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Medical Ethics

Ethics are moral principles that act as guidelines for behavior. They act as a guiding philosophy, impart moral importance, and help to discern right from wrong. Ethics are grounded in moral virtue, wherein actions are guided by both obligations and ideals. Although ethics correlate to legality, ethical obligations are often greater than what is legally required. In many ways, legal guidelines are strict obligations and ethical guidelines are congruous with ideals, virtue, compassion, integrity, caring, and conscientiousness.

Professional organizations may have a code of ethics in addition to laws and regulations that are specific for licensed acupuncturists. The NCCAOM (National Certification Commission for Acupuncture and Oriental Medicine) is a national organization in the United States that has a written code of ethics for all members:

NCCAOM Code of Ethics

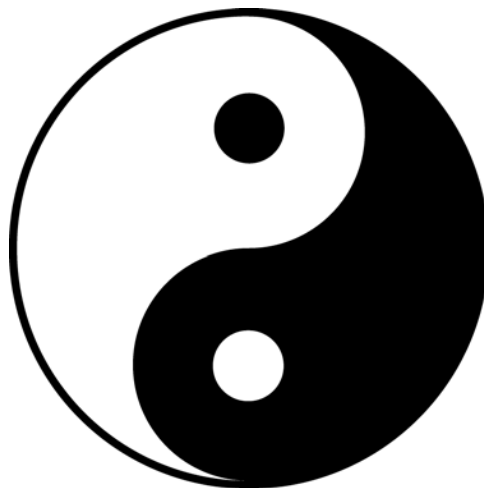
The NCCAOM (National Certification Commission for Acupuncture and Oriental Medicine) is a national organization in the United States that has a written code of ethics for all members. The following NCCAOM ethical items are general principles applicable to all acupuncturists worldwide.

When becoming an NCCAOM Diplomate, one signs on to the following ethical items, because the code of ethics starts with the following:

“As a Diplomate of the NCCAOM®, I hereby pledge my commitment to the following principles:”

- Respect the rights, privacy and dignity of my patients and maintain confidentiality and professional boundaries at all times.
- Treat within my lawful scope of my practice and training and only if I am able to safely, competently and effectively do so.

- Allow my patients to fully participate in decisions related to their healthcare by documenting and keeping them informed of my treatments and outcomes.
- Accept and treat those seeking my services in a fair and nondiscriminatory manner. Render the highest quality of care and make timely referrals to other health care professionals
- as may be appropriate.
- Continue to advance my knowledge through education, training and collaboration with my colleagues to maintain excellence and high ethical standards in our profession.
- Support my medicine's access to all people and its growth in the broad spectrum of U.S. health care.
- Assist in the professional development and advancement of my colleagues. Participate in activities that contribute to the betterment of my community.
-



Next, we will take a look at each NCCAOM code of ethics item, one by one, and discuss its relevance to clinical practice:

Rights, Privacy, Dignity

Respect the rights, privacy and dignity of my patients and maintain confidentiality and professional boundaries at all times.

Misconduct

This NCCAOM ethical item touches upon both legal and ethics concerns. For example, sexual contact with a patient is legal misconduct. This also violates this ethical code regarding professional boundaries. The NCCAOM notes that this is grounds for professional discipline. The *NCCAOM Certification Handbook* notes that professional discipline is appropriate unless six months has elapsed:

Engaging in sexual contact with a former patient unless a period of six (6) months has elapsed since the date that the professional relationship ended.¹

In addition to this ethical boundary, individual state legal requirements may stipulate a requirement for signed forms confirming that a patient having a relationship with a medical practitioner is no longer active in the acupuncture practice for a specified period of time. Here, the ethical principle is supported by legal requirements and is therefore an obligation.

Privacy

Another example of law congruent with this ethical item is HIPAA (Health Insurance Portability and Accountability Act of 1996). **HIPAA is a United States law that protects the privacy of patients, although it is also ethical to do so as well.**

There are two main facets to HIPAA, the *Privacy Rule* and the *Security Rule*. The *Privacy Rule* sets national standards for the protection of individually identifiable health information by three types of covered entities: health plans, health care clearinghouses, and health care providers who conduct the standard health care transactions electronically. The *Security*

1. nccaom.org/wp-content/uploads/pdf/Certification%20Handbook.pdf

Rule sets national standards for protecting the confidentiality, integrity, and availability of electronic protected health information (PHI). The following are the main aspects of PHI:

- Patient information for acupuncturists, doctors, nurses, and other health care providers put in medical records.
- Patient conversations with the acupuncturist, doctor or health care provider has about care or treatment with nurses and others.
- Patient information in the health insurer's computer system.
- Billing information about the patient at the acupuncturist clinic.
- Most other patient health information held by those who must follow these laws.

Sign-In Sheets

At the healthcare office, sign-in sheets are visible to the public if left on the desk at the reception area. This is permissible by HIPAA; however, only the person's name can be required. It is illegal to have "major complaint" or "purpose of visit" on the form. A sign-in sheet is allowable under the privacy rule because HIPAA allows for "incidental disclosures" so long as "reasonable safeguards" are in place. The patient's name is allowable, but the patient's medical information is not allowed in a public setting. This conforms to "reasonable safeguards."

Confidentiality

The NCCAOM code of ethics respects the rights, privacy, and dignity of the patient. What about speaking to our patients in the reception area or in a semi-private clinical setting? From an ethical point of view, there is wisdom and compassion in not revealing medical information in public that a patient may find undignified, intrusive, or embarrassing. The legal perspective is somewhat flexible in this regard. The HHS (U.S. Department of Health & Human Services) writes the following:

Can health care providers engage in confidential conversations with other providers or with patients, even if there is a possibility that they could be overheard?

Answer:

Yes. The HIPAA Privacy Rule is not intended to prohibit providers from talking to each other and to their patients. Provisions of this Rule requiring covered entities to implement reasonable safeguards that reflect their particular circumstances and exempting treatment disclosures from certain requirements are intended to ensure that providers' primary consideration is the appropriate treatment of their patients. The Privacy Rule recognizes that oral communications often must occur freely and quickly in treatment settings. Thus, covered entities are free to engage in communications as required for quick, effective, and high quality health care. The Privacy Rule also recognizes that overheard communications in these settings may be unavoidable and allows for these incidental disclosures.

For example, the following practices are permissible under the Privacy Rule, if reasonable precautions are taken to minimize the chance of incidental disclosures to others who may be nearby:

- Health care staff may orally coordinate services at hospital nursing stations.
- Nurses or other health care professionals may discuss a patient's condition over the phone with the patient, a provider, or a family member.
- A health care professional may discuss lab test results with a patient or other provider in a joint treatment area.
- A physician may discuss a patient's condition or treatment regimen in the patient's semi-private room.
- Health care professionals may discuss a patient's condition during training rounds in an academic or training institution.
- A pharmacist may discuss a prescription with a patient over the pharmacy counter, or with a physician or the patient over the phone.

In these circumstances, reasonable precautions could include using lowered voices or talking apart from others when sharing protected health information. However, in an emergency situation, in a loud emergency

room, or where a patient is hearing impaired, such precautions may not be practicable. Covered entities are free to engage in communications as required for quick, effective, and high quality health care.

The ethical and legal issue is whether or not certain disclosures happen in the normal course of quality medical delivery. Conceptually, ethical and legal concerns for privacy are not intended to inhibit the delivery of quality medical care.

Rules are significantly more restrictive when engaging in marketing and business practice management. These activities are not specifically enhancing medical care. As a result, there are strict privacy rules governing marketing. The HHS notes,

When is an authorization required from the patient before a provider or health plan engages in marketing to that individual?

Answer:

The HIPAA Privacy Rule expressly requires an authorization for uses or disclosures of protected health information for ALL marketing communications, except in two circumstances:

- 1 When the communication occurs in a face-to-face encounter between the covered entity and the individual; or
- 2 The communication involves a promotional gift of nominal value.

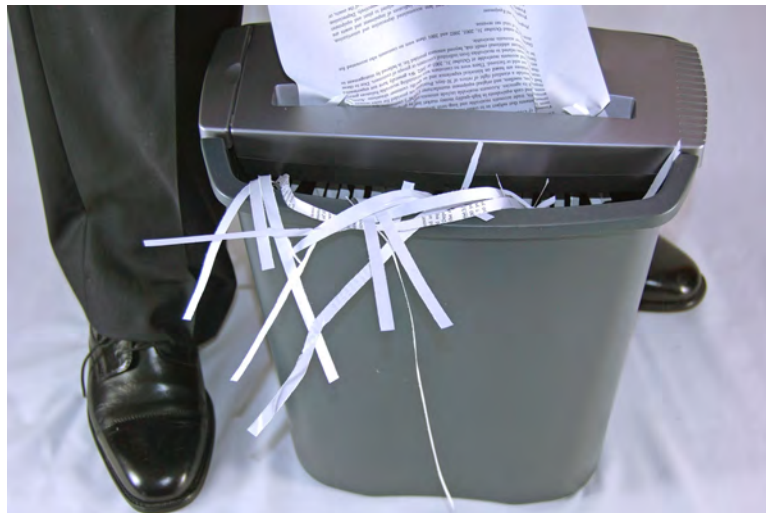
If the marketing communication involves direct or indirect remuneration to the covered entity from a third party, the authorization must state that such remuneration is involved.

As a result, hiring a third party to send information directly to patients such as brochures, pamphlets, and coupons without prior patient authorization is a violation of the privacy rules. The best action for this purpose is to contact an attorney or legal expert to obtain the proper forms necessary relative to your state or jurisdiction.

Privacy must also be respected regarding health records. The HHS is very specific concerning the disposal of health records. The HHS notes:

For PHI in paper records, shredding, burning, pulping, or pulverizing the records so that PHI is rendered essentially unreadable, indecipherable, and otherwise cannot be reconstructed.

For PHI on electronic media, clearing (using software or hardware products to overwrite media with non-sensitive data), purging (degaussing or exposing the media to a strong magnetic field in order to disrupt the recorded magnetic domains), or destroying the media (disintegration, pulverization, melting, incinerating, or shredding).



Scope of Practice & Safety

Treat within my lawful scope of my practice and training and only if I am able to safely, competently and effectively do so.

This item touches upon two universally accepted ethical concepts: beneficence and non-maleficence. Beneficence in medicine means that something good will result. The acupuncturist or medical professional acts in the best interest of the patient, for their benefit. Non-maleficence is the concept of non-harming a patient or inflicting the least possible harm to reach a beneficial outcome.

Acupuncture may cause a bruise or may be uncomfortable at times. Herbs may temporarily cause temporary diarrhea or indigestion. However, if the aforementioned acupuncture and herbs are intended to resolve a disease and the adverse effects are limited, the treatment is congruous with this item's concept of acting safely and competently.

The scope of practice clause in this item extends beyond ethical considerations; it is a legal parameter. **Practitioners must legally act within the scope of practice defined by law.**

There is a gray area that is not specifically delineated. State scope of practice or regional laws may not prohibit a treatment modality or technique but may not explicitly allow for its use. Magnet therapy, laser acupuncture, bleeding techniques, etc... may not be explicitly prohibited or allowed in all states. **As result, acupuncturists are advised to work strictly within their scope of practice and check with their state boards concerning undefined procedures and techniques.** We'll look at a few samples of state scope of practice regulations in a moment. What we find is that some medical procedures are specifically allowed, while others may only be implied.

We may have a personal disagreement with a scope of practice regulation because it excludes a modality or procedure that may help our patients. Legally, stay within the boundaries of the law and the scope of practice.

However, action may be taken to remedy this issue. The ethical standard is to contribute towards changing the law such that appropriate modalities and techniques are included in the scope of practice. The American Medical Association notes:

In general, when physicians believe a law is unjust, they should work to change the law.²

Florida

Let's look at some scope of practice definitions by law. We have taken a sample from several state laws to compare and contrast differences. The following is the rule for the State of Florida:

457.102 Definitions.—As used in this chapter:

- (1) "Acupuncture" means a form of primary health care, based on traditional Chinese medical concepts and modern oriental medical techniques, that employs acupuncture diagnosis and treatment, as well as adjunctive therapies and diagnostic techniques, for the promotion, maintenance, and restoration of health and the prevention of disease. Acupuncture shall include, but not be limited to, the insertion of acupuncture needles and the application of moxibustion to specific areas of the human body and the use of electroacupuncture, Qi Gong, oriental massage, herbal therapy, dietary guidelines, and other adjunctive therapies, as defined by board rule.
- (2) "Acupuncturist" means any person licensed as provided in this chapter to practice acupuncture as a primary health care provider.
- (3) "Board" means the Board of Acupuncture.
- (4) "License" means the document of authorization issued by the department for a person to engage in the practice of acupuncture.
- (5) "Department" means the Department of Health.

2. ama-assn.org/ama/pub/physician-resources/medical-ethics/code-medical-ethics/opinion102.page. 1-1-16.

(6) "Oriental medicine" means the use of acupuncture, electroacupuncture, Qi Gong, oriental massage, herbal therapy, dietary guidelines, and other adjunctive therapies.

(7) "Prescriptive rights" means the prescription, administration, and use of needles and devices, restricted devices, and prescription devices that are used in the practice of acupuncture and oriental medicine.

Here, we see that the State of Florida spells out a variety of modalities allowable by acupuncturists, including Qi Gong. There is a broader "other adjunctive therapies" that gives the Florida Board of Acupuncture discretion over inclusion of additional modalities. As we will see below, different states include differing specifics. For example, California allows magnets.

California

The following are from the State of California laws and regulations:

4927. As used in this chapter, unless the context otherwise requires:

- (a) "Board" means the Acupuncture "Board".
- (b) "Person" means any individual, organization, or corporate body, except that only individuals may be licensed under this chapter.
- (c) "Acupuncturist" means an individual to whom a license has been issued to practice acupuncture pursuant to this chapter, which is in effect and is not suspended or revoked.
- (d) "Acupuncture" means the stimulation of a certain point or points on or near the surface of the body by the insertion of needles to prevent or modify the perception of pain or to normalize physiological functions, including pain control, for the treatment of certain diseases or dysfunctions of the body and includes the techniques of electroacupuncture, cupping, and moxibustion.

4937. An acupuncturist's license authorizes the holder thereof:

- (a) To engage in the practice of acupuncture.
- (b) To perform or prescribe the use of Asian massage, acupressure, breathing techniques, exercise, heat, cold, magnets, nutrition, diet, herbs, plant, animal, and mineral products, and dietary

supplements to promote, maintain, and restore health. Nothing in this section prohibits any person who does not possess an acupuncturist's license or another license as a healing arts practitioner from performing, or prescribing the use of any modality listed in this subdivision.

(c) For purposes of this section, a "magnet" means a mineral or metal that produces a magnetic field without the application of an electric current.

(d) For purposes of this section, "plant, animal, and mineral products" means naturally occurring substances of plant, animal, or mineral origin, except that it does not include synthetic compounds, controlled substances or dangerous drugs as defined in Sections 4021 and 4022, or a controlled substance listed in Chapter 2 (commencing with Section 11053) of Division 10 of the Health and Safety Code.

(e) For purposes of this section, "dietary supplement" has the same meaning as defined in subsection (ff) of Section 321 of Title 21 of the United States Code, except that dietary supplement does not include controlled substances or dangerous drugs as defined in Section 4021 or 4022, or a controlled substance listed in Chapter 2 (commencing with Section 11053) of Division 10 of the Health and Safety Code.

4938. The board shall issue a license to practice acupuncture to any person who makes an application and meets the following requirements:

(a) Is at least 18 years of age.

This last part is an interesting contrast. In California, an acupuncturist must be at least 18 years of age, but in Florida the minimum age is 21.

Florida #2

The following is the State of Florida rule requiring 21 years of age:

57.105 Licensure qualifications and fees.—

(1) It is unlawful for any person to practice acupuncture in this state unless such person has been licensed by the board, is in a board-approved course of study, or is otherwise exempted by this chapter.

(2) A person may become licensed to practice acupuncture if the person applies to the department and:

(a) Is 21 years of age or older, has good moral character, and has the ability to communicate in English, which is demonstrated by having passed the national written examination in English or, if such examination was passed in a foreign language, by also having passed a nationally recognized English proficiency examination;

New York

New York scope of practice law has a requirement to sign a form identifying the importance of an outside referral:

a "Profession of acupuncture" is the treating, by means of mechanical, thermal or electrical stimulation effected by the insertion of needles or by the application of heat, pressure or electrical stimulation at a point or combination of points on the surface of the body predetermined on the basis of the theory of the physiological interrelationship of body organs with an associated point or combination of points for diseases, disorders and dysfunctions of the body for the purpose of achieving a therapeutic or prophylactic effect. The profession of acupuncture includes recommendation of dietary supplements and natural products including, but not limited to, the recommendation of diet, herbs and other natural products, and their preparation in accordance with traditional and modern practices of East Asian (Chinese, Korean or Japanese) medical theory.

b Each acupuncturist licensed pursuant to this article, shall advise each patient as to the importance of consulting with a licensed physician regarding the patient's condition and shall keep on file with the patient's records, a form attesting to the patient's notice of such advice. Such form shall be in duplicate, one copy to be retained by the patient, signed and dated by both the acupuncturist and the patient and shall be prescribed in the following manner:

WE, THE UNDERSIGNED, DO AFFIRM THAT (THE PATIENT) HAS BEEN ADVISED BY, (A LICENSED ACUPUNCTURIST), TO CONSULT A

PHYSICIAN REGARDING THE CONDITION OR CONDITIONS FOR WHICH SUCH PATIENT SEEKS ACUPUNCTURE TREATMENT.³

The aforementioned scope of practice law requires that a form with the above language is signed by both the patient and the licensed acupuncturist. The NY law touches on the ethical concept of beneficence, wherein requiring an acupuncturist to notify patients of the importance of consulting with a licensed physician may be intended, in part, to provide treatment options.

This legal requirement is not entirely congruous with the ethical concept of autonomy, which is respecting the patient's wishes and rights of self-determination. Yet, the NY referral requirement is not a violation of autonomy because it only requires that the "importance of consulting with a licensed physician" is conveyed. An acupuncturist is not required to formally schedule a referral for the patient.

Ethics and legal requirements are often determined by consensually validated reality; the common view is that an MD or DO referral is substantive. As a result, the signed referral form is deemed reasonable by authorities. In addition, political capital may have been expended to require the NY signed referral form.

Texas

The following is the Texas scope of practice law:

Acupuncturists are licensed by the Texas State Board of Acupuncture Examiners (TSBAE) to practice acupuncture, which is defined as the insertion of an acupuncture needle and the application of moxibustion to specific areas of the human body as a primary mode of therapy to treat and mitigate a human condition, including the evaluation and assessment of the condition; and the administration of thermal or electrical treatments or the

3. op.nysed.gov/prof/acu/article160.htm

recommendation of dietary guidelines, energy flow exercise, or dietary or herbal supplements in conjunction with the treatment.⁴

As you can see, there is a similarity between scope of practice laws. One commonality between state laws is typically the inclusion of electroacupuncture, herbal supplements, and dietary recommendations. Here, Texas stipulates the inclusion of “energy flow exercise.” This is broader language than the inclusion of Qi Gong within Florida scope of practice law. As a result, Taiji or even Tibetan Kum Nye are directly implied within Texas law.

Minnesota

In the following, we find “breathing techniques” included in Minnesota scope of practice law:

The scope of practice of acupuncturists includes, but is not limited to: 1) Using Oriental medical theory to assess and diagnose a patient and 2) Using Oriental medical theory to develop a plan to treat a patient. The acupuncturists must refer patients with a potentially serious disorder to other health care practitioners. Acupuncturists shall request a consultation or written diagnosis from a licensed physician for patients with potentially serious disorders.⁵

"Acupuncture practice" means a comprehensive system of health care using Oriental medical theory and its unique methods of diagnosis and treatment. Its treatment techniques include the insertion of acupuncture needles through the skin and the use of other biophysical methods of acupuncture point stimulation, including the use of heat, Oriental massage techniques, electrical stimulation, herbal supplemental therapies, dietary guidelines, breathing techniques, and exercise based on Oriental medical principles.

The following are relevant definitions for Minnesota:

"Acupuncture needle" means a needle designed exclusively for acupuncture purposes. It has a solid core, with a tapered point, and is 0.12 mm to 0.45

4. tmb.state.tx.us/page/acupuncturist-licensing-overview

5. mn.gov/boards/assets/APFactSheet%202017_tcm21-36777.pdf

mm in thickness. It is constructed of stainless steel, gold, silver, or other board-approved materials as long as the materials can be sterilized according to recommendations of the National Centers for Disease Control and Prevention.

"Oriental medicine" means a system of healing arts that perceives the circulation and balance of energy in the body as being fundamental to the well-being of the individual. It implements the theory through specialized methods of analyzing the energy status of the body and treating the body with acupuncture and other related modalities for the purpose of strengthening the body, improving energy balance, maintaining or restoring health, improving physiological function, and reducing pain.

"Needle sickness" is a temporary state of nausea and dizziness that is a potential side effect to needle insertion and from which full recovery occurs when the needles are removed.

"Herbal therapies" are the use of herbs and patent herbal remedies as supplements as part of the treatment plan of the patient.

"Electrical stimulation" means a method of stimulating acupuncture points by an electrical current of .001 to 100 milliamps, or other current as approved by the board. Electrical stimulation may be used by attachment of a device to an acupuncture needle or may be used transcutaneously without penetrating the skin.

"Dermal friction" means rubbing on the surface of the skin, using topical ointments with a smooth-surfaced instrument without a cutting edge that can be sterilized or, if disposable, a onetime only use product.

"Cupping" means a therapy in which a jar-shaped instrument is attached to the skin and negative pressure is created by using suction.

"Breathing techniques" means Oriental breathing exercises taught to a patient as part of a treatment plan.

Minnesota has broad language allowing for "dermal friction," whereas Illinois specifically allows for gua sha. Here is the State of Illinois definitions for acupuncturists:

"Acupuncture" means evaluation or treatment that is effected by stimulating certain body points by the insertion of pre-sterilized, single-use, disposable

needles, unless medically contraindicated. "Acupuncture" includes, but is not limited to, stimulation that may be effected by the application of heat, including far infrared, or cold, electricity, electro or magnetic stimulation, cold laser, vibration, cupping, gua sha, manual pressure, or other methods, with or without the concurrent use of needles, to prevent or modify the perception of pain, to normalize physiological functions, or for the treatment of diseases or dysfunctions of the body and includes the determination of a care regimen or treatment protocol according to traditional East Asian principles and activities referenced in Section 15 of this Act for which a written referral is not required. In accordance with this Section, the practice known as dry needling or intramuscular manual stimulation, or similar wording intended to describe such practice, is determined to be within the definition, scope, and practice of acupuncture. Acupuncture also includes evaluation or treatment in accordance with traditional and modern practices of East Asian medical theory, including, but not limited to, moxibustion, herbal medicinals, natural or dietary supplements, manual methods, exercise, and diet to prevent or modify the perception of pain, to normalize physiological functions, or for the treatment of diseases or dysfunctions of the body and includes activities referenced in Section 15 of this Act for which a written referral is not required. Acupuncture does not include radiology, electrosurgery, chiropractic technique, physical therapy, naprapathic technique, use or prescribing of any pharmaceuticals, or vaccines, or determination of a differential diagnosis. An acupuncturist licensed under this Act who is not also licensed as a physical therapist under the Illinois Physical Therapy Act shall not hold himself or herself out as being qualified to provide physical therapy or physiotherapy services.

"Acupuncturist" means a person who practices acupuncture in all its forms, including traditional and modern practices in both teachings and delivery, and who is licensed by the Department. An acupuncturist shall refer to a licensed physician or dentist any patient whose condition should, at the time of evaluation or treatment, be determined to be beyond the scope of practice of the acupuncturist.

Summary

Overall, scope of practice laws often clearly define acupuncture, needles, and modalities such as electroacupuncture, moxibustion, and cupping. According to the ethical concept of beneficence, it is imperative that if a beneficial treatment modality is within the expertise and scope of an

acupuncturist's practice, the acupuncturist is ethically required to deliver that appropriate treatment modality to the patient in a safe and timely manner.

Safety and Competency

Safety is an essential part of this ethical item and education is an essential part of safety. Prof. Shui Wae noted:

To be a practitioner of acupuncture one must have knowledge of diagnosis and physiology. Otherwise, wrongly applying the needles could lead to accidents or prevent a patient from being cured at an early stage of an illness which would later become chronic. In other words, it is impossible to cure a disease without diagnosis. Therefore to learn acupuncture one must first possess fundamental knowledge.⁶



Hua Tuo

6. Shui, Wae. A Research Into Acupuncture and Its Clinical Practice [English-Chinese]. Commercial Press, 1976.

Participation in Decisions

Allow my patients to fully participate in decisions related to their healthcare by documenting and keeping them informed of my treatments and outcomes.

The universal ethical concept of *autonomy in medicine* is to *respect a patient's requests* and the *patient's right to self-determination*. This NCCAOM ethical item of full participation in decisions is congruent with the right to self-determination. The legal requirement of consent overlaps with the ethical issue of self-determination. Patients must first give permission to a licensed acupuncturist in order for the acupuncturist to render services. The patient's first act of full participation is to give permission to receive treatment.

Interestingly, consent is not part of HIPAA. However, consent is a common requirement in state laws. Most states, countries, provinces, etc... require a signed consent to treat form. The form requirements vary by jurisdiction, but many states require the following:

- *patient's name*
- *address*
- *current date*
- *date of birth*
- *personal contact information*
- *emergency contact information*
- *name of treating physician*
- *medical history including allergies and medications*

The American Acupuncture Council includes the following informed consent item in their recommended *Acupuncture Informed Consent to Treat* form:

I have been informed that acupuncture is a generally safe method of treatment, but that it may have some side effects, including bruising, numbness or tingling near the needling sites that may last a few days, and dizziness or fainting. Burns and/or scarring are a potential

risk of moxibustion and cupping, or when treatment involves the use of heat lamps. Bruising is a common side effect of cupping.⁷

While the consent to treat form is a legal requirement, the appropriate collection of the information is also an important ethical consideration:

- Knowing the age of a patient and other historical information helps in the delivery of quality medicine.
- Emergency contact information helps a practitioner provide a safe environment for treatment.

Communication

Allowing a patient to know the risks of all procedures as well as the diagnosis and prognosis helps a patient fully participate in the decision making process. This is an essential part of a patient fully participating in their healthcare decisions.

Compliance

The process of communication helps patients understand the importance of compliance with a treatment program. For example, a treatment of electroacupuncture for shoulder pain connecting LI15 (Jianyu) to TB14 (Jianliao) may cause delayed soreness. It is considerate to let the patient know that they may experience soreness later in the day, which often resolves within 24–48 hours. If the pain occurs without being informed, the patient may become frightened or believe that the treatment is deleterious. This interferes with compliance to a program that resolves the patient's condition and causes unnecessary stress for the patient.

Prognosis

A prognosis helps to set realistic expectations. This is fair and considerate. For example, by letting a patient know that the best treatment

7. AAC-FED, A2004. OPTIONAL Arbitration Information Packet. American Acupuncture Council.

protocol for a given condition is 3 times per week for two weeks followed by 2 times per week for two weeks, we are simultaneously telling the patient to have realistic expectations for the very first visit and to give the treatment time to work.

Patients need a program of care to plan for access to care and to have a realistic set of expectations. If, in this example, the patient states that they can only come for treatment one time per week, the acupuncturist may choose to state that the limited frequency of care is either inadequate for resolution of the condition or that the lower frequency of treatment is adequate but that the healing process may take a longer period of time.

Clarity Builds Trust

Clear communication promotes a healthy practice built upon trust. This ethical doctrine of allowing patients to fully participate in decisions related to their healthcare and informing them of treatments and outcomes is an essential part of every acupuncturist's practice.



Fairness

Accept and treat those seeking my services in a fair and nondiscriminatory manner.

Justice

This is within the scope of justice. Patients deserve fair and equitable access to healthcare and quality treatments. In this respect, patients must be treated with equal respect. The concept that patients deserve equal access to care has historical roots in Chinese medicine:

Chen Shih-kung (AD1605) also presented the similar idea of treating high or low, rich or poor equally. He particularly mentioned that prostitutes should be treated in the same way as daughters from a good family, which entails both equality and respect. Moreover: "Medicine should be given free to the poor. Extra financial help should be extended to the destitute patients; if possible. Without food, medicine alone cannot relieve the distress of a patient."⁸

Sun Szu-miao wrote about nondiscrimination:

If someone seeks help because of illness or on the ground of another difficulty, [a great physician] should not pay attention to status, wealth or age, neither should he question whether the particular person is attractive or unattractive, whether he is an enemy or a friend, whether he is Chinese or a foreigner, or finally, whether he is uneducated or educated. He should meet everyone on equal ground.⁹

8. Tsai, D. F. "Ancient Chinese medical ethics and the four principles of biomedical ethics." *Journal of medical ethics* 25, no. 4 (1999): 315-321.

9. Tsai, D. F. "Ancient Chinese medical ethics and the four principles of biomedical ethics." *Journal of medical ethics* 25, no. 4 (1999): 315-321.

Quality Care and Referrals

Render the highest quality of care and make timely referrals to other health care professionals as may be appropriate.

The personal development of skills as an acupuncturist towards delivery of quality care has historical roots:

Sun Szu-miao (AD581-682), a famous physician, Taoist and alchemist, wrote a monograph entitled *On the absolute sincerity of great physicians*. He emphasised the necessity of a thorough education, rigorous conscientiousness and self-discipline, and explained that "compassion (tz'u)" and "humaneness (len) " were the basic values of medical practice.¹⁰

Sun Szu-miao stressed the importance of mastering medicine and working towards delivering quality medicine to others.

Another aspect of this ethical item is that of referrals. This is also tied to education, since knowing the scope of practice of other medical professionals is essential when making a referral. The following are modern basic guidelines and red flags toward making a medical referral:

- Sudden chest pain (coronary occlusion, pneumothorax, or aneurysm)
- Excessive hemorrhaging (shock risk)
- Recent head trauma (concussion, brain injuries)
- Persistent cough (pleural effusion, lung cancer)
- Severe abdominal pains (appendicitis, ruptured abscess)
- Gastro-intestinal bleeding from upper or lower GI tract
- New onset of severe headache (aneurysms, brain tumor)
- Seriously Infected wounds (any infected foot ulcers in diabetic patients should be referred)
- Persistently swollen lymph nodes, difficulty swallowing, breast lumps, abdominal masses, unexplained weight loss (cancer)
- Unexplained weight loss, thirst, frequent urination (Diabetes Type II)

10. Tsai, D. F. "Ancient Chinese medical ethics and the four principles of biomedical ethics." *Journal of medical ethics* 25, no. 4 (1999): 315-321.

- Persistent tenderness and swelling in lower leg or thigh (thrombophlebitis, peripheral vascular disorder)
- Visual disturbances or severe redness in eyes (glaucoma)
- Altered levels of consciousness (stroke or impending coma)
- Broken bones or dislocated joints that need immobilizing
- Suicide risks
- Severe depression or emotional disturbance which may require behavioral therapy or counseling
- Children with neurological deficits, developmental delays, or learning disabilities
- Sudden onset of new neurological problems
- Sudden respiratory distress
- Signs of an undiagnosed highly infectious disease (Hepatitis, HIV, tuberculosis)
- Spotting during pregnancy or patients with pre-eclampsia who develop severe headaches and blurred vision (miscarriage risk)
- Post-menopausal vaginal bleeding
- Fever of unknown origin
- Frequent syncope or light-headedness (brain tumor)
- Anaphylaxis (anaphylactic shock)
- New occurrence of exophthalmos/enlarged eyes or goiter (Grave's disease)
- Elder or child abuse (needs to be reported to the proper authorities)



Excellence and Education

Continue to advance my knowledge through education, training and collaboration with my colleagues to maintain excellence and high ethical standards in our profession.

Sun Szu-miao, Prof. Wae Shui, and countless luminaries in the field of traditional medicine have shared this value. Education and advancement of skills is paramount.

Sun Szu-miao was clear about high ethical standards. He wrote that the intent of the kind physician is to help others and not for professional advancement based upon notoriety or money.



Access to Care

Support my medicine's access to all people and its growth in the broad spectrum of U.S. health care.

Supererogation

- This item shares in the ethical principle of supererogation. By definition, supererogation means to perform more work than is required. **Supererogation indicates that someone does not act only out of obligation, but chooses to act virtuously.** Ultimately, supererogation implies that someone intentionally acts for the benefit of others.
- Support for community health clinics and inclusion of licensed acupuncturists within the healthcare system is within the scope of this ethical item. This extends from private to public sources of funding and access to care. In addition, there are areas where an acupuncturist's scope of practice is not legal or is unusually restricted. This ethical decree implores us to support legislation promoting access to the skills of a licensed acupuncturist.



Development and Advancement

Assist in the professional development and advancement of my colleagues.

This concept promotes unity and for the advancement of medicine. Activities may include research, publishing, lecturing, translating, and teaching. Working together helps each and every one of us.



Community

Participate in activities that contribute to the betterment of my community.

Compassion

One of the main ethical values active in this NCCAOM item is compassion. In helping our community with compassion, we are broadly sympathetic to the welfare of others. Our concern focuses on rooting out suffering, wherever it may be.

This item relates to the concept of justice, wherein a consideration of the risks and benefits to our community is of great import. Essentially, the role of an acupuncturist is to promote beneficence. Dr. Daniel Fu-Chang Tsai writes:

Ancient Chinese medical ethics basically focuses its moral doctrines of beneficence on humaneness (en) and compassion (t'zu). Sun Szu-miao's medical ethics professed that: "The object is to help, not to gain material goods", and a "great physician" should "commit himself with great compassion to save every living creature". Kung Hsin in AD1556 wrote: "The good physician of the present day cherishes humaneness and righteousness He cares not for vainglory, but is intent upon relieving suffering among all classes. He revives the dying and restores them to health: his beneficence is equal to that of Providence." Kung Ting-Hsien (AD 1615) also said, in his Ten maxims for physicians, that: "Firstly, they should adopt a disposition of humaneness; this is a justified demand. They should make a very special effort to assist the people and to perform far-reaching good deeds."¹¹

Prof. Shui Wae, a renown acupuncturist, was teaching a Qi Gong class in San Francisco in the late 1980s. A student of Prof. Shui Wae asked him, "What is most important of an acupuncturist?" He replied, "To be a good hearted doctor."

11. Tsai, D. F. "Ancient Chinese medical ethics and the four principles of biomedical ethics." *Journal of medical ethics* 25, no. 4 (1999): 315-321.

The student then asked, “What is second most important?” The student understood Prof. Shui Wae’s reply as, “To have patience.” The student asked, “Do you mean to patiently diagnose and work with patients towards treatment goals?” Lovingly and laughing, Prof. Shui Wae replied, “No... to have patients! Work hard and take your education to the world and help as many people as possible.”

In the reception room of his clinical practice, Prof. Shui Wae had an antique wooden table. Atop this table were dozens of icons representing many religions, peoples, and cultures. A student of Prof. Shui Wae asked, “Why so many icons?” He replied, “Medicine is for all people, I treat everyone.” Interestingly, Prof. Shui Wae charged per office visits as is typical of an acupuncturist. However, he was generous with trades, giving away free care, and he even offered his own money to the poor after acupuncture treatments if they did not have enough funds to pay for acupuncture appointments.



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