Triple Heater	CV 5
Heart	CV 14	Gall Bladder	GB 24
Small Intestine	CV 4	Liver	LV 14

Hui Meeting Points

Zang	LV 13	Sinews	GB 34
Fu	CV 12	Vessels	LU 9
Qi	CV 17	Bones	UB 11
Blood	UB 17	Marrow	GB 39

Master & Coupled Points

Extraordinary Vessel	Master Point	Coupled Point
Conception Vessel	LU 7	KD 6
Governing Vessel	SI 3	UB 62
Chong Vessel	SP 4	PC 6
Dai Vessel	GB 41	TH 5
Yin Qiao Vessel	KD 6	LU 7
Yang Qiao Vessel	UB 62	SI 3
Yin Wei Vessel	PC 6	SP 4
Yang Wei Vessel	TH 5	GB 41

OCTCM Student Clinic Handbook

Command Points

Abdomen	ST 36
Lumbar Region	UB 40
Head & Posterior Neck	LU 7
Face & Mouth	LI 4
Heart, Chest & Epigastrium	PC 6
Fainting & Collapse	GV 26

The Four Seas

Sea of Qi	ST 9, CV 17, GV 15, GV 14
Sea of Blood	UB 11, ST 37, ST 39
Sea of Water & Grain	ST 30 (upper point), ST 36 (lower point)
Sea of Marrow	GV 20, GV 16

Window of the Sky Points

From Ling Shu	Ch. 21	From Ling Shu	Ch. 2
Renying	ST 9	Tiantu	CV 22
Futu	LI 18	Tianchuang	SI 16
Tianyou	TH 16	Tianrong	SI 17
Tianzhu	UB 10	Fengfu	GV 16
Tianfu	LU 3	Tianchi	PC 1

Thirteen Ghost Points of Sun Simiao

Point Number	Point Name
GV 26	Ghost Palace
GV 23	Ghost Hall
GV 16	Ghost Pillow
CV 24	Ghost Market
LU 11	Ghost Faith
LI 11	Ghost Leg
PC 7	Ghost Heart
PC 8	Ghost Cave
ST 6	Ghost Bed
SP 1	Ghost Fortress
UB 62	Ghost Path
Guifeng (Extra Point) on the underside of the tongue, one cun from the tip of the midline	Ghost Seal
Essentially CV 1 originally described as Yumentou (Extra Point - Women) /Yinxiafeng (Extra Point - Men)	Ghost Store

OCTCM Student Clinic Handbook

Entry Exit Points

	Entry	Exit
LU	LU 1	LU 7 *(LU 11)
LI	LI 4 *(LI 1)	LI 20
PC	PC 1	PC 8 *(PC 9)
TH	TH 1	TH 22 *(TH 23)
HT	HT 1	HT 9
SI	SI 1	SI 19
SP	SP 1	SP 21
ST	ST 1	ST 42 *(ST 45)
LV	LV 1	LV 14
GB	GB 1	GB 41 *(GB 44)
KD	KD 1	KD 22 *(KD 27)
UB	UB 1	UB 67

“When you are content to be simply yourself and don’t compare or compete, everybody will respect you.”

Lao-Tzu

Acupuncture Terminology

Meridians	Jing	經/经
Collateral	Luo	絡/络
Meridian and Collateral	Jingluo	經絡/经络
Main Meridian	Zhengjing	正經/正经
Extra Meridian	Qijing	奇經/奇经
Meridian Point	Jingxue	經穴/经穴
Extra Point	Qixue	奇穴/奇穴
Acupuncture Point	Zhenjiuxue	針灸穴/针灸穴

Standard Nomenclature of filiform needles

Handle	Zhenbing	針柄/针柄
Root	Zhengen	針根/针根
Body	Zhenti	針體/针体
Tip	Zhenjian	針尖/针尖

Standard Nomenclature of the unit of measurement

B-cun (bone proportional cun)

Gudu Fencun

骨度分寸/骨度分寸

F-cun (finger cun)

Shouzhi Tongshencun

手指同身寸/手指同身寸

Standard measurements of six parts of the body were adopted as follows:

1. from the upper border of the Manubrium to the end of the body of the Sternum = 9 B-cun
2. from the end of the body of the Sternum to the Umbilicus = 8 B-cun
3. from the Umbilicus to the upper border of the Symphysis pubis = 5 B-cun
4. from the Medial Malleolus to the ground = 3 B-cun
5. from the great Trochanter to the knee joint = 19 B-cun
6. from the knee joint to the prominence of Lateral Malleolus = 16 B-cun

OCTCM Student Clinic Handbook

Shear needle	chanzhen	鑷針/鑷针
Round-point	needleyuanzhen	圓針/圆针
Spoon needle	chizhen	鍤針/鍤针
Lance needle	fengzhen	鋒針/锋针
Stiletto needle	pizhen	鉞針/铍针
Round-sharp needle	yuanlizhen	圓利針/圆利针
Filiform needle	haozhen	毫針/毫针
Long needle	changzhen	長針/长针
Big needle	dazhen	大針/大针

Standard nomenclature of modern needles

Three-edged needle	sanlengzhen	三稜針/三棱针
Ringheaded thumbtack needle	xianzhen	鉤針/钩针
Intradermal needle	pineizhen	皮內針/皮内针
Dermal needle	pifuzhen	皮膚針/皮肤针

The English language name of the 14 meridians and their common abbreviations:

Lung Meridian	LU	Arm Taiyin
Large Intestine Meridian	LI	Arm Yangming
Stomach Meridian	ST	Leg Yangming
Spleen Meridian	SP	Leg Taiyin
Heart Meridian	HT	Arm Shaoyin
Small Intestine Meridian	SI	Arm Taiyang
Bladder Meridian	BL(UB)	Leg Taiyang
Kidney Meridian	KI(KD)	Leg Shaoyin
Pericardium Meridian	PC	Arm Jueyin
Triple Energizer Meridian	TE(SJ/TW/TB)	Arm Shaoyang
Gallbladder Meridian	GB	Leg Shaoyang
Liver Meridian	LR(LV)	Leg Jueyin
Governor Vessel Meridian	GV(Du)	
Conception Vessel Meridian	CV(Ren)	

Governor Vessel (GV)	Dumai	督脈/督脉
Conception Vessel (CV)	Renmai	任脈/任脉
Flush Vessel (FV)	Chongmai	衝脈/冲脉
Belt Vessel (BV)	Daimai	帶脈/带脉
Yin Heel Vessel (Yin HV)	Yinqiaomai	陰蹻脈/阴跷脉
Yang Heel Vessel (Yang HV)	Yangqiaomai	陽蹻脈/阳跷脉
Yin Link Vessel (Yin LV)	Yinweimai	陰維脈/阴维脉
Yang Link Vessel (Yang LV)	Yangweimai	陽維脈/阳维脉

Acupoint Nomenclature Index

Point	Chinese	Name	English	Pinyin
Lung Meridian, LU. Shoutaiyin Feijing xue 手太陰肺經 手太阴肺经				
LU-1	中府	Zhongfu	Middle Palace	zhōng fǔ
LU-2	雲門	Yunmen	Cloud Gate	yún mén
LU-3	天府	Tianfu	Palace of Heaven	tiān fǔ
LU-4	俠白	Xiabai	Clasping the White	xiá bái
LU-5	尺澤	Chize	Cubit Marsh	chǐ zé
LU-6	孔最	Kongzui	Maximum Opening	kǒng zuì
LU-7	列缺	Lieque	Broken Sequence	liè quē
LU-8	經渠	Jingqu	Channel Gutter	jīng qú
LU-9	太淵	Taiyuan	Supreme Abyss	tài yuān
LU-10	魚際	Yuji	Fish Border	yú jì
LU-11	少商	Shaoshang	Lesser Shang	shào shāng
Large Intestine Meridian, LI. Shouyangming Dachang-Jing xue 手陽明大腸經 手阳明大肠经				
LI-1	商陽	Shangyang	Shang Yang	shāng yáng
LI-2	二間	Erjian	Second Space	èr jiān
LI-3	三間	Sanjian	Third Space	sān jiān
LI-4	合谷	He Gu	Joining Valley	hé gǔ
LI-5	陽谿	Yangxi	Yang Stream	yáng xī
LI-6	偏歷	Pianli	Veering Passage	piān lì
LI-7	溫溜	Wenliu	Warm Flow	wēn liū
LI-8	下廉	Xialian	Lower Angle	xià lián
LI-9	上廉	Shanglian	Upper Angle	shàng lián
LI-10	手三里	Shousanli	Arm Three Miles	shǒu sān lǐ
LI-11	曲池	Quchi	Pool at the Crook	qū chí
LI-12	肘髁	Zhouliao	Elbow Crevice	zhǒu liáo

LI-13	手五里	Shouwuli	Arm Five Miles	shǒu wǔ lǐ
LI-14	臂臑	Binao	Upper Arm	bì nào
LI-15	肩髃	Jianyu	Shoulder Bone	jiān yú
LI-16	巨骨	Jugu	Great Bone	jù gǔ
LI-17	天鼎	Tianding	Heaven's Tripod	tiān dǐng
LI-18	扶突	Futu	Support the Prominence	fú tū
LI-19	口禾髎	Kouheliao	Mouth Grain Crevice	kǒu hé liáo
LI-20	迎香	Yingxiang	Welcome Fragrance	yíng xiāng

Stomach Meridian, ST
Zuyangming Weijing xue
 足陽明胃經/足阳明胃经

St-1	承泣	Chengqi	Container of Tears	chéng qì
St-2	四白	Sibai	Four Whites	sì bái
St-3	巨髎	Juliao	Great Crevice	jù liáo
St-4	地倉	Dicang	Earth Granary	dì cāng
St-5	大迎	Daying	Great Welcome	dà yíng
St-6	頰車	Jiache	Jaw Bone	jiá chē
St-7	下關	Xiaguan	Below the Joint	xià guān
St-8	頭維	Touwei	Head's Binding	tóu wéi
St-9	人迎	Renying	Man's Welcome	rén yíng
St-10	水突	Shuitu	Water Prominence	shuǐ tū
St-11	氣舍	Qishe	Abode of Qi	qì shè
St-12	缺盆	Quepen	Empty Basin	quē pén
St-13	氣戶	Qihu	Qi Door	qì hù
St-14	庫房	Kufang	Storehouse	kù fáng
St-15	屋翳	Wuyi	Room Screen	wū yì
St-16	膺窗	Yingchuang	Breast Window	yíng chuāng?
St-17	乳中	Ruzhong	Middle of the Breast	rǔ zhōng
St-18	乳根	Rugen	Root of the Breast	rǔ gēn
St-19	不容	Burong	Not Contained	bù róng
St-20	承滿	Chengman	Supporting Fullness	chéng mǎn
St-21	梁門	Liangmen	Beam Gate	liáng mén
St-22	關門	Guanmen	Pass Gate	guān mén
St-23	太乙	Taiyi	Supreme Unity	tài yǐ
St-24	滑肉門	Huaroumen	Slippery Flesh Gate	huá ròu mén
St-25	天樞	Tianshu	Heaven's Pivot	tiān shū
St-26	外陵	Wailing	Outer Mound	wài líng
St-27	大巨	Daju	The Great	dà jù
St-28	水道	Shuidao	Water Passage	shuǐ dào?
St-29	归来	Guilai	Return	guī lái?
St-30	氣冲	Qichong	Rushing Qi	qì chōng
St-31	髀關	Biguan	Thigh Gate	bì guān
St-32	伏兔	Futu	Crouching Rabbit	fú tù

St-33	阴市	Yinshi	Yin Market	yīn shì
St-34	梁丘	Liangqiu	Ridge Mound	liáng qīu
St-35	犊鼻	Dubi	Calf's Nose	dú bí
St-36	足三里	Zusanli	Leg Three Miles	zú sān lǐ
St-37	上巨虚	Shangjuxu	Upper Great Void	shàng jù xū
St-38	條口	Tiaokou	Lines Opening	tiáo kǒu
St-39	下巨虚	Xiajuxu	Lower Great Void	xià jù xū
St-40	豐隆	Fenglong	Abundant Bulge	fēng lóng
St-41	解谿	Jiexi	Stream Divide	jiě xī
St-42	冲陽	Chongyang	Rushing Yang	chōng yáng
St-43	陷谷	Xiangu	Sunken Valley	xiàn gǔ
St-44	内庭	Neiting	Inner Courtyard	nèi tíng
St-45	厲兌	Lidui	Strict Exchange	lì duì
Spleen Meridian, SP. Zutaiyin Pijing xue 足太陰脾經 足太阴脾经				
SP-1	隱白	Yinbai	Hidden White	yīn bái
SP-2	大都	Dadu	Great Metropolis	dà dū
SP-3	太白	Taibai	Supreme White	taì bái
SP-4	公孫	Gongsun	Grandfather Grandson	gōng sūn
SP-5	商丘	Shangqiu	Shang Mound	shāng qiū
SP-6	三陰交	Sanyinjiao	Three Yin Intersection	sān yīn jiāo
SP-7	漏谷	Lougu	Dripping Valley	lòu gǔ
SP-8	地機	Diji	Earth Pivot	dì jī
SP-9	陰陵泉	Yinlingquan	Yin Mound Spring	yīn líng quán
SP-10	血海	Xuehai	Sea of Blood	xuè hǎi
SP-11	箕門	Jimen	Winnowing Gate	jī mén
SP-12	冲門	Chongmen	Rushing Gate	chōng mén
SP-13	府舍	Fushe	Abode of the Fu	fǔ shè
SP-14	腹結	Fujie	Abdomen Knot	fù jié
SP-15	大橫	Da heng	Great Horizontal	dà héng?
SP-16	腹哀	Fuai	Abdomen Sorrow	fù āi
SP-17	食竇	Shidou	Food Cavity	shí dòu
SP-18	天谿	Tianxi	Heavenly Stream	tiān xī
SP-19	胸鄉	Xiongxiang	Chest Village	xiōng xiāng
SP-20	周榮	Zhourong	Encircling Glory	zhōu róng
SP-21	大包	Dabao	Great Wrapping	dà bāo
Heart Meridian, HT Shoushaoyin Xinjing xue 手少陰心經/手少阴心经				
HE-1	極泉	Jiquan	Summit Spring	jí quán
HE-2	青靈	Qingling	Green Spirit	qīng líng
HE-3	少海	Shaohai	Lesser Sea	shào hǎi

HE-4	靈道	Lingdao	Spirit Path	líng dào
HE-5	通里	Tongli	Penetrating the Interior	tōng lǐ
HE-6	陰郄	Yinxi	Yin Cleft	yīn xī
HE-7	神門	Shenmen	Spirit Gate	shén mén
HE-8	少府	Shaofu	Lesser Palace	shào fǔ
HE-9	少沖	Shaochong	Lesser Rushing	shào chōng
Small Intestine Meridian, SI Shoutaiyang Xiaochangjing xue 手太陽小腸經/手太阳小肠经				
SI-1	少澤	Shaoze	Lesser Marsh	shào zé
SI-2	前谷	Qianggu	Front Valley	qián gǔ
SI-3	後谿	Houxi	Back Stream	hòu xī
SI-4	腕骨	Wangu	Wrist Bone	wàn gǔ
SI-5	陽谷	Yanggu	Yang Valley	yáng gǔ
SI-6	養老	Yanglao	Support the Aged	yǎng lǎo
SI-7	支正	Zhizheng	Branch of Upright	zhī zhèng
SI-8	小海	Xiaohai	Small Sea	xiǎo hǎi
SI-9	肩貞	Jianzhen	True Shoulder	jiān zhēn
SI-10	臑俞	Naoshu	Upper arm transporter	nāo shū
SI-11	天宗	Tianzong	Heavenly Gathering	tiān zōng
SI-12	秉風	Bingfeng	Grasping the Wind	bǐng fēng
SI-13	曲垣	Quyuan	Crooked Wall	qū yuán
SI-14	肩外俞	Jianwaishu	Outer Shoulder Transporter	jiān wài shū
SI-15	肩中俞	Jianzhongshu	Middle Shoulder Transporter	jiān zhōng shū
SI-16	天窗	Tianchuang	Heavenly Window	tiān chuāng
SI-17	天容	Tianrong	Heavenly Appearance	tiān róng
SI-18	顴膠	Quanliao	Cheek Bone Crevice	quán liáo
SI-19	聽宮	Tinggong	Palace of Hearing	tīng gōng
Bladder Meridian, BL Zutaiyang pangguangjing xue 足太陽膀胱經/足太阳膀胱经				
BL-1	睛明	Jingming	Bright Eyes	jīng míng
BL-2	攢竹	Zanzhu	Gathered Bamboo	cuán zhú
BL-3	眉衝	Meichong	Eyebrows' Pouring	méi chōng
BL-4	曲差	Quchai	Crooked Curve	qǔ chā?
BL-5	五處	Wuchu	Fifth Place	wǔ chǔ
BL-6	承光	Chengguang	Receiving Light	chéng guāng
BL-7	通天	Tongtian	Heavenly Connection	tōng tiān
BL-8	絡卻	Luoque	Declining Connection	luò què
BL-9	玉枕	Yuzhen	Jade Pillow	yù zhěn
BL-10	天柱	Tianzhu	Celestial Pillar	tiān zhù
BL-11	大杼	Dazhu	Great Shuttle	dà zhù

BI-12	風門	Fengmen	Wind Gate	fēng mén
BI-13	肺俞	Feishu	Lung Transporter	fèi shū
BI-14	厥陰俞	Jueyinshu	Jueyin Transporter	jué yīn shū
BI-15	心俞	Xinshu	Heart Transporter	xīn shū
BI-16	督俞	Dushu	Governor Transporter	dū shū?
BI-17	膈俞	Geshu	Diaphragm Transporter	gé shū
BI-18	肝俞	Ganshu	Liver Transporter	gān shū
BI-19	膽俞	Danshu	Gallbladder Transporter	dǎn shū
BI-20	脾俞	Pishu	Spleen Transporter	pí shū
BI-21	胃俞	Weishu	Stomach Transporter	wèi shū
BI-22	三焦俞	Sanjiaoshu	Sanjiao Transporter	sān jiāo shū
BI-23	腎俞	Shenshu	Kidney Transporter	shèn shū
BI-24	氣海俞	Qihuishu	Sea of Qi Transporter	qì hǎi shū?
BI-25	大腸俞	Dachangshu	Large Intestine Transporter	dà cháng shū
BI-26	關元俞	Guanyuanshu	Gate of Origin Transporter	guān yuán shū
BI-27	小腸俞	Xiaochangshu	Small Intestine Transporter	xiǎo cháng shū
BI-28	膀胱俞	Pangguangshu	Bladder Transporter	páng guāng shū
BI-29	中膂俞	Zhonglushu	Mid-Spine Transporter	zhōng lǚ shū
BI-30	白環俞	Baihuanshu	White Ring Transporter	bái huán shū
BI-31	上髎	Shangliao	Upper Crevice	shàng liáo
BI-32	次髎	Ciliao	Second Crevice	cì liáo
BI-33	中髎	Zhongliao	Middle Crevice	zhōng liáo
BI-34	下髎	Xialiao	Lower crevice	xià liáo
BI-35	會陽	Huiyang	Meeting of Yang	huì yáng
BI-36	承扶	Chengfu	Hold and Support	chéng fú
BI-37	殷門	Yinmen	Gate of Abundance	yīn mén
BI-38	浮郄	Fuxi	Floating Cleft	fú xī
BI-39	委陽	Weiyang	Outside of the Crook	wěi yáng
BI-40	委中	Weizhong	Middle of the Crook	wěi zhōng
BI-41	附分	Fufen	Attached Branch	fù fēn
BI-42	魄戶	Pohu	Door of the Corporeal Soul	pò hù
BI-43	膏肓俞	Gaohuangshu	Vital Region Shu	gāo huāng shū
BI-44	神堂	Shentang	Hall of the Spirit	shén táng
BI-45	譙謫	Yixi	Yi Xi ?	yì xǐ?
BI-46	膈關	Geguan	Diaphragm Gate	gé guān
BI-47	魂門	Hunmen	Gate of the Ethereal Soul	hún mén
BI-48	陽綱	Yanggang	Yang's Key Link	yáng gāng
BI-49	意舍	Yishe	Abode of Consciousness of Potentials	yì shě?
BI-50	胃倉	Weicang	Stomach Granary	wèi cāng

BI-51	育門	Huangmen	Vitals Gate	huāng mén
BI-52	志室	Zhishi	Residence of the Will	zhì shì
BI-53	胞育	Baohuang	Bladder's Vitals	bāo huāng
BI-54	秩邊	Zhibian	Order's Limit	zhì biān
BI-55	合陽	Heyang	Confluence of Yang	hé yáng
BI-56	承筋	Chengjin	Support the Sinews	chéng jīn
BI-57	承山	Chengshan	Support the Mountain	chéng shān
BI-58	飛陽	Feiyang	Soaring Upwards	fēi yáng
BI-59	跗陽	Fuyang	Instep Yang	fū yáng
BI-60	昆侖	Kunlun	Kunlun Mountains	kūn lún
BI-61	僕參	Pucan	Servant's Respect	pú cān
BI-62	申脈	Shenmai	Extending Vessel	shēn mài
BI-63	金門	Jinmen	Golden Gate	jīn mén
BI-64	京骨	Jinggu	Capital Bone	jīng gǔ
BI-65	束骨	Shugu	Restraining Bone	shù gǔ
BI-66	足通谷	Zutonggu	Foot Connecting Valley	zú tōng gǔ
BI-67	至陰	Zhiyin	Reaching Yin	zhì yīn
Kidney Meridian, KI Zushaoyin Shenjing xue 足少陰腎經/足少阴肾经				
Kd-1	涌泉	Yong Quan	Gushing Spring	yǒng quán
Kd-2	然谷	Rangu	Blazing Valley	rán gǔ
Kd-3	太谿	Taixi	Supreme Stream	taì xī
Kd-4	大鐘	Dazhong	Great Bell	dà zhōng
Kd-5	水泉	Shuiquan	Water Spring	shuǐ quán
Kd-6	照海	Zhaohai	Shining Sea	zhào hǎi
Kd-7	復溜	Fuliu	Returning Current	fù liū
Kd-8	交信	Jiaoxin	Exchange Belief	jiāo xìn
Kd-9	築賓	Zhubin	Guest House	zhú bīn
Kd-10	陰谷	Yingu	Yin Valley	yīn gǔ
Kd-11	橫骨	Henggu	Pubic Bone	héng gǔ
Kd-12	大赫	Dahe	Great Luminance	dà hè
Kd-13	氣穴	Qixue	Qi Cave	qì xué?
Kd-14	四滿	Siman	Four Fullnesses	sì mǎn
Kd-15	中注	Zhongzhu	Middle Flow	zhōng zhù
Kd-16	育俞	Huangshu	Vitals Transporter	huāng shū
Kd-17	商曲	Shangqu	Shang Bend	shāng qū
Kd-18	石關	Shiguan	Stone Pass	shí guān
Kd-19	陰都	Yindu	Yin Metropolis	yīn dū
Kd-20	腹通谷	Futonggu	Abdomen Connecting Valley	fù tōng gǔ
Kd-21	幽門	Youmen	Hidden Gate	yōu mén
Kd-22	步廊	Bulang	Walking Corridor	bù láng

Kd-23	神封	Shenfeng	Spirit Seal	shén fēng
Kd-24	靈墟	Lingxu	Spirit Ruin	líng xū
Kd-25	神藏	Shencang	Spirit Storehouse	shén cáng
Kd-26	彀中	Yuzhong	Comfortable Chest	yù zhōng
Kd-27	俞府	Shufu	Shu Mansion	shū fǔ
Pericardium Meridian, PC Shoujueyin Xinbaojing xue 手厥陰心包經/手厥阴心包经				
Pc-1	天池	Tianchi	Heavenly Pool	tiān chí
Pc-2	天泉	Tianquan	Heavenly Spring	tiān quán
Pc-3	曲澤	Quze	Marsh at the Crook	qū zé
Pc-4	郄門	Ximen	Xi-Cleft Gate	xī mén
Pc-5	間使	Jianshi	Intermediate Messenger	jiān shǐ
Pc-6	內關	Neiguan	Inner Pass	nèi guān
Pc-7	大陵	Daling	Great Mound	dà líng
Pc-8	勞宮	Laogong	Palace of Toil	láo gōng
Pc-9	中衝	Zhongchong	Middle Rushing	zhōng chōng
Triple Energizer Meridian, TE. Shoushaoyang Sanjiaojing xue 手少陽三焦經/手少阳三焦经				
SJ-1	關衝	Guanchong	Rushing Pass	guān chōng
SJ-2	液門	Yemen	Fluid Gate	yè mén
SJ-3	中渚	Zhongzhu	Central Islet	zhōng zhǔ
SJ-4	陽池	Yangchi	Yang Pool	yáng chí
SJ-5	外關	Waiguan	Outer Pass	wài guān
SJ-6	支溝	Zhigou	Branch Ditch	zhī gōu
SJ-7	會宗	Huizong	Ancestral Meeting	huì zōng
SJ-8	三陽絡	Sanyangluo	Three Yang Meeting	sān yáng luò
SJ-9	四瀆	Sidu	Four Rivers	sì dú
SJ-10	天井	Tianjing	Heavenly Well	tiān jǐng
SJ-11	清冷淵	Qinglengyuan	Clear Cold Abyss	qīng lěng yuān
SJ-12	消灤	Xiaoluo	Dispersing Luo River	xiāo luò
SJ-13	臑會	Naohui	Upper Arm Meeting	nào huì
SJ-14	肩髃	Jianliao	Shoulder Crevice	jiān liáo
SJ-15	天髃	Tianliao	Heavenly Crevice	tiān liáo
SJ-16	天牖	Tianyou	Window of Heaven	tiān yǒu
SJ-17	翳風	Yifeng	Wind Screen	yì fēng
SJ-18	契脈?	Qimai	Spasm Vessel	qì mài?
SJ-19	顙息	Luxi	Skull's Rest	lú xī?
SJ-20	角孫	Jiaosun	Minute Angle	jiǎo sūn
SJ-21	耳門	Ermen	Ear Gate	ěr mén
SJ-22	耳和髃	Erheliao	Ear Harmony Crevice	ěr hé liáo

SJ-23	絲竹空	Sizhukong	Silken Bamboo Hollow	sī zhú kōng
Gallbladder Meridian, GB Zushaoyang Danjing xue 足少陽膽經/足少阳胆经				
Gb-1	瞳子髎	Tongziliao	Pupil Crevice	tóng zǐ liáo
Gb-2	聽會	Tinghui	Meeting of Hearing	tīng huì
Gb-3	上關	Shangguan	Above the Joint	shàng guān
Gb-4	頰厭	Hanyan	Jaw Serenity	hàn yàn
Gb-5	懸顱	Xuanlu	Suspended Skull	xuán lú
Gb-6	懸厘	Xuanli	Suspended Hair	xuán lí
Gb-7	曲鬢	Qubin	Crook of the Temple	qū bìn
Gb-8	率谷	Shuaigu	Leading Valley	shuài gǔ
Gb-9	天沖	Tianchong	Heavenly Rushing	tiān chōng
Gb-10	浮白	Fubai	Floating White	fú bái
Gb-11	頭竅陰	Touqiaoyin	Yin Portals of the Head	tóu qiào yīn
Gb-12	完骨	Wangu	Mastoid Process	wán gǔ
Gb-13	本神	Benshen	Root of the Spirit	běn shén
Gb-14	陽白	Yangbai	Yang White	yáng bái
Gb-15	頭臨泣	Toulinqi	Head Governor of Tears	tóu lín qì
Gb-16	目窗	Muchuang	Window of the Eye	mù chuāng
Gb-17	正營	Zhengying	Upright Nutrition	zhèng yíng
Gb-18	承靈	Chengling	Support Spirit	chéng líng
Gb-19	腦空	Naokong	Brain Hollow	nǎo kōng
Gb-20	風池	Fengchi	Wind Pool	fēng chí
Gb-21	肩井	Jianjing	Shoulder Well	jiān jǐng
Gb-22	淵腋	Yuanye	Armpit Abyss	yuān yè
Gb-23	輒筋	Zhejin	Flank Sinews	zhé jīn
Gb-24	日月	Riyue	Sun and Moon	rì yuè
Gb-25	京門	Jingmen	Capital Gate	jīng mén
Gb-26	帶脈	Daimai	Girdling Vessel	dài mài
Gb-27	五樞	Wushu	Five Pivots	wǔ shū
Gb-28	維道	Weidao	Linking Path	wéi dào
Gb-29	居膠	Juliao	Stationary Crevice	jū liáo
Gb-30	環跳	Huantiao	Jumping Circle	huán tiào
Gb-31	風市	Fengshi	Wind Market	fēng shì
Gb-32	中瀆	Zhongdu	Middle Ditch	zhōng dú
Gb-33	膝陽關	Xiyangguan	Knee Yang Gate	xī yáng guān
Gb-34	陽陵泉	Yanglingquan	Yang Mound Spring	yáng líng quán
Gb-35	陽交	Yangjiao	Yang Intersection	yáng jiāo
Gb-36	外丘	Waiqiu	Outer Hill	wài qiū
Gb-37	光明	Guangming	Bright Light	guāng míng
Gb-38	陽輔	Yangfu	Yang Assistance	yáng fǔ

Gb-39	懸鐘	Xuanzhong	Suspended Bell	xuán zhōng
Gb-40	丘墟	Qiuxu	Mound of Ruins	qiū xū
Gb-41	足臨泣	Zulinqi	Foot Governor of Tears	zú lín qì
Gb-42	地五會	Diwuhui	Earth Five Meetings	dì wǔ huì
Gb-43	俠谿	Xiaxi	Clamped Stream	xiá xī
Gb-44	足竅陰	Zuqiaoyin	Yin Portals of the Foot	zú qiào yīn
Liver Meridian, LR Zujueyin Ganjing xue 足厥陰肝經 足厥阴肝经				
Liv-1	大敦	dà dūn		
Liv-2	行間	xíng jiān		
Liv-3	太沖	taì chōng		
Liv-4	中封	zhōng fēng		
Liv-5	蠡溝	lǐ gōu		
Liv-6	中都	zhōng dū		
Liv-7	膝關	xī guān		
Liv-8	曲泉	qū quán		
Liv-9	陰包	yīn bāo		
Liv-10	足五里	zú wǔ lǐ?		
Liv-11	陰廉	yīn lián		
Liv-12	急脈	jí mài		
Liv-13	章門	zhāng mén		
Liv-14	期門	qí mén		
Governor Vessel Meridian, GV Dumai xue 督脈 督脉				
Du-1	長強	cháng qiáng		
Du-2	腰俞	yāo shū		
Du-3	腰陽關	yāo yáng guān		
Du-4	命門	mìng mén		
Du-5	懸樞	xuán shū		
Du-6	脊中	jì zhōng?		
Du-7	中樞	zhōng shū		
Du-8	筋縮	jīn suō		
Du-9	至陽	zhì yáng		
Du-10	靈台	líng tái		
Du-11	神道	shén dào		
Du-12	身柱	shēn zhù		
Du-13	陶道	táo dào		
Du-14	大椎	dà zhuī		
Du-15	啞門	yǎ mén		
Du-16	風府	fēng fǔ		
Du-17	腦戶	nǎo hù		

Du-18	強間	qiáng jiān		
Du-19	後頂	hòu dǐng		
Du-20	百會	bǎi huì		
Du-21	前頂	qián dǐng		
Du-22	囟會	xìn huì		
Du-23	上星	shàng xīng		
Du-24	神庭	shén tíng		
Du-25	素膠	sù liáo		
Du-26	人中	rén zhōng		
Du-27	兌端	duì duān		
Du-28	巔交	yín jiāo		
Conception Vessel Meridian, CV Renmai xue 任脈任脉				
Ren-1	會陰	huì yīn		
Ren-2	曲骨	qū gǔ		
Ren-3	中極	zhōng jí		
Ren-4	關元	guān yuán		
Ren-5	石門	shí mén		
Ren-6	氣海	qì hǎi		
Ren-7	陰交	yīn jiāo		
Ren-8	神闕	shén què		
Ren-9	水分	shuǐ fēn		
Ren-10	下脘	xià wǎn [or xià guǎn]		
Ren-11	建里	jiàn lǐ		
Ren-12	中脘	zhōng wǎn [or zhōng guǎn]		
Ren-13	上脘	shàng wǎn [or shàng guǎn]		
Ren-14	巨闕	jù què		
Ren-15	鳩尾	jiū wěi		
Ren-16	中庭	zhōng tíng		
Ren-17	膻中	shān zhōng		
Ren-18	玉堂	yù táng		
Ren-19	紫宮	zǐ gōng		
Ren-20	華蓋	huá gài		
Ren-21	璇璣	xuán jī		
Ren-22	天突	tiān tū		
Ren-23	廉泉	lián quán		
Ren-24	承漿	chéng jiāng		

WHO Standard Nomenclature of Extra Points

WHO	Pinyin	Chinese
EX-HN1	sishéncong	四神聰
EX-HN2	dangyáng	太衝
EX-HN3	yìntáng	印堂
EX-HN4	yúyao	魚腰
EX-HN5	tàiyáng	太陽
EX-HN6	erjian	筋縮
EX-HN7	qiúhòu	球後
EX-HN8	shàngyíngxiang	陽維脈
EX-HN9	nèiyíngxiang	內迎香
EX-HN10	jùquán	聚泉
EX-HN11	hàiquán	海泉
EX-HN12	jīnjīn	金津
EX-HN13	yùyè	玉液
EX-HN14	yì míng	承靈
EX-HN15	jīngbailáo	頸百勞
EX-CA1	zhigong	子宮
EX-B1	dìngchuan	定喘

EX-B2	jiáji	夾脊
EX-B3	wèiwanxiàshu	胃脘下俞
EX-B4	pigen	痞根
EX-B5	xiàzhìshì	下志室
EX-B6	yaoyí	腰宜
EX-B7	yaoyan	腰眼
EX-B8	shíqìzhui	十七椎
EX-B9	yaoqí	腰奇
EX-UE1	zhoujian	肘尖
EX-UE2	èrbái	二白
EX-UE3	zhongquán	中泉
EX-UE4	zhongkuí	中魁
EX-UE5	dàgukong	大骨空
EX-UE6	xiagukong	小骨空
EX-UE7	yaotòngdian	腰痛點
EX-UE8	wàiláogong	內迎香
EX-UE9	baxié	八邪
EX-UE10	sìfèng	四縫
EX-UE11	shíxuan	十宣
EX-LE1	kuangu	髌骨
EX-LE2	hèding	鶴頂
EX-LE3	xinèi	膝內

EX-LE4	nèixiyan	內膝眼
EX-LE5	xiyan	膝眼
EX-LE6	dannáng	膽囊
EX-LE7	lánwei	膽囊
EX-LE8	nèihuáijian	內踝尖
EX-LE9	wàihuáijian	外踝尖
EX-LE10	bafeng	八風
EX-LE11	dúyin	獨陰
EX-LE12	qìduan	本神

MS 8 Dingpangxian I 頂旁 1 線/頂旁 1 线	Lateral Line 1 of Vertex
MS 9 Dingpangxian II 頂旁 2 線/頂旁 2 线	Lateral Line 2 of Vertex
MS 10 Nieqianxian 顳前線/顳前线	Anterior Temporal Line
MS 11 Niehouxian 顳後線/顳后线	Posterior Temporal Line
MS 12 Zhenshang Zhengzhongxian 枕上正中線/枕上正 中线	Upper-Middle Line of Occiput
MS 13 Zhenshang Pangxian 枕上旁線/枕上旁线	Upper-Lateral Line of Occiput
MS 14 Zhenxia Pangxian 枕下旁線/枕下旁线	Lower-Lateral Line of Occiput

Standard Nomenclature of Scalp Acupuncture

MS 1 Ezhongxian 額中線/額中线	Middle Line of Forehead
MS 2 Epangxian I 額旁 1 線/額旁 1 线	Lateral Line 1 of Forehead
MS 3 Epangxian II 額旁 2 線/額旁 2 线	Lateral Line 2 of Forehead
MS 4 Epangxian III 額旁 3 線/額旁 3 线	Lateral Line 3 of Forehead
MS 5 Dingzhongxian 頂中線/頂中线	Middle Line of Vertex
MS 6 Dingnie Qianxiexian 頂顳前斜線/頂顳前 斜线	Anterior Oblique Line of Vertex- Temporal
MS 7 Dingnie Houxiexian 頂顳後斜線/頂顳后 斜线	Posterior Oblique Line of Vertex- Temporal

Index of TCM Illnesses

Internal Medicine (Nei Ke)	
1	abdominal mass (<i>ji ju</i>)
2	abdominal pain (<i>fu tong</i>)
3	atrophy-flaccidity (<i>wei zheng</i>)
4	bleeding disorders (<i>xue zheng</i>)
5	chest impediment (<i>xiong bi</i>)
6	common cold (<i>gan mao</i>)
7	constipation (<i>bian bi</i>)
8	consumptive disease (<i>xu lao</i>)
9	consumptive thirst (<i>xiao ke</i>)
10	convulsive syndromes (<i>jing zheng</i>)
11	cough (<i>ke shou</i>)
12	depression (<i>yu zheng</i>)
13	diarrhea (<i>xie xie</i>)
14	drum distension (<i>gu zhang</i>)
15	dysentery (<i>li ji</i>)
16	dysphagia occlusion syndrome (<i>ye ge</i>)
17	dyspnea (<i>chuan zheng</i>)
18	edema (<i>shui zhong</i>)
19	epigastric pain (<i>wei tong</i>)
20	epilepsy (<i>xian zheng</i>)
21	fainting (<i>jue zheng</i>)
22	goitre (<i>ying bing</i>)
23	headache (<i>tou tong</i>)
24	hiccupping and belching (<i>e ni</i>)
25	hypochondrial pain (<i>xie tong</i>)
26	impediment syndrome (<i>bi zheng</i>)
27	impotence (<i>yang wei</i>)
28	insomnia (<i>bu mei</i>)
29	internal damage fever (<i>nei shang fa re</i>)
30	ischuria (<i>long bi</i>)
31	jaundice (<i>huang dan</i>)
32	lumbago (<i>yao tong</i>)
33	lung distention (<i>fei zhang</i>)
34	malaria (<i>nue ji</i>)
35	mania (<i>dian kuang</i>)

36	palpitation (<i>xin ji</i>)
37	pulmonary abscess (<i>fei yong</i>)
38	pulmonary tuberculosis (<i>fei lao</i>)
39	seminal emission (<i>yi jing</i>)
40	spontaneous sweats, night sweats (<i>zi han, dao han</i>)
41	stranguria (<i>lin zheng</i>)
42	tinnitus and deafness (<i>er ming er long</i>)
43	vertigo (<i>xuan yun</i>)
44	vomiting (<i>ou tu</i>)
45	watery phlegm/sputum (<i>tan yin</i>)
46	wheezing syndrome (<i>xiao zheng</i>)
47	wind stroke (<i>zhong feng</i>)
External Medicine (Wai Ke)	
48	acne (<i>fen ci</i>)
49	acute mastitis (<i>ru yong</i>)
50	alopecia areata (<i>you feng</i>)
51	anal fissure (<i>gang lie</i>)
52	bedsore (<i>ru chuang</i>)
53	boil (<i>ding chuang</i>)
54	breast cancer (<i>ru yan</i>)
55	breast lump (<i>ru pi</i>)
56	carbuncle (<i>yong</i>)
57	contact dermatitis (<i>jie chu xing pi yan</i>)
58	digital gangrene (<i>tuo ju</i>)
59	drug rash (<i>yao wu xing pi yan</i>)
60	eczema (<i>shi chuang</i>)
61	erysipelas (<i>dan du</i>)
62	furuncle (<i>jie</i>)
63	goitre (<i>ying</i>)
64	hemorrhoid (<i>zhi</i>)
65	herpes zoster (<i>she chuan chuang</i>)
66	phlegmon (<i>fa</i>)
67	prostatic hyperplasia (<i>qian lie xian zeng sheng zheng</i>)
68	prostatitis (<i>qian lie xian yan</i>)
69	scrofula (<i>luo li</i>)
70	sebaceous cyst (<i>zhi liu</i>)

OCTCM Student Clinic Handbook

71	shank ulcer (<i>lian chuang</i>)
72	tinea (<i>xian</i>)
73	urticaria (<i>yin zhen</i>)
74	varicose veins (<i>jin liu</i>)
75	warts (<i>you</i>)
Obstetrics and Gynecology (<i>Fu Ke</i>)	
76	abdominal masses (<i>zheng jia</i>)
77	amenorrhea (<i>bi jing</i>)
78	bleeding during pregnancy, unstable pregnancy (<i>tai lou, tai dong bu an</i>)
79	dysmenorrhea (<i>tong jing</i>)
80	infertility (<i>bu yun</i>)
81	insufficient breastmilk (<i>que ru</i>)
82	intermenstrual bleeding (<i>jing jian qi chu xue</i>)
83	irregular menstruation (<i>yue jing bu tiao</i>)
84	leukorrhagia (<i>dai xia</i>)
85	lochiorrhea (<i>chan hou e lu bu jue</i>)
86	menstrual breast aching (<i>jing xing ru fang zhang tong</i>)
87	menstrual edema (<i>jing xing fu zhong</i>)
88	menstrual headache (<i>jing xing tou tong</i>)
89	menstrual hematemesi and epistaxis (<i>jing xing tu niu</i>)
90	menstrual mental disorder (<i>jing xing qing zhi yi chang</i>)
91	menstrual oral ulcer (<i>jing xing kou mei</i>)
92	metrorrhagia and metrostaxis (<i>beng lou</i>)
93	miscarriage (<i>zhui tai, xiao chan, hua tai</i>)
94	morning sickness (<i>ren chen e zu</i>)
95	perimenopausal syndrome

	(<i>jue jing qian hou zhu zheng</i>)
96	postpartum abdominal pain (<i>chan hou fu tong</i>)
97	postpartum convulsion (<i>chan hou jing zheng</i>)
98	postpartum dizziness (<i>chan hou xue yun</i>)
99	postpartum fever (<i>chan hou fa re</i>)
100	postpartum retention of urine (<i>chan hou pai niao yi chang</i>)
101	uterine prolapse (<i>yin ting</i>)
Pediatrics (<i>Er Ke</i>)	
102	anorexia (<i>yan shi</i>)
103	asthma (<i>xiao chuan</i>)
104	intestinal parasitic worms (<i>chang dao chong zheng</i>)
105	chickenpox (<i>shui dou</i>)
106	common cold (<i>gan mao</i>)
107	convulsions (<i>jing feng</i>)
108	cough (<i>ke shou</i>)
109	diarrhea (<i>xie xie</i>)
110	enuresis (<i>yi niao</i>)
111	epilepsy (<i>xian zheng</i>)
112	erysipelas (<i>chi you dan</i>)
113	fetal jaundice (<i>tai huang</i>)
114	food retention (<i>ji zhi</i>)
115	malnutrition (<i>gan zheng</i>)
116	measles (<i>ma zhen</i>)
117	mumps (<i>zha sai</i>)
118	pneumonia (<i>fei yan ke sou</i>)
119	purpura (<i>zi dian</i>)
120	retardation and flaccidity (<i>wu chi wu ruan</i>)
121	rubella (<i>feng sha</i>)
122	scarlatina (<i>dan sha</i>)
123	sweating (<i>han zheng</i>)
124	thrush (<i>e kou chuang</i>)
125	whooping cough (<i>dun ke</i>)
126	infantile edema (<i>xiao er shui zhong</i>)

OCTCM Student Clinic Handbook

Orthopedics and Traumatology (<i>Gu Shang Ke</i>)	
127	Achilles tendon injury (<i>gen jian sun shang</i>)
128	acute lumbar muscle sprain (<i>yao bu niu cuo shang</i>)
129	bone fracture (<i>gu zhe</i>)
130	calcaneodynia (<i>gen tong zheng</i>)
131	carpal tunnel syndrome (<i>wan guan zong he zheng</i>)
132	cervical spondylosis (<i>jing zhui bing</i>)
133	frozen shoulder (<i>jian guan jie zhou wei yan</i>)
134	ganglionic cyst (<i>jian qiao nang zhong</i>)
135	joint dislocation (<i>tuo wei</i>)

136	knee joint collateral ligament injury (<i>xi guan jie ce fu ren dai sun shang</i>)
137	lumbar muscle strain (<i>yao bu lao sun</i>)
138	meniscal injury (<i>ban yue ban sun shang</i>)
139	prolapse of lumbar intervertebral disc (<i>yao zhui jian pan tu chu zheng</i>)
140	piriformis syndrome (<i>li zhuang ji zong he zhang</i>)
141	sprained ankle (<i>huai guan jie niu cuo shang</i>)
142	strained neck (<i>luo zhen</i>)
143	tennis elbow (<i>hong gu wai shang ke yan</i>)

Index of Materia Medica

Ai Ye	艾葉	Folium Artemisiae Argyi
Ba Ji Tian	巴戟天	Radix Morindae Officinalis
Bai Bian Dou	白扁豆	Semen Dolichoris Album
Bai Bu	百部	Radix Stemonae
Bai Dou Kou	白豆蔻	Fructus Amomi Rotundus
Bai Fu Zi	白附子	Rhizoma Typhonii
Bai Guo	白果	Semen Ginkgo
Bai He	百合	Bulbus Lilli
Bai Hua She She Cao	白花蛇舌草	Herba Hedyotis Diffusae
Bai Ji	白芨	Rhizoma Bletillae
Bai Ji Li/Ci Ji Li	白蒺藜/刺蒺藜	Fructus Tribuli
Bai Jiang Cao	敗醬草	Herba Patriniae
Bai Jie Zi	白芥子	Semen Sinapis Albae
Bai Mao Gen	白茅根	Rhizoma Imperatae
Bai Qian	白前	Rhizoma Cynanchi Stauntonii
Bai Shao	白芍	Radix Paeoniae Alba
Bai Tou Weng	白頭翁	Radix Pulsatillae
Bai Wei	白薇	Radix Cynanchi Atrati
Bai Xian Pi	白鮮皮	Cortex Dictamni Radicis
Bai Zhi	白芷	Radix Angelicae Dahuricae
Bai Zhu	白朮	Rhizoma Atractylodis Macrocephalae
Ban Lan Gen	板藍根	Radix Isatidis
Ban Mao	班蝨	Mylabris
Ban Xia	半夏	Rhizoma Pinelliae
Bei Xie	萆薢	Rhizoma Dioscoreae Hypoglaucae
Bian Xu	篇蓄	Herba Polygoni Avicularis
Bie Jia	鱉甲	Carapax Trionycis
Bin Lang	檳榔	Semen Arecae
Bing Pian	冰片	Borneolum Syntheticum
Bo He	薄荷	Herba Menthae
Bai Zi Ren	柏子仁	Semen Biotae
Bu Gu Zhi	補骨脂	Fructus Psoraleae
Can Sha	蠶砂	Faeces Bombycis
Cang Er Zi	蒼耳子	Fructus Xanthii
Cang Zhu	蒼朮	Rhizoma Atractylodis
Cao Dou Kou	草豆蔻	Semen Alpiniae Katsumadai
Cao Guo	草果	Fructus Tsaoko
Ce Bo Ye	側柏葉	Cacumen Biotae

OCTCM Student Clinic Handbook

Chai Hu	柴胡	Radix Bupleuri
Chan Tui	蟬蛻	Periostracum Cicadae
Che Qian Zi	車前子	Semen Plantaginis
Chen Xiang	沉香	Lignum Aquilariae Resinatum
Chi Shao Yao	赤芍藥	Radix Paeoniae Rubra
Chi Shi Zhi	赤石脂	Halloysitum Rubrum
Chi Xiao Dou	赤小豆	Semen Phaseoli
Chuan Bei Mu	川貝母	Bulbus Fritillariae Cirrhosae
Chuan Lian Zi	川楝子	Fructus Meliae Toosendan
Chuan Xiong	川芎	Rhizoma Ligustici Chuanxiong
Ci Shi	磁石	Magnetitum
Da Fu Pi	大腹皮	Pericarpium Arecae
Da Huang	大黃	Radix et Rhizoma Rhei
Da Ji	大戟	Radix Euphorbiae Pekinensis
Da Ji	大薊	Radix Cirsii Japonici
Da Qing Ye	大青葉	Folium Isatidis
Da Zao	大棗	Fructus Ziziphi Jujibae
Dai Zhe Shi	代赭石	Haematitum
Dan Dou Shi/Chi	淡豆豉	Semen Sojae Praeparatum
Dan Shen	丹參	Radix Salviae Miltiorrhizae
Dan Zhu Ye	淡竹葉	Herba Lophatheri
Dang Gui	當歸	Radix Angelicae Sinensis
Dang Shen	黨參	Radix Condonopsis Pilosulae
Di Fu Zi	地膚子	Fructus Kochiae
Di Gu Pi	地骨皮	Cortex Lycii Radicis
Di Long	地龍	Lumbricus
Di Yu	地榆	Radix Sanguisorbae
Ding Xiang	丁香	Flos Caryophylli
Dong Chong Xia Cao	冬蟲夏草	Cordyceps
Dong Gua Pi	冬瓜皮	Exocarpium Benincasae
Du Huo	獨活	Radix Angelicae Pubescentis
Du Zhong	杜仲	Cortex Eucommiae
E Jiao	阿膠	Colla Corii Asini
E Zhu	莪朮	Rhizoma Zedoariae
Fan Xie Ye	番瀉葉	Folium Sennae
Fang Feng	防風	Radix Ledebouriellae
Fen Fang Ji	粉防己	Radix Stephaniae Tetrandrae
Feng Mi	蜂蜜	Mel
Fo Shou	佛手	Fructus Citri Sarcodactylis
Fu Ling	茯苓	Poria
Fu Pen Zi	覆盆子	Fructus Rubi

OCTCM Student Clinic Handbook

Fu Xiao Mai	浮小麥	Fructus Triticis Levis
Fu Zi	附子	Radix Aconiti Praeparata
Gan Cao	甘草	Radix Glycyrrhizae
Gan Jiang	乾薑	Rhizoma Zingiberis
Gan Sui	甘遂	Radix Euphorbiae Kansui
Gao Ben	藁本	Rhizoma Ligustici
Gao Liang Jiang	高良薑	Rhizoma Alpiniae Officinarum
Ge Gen	葛根	Radix Puerariae
Ge Jie	蛤蚧	Gecko
Gou Ji	狗脊	Rhizoma Cibotii
Gou Qi Zi	枸杞子	Fructus Lycii
Gou Teng	鉤藤	Ramulus Uncariae cum Uncis
Gu Sui Bu	骨碎補	Rhizoma Drynariae
Gua Lou	瓜蒌	Fructus Trichosanthis
Guang Fang Ji	廣防己	Radix Aristolochiae Fangchi
Gui Ban	龜板	Plastrum Testudinis
Gui Zhi	桂枝	Ramulus Cinnamomi
Hai Er Cha	孩兒茶	Catechu
Hai Fu Shi	海浮石	Pumex
Hai Ge Ke	海蛤殼	Concha Cyclinae
Hai Jin Sha	海金沙	Spora Lygodii
Hai Zao	海藻	Sargassum
Han Lian Cao	旱蓮草	Herba Ecliptae
He Huan Pi	合歡皮	Cortex Albizziae
He Shou Wu	何首烏	Radix Polygoni Multiflori
He Zi	訶子	Fructus Chebulae
Hei Zhi Ma	黑芝麻	Semen Sesami Nigrum
Hong Hua	紅花	Flos Carthami
Hong Teng	紅藤	Caulis Sargentodoxae
Hou Po	厚朴	Cortex Magnoliae Officinalis
Hu Huang Lian	胡黃連	Rhizoma Picrorhizae
Hu Jiao	胡椒	Fructus Piperis Nigri
Hu Po	琥珀	Succinum
Hu Tao Rou	胡桃肉	Semen Juglandis
Hua Jiao	花椒	Pericarpium Zanthoxyli
Hua Shi	滑石	Talcum
Huai Hua	槐花	Flos Sophorae
Huang Bo/Bai	黃柏	Cortex Phellodendri
Huang Jing	黃精	Rhizoma Polygonati
Huang Lian	黃連	Rhizoma Coptidis
Huang Qi	黃耆	Radix Astragali seu Hedysari

OCTCM Student Clinic Handbook

Huang Qin	黃芩	Radix Scutellariae
Huo Ma Ren	火麻仁	Fructus Cannabis
Huo Xiang	藿香	Herba Pogostemonis
Ji Nei Jin	雞內金	Endothelium Corneum Gigeriae Galli
Ji Xue Teng	雞血藤	Caulis Spatholobi
Jiang Can	僵蠶	Bombyx Batryticatus
Jiang Huang	薑黃	Rhizoma Curcumae Longae
Jiang Xiang	降香	Lignum Dalbergiae Odoriferae
Jie Geng	桔梗	Radix Platycodi
Jin Qian Cao	金錢草	Herba Lysimachiae
Jin Yin Hua	金銀花	Flos Lonicerae
Jin Ying Zi	金櫻子	Fructus Rosae Laevigatae
Jing Jie	荊芥	Herba Schizonepetae
Ju Hua	菊花	Flos Chrysanthemi
Ju Pi/Chen Pi	橘皮/陳皮	Pericarpium Citri Reticulatae
Jue Ming Zi	決明子	Semen Cassiae
Ku Lian Pi	苦楝皮	Cortex Meliae
Ku Shen	苦參	Radix Sophorae Flavescens
Kuan Dong Hua	款冬花	Flos Farfarae
Kun Bu	昆布	Thallus Laminariae Eckloniae
Lai Fu Zi	萊菔子	Semen Raphani
Li Zhi He	荔枝核	Semen Litchi
Lian Qiao	連翹	Fructus Forsythiae
Lian Zi	蓮子	Semen Nelumbinis
Liu Huang	硫黃	Sulfur
Liu Ji Nu	劉寄奴	Herba Artemisiae Anomalaе
Long Dan Cao	龍膽草	Radix Gentianae
Long Gu	龍骨	Os Draconis
Long Yan Rou	龍眼肉	Arillus Longan
Lu Feng Fang	露蜂房	Nidus Vespae
Lu Gan Shi	爐甘石	Calamina
Lu Gen	蘆根	Rhizoma Phragmitis
Lu Hui	蘆薈	Aloe
Lu Rong	鹿茸	Cornu Cervi Pantotrichum
Ma Dou Ling	馬兜鈴	Fructus Aristolochiae
Ma Huang	麻黃	Herba Ephedrae
Ma Huang Gen	麻黃根	Radix Ephedrae
Ma Qian Zi	馬錢子	Semen Nux-Movicae
Mai Men Dong	麥門冬	Radix Ophiopogonis
Mai Ya	麥芽	Fructus Hordei Germinatus

OCTCM Student Clinic Handbook

Man Jing Zi	蔓荊子	Fructus Viticis
Mang Chong	忙蟲	Tanabus
Mang Xiao	芒硝	Natrii Sulfas
Ming Fan	明礬	Alumen
Mo Yao	沒藥	Myrrha
Mu Dan Pi	牡丹皮	Cortex Moutan Radicis
Mu Gua	木瓜	Fructus Chaenomelis
Mu Li	牡蠣	Concha Ostreae
Mu Tong	木通	Caulis Akebiae
Mu Xiang	木香	Radix Aucklandiae
Nan Gua Zi	南瓜子	Semen Cucurbitae
Niu Bang Zi	牛蒡子	Fructus Arctii
Niu Xi	牛膝	Radix Achyranthis Bidentatae
Nu Zhen Zi	女貞子	Fructus Ligustri Lucidi
Ou Jie	藕節	Nodus Nelumbinis Rhizomatis
Pei Lan	佩蘭	Herba Eupatorii
Pi Pa Ye	枇杷葉	Folium Eruobotryae
Pu Gong Ying	蒲公英	Herba Taraxaci
Pu Huang	蒲黃	Pollen Typhae
Qian Cao	茜草	Radix Rubiae
Qian Hu	前胡	Radix Peucedani
Qian Shi	芡實	Semen Euryales
Qiang Huo	羌活	Rhizoma seu Radix Notopterygii
Qin Jiao	秦艽	Radix Gentianae Macrophyllae
Qin Pi	秦皮	Cortex Fraxini
Qing Dai	青黛	Indigo Naturalis
Qing Hao	青蒿	Herba Artemisiae Annuae
Qing Pi	青皮	Pericarpium Citri Reticulatae Viride
Qu Mai	瞿麥	Herba Dianthi
Quan Xie	全蠍	Scorpio
Ren Shen	人參	Radix Ginseng
Rou Cong Rong	肉蓯蓉	Herba Cistanches
Rou Dou Kou	肉豆蔻	Semen Myristicae
Rou Gui	肉桂	Cortex Cinnamomi
Ru Xiang	乳香	Olibanum
San Leng	三棱	Rhizoma Sparganii
San Qi	三七	Radix Notoginseng
Sang Bai Pi	桑白皮	Cortex Mori Radicis
Sang Ji Sheng	桑寄生	Ramulus Taxilli
Sang Piao Xiao	桑螵蛸	Ootheca Mantidis
Sang Shen	桑椹	Fructus Mori

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Sang Ye	桑葉	Folium Mori
Sang Zhi	桑枝	Ramulus Mori
Sha Ren	砂仁	Fructus Amomi
Sha Shen	沙參	Radix Glehniae
Sha Yuan Zi/Tong Ji Li	沙苑子/潼蒺藜	Semen Astragali Complanati
Shan Yao	山藥	Rhizoma Dioscoreae
Shan Zha	山楂	Fructus Crataegi
Shan Zhu Yu	山茱萸	Fructus Corni
She Chuang Zi	蛇床子	Fructus Cnidii
She Gan / Ye Gan	射干	Rhizoma Belamcandae
Shen Qu	神麴	Massa Medicara Fermentata
Sheng Di Huang	生地黃	Radix Rehmanniae
Sheng Jiang	生薑	Rhizoma Zingiberis Recens
Sheng Ma	升麻	Rhizoma Cimicifugae
Shi Chang Pu	石菖蒲	Rhizoma Acori Graminei
Shi Di	柿蒂	Calyx Kaki
Shi Gao	石膏	Gypsum Fibrosum
Shi Hu	石斛	Herba Dendrobii
Shi Jue Ming	石決明	Concha Haliotidis
Shi Jun Zi	使君子	Fructus Quisqualis
Shi Liu Pi	石榴皮	Pericarpium Granati
Shi Wei	石葦	Folium Pyrrosiae
Shu Di Huang	熟地黃	Radix Rehmanniae Praeparata
Shui Zhi	水蛭	Hirudo
Si Gua Luo	絲瓜絡	Vascularis Luffae Fasciculus
Su Mu	蘇木	Lignum Sappan
Su Zi	蘇子	Fructus Perillae
Suan Zao Ren	酸棗仁	Semen Ziziphi Spinosae
Suo Yang	鎖陽	Herba Cynomorii
Tai Zi Shen	太子參	Radix Pseudostellariae
Tan Xiang	檀香	Lignum Santali Albi
Tao Ren	桃仁	Semen Persicae
Tian Hua Fen	天花粉	Radix Trichosanthis
Tian Ma	天麻	Rhizoma Gastrodiae
Tian Men Dong	天門冬	Radix Asparagi
Tian Nan Xing	天南星	Rhizoma Arisaematis
Ting Li Zi	葶藶子	Semen Lepidii seu Descurainiae
Tong Cao	通草	Medulla Tetrapanacis
Tu Si Zi	菟絲子	Semen Cuscutae
Wa Leng Zi	瓦楞子	Concha Arcae
Wang Bu Liu Xing	王不留行	Semen Vaccariae

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Wei Ling Xian	威靈仙	Radix Clematidis
Wu Bei Zi	五倍子	Galla Chinensis
Wu Gong	蜈蚣	Scolopendra
Wu Jia Pi	五加皮	Cortex Acanthopanax Radicis
Wu Ling Zhi	五靈脂	Faeces Troglodyteris
Wu Mei	烏梅	Fructus Mume
Wu Wei Zi	五味子	Fructus Schisandrae
Wu Yao	烏藥	Radix Linderae
Wu Zei Gu/Hai Piao Xiao	烏賊骨/海螵蛸	Os Sepiellae seu Sepiae
Wu Zhu Yu	吳茱萸	Fructus Evodiae
Xi Xin	細辛	Herba Asari
Xi Yang Shen	西洋參	Radix Panacis Quinquefolii
Xia Ku Cao	夏枯草	Spica Prunellae
Xian He Cao	仙鶴草	Herba Agrimoniae
Xian Mao	仙茅	Rhizoma Curculiginis
Xiang Fu	香附	Rhizoma Cyperi
Xiang Ru	香薷	Herba Elsholtziae seu Moslae
Xiao Hui Xiang	小茴香	Fructus Foeniculi
Xiao Ji	小薊	Herba Cephalanoploris
Xie Bai	薤白	Bulbus Allii Macrostemi
Xie/Xue Jie	血竭	Resina Draconis
Xin Yi	辛夷	Flos Magnoliae
Xing Ren	杏仁	Semen Armeniacae Amarum
Xiong Huang	雄黃	Realgar
Xu Duan	續斷	Radix Dipsaci
Xuan Fu Hua	旋覆花	Flos Inulae
Xuan Shen	玄參	Radix Scrophulari
Xie/Xue Yu Tan	血餘炭	Crinis Carbonisatus
Yan Hu Suo	延胡索	Rhizoma Corydalis
Ye Jiao Teng	夜交藤	Caulis Polygoni Multiflori
Yi Mu Cao	益母草	Herba Leonuri
Yi Yi Ren	薏苡仁	Semen Coicis
Yi Zhi Ren	益智仁	Fructus Alpiniae Oxyphyllae
Yin Chai Hu	銀柴胡	Radix Stellariae
Yin Chen Hao	茵陳蒿	Herba Artemisiae Scopariae
Yin Yang Huo	淫羊藿	Herba Epimedii
Yu Jin	郁金	Radix Curcumae
Yu Li Ren	郁李仁	Semen Pruni
Yu Mi Xu	玉米鬚	Stigma Maydis
Yu Xing Cao	魚腥草	Herba Houttuyniae

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Yu Zhu	玉竹	Rhizoma Polygonati Odorati
Yuan Hua	芫花	Flos Genkwa
Yuan Zhi	遠志	Radix Polygalae
Zao Jiao Ci	皂角刺	Spina Gleditsiae
Ze Lan	澤蘭	Herba Lycopi
Ze Xie	澤瀉	Rhizoma Alismatis
Zhe Bei Mu	浙貝母	Bulbus Fritillariae Thunbergii
Zhe Chong	蠟蟲	Eupolyphaga seu Steleophaga
Zhen Zhu Mu	珍珠母	Concha Margartifera Usta
Zhi Ke	枳殼	Fructus Aurantii
Zhi Mu	知母	Rhizoma Anemarrhenae
Zhi Shi	枳實	Fructus Aurantii Immaturus
Zhi Zi	梔子	Fructus Gardeniae
Zhu Ling	豬苓	Polyporus Umbellatus
Zhu Ru	竹茹	Caulis Bambusae in Taeniam
Zi Cao	紫草	Radix Arnebiae seu Lithospermi
Zi Hua Di Ding	紫花地丁	Herba Violae
Zi Su Ye	紫蘇葉	Folium Perillae
Zi Wan	紫菀	Radix Asteris
Zong Lu Tan	棕櫚炭	Traachycarpi Carbonisatus

TCM Formula Reference

Formulas for relieving superficial syndrome (Jie Biao Ji 解表劑) (8)

Formula for relieving superficial syndrome with pungent and warm 辛溫解表 (4)

- Ma Huang Tang Ephedra Decoction 麻黃湯
 - Exterior Cold excess(Cold attack)
 - **Ma Huang**
 - Gui Zhi
 - Xing Ren
 - Zhi Gan Cao
- Gui Zhi Tang Cinnamon Twig Decoction 桂枝湯
 - Exterior Cold from deficiency (Wind attack)
 - **Gui Zhi**
 - Bai Shao
 - Sheng Jiang
 - Da Zao
 - Zhi Gan Cao
- Xiao Qing Long Tang Minor Blue-green Dragon Decoction 小青龍湯
 - Exterior Wind-Cold with congested fluids
 - Ma Huang
 - Gui Zhi
 - Gan Jiang
 - Xi Xin
 - Wu Wei Zi
 - Bai Shao
 - Ban Xia
 - Zhi Gan Cao

- Jiu Wei Qiang Huo Tang Nine-herb Decoction with Notopterygium
 - Exterior Wind-Cold-Damp with internal Heat
 - **Qiang Huo**
 - Fang Feng
 - Cang Zhu
 - Xi Xin
 - Chuan Xiong
 - Bai Zhi
 - Huang Qin
 - Sheng Di Huang
 - Gan Cao

Relieving superficial syndrome with pungent and cool 辛涼解表 (3)

- Yin Qiao San Honeysuckle and Forsythia powder 銀翹散
 - Protective level warm-febrile disease
 - Jin Yin Hua
 - Lian Qiao
 - Jie Geng
 - Niu Bang Zi
 - Bo He
 - Dan Dou Chi
 - Jing Jie
 - Dan Zhu Ye
 - Xian Lu Gen
 - Gan Cao
- Sang Ju Yin Mulberry Leaf and Chrysanthemum Decoction 桑菊飲
 - Early stage of a warm-febrile disease
 - Sang Ye
 - Ju Hua
 - Lian Qiao
 - Bo He
 - Jie Geng

- Xing Ren
- Lu Gen
- Gan Cao
- Ma Xing Shi Gan Tang
Ephedra, Apricot Kernel,
Gypsum and Licorice
Decoction 麻杏石甘湯
 - Heat lodged in LU
 - Ma Huang
 - Shi Gao
 - Xing Ren
 - Zhi Gan Cao

Relieving superficial syndrome with tonics 扶正解表 (1)

- Bai Du San Toxin-Vanquishing Powder) 敗毒散
 - releases exterior, expels Wind & Damp, tonifies Qi
 - Qiang Huo (Radix and Rhizoma Notopterygii)...30g
 - Du Huo (Radix Angelicae Pubescentis)...30g
 - Chuan Xiong (Radix Ligustici Chuanxiong)...30g
 - Chai Hu (Radix Bupleuri)...30g
 - Jie Geng (Radix Platycodi Grandiflori)...30g
 - Zhi Ke (Fructus Citri seu Ponciri)...30g
 - Qian Hu (Radix Peucedani)...30g
 - Ren Shen (Radix Ginseng)...30g

- Fu Ling (Sclerotium Poriae Cocos)...30g
- Gan Cao (Radix Glycyrrizae Uralensis)...15g

Formulas for purgation (Xie Xia Ji 瀉下劑) (7)

Purging with cold energy herbs 寒下 (3)

- Da Cheng Qi Tang Major Order the Qi Decoction 大承氣湯
 - Severe Yang Ming Fu
 - Da Huang
 - Mang Xiao
 - Zhi Shi
 - Hou Po
- Xiao Cheng Qi Tang Minor Order the Qi Decoction 小承氣湯
 - Mild Yang Ming fu
 - Da Huang
 - Hou Po
 - Zhi Shi
- Tiao Wei Cheng Qi Tang Regulate the Stomach and Order the Qi Decoction 調胃承氣湯
 - ST and Intestine dry heat pattern of Yang Ming organ syndrome
 - Da Huang
 - Mang Xiao
 - Gan Cao

Purging with warm energy herbs 溫下 (2)

- Wen Pi Tang Warm the Spleen Decoction 溫脾湯

- Warms and Tonifies
Spleen Yang, Purges
Cold Accumulation
 - Da Huang
 - Ren Shen
 - Gan Jiang
 - Gan Cao
 - Zhi Fu Zi
- Da Huang Fu Zi Tang Rhubarb
and Prepared Aconite
Decoction 大黃附子湯
 - Warms the Interior,
Disperses Cold,
Unblocks the bowels,
Alleviates pain
 - Da Huang
 - Zhi Fu Zi
 - Xi Xin

Purging with moistening/ lubricating herbs 潤下 (2)

- Ma Zi Ren Wan Hemp Seed
Pill 麻子仁丸
 - ST Heat binding SP
 - Huo Ma Ren
 - Xing Ren
 - Bai Shao
 - Zhi Shi
 - Hou Po
 - Da Huang
 - Feng Mi
- Ji Chuan Jian Benefit the River
(Flow) Decoction 濟川煎
 - KD Yang Deficient
Constipation
 - Rou Cong Rong
 - Dang Gui
 - Niu Xi
 - Ze Xie
 - Zhi Ke
 - Sheng Ma

Formulas for harmonizing (He Jie Ji 和解劑) (6)

Harmonizing Shao yang 和解少陽 (2)

- Xiao Chai Hu Tang Minor
Bupleurum Decoction 小柴胡湯
 - Xiao Yang Syndrome
 - Chai Hu
 - Huang Qin
 - Ban Xia
 - Sheng Jiang
 - Ren Shen
 - Zhi Gan Cao
 - Da Zao
- Hao Qin Qing Dan Tang
Artemisia Annua and
Scutellaria Decoction to Clear
 - Damp-Heat and turbid
Phlegm in Shao Yang
channels
 - Qing Hao
 - Huang Qin
 - Zhu Ru
 - Zhi Ke
 - Chen Pi
 - Ban Xia
 - Chi Fu Ling
 - Hua Shi
 - Gan Cao
 - Qing Dai

Harmonizing Liver and Spleen 和解 肝脾 (3)

- Si Ni San Minor Bupleurum
Decoction 四逆散
 - Rebellious LV Qi
disturbing ST and
Constrained LV qi with
cold extremities
 - Chai Hu
 - Zhi Shi
 - Bai Shao
 - Zhi Gan Cao
 - Chai Hu
 - Dang Gui
 - Bai Shao

- Bai Zhu
- Fu Ling
- Zhi Gan Cao
- Wei Jiang
- Bo He

- Xiao Yao san Rambling powder 逍遙散
 - LV overacting on SP with mild blood deficiency
 - Chai Hu
 - Dang Gui
 - Bai Shao
 - Bai Zhu
 - Fu Ling
 - Zhi Gan Cao
 - Wei Jiang
 - Bo He
- Tong Xie Yao Fang Important Formula for Painful Diarrhea 痛瀉要方
 - SP deficiency with an over-controlling LV and painful diarrhea
 - Chao Bai Zhu
 - Chao Bai Shao
 - Chen Pi
 - Fang Feng

Harmonizing Stomach and Spleen 和解脾胃 (1)

- Ban Xia Xie Xin Tang Pinellia Decoction to Drain the Epigastrium 半夏瀉心湯
 - Heat and Cold disharmony in MJ, Form of internal clumping (SP and ST disharmony)
 - Ban Xia
 - Gan Jiang
 - Huang Qin
 - Huang Lian
 - Ren Shen
 - Da Zao

- Zhi Gan Cao

Formulas for clearing heat (Qing Re Ji 清熱劑) (25)

4-1 Clear the heat in Qi portion/level 清氣分熱 (2)

- Bai Hu Tang White Tiger Decoction 白虎湯
 - Yang Ming Jing/Qi Level Heat
 - Shi Gao
 - Zhi Mu
 - Zhi Gan Cao
 - Geng Mi
- Zhu Ye Shi Gao Tang Lophatherus and Gypsum Decoction 竹葉石膏湯
 - Qi-level Heat lingering in LU and ST (more damage to yin)
 - Dan Zhu Ye
 - Shi Gao
 - Ren Shen
 - Mai Men Dong
 - Ban Xia
 - Zhi Gan Cao
 - Geng Mi

4-2 Clear heat in the ying & blood portion/level 清血分熱 (2)

- Qing Ying Tang Clear the Nutritive Level Decoction 清營湯
 - Clear heat from blood level
 - Xi Jiao
 - Xuan Shen
 - Sheng Di Huang
 - Mai Men Dong
 - Jin Yin Hua
 - Lian Qiao
 - Huang Lian
 - Dan Zhu Ye

- Dan Shen

- Xi Jiao Di Huang Tang
Rhinoceros Horn and
Rehmannia Decoction 犀角地
黃湯

- Clear heat from the
blood level
 - Xi Jiao
 - Sheng Di Huang
 - Chi Shao
 - Mu Dan Pi

4-3 Clear the heat and detoxify 清熱 解毒 (3)

- Liang Ge San Cool the
Diaphragm Powder 涼膈散
- Huang Lian Jie Du Tang Coptis
Decoction to Relieve Toxicity
黃連解毒湯

- Toxic-Heat obstructing
all three burners
 - Huang Lian
 - Huang Qin
 - Huang Bai
 - Zhi Zi

- Pu Ji Xiao Du Yin Benefit
Decoction to Eliminate Toxin 普
濟消毒飲

- Epidemic toxin with
Wind-Heat and Damp-
Phlegm
 - Chao Huang Qin
 - Chao Huang Lian
 - Niu Bang Zi
 - Lian Qiao
 - Bo He
 - Jiang Can
 - Xuan Shen
 - Ma Bo
 - Ban Lan Gen
 - Jie Geng
 - Gan Cao
 - Chen Pi

- Chai Hu
- Sheng Ma

4-4 Clear heat in both the Qi and blood 氣血兩清 (1)

- Qing Wen Bai Du San 清瘟敗毒
散

- Severe Fire in the Qi
and Blood levels
 - Shi Gao
 - Zhi Mu
 - Gan Cao
 - Dan Zhu Ye
 - Xi Jiao
 - Sheng Di Huang
 - Mu Dan Pi
 - Chi Shao
 - Xuan Shen
 - Huang Lian
 - Huang Qin
 - Zhi Zi
 - Lian Qiao
 - Jie Geng

4-5 Clear heat in the Zang-fu (organ network) 清臟腑熱 (9) 清瘟敗毒散

- Long Dan Xie Gan Tang
Gentiana Long Gan Cao
Decoction to Drain the Liver 龍
膽瀉肝湯

- Excess heat in the LV
and GB channels
 - Long Dan Cao
 - Huang Qin
 - Zhi Zi
 - Chai Hu
 - Mu Tong
 - Che Qian Zi
 - Ze Xie
 - Sheng Di Huang
 - Dang Gui
 - Gan Cao

- Zuo Jin Wan Left Metal pill 左金
丸

- LV and ST disharmony from Heat in LV
 - Huang Lian
 - Wu Zhu Yu
 - Yu Nu Jian Jade Woman Decoction 玉女煎
 - ST Heat with Yin deficiency
 - Shi Gao
 - Shu Di Huang
 - Zhi Mu
 - Mai Men Dong
 - Niu Xi
 - Ting Li Da Zao Xie Fei Tang Descurainia and Jujube Decoction 葶藶大棗瀉肺湯
 - Shao Yao Tang Peony Decoction 芍藥湯
 - Damp-Heat lodging in the Intestines (lower burner)/early stage
 - Bai Shao
 - Dang Gui
 - Gan Cao
 - Mu Xiang
 - Bing Lang
 - Huang Lian
 - Huang Qin
 - Da Huang
 - Rou Gui
 - Dao Chi San Guide Out the Red powder 導赤散
 - Heat in HT and SI
 - Sheng Di Huang
 - Mu Tong
 - Dan Zhu Ye
 - Gan Cao Shao
 - Xie Bai San Drain the White powder 瀉白散
 - Smoldering Fire due to constrained heat in LU
 - Chao Sang Bai Pi
 - Di Gu Pi
 - Zhi Gan Cao
 - Geng Mi
 - Qing Wei San Clear the Stomach powder 清胃散
 - Heat accumulation in ST
 - Huang Lian
 - Sheng Ma
 - Mu Dan Pi
 - Sheng Di Huang
 - Dan Gui
 - Bai Tou Weng Tang Pulsatilla Decoction 白頭翁湯
 - Dysenteric disorder from searing ST and Intestines
 - Bai Tou Weng
 - Huang Lian
 - Huang Bai
 - Qin Pi
- ### 4-6 Clear the deficient heat 清虛
- Qing Hao Bie Jia Tang Artemisia Annua and Soft-Shelled Turtle Shell Decoction 青蒿鱉甲湯
 - Heat smoldering in the yin regions of the body
 - Bie Jia
 - Qing Hao
 - Sheng Di Huang
 - Zhi Mu
 - Mu Dan Pi
 - Qin Jiao Bie Jia San Gentiana Qin Jiao and Soft-Shelled Turtle Shell Powder 秦艽鱉甲散

- enriches Yin, nourishes blood, clears Heat, relieve steaming bone
 - Chai Hu (radix bupleuri)...30g
 - Zhi Bie Jia (honey fried carapax amydae sinensis)...30g
 - Di Gu Pi (cortex lycii radices)...30g
 - Qin Jiao (radix gentianae qin jiao)...15g
 - Dang Gui (radix angelicae sinensis)...15g
 - Zhi Mu (radix anemarrhenae asphodeloidis)...15g
 - *taken in powder form as a draft with a small handful of Qing Hao and one piece of Wu Mei.

 - Qing Gu San Cool the Bones Powder 清骨散
 - LV and KD Yin deficiency leading to steaming bone disorder
 - Yin Chai Hu
 - Zhi Mu
 - Hu Huang Lian
 - Di Gu Pi
 - Qing Hao
 - Qin Jiao
 - Zhi Bie Jia
 - Gan Cao

 - Dang Gui Liu Huang Tang Tangkuei and Six-yellow Decoction 當歸六黃湯
 - Nourishes Yin, Clears Heat, Stabilizes the Exterior, Stops sweating
 - Dang Gui (radix angelicae sinensis)...15g
 - Sheng Di Huang (radix rehmanniae glutinosae)...15g
 - Shu Di Huang (radix rehmanniae glutinosae conquitae)...15g
 - Huang Lian (rhizoma coptidis)...15g
 - Huang Qin (radix scutellariae)...15g
 - Huang Bai (cortex phellodendri)...15g
 - Huang Qi (radix astragali membranacei)...30g
-
- ### 4-7 Clear the summer-heat 清暑熱
- Liu Yi San Six to One Powder 六一散
 - Summer-Heat with interior Damp
 - Hua Shi
 - Gan Cao

 - Qing Shu Yi Qi Tang Clear Summer-heat and Augment the Qi Decoction 清暑益氣湯
 - Summer-Heat injuring the Qi and fluids
 - Xi Yang Shen
 - Xi Gua Pi
 - Shi Hu
 - Mai Men Dong
 - Lian Geng
 - Dan Zhu Ye

- Zhi Mu
- Huang Lian
- Gan Cao
- Geng Mi

- Xin Jia Xiang Ru Yin Newly Augment Mosla Drink 新加香薷飲
 - Releases Exterior Summer Heat, Releases External Cold, Clears Heat, Resolves Dampness
 - Xiang Ru (herba elsholtziae seu moslae)...6g
 - Bai Bian Dou (semen dolichoris lablab)...9g
 - Hou Po (cortex magnoliae officinalis)...6g
 - Jin Yin Hua (flos lonicerae japonicae)...9g
 - Lian Qiao (fructus forsythiae suspensae)...6g

- Qing Luo Yin Clear the Collaterals Decoction 清絡飲
 - Mild Summer-Heat injuring the Qi level of LU channel
 - Xian Jin Yin Hua
 - Xian Bian Dou
 - Hua
 - Xi Gua Shuang
 - Si Gua Pi
 - Xian He Ye
 - Xian Dan Zhu Ye

Formulas for warming interior 溫裏劑 (8)

5-1 Warm up interior and expel cold 溫中祛寒 (4)

- Li Zhong Wan Regulate the Middle Pill 理中丸
 - Middle burner Cold from deficiency
 - Gan Jiang
 - Ren Shen
 - Bai Zhu
 - Zhi Gan Cao

- Xiao Jian Zhong Tang Minor Construct the Middle Decoction 小建中湯
 - Consumptive deficiency
 - Vi Tang
 - Gui Zhi
 - Bai Shao
 - Zhi Gan Cao
 - Sheng Jiang
 - Da Zao

- Wu Zhu Yu Tang Evodia Decoction 吳茱萸湯
 - Middle burner Cold from deficiency with LV involvement
 - Wu Zhu Yu
 - Sheng Jiang
 - Ren Shen
 - Da Zao

- Da Jian Zhong Tang Major Construct the Middle Decoction
 - Cold from deficiency with internal Cold accumulation
 - Chuan Jiao
 - Gan Jiang
 - Ren Shen
 - Yi Tang

5-2 Restore yang and save critical (reverse counterflow) 回陽救逆 (2)

- Si Ni Tang Frigid Extremities Decoction 四逆湯
 - KD Yang deficiency with internal cold
 - Sheng Fu Zi

- Gan Jiang
- Zhi Gan Cao
- Hui Yang Jiu Ji Tang Restore and Revive the Yang Decoction from Revised Popular Guide 回陽救急湯
 -

5-3 Warm up channels and disperse cold 溫經散寒 (2)

- Dang Gui Si Ni Tang Tangkuei Decoction for Frigid Extremities 當歸四逆湯
 - Blood deficiency with Cold in the channels
 - Dan Gui
 - Bai Shao
 - Gui Zhi
 - Xi Xin
 - Zhi Gan Cao
 - Da Zao
 - Mu Tong
- Huang Qi Gui Zhi Wu Wu Tang Astragalus and Cinnamon Twig Five-Substance Decoction 黃耆桂枝五物湯
 - Tonifies *Qi* and Blood, Warms and harmonizes the channels and collaterals, Harmonizes the *Ying* and *Wei*, Unblocks painful obstruction, Warms the Middle *Jiao*, Dispels Cold, Alleviates pain, Harmonizes *Yin* and *Yang*
 - Huang Qi (radix astragali membranacei)...12g
 - Bai Shao Yao (radix paeoniae)...9g

- Gui Zhi (ramulus cinnamomi cassiae)...9g
- Sheng Jiang (rhizoma zingiberis officinalis recens)...12g
- Da Zao (fructus jujubae)...12 pieces

Formulas for relieving interior-exterior 表裏雙解劑 (4)

- Da Chai Hu Tang Major Bupleurum Decoction 大柴胡湯
 - Concurrent Shao Yang and Yang Ming Fu disorders
 - Chai Hu
 - Huang Qin
 - Zhi Shi
 - Da Huang
 - Bai Shao
 - Ban Xia
 - Sheng Jiang
 - Da Zao
- Fang Feng Tong Sheng San Ledebouriella Powder that Sagely Unblocks 防風通聖散
 - Heat excess in both the exterior and interior
 - Fang Feng
 - Ma Huang
 - Jiu Da Huang
 - Mang Xiao
 - Jing Jie
 - Bo He
 - Zhi Zi
 - Hua Shi
 - Shi Gao
 - Lian Qiao
 - Huang Qin
 - Jie Geng
 - Chuan Xiong

- Dang Gui
 - Bai Shao
 - Bai Zhu
 - Gan Cao
 - Sheng Jiang
- Ge Gen Huang Qin Huang Lian Tang Kudzu, Scutellaria and Coptis Decoction 防風通聖散
 - Incompletely resolved exterior with interior excess Heat
 - Ge Gen
 - Huang Lian
 - Huang Qin
 - Zhi Gan Cao
- Wu Ji San Five Accumulation Powder 五積散
 - Cold excess in both the exterior and interior
 - Ma Huang
 - Bai Zhi
 - Gan Jiang
 - Rou Gui
 - Cang Zhu
 - Hou Po
 - Chen Pi
 - Ban Xia
 - Fu Ling
 - Jie Geng
 - Zhi Ke
 - Dang Gui
 - Bai Shao
 - Chuan Xiong
 - Zhi Gan Cao
- Shen Ling Bai Zhu San Ginseng, Poria, and Atractylodes Macrocephala Powder 參苓白朮散
 - SP Qi deficiency with internally-generated Damp
 - Ren Shen
 - Bai Zhu
 - Fu Ling
 - Zhi Gan Cao
 - Shan Yao
 - Yi Yi Ren
 - Bai Bian Dou
 - Lian Zi
 - Sha Ren
 - Jie Geng
- Bu Zhong Yi Qi Tang Tonify the Middle and Augment the Qi Decoction 補中益氣湯
 - Sinking of Yang due to SP and ST deficiency
 - Huang Qi
 - Ren Shen
 - Bai Zhu
 - Zhi Gan Cao
 - Dang Gui
 - Chen Pi
 - Sheng Ma
 - Chai Hu
- Sheng Mai San Generate the Pulse powder 生脈散
 - Simultaneous LU Qi and Yin deficiency
 - Ren Shen
 - Mai Men Dong
 - Wu Wei Zi

Formulas for tonifying 補益劑 (18)

7-1 Qi tonic 補氣 (4)

- Si Jun Zi Tang Four Gentleman Decoction 四君子湯
 - SP Qi Def
 - Ren Shen

7-2 Blood tonic 補血 (4)

- Si Wu Tang Four-Substance Decoction 四物湯

- Tonify Blood (of LV)
 - Shu Di Huang
 - Bai Shao
 - Dang Gui
 - Chuan Xiong

- Dang Gui Bu Xue Tang Tangkuei Decoction to Tonify the Blood 當歸補血湯

- LV Blood deficiency with stasis and SP deficiency
 - Dang Gui
 - Bai Shao
 - Chuan Xiong
 - Fu Ling
 - Bai Zhu
 - Ze Xie

- Gui Pi Tang Restore the Spleen Decoction 歸脾湯

- SP Qi and HT Blood deficiency
 - Ren Shen
 - Huang Qi
 - Bai Zhu
 - Zhi Gan Cao
 - Dang Gui
 - Long Yan Rou
 - Suan Zao Ren
 - Zhi Yuan Zhi
 - Fu Ling
 - Mu Xiang
 - Sheng Jiang
 - Da Zao

- Zhi Gan Cao Tang Honey-Fried Licorice Decoction 炙甘草湯

- Consumptive disorders with Qi and blood deficiency
 - Zhi Gan Cao
 - Ren Shen
 - Da Zao
 - Gui Zhi

- Sheng Jiang
- Sheng Di Huang
- E Jiao
- Mai Men Dong
- Huo Ma Ren

7-3 Both Qi and blood tonic 氣血雙補 (3)

- Ba Zhen Tang Eight Treasure Decoction 八珍湯

- Qi and blood deficiency
 - Ren Shen
 - Bai Zhu
 - Fu Ling
 - Zhi Gan Cao
 - Shu Di Huang
 - Bai Shao
 - Dang Gui
 - Chuan Xiong
 - Sheng Jiang
 - Da Zao

- Shi Quan Da Bu Tang All-Inclusive Great Tonifying Decoction 十全大補湯

- Qi and Blood deficiency with mild cold
 - Ren Shen
 - Bai Zhu
 - Fu Ling
 - Zhi Gan Cao
 - Shu Di Huang
 - Bai Shao
 - Dang Gui
 - Chuan Xiong
 - Rou Gui
 - Huang Qi
 - Sheng Jiang
 - Da Zao

- Ren Shen Yang Rong (Ying) Tang Ginseng Decoction to Nourish the Nutritive Qi 人參養榮(營)湯

- Tonifies Qi, Nourishes the Blood, Strengthens the Spleen and Lungs, Nourishes the Heart, Calms the Shen
 - Ren Shen
 - Huang Qi
 - Bai Zhu
 - Fu Ling
 - Dang Gui
 - Shu Di
 - Bai Shao
 - Chen Pi
 - Yuan Zhi
 - Wu Wei Zi
 - Da Zao
 - Rou Gui
 - Sheng Jiang
 - Gan Cao

7-4 Yin tonic 補陰 (4)

- Liu Wei Di Huang Wan Six-Ingredient Pill with Rehmannia 六味地黃丸
 - KD and LV Yin Deficiency
 - Shu Di Huang
 - Shan Zhu Yu
 - Shan Yao
 - Fu Ling
 - Mu Dan Pi
 - Ze Xie
- Da Bu Yin Wan Great Tonify the Yin Pill 大補陰丸
 - Upward-rising of fire from KD and LV deficiency
 - Shu Di Huang
 - Su Jiu Gui Ban
 - Chao Huang Bai
 - Jiu Chao Zhi Mu
- Yi Guan Jian Linking Decoction 一貫煎

- LV and KD Yin deficiency with LV qi constraint
 - Sheng Di Huang
 - Gou Qi Zi
 - Sha Shen
 - Mai Men Dong
 - Dang Gui
 - Chuan Lian Zi

- Zuo Gui Wan Restore the Left (Kidney) Pill 左歸丸
 - KD Yin deficiency with injury to the essence and marrow
 - Shu Di Huang
 - Shan Zhu Yu
 - Gou Qi Zi
 - Shan Yao
 - Fu Ling
 - Zhi Gan Cao

7-5 Yang tonic 補陽 (3)

- Jin Kui Shen Qi Wan Kidney Qi Pill 金匱腎氣丸
 - KD Yang Deficiency
 - Shu Di Huang
 - Shan Zhu Yu
 - Shan Yao
 - Fu Zi
 - Gui Zhi
 - Fu Ling
 - Mu Dan Pi
 - Ze Xie
- Ji Sheng Shen Qi Wan Kidney Qi Pill from Formulas to Aid the Living 濟生腎氣丸
 - Warms Yang, Tonifies the Kidney, Aids water transformation, Promotes urination, Reduces edema
 - Jin Kui Shen Qi Wan
 - + Niu Xi

- + Che Qian Zi
- You Gui Wan Restore the Right (Kidney) Pill 右歸丸
 - KD Yang deficiency with waning of Mingmen-fire
 - Fu Zi
 - Rou Gui
 - Lu Jiao Jiao
 - Shu Di Huang
 - Shan Zhu Yu
 - Shan Yao
 - Gou Qi Zi
 - Tu Si Zi
 - Du Zhong
 - Dang Gui

Formulas for tranquilization 安劑 (6)

8-1 Tranquilizing the mind with heavy and compressing 重鎮安神 (2)

- Zhu Sha An Shen Wan Cinnabar Pill to Calm the Spirit 硃砂安神丸
 - Vigorous HT Fire injuring Yin and Blood
 - Zhu Sha
 - Huang Lian
 - Dang Gui
 - Sheng Di Huang
 - Zhi Gan Cao
- Ci Zhu Wan Magnetite and Cinnabar Pill 磁硃丸
 - Imbalance between KD Water and HT Fire
 - Ci Shi
 - Zhu Sha
 - Shen Qu

8-2 Tranquilizing the mind with nourishing 滋養安神 (4)

- Suan Zao Ren Tang Sour Jujube Decoction 酸棗仁湯

- Consumption from deficient LV Blood
 - Suan Zao Ren
 - Chuan Xiong
 - Fu Ling
 - Zhi Mu
 - Gan Cao
- Tian Wang Bu Xin Dan Emperor of Heaven's Special Pill to Tonify the Heart 天王補心丹
 - Yin Deficiency of HT and KD
 - Sheng Di Huang
 - Dan Shen
 - Dang Gui
 - Bai Zi Ren
 - Yuan Zhi
 - Ren Shen
 - Fu Ling
 - Tian Men Dong
 - Mai Men Dong
 - Xuan Shen
 - Wu Wei Zi
 - Suan Zao Ren
 - Jie Geng
 - Zhu Sha
 - Long Yan Rou
- Bai Zi Yang Xin Wan Biota Seed Pill to Nourish the Heart 柏子養心丸
 - nourishes Heart, calm spirit, tonifies Kidney Yin
 - Bai Zi Ren (semen biotae orientalis)...120g
 - Gou Qi Zi (fructus lycii)...90g
 - Mai Men Dong (tuber ophiopogonis japonici)...30g

- Dang Gui (radix angelicae sinensis)...30g
- Shi Chang Pu (rhizoma aconitum gramineum)...30g
- Fu Shen (sclerotium poria cocos paradicis)...30g
- Xuan Shen (radix acrophulariae ningpoensis)...60g
- Shu Di Huang (radix rehmanniae glutinosae conchatae)...60g
- Gan Cao (radix glycyrrhizae uralensis)...15g
- Gan Mai Da Zao Tang Licorice Wheat and Jujube Decoction 甘麥大棗湯
 - Deficiency of Qi and Yin of HT and SP
 - Fu Xiao Mai
 - Gan Cao
 - Da Zao
- Rou Dou Kou
- Wu Zhu Yu
- Wu Wei Zi
- Sheng Jiang
- Da Zao
- Mu Li San Oyster Shell Powder 牡蠣散
 - Unstable protective Qi with injury to HT Yin
 - Mu Li
 - Huang Qi
 - Ma Huang Gen
 - Fu Xiao Mai
- Jin Suo Gu Jing Wan Metal Lock pill to Stabilize the Essence 金鎖固精丸
 - KD Deficiency not securing Jing
 - Sha Yuan Ji Li
 - Lian Zi
 - Qian Shi
 - Su Zhi Long Gu
 - Duan Mu Li
 - Lian Xu
- Zhen Ren Yang Zang Tang True Man's Decoction to Nourish the Organs 真人養臟湯
 - SP and KD Yang deficiency
 - Ren Shen
 - Bai Zhu
 - Rou Gui
 - Rou Dou Kou
 - He Zi
 - Zhi Ying Su Ke
 - Bai Shao
 - Dang Gui
 - Mu Xiang
 - Zhi Gan Cao
- Sang Piao Xiao San Mantis Egg-Case powder 桑螵蛸散

Formulas for astringing 固澀劑

(6)

- Yu Ping Feng San Jade Windscreen powder 玉屏風散
 - Deficiency of Wei Qi
 - Huang Qi
 - Bai Zhu
 - Fang Feng
- Si Shen Wan Four-Miracle Pill 四神丸
 - Cold from deficiency of SP and KD
 - Bu Gu Zhi

- Qi deficiency of KD and HT
 - Sang Piao Xiao
 - Long Gu
 - Ren Shen
 - Fu Shen
 - Yuan Zhi
 - Chang Pu
 - Zhi Gui Ban
 - Dang Gui

- Zhi Shi
- Gui Zhi
- Gua Lou

- Hou Po Wen Zhong Tang
Magnolia Bark Decoction for
Warming the Middle 厚朴溫中湯

- Damp-Cold injuring SP and ST
 - Hou Po
 - Cao Dou Kou
 - Chen Pi
 - Mu Xiang
 - Gan Jiang
 - Sheng Jiang
 - Fu Ling
 - Zhi Gan Cao

Formulas for regulating Qi 理氣劑 (10)

10-1 Improving Qi circulation 行氣 (5)

- Yue Ju Wan Escape Restraint Pill 越鞠丸
 - Mildly constrained Qi
 - Xiang Fu
 - Chuan Xiong
 - Cang Zhu
 - Shan Zhi Zi
 - Shen Qu
- Ban Xia Hou Po Tang Pinellia and Magnolia Bark Decoction 半夏厚朴湯
 - Constrained Qi with concurrent Phlegm
 - Ban Xia
 - Hou Po
 - Fu Ling
 - Sheng Jiang
 - Zi Su Ye
- Zhi Shi Xie Bai Gui Zhi Tang Unripe Bitter Orange, Chinese Garlic, and Cinnamon Twig Decoction 枳實薤白桂枝湯
 - severe stabbing painful obstruction of the chest, Cold Phlegm Chest Bi
 - Hou Po
 - Xie Bai

- Tian Tai Wu Yao San Top-Quality Lindera Powder 天台烏藥散

- Cold invading LV channel and causing Qi stagnation
 - Wu Vao
 - Xiao Hui Xiang
 - Gao Liang Jiang
 - Qing Pi
 - Mu Xiang
 - Bing Lang
 - Jin Li ng Zi
 - Ba Dou

10-2 Bring Qi downward 降氣 (5)

- Su Zi Jiang Qi Tang Perilla Fruit Decoction for Directing Qi Downward 蘇子降氣湯
 - Congested fluids with KD deficiency
 - Ban Xia
 - Hou Po
 - Chen Pi
 - Qian Hu
 - Rou Gui

- Dang Gui
 - Sheng Jiang
 - Su Ye
 - Da Zao
 - Zhi Gan Cao
- Ding Chuan Tang Arrest Wheezing Decoction 定喘湯
 - Wind-Cold in exterior and Phlegm-Heat in the interior
 - Ma Huang
 - Yin Xing
 - Xing Ren
 - Su Zi
 - Ban Xia
 - Kuan Dong Hua
 - Sang Bai Pi
 - Huang Qin
 - Gan Cao
- Xuan Fu Dai Zhe Tang Inola and Hematite Decoction 旋覆代赭湯
 - SP and ST deficiency with Phlegm in the interior
 - Xuan Fu Hua
 - Dai Zhe Shi
 - Ban Xia
 - Sheng Jiang
 - Ren Shen
 - Zhi Gan Cao
 - Da Zao
- Ju Pi Zhu Ru Tang Tangerine Peel and Bamboo Shavings Decoction 橘皮竹茹湯
 - ST deficiency with Heat
 - Chen Pi
 - Zhu Ru
 - Ren Shen
 - Sheng Jiang
 - Gan Cao
 - Da Zao

- Ding Xiang Shi Di Tang Clove and Persimmon Calyx Decoction 丁香柿蒂湯
 - Cold from deficiency of ST
 - Ding Xiang
 - Shi Di
 - Sheng Jiang
 - Ren Shen

Formulas for regulating blood **理血劑 (12)**

11-1 Improve blood circulation and remove blood stagnation 活血祛瘀 (7)

- Tao He Cheng Qi Tang Peach Pit Decoction to Order the Qi 桃核承氣湯
 - Blood stasis and Heat in the lower burner
 - Tao Ren
 - Da Huang
 - Gui Zhi
 - Mang Xiao
 - Zhi Gan Cao
- Xue Fu Zhu Yu Tang Drive Out Stasis in the Mansion of Blood Decoction 血府逐瘀湯
 - Blood stasis in the chest and constrained LV Qi
 - Tao Ren
 - Hong Hua
 - Chuan Xiong
 - Dang Gui
 - Chi Shao
 - Chuan Niu Xi
 - Sheng Di Huang
 - Chai Hu
 - Jie Geng
 - Zhi Ke
 - Gan Cao

- Fu Yuan Huo Xue Tang Revive health by Invigorate the blood Decoction 復元活血湯
 - Blood stasis and Qi stagnation
 - Dan Gui
 - Tao Ren
 - Hong Hua
 - Chuan Shan Zha
 - Jiu Zhi Da Huang
 - Tian Hua Fen
 - Chai Hu
 - Gan Cao
- Bu Yang Huan Wu Tang Tonify the Yang to Restore Five (Tenths) Decoction 補陽還五湯
 - Blood stasis with normal Qi and yang Qi deficiency
 - Huang Qi
 - Dang Gui Wei
 - Chuan Xiong
 - Chi Shao
 - Tao Ren
 - Hong Hua
 - Di Long
- Sheng Hua Tang Generating and Transforming Decoction 生化湯
 - Blood stasis in the womb due to Cold entering the abdomen in postpartum
 - Dang Gui
 - Chuan Xiong
 - Tao Ren
 - Pao Jiang
 - Zhi Gan Cao
- Gui Zhi Fu Ling Wan Cinnamon and Poria Pills 桂枝茯苓丸
 - Blood stasis in the womb during pregnancy
 - Gui Zhi
 - Fu Ling

- Shao Yao
- Mu Dan Pi
- Tao Ren
- Feng Mi

- Shi Xiao San Sudden Smile Powder 失笑散
 - Blood stasis in the lower abdomen
 - Wu Ling Zhi
 - Pu Huang

11-2 Stop bleeding 止血 (5)

- Xiao Ji Yin Zi Small Thistle Drink 小薊飲子
 - Aggregation of static Heat in the lower burner
 - Xiao Ji
 - Ou lie
 - Chao Pu Huang
 - Sheng Di Huang
 - Hua Shi
 - Mu Tong
 - Dan Zhu Ye
 - Zhi Zi
 - Dang Gui
 - Zhi Gan Cao
- Shi Hui San Ten Partially-Charred Substances Powder 十灰散
 - LV Fire attacking ST
 - Da Ji
 - Xiao Ji
 - He Ye
 - Ce Bai Ye
 - Bai Mao Gen
 - Qian Cao Gen
 - Zong Lu Pi
 - Zhi Zi
 - Da Huang
 - Mu Dan Pi
- Ke Xue Fang Coughing of Blood Formula 咳血方
 - LV Fire scorching LU

- Huai Hua Mi
 - Ce Bai Ye
 - Jing Jie Sui
 - Zhi Ke
- Huang Tu Tang Yellow Earth Decoction 黃土湯
 - SP Yang deficiency
 - Zao Xin Tu
 - Bai Zhu
 - Fu Zi
 - Sheng Di Huang
 - E Jiao
 - Huang Qin
 - Gan Cao
- Huai Hua San Sophora Japonica Flower Powder 槐花散
 - Intestinal Wind from Wind-Heat toxin or Damp-Heat toxin
 - Huai Hua Mi
 - Ce Bai Ye
 - Jing Jie Sui
 - Zhi Ke
- Shi Gao
- Zhi Mu
- Sheng Di Huang
- Dang Gui
- Hei Zhi Ma
- Gan Cao
- Chuan Xiong Cha Tiao San Ligusticum Chuanxiong Powder to Be Taken with Green Tea 川芎茶調散
 - disperse Wind (cold or Heat) & relieve pain, take with green tea
 - Bo He (herba menthae haplocalycis)...240g
 - Chuan Xiong (radix ligustici chuanxiong)...120g
 - Bai Zhi (radix angelicae dahuricae)...60g
 - Qiang Huo (radix & rhizoma notopterygii)...60g
 - Xi Xin (herba cum radice asari)...30g
 - Jing Jie (herba seu flos schizonepetae tenuifoliae)...120g
 - Fang Feng (radix ledebouriellae divaricatae)...45g
 - Gan Cao (radix glycyrrhizae uralensis)...60g
 - *To be taken with green tea.

Formulas for treating wind related diseases 治風劑 (10)

12-1 Expel external wind 疏散外風 (5)

- Xiao Feng San Eliminate Wind Powder 消風散
 - Wind-Damp-Heat invading the body, contending with pre-existing Damp-Heat
 - Jing Jie
 - Fang Feng
 - Niu Ban Zi
 - Chan Tui
 - Cang Zhu
 - Ku Shen
 - Mu Tong

- Cang Er Zi San Xanthium Powder 蒼耳子散
 - expel Wind & relieve nasal congestion
 - Cang Er Zi (fructus xanthii sibirici)...7.5g
 - Xin Yi Hua (flos magnoliae)...15g
 - Bai zhi (radix angelicae dahuricae)...30g
 - Bo He (herba menthae heplocalycis)...1.5g [add near end if decocting]

- Qian Zheng San Lead to Symmetry Powder 牽正散
 - Channel-stroke from Wind-Phlegm with head/face symptoms
 - Bai Fu Zi
 - Jiang Can
 - Quan Xie

- Xiao Huo Luo Dan Minor Invigorate the Channels Special Pill 小活絡丹
 - Sequelae of Wind-stroke when Cold causes Damp, Phlegm, and Blood stasis to obstruct the channels and Collaterals
 - Zhi Cao Wu
 - Zhi Chuan Wu
 - Tian Nan Xing
 - Mo Yao
 - Ru Xiang
 - Di Long

- Ling Jiao Gou Teng Tang Antelope Horn and Uncaria Decoction 羚羊鉤藤湯
 - Heat from excess in LV channel generating internal Wind
 - Ling Yang Jiao
 - Gou Teng
 - Sang Ye
 - Ju Hua
 - Bai Shao
 - Sheng Di Huang
 - Chuan Bei Mu
 - Zhu Ru
 - Fu Shen
 - Gan Cao

- Zhen Gan Xi Feng Tang Sedate the Liver and Extinguish Wind Decoction 鎮肝熄風湯
 - LV /KD Yin deficiency with ascendant Liver Yang generating Wind
 - Huai Niu Xi
 - Zhe Shi
 - Long Gu
 - Mu Li
 - Gui Ban
 - Xuan Shen
 - Tian Men Dong
 - Bai Shao
 - Yin Chen Hao
 - Chuan Lian Zi
 - Mai Ya
 - Gan Cao

- Tian Ma Gou Teng Yin Gastrodia and Uncaria Decoction 天麻鉤藤飲
 - Ascendant LV Yang and internal movement of LV Wind
 - Tian Ma
 - Gou Teng
 - Shi Jue Ming

12-2 Extinguish internal wind 平熄內風 (5)

- Zhi Zi
- Huang Qin
- Vi Mu Cao
- Chuan Niu Xi
- Du Zhong
- Sa ng Ji Sheng
- Ye Jiao Teng
- Fu Shen

- Da Ding Feng Zhu Major Arrest
Wind Pearl 大定風珠
 - Severe injury to the Yin and fluids which causes internal Wind
 - Ji Zi Huang
 - E Jiao
 - Bai Shao
 - Zhi Gan Cao
 - Wu Wei Zi
 - Sheng Di Huang
 - Mai Men Dong
 - Huo Ma Ren
 - Gui Ban
 - Bie Jia
 - Mu Li

- Di Huang Yin Zi Rehmannia
Drink 地黃飲子
 - Waning of KD Yin and Yang, upward-flaring of Fire from deficiency, and turbid Phlegm that blocks the orifices
 - Shu Di Huang
 - Shan Zhu Yu
 - Rou Cong Rong
 - Bai Ji Tian
 - Fu Zi
 - Rou Gui
 - Shi Hu
 - Mai Men Dong
 - Shi Chang Pu
 - Yuan Zhi
 - Fu Ling
 - Wu Wei Zi

Formulas for treating dryness diseases 治燥劑 (8)

- Qing Zao Jiu Fei Tang
Eliminate Dryness and Rescue the Lung Decoction 清燥救肺湯
 - Dryness attacking LU
 - Sang Ye
 - Shi Gao
 - Mai Men Dong
 - E Jiao
 - Hei Zhi Ma
 - Xing Ren
 - Mi Zhi Pi Pa Ye
 - Ren Shen
 - Gan Cao

- Xing Su San Apricot Kernel and Perilla Leaf Powder 杏蘇散
 - Cool-Dryness
 - Xing Ren
 - Zi Su Ye
 - Qian Hu
 - Jie Geng
 - Zhi Ke
 - Chen Pi
 - Fu Ling
 - Ban Xia
 - Sheng Jiang
 - Da Zao
 - Gan Cao

- Sang Xing Tang Mulberry Leaf and Apricot Kernel Decoction 桑杏湯
 - Warm-Dryness
 - Sang Ye
 - Xing Ren
 - Zhi Zi
 - Dan Dou Chi
 - Zhe Bei Mu
 - Sha Shen
 - Li Pi

- Mai Men Dong Tang
Ophiopogonis Decoction 麥門冬湯

- Dry LU atrophy (upper and middle burners)
 - Mai Men Dong
 - Ren Shen
 - Geng Mi
 - Dan Zao
 - Gan Cao
 - Ban Xia
- Bai He Gu Jin Tang Lily Bulb Decoction to Preserve the Metal 百合固金湯
 - Internal dryness of LU (upper burner)
 - Bai He
 - Sheng Di Huang
 - Shu Di Huang
 - Mai Men Dong
 - Xuan Shen
 - Chuan Bei Mu
 - Jie Geng
 - Dan Gui
 - Bai Shao
 - Gan Cao
- Yu Ye Tang Jade Fluid Decoction 玉液湯
 - Wasting and thirsting disorder (lower burner)
 - Shan Yao
 - Huang Qi
 - Zhi Mu
 - Tian Mu Hua Fen
 - Ji Nei Jin
 - Ge Gen
 - Wu Wei Zi
- Zeng Ye Tang Increase the Fluids Decoction 增液湯
 - Dry Intestines (lower burner)
 - Xuan Shen
 - Mai Men Dong
 - Sheng Di Huang

- Yang Yin Qing Fei Tang Nourish the Yin and Clear the Lungs Decoction 養陰清肺湯
 - Diphtherial disorder (upper burner)
 - Sheng Di Huang
 - Xuan Shen
 - Mai Men Dong
 - Chao Bai Shao
 - Mu Dan Pi
 - Bei Mu
 - Bo He
 - Gan Cao

Formulas for eliminating dampness 祛濕劑 (17)

- Ping Wei San Calm the Stomach Powder 平胃散
 - Damp-Cold stagnating in SP and ST
 - Cang Zhu
 - Hou Po
 - Chen Pi
 - Zhi Gan Cao
 - Sheng Jiang
 - Da Zao
- Huo Xiang Zheng Qi San Agastache Powder to Rectify the Qi 藿香正氣散
 - Externally-contracted Wind-Cold with internal turbid Damp
 - Hou Xiang
 - Hou Po
 - Chen Pi
 - Zi Su Ye
 - Bai Zhi
 - Ban Xia
 - Da Fu Pi
 - Bai Zhu
 - Fu Ling
 - Jie Geng
 - Zhi Gan Cao
 - Sheng Jiang
 - Da Zao

- Yin Chen Hao Tang Artemisiae
Yin Chen Hao Decoction 茵陳
蒿湯
 - Damp-Heat jaundice
(middle burner)
 - Yin Chen Hao
 - Zhi Zi
 - Da Huang
- Ba Zheng San Eight Herb
Powder for Rectification 八正散
 - Clumping of Damp-Heat
in the lower burner
 - Mu Tong
 - Hua Shi
 - Che Qian Zi
 - Qu Mai
 - Bian Xu
 - Zhi Zi
 - Zhi Da Huang
 - Deng Xin Cao
 - Gan Cao
- San Ren Tang Three Seed
Decoction 三仁湯
 - Damp-Heat in Wei and
Qi levels with Damp
predominant (upper
burner)
 - Xing Ren
 - Bai Dou Kou
 - Vi Vi Ren
 - Hou Po
 - Ban Xia
 - Tong Cao
 - Dan Zhu Ye
 - Hua Shi
- Gan Lu Xiao Du Dan Sweet
Dew Special Pill to Eliminate
Toxin 甘露消毒丹
 - Damp Warm-febrile
disease or seasonal
epidemic in Qi level
(upper burner)
 - Lian Qiao
 - Huang Qin
 - Bo He
 - She Gan
 - Chuan Bei Mu
 - Hua Shi
 - Mu Tong
 - Yin Chen Hao
 - Hou Xiang
 - Shi Chang Pu
 - Bai Dou Kou
- Er Miao San Two-Marvel
Powder 二妙散
 - Damp-Heat lodging in
the lower burner
 - Huang Bai
 - Cang Zhu
- Wu Ling San Five-Ingredient
Formula with Poria 五苓散
 - Water buildup
 - Ze Xie
 - Fu Ling
 - Zhu Ling
 - Bai Zhu
 - Gui Zhi
- Fang Ji Huang Qi Tang
Stephania and Astragalus
Decoction 防己黃耆湯
 - Wind-edema or Wind-
Damp
 - Huang Qi
 - Han Fang Ji
 - Bai Zhu
 - Zhi Gan Cao
 - Sheng Jiang
 - Da Zao
- Zhu Ling Tang Polyporus
Decoction 豬苓湯
 - Clumping of Water and
Heat
 - Zhu Ling
 - Fu Ling

- Ze Xie
 - Hua Shi
 - E Jiao
- Wu Pi Yin Five Peel Decoction
五皮飲
 - Skin edema
 - Sang Bai Pi
 - Sheng Jiang Pi
 - Fu Ling Pi
 - Chen Pi
 - Da Fu Pi
- Zhen Wu Tang True Warrior
Decoction 真武湯
 - Pathogenic fluids retention with KD Yang deficiency
 - Fu Zi
 - Bai Zhu
 - Fu Ling
 - Sheng Jiang
 - Bai Shao
- Shi Pi Yin Bolster the Spleen
Decoction 實脾飲
 - Yin edema from SP and KD Yang deficiency
 - Fu Zi
 - Gan Jiang
 - Fu Ling
 - Bai Zhu
 - Mu Gua
 - Hou Po
 - Mu Xiang
 - Da Fu Pi
 - Cao Guo
 - Zhi Gan Cao
 - Sheng Jiang
 - Da Zao
- Bei Xie Fen Qing Yin Dioscorea
Hypoglauca Decoction to
Separate the Clear 萆薢分清飲
 - warms Kidney Yang,
remove turbid Damp
- Bei Xie (rhizoma dioscoreae hypoglaucae)...12g
 - Yi Zhi Ren (fructus alpiniae oxyphyllae)...9g
 - Wu Yao (radix linderæ strychnifoliae)...9g
 - Shi Chang Pu (rhizoma acori graminei)...9g
- Ling Gui Zhu Gan Tang Poria, Cinnamon Twig, Atractylodes and Licorice Decoction 苓桂朮甘湯
 - Warms and transforms phlegm fluids, strengthens the SP and clear damp
 - Fu Ling (sclerotium poriae cocos)...12g
 - Gui Zhi (ramulus cinnamomi cassiae)...9g
 - Bai Zhu (rhizoma atracylodis macrocephalae)...6g
 - Zhi Gan Cao (honey fried radix glycyrrhizae uralensis)...6g
- Du Huo Ji Sheng Tang Angelica Pubescentis and Taxillus Decoction 獨活寄生湯
 - Painful obstruction with LV and KD deficiency
 - Du Huo
 - Xi Xin
 - Fang Feng

- Qin Jiao
 - Sang Ji Sheng
 - Du Zhong
 - Niu Xi
 - Rou Gui
 - Dang Gui
 - Chuan Xiong
 - Sheng Di Huang
 - Bai Shao
 - Ren Shen
 - Fu Ling
 - Zhi Gan Cao
- Qiang Huo Sheng Shi Tang
Notopterygium Decoction to
Overcome Dampness 羌活勝濕
湯
 - Wind-Damp in the
exterior and muscle
layer
 - Qiang Huo
 - Du Huo
 - Gao Ben
 - Fang Geng
 - Chuan Xiong
 - Man Jing Zi
 - Zhi Gan Cao
- Wen Dan Tang Warm
Gallbladder Decoction 溫膽湯
 - GB and ST disharmony
with Phlegm-Heat
 - Zhu Ru (caulis
bamhusae in
taeniis)...6g
 - Zhi Shi (fructus
immaturus citri
aurantii)...6g
 - Ban Xia (rhizome
pinelliae
ternatae)...6g
 - Chen Pi
(pericarpium citri
reticulatae)...9g
 - Fu Ling
(sclerotium poriae
cocos)...4.5g
 - Gan Cao (radix
glycyrrhizae
uralensis)...3g
 - Sheng Jiang
(rhizoma
zingiberis
officinalis
recens)...3-6g

Formulas for eliminating phlegm 祛痰劑 (11)

15-1 Dissolve phlegm and drying dampness 燥濕化痰 (2)

- Er Chen Tang Decoction of
Two Aged (Cured) Drugs 二陳
湯
 - Damp and Phlegm due
to SP deficiency
 - Ban Xia
 - Ju Hong
 - Fu Ling
 - Zhi Gan Cao
 - Sheng Jiang
 - Wu Mei

15-2 Dissolve phlegm and clear heat 清熱化痰 (3)

- Qing Qi Hua Tan Wan Clear
the Qi and Transform Phlegm
Pill 清氣化痰湯
 - Internal clumping of
Phlegm-Heat
 - Dan Nan Xing
 - Huang Qin
 - Gua Lou Ren
 - Zhi Shi
 - Chen Pi
 - Fu Ling
 - Ban Xia
 - Xing Ren

- Xiao Xian Xiong Tang Minor Decoction (for Pathogens)
Stuck in the Chest 小陷胸湯

- Clumping in the chest
 - Gua Lou
 - Huang Qin
 - Jiang Ban Xia

- Gun Tan Wan Vaporize Phlegm Pill 滾痰湯

- Drains Fire, Drives out Phlegm
 - (Duan) Meng Shi
 - Da Huang
 - Huang Qin
 - Chen Xiang

15-3 Dissolve phlegm and moisten dryness 潤燥化痰 (1) 滾痰湯

- Bei Mu Gua Lou San Fritillaria and Trichosanthis Fruit Powder 貝母瓜蒌散

- Dry-Phlegm
 - Chuan Bei Mu
 - Gua Lou
 - Tian Hua Fen
 - Fu Ling
 - Ju Hong
 - Jie Geng

15-4 Dissolve cold phlegm with warm herbs 溫化寒痰 (2)

- Ling Gan Wu Wei Jiang Xin Tang Poria, Licorice, Schisandra, Ginger, and Asarum Decoction 苓甘五味薑辛湯

- Congested fluids in the epigastrium
 - Fu Ling
 - Gui Zhi
 - Bai Zhu
 - Zhi Gan Cao

- San Zi Yang Qin Tang Three Seed Decoction to Nourish One's Parents 三子養親湯

- Cold LU with food stagnation
 - Bai lie Zi
 - Su Zi
 - Lai Fu Zi

15-5 Dissolve phlegm and treat wind 治風化痰 (3)

- Ban Xia Bai Zhu Tian Ma Tang Pinellia, Atractylodes Macrocephala and Gastrodia Decoction 半夏白朮天麻湯

- Upward disturbance of Wind-Phlegm
 - Ban Xia
 - Tian Ma
 - Bai Zhu
 - Ju Hong
 - Fu Ling
 - Sheng Jiang
 - Da Zao
 - Gan Cao

- Ding Xian Wan Arrest Seizures Pill 定癇丸

- Phlegm and LV Wind leading to seizure disorder
 - Zhu Li
 - Dan Nan Xing
 - Chuan Bei Mu
 - Jiang Ban Xi a
 - Fu Ling
 - Chen Pi
 - Ginger Juice
 - Tian Ma
 - Quan Xie
 - Jiang Can
 - Mai Men Dong
 - Dan Shen
 - Fu Shen
 - Ju Po
 - Zhu Sha

- Shi Chang Pu
- Yuan Zhi
- Gan Cao
- Zhi Sou San Stop Coughing Powder 止嗽散
 - Wind attacking LU
 - Zi Wan
 - Bai Qian
 - Bai Bu
 - Jie Geng
 - Chen Pi
 - Jing Jie
 - Gan Cao

Formulas for improving digestion 消導劑 (7)

- Bao He Wan Preserve Harmony Pill 保和丸
 - Acute, relatively mild Conditions
 - Shan Zha
 - Shen Qu
 - Lai Fu Zi
 - Ban Xia
 - Chen Pi
 - Fu Ling
 - Lian Qiao
 - Mai Ya
- Jian Pi Wan Strengthen the Spleen Pill 健脾丸
 - Relatively severe SP deficiency and the beginnings of Heat
 - Chao Bai Zhu
 - Fu Ling
 - Ren Shen
 - Shan Yao
 - Rou Dou Kou
 - Shan Zha
 - Chao Shen Qu
 - Chao Mai Ya
 - Mu Xiang

- Chen Pi
- Sha Ren
- Jiu Chao Huang Lian
- Gan Cao
- Zhi Shi Dao Zhi Wan Unripe Bitter Orange Pill to Guide out Stagnation 枳實導滯丸
 - reduces & guides out painful food stagnation, clears Heat & Damp
 - Zhi Shi (fructus immaturus citri aurantii)...15g
 - Da Huang (radix and rhizoma rhei)...30g
 - Shen Qu (massa fermentata)...15g
 - Fu Ling (sclerotium poriae cocos)...9g
 - Huang Qin (radix scutellariae)...9g
 - Huang Lian (rhizoma coptidis)...9g
 - Bai Zhu (rhizoma atractylodis macrocephalae)...9g
 - Ze Xie (rhizoma alismatis orientalis)...6g
- Mu Xiang Bin Lang Wan Aucklandia and Betel Nut Pill 木香檳榔丸
 - Severe stagnation and accumulation
 - Mu Xiang
 - Bing Lang
 - Da Huang
 - Qian Niu Zi
 - Qing Pi

- Chen Pi
 - Chao Xiang Fu
 - E Zhu
 - Huang Lian
 - Huang Bai
 - Sheng Jiang
- Zhi Zhu Wan Unripe Bitter Orange and Atractylodes Pill 枳朮丸
 - SP and ST Deficiency
 - Bai Zhu
 - Zhi Shi
 - He Ye
- Zhi Shi Xiao Pi Wan Unripe Bitter Orange Pill to Reduce Focal Distention 枳實消痞丸
 - Cold-Heat complex due to Qi stagnation and deficient SP Qi
 - Zh i Shi
 - Zhi Hou Po
 - Huang Lian
 - Ban Xia
 - Ren Shen
 - Bai Zhu
 - Fu Li ng
 - M ai Ya
 - Gan Jiang
 - Zhi Gan Cao
- Bie Jia Jian Wan 蟹甲煎丸
 - Activates the Blood, Removes Stasis, Circulates Qi, Resolves Phlegm, Eliminates , accumulations, Softens and resolve hard masses
 - Bie Jia (Carapax Trionycis) 90 g,
 - She Gan (Rhizoma Belamcandae) 22.5 g,
- Huang Qin (Radix Scutellariae) 22.5 g,
- Chao Shu Fu (stir-fried Armadillidium Vulgare) 22.5 g,
- Gan Jiang (Rhizoma Zingiberis) 22.5 g,
- Da Huang (Radix et Rhizoma Rhei) 22.5 g,
- Gui Zhi (Ramulus Cinnamomi) 22.5 g,
- Shi Wei (Folium Pyrrosiae) 22.5 g,
- Hou Po (Cortex Magnoliae Officinalis) 22.5 g,
- Qu Mai (Herba Dianthi) 22.5 g,
- Zi Wei (Radix Campsis) 22.5 g,
- E Jiao (Colla Corii Asini) 22.5 g,
- Chai Hu (Radix Bupleuri) 45 g,
- Chao Qiang Lang (Dung Beetle) 45 g,
- Shao Yao (Radix Paeoniae Alba) 37 g,
- Dan Pi (Cortex Moutan) 37 g,
- Chao Zhe Chong (Stir-fried Eupolyphaga seu Stelephaga) 37 g,
- Zhi Feng Chao (Nedus Vespar Preparata) 30 g,
- Chi Xiao (Natrii Sulfas) 90 g,

- Tao Ren (Semen Persicae) 15 g,
- Ren Shen (Radix Ginseng) 7.5 g,
- Ban Xia (Rhizoma Pinelliae) 7.5 g,
- Ting Li Zi (Semen Lepidii) 7.5 g.

Formulas for parasite diseases 驅蟲劑 (2)

- Wu Mei Wan Mume Pill 烏梅丸
 - Collapse from roundworms
 - Wu Mei
 - Chuan Jiao
 - Xi Xin
 - Huang Lian
 - Huang Bai
 - Gan Jiang
 - Fu Zi
 - Gui Zhi
 - Ren Shen
 - Dan Gui
- Fei Er Wan Fat Baby Pill 肥兒丸
 - Childhood nutritional impairment from parasitic infestation
 - Shi Jun Zi
 - Bing Lang
 - Huang Lian
 - Rou Dou Kou
 - Mu Xiang
 - Chao Mai Ya
 - Chao Shen Qu
 - Pig Gall

Formulas for abscess (yong yang) 癰瘍劑 (7)

- Xian Fang Huo Ming Yin Immortals' Formula for Sustaining Life 仙方活命飲

- Toxic-Heat or Phlegm-Fire
 - Lin Yin Hua
 - Chen Pi
 - Dang Gui
 - Chi Shao
 - Ru Xiang
 - Mo Yao
 - Fang Feng
 - Bai Zhi
 - Zhe Bei Mu
 - Tian Hua Fen
 - Chuan Shan Jia
 - Zao Jiao Ci
 - Gan Cao

- Wu Wei Xiao Du Yin Five Ingredient Decoction to Eliminate Toxin 五味消毒飲
 - Toxic-Heat from externally-contracted Heat
 - Lin Yin Hua
 - Pu Gong Ying
 - Zi Hua Di Ding
 - Ye lu Hua
 - Zi Bei Tian Kuei
- Yang He Tang Balmy Yang Decoction 陽和湯
 - Yin-type localized Swelling
 - Shu Di Huang
 - Lu Jiao Jiao
 - Rou Gui
 - Pao Jiang
 - Bai Jie Zi
 - Ma Huang
 - Gan Cao

- Si Miao Yong An Tang Four-Valiant Decoction for Well Being 四妙勇安湯
 - Toxic-Heat leading to Blood stasis in the

sinews and blood
vessels

- Jin Yin Hua
- Xuan Shen
- Dang Gui
- Gan Cao

- Wei Jing Tang Reed Decoction
葶莖湯

- Lung abscess from
Toxic-Heat obstructing
LU
 - Lu Gen
 - Yi Yi Ren
 - Dong Gua Ren
 - Tao Ren

- Da Huang Mu Dan Pi Tang
Rhubarb and Moutan
Decoction 大黃牡丹皮湯

- Early-stage Intestinal
abscess from interior
clumping of Heat and
Blood (lower burner)

- Da Huang
- Mang Xiao
- Mu Dan Pi
- Tao Ren
- Dong Gua Ren

- Yi Yi Fu Zi Bai Jiang San Coix,
Aconite Accessory Root and
Patrinia Powder 薏苡附子敗醬
散

- expels pus & reduces
swelling, intestinal
abscess without fever
 - Yi Yi Ren (semen
coicis lachryma-
jobi)...24-30g
 - Fu Zi (radix
lateralis aconite
carmichaeli
praeparata)...6-
9g

- Bai Jiang Cao (herba bai jiang
cao)...15-18g

Patient Progress Notes

First Name: Lao

Last Name: Tzu

Date: 00/00/0000

Chief Complaint: Patients CC

Signs & Symptoms: Associated Sx, consider using S.O.A.P (subjective, objective, assessment, plan). You must have enough information to support your Illness or Diagnosis below.

Note: Follow up appointments should generally be concise, not taking longer than 15 minutes. Focus on what may have changed since last session and only change the diagnosis and treatment if there are no results after a significant number of visits (usually at the supervisor's discretion). Always leave space for the patient to bring up new information: "Is there anything else that you would like us to work on this session?"

TCM Illness: TCM Illness listed here

TCM Diagnosis: Differential TCM Diagnosis for the Patient's CC

Treatment Principle: Should match the Diagnosis above as well as the treatment below

Treatment: Including Acupuncture, Tuina, Moxa, Cupping, e-stim, or any other manual therapy provided, lifestyle recommendations, exercises, meditation, or any other discussed course of therapy.

Herbal Medicine: See the separate form for herbal prescription requirements, but the formula, dosage and course of treatment must be recorded here. Students of Herbal Medicine or the TCMP program are required to write a "suggested" formula for each patient even if the patient does not choose to purchase the herbs.

Patient Response: Record any changes after treatment here. Try to use quantifiers such as a scale from 1-10 before and after treatment for pain.

Student Practitioners and rolls: Primary Student Practitioners name(s) and rolls. For example: Jacky Chan: Tuina and Acupuncture Jet Li: Acupuncture and Qigong lesson.

Student Observers: Observing Student Practitioners name(s)

Clinical Supervisor signature: Make sure the supervisor signs off
Date: 00/00/0000

Herbal Prescription Form

The information required on a TCM herbal prescription includes:

- *name, address and contact telephone number of the practitioner*
- *name of the patient (and patient's parent or guardian where required)*
- *date the prescription was written*
- *name of each herb included in the prescription*

“The use of Chinese using Pinyin may be included but should not be used alone since this may result in confusion. The botanical name or Latinate medicinal name should always be provided along with Pinyin.

The use of the botanical name or the Latinate medicinal name is required, but may not be sufficient for all situations. The Chinese characters (traditional or simplified) or Chinese using Pinyin name should always be provided along with botanical name or the Latinate medicinal name in order to meet the safety requirement. Care should be taken to accurately specify the herb required. In cases where a number of species may share the same Chinese name, specific nomenclature is needed to provide clarity. It is not sufficient to use only an English name if that could lead to confusion.”

- *part of the herb (when relevant to avoid confusion)*
- *method of preparation (e.g., whole, powdered, granule, tincture)*
- *form of processing (when relevant to avoid confusion)*
- *quantity of each herb*
- *preparation instructions*
- *number of packets or dosage as applicable*
- *instructions on how to use the medication as required for safe usage*
(P. 90-91, CTCMPAO Safety Program Handbook)

The following sample form should serve as a guideline to these requirements. As a student practitioner, you should adapt the form if needed. The original should be kept in the patient file and a photocopy should be given to the patient with the herbs.

OCTCM Student Clinic Handbook

Patient name and D.O.B: Bin Jiang Wu			
Date of prescription: 00/00/0000		Prescription Expiry: (1 week if not otherwise indicated)	
OCTCM Contact address & Phone: That cool place we all love			
Clinical Supervisor with contact phone: Huang Di 000-000-0000			
Herbal Formula (if applicable): Aiye Tang			
Single herbs name (pinyin)	Single herbs name (latin)	Quantity (packets)	Total Dosage
Ai Ye	Folium Artemisiae Argyi	1	10
Additional:			
Instructions for use: 2 cups per day after meals		Preparation Instructions: <i>GRANULES: Empty all contents of combined packets into a cup. Add hot water. Stir until granules have dissolved. Drink slowly for best absorption.</i>	
Duration: 5 days			
Follow-up date: 00/00/0000			
<p>Warnings: An example of a generic warning would be: <i>Do not take herbs within two hours of taking other medications as they may interfere with each other. If you experience any adverse side effects, stop taking the herbs and contact your practitioner immediately. Severe allergic reactions are rare, however, if you experience severe allergic reactions, seek immediate medical attention.</i></p> <p>Or, for external oils may be:</p> <p><i>Oils and liniments may stain clothing and may cause skin irritation. If skin is irritated, reduce frequency and quantity. If irritation continues, discontinue use entirely and contact your practitioner for an alternative.</i></p> <p>The above examples should be used only as guidelines.</p>			
Total price: \$30			
Student's name: _____	Signature: _____	Date: _____	
Supervisor's name: _____	Signature: _____	Date: _____	

Final Words

“Sometimes it is more important to discover what one cannot do, than what one can do.” --- Lin Yu-t’ang Chinese writer

“Each friend represent a world in us, a world not born until they arrive, and it is only by this meeting that a new world is born.” --- Anais Nin

“A human being is part of a whole, called by us the “universe” a part limited in time and space. He experiences himself, his thoughts and feelings, as something separated from the rest -- a kind of optical delusion of his consciousness. This delusion is a kind of prison for us, restricting us to our personal desires and to affection for a few persons nearest us. Our task must be to free ourselves from this prison by widening our circles of compassion to embrace all living creatures and the whole of nature in its beauty.” --- Albert Einstein.

NOTES

This image shows a full page of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page, providing a template for handwriting practice or general writing. There are no margins, text, or other markings on the page.

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Clinical Practicum Competencies

Each student is required to demonstrate the competencies listed below during their clinical hours. Each competency must be observed and initialed by a clinical supervisor in order to complete your clinical hours. Completing each competency before your clinical hours are complete does not exempt you from completing your required hours. As a student, it is YOUR responsibility to seek initials from your supervisors for the demonstration of each competency. In situations that do not permit the actual application of the competency, you should seek to demonstrate it in other ways (for example a short discussion or presentation)

The following chart should be filled out by your clinical supervisors throughout the course of your clinical training. Each competency should be initialed and dated when the supervisor has seen you demonstrate it. The comments can be used to detail where the student needs improvement. Clinical Examinations may be used to assess these competencies.

<i>Clinical Management</i>	<i>Comments</i>	<i>Initials</i>	<i>Date</i>
Ensure complete and accurate clinical records.			
Ensure complete and accurate financial records.			
Ensure that records are legible.			
Ensure patient access to records.			
Ensure physical security and integrity of records.			
Ensure privacy and confidentiality of records.			
Ensure preservation of records, and destruction according to law or regulation.			
Ensure sound financial management.			
Communicate fee and			

OCTCM Student Clinic Handbook

payment policies to patient in advance.			
Maintain ethical billing practices.			
Ensure professional liability and malpractice insurance.			
Employ ethical advertising.			
Establish office procedures and supervise staff accordingly.			
Identify appropriate supply for herbs.			
Assess quality of herbs with reference to: packaging, labeling, physical properties, available quality assurance information			
Store herbs in appropriate conditions, including: environment, security, monitoring			
Maintain records with respect to inventory.			
Verify formula information is clear, complete and accurate.			
Verify availability of components and confirm substitution if required.			
Confirm identity and quality of components.			
Compound formula.			
Apply packaging.			
Apply labeling.			
Provide instructions for storage and use.			
Maintain dispensing records.			

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<i>Clinical Practice</i>	<i>Comments</i>	<i>Initials</i>	<i>Date</i>
Speak clearly and concisely using plain language, and /or medical terminology, and / or TCM terminology, as appropriate.			
Write clearly and concisely using plain language, and /or medical terminology, and / or TCM terminology, as appropriate.			
Comprehend written information presented in plain or technical language.			
Comprehend oral communication presented in plain or technical language.			
Confirm recipient understands communication.			
Distinguish between professional and personal opinions.			
Respond to non-verbal communication.			
Respond to sources of interpersonal conflict.			
Develop and maintain effective inter-professional relationships.			
Identify the functions of other service providers commonly encountered in the health care setting.			
Show respect to colleagues and to other service providers.			
Develop productive working relationships.			

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Address professional differences that may lead to conflict.			
Work cooperatively in an interdisciplinary health care setting.			
Facilitate consultation, collaboration and referral when of benefit to the patient.			
Show respect toward patients as individuals.			
Respect diverse cultures and choices.			
Exhibit compassion toward patients.			
Maintain practitioner / patient boundaries.			
Facilitate honest, reciprocal communication.			
Explain the role of acupuncture in patient's overall health care.			
Explain the role of TCM herbal treatment in patient's overall health care.			
Encourage patient to take responsibility for his / her health.			
Ensure that patient is aware of treatment plan, its benefits and risks.			
Ensure that patient consents to treatment.			
Maintain patient confidentiality.			
Involve patient support person / guardian / advocate, when indicated.			

OCTCM Student Clinic Handbook

Ensure patient privacy.			
Ensure patient draping.			
Terminate course of treatment when appropriate.			
Advise patient on self-care and health maintenance.			
Provide patient with options for continuity of care.			
Respect patients' rights to access the health care of their choice.			
Maintain practitioner self-care.			
Maintain personal health and wellness in the context of professional practice.			
Maintain personal hygiene.			
Maintain professional appearance.			
Practice within limits of expertise.			
Undertake critical self-reflection of performance.			
Modify practice to enhance effectiveness.			
Take responsibility for professional actions.			
Remain current with developments in acupuncture practice.			
Remain current with developments in TCM herbology practice.			

<i>Risk Management</i>	<i>Comments</i>	<i>Initials</i>	<i>Date</i>
Determine risk profile			

OCTCM Student Clinic Handbook

relative to acupuncture treatment.			
Identify situations where acupuncture is contraindicated.			
Determine level of risk relative to TCM herbal treatment.			
Assess potential for adverse reaction to herbals.			
Identify situations where herbal treatment plans are contraindicated.			
Provide a safe working environment.			
Maintain current knowledge of communicable diseases and infection control techniques.			
Apply universal precautions for infection control.			
Ensure effective supervision of staff and / or students.			
Inspect facilities on a regular basis for electrical hazards, fire risk and physical hazards that may cause accidents, and take action to minimize.			
Establish procedures and route for emergency evacuation of facilities.			
Establish procedures to maximize protection of self, staff and patients in the event of abusive or violent behaviour.			
Include safety precautions in herbal treatment plan.			

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Apply safety precautions in acupuncture treatment, to enhance accident prevention.			
Manage adverse reactions and accidents resulting from treatment.			
Respond appropriately to medical emergencies.			
Communicate effectively with emergency health service providers.			
Provide first aid.			
Perform cardiopulmonary resuscitation.			
Manage blood-to-blood contact and provide direction for post exposure follow up.			
Clean spills of blood and other body fluids.			
Control and extinguish small fires.			
Ensure that equipment is safe and functional.			
Select equipment that enhances patient safety.			
Maintain equipment in good working order.			
Clean and equipment regularly, and disinfect as appropriate.			

<i>Clinical Diagnosis</i>	<i>Comments</i>	<i>Initials</i>	<i>Date</i>
Identify chief complaint.			
Initiate assessment based upon chief complaint.			

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Recognize conditions that require urgent medical treatment, and assist or direct patient appropriately.			
Modify assessment strategy based upon emerging information.			
Initiate collaboration, consultation or referral as appropriate.			
Collect information using wang zhen (TCM diagnostic inspection method).			
Collect information using wen zhen (TCM diagnostic inquiry method).			
Collect information using wen zhen (TCM diagnostic auscultation and olfaction methods).			
Collect information using qie zhen (TCM diagnostic palpation method).			
Obtain information on biomedical diagnostic data, medical and health history.			
Measure vital signs.			
Conduct relevant physical examination.			
Analyze assessment information.			
Organize and interpret the collected information using TCM syndrome differentiation theories:			
Determine goals of treatment.			
Determine treatment principles and strategies.			

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Take into account precautions and contraindications.			
Explain etiology and pathogenesis of condition.			
Explain TCM concepts as they apply to patient condition.			
Inform patient of possible side effects and reaction to treatment.			
Advise patient on yu fang and yang sheng (prevention, diet, exercise, and lifestyle).			
Counsel patient on compliance with treatment recommendations.			
Yin/Yang			
Five Elements			
Organ theory			
Vital substances			
Jing-luo (channels and collaterals), and acupuncture points			
Body constitution, characteristics, genetic and environmental factors			

<i>Clinical Acupuncture</i>	<i>Comments</i>	<i>Initials</i>	<i>Date</i>
Locate and apply knowledge of the following groups of points:			
Jing xue (14 meridians)			
Extra points			
Five transporting points			
Yuan/Primary Source points			
Luo Connecting points			

OCTCM Student Clinic Handbook

Xi Cleft points			
Back Shu points			
Front Mu points			
Lower He/Sea points			
Eight confluent points			
Eight influential points			
Mother/child points			
Acupuncture microsystems of ear and scalp			
Apply knowledge of the following principles in diagnosis and treatment:			
Jing-luo (channels and collaterals), and acupuncture points			
Select appropriate points, point combinations, and areas of treatment based on diagnosis and patient presentation			
Apply knowledge of anatomy, functions, indications, precautions, contraindications for selection of points and areas of treatment			
Apply knowledge of Tuina/ An Mo			
Apply knowledge of Qi Gong			
Apply knowledge of Guasha, including indications, precautions, contraindications			
Apply knowledge of Cupping, including indications, precautions, contraindications			
Establish appropriate course of acupuncture treatment			

OCTCM Student Clinic Handbook

and other therapies			
Adapt clinical setting for comfort and safety			
Position patient for treatment (including draping techniques)			
Locate selected points on patient			
Apply treatment techniques			
Apply knowledge of different needle manipulation techniques			
Monitor and respond to patient during treatment			
Perform filiform needling (with tube)			
Perform filiform needling (tubeless)			
Perform intra-dermal needling			
Perform dermal needling (plum blossom, seven star)			
Perform three-edge needling			
Apply knowledge of moxibustion, including indications, risks, precautions, contraindications			
Perform direct moxibustion			
Perform indirect moxibustion			
Perform needle warming moxibustion			
Apply knowledge of the use of heat lamps			
Apply knowledge of and perform stimulation using electro-acupuncture devices			

OCTCM Student Clinic Handbook

Perform cupping			
Perform guasha			
Perform tuina/an mo			

<i>Clinical Herbal Medicine</i>	<i>Comments</i>	<i>Initials</i>	<i>Date</i>
Apply knowledge of the following properties of TCM herbs:			
Si Qi (Four natures)			
Wu Wei (Five flavours)			
Gui Jing (Meridian entry)			
Sheng Jiang Fu Chen (Direction)			
Actions			
Indications			
Toxicity			
Pao zhi (methods and effects of processing)			
Apply knowledge of herbal formulation strategies, in regards to:			
Composition of formula			
Modification of formula			
Functions and classification			
Combinations and compatibility			
Dosage form, method of administration			
Potential adverse effects			
Precautions and contraindications			
Herb-herb interactions			
Herb-drug interactions			
Herb-food interactions			
Herb-natural health product interactions			
Devise appropriate TCM			

OCTCM Student Clinic Handbook

herbal formula based on patient assessment and presentation			
Establish appropriate course of treatment with TCM herbal formula			
Instruct patient on administration of TCM herbal formula			
Maintain herbal inventory by identifying appropriate supply of herbs			
Assess quality of herbs in regards to packaging, labelling, physical properties, quality assurance information			
Store herbs in appropriate conditions, including environment, security			
Maintain inventory records			
Prepare and dispense herbal formulas			
Verify formula information is clear, complete, and accurate			
Verify availability of herbs and make substitutions if necessary			
Package and label herbal formula			
Provide instructions for storage, preparation, and usage			
Maintain dispensing records			
Prepare and dispense herbal formulas.			

Additional Comments:

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OCTCM Student Clinic Procedure Overview

Procedure for receiving a new patient

1. Introduce yourself as a student
2. Give the patient the health history form and
3. Verbally go through the informed consent with them to ensure they have no questions
4. Sign the Informed Consent form and review the health history form to make sure they did not skip any sections

Procedure for Initial Intake

1. Introduce everyone in the room and their status (student)
2. Write the names of all students on the case record and the roles they play (intake, acupuncture, tuina, observe, etc.)
3. Only one student does the intake
4. After the intake is complete, ask the other students if they have any further questions
5. Be sure to accurately record any and all responses to questions (even those asked by other students)
6. Observe the tongue
7. Take the pulse (all students)
8. Then get the supervisor
9. Present the supervisor with a summary of the case
10. This entire procedure should take 30 minutes

Procedure for Follow-up intake

1. Introduce everyone in the room and their status (student)
2. Write the names of all students on the case record and the roles they play (intake, acupuncture, tuina, observe, etc.)
3. Only one student does the intake
4. Ask about how they felt from the last treatment
5. Ask about specific changes in the symptoms they had the previous treatment
6. Try to make the information quantifiable
7. Ask if there are any new symptoms
8. After the intake is complete, ask the other students if they have any further questions
9. Be sure to accurately record any and all responses to questions (even those asked by other students)
10. Observe the tongue

11. Take the pulse (all students)
12. Then get the supervisor
13. Present the supervisor with a summary of the case
14. This entire procedure should take 15 minutes

Before the Treatment Begins

1. Wait until you decide about the treatment before bringing the patient into the room
2. Tell the patient what you will be doing and Inform the patient who will be doing what therapy
3. Respect the patient's privacy!
4. Be clear in what the proper draping position should be and clearly explain to the patient how to prepare themselves and then leave the room with the curtain closed
5. Know who is needling BEFORE entering the room, preferably before seeing the patient
6. No more than 2 students can needle any given patient
7. If you do not know the location, depth, or method/ angle of needling a point, ask the supervisor to demonstrate BEFORE you start your needling procedure.

Clinic Room Procedures

1. WASH HANDS as you enter the room
2. Respect the space of the other patients and students by being quiet, mindful, and calm, speak softly
3. Support each other, but be mindful. Try not to openly criticize each other in front of the patient. If you feel that the safety of the patient is being compromised, then get the supervisor immediately.
4. Know who is needling BEFORE entering the room, preferably before seeing the patient (YES Again!) Have a plan of what order you will needle in, especially when more than one student will needle. Normally the senior student will always needle first.
5. Only 1 student should be touching the patient at a time
6. Did you WASH YOUR HANDS?

Clinical Assisting

1. WASH YOUR HANDS TOO!
2. Position yourself at a convenient location so as not to obstruct the student who is needling

3. Be prepared to assist in whatever is needed, you usually should have wet cotton (NEVER let the wet cotton touch anything but the patient), a tray, unopened needles of various sizes
4. Pay attention to what the student who is needling is doing and try to anticipate their needs
5. Open one needle at a time, unless asked to do differently. Hold the needles by the package and allow the student who is needling to take it from the package
6. NEVER pass anything over the patients face, move around it
7. NEVER take the needle from another student, instead, get the Sharps container and allow the other student to place the needle directly into the container.
8. WASH your hands upon leaving the room.

Patient Check Out

1. Once the treatment is complete, inform the patient and give them privacy to get up and dressed, if necessary, ask if they need assistance.
2. Ask about their response to treatment, improvements in chief complaint, or how they are feeling and record these changes and responses in the case notes.
3. Receive payment, and record the dollar amount received in the appointment book. If the patient pre-pays for any amount, the dollar amount received is recorded on the day and the following appointments can be mark “paid” without a dollar amount. This allows the dollar amount recorded each day to match the total for the end of the clinic.
4. Book the next appointment in accordance with the recommendations of the primary student intern. Booking guidelines are set at the beginning of each clinic by the clinical supervisor.

Additional Notes

You are responsible for tracking your hours. You are not to perform any tasks before completing the required number of hours AND COURSES. Regardless of how many courses or hours you have, you must self-regulate yourself and never do something that you do not know how to do...NEVER BE AFRAID TO ASK.

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“To know what one knows and to know what one does not know is the quality of one who knows”