



# Charter of the Doctor of Acupuncture Degree Program

Yue-Gustafson School of Health Professions

**Date of Effect:** December 21, 2025

**Governing Body:** Board of Directors

**Authority:** Incorporated as a Non-Profit Organization under the Laws of Canada



## Preamble

The Yue-Gustafson School of Health Professions acts on the conviction that Albertans deserve a healthcare system that is robust, preventative, and intellectually rigorous. Recognizing the urgent need to elevate Allied Health Professionals to a standard of Medical Excellence, we hereby establish the Doctor of Acupuncture (Dr.Ac.) Degree Program.

This Charter serves as the foundational covenant between the Institution, its Faculty, its Students, and the Public. It mandates a program of study that mirrors the discipline, organization, and admission competitiveness of provincial primary care providers, specifically aligned with the rigor of the University of Calgary Medical Doctor admissions standards.



## Vision

Our values are codified in our emblem, representing the character required of a Doctor of Acupuncture:

- The Lion: Unwavering strength and bravery; the commitment to lead the community and make a positive impact.
- The Hare: Adaptability and rapidity; the agility to remain resilient in the face of clinical and systemic obstacles.
- The Crown: The pursuit of excellence; upholding the highest standards, dignity, and the pursuit of truth.
- The Alberta Thistle: Resilience at the heart of our identity.
- The Green Foliage: Nurturing growth; fostering an environment where professionals reach their full potential.

We facilitate competitive, high-quality healthcare education. We empower students to actively participate in healthcare, help others, and empower patients to do the same.

Our mission is to operate as the premier private, non-profit educational institute for emerging health professions in Alberta. We exist to ensure that Albertans and healthcare professionals are active contributors in:

- **Reducing chronic illness.**
- **Eliminating unnecessary, dangerous, and expensive procedures and drugs.**
- **Saving lives.**

We ensure Albertans are Strong and Free.



## Program Mandate & Educational Philosophy

### The Professional Doctorate Standard in Primary Care

The Doctor of Acupuncture program is a Competitive Professional Doctorate. It is mandated to produce clinicians who possess the critical thinking, diagnostic capability, and ethical grounding in primary care.

The curriculum shall reflect new innovations in Medical Orthopaedic Assessment, Injection Treatments, and Musculoskeletal Pain Management. Emphasis is placed on patient sovereignty, setting healthy boundaries, and psychosocial principles in primary care.

Blending Eastern traditions of self-care and family focused care with Western business and medical pragmatism. Graduates must demonstrate the capacity to manage successful, ethical practices that contribute to the economic and physical health of the province.



## Admissions & Student Selection

*To recruit the best and most dedicated minds and maintain academic discipline.  
Building a community that reinvests into the mission of the program.*

1. Alignment with Medical Standards: Admission to the program shall be competitive. Requirements will mirror the academic and character rigor found in the University of Calgary MD program. This includes high benchmarks for GPA, prerequisite science education, and panel interviews to assess emotional intelligence and resilience.
2. Fairness and Transparency: In accordance with CAA Standard 2, all admissions policies shall be fair, objective, transparent, and applied equitably.



## Governance & Operational Discipline

The program shall:

be overseen by engaged leaders committed to maintaining an overarching ethical and accountable infrastructure.

1. Continuous Improvement (CAA Standard 7): The Institution is mandated to perform rigorous self-assessment. Student assessment methods must be fair, transparent, and support ongoing improvement.
2. Faculty Excellence (CAA Standard 4): The Faculty shall consist of highly skilled professionals who are qualified and experienced. They will be provided the support necessary to uphold the "Crown" standard of excellence in teaching.



## Facilities & Clinical Education

*Adherence to standards and safety.*

1. Clinical Environment (CAA Standard 3 & 6): Facilities, equipment, and supplies shall align with learning outcomes and meet current professional standards for safety and patient care.
2. Clinical Mastery: The program must ensure clinics are well-managed and provide adequate practice opportunities.
3. Outcome: Graduates must acquire the knowledge, skills, judgment, and abilities to provide safe, ethical, and patient-centered care (CAA Standard 5).



## Commitment to Industry & Community

*Connecting a community of dedicated professionals.*

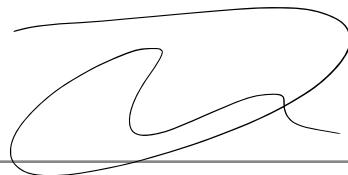
The Yue-Gustafson School pledges to:

1. Upgrade health care education in Alberta to medical standards within the interdisciplinary context.
2. Integrate life-saving First Aid/CPR (Canadian Red Cross) into the core competency of all graduates.
3. Foster a professional community that champions evidence-based health care while respecting the health, heritage and sovereignty of the People of Alberta.
4. The Program shall strictly adhere to the *Standards for Acupuncture Education Programs* established by the College of Acupuncturists of Alberta, under the authority of the Health Professions Act of Alberta, the full text of which is incorporated into this Charter as Appendix A.



RATIFIED BY THE PRESIDENT THIS 21<sup>st</sup> DAY OF DECEMBER, 2025

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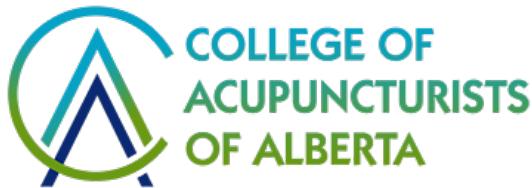
A handwritten signature in black ink, appearing to read "Jaeger Gustafson", is placed over a horizontal line.

Dr. Jaeger Gustafson, Dr.Ac., RMT

*Co-Founder & President*



## Appendix A



# Acupuncture Education Program Review Policy

## 1. Introduction

The College of Acupuncturists of Alberta (College) is responsible for regulating the Acupuncture Profession under the *Health Professions Act* (Act). In accordance with s.3(1)(f), of the Act, the College may approve programs of study and education courses for the purposes of registration requirements. The College establishes a review process to evaluate both new and established acupuncture education programs for approval. Acupuncture education program review supports the College's mandate of public protection, ensuring that individuals who enter the acupuncture profession have the knowledge, skills, and judgment to practice safely, ethically and competently.

## 2. Purpose

The purpose of this policy is to establish a framework for the review, evaluation, and approval of acupuncture education programs.

## 3. Definitions

**Acupuncture Education Program (AEP):** Programs offered as qualifying their graduates to meet the education requirements established by the College.

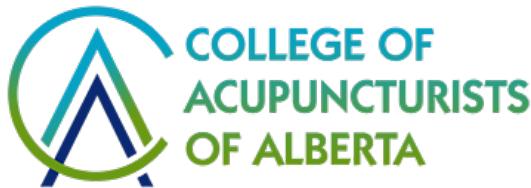
**Council:** The Council of the College established under section 5 of the Act.

**Program Review Standard:** The minimum requirements that **AEPs** must meet to gain approval by the College, as approved by the **Council**.

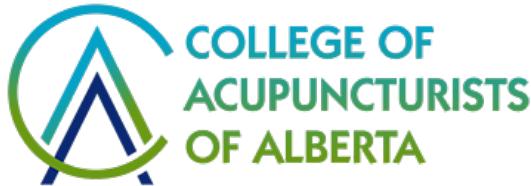
## 4. Policy

4.1 The program review process will be managed in accordance with the following guiding principles:

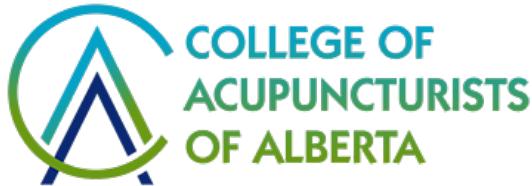
- 4.1.1 Regulatory-focused: The **Program Review Standard** (Appendix 1) and process align with the College's mandate to protect public interest and ensure program compliance with relevant regulatory requirements.
- 4.1.2 Transparent: The **Program Review Standard**, policies and decisions are made available to schools, the public, and other stakeholders.
- 4.1.3 Objective: The evaluation and decision making are conducted objectively, based on standardized criteria to ensure fairness and consistency.



- 4.1.4 Continuous improvement: Program compliance is evaluated to identify and support improvements.
- 4.2 To be approved by the College and maintain approval status, **AEPs** must meet the **Program Review Standard** approved by the **Council**.
- 4.3 Each criterion in the **Program Review Standard** is assigned a level:
  - 4.3.1 Essential criteria – These are essential for ensuring program safety, ethics and/or the achievement of learning outcomes and graduate competency.
  - 4.3.2 Beneficial criteria – Meeting these criteria demonstrates a commitment to quality, though they are not mandatory.
- 4.4 **AEPs** are assessed against the **Program Review Standard** and are required to provide evidence of compliance in a form and format acceptable to the College, which may include site visits. In addition, **AEPs** must submit an annual compliance report to confirm ongoing compliance.
- 4.5 To assess compliance with the **Program Review Standard**, the College may need to review confidential documents, including patient records and student files.
- 4.6 **AEPs** are evaluated on each criterion in the **Program Review Standard** and assigned one of the following ratings:
  - 4.6.1 Met – The requirement is in place and operational.
  - 4.6.2 Partially Met – The **AEP** is taking steps to meet the requirement, but it is not yet fully implemented in policy, process, or practice.
  - 4.6.3 Unmet – The requirement is not in place, or the current practice is potentially unsafe or unethical.
- 4.7 All information, documents, and correspondence about program reviews will be kept confidential by the College and will not be disclosed to third parties except as follows:
  - 4.7.1 The College may disclose any information obtained about **AEPs** through program review-related activities to the Government of Alberta.
  - 4.7.2 A list of currently approved programs and program approval information is made public and available on the College's website.
  - 4.7.3 Information may be disclosed as otherwise required or authorized by law.



- 4.8 The Acupuncture Education Program Review Committee (AEP RC) is responsible for evaluating program review results and making recommendations to the **Council**.
- 4.9 The Executive Director/Registrar (ED/Registrar), on behalf of the **Council**, acts upon recommendations from the AEP RC regarding education program approval. The ED/Registrar must report to the **Council** at the earliest opportunity on the actions taken on its behalf.
- 4.10 The **Council** makes the ultimate decision on program approval and has the authority to vary any decision previously made by the ED/Registrar.
- 4.11 The **Council**, after considering the report and recommendations from the Committee respecting an **AEP**, may grant the following approval status:
  - 4.11.1 Preliminary Approval – for new **AEPs** that demonstrate a minimum of 70% compliance with the Essential criteria (70% Met).
  - 4.11.2 Full Approval – for established **AEPs** that demonstrate full compliance with the Essential criteria (100% Met).
  - 4.11.3 Approval with Progress Report Submission – for established **AEPs** that demonstrate a minimum of 70% compliance with the Essential criteria, with none being Unmet.
  - 4.11.4 Provisional Approval – for established **AEPs** that demonstrate less than 70% compliance (less than 70% Met) or has failed to comply with the progress report submission.
  - 4.11.5 Withdrawal of Approval – **AEPs** with preliminary approval or provisional approval, or those who have received a warning under section 4.12 and fail to comply with the conditions imposed by the **Council**.
  - 4.11.6 Denial – for new **AEPs** that demonstrate less than 70% compliance with the Essential criteria (less than 70% Met). Initial program approval application is denied.
- 4.12 In addition to granting an approval status, the **Council** may require an **AEP** to provide progress reports or impose conditions related to their approval status. If these requirements or conditions are not met, the College may issue a warning for withdrawal of approval.
- 4.13 Approval term of an **AEP** is based on their approval status:
  - 4.13.1 Preliminary Approval – 2 years
  - 4.13.2 Full Approval – 5 years
  - 4.13.3 Approval with Progress Report Submission – 2 years
  - 4.13.4 Provisional Approval – 1 year



- 4.14 An **AEP**'s approval status continues until a new status or extension is issued.
- 4.15 The approval term of an approved program status may be revised and/or a site visit may be conducted if there is evidence to inform the following:
  - 4.15.1 Proposed substantive changes impacting a program's ability to meet the **Program Review Standard**.
  - 4.15.2 Non-compliance in reporting, including **AEPs** that do not satisfy the annual compliance report or progress report.
  - 4.15.3 Non-compliance with the **Program Review Standard**, including failure to comply with imposed conditions, that presents a risk to public safety and the ability of the institution to deliver the education program.
  - 4.15.4 Verified investigation of complaints about program quality or delivery that demonstrate non-compliance with the **Program Review Standard**.
  - 4.15.5 Additional factors that may give the College reason to believe that the program may not be meeting the **Program Review Standard**.

## 5. Authority

This policy is established under the authority of Corporate Governance Policy G.1.2, which delegates the authority for the Executive Director to establish policies and procedures for the management and operation of the College for regulatory program policies and Policy G.1.5, which delegates responsibility for the Executive Director to design, develop, administer and deliver College programs and services in accordance with the established goals and targets set out in the strategic and business plans.

## 6. Scope

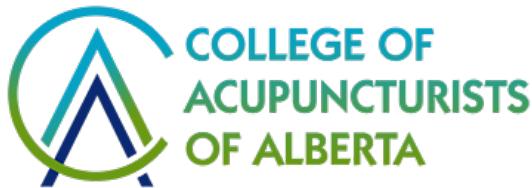
This policy applies to new and established **AEPs** seeking approval or re-approval in Alberta.

## 7. Related Policies and Procedures

- R.1.3.1 Acupuncture Education Program Review Procedure

## 8. Version History

Date	Notes
December 18, 2024	New policy
July 4, 2025	Minor edits to improve clarity



## Appendix 1 – Program Review Standard

### The Structure of the Standard

The standard is divided into seven sections which address each aspect of education program operations. They are:

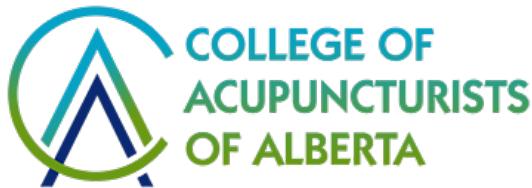
1. Leadership and Governance
2. Education Program Information and Admissions
3. Facilities Management
4. Human Resources
5. Curriculum
6. Clinics
7. Student Assessment

Each standard section has the following structure:

- Intent: Each section of the standard begins with an overarching statement of intent.
- Criteria: Criteria are numbered as 1.1, 1.2, 2.1 etc. within each standard section. Each criterion asks programs to show how they meet a specific, measurable element of achieving the intent for the standard section. Each criterion will be rated individually by site visitors.
- Criteria Level: Each criterion is given a level of Essential or Beneficial.

Essential	These are essential for ensuring program safety, ethics and/or the achievement of learning outcomes and graduate competency.
Beneficial	Meeting these criteria demonstrates a commitment to quality, though they are not mandatory. These criteria represent best practices, or markers of program quality. Meeting Beneficial criteria should be part of a program's quality improvement initiatives.

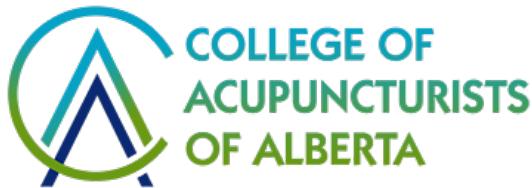
- Potential Evidence: For most criteria, the standard also provides examples of evidence that an education program could provide to show how it meets the criterion. Potential evidence lists are provided as examples only and are not exhaustive or prescriptive.



## Standard 1: Leadership and Governance

To ensure the development and maintenance of an overarching ethical and accountable infrastructure overseen by engaged leaders who are committed to providing all students with high acupuncture education based on critical thinking and clinical reasoning.

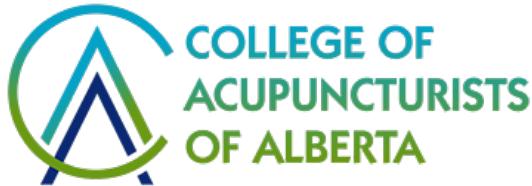
Number	Criterion	Potential Evidence
1.1	The education program has a formally adopted mandate or statement of purpose and associated learning outcomes. These are regularly reviewed and revised as needed to ensure that the program effectively prepares students to practice as healthcare practitioners and maintains a focus on quality practice.	<ul style="list-style-type: none"><li>Education program mandate or statement of purpose and learning outcomes</li><li>Schedule for review of mandate or statement of purpose and learning outcomes</li><li>Results of recent reviews</li><li>Curriculum and master syllabi</li><li>Hours of study for academic, clinic, and practical/lab components</li><li>Graduation success rate</li><li>Pan-Canadian and provincial examination success rate</li><li>Graduate practice success rate</li></ul>
1.2	The education program and its clinic(s) have current licences or permits, as required, and meet applicable statutory and regulatory requirements to operate.	<ul style="list-style-type: none"><li>Business registration and licensing documents for the education program and its clinic(s), as proof of good standing</li><li>Bylaw inspection document</li><li>Safety clearance permit</li><li>Description of how the applicable requirements in the <i>Safety Handbook</i> are met</li></ul>
1.3	Roles, responsibilities, reporting structures, and accountabilities are defined by the education program.	<ul style="list-style-type: none"><li>Organizational chart or another similar document</li><li>Position descriptions for all staff</li><li>Description of management structure</li></ul>



## Standard 2: Education Program Information and Admissions

To ensure education program information is accurate, and admissions policies and procedures are fair, objective, transparent, and applied equitably to all prospective students.

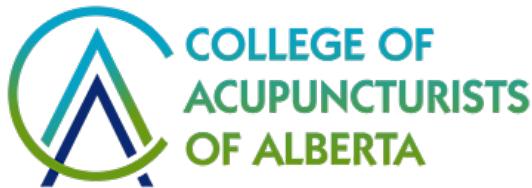
Number	Criterion	Potential Evidence
2.1	Online and hard copy advertising and marketing materials accurately represent the education program and the profession and meet applicable statutory and regulatory requirements.	<ul style="list-style-type: none"><li>Link to website or other sources of information about the education program and the faculty</li><li>Education program brochure</li><li>Examples of previous and current advertising and marketing materials on different platforms</li></ul>
2.2	Admission policies, procedures, and practices are consistent with students achieving the statement of purpose and are regularly reviewed to determine their effectiveness and revised, as necessary.	<ul style="list-style-type: none"><li>Policy, procedures, and rationale on admission, including English language proficiency requirements</li><li>Policy on criminal record checks</li></ul>
2.3	Students are informed about the College's registration requirements.	<ul style="list-style-type: none"><li>Student contract</li><li>Policy and procedures on admission</li></ul>
2.4	Admission requirements are applied consistently for all students.	<ul style="list-style-type: none"><li>List of admission requirements</li><li>Examples of applicants who were not accepted and the reasons for the rejections</li></ul>



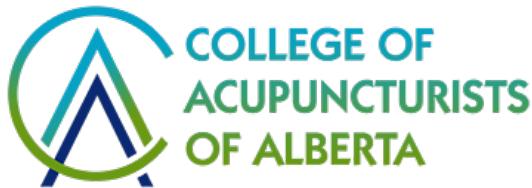
## Standard 3: Facilities Management

To ensure education program facilities, equipment, and supplies align with learning outcomes and meet current professional standards for safety and patient care.

Number	Criterion	Potential Evidence
3.1	Facilities are sufficient to meet the education program's purpose and learning outcomes.	<ul style="list-style-type: none"> <li>Blueprint/floor plan of facility identifying areas listed below, with photos of each:           <ul style="list-style-type: none"> <li>Classrooms, showing well-defined boundaries and privacy</li> <li>Clinics and labs</li> <li>Faculty and staff lounge/eating area and student lounge/eating area that are independent from clinic and practical/lab areas and do not disturb classroom activities</li> <li>Accessible washrooms, as per jurisdictional requirements</li> <li>Storage space for faculty and staff belongings</li> </ul> </li> </ul>
3.2	Clinic and practical/lab equipment meet applicable operational safety statutory and regulatory requirements.	<ul style="list-style-type: none"> <li>Emergency evacuation plan</li> <li>Maintenance and cleaning logs</li> <li>Processes to maintain fire extinguishers, sprinklers, and other similar safety equipment</li> <li>Inspection reports or other documentation showing building codes are met</li> </ul>
3.3	Program facilities, including classrooms, clinics, and labs, and program equipment meet applicable statutory and regulatory infection prevention and control requirements.	<ul style="list-style-type: none"> <li>Infection prevention and control policy manual that includes proper handwashing techniques</li> <li>Position descriptions that show responsibility for infection prevention and control</li> <li>List of staff who have completed infection prevention and control training</li> <li>A list of program equipment, including acupuncture equipment (e.g., needles), with descriptions of how infection prevention and control requirements are met for each item</li> <li>Protocols and procedures for the safe use of all tools and equipment in clinics and practical/lab areas</li> </ul>
3.4	Clinics and practical/lab areas are stocked with appropriate and sufficient materials and disposal containers, consistent with learning outcomes and applicable statutory and regulatory safety requirements.	<ul style="list-style-type: none"> <li>Clinic resource management manual</li> <li>Position description for clinic co-ordinator, if one exists</li> <li>Inventory logs</li> <li>Schedules for laundry and sharps return</li> </ul>



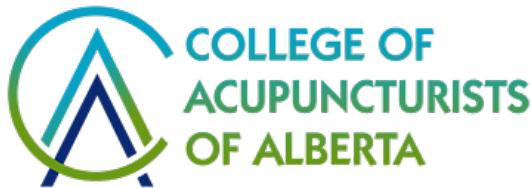
Number	Criterion	Potential Evidence
3.5	Clinic and practical/lab materials are disposed of safely and in accordance with applicable statutory and regulatory requirements.	<ul style="list-style-type: none"><li>• Clinic resource management manual</li><li>• Position description for clinic co-ordinator, if one exists</li></ul>
3.6	Students are provided with information about physical and mental health services that are available on campus or through external service providers.	<ul style="list-style-type: none"><li>• Health services information and resources are made available to students, including a list of the nearest hospital and health care centres</li><li>• Procedure to direct students to external health services</li><li>• If there is an on-campus clinic, list of health services offered</li><li>• Examples of referrals to health services</li></ul>



## Standard 4: Human Resources

To ensure faculty are qualified, experienced, and have the support they need to teach students effectively and help them meet learning outcomes.

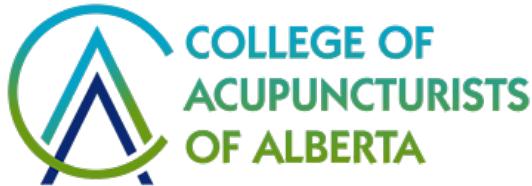
Number	Criterion	Potential Evidence
4.1	Faculty have relevant educational credentials and/or relevant professional experience and education and demonstrated competence in the areas they are assigned to teach.	<ul style="list-style-type: none"><li>• Faculty contracts</li><li>• Faculty CVs</li><li>• Faculty licenses and/or diplomas</li><li>• Course evaluations</li><li>• Criminal record checks for faculty</li><li>• Job descriptions</li></ul>
4.2	Clinic supervisors and practical/lab faculty who performs and/or supervises restricted activities are registered members who are in good standing with the respective college and hold an active practice permit.	<ul style="list-style-type: none"><li>• Clinic supervisor and practical/lab faculty CVs</li><li>• Clinic supervisor and practical/lab faculty licences and certifications</li><li>• Job descriptions</li></ul>
4.3	Clinic supervisors and practical/lab faculty consist of registered acupuncturists with diverse backgrounds and a minimum of 5 years of experience.	<ul style="list-style-type: none"><li>• Clinic supervisor and practical/lab faculty CVs</li><li>• Clinic supervisor and practical/lab faculty licences and certifications</li><li>• Job descriptions</li></ul>



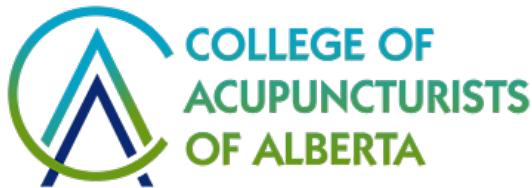
## Standard 5: Curriculum

To ensure students have academic and practical learning opportunities so they can acquire the knowledge, skills, judgment, and abilities they need to provide safe, ethical, and patient-centred care.

Number	Criterion	Potential Evidence
5.1	The curriculum is based on the most recent version of the Canadian Alliance of Regulatory Bodies of Traditional Chinese Medicine Practitioners and Acupuncturists (CARB-TCMPA) Entry-level Occupational Competency Profile.	<ul style="list-style-type: none"> <li>Map of the education program curriculum to CARB-TCMPA competencies, performance indicators, and domains of learning</li> <li>Education program overview and curriculum</li> <li>Course syllabi</li> </ul>
5.2	The curriculum is organized and taught in a logical sequence. This sequence should build on foundational concepts, progressively introducing more complex and advanced topics in a manner that enhances student learning and competency.	<ul style="list-style-type: none"> <li>Program curriculum</li> <li>Course syllabi</li> <li>Class schedule</li> </ul>
5.3	All course instructions and materials are conducted and provided in English.	<ul style="list-style-type: none"> <li>Course syllabi</li> <li>Required reference materials for each course</li> </ul>
5.4	Theory courses that do not have a clinical or practical/lab component may be offered online, in accordance with applicable statutory and regulatory guidelines; clinical and practical/lab courses are offered in-person.	<ul style="list-style-type: none"> <li>Course syllabi</li> <li>Course delivery format</li> </ul>
5.5	Asynchronous courses, if offered, encourage interaction and participation among students and between students and the faculty teaching the course.	<ul style="list-style-type: none"> <li>Course syllabi</li> <li>Learning management software with the necessary functionality</li> <li>Examples of participation channels, such as virtual meetings, discussion boards, and working groups</li> </ul>
5.6	Comprehensive course syllabi are available for each course.	<ul style="list-style-type: none"> <li>Course syllabi</li> </ul>
5.7	The program includes a minimum of 1,900 study hours that meets the criteria set out below: <ul style="list-style-type: none"> <li>At least 500 of those hours are dedicated to clinical instruction.</li> <li>During the 500 clinical hours, students see a minimum of 200 patient visits.</li> <li>Out of the 200 patient visits, at least 50 are new patients.</li> </ul>	<ul style="list-style-type: none"> <li>Total hours for each program</li> <li>Total hours for each course, including class time and practice time</li> <li>Student and clinic patient logs</li> <li>Records of case studies</li> </ul>



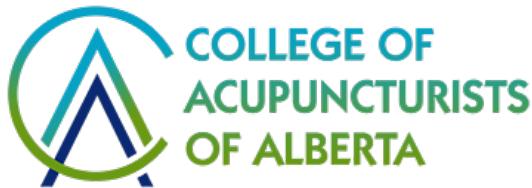
Number	Criterion	Potential Evidence
	<ul style="list-style-type: none"> <li>Up to 30 of the 50 new patients may be represented as case studies.</li> <li>Each case study may count as 1.5 new patients towards the requirement. (e.g., 20 new patient visits plus 20 case studies fulfill the 50 new patient visits requirement).</li> <li>No more than 70% of the treated patients are treated for musculoskeletal injuries or conditions.</li> </ul> <p>This structure ensures comprehensive instruction in entry-level competencies.</p>	
5.8	Practical/lab classes do not exceed a ratio of 16:1.	<ul style="list-style-type: none"> <li>Logs showing records of students and supervisors</li> <li>Class lists</li> <li>List of teaching assistants if they are used to maintain ratios</li> <li>Rationale for the ratio used</li> </ul>
5.9	Student attendance for clinical and practical/lab courses is tracked.	<ul style="list-style-type: none"> <li>Policy on attendance</li> <li>Attendance records for clinical and practical/lab courses</li> </ul>
5.10	The program, the curriculum, and the courses are regularly evaluated to address public safety, and the results are used to make improvements as required.	<ul style="list-style-type: none"> <li>Documentation of safety issues and incidents arising out of the program, curriculum, and course evaluations, and action plans showing response to identified issues</li> </ul>



## Standard 6: Clinics

To ensure clinics are well-managed and provide students with the adequate practice opportunities, quality facilities, and effective supervision to help them develop the practical skills needed to treat a variety of conditions and symptoms in a safe, effective, and ethical way and prepares them for future success.

Number	Criterion	Potential Evidence
6.1	At least one local clinic is affiliated with the education program, either owned and operated or approved for use through a memorandum of understanding.	<ul style="list-style-type: none"> <li>Location of clinic(s) affiliated with the program, and the nature of the affiliations</li> <li>Floor plan showing in-house clinic, if one exists</li> </ul>
6.2	Clinic(s) are monitored by the program to ensure the clinic(s) meet the program's requirements for student learning and there is appropriate licensure and insurance coverage.	<ul style="list-style-type: none"> <li>Memorandum of Understanding or similar document showing agreements with external clinics</li> </ul>
6.3	A minimum of 50 percent of supervised student clinic hours take place at the clinic that is owned and operated by the education program.	
6.4	The clinic supervisory ratio does not exceed 7:1 for supervised practice.	<ul style="list-style-type: none"> <li>Clinic logs showing records of students, supervisors, and clinic patients</li> <li>Class lists</li> <li>Rationale for the ratio used</li> </ul>
6.5	Clinic instruction includes practice, observation, diagnosis, and evaluation.	
6.6	Clinic supervisors are informed about and familiar with student progress in their programs (e.g., courses completed) and students' stages of learning.	
6.7	Safety requirements in clinics meet applicable statutory and regulatory requirements.	<ul style="list-style-type: none"> <li>Clinic safety manual provided to students</li> <li>Examples of signs (handwashing, cleaning) posted in the clinic or practical/lab areas</li> </ul>
6.8	Clinic records, including financial, patient logs, and equipment maintenance, meet applicable statutory and regulatory requirements.	<ul style="list-style-type: none"> <li>Policy on clinic records</li> <li>Templates of clinic records</li> </ul>
6.9	Records for clinic patients who are treated by students meet applicable statutory and regulatory requirements.	<ul style="list-style-type: none"> <li>Templates of patient records, including treatment records and incident reports</li> </ul>
6.10	Clinic faculty, students, and patients are protected in policy and practice from discrimination and physical and verbal harassment including sexual harassment; bullying; violence; and other inappropriate behaviour.	<ul style="list-style-type: none"> <li>Policy on discrimination and harassment, bullying, violence, and other inappropriate behaviour</li> <li>Policy on cultural sensitivity and anti-racism</li> <li>Procedure to file a complaint</li> <li>Examples of incidents and how they were handled</li> </ul>



## Standard 7: Student Assessment

To ensure student assessment methods are fair and transparent, support ongoing improvement in student learning, and are applied equitably.

Number	Criterion	Potential Evidence
7.1	Students' academic and clinical skills are assessed and documented regularly by faculty and clinic supervisors based on CARB-TCMPA entry-level occupational competencies.	<ul style="list-style-type: none"><li>• Program assessment strategy or checklist</li><li>• Course syllabi</li><li>• Examples of assessment tools, rubrics, and clinical and practical/lab evaluations</li></ul>
7.2	Clinic and practical/lab courses include a practical evaluation based on CARB-TCMPA entry-level occupational competencies.	<ul style="list-style-type: none"><li>• Examples of practical evaluations for clinical and practical/lab courses</li></ul>
7.3	The program has a systematic plan for ongoing assessment of student achievement of the CARB-TCMPA entry-level occupational competencies (and any additional competencies added by the program) based on the principles of competency-based education.	<ul style="list-style-type: none"><li>• Program assessment strategy or checklist</li><li>• Course syllabi</li><li>• Examples of assessment tools, rubrics, and clinical and practical/lab evaluations</li></ul>

**Canadian Alliance of Regulatory Bodies for Traditional Chinese Medicine  
Practitioners and Acupuncturists (CARB)**

**Pan-Canadian Standards for  
Traditional Chinese Medicine Practitioners and Acupuncturists:**

**Performance Indicators and Assessment Blueprints  
for the Entry-Level Occupational Competencies**

**Recommended to the Provincial Regulatory Authorities  
October 24 2010  
REVISED May 12 2015**

**Pan-Canadian Standards for  
Traditional Chinese Medicine Practitioners and Acupuncturists:  
Performance Indicators and Assessment Blueprints**

**Introduction**

The Performance Indicators and Assessment Blueprints are based upon Entry-Level Occupational Competencies for the Practice of Traditional Chinese Medicine in Canada, developed in 2009-2010 by the Canadian Alliance of Regulatory Bodies for TCM Practitioners and Acupuncturists (CARB).

The Performance Indicators (PIs) describe actions that regulators will require of registration candidates, in order to demonstrate proficiency in the occupational competencies.

The regulators will rely upon two assessment vehicles:

1. Assessment that takes place within an educational program in TCM and / or Acupuncture
2. Assessment by means of a registration examination developed and administered by the regulators, comprising written (multiple-choice) and clinical case study components

The Assessment Blueprints provide information on the which PIs may be tested in each assessment vehicle.

The following definitions apply to this document.

**Definition of an Occupational Competency**

An Occupational Competency is:

*A job function that can be carried out to a specified level of proficiency*

**Definition of Entry-Level Proficiency**

The following statement defines Entry-Level Proficiency, and applies to all Occupational Competencies:

*When presented with routine situations, the entry-level practitioner applies each relevant competency in a manner consistent with generally accepted standards in the profession, without supervision or direction, and within a reasonable timeframe.*

*The practitioner selects and applies competencies in an informed manner. The practitioner anticipates what outcomes to expect in a given situation, and responds appropriately.*

*The entry-level practitioner recognizes unusual, difficult to resolve and complex situations which may be beyond his / her capacity. The practitioner takes appropriate and ethical steps to address these situations, which may include seeking consultation or supervision, reviewing research literature, or referring the patient.*

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**Introduction**

**Definition of a Performance Indicator**

A Performance Indicator is:

*An externally-observable task that may be undertaken by an individual within an assessment vehicle\*, successful completion of which provides an indication of the individual's capacity to perform an occupational competency.*

*\* assessment vehicles utilized by the regulators are (1) assessment within an educational program, and (2) assessment within a registration examination.*

Performance Indicators for each Occupational Competency are listed in the Performance Indicator Grid that follows.

**Complexity of Performance Indicators**

Occupational competencies and performance indicators may differ in complexity. Distinguishing complexity levels assists in learning

Domain	Complexity	Descriptor
<b>Cognitive (knowledge and thinking skills)</b>		
	Level 1	Performance involves remembering information
	Level 2	Performance involves comprehending & applying information
	Level 3	Performance involves analyzing and interpreting information
	Level 4	Performance involves synthesizing (creating new) information
<b>Psychomotor (hands-on activities)</b>		
	Level 1	Performance involves carrying out simple patterns and tasks
	Level 2	Performance involves carrying out complex patterns and tasks & making minor adjustments based upon outcome
	Level 3	Performance involves adapting tasks to new situations
	Level 4	Performance involves developing new tasks
<b>Affective (beliefs and values that affect cognitive and psychomotor actions)</b>		
	Level 1	Performance involves recognizing, and responding within, a required system of beliefs and values
	Level 2	Performance involves choosing (preferring) to function within a particular system of beliefs and values
	Level 3	Performance involves internalizing a system of beliefs and values and instinctively functioning within it

At entry-level, functioning at Cognitive Level 4, Psychomotor Level 4 and Affective Level 3 is not an expectation.

**Assessment Blueprint for the Registration Examination**

Some PIs will be assessed in the registration examination, which consists of written and clinical case study components.

The written component is in multiple-choice format, and lends itself to the assessment of cognitive and (to some extent) affective PIs.

The clinical case study (CCS) component consists of 6-8 case studies with open-ended responses.

The PIs that are assessed through the registration examination are indicated with a check mark in columns I and J of the PI Grid. In the case of the CCS examinations, the candidate is asked to "describe how to perform" a particular Performance Indicator

**Assessment Blueprint for Educational Programs**

Evaluation of students within educational programs lends itself to the assessment of cognitive, psychomotor and affective PIs.

Educational programs in TCM and Acupuncture are expected to include:

- Academic education which takes place in a classroom or through guided independent study, in which students develop knowledge and thinking skills, and beliefs and values, which enable them to demonstrate relevant PIs. Assessment of academic education must take place through written and / or oral examinations designed to determine proficiency based upon the criterion in the table below.
- Practical education, in which students work directly with an experienced practitioner and a simulated patient, to develop hands-on abilities which enable them to demonstrate relevant PIs. Assessment of practical education must take place through practical examinations designed to determine proficiency based upon the criterion in the table below.
- Clinical education, in which students work directly with patients in a setting designed to provide patient care. Students must be supervised throughout their clinical education, in a manner that facilitates their development of clinical abilities while ensuring that patient care is safe, effective and ethical. Assessment of relevant PIs must take place in a manner designed to determine proficiency based upon the criterion in the table below.

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<b>Assessment Environment</b>	<b>Criterion for Success</b>
Academic, A	Performance consistent with the definition of Entry-Level Proficiency in an academic assessment environment (such as a written or oral examination)
Simulated, S	Repeated and reliable performance consistent with the definition of Entry-Level Proficiency in a simulated environment (such as utilizing a mannequin, model or simulated patient)
Clinical, C	Repeated and reliable performance consistent with the definition of Entry-Level Proficiency in a clinical environment with a variety of patients

Performance Indicators must be evaluated by educational programs in the Assessment Environment(s) identified in columns K, L and M of the PI Grid. Programs may be called upon to demonstrate to regulators that prior to graduation they assess student performance of PIs in this manner.

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Performance Indicator Grid

	A	B	C	D	E	F	G	H	I	J	K	L	M
1	Herbology										Assessment in Registration Exam		Assessment in Educational Program
2	Core Acupuncture		Occupational Competencies		Performance Indicators	Cognitive	Psychomotor	Affective	Written	Clinical Case Study	Academic	Simulated	Clinical
3	Core												
4	1.1	Utilize professional communication.											
5	a	Speak effectively, using appropriate terminology.											
6				1	Speak clearly and concisely using biomedical terminology.	2	1				x		
7				2	Speak clearly and concisely using TCM terminology.	2	1				x		
8				3	Convey TCM concepts using plain language.	3				✓	x		x
9				4	Utilize appropriate body language when speaking.	1	1	1				x	x
10	b	Write effectively, using appropriate terminology.											
11				1	Write clearly and concisely using plain language.	2	1			✓	x		x
12				2	Write clearly and concisely using biomedical terminology.	2	1			✓	x		x
13				3	Write clearly and concisely using TCM terminology.	2	1			✓	x		x
14				4	Use common medical abbreviations in written communications and medical records.	1	1			✓	x		x
15				5	Write legibly.	1	1			✓	x		x
16	c	Comprehend written information.											

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1	Herbology					Domains of Learning & Complexities			Assessment in Registration Exam		Assessment in Educational Program		
2	Core Acupuncture		Occupational Competencies		Performance Indicators	Cognitive	Psychomotor	Affective	Written	Clinical Case Study	Academic	Simulated	Clinical
3	Core Acupuncture												
17				1	Comprehend information written in plain language.	2			✓	✓	x		
18				2	Comprehend information written using medical terminology.	2			✓	✓	x		
19				3	Comprehend information written using TCM terminology.	2			✓	✓	x		
20	d	Comprehend information presented orally.											
21				1	Comprehend oral communication in plain language.	2					x	x	
22				2	Comprehend oral communication using biomedical terminology.	2					x		
23				3	Comprehend oral communication using TCM terminology.	2					x		
24	e	Ensure effectiveness of communication.											
25				1	Assess recipient's capacity to comprehend and communicate.	3				✓		x	
26				2	Describe commonly-encountered communication problems in TCM practice.	2				✓	x		
27				3	Adopt communication approach that is meaningful to recipient.	2					x	x	
28				4	Confirm recipient understands communication.	1					x	x	
29				5	Demonstrate active listening.	1	1	1			x	x	

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2	Core Acupuncture		Occupational Competencies		Performance Indicators	Cognitive	Psychomotor	Affective			Clinical Case Study			
3	Core Acupuncture											Academic	Simulated	Clinical
30		f	Communicate with professional integrity.											
31				1	Describe the relevance of information to topic at hand.	2		1		✓	x			
32				2	Convey information completely and accurately.	1		1		✓			x	
33				3	Convey information in an objective manner.	2				✓		x	x	
34				4	Distinguish fact from opinion.	2				✓			x	
35				5	Distinguish between professional and personal opinions.	2				✓	x	x	x	
36				6	Adopt a non-judgmental stance.	2		1		✓		x	x	
37		g	Respond to non-verbal communication.											
38				1	Describe commonly-encountered body language.	1				✓	x			
39				2	Respond appropriately to recipient's body language.	1	1	1		✓		x	x	
40		h	Respond to sources of interpersonal conflict.											
41				1	Describe factors that may create interpersonal conflict.	2				✓	x			
42				2	Explain the possible outcomes of failing to address interpersonal conflict.	2				✓	x			
43				3	Describe strategies that may help resolve interpersonal conflict.	2				✓	x			

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3	Core Acupuncture												
44		1.2	Develop and maintain effective inter-professional relationships.										
45		e	Work cooperatively in an interdisciplinary health care setting.										
46				1	Describe the structure of health care in Canada.	1			✓	✓	x		
47				2	Describe the role of TCM in an inter-professional health care setting.	2			✓	✓	x		
48				3	Describe the role of TCM practice within the provincial health care system.	2			✓	✓	x		
49				4	Identify the functions of other service providers commonly encountered in the practice setting.	1			✓	✓	x		
50				5	Describe situations in which inter-professional collaboration would be of benefit to the patient.	2			✓	✓	x		
51		b	Develop productive working relationships.										
52				1	Respect colleagues and other service providers.			2			x	x	x
53				2	Contribute TCM information to the patient care team.	3						x	
54				3	Identify professional differences that may lead to conflict.	2		2			x		

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	A	B	C	D	E	F	G	H	I	J	K	L	M
1	Herbology												
2	Acupuncture		Occupational Competencies		Performance Indicators	Cognitive	Psychomotor	Affective					
3	Core												
55				4	Participate as an active team member.	2		2					x
56		1.3	Develop and maintain effective relationships with patients.										
57		a	Show respect toward patients as individuals.										
58				1	Explain the importance of respecting diverse cultures and lifestyle choices in TCM practice.	2				✓	x		
59				2	Demonstrate positive regard toward patient.			2		✓			x
60				3	Describe commonly-encountered challenges to establishing an effective therapeutic relationship in TCM practice.	3				✓	x		
61				4	Describe strategies to enhance the therapeutic relationship in TCM practice.	3				✓	x		
62	b		Exhibit compassion toward patients.										
63				1	Demonstrate supportive and caring interaction with patients.			2					x
64				2	Demonstrate concern for patient's well-being.			2					x
65	c		Maintain practitioner / patient boundaries.										
66				1	Describe the concepts of transference and countertransference.	2			✓	✓	x		

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3	Core Acupuncture												
67				2	Describe an appropriate response to situations of transference.	2			✓	✓	x		
68				3	Describe an appropriate response to situations of countertransference.	2			✓	✓	x		
69				4	Demonstrate empathy with professional detachment.			2					x
70				5	Explain the implications of the power differential in the patient - practitioner relationship.	2			✓	✓	x		
71	d		Facilitate honest, reciprocal communication.										
72				1	Explain the importance of disclosing complete information concerning patient's state of health and treatment.	2				✓	x		
73				2	Fully disclose information to patient.	1	1	2		✓			x
74				3	Probe for patient's opinions relative to treatment.	2	1	2		✓			x
75				4	Respond to patient questions.	2	1	2		✓			x
76	e		Encourage patient to take responsibility for his / her health.										
77				1	Demonstrate participation in decision-making with the patient.	2		2		✓			x

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78				2	Advise patient on importance of self-care and health maintenance.	1	1			✓		x	x
79				3	Provide patient with options for continuity of care.	1				✓		x	x
80				4	Respect patient's right to access the health care of their choice.	1		2		✓			x
81	2.1	Comply with legal requirements.											
82	a	Apply to practice current, relevant federal and provincial / territorial legislation.											
83				1	Identify relevant federal legislation and related requirements.	2			✓	✓	x		
84				2	Identify relevant provincial / territorial legislation and related requirements.	2			✓	✓	x		
85				3	Comply with relevant federal legislation and related requirements.	2	1					x	
86				4	Comply with relevant provincial / territorial legislation and related requirements.	2	1						x
87	b	Apply to practice current requirements of regulatory body.											
88				1	Identify requirements of regulatory body.	2			✓	✓	x		
89				2	Comply with requirements of regulatory body.	2	1						x

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3	Core Acupuncture	c	Apply to practice current, relevant requirements of municipal and other local authorities.										
90		c	Apply to practice current, relevant requirements of municipal and other local authorities.										
91				1	Identify local regulations relevant to operating a practice.	2				✓	x		
92				2	Comply with local regulations relevant to operating a practice.	2	1						x
93		2.2	Practice in a manner that accords patient dignity and reflects patient rights.										
94		a	Ensure that patient is aware of treatment plan, its benefits and risks.										
95				1	Explain the role of acupuncture in patient's overall health care.	2				✓			x
96				2	Explain the role of TCM herbal treatment in patient's overall health care.	2				✓			x
97				3	Discuss treatment options with patient.	2	1	2		✓		x	x
98				4	Explain treatment procedures.	1	1			✓		x	x
99				5	Discuss anticipated outcomes of treatment.	2	1			✓		x	x
100				6	Discuss risks inherent in treatment.	2	1			✓		x	x
101		b	Ensure ongoing, informed consent.										
102				1	Explain the importance of ongoing, informed consent.	2			✓	✓	x		

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103				2	Obtain consent to commence treatment.	1		1				x	x
104				3	Discuss treatment outcomes and progress with patient on a regular basis.	3		2				x	x
105				4	Assess patient's level of satisfaction with treatment.	3		2				x	x
106				5	Maintain ongoing consent to treatment.	1		1				x	x
107	c	Respect patient rights to privacy and confidentiality.											
108				1	Explain the importance of maintaining patient privacy and confidentiality.	2			✓	✓	x		
109				2	Maintain confidentiality with regard to patient information.	1				✓			x
110				3	Maintain privacy during professional interactions with patient.	1	1			✓			x
111				4	Demonstrate appropriate draping during assessment and treatment.		2					x	x
112				5	Comply with patient wishes regarding privacy and confidentiality.	2		1		✓			x
113				6	Involve patient support person / guardian / advocate, when indicated.	1		2		✓			x
114	d	Terminate course of treatment when appropriate.											

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3	Core Acupuncture												
115					1	Describe situations and conditions that indicate termination of treatment.	2			✓	x		
116					2	Describe the importance of continuity of patient care.	2		✓	✓	x		
117					3	Describe procedures required for termination of therapeutic relationship.	2			✓	x		
118	2.3	Maintain practitioner self-care.											
119	a	Maintain personal health and wellness in the context of professional practice.			1	Identify the physical, mental and emotional signs of stress.	2		✓	x			
120					2	Describe strategies to reduce stress.	2			✓	x		
121					3	Maintain physical, mental and emotional health consistent with provision of effective patient care.	1	1			x	x	
122	b	Exhibit professional deportment.			1	Describe the importance of appropriate professional deportment.	1		✓	x			
123					2	Maintain personal hygiene.	1				x	x	
124					3	Maintain personal grooming appropriate to practice setting.	1	1			x	x	
125					4	Dress in a professional manner appropriate to practice setting.	1	1			x	x	
126													
127											x	x	

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2	Core Acupuncture		Occupational Competencies		Performance Indicators	Cognitive	Psychomotor	Affective	Written	Clinical Case Study	Academic	Simulated	Clinical
128	2.4	Practice with professional integrity.											
129	a	Practice within limits of expertise.											
130				1	Identify limits of practitioner's personal expertise.	2			✓	✓	x		
131				2	Demonstrate practice within limits of practitioner's personal expertise.	2	2				x	x	
132	b	Modify practice to enhance effectiveness.											
133				1	Demonstrate critical self-reflection of performance.	1	2		✓	x	x	x	
134				2	Develop and implement plan to enhance effectiveness of personal practice of TCM.	2			✓	x			
135	c	Exhibit professional behaviour.											
136				1	Maintain honesty in all professional activities.		2		✓	x	x	x	
137				2	Describe ethical dilemmas that are commonly encountered in TCM practice.	2	1	✓	✓	x			
138				3	Identify situations involving conflict of interest.	2	1	✓	✓	x			
139				4	Take responsibility for decisions and actions.	1	2		✓		x	x	
140	d	Remain current with developments in acupuncture practice.											

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2	Core Acupuncture		Occupational Competencies		Performance Indicators			Cognitive	Psychomotor	Affective	Written	Clinical Case Study	Academic	Simulated	Clinical
3	Core Herbology				1	Identify sources that provide information on developments in the practice of acupuncture.	1				✓	x			
141					2	Search for information using current technology.	1					x			
142					3	Assess validity and reliability of published information.	3					x			
143					4	Assess relevance of new information to acupuncture practice.	3					x			
144		e	Remain current with developments in TCM herbology practice.												
145					1	Identify sources that provide information on developments in the practice of TCM herbology.	1				✓	x			
146					2	Search for information using current technology.	1					x			
147					3	Assess validity and reliability of published information.	3					x			
148					4	Assess relevance of new information to TCM herbology practice.	3					x			
149												x			
150		3.1	Maintain patient records.												
151		a	Ensure complete and accurate records.												

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2	Acupuncture		Occupational Competencies		Performance Indicators	Cognitive	Psychomotor	Affective			Clinical Case Study			
3	Core											Academic	Simulated	Clinical
152				1	Document patient information in a timely manner.	1	1						x	x
153				2	Demonstrate comprehensive documentation of history, assessment and treatment information.	1	1						x	x
154				3	Document patient-specific financial information.	1	1							x
155				4	Demonstrate consistency in record keeping.	1	1						x	x
156				5	Ensure that records are legible.		1						x	x
157	b		Ensure security and integrity of records.											
158				1	Describe procedures to maintain physical security of records.	2			✓	✓	x			
159				2	Describe procedures to ensure privacy and confidentiality of records.	2			✓	✓	x			
160				3	Describe procedures for appropriate patient access to records.	2			✓	✓	x			
161				4	Identify requirements for preservation and disposal of records.	1			✓	✓	x			
162	3.2		Utilize effective business strategies.											
163	a		Ensure sound financial management.											
164				1	Develop a sustainable business plan.	3					x			

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1	Herbology										Assessment in Registration Exam		Assessment in Educational Program	
2	Core Acupuncture		Occupational Competencies		Performance Indicators	Cognitive	Psychomotor	Affective			Clinical Case Study			
3	Core Acupuncture											Academic	Simulated	Clinical
165				2	Explain the importance of complete and accurate business record keeping.	2						x		
166				3	Describe required statutory filings.	1						x		
167				4	Describe requirements for preservation of business records.	1						x		
168				5	Describe approaches to monitor business performance.	2						x		
169				6	Explain the importance of professional liability and malpractice insurance.	1						x		
170	b		Employ ethical business practices.											
171				1	Communicate fee and payment policies to patient in advance.	1	1			✓			x	
172				2	Describe ethical billing practices.	2	1	✓	✓	x				
173				3	Describe ethical advertising practices.	2	1	✓	✓	x				
174	c		Establish office procedures and supervise staff accordingly.											
175				1	Identify activities that require standardized procedures.	2						x		
176				2	Develop clear procedural directions.	2	1					x		
177				3	Demonstrate basic principles of good supervision.	2		2				x		
178				4	Describe requirements for mandatory working conditions for staff.	1						x		

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2	Core Acupuncture		Occupational Competencies		Performance Indicators	Cognitive	Psychomotor	Affective	Written	Clinical Case Study	Academic	Simulated	Clinical
3	Core Acupuncture												
179		4.1	Apply fundamental knowledge of the following Traditional Chinese Medicine principles in diagnosis and treatment.										
180		a	yin yang										
181				1	Describe the yin yang theory in general.	2	1	✓		x			
182				2	Describe the yin yang theory in relation to TCM.	2	1	✓		x			
183		b	wu xing (five elements)										
184				1	Describe the wu xing (five elements) theory in general.	2	1	✓		x			
185				2	Describe the wu xing (five elements) theory in relation to TCM.	2	1	✓		x			
186		c	zang xiang (organ theories)										
187				1	Describe the general features, physiological functions and pathological changes of the zang-fu organs.	2	1	✓		x			
188				2	Describe the interrelationships between zang-fu organs, both in physiology and pathology.	2	1	✓		x			
189		d	jing luo & shu xue (channels, collaterals, and acupuncture points)										

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1	Herbology					Domains of Learning & Complexities			Assessment in Registration Exam		Assessment in Educational Program		
2	Acupuncture		Occupational Competencies		Performance Indicators	Cognitive	Psychomotor	Affective	Written	Clinical Case Study	Academic	Simulated	Clinical
3	Core												
190				1	Describe the components of the <i>jīng luo</i> (channels, collaterals, acupuncture points) system, including its distribution and interconnections.	2		1	✓		x		
191				2	Describe the functions of the <i>jīng luo</i> (channels, collaterals, acupuncture points) system in physiology and pathology.	2		1	✓		x		
192				3	Describe the general features and functions of acupuncture points.	2		1	✓		x		
193				4	Describe the symptoms and signs associated with disorders of the <i>jīng luo</i> (channels, collaterals, acupuncture points) system.	2		1	✓		x		
194	e	qi, xue, jin ye, jing, & shen (qi, blood, body fluid, essence, spirit)											
195				1	Define the TCM concepts of <i>qi</i> , <i>xue</i> , <i>jin ye</i> , <i>jing</i> , & <i>shen</i> (qi, blood, body fluid, essence, spirit).	2		1	✓		x		
196				2	Describe the functions of <i>qi</i> , <i>xue</i> , <i>jin ye</i> , <i>jing</i> , & <i>shen</i> (qi, blood, body fluid, essence, spirit).	2		1	✓		x		

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1	Herbology					Domains of Learning & Complexities			Assessment in Registration Exam		Assessment in Educational Program		
2	Core Acupuncture		Occupational Competencies		Performance Indicators	Cognitive	Psychomotor	Affective	Written	Clinical Case Study	Academic	Simulated	Clinical
3	Core Acupuncture					Cognitive	Psychomotor	Affective					
197				3	Describe the pathologies of <i>qi</i> , <i>xue</i> , <i>jin ye</i> , <i>jing</i> , & <i>shen</i> ( <i>qi</i> , <i>blood</i> , <i>body fluid</i> , <i>essence</i> , <i>spirit</i> ).	2		1	✓		x		
198	f		<i>ti zhi</i> (constitution)										
199				1	Describe the TCM concept of <i>ti zhi</i> (constitution).	2		1	✓		x		
200				2	Identify the TCM pathologies associated with the various types of <i>ti zhi</i> (constitution).	1		1	✓		x		
201	g		<i>bing yin</i> (etiology)										
202				1	Describe the TCM model of <i>bing yin</i> (etiology).	2		1	✓		x		
203				2	Define and categorize the <i>bing yin</i> (etiology).	2		1	✓		x		
204	h		<i>bing ji</i> (pathogenesis)										
205				1	Describe the TCM concept of <i>bing ji</i> (pathogenesis).	2		1	✓		x		
206	i		<i>yu fang</i> (prevention)										
207				1	Describe the TCM concept of <i>yu fang</i> (prevention).	2		1	✓		x		
208	j		<i>zhi ze</i> (principles of treatment)										

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3	Core	Acupuncture				1	2	1					
209				1	Identify the <i>zhi ze</i> (principles of treatment) corresponding to each <i>bing ji</i> (pathogenesis).	1		1	✓		x		
210		k	<i>yang sheng</i> (health preservation)										
211				1	Describe the TCM concept of <i>yang sheng</i> (health preservation).	2		1	✓		x		
212				2	Explain the principles and methods of <i>yang sheng</i> (health preservation).	2		1	✓		x		
213	4.2	<b>Apply fundamentals of acupuncture in diagnosis and treatment.</b>											
214	a	Characterize the following points.											
215		<i>jing xue</i> (points of the 14 channels)											
216				1	Identify the points in the <i>jing xue</i> (points of the 14 channels) grouping referring to World Health organization standard nomenclature, as listed in Appendix 1.	1			✓		x		
217				2	Locate the <i>jing xue</i> (points of the 14 channels) using the <i>gu du</i> (proportional measurement) method.	1	1			✓		x	
218				3	Describe the required needling depth and angle for the <i>jing xue</i> .	2			✓	✓	x		
219				4	Describe the functions of the <i>jing xue</i> (points of the 14 channels).	2		1	✓		x		

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2	Core Acupuncture		Occupational Competencies		Performance Indicators	Cognitive	Psychomotor	Affective	Written	Clinical Case Study	Academic	Simulated	Clinical
220			<i>jing wai qi xue</i> (extra points)										
221				1	Identify the common points in the <i>jing wai qi xue</i> (extra points) grouping, as listed in Appendix 2.	1			✓		x		
222				2	Locate the common <i>jing wai qi xue</i> (extra points).	1	1			✓		x	
223				3	Describe the required needling depth and angle for the <i>jing wai qi xue</i> (extra points).	2			✓	✓	x		
224				4	Describe the functions of the <i>jing wai qi xue</i> (extra points).	2		1	✓		x		
225	b		Apply knowledge of the following special groupings of points, in treatment planning:										
226			<i>wu shu xue</i> (five transporting points)										
227				1	Identify <i>wu shu xue</i> (five transporting) points.	1			✓		x		
228				2	Describe the theoretical basis for <i>wu shu xue</i> (five transporting) points.	2		1	✓		x		
229				3	Describe the therapeutic significance of the <i>wu shu xue</i> (five transporting) points.	2		1	✓		x		
230			<i>yuan xue</i> (source points)										
231				1	Identify the points in the <i>yuan xue</i> (source points) grouping.	1			✓		x		

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2	Core Acupuncture		Occupational Competencies		Performance Indicators			Cognitive	Psychomotor	Affective	Written	Clinical Case Study	Academic	Simulated	Clinical
232				2	Describe the theoretical basis for the <i>yuan xue</i> .	2		1	✓			x			
233				3	Describe the therapeutic significance of the <i>yuan xue</i> .	2		1	✓			x			
234			<i>luo xue</i> (connecting points)												
235				1	Identify <i>luo xue</i> (connecting) points.	1			✓			x			
236				2	Describe the theoretical basis for <i>luo xue</i> (connecting) points.	2		1	✓			x			
237				3	Describe the therapeutic significance of the <i>luo xue</i> (connecting) points.	2		1	✓			x			
238			<i>xi xue</i> (cleft points)												
239				1	Describe <i>xi xue</i> (cleft) points.	1			✓			x			
240				2	Describe the theoretical basis for <i>xi xue</i> (cleft) points.	2		1	✓			x			
241				3	Describe the therapeutic significance of the <i>xi xue</i> (cleft) points.	2		1	✓			x			
242			<i>bei shu xue</i> (transport points)												
243				1	Describe <i>bei shu xue</i> (back transport) points.	1			✓			x			
244				2	Describe the theoretical basis for <i>bei shu xue</i> (back transport) points.	2		1	✓			x			
245				3	Describe the therapeutic significance of the <i>bei shu xue</i> (back transport) points.	2		1	✓			x			

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246			<i>mu xue</i> (front / mu points)										
247				1	Describe <i>mu xue</i> (front) points.	1			✓		x		
248				2	Describe the theoretical basis for <i>mu xue</i> (front) points.	2		1	✓		x		
249				3	Describe the therapeutic significance of the <i>mu xue</i> (front) points.	2		1	✓		x		
250			<i>xia he xue</i> (lower sea points)										
251				1	Describe <i>xia he xue</i> (lower sea) points.	1			✓		x		
252				2	Describe the theoretical basis for <i>xia he xue</i> (lower sea) points.	2		1	✓		x		
253				3	Describe the therapeutic significance of the <i>xia he xue</i> (lower sea) points.	2		1	✓		x		
254			<i>ba mai jiao hui xue</i> (eight confluent points)										
255				1	Describe the <i>ba mai jiao hui xue</i> (eight confluent) points.	1			✓		x		
256				2	Describe the theoretical basis for <i>ba mai jiao hui xue</i> (eight confluent) points.	2		1	✓		x		
257				3	Describe the therapeutic significance of the <i>ba mai jiao hui xue</i> (eight confluent) points.	2		1	✓		x		
258			<i>ba hui xue</i> (eight (influential) points)										
259				1	Describe the <i>ba hui xue</i> (eight meeting (influential)) points.	1			✓		x		

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2	Core Acupuncture		Occupational Competencies		Performance Indicators	Cognitive	Psychomotor	Affective	Written	Clinical Case Study	Academic	Simulated	Clinical
260				2	Describe the theoretical basis for ba hui xue (eight meeting (influential)) points.	2		1	✓		x		
261				3	Describe the therapeutic significance of the ba hui xue (eight meeting (influential)) points.	2		1	✓		x		
262			zi mu xue (mother / child points)										
263				1	Describe the zi mu xue (mother / child) points.	1			✓		x		
264				2	Describe the theoretical basis for zi mu xue (mother / child) points.	2		1	✓		x		
265				3	Describe the therapeutic significance of the zi mu xue (mother / child) points.	2		1	✓		x		
266			jiao hui xue (channel crossing points)										
267				1	Describe the jiao hui xue (channel crossing) points.	1			✓		x		
268				2	Describe the theoretical basis for jiao hui xue (channel crossing) points.	2		1	✓		x		
269				3	Describe the therapeutic significance of the jiao hui xue (channel crossing) points.	2		1	✓		x		
270			a shi xue (ah shi points)										
271				1	Describe the theoretical basis for the a shi xue (ah shi) points.	2		1	✓		x		

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3	Core Acupuncture												
272				2	Describe the therapeutic significance of the <i>a shi xue (ah shi) points</i> .	2		1	✓		x		
273			ear and scalp acupuncture										
274				1	Describe the theoretical basis for ear acupuncture.	2		1	✓		x		
275				2	Identify auricular acupuncture points.	1			✓	✓	x		
276				3	Locate auricular acupuncture points.	1	1			✓		x	
277				4	Describe the functions of auricular acupuncture points.	2		1	✓		x		
278				5	Describe the theoretical basis for scalp acupuncture.	2		1	✓		x		
279				6	Identify scalp acupuncture zones.	1			✓		x		
280				7	Locate scalp acupuncture zones.	1	1			✓		x	
281				8	Describe the functions of scalp acupuncture zones.	2		1	✓		x		
282	c		Select points for assessment.										
283				1	Describe acupuncture point assessment techniques, and relate them to <i>jing luo</i> theory.	2		1	✓	✓	x		
284				2	Describe the diagnostic significance of acupuncture point assessment techniques, and relate them to the <i>jing luo</i> theory.	2		1	✓	✓	x		

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3													
285				3	Describe acupuncture point assessment techniques, and relate them to patient presentation.	2		1	✓	✓	x		
286				4	Describe the diagnostic significance of acupuncture point assessment techniques, and relate them to patient presentation.	2		1	✓		x		
287	d		Select points or areas for therapy.										
288				1	Devise a point formula for the treatment of syndromes associated with the illnesses listed in Appendix 5.	3		1	✓	✓	x		
289				2	Describe the relationship between the point formula and the principle(s) of treatment.	2		1	✓	✓	x		
290				3	Explain how local anatomy affects the selection of points and areas for therapy.	2			✓	✓			
291				4	Explain how acupuncture point functions and indications affect the selection of points and areas for therapy.	2		1	✓	✓	x		
292				5	Explain how precautions and contraindications affect the selection of points and areas for therapy.	2		1	✓	✓	x		
293	e		Select stimulation techniques.										
294				1	Describe the functions and therapeutic aims of needling techniques.	2		1	✓	✓	x		

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295				2	Describe the functions and therapeutic aims of moxibustion techniques.	2		1	✓	✓	x		
296				3	Describe the functions and therapeutic aims of cupping techniques.	2		1	✓	✓	x		
297				4	Justify the stimulation techniques selected to achieve specified therapeutic outcome.	3		1	✓	✓	x		
298	f		Apply knowledge of precautions and contraindications for application of stimulation techniques.										
299				1	Explain the precautions and contraindications related to needling.	2		1	✓	✓	x		
300				2	Explain the precautions and contraindications related to moxibustion.	2		1	✓	✓	x		
301				3	Explain the precautions and contraindications related to cupping.	2		1	✓	✓	x		
302				4	Explain the precautions and contraindications related to <i>tui na / an mo</i> (including acupressure).	2		1	✓	✓	x		
303				5	Explain the precautions and contraindications related to <i>gua sha</i> .	2		1	✓	✓	x		
304	g		Apply knowledge of:										
305			<i>tui na / an mo</i> (acupressure)										

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3	Core Acupuncture												
306				1	Describe the theoretical basis for <i>tui na / an mo</i> (acupressure).	2		1	✓		x		
307				2	Identify each of the major <i>tui na / an mo</i> (acupressure) techniques, including the functions and therapeutic indications of the technique.	1		1	✓		x		
308				3	Describe the therapeutic significance of <i>tui na / an mo</i> (acupressure).	2		1	✓		x		
309				4	Justify the use of <i>tui na / an mo</i> (acupressure) to achieve a specified therapeutic outcome.	3		1	✓		x		
310			qi gong / tai ji										
311			qi gong / tai ji	1	Describe the theoretical basis for <i>qi gong / tai ji</i> .	2		1	✓		x		
312			qi gong / tai ji	2	Describe the therapeutic significance of <i>qi gong / tai ji</i> .	2		1	✓		x		
313			qi gong / tai ji	3	Explain the precautions and contraindications related to <i>qi gong / tai ji</i> .	2		1	✓		x		
314			gua sha										
315			gua sha	1	Describe the theoretical basis for <i>gua sha</i> .	2		1	✓		x		
316			gua sha	2	Describe the therapeutic significance of <i>gua sha</i> .	2		1	✓		x		

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3	Core		4.3 Apply knowledge of the following properties and functions of TCM herbs in treatment planning:										
317		a	<i>si qi</i> (four properties)										
318				1	Describe the <i>si qi</i> (four properties).	1	1	✓		x			
319				2	Describe the actions of herbs in relation to <i>si qi</i> (four properties).	2	1	✓		x			
320				3	Describe the therapeutic significance of <i>si qi</i> (four properties).	2	1	✓		x			
321				4	Identify the <i>si qi</i> (four properties) of the herbs listed in Appendix 3.	1		✓		x			
322		b	<i>wu wei</i> (five flavours)										
323				1	Describe the <i>wu wei</i> (five flavours).	1	1	✓		x			
324				2	Describe the actions of herbs in relation to <i>wu wei</i> (five flavours).	2	1	✓		x			
325				3	Describe the therapeutic significance of <i>wu wei</i> (five flavours).	2	1	✓		x			
326				4	Identify the <i>wu wei</i> (five flavours) of the herbs listed in Appendix 3.	1		✓		x			
327		c	<i>sheng jiang fu chen</i> (ascending, descending, floating, sinking)										
328				1	Describe <i>sheng jiang fu chen</i> (ascending, descending, floating, sinking).	1	1	✓		x			
329													

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330				2	Describe the actions of herbs in relation to <i>sheng jiang fu chen</i> (ascending, descending, floating, sinking).	2		1	✓		x				
331				3	Describe the therapeutic significance of <i>sheng jiang fu chen</i> (ascending, descending, floating, sinking).	2		1	✓		x				
332				4	Identify the <i>sheng jiang fu chen</i> (ascending, descending, floating, sinking) of the herbs listed in Appendix 3.	1			✓		x				
333	d		<i>gui jing</i> (channel tropism)												
334				1	Describe <i>gui jing</i> (channel tropism).	1	1	✓			x				
335				2	Describe the actions of herbs in relation to <i>gui jing</i> (channel tropism).	2		1	✓		x				
336				3	Describe the therapeutic significance of <i>gui jing</i> (channel tropism).	2		1	✓		x				
337				4	Identify the <i>gui jing</i> (channel tropism) of the herbs listed in Appendix 3.	1			✓		x				
338	e		actions												
339				1	Describe the actions of herbs.	2	1	✓			x				
340				2	Describe the relationship between action and categorization of herbs.	2		1	✓		x				
341				3	Differentiate the actions of herbs within the same category.	2		1	✓		x				

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3	Core												
342				4	Describe the relationship between actions and the indications of herbs.	2		2	✓		x		
343				5	Describe the therapeutic significance of the actions of herbs.	2		1	✓		x		
344				6	Identify the actions of the herbs listed in Appendix 3.	2			✓		x		
345	f		indications										
346				1	Describe the indications of herbs.	2		1	✓		x		
347				2	Describe the therapeutic significance of the indications.	2		2	✓		x		
348				3	Identify the indications of the herbs listed in Appendix 3.	2			✓		x		
349	g		toxicity										
350				1	Describe the concept of toxicity of herbs.	1		1	✓		x		
351				2	Describe the dosage ranges and cautions when using toxic herbs.	2		1	✓		x		
352				3	Identify herbs that are designated as toxic or restricted under Canadian regulations.	1			✓		x		
353	h		pao zhi (processing)										
354				1	Describe pao zhi (processing).	1			✓		x		
355				2	Describe the effects of pao zhi (processing).	1		1	✓		x		

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3	Core												
356	4.4	Apply knowledge of herbal formulating strategies, with reference to:											
357	a	composition of formula											
358			1	Describe the general principles of composition of formulas.		1		1	✓		x		
359			2	Describe the composition of the formulas listed in Appendix 4.		2			✓		x		
360			3	Analyse the composition of formulas listed in Appendix 4.		2		2	✓		x		
361	b	modification of formula											
362			1	Describe the principles of substitution of formula constituents.		2		1	✓		x		
363			2	Describe the principles of alteration of the ratio of constituents.		2		1	✓		x		
364			3	Describe the principles of changes in dosage form of the formulas.		2		1	✓		x		
365	c	functions & classifications											
366			1	Describe the classification system for formulas.		1		1	✓		x		
367			2	Identify the classification of the formulas listed in Appendix 4.		2		1	✓		x		
368			3	Describe the clinical relevance of each class of formula.		2		1	✓		x		

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3	Core			4	Describe the principal actions of formulas listed in Appendix 4.	2			✓		x		
369				5	Differentiate the actions of formulas within the same class, for formulas listed in Appendix 4.	2		2	✓		x		
370				6	Select formula to achieve a specified therapeutic outcome.	3		2	✓	✓	x		
372	d		combinations & compatibility										
373				1	Describe the compatibility and incompatibility of herbs.	1			✓		x		
374				2	Describe the therapeutic significance of herbal combinations.	2		1	✓		x		
375				3	Select a combination of herbs to achieve a specified therapeutic outcome.	3		2	✓	✓	x		
376	e		dosage form & methods of administration										
377				1	Describe the dosage forms of herbal formulas.	1		1	✓		x		
378				2	Describe the methods of preparation for each dosage form.	1			✓		x		
379				3	Describe the methods of administration for herbal formulas.	1			✓		x		
380	f		dosage										

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3	Core													
381				1	Identify the general dosage ranges of the herbs listed in Appendix 3 and the formulas listed in Appendix 4.	2			✓		x			
382				2	Determine dosage of herbs to achieve a specified therapeutic outcome.	2		2	✓	✓	x			
383	g		potential adverse effects											
384				1	Describe potential adverse effects of herbal formulas.	2		1	✓	✓	x			
385				2	Describe methods to prevent adverse effects.	2		2	✓	✓	x			
386				3	Describe actions to take in the event of adverse effects.	2		2	✓	✓	x			
387	h		contraindications & precautions											
388				1	Describe contraindications for herbal formulas.	1		1	✓	✓	x			
389				2	Describe precautions for herbal formulas.	1		1	✓	✓	x			
390	4.5	Apply knowledge of the following herb interactions in treatment planning:												
391	a	herb – drug interactions												
392				1	Describe potential interactions between herbs and commonly-used drugs.	1			✓	✓	x			
393				2	Modify treatment plan based on potential herb-drug interactions.	2		1	✓	✓	x	x	x	

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3	Core												
394		b	herb – herb interactions										
395				1	Describe potential herb-herb interactions.	1			✓	✓	x		
396				2	Modify treatment plan based on potential herb-herb interactions.	2	1	✓	✓	x	x	x	
397		c	herb – food interactions										
398				1	Describe potential herb-food interactions.	1			✓	✓	x		
399				2	Modify treatment plan based on potential herb-food interactions.	2	1	✓	✓	x	x	x	
400		d	herb – natural health product interactions										
401				1	Describe potential herb-natural health product interactions.	1			✓	✓	x		
402				2	Modify treatment plan based on potential herb-natural health product interactions.	2	1	✓	✓	x	x	x	
403		5.1	Apply basic biomedical concepts to TCM practice:										
404		a	human anatomical structures										
405				1	Describe basic cell structure and processes.	1			✓		x		
406				2	Describe the structure and function of the body tissues.	1			✓		x		
407				3	Explain the organization of the body systems.	2			✓		x		

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3	Core												
408				4	Locate the major bones, muscles, and blood supply of the head, trunk and limbs.	1	1		✓	✓	x	x	
409				5	Describe the range of joint articulation and the role of major muscles in movement coordination.	2			✓		x		
410				6	Identify the areas of the abdomen and thorax and the corresponding internal structures.	1			✓	✓	x	x	
411				7	Identify the surface anatomical structures required to locate acupuncture points.	1			✓	✓	x	x	
412				8	Identify local anatomy of locations at which acupuncture presents an inherent risk of injury.	2		1	✓	✓	x	x	
413	b		biochemical processes										
414				1	Describe the structures and functions of DNA, RNA, and proteins.	1			✓		x		
415				2	Describe the bioenergetics and metabolism of carbohydrates and lipids.	2			✓		x		
416				3	Describe the metabolism of proteins, amino acids and nucleic acids.	2			✓		x		
417				4	Explain the roles of minerals, vitamins, enzymes and hormones.	2			✓		x		
418	c		control mechanisms										

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3	Core Acupuncture					Cognitive	Psychomotor	Affective						
419				1	Explain the primary functions of the body systems.	1			✓		x			
420				2	Describe the co-ordination and regulation of the body systems.	2			✓		x			
421				3	Describe the role of the control mechanisms in maintaining homeostasis.	2			✓		x			
422				4	Relate homeostatic imbalance to common dysfunctions of the body systems.	2			✓		x			
423	d		infectious diseases and infection control											
424					1	Describe the role of microorganisms in infectious diseases.	2			✓		x		
425					2	Describe immunity and mechanisms of host resistance.	2			✓		x		
426					3	Describe the principles of infection control, and the effects of antibiotics and vaccines.	2			✓		x		
427	e		dysfunctions and common diseases											
428					1	Identify causal factors of the common diseases listed in Appendix 6.	1			✓	✓	x		
429					2	Describe the processes of tissue damage, inflammation and healing.	2			✓		x		
430					3	Identify signs and symptoms of common diseases listed in Appendix 6.	1			✓	✓	x		

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3	Core												
431				4	Describe biomedical disease classification systems.	2			✓		x		
432	5.2	Relate biomedical diagnostic and treatment approaches to TCM practice:											
433	a	diagnosis and treatment methods											
434				1	Identify the purpose of commonly used laboratory tests and diagnostic procedures.	2			✓	✓	x		
435				2	Identify abnormal findings in the results of laboratory tests, examinations and diagnostic imaging.	1			✓	✓	x		
436				3	Relate abnormal findings to common diseases listed in Appendix 6.	2			✓		x		
437				4	Identify typical medical and surgical treatments for common diseases listed in Appendix 6.	1			✓		x		
438				5	Identify the underlying principles of biomedical diagnostic and treatment approaches.	2			✓		x		
439	b	pharmacology											
440				1	Identify the therapeutic effects, adverse effects and signs and symptoms of toxicity of commonly used drugs from the drug categories listed in Appendix 7.	2			✓		x		

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3	Core												
441				2	Describe the concepts of pharmacokinetics and pharmacodynamics.	1			✓		x		
442				3	Classify commonly-used drugs from the drug categories listed in Appendix 7 according to their pharmacological actions.	1			✓		x		
443		5.3	Integrate TCM and biomedical concepts.										
444		a	Relate biomedical information concerning patient's condition and treatment to TCM state of health.										
445				1	Describe the relationship between biomedical diagnosis and TCM diagnosis.	3		2	✓		x		
446				2	Relate the actions of acupuncture to general biomedical concepts.	3		2	✓	✓	x		
447				3	Relate the actions of herbal treatment to general biomedical concepts.	3		2	✓	✓	x		
448				4	Identify the signs and symptoms, therapeutic effects and adverse effects of common biomedical treatments.	2			✓		x		
449		b	Communicate TCM diagnostic and treatment information for use by other health care workers, and to third parties.										

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450				1	Explain patient's TCM diagnosis and clinical progress using terms that are readily understood by other healthcare professionals.	3		2		✓	x	x	
451	6.1	Establish priorities for assessment and treatment planning.											
452	a	Identify chief complaint.		1	Elicit patient's reason(s) for seeking treatment.	2	2	2		✓	x	x	
453	b	Initiate assessment based upon chief complaint.											
454				1	Demonstrate directed interrogation and physical examinations of patient relevant to the chief complaint.	3	2			✓	x	x	
455	c	Recognize conditions that require urgent medical treatment, and direct patient appropriately.											
456				1	Describe the signs and symptoms of conditions that require urgent medical treatment.	2			✓		x		
457				2	Recognize conditions that require urgent medical treatment.	2			✓	✓	x	x	
458													

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459				3	Advise patient appropriately in the event of condition that requires urgent medical treatment.	2		2		✓			x		
460		d	Modify assessment strategy based upon emerging information.												
461				1	Describe the significance of both positive and negative findings for the patient.	2			✓	✓	x				
462				2	Justify modification of assessment strategy based on emerging information.	3			✓	✓	x	x	x		
463		e	Initiate collaboration, consultation or referral as appropriate.												
464				1	Identify conditions for which TCM modalities provide effective treatment.	2			✓		x				
465				2	Recognize conditions beyond practitioner's personal clinical knowledge and experience.	2			✓	✓	x	x	x		
466				3	Recognize unsatisfactory therapeutic outcome of treatment.	2			✓	✓	x	x	x		
467				4	Identify conditions for which TCM modalities do not provide the most appropriate treatment.	2			✓	✓	x				
468				5	Compare the effectiveness of TCM treatments with those of other common therapeutic approaches.	3			✓		x				

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469				6	Initiate collaboration, consultation or referral.	1		2		✓	x	x	
470	6.2	Assess patient.											
471	a	Collect information using <i>wang zhen</i> (TCM diagnostic inspection method).											
472				1	Describe the significance of <i>wang zhen</i> (TCM diagnostic inspection method).	2		1	✓		x		
473				2	Describe the diagnostic significance of <i>wang zhen</i> (TCM diagnostic inspection method).	2		1	✓		x		
474				3	Perform <i>wang zhen</i> (TCM diagnostic inspection method).		2	1		✓	x	x	
475	b	Collect information using <i>wen zhen</i> (TCM diagnostic inquiry method).											
476				1	Describe the significance of <i>wen zhen</i> (TCM diagnostic inquiry method).	2		1	✓		x		
477				2	Describe the diagnostic significance of <i>wen zhen</i> (TCM diagnostic inquiry method).	2		1	✓		x		
478				3	Perform <i>wen zhen</i> (TCM diagnostic inquiry method).		2	1		✓	x	x	
479	c	Collect information using <i>wen zhen</i> (TCM diagnostic auscultation and olfaction methods).											

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480				1	Describe the significance of <i>wen zhen</i> (TCM diagnostic auscultation and olfaction methods).	2		1	✓		x		
481				2	Describe the diagnostic significance of <i>wen zhen</i> (TCM diagnostic auscultation and olfaction methods) findings.	2		1	✓		x		
482				3	Perform <i>wen zhen</i> (TCM diagnostic auscultation and olfaction methods).	2	2	1		✓		x	x
483	d	Collect information using <i>qie zhen</i> (TCM diagnostic palpation method).											
484				1	Describe the significance of <i>qie zhen</i> (TCM diagnostic palpation method).	2		1	✓		x		
485				2	Describe the diagnostic significance of <i>qie zhen</i> (TCM diagnostic palpation method) findings.	2		1	✓		x		
486				3	Perform <i>qie zhen</i> (TCM diagnostic palpation method).	2	2	1		✓		x	x
487	e	Measure vital signs.											
488				1	Describe the significance of the vital signs.	2			✓		x		
489				2	Measure vital signs.		2					x	x
490				3	Identify abnormal vital signs.	2			✓	✓	x	x	x
491	f	Conduct relevant non-invasive physical examination.											

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3	Core	Acupuncture											
492				1	Describe the techniques and equipment used in physical examinations.	1			✓	✓	x		
493				2	Describe the diagnostic significance of physical examinations.	2			✓	✓	x		
494				3	Perform relevant physical examinations.	2					x	x	
495				4	Perform examinations in a manner that minimizes patient distress, embarrassment, and risk of injury.	2	2			✓	x	x	
496	6.3	Analyze assessment information.											
497	a	Organize and interpret the collected information using the following TCM syndrome differentiation methods:											
498				1	Justify the selection of TCM syndrome differentiation method(s) for a patient.	3		1	✓	✓	x	x	x
499				2	Integrate syndrome differentiation methods as necessary.	3		1	✓	✓	x	x	x
500		ba gang bian zheng (eight principles differentiation)											
501				1	Identify syndromes according to the <i>ba gang bian zheng</i> (eight principles differentiation) method.	1		1	✓		x		

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3	Core												
502				2	Formulate a syndrome diagnosis for a patient according to the <i>ba gang bian zheng</i> (eight principles differentiation) method.	3		1	✓	✓	x	x	x
503			<i>zang fu bian zheng</i> (organ theory differentiation)										
504				1	Describe <i>zang fu bian zheng</i> (organ theory differentiation).	1		1	✓		x		
505				2	Identify the main syndromes of the <i>zang fu bian zheng</i> (organ theory differentiation).	1		1	✓		x		
506				3	Describe the etiology of the syndromes of <i>zang fu bian zheng</i> (organ theory differentiation).	1		1	✓		x		
507				4	Formulate a syndrome diagnosis for a patient according to <i>zang fu bian zheng</i> (organ theory differentiation).	3		1	✓	✓	x	x	x
508			<i>wu xing bian zheng</i> (five elements differentiation)										
509				1	Describe <i>wu xing bian zheng</i> (five elements differentiation).	1		1	✓		x		
510				2	Identify the main syndromes of the <i>wu xing bian zheng</i> (five elements differentiation).	1		1	✓		x		

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3	Core	Acupuncture				Cognitive	Psychomotor	Affective					
511				3	Describe the etiology of the syndromes of wu xing bian zheng (five elements differentiation).	1		1	✓		x		
512				4	Formulate a syndrome diagnosis for a patient according to wu xing bian zheng (five elements differentiation).	3		1	✓	✓	x	x	x
513			san jiao bian zheng (triple warmer differentiation)										
514				1	Describe san jiao bian zheng (triple warmer differentiation).	1		1	✓		x		
515				2	Identify the main syndromes of the san jiao bian zheng (triple warmer differentiation).	1		1	✓		x		
516				3	Describe the etiology of the syndromes of san jiao bian zheng (triple warmer differentiation).	1		1	✓		x		
517				4	Formulate a syndrome diagnosis for a patient according to san jiao bian zheng (triple warmer differentiation).	3		1	✓	✓	x	x	x
518			wei qi ying xue bian zheng (four levels differentiation)										
519				1	Describe wei qi ying xue bian zheng (four levels differentiation).	1		1	✓		x		

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1	Herbology					Domains of Learning & Complexities			Assessment in Registration Exam		Assessment in Educational Program		
2	Core Acupuncture		Occupational Competencies		Performance Indicators	Cognitive	Psychomotor	Affective	Written	Clinical Case Study	Academic	Simulated	Clinical
3	Core	Acupuncture											
520				2	Identify the main syndromes of the wei qi ying xue bian zheng (four levels differentiation).	1		1	✓		x		
521				3	Describe the etiology of the syndromes of wei qi ying xue bian zheng (four levels differentiation).	1		1	✓		x		
522				4	Formulate a syndrome diagnosis for a patient according to wei qi ying xue bian zheng (four levels differentiation).	3		1	✓	✓	x	x	x
523			liu jing bian zheng (six stages differentiation)										
524				1	Describe liu jing bian zheng (six stages differentiation).	1		1	✓		x		
525				2	Identify the main syndromes of the liu jing bian zheng (six stages differentiation).	1		1	✓		x		
526				3	Describe the etiology of the syndromes of liu jing bian zheng (six stages differentiation).	1		1	✓		x		
527				4	Formulate a syndrome diagnosis for a patient according to liu jing bian zheng (six stages differentiation).	3		1	✓	✓	x	x	x
528			qi xue jin ye bian zheng (qi, blood, body fluid differentiation)										

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2	Acupuncture		Occupational Competencies		Performance Indicators	Cognitive	Psychomotor	Affective	Written	Clinical Case Study	Academic	Simulated	Clinical
3	Core												
529				1	Describe qi xue jin ye bian zheng (qi, blood, body fluid differentiation).	1		1	✓		x		
530				2	Identify the main syndromes of the qi xue jin ye bian zheng (qi, blood, body fluid differentiation).	1		1	✓		x		
531				3	Describe the etiology of the syndromes of qi xue jin ye bian zheng (qi, blood, body fluid differentiation).	1		1	✓		x		
532				4	Formulate a syndrome diagnosis for a patient according to qi xue jin ye bian zheng (qi, blood, body fluid differentiation).	3		1	✓	✓	x	x	x
533			bing yin bian zheng (pathogenic factors differentiation)										
534				1	Describe bing yin bian zheng (pathogenic factors differentiation).	1		1	✓		x		
535				2	Identify the main syndromes of the bing yin bian zheng (pathogenic factors differentiation).	1		1	✓		x		
536				3	Describe the etiology of the syndromes of the bing yin bian zheng (pathogenic factors differentiation).	1		1	✓		x		

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537				4	Formulate a syndrome diagnosis for a patient according to the bing yin bian zheng (pathogenic factors differentiation).	3		1	✓	✓	x	x	x
538			jing luo bian zheng (meridian differentiation)										
539				1	Describe jing luo bian zheng (meridian differentiation).	1		1	✓		x		
540				2	Identify the main syndromes of the jing luo bian zheng (meridian differentiation).	1		1	✓		x		
541				3	Describe the etiology of the syndromes of the jing luo bian zheng (meridian differentiation).	1		1	✓		x		
542				4	Formulate a syndrome diagnosis for a patient according to the jing luo bian zheng (meridian differentiation).	3		1	✓	✓	x	x	x
543	b		Incorporate information obtained from biomedical diagnostic data, medical and health history.										
544				1	Explain the relevance of biomedical diagnostic data, medical and health history in TCM diagnosis.	2			✓		x		

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2	Core Acupuncture		Occupational Competencies		Performance Indicators	Cognitive	Psychomotor	Affective	Written	Clinical Case Study	Academic	Simulated	Clinical
3	Core Acupuncture												
545				2	Identify conditions that require information on biomedical diagnostic data, medical and health history.	2			✓		x		
546				3	Obtain information on biomedical diagnostic data, medical and health history.	1	1					x	
547				4	Incorporate diagnostic information from another health care practitioner.	2			✓	✓	x	x	
548	c	Make TCM diagnosis.											
549				1	Formulate primary diagnosis according to the illnesses listed in Appendix 5.	3		1	✓	✓	x	x	x
550				2	Formulate secondary diagnoses, as necessary.	3		1	✓	✓	x	x	x
551				3	Differentiate the syndromes associated with the illnesses listed in Appendix 5.	2		1	✓		x		
552				4	Justify diagnoses for a patient based on clinical data.	3		1	✓	✓	x	x	x
553	6.4	Establish treatment plan based on diagnosis.											
554	a	Determine treatment goals and strategies.											
555				1	Identify the principles of treatment corresponding to pathogenic processes.	1		1	✓		x		

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3	Core Acupuncture												
556				2	Describe the TCM approach to the treatment of syndromes associated with the illnesses listed in Appendix 5.	2		1	✓		x		
557				3	Describe the concept of prioritization and its application to the treatment of illness.	2		1	✓		x		
558				4	Determine treatment principles.	3		1	✓	✓	x	x	x
559				5	Prioritize treatment goals for patient.	3		1	✓	✓	x	x	x
560				6	Describe the concept of <i>bu xie</i> (tonification and draining) and its application to the treatment of illness.	2		1	✓		x		
561				7	Determine and justify appropriate methods of treatment for a patient.	3		1	✓	✓	x	x	x
562				8	Determine the potential for success in treating patient with TCM.	3		1	✓	✓	x	x	x
563				9	Formulate and justify treatment plan.	3		1	✓	✓	x	x	x
564	b		Take into account precautions and contraindications.										
565				1	Describe complications or adverse reactions that could arise during the treatment of syndromes associated with the illnesses listed in Appendix 5.	2		1	✓		x		

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3	Core Acupuncture												
566				2	Describe contraindications for the treatment of syndromes associated with the illnesses listed in Appendix 5.	2		1	✓		x		
567				3	Modify treatment strategies and methods to account for contraindications, potential complications or adverse reactions that could arise during the treatment of syndromes associated with the illnesses listed in Appendix 5.	3		1	✓	✓	x	x	x
568	c		Adapt treatment according to patient characteristics and needs.										
569				1	Describe the modification of treatment strategies and methods based on patient characteristics and needs during the treatment of syndromes associated with the illnesses listed in Appendix 5.	2		1	✓		x		
570				2	Modify treatment strategies and methods to account for patient characteristics and needs during the treatment of a patient.	3		1		✓	x	x	x
571				3	Justify the modification of treatment strategies and methods to account for patient characteristics and needs during the treatment of a patient.	3		1	✓	✓	x	x	x

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572				4	Modify treatment based on effects and / or symptoms produced by non-TCM therapies.	3		1	✓	✓	x	x	x		
573	d		Select appropriate points, point combinations and / or treatment areas.												
574				1	Design a point formula appropriate to a patient.	3		1	✓	✓	x	x	x		
575	g		Select appropriate course of acupuncture treatment and therapeutic modalities.												
576				1	Determine point stimulation methods and techniques appropriate to a patient.	2		1	✓	✓	x	x	x		
577				2	Determine course of acupuncture treatment appropriate to a patient.	2		1	✓	✓	x	x	x		
578	h		Devise applicable TCM herbal formula.												
579				1	Identify and analyze representative formulas corresponding to TCM treatment strategies.	2		1	✓		x				
580				2	Identify herbal formulas appropriate to the syndromes associated with the illnesses listed in Appendix 5.	2		2	✓	✓	x				
581				3	Develop herbal formula appropriate to a patient.	3		2	✓	✓	x	x	x		

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3	Core Acupuncture					Cognitive	Psychomotor	Affective						
582				4	Select patent medicine (finished TCM product) appropriate to syndromes associated with the illnesses listed in Appendix 5.	2		2	✓	✓	x			
583		i	Devise appropriate course of herbal treatment.											
584					Determine course of herbal treatment appropriate to a patient.	2		1	✓	✓	x	x	x	
585	6.5	Provide acupuncture treatment.												
586		a	Adapt clinical setting to enhance comfort and safety.											
587				1	Describe modifications of clinical setting to enhance comfort and safety based upon patient needs.	2			✓	✓	x			
588				2	Describe modifications of clinical setting according to specific requirements of the illnesses listed in Appendix 5.	2			✓	✓	x			
589		b	Position patient for treatment.											
590				1	Inform and position patient for needling.	2	2			✓	x	x		
591				2	Inform and position patient for moxibustion.	2	2			✓	x	x		
592				3	Inform and position patient for treatment using supplementary devices.	2	2			✓	x	x		
593				4	Inform and position patient for cupping.	2	2			✓	x	x		

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3	Core Acupuncture												
594				5	Inform and position patient for tui na.	2	2			✓		x	x
595		c	Locate selected points on patient.										
596				1	Locate points on patients of varying ages and body types.	2	2			✓		x	x
597				2	Locate points on patients in various body positions.	2	2			✓		x	x
598		d	Apply treatment techniques.										
599				1	Perform needling on a patient.	2	2			✓		x	x
600				2	Perform moxibustion on a patient.	2	2			✓		x	x
601				3	Perform cupping on a patient.	2	2			✓		x	x
602				4	Perform ear acupuncture on a patient.	2	2			✓		x	x
603				5	Perform scalp acupuncture on a patient.	2	2			✓		x	x
604				6	Perform tui na on a patient.	2	2			✓		x	x
605		e	Monitor and respond to patient condition during treatment.										
606				1	Obtain and interpret feedback from patient.	2		1				x	x
607				2	Recognize significant changes in patient condition.	2				✓		x	x
608				3	Respond appropriately to patient feedback and changes in condition.	2	2	1		✓		x	x
609		6.6	Implement herbal treatment plan.										
610		a	Instruct patient on accessing TCM herbal formula.										

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3	Core														
611				1	Identify the local availability of herbs.	1									x
612		b	Instruct patient on administration of TCM herbal formula.												
613				1	Describe method of administration of TCM formula for a patient.	2			✓			x	x	x	
614				2	Describe conditions under which the method of administration for a patient should be altered.	2		1	✓	✓		x	x	x	
615		6.7	Monitor effectiveness of treatment plan and modify where necessary.												
616		a	Evaluate effectiveness of treatment plan on an ongoing basis.												
617				1	Identify anticipated treatment outcomes for a patient.	2			✓	✓		x	x	x	
618				2	Evaluate patient response relative to anticipated outcomes.	2			✓	✓		x	x	x	
619				3	Identify causative factors in the event that outcomes are not achieved.	3			✓	✓		x	x	x	
620		b	Modify treatment plan to enhance effectiveness.												
621				1	Explain and justify modification of treatment plan to achieve anticipated outcomes for a patient.	3			✓	✓		x	x	x	

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3	Core Acupuncture														
622		6.8	Educate and counsel patient.												
623		a	Explain etiology and pathogenesis of condition.												
624				1	Explain in plain language the TCM etiology and pathogenesis of patient condition.	3			✓	✓				x	
625		b	Explain TCM concepts as they apply to patient condition.												
626				1	Explain in plain language TCM concepts as they apply to patient condition.	3			✓	✓				x	
627		c	Inform patient of possible side effects and reaction to treatment.												
628				1	Describe anticipated side effects and reactions to acupuncture treatments.	2			✓	✓		x	x		
629				2	Describe anticipated side effects and reactions to moxibustion, cupping, and tui-na treatments.	2			✓	✓		x	x		
630				3	Describe anticipated side effects and reactions to TCM herbal treatments.	2			✓	✓		x			
631		d	Advise patient on <i>yu fang</i> and <i>yang sheng</i> (prevention and health preservation)												
632				1	Explain the TCM principles of prevention and health preservation related to diet.	2		1	✓	✓	x				

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3	Core Acupuncture												
633				2	Explain the use of TCM dietary therapy in the treatment of syndromes associated with the illnesses listed in Appendix 5.	2		1	✓	✓	x		
634				3	Explain the principles of <i>yu fang</i> and <i>yang sheng</i> (prevention and health preservation) through physical exercise and <i>qi gong</i> .	2		1	✓	✓	x		
635				4	Explain the principles of mental cultivation, and the relationship between mental state, lifestyle, illness and longevity.	2		1	✓	✓	x		
636	e		Counsel patient on compliance with treatment recommendations.										
637				1	Explain the significance of patient compliance with treatment recommendations.	2			✓	✓	x		x
638	7.1	Perform needling.											
639	a		Perform filiform needling.										
640				1	Describe the characteristics and therapeutic use of filiform needles.	1		1	✓		x		
641				2	Identify the factors affecting insertion depth and angle.	1		1	✓		x		
642				3	Perform needle insertion to the required depth and angle.	2	2			✓	x	x	x

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643				4	Describe characteristics of de qi (arrival of qi).	1		1	✓	✓	x				
644				5	Describe needle manipulation methods, including tonifying ( <i>bu</i> ), draining ( <i>xie</i> ) and even techniques.	1		1	✓	✓	x				
645				6	Perform needle manipulations, including tonifying, draining and even techniques.	2	2			✓	x	x			
646				7	Identify factors affecting needle retention.	1		1	✓	✓	x				
647				8	Describe needle retraction techniques.	1		1	✓	✓	x				
648				9	Perform needle retraction.	2	2			✓	x	x			
649	b		Perform dermal (plum blossom, seven star) needling.												
650				1	Describe the characteristics and therapeutic use of dermal needles.	1		1	✓		x				
651				2	Describe dermal needle manipulation methods	1		1	✓	✓	x				
652				3	Perform dermal needling	2	2			✓	x				
653	c		Perform intra-dermal tack needling.												
654				1	Describe the characteristics and therapeutic use of intra-dermal tack needles.	1		1	✓		x				
655				2	Identify factors affecting needle retention.	1		1	✓		x				
656				3	Perform intra-dermal tack needling.	2	2			✓	x				
657	d		Perform three edged needling.												

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658				1	Describe the characteristics and therapeutic use of three edged needles.	1		1	✓			x			
659				2	Identify factors affecting amount of blood let.	1		1	✓			x			
660				3	Perform three edged needling.	2	2			✓		x			
661	7.2 Perform moxibustion.														
662	a	Perform direct moxibustion.													
663				1	Describe the characteristics and therapeutic use of direct moxibustion.	1		1	✓			x			
664				2	Distinguish between scarring, non-scarring and blistering moxibustion.	1			✓			x			
665				3	Identify factors affecting moxa cone number.	1		1	✓			x			
666				4	Perform scarring moxibustion.	2	2			✓		x			
667				5	Perform non-scarring moxibustion.	2	2			✓		x			
668				6	Identify factors affecting blistering moxibustion duration.	1		1	✓			x			
669				7	Perform blistering moxibustion.	2	2			✓		x			
670	b	Perform indirect moxibustion.													
671				1	Describe the characteristics and therapeutic use of indirect moxibustion.	1		1	✓	✓		x			
672				2	Distinguish between warming and partitioned moxibustion.	1		1	✓			x			

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673				3	Identify factors affecting duration and intensity of warming moxibustion.	1		1	✓	✓	x				
674				4	Perform warming moxibustion.	2	2			✓		x			
675				5	Identify factors affecting cone number and substrate of partitioned moxibustion.	1		1	✓		x				
676				6	Perform partitioned moxibustion.	2	2					x			
677	c	Perform needle warming moxibustion.			Describe the characteristics and therapeutic use of needle warming moxibustion.	1		1	✓		x				
678					Perform needle warming moxibustion.	2	2			✓		x			
679												x			
680	7.3	Perform treatment utilizing supplementary devices.													
681	a	Perform stimulation using heat lamps.			1	Describe the characteristics and therapeutic use of heat lamps.	1		1	✓		x			
682					2	Identify factors affecting intensity and duration of heat lamp treatment.	1		1	✓	✓	x			
683					3	Perform heat lamp stimulation.	2	2			✓		x		
684	b	Perform stimulation using electro-acupuncture devices.													

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686				1	Describe the characteristics and therapeutic use of electro-acupuncture devices.	1		1	✓		x				
687				2	Identify factors affecting frequency, intensity, wave pattern and duration of electro-acupuncture stimulation.	1		1	✓	✓	x				
688				3	Perform stimulation using an electro-acupuncture device.	2	2			✓		x			
689	7.4	Perform cupping.													
690				1	Describe the characteristics and therapeutic use of cupping.	1		1	✓		x				
691				2	Distinguish between stationary and mobile cupping.	1		1	✓		x				
692				3	Identify factors affecting cupping duration and intensity.	1		1	✓	✓	x				
693				4	Perform stationary cupping.	2	2			✓		x			
694				5	Perform mobile cupping.	2	2			✓		x			
695	7.5	Perform <i>tui na</i> .													
696				1	Describe the application of <i>tui na</i> in the management of syndromes associated with the illnesses listed in Appendix 5.	2		1	✓		x				
697				2	Perform <i>tui na</i> techniques.	2	2			✓	x				
698	8.1	Maintain herbal inventory.													

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3	Core												
699		a	Identify appropriate supply for herbs.										
700				1	Describe the ethical and legal issues associated with the use of herbs.	2			✓		x		
701				2	Identify regulations impacting the supply of herbs and herbal products.	1			✓		x		
702				3	Identify endangered species used in TCM herbal practice.	1			✓	✓	x		
703		b	Assess quality of herbs with reference to:										
704			packaging										
705				1	Identify appropriate packaging for TCM herbs.	1			✓	✓	x		
706				2	Distinguish the condition of packaging.	1	1			✓		x	
707			labeling										
708				1	Identify basic labeling requirements for consumer packaging.	1			✓	✓	x		
709				2	Identify regulations impacting the labeling of TCM herbal products.	1			✓		x		
710				3	Identify labeling requirements for TCM herbal products.	1			✓	✓	x		
711				4	Identify labeling concerns that may negate use of a product.	1			✓	✓	x	x	x
712			physical properties										

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	A	B	C	D	E	F	G	H	I	J	K	L	M
1	Herbology					Domains of Learning & Complexities			Assessment in Registration Exam		Assessment in Educational Program		
2	Acupuncture		Occupational Competencies		Performance Indicators	Cognitive	Psychomotor	Affective	Written	Clinical Case Study	Academic	Simulated	Clinical
3	Core												
713				1	Describe physical properties of herbs that indicate quality.	1			✓	✓	x		
714				2	Distinguish the quality of samples of herbs on the basis of physical properties.		1					x	
715			available quality assurance information										
716				1	Explain the significance of third-party testing services.	2			✓		x		
717				2	Explain the significance of Good Manufacturing Practice (GMP) certification.	1			✓		x		
718				3	Explain the significance of Good Agricultural Practices (GAP) certification.	1			✓		x		
719				4	Explain the significance of Natural Health Product (NHP) licence.	1			✓		x		
720	c	Store herbs in appropriate conditions, including:											
721		environment											
722				1	Describe general environmental requirements for storing herbs.	1			✓	✓	x		
723				2	Identify herbs listed in Appendix 3 that have unique storage requirements.	1			✓	✓	x		
724		security											
725				1	Describe security measures for the storage of toxic herbs.	1			✓	✓	x		

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726			monitoring										
727				1	Describe methods of monitoring the quality of herbs in storage.	1			✓		x		
728		d	Maintain records with respect to inventory.										
729				1	Describe information required in inventory records.	1			✓		x		
730				2	Explain the importance of up-to-date inventory records.	2			✓		x		
731		8.2	Prepare and dispense herbal formulas.										
732		a	Verify formula information is clear, complete and accurate.										
733				1	Identify information required for TCM herbal prescription.	1			✓	✓	x		
734				2	Verify completeness of TCM herbal prescription.	1			✓	✓	x	x	
735				3	Verify authenticity of TCM herbal prescription.	2					x	x	
736				4	Identify apparent errors or omissions in the names, preparation methods, herbal combinations or dosages specified on the TCM herbal prescription.	2			✓	✓	x	x	
737				5	Confirm TCM herbal prescription with prescribing practitioner where appropriate.	1					x	x	

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1	Herbology					Domains of Learning & Complexities	Assessment in Registration Exam		Assessment in Educational Program				
2	Core Acupuncture		Occupational Competencies		Performance Indicators	Cognitive	Psychomotor	Affective	Written	Clinical Case Study	Academic	Simulated	Clinical
3	Core	b	Verify availability of components and confirm substitution if required.										
738				1	Determine the stock availability of prescribed herbs.	1					x	x	
739				2	Identify herbs that may be used as substitutes.	2			✓	✓	x	x	x
740				3	Describe the functions of potential substitutes in comparison with the herbs that are not available.	1			✓	✓	x	x	
741				4	Confirm substitutes with prescribing practitioner.	1							x
742		c	Confirm identity of components.										
743				1	Identify unlabelled samples of the herbs listed in Appendix 3.	2	2				x		
744		d	Compound formula.										
745				1	Convert units of weight as required.	2			✓	✓	x	x	x
746				2	Dispense herbs by weight according to TCM herbal prescription.	1	1			✓	x	x	x
747		e	Apply packaging.										
748				1	Identify herbs listed in Appendix 3 that have unique packaging requirements.	1			✓	✓	x		
749				2	Package formula components according to TCM herbal prescription.	1	1			✓	x	x	x
750													

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1	Herbology										Assessment in Registration Exam		Assessment in Educational Program
2	Acupuncture		Occupational Competencies		Performance Indicators	Cognitive	Psychomotor	Affective	Written	Clinical Case Study	Academic	Simulated	Clinical
3	Core												
751	f	Apply labeling.											
752				1	Describe labeling requirements for dispensed herbs.	1			✓	✓	x		
753				2	Describe labeling requirements for individually packaged components of TCM herbal formulas in decoction form.	1			✓	✓	x		
754				3	Produce comprehensible and complete labels.	1	1					x	x
755	g	Provide instructions for storage and use.											
756				1	Describe general methods of preparing a decoction.	1			✓	✓	x	x	x
757				2	Describe specific preparation methods for a particular prescription.	2		1	✓	✓	x	x	x
758				3	Describe storage requirements for dispensed formulas.	1			✓	✓	x	x	x
759				4	Describe administration process and timing.	1			✓	✓	x	x	x
760				5	Describe post-administration procedure.	1			✓	✓	x	x	x
761	h	Maintain dispensing records.											
762				1	Describe requirements for dispensing records.	1			✓		x		
763				2	Demonstrate consistency in maintaining dispensing records.	1						x	x
764				3	Describe procedures to maintain physical security of dispensing records.	1			✓		x		

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3	Core												
765		9.1	Evaluate patient risk profile.										
766		a	Determine risk profile relative to acupuncture treatment.										
767				1	Describe conditions in which acupuncture treatment poses a risk to patient.	2		1	✓	✓	x		
768				2	Justify acupuncture treatment where acupuncture treatment poses a risk to patient.	3		1	✓	✓	x		x
769				3	Describe conditions in which acupuncture is contraindicated.	2		1	✓	✓	x		
770		b	Determine level of risk relative to TCM herbal treatment.										
771				1	Describe conditions in which herbal treatment poses a risk to patient.	2		1	✓	✓	x		
772				2	Justify herbal treatment where herbal treatment poses a risk to patient.	3		1	✓	✓	x		x
773				3	Describe conditions where herbal treatment plans are contraindicated.	2		1	✓	✓	x		
774		9.2	Provide a safe working environment.										
775		a	Maintain current knowledge of communicable diseases and infection control techniques.										

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2	Core Acupuncture		Occupational Competencies		Performance Indicators	Cognitive	Psychomotor	Affective	Written	Clinical Case Study	Academic	Simulated	Clinical
3	Core Acupuncture												
776				1	Describe the principles of communicable disease and infection control in a clinical setting.	2			✓	✓	x		
777				2	Describe the principles for the management of sharps and other biohazards.	2			✓	✓	x		
778	b		Apply universal precautions for infection control.										
779				1	Demonstrate application of universal precautions for infection control.	2	2			✓		x	x
780				2	Demonstrate clean needle technique.	2	2			✓		x	x
781				3	Demonstrate procedures for the management of sharps and other biohazards.	2	2			✓		x	x
782	c		Ensure effective supervision of staff and / or students.										
783				1	Identify the chain of accountability within the clinic.	2					x		
784				2	Describe the duties of clinic staff and / or students relative to safety.	1					x		
785				3	Describe the duties of a student clinical supervisor.	1					x		

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2	Core Acupuncture		Occupational Competencies		Performance Indicators			Cognitive	Psychomotor	Affective	Written	Clinical Case Study	Academic	Simulated	Clinical
786		d	Inspect facilities on a regular basis for electrical hazards, fire risk and physical hazards that may cause accidents, and take action to minimize.												
787				1	Identify electrical hazards, fire risk, and physical and environmental hazards that may pose risks in clinical facilities.	1							x	x	
788				2	Describe actions to minimize electrical hazards, fire risk and physical and environmental hazards that may pose risks in clinical facilities.	2					x				
789		e	Establish procedures and route for emergency evacuation of facilities.												
790				1	Identify principles applicable to emergency evacuation.	1					x				
791				2	Describe procedures for emergency evacuation of facility.	1					x				
792		f	Establish procedures to maximize protection of self, staff and patients in the event of abusive or violent behaviour.												
793				1	Describe indicators of potentially abusive or violent behaviour.	2					x				

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1	Herbology										Assessment in Registration Exam		Assessment in Educational Program
2	Core Acupuncture		Occupational Competencies		Performance Indicators	Cognitive	Psychomotor	Affective	Written	Clinical Case Study	Academic	Simulated	Clinical
3	Core Acupuncture												
794				2	Describe management principles to enhance protection of all parties.	2					x		
795		9.3 <b>Manage risks to patients.</b>											
796		a	Include safety precautions in herbal treatment plan.										
797				1	Provide clear directions to patient regarding safety precautions.	1				✓		x	x
798				2	Describe situations in which patient should contact TCM practitioner for direction.	2			✓	✓	x	x	x
799		b	Manage adverse reactions and accidents resulting from treatment.										
800				1	Describe the management of physical harm resulting from needling.	2			✓	✓	x		
801				2	Describe the management of physical harm resulting from moxibustion.	2			✓	✓	x		
802				3	Describe the management of physical harm resulting from cupping.	2			✓	✓	x		
803				4	Describe the management of physical harm resulting from the use of supplementary devices.	2			✓	✓	x		
804				5	Describe the management of physical harm resulting from tui na.	2			✓	✓	x		

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1	Herbology					Domains of Learning & Complexities			Assessment in Registration Exam		Assessment in Educational Program		
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3	Core Herbology												
805				6	Describe the management of unexpected responses resulting from needling.	2			✓	✓	x		
806				7	Describe the management of unexpected responses resulting from moxibustion.	2			✓	✓	x		
807				8	Describe the management of unexpected responses resulting from cupping.	2			✓	✓	x		
808				9	Describe the management of unexpected responses resulting from the use of supplementary devices.	2			✓	✓	x		
809				10	Describe the management of unexpected responses resulting from tui na.	2			✓	✓	x		
810				11	Describe the management of adverse reactions to herbal treatment.	2			✓	✓	x		
811				12	Describe safety precautions in acupuncture treatment to enhance accident prevention.	2			✓	✓	x		
812	c		Respond appropriately to medical emergencies.										
813				1	Perform first aid.	2	2			✓		x	
814				2	Perform cardiopulmonary resuscitation.	2	1			✓		x	
815				3	Communicate medical emergency conditions in biomedical terms for emergency medical service providers.	2	1			✓		x	

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2	Core Acupuncture		Occupational Competencies		Performance Indicators			Cognitive	Psychomotor	Affective	Written	Clinical Case Study	Academic	Simulated	Clinical
816				4	Describe steps for post-emergency follow-up.	2			✓	✓	x	x			
817	d	Manage blood-to-blood contact and provide direction for post exposure follow up.													
818				1	Describe the management of blood-to-blood contact.	1			✓	✓	x				
819				2	Describe post exposure follow up for blood-to-blood contact.	1			✓	✓	x				
820	e	Clean spills of blood and other body fluids.													
821				1	Describe procedures for the clean up of spills of blood and other body fluids.	1			✓	✓	x				
822				2	Demonstrate the clean up of spills of blood and other body fluids.	1	1				x				
823	f	Control and extinguish small fires.													
824				1	Describe procedures for small fire control.	1			✓		x				
825	9.4	Ensure that equipment is safe and functional.													
826	a	Select equipment that enhances patient safety.													
827				1	Describe the desirable characteristics of equipment for a particular clinical use.	2			✓	✓	x				
828				2	Select equipment that is safe and functional.	2	2			✓	x	x			

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1	Herbology					Domains of Learning & Complexities			Assessment in Registration Exam		Assessment in Educational Program				
2	Acupuncture		Occupational Competencies		Performance Indicators			Cognitive	Psychomotor	Affective	Written	Clinical Case Study	Academic	Simulated	Clinical
3	Core														
829				3	Prepare equipment, materials and work area for acupuncture (including use of supplementary devices), moxibustion and cupping.	1	1			✓			x	x	
830				4	Prepare equipment, materials and work area for preparing and dispensing herbal formulas.	1	1			✓		x	x		
831				5	Demonstrate the hygenic handling of equipment and materials for acupuncture, moxibustion and cupping.	1	1			✓		x	x		
832	b		Maintain equipment in good working order.												
833				1	Describe the procedures involved in the management of treatment equipment and materials for acupuncture (including use of supplementary devices) , moxibustion and cupping.	1			✓	✓	x				
834				2	Describe the procedures involved in the management of equipment and materials for preparing and dispensing herbal formulas.	1			✓	✓	x				
835				3	Describe the proper storage of equipment and materials.	1			✓	✓	x				
836	c		Clean equipment regularly, and disinfect as appropriate.												

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3	Core Herbology					1	Describe the procedures involved in the cleaning and disinfecting of equipment and materials for acupuncture (including use of supplementary devices), moxibustion and cupping.	1			✓	✓	x	
837						1	Demonstrate procedures involved in the cleaning and disinfecting of equipment and materials for acupuncture (including use of supplementary devices), moxibustion and cupping.	1	1		✓		x	x
838						2	Describe the procedures involved in the cleaning of equipment for preparing and dispensing herbal formulas.	1			✓		x	
839						3	Demonstrate procedures involved in the cleaning of equipment for preparing and dispensing herbal formulas.	1			✓	✓	x	
840						4	Demonstrate procedures involved in the cleaning of equipment for preparing and dispensing herbal formulas.	1	1		✓		x	x

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**Appendix 1 - Points of the 14 Channels (jing xue)**

<b>Lung Channel</b>	<b>Soutaiyin Feijing</b>
LU 1	Zhongfu
LU 2	Yunmen
LU 3	Tianfu
LU 4	Xiabai
LU 5	Chize
LU 6	Kongzui
LU 7	Lieque
LU 8	Jingqu
LU 9	Taiyuan
LU 10	Yuji
LU 11	Shaoshang
<b>Large Intestine Channel</b>	
<b>Shouyangming Dachang-Jing</b>	
LI 1	Shangyang
LI 2	Erjian
LI 3	Sanjian
LI 4	Hegu
LI 5	Yangxi
LI 6	Pianli
LI 7	Wenliu
LI 8	Xialian
LI 9	Shanglian
LI 10	Shousanli
LI 11	Quchi
LI 12	Zhouliao
LI 13	Shouwuli
LI 14	Binao
LI 15	Jianyu
LI 16	Jugu
LI 17	Tianding
LI 18	Futu
LI 19	Kouheliao
LI 20	Yingxiang

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**Appendix 1 - Points of the 14 Channels (jing xue)**

<b>Stomach Channel</b>	<b>Zuyangming Weijing</b>
ST 1	Chengqi
ST 2	Sibai
ST 3	Juliao
ST 4	Dicang
ST 5	Daying
ST 6	Jiache
ST 7	Xiaguan
ST 8	Touwei
ST 9	Renying
ST 10	Shuitu
ST 11	Qishe
ST 12	Quepen
ST 13	Qihu
ST 14	Kufang
ST 15	Wuyi
ST 16	Yingchuang
ST 17	Ruzhong
ST 18	Rugen
ST 19	Burong
ST 20	Chengman
ST 21	Liangmen
ST 22	Guanmen
ST 23	Taiyi
ST 24	Huaroumen
ST 25	Tianshu
ST 26	Wailing
ST 27	Daju
ST 28	Shuidao
ST 29	Guilai
ST 30	Qichong
ST 31	Biguan
ST 32	Futu
ST 33	Yinshi

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ST 34	Liangqiu
ST 35	Dubi
ST 36	Zusanli
ST 37	Shangjuxu
ST 38	Tiaokou
ST 39	Xiajuxu
ST 40	Fenglong
ST 41	Jiexi
ST 42	Chongyang
ST 43	Xiangu
ST 44	Neiting
ST 45	Lidui
<b>Spleen Channel</b>	<b>Zutaiyin Pijing</b>
SP 1	Yinbai
SP 2	Dadu
SP 3	Taibai
SP 4	Gongsun
SP 5	Shangqiu
SP 6	Sanyinjiao
SP 7	Lougu
SP 8	Diji
SP 9	Yinlingquan
SP 10	Xuehai
SP 11	Jimen
SP 12	Chongmen
SP 13	Fushe
SP 14	Fujie
SP 15	Daheng
SP 16	Fu'ai
SP 17	Shidou
SP 18	Tianxi
SP 19	Xiongxiang
SP 20	Zhourong
SP 21	Dabao

Heart Channel	Shoushaoyin Xinjing
HT 1	Jiquan
HT 2	Qingling
HT 3	Shaohai
HT 4	Lingdao
HT 5	Tongli
HT 6	Yinxi
HT 7	Shenmen
HT 8	Shaofu
HT 9	Shaochong
Small Intestine Channel	Shoutaiyang Xiaochangjing
SI 1	Shaoze
SI 2	Qiangu
SI 3	Houxi
SI 4	Wangu
SI 5	Yanggu
SI 6	Yanglao
SI 7	Zhizheng
SI 8	Xiaohai
SI 9	Jianzhen
SI 10	Naoshu
SI 11	Tianzong
SI 12	Bingfeng
SI 13	Quyuan
SI 14	Jianwaishu
SI 15	Jianzhongshu
SI 16	Tianchuang
SI 17	Tianrong
SI 18	Quanliao
SI 19	Tinggong
Bladder Channel	Zutaiyang Pangguangjing
BL 1	Jingming
BL 2	Cuanzhu (Zanzhu)

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BL 3	Meichong
BL 4	Qucha (Quchai)
BL 5	Wuchu
BL 6	Chengguang
BL 7	Tongtian
BL 8	Luoque
BL 9	Yuzhen
BL 10	Tianzhu
BL 11	Dazhu
BL 12	Fengmen
BL 13	Feishu
BL 14	Jueyinshu
BL 15	Xinshu
BL 16	Dushu
BL 17	Geshu
BL 18	Ganshu
BL 19	Danshu
BL 20	Pishu
BL 21	Weishu
BL 22	Sanjiaoshu
BL 23	Shenshu
BL 24	Qihaishu
BL 25	Dachangshu
BL 26	Guanyuanshu
BL 27	Xiaochangshu
BL 28	Pangguangshu
BL 29	Zhonglushu
BL 30	Baihuanshu
BL 31	Shangliao
BL 32	Ciliao
BL 33	Zhongliao
BL 34	Xialiao
BL 35	Huiyang
BL 36	Chengfu

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BL 37	Yinmen
BL 38	Fuxi
BL 39	Weiyang
BL 40	Weizhong
BL 41	Fufen
BL 42	Pohu
BL 43	Gaohuang
BL 44	Shentang
BL 45	Yixi
BL 46	Geguan
BL 47	Hunmen
BL 48	Yanggang
BL 49	Yishe
BL 50	Weicang
BL 51	Huangmen
BL 52	Zhishi
BL 53	Baohuang
BL 54	Zhibian
BL 55	Heyang
BL 56	Chengjin
BL 57	Chengshan
BL 58	Feiyang
BL 59	Fuyang
BL 60	Kunlun
BL 61	Pucan (Pushen)
BL 62	Shenmai
BL 63	Jinmen
BL 64	Jinggu
BL 65	Shugu
BL 66	Zutonggu
BL 67	Zhiyin
<b>Kidney Channel</b>	<b>Zushaoyin Shenjing</b>
KI 1	Yongquan
KI 2	Rangu

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KI 3	Taixi
KI 4	Dazhong
KI 5	Shuiquan
KI 6	Zhaohai
KI 7	Fuliu
KI 8	Jiaoxin
KI 9	Zhubin
KI 10	Yingu
KI 11	Henggu
KI 12	Dahe
KI 13	Qixue
KI 14	Siman
KI 15	Zhongzhu
KI 16	Huangshu
KI 17	Shangqu
KI 18	Shiguan
KI 19	Yindu
KI 20	Futonggu
KI 21	Youmen
KI 22	Bulang
KI 23	Shenfeng
KI 24	Lingxu
KI 25	Shencang
KI 26	Yuzhong
KI 27	Shufu
<b>Pericardium Channel</b>	<b>Shoujueyin Xinbaojing</b>
PC 1	Tianchi
PC 2	Tianquan
PC 3	Quze
PC 4	Ximen
PC 5	Jianshi
PC 6	Neiguan
PC 7	Daling
PC8	Laogong

PC 9	Zhongchong
<b>Triple Energizer Channel</b>	<b>Shoushaoyang Sanjiaojing</b>
TE 1	Guanchong
TE 2	Yemen
TE 3	Zhongzhu
TE 4	Yangchi
TE 5	Waiguan
TE 6	Zhigou
TE 7	Huizong
TE 8	Sanyangluo
TE 9	Sidu
TE 10	Tianjing
TE 11	Qinglenyuan
TE 12	Xiaoluo
TE 13	Naohui
TE 14	Jianliao
TE 15	Tianliao
TE 16	Tianyou
TE 17	Yifeng
TE 18	Chimai (Qimai)
TE 19	Luxi
TE 20	Jiaosun
TE 21	Ermen
TE 22	Erheliao
TE 23	Sizhukong
<b>Gallbladder Channel</b>	<b>Zushaoyang Danjing</b>
GB 1	Tongziliao
GB 2	Tinghui
GB 3	Shangguan
GB 4	Hanyan
GB 5	Xuanlu
GB 6	Xuanli
GB 7	Qubin

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**Appendix 1 - Points of the 14 Channels (jing xue)**

GB 8	Shuaigu
GB 9	Tianchong
GB 10	Fubai
GB 11	Touqiaoyin
GB 12	Wangu
GB 13	Benshen
GB 14	Yangbai
GB 15	Toulinqi
GB 16	Muchuang
GB 17	Zhengying
GB 18	Chengling
GB 19	Naokong
GB 20	Fengchi
GB 21	Jianjing
GB 22	Yuanye
GB 23	Zhejin
GB 24	Riyue
GB 25	Jingmen
GB 26	Daimai
GB 27	Wushu
GB 28	Weidao
GB 29	Juliao
GB 30	Huantiao
GB 31	Fengshi
GB 32	Zhongdu
GB 33	Xiyangguan
GB 34	Yanglingquan
GB 35	Yangjiao
GB 36	Waiqiu
GB 37	Guangming
GB 38	Yangfu
GB 39	Xuanzhong
GB 40	Qixu
GB 41	Zulinqi

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**Appendix 1 - Points of the 14 Channels (jing xue)**

GB 42	Diwuhi
GB 43	Xiaxi
GB 44	Zuqiaoyin
<b>Liver Channel</b>	<b>Zujueyin Ganjing</b>
LR 1	Dadun
LR 2	Xingjian
LR 3	Taichong
LR 4	Zhongfeng
LR 5	Ligou
LR 6	Zhongdu
LR 7	Xiguan
LR 8	Ququan
LR 9	Yinbao
LR 10	Zuwuli
LR 11	Yinlian
LR 12	Jimai
LR 13	Zhangmen
LR 14	Qimen
<b>Governor Channel</b>	<b>Dumai</b>
GV 1	Changqiang
GV 2	Yaoshu
GV 3	Yaoyangguan
GV 4	Mingmen
GV 5	Xuanshu
GV 6	Jizhong
GV 7	Zhongshu
GV 8	Jinsuo
GV 9	Zhiyang
GV 10	Lingtai
GV 11	Shendao
GV 12	Shenzhu
GV 13	Taodao
GV 14	Dazhui

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**Appendix 1 - Points of the 14 Channels (jing xue)**

GV 15	Yamen
GV 16	Fengfu
GV 17	Naohu
GV 18	Qiangjian
GV 19	Houding
GV 20	Baihui
GV 21	Qianding
GV 22	Xinhui
GV 23	Shangxing
GV 24	Shenting
GV 25	Suliao
GV 26	Shuigou
GV 27	Duiduan
GV 28	Yinjiao
<b>Conception Channel</b>	<b>Renmai</b>
CV 1	Huiyin
CV 2	Qugu
CV 3	Zhongji
CV 4	Guanyuan
CV 5	Shimen
CV 6	Qihai
CV 7	Yinjiao
CV 8	Shenque
CV 9	Shuifen
CV 10	Xiawan
CV 11	Jianli
CV 12	Zhongwan
CV 13	Shangwan
CV 14	Juque
CV 15	Jiwei
CV 16	Zhongting
CV 17	Danzhong
CV 18	Yutang
CV 19	Zigong

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**Appendix 1 - Points of the 14 Channels (jing xue)**

CV 20	Huagai
CV 21	Xuanji
CV 22	Tiantu
CV 23	Lianquan
CV 24	Chengjiang

**Reference:**

Study of Acupuncture Points (for acupuncture specialization), 1985 by Yang Jiasan et al, Shanghai Science and Technology Publishing House

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**Appendix 2 - Extra Points (jing wai qi xue)**

<b>Extra Point Name</b>	<b>WHO Standard Nomenclature</b>
Shishencong	EXTRA 1/M-HN-1
Yintang	EXTRA 2/M-HN-3
Yuyao	EXTRA 3/M-HN-6
Shangming	EXTRA 4
Taiyang	EXTRA 5/M-HN-9
Qiuhou	EXTRA 6/M-HN-8
Bitong	EXTRA 7/M-HN-14
Yuyu, Jinjin	EXTRA 8/M-HN-20
Jinchengjiang	EXTRA 9/M-HN-18
Qianzheng	EXTRA 10
Yiming	EXTRA 11
Anmian	EXTRA 12/M-HN-54
Jingbi	EXTRA 13
Sanjiaojiu	EXTRA 14/M-CA-23
Tituo	EXTRA 15/N-CA-4
Zigong	EXTRA 16/M-CA-18
Dingchuan	EXTRA 17/M-BW-1
Jiehexue	EXTRA 18
Jiaji, Huatoujiaji Points	EXTRA 19/M-BW-35
Weiguanxiashu, Bashu, Cuishu	EXTRA 20/M-BW-12
Pigen	EXTRA 21
Yaoyan	EXTRA 22/M-BW-24
Shiqizhui	EXTRA 23
Shixuan	EXTRA 24/M-UE-1
Sifeng	EXTRA 25/M-UE-9
Zhongkui	EXTRA 26
Baxie	EXTRA 27/M-UE-22
Luozhen	EXTRA 28/M-UE-24
Yaotongxue	EXTRA 29/N-UE-19
Zhongquan	EXTRA 30
Erbai	EXTRA 31/M-UE-29
Bizhong	EXTRA 32
Zhoujian	EXTRA 33/M-UE-46

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**Appendix 2 - Extra Points (jing wai qi xue)**

<b>Extra Point Name</b>	<b>WHO Standard Nomenclature</b>
Jianqian, Jianneiling	EXTRA 34/M-UE-48
Huanzhong	EXTRA 35
Heding	EXTRA 38/M-LE-27
Xiyan	EXTRA 39MN-LE-16
Dannangxue	EXTRA 40/M-LE-23
Lanweixue	EXTRA 41/M-LE-13
Bafeng	EXTRA 42/M-LE-8
Duyin	EXTRA 43
Lineiting	EXTRA 44
Baichongwo	M-LE-34
Bailao	M-HN-30
Erjian	M-HN-10
Haiquan	M-HN-37
Huanmen	M-BW-6
Shiqizhuixia	M-BW-25
Sishencong	M-HN1

Reference:

Study of Acupuncture Points (for acupuncture specialization), 1985, by Yang Jiasan et al, Shanghai Science and Technology Publishing House

Materia Medica (Pin-yin, Chinese and Botanical name)

**A**

Ai Ye	艾葉	Folium Artemisiae Argyi
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**B**

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	白蘚皮	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	班蟊	Mylabris
Ban Xia	半夏	Rhizoma Pinelliae

Bei Xie	萆薢	Rhizoma Dioscoreae Hypoglauciae
Bian Xu	萹蓄	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
Bo/Bai Zi Ren	柏子仁	Semen Biotae
Bu Gu Zhi	補骨脂	Fructus Psoraleae

**C**

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
Chai Hu	柴胡	Radix Bupleuri
Chan Tui	蟬蛻	Periostracum Cicadae
Che Qian Zi	車前子	Semen Plantaginis
Chen Xiang	沈香	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	川棟子	Fructus Meliae Toosendan
Chuan Xiong	川芎	Rhizoma Ligustici Chuanxiong
Ci Shi	磁石	Magnetitum

**D**

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**Appendix 3 - TCM Herbs**

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**

E Jiao	阿膠	Colla Corii Asini
E Zhu	莪朶	Rhizoma Zedoariae

**F**

Fan Xie Ye	番瀉葉	Folium Sennae
Fang Feng	防風	Radix Ledebouriellae

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**Appendix 3 - TCM Herbs**

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
Fu Xiao Mai	浮小麦	Fructus Tritici Levis
Fu Zi	附子	Radix Aconiti Praeparata

**G**

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

**H**

Hai Er Cha	孩兒茶	Catechu
Hai Fu Shi	海浮石	Pumex
Hai Ge Ke	海蛤殼	Concha Cyclinae

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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
Huang Qin	黃芩	Radix Scutellariae
Huo Ma Ren	火麻仁	Fructus Cannabis
Huo Xiang	藿香	Herba Pogostemonis

**J**

Ji Nei Jin	雞內金	Endothelium Corneum Gigeriae Galli
Ji Xue Teng	雞血藤	Caulis Spatholobi
Jiang Can	僵蠶	Bombyx Batryticatus

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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

**K**

Ku Lian Pi	苦棟皮	Cortex Meliae
Ku Shen	苦參	Radix Sophorae Flavescentis
Kuan Dong Hua	款冬花	Flos Farfarae
Kun Bu	昆布	Thallus Laminariae Eckloniae

**L**

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 Anomalae
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

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Lu Gen	蘆根	Rhizoma Phragmitis
Lu Hui	蘆薈	Aloe
Lu Rong	鹿茸	Cornu Cervi Pantotrichum

**M**

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
Man Jing Zi	蔓荊子	Fructus Viticis
Mang Chong	牡蠣	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

**N**

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 Ligustris Lucidi

**O**

Ou Jie	藕節	Nodus Nelumbinis Rhizomatis
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**P**

Pei Lan	佩蘭	Herba Eupatorii
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Pi Pa Ye	枇杷葉	Folium Eruobotryae
Pu Gong Ying	蒲公英	Herba Taraxaci
Pu Huang	蒲黃	Pollen Typhae

**Q**

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

**R**

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

**S**

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
Sang Ye	桑葉	Folium Mori
Sang Zhi	桑枝	Ramulus Mori
Sha Ren	砂仁	Fructus Amomi

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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	神曲	Massa Medicata 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 Pyrosiae
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 Spinosa
Suo Yang	鎖陽	Herba Cynomorii

**T**

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

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Tian Nan Xing	天南星	Rhizoma Arisaematis
Ting Li Zi	葶苈子	Semen Lepidii seu Descurainiae
Tong Cao	通草	Medulla Tetrapanacis
Tu Si Zi	菟絲子	Semen Cuscutae

**W**

Wa Leng Zi	瓦楞子	Concha Arcae
Wang Bu Liu Xing	王不留行	Semen Vaccariae
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 Acanthopanacis Radicis
Wu Ling Zhi	五靈脂	Faeces Trogopterori
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

**X**

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 Mosiae
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

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**Appendix 3 - TCM Herbs**

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

**Y**

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
Yu Zhu	玉竹	Rhizoma Polygonati Odorati
Yuan Hua	芫花	Flos Genkwa
Yuan Zhi	遠志	Radix Polygalae

**Z**

Zao Jiao Ci	皂角刺	Spina Gleditsiae
Ze Xie	澤瀉	Rhizoma Alismatis
Zhe Bei Mu	浙貝母	Bulbus Fritillariae Thunbergii
Zhe Chong	蟷蟲	Eupolyphaga seu Stelophaga
Zhen Zhu Mu	珍珠母	Concha Margarifera 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

**Pan-Canadian Standards for  
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**Appendix 3 - TCM Herbs**

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 Formulae

1. Formulas for relieving superficial syndrome (Jie Biao Ji 解表劑) (8)			
1-1 Formula for relieving superficial syndrome with pungent and warm 辛溫解表 (4)			
	Ma Huang Tang	Ephedra Decoction	麻黃湯
	Gui Zhi Tang	Cinnamon Twig Decoction	桂枝湯
	Xiao Qing Long Tang	Minor Blue-green Dragon Decoction	小青龍湯
	Jiu Wei Qiang Huo Tang	Nine-herb Decoction with Notopterygium	九味羌活湯
1-2 Relieving superficial syndrome with pungent and cool 辛涼解表 (3)			
	Yin Qiao San	Honeysuckle and Forsythia powder	銀翹散
	Sang Ju Yin	Mulberry Leaf and Chrysanthemum Decoction	桑菊飲
	Ma Xing Shi Gan Tang	Ephedra, Apricot Kernel, Gypsum and Licorice Decoction	麻杏石甘湯
1-3 Relieving superficial syndrome with tonics 扶正解表 (1)			
	Bai Du San	Toxin-Vanquishing Powder)	敗毒散
2. Formulas for purgation (Xie Xia Ji 滌下劑) (7)			
2-1 Purgating with cold energy herbs 寒下 (3)			
	Da Cheng Qi Tang	Major Order the Qi Decoction	大承氣湯
	Xiao Cheng Qi Tang	Minor Order the Qi Decoction	小承氣湯
	Tiao Wei Cheng Qi Tang	Regulate the Stomach and Order the Qi Decoction	調胃承氣湯
2-2 Purgating with warm energy herbs 溫下 (2)			
	Wen Pi Tang	Warm the Spleen Decoction	溫脾湯
	Da Huang Fu Zi Tang	Rhubarb and Prepared Aconite Decoction	大黃附子湯
2-3 Purgating with moistening/lubricating herbs 潤下 (2)			
	Ma Zi Ren Wan	Hemp Seed Pill	麻子仁丸
	Ji Chuan Jian	Benefit the River (Flow) Decoction	濟川煎
3. Formulas for harmonizing (He Jie Ji 和解劑) (6)			
3-1 Harmonizing Shao yang 和解少陽 (2)			
	Xiao Chai Hu Tang	Minor Bupleurum Decoction	小柴胡湯
	Hao Qin Qing Dan Tang	Artemisia Annua and Scutellaria Decoction to Clear	蒿芩清膽湯
3-2 Harmonizing Liver and Spleen 和解肝脾 (3)			
	Si Ni San	Minor Bupleurum Decoction	四逆散
	Xiao Yao san	Rambling powder	逍遙散

	Tong Xie Yao Fang	Important Formula for Painful Diarrhea	痛瀉要方
	3-3 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
<b>4. Formulas for clearing heat (Qing Re Ji清熱劑) (25)</b>			
	4-1 Clear the heat in Qi portion/level 清氣分熱 (2)		
	Bai Hu Tang	White Tiger Decoction	白虎湯
	Zhu Ye Shi Gao Tang	Lophatherus and Gypsum Decoction	竹葉石膏湯
	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
	Xi Jiao Di Huang Tang	Rhinoceros Horn and Rehmannia Decoction	犀角地黃湯
	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
	Pu Ji Xiao Du Yin	Benefit Decoction to Eliminate Toxin	普濟消毒飲
	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
	4-5 Clear heat in the Zang-fu (organ network) 清臟腑熱 (9)		
	Long Dan Xie Gan Tang	Gentiana Long Gan Cao Decoction to Drain the Liver	龍膽瀉肝湯
	Zuo Jin Wan	Left Metal pill	左金丸
	Yu Nu Jian	Jade Woman Decoction	玉女煎
	Ting Li Da Zao Xie Fei Tang	Descurainia and Jujube Decoction	葶苈大棗瀉肺湯
	Shao Yao Tang	Peony Decoction	芍藥湯
	Dao Chi San	Guide Out the Red powder	導赤散
	Xie Bai San	Drain the White powder	瀉白散
	Qing Wei San	Clear the Stomach powder	清胃散
	Bai Tou Weng Tang	Pulsatilla Decoction	白頭翁湯
	4-6 Clear the deficient heat 清虛熱 (4)		
	Qing Hao Bie Jia Tang	Artemisia Annua and Soft-Shelled Turtle Shell Deco	青蒿鱉甲湯
	Qin Jiao Bie Jia San	Gentiana Qinjiao and Soft-Shelled Turtle Shell Powder	秦艽鱉甲散
	Qing Gu San	Cool the Bones Powder	清骨散
	Dang Gui Liu Huang Tang	Tangkuei and Six-yellow Decoction	當歸六黃湯
	4-7 Clear the summer-heat 清暑熱 (4)		
	Liu Yi San	Six to One Powder	六一散

		Qing Shu Yi Qi Tang	Clear Summer-heat and Augment the Qi Decoction	清暑益氣湯
		Xin Jia Xiang Ru Yin	Newly Augment Mosla Drink	新加香薷飲
		Qing Luo Yin	Clear the Collaterals Decoction	清絡飲
<b>5. Formulas for warming interior 溫裏劑 (8)</b>				
	5-1 Warm up interior and expel cold 溫中祛寒 (4)			
		Li Zhong Wan	Regulate the Middle Pill	理中丸
		Xiao Jian Zhong Tang	Minor Construct the Middle Decoction	小建中湯
		Wu Zhu Yu Tang	Evodia Decoction	吳茱萸湯
		Da Jian Zhong Tang	Major Construct the Middle Decoction	大建中湯
	5-2 Restore yang and save critical (reverse counterflow) 回陽救逆 (2)			
		Si Ni Tang	Frigid Extremities Decoction	四逆湯
		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
		Huang Qi Gui Zhi Wu Wu Tang	Astragalus and Cinnamon Twig Five-Substance Decoction	黃耆桂枝五物湯
<b>6. Formulas for relieving interior-exterior 表裏雙解劑 (4)</b>				
		Da Chai Hu Tang	Major Bupleurum Decoction	大柴胡湯
		Fang Feng Tong Sheng San	Ledebouriella Powder that Sagely Unblocks	防風通聖散
		Ge Gen Huang Qin Huang Lian Tang	Kudzu, Scutellaria and Coptis Decoction	葛根黃芩黃連湯
		Wu Ji San	Five Accumulation Powder	五積散
<b>7. Formulas for tonifying 補益劑 (18)</b>				
	7-1 Qi tonic 補氣 (4)			
		Si Jun Zi Tang	Four Gentleman Decoction	四君子湯
		Shen Ling Bai Zhu San	Ginseng, Poria, and Atractylodes Macrocephala Powder	參苓白朮散
		Bu Zhong Yi Qi Tang	Tonify the Middle and Augment the Qi Decoction	補中益氣湯
		Sheng Mai San	Generate the Pulse powder	生脈散
	7-2 Blood tonic 補血 (4)			
		Si Wu Tang	Four-Substance Decoction	四物湯
		Dang Gui Bu Xue Tang	Tangkuei Decoction to Tonify the Blood	當歸補血湯
		Gui Pi Tang	Restore the Spleen Decoction	歸脾湯
		Zhi Gan Cao Tang	Honey-Fried Licorice Decoction	炙甘草湯

7-3 Both Qi and blood tonic 氣血雙補 (3)			
	Ba Zhen Tang	Eight Treasure Decoction	八珍湯
	Shi Quan Da Bu Tang	All-Inclusive Great Tonifying Decoction	十全大補湯
	Ren Shen Yang Rong (Ying) Tang	Ginseng Decoction to Nourish the Nutritive Qi	人參養榮(營)湯
7-4 Yin tonic 補陰 (4)			
	Liu Wei Di Huang Wan	Six-Ingredient Pill with Rehmannia	六味地黃丸
	Da Bu Yin Wan	Great Tonify the Yin Pill	大補陰丸
	Yi Guan Jian	Linking Decoction	一貫煎
	Zuo Gui Wan	Restore the Left (Kidney) Pill	左歸丸
7-5 Yang tonic 補陽 (3)			
	Jin Kui Shen Qi Wan	Kidney Qi Pill	金匱腎氣丸
	Ji Sheng Shen Qi Wan	Kidney Qi Pill from Formulas to Aid the Living	濟生腎氣丸
	You Gui Wan	Restore the Right (Kidney) Pill	右歸丸
8. Formulas for tranquilization 安神劑 (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
	Ci Zhu Wan	Magnetite and Cinnabar Pill	磁硃丸
8-2 Tranquilizing the mind with nourishing 滋養安神 (4)			
	Suan Zao Ren Tang	Sour Jujube Decoction	酸棗仁湯
	Tian Wang Bu Xin Dan	Emperor of Heaven's Special Pill to Tonify the Heart	天王補心丹
	Bai Zi Yang Xin Wan	Biota Seed Pill to Nourish the Heart	柏子養心丸
	Gan Mai Da Zao Tang	Licorice Wheat and Jujube Decoction	甘麥大棗湯
9. Formulas for astringing 固澀劑 (6)			
	Yu Ping Feng San	Jade Windscreen powder	玉屏風散
	Si Shen Wan	Four-Miracle Pill	四神丸
	Mu Li San	Oyster Shell Powder	牡蠣散
	Jin Suo Gu Jing Wan	Metal Lock pill to Stabilize the Essence	金鎖固精丸
	Zhen Ren Yang Zang Tang	True Man's Decoction to Nourish the Organs	真人養臟湯
	Sang Piao Xiao San	Mantis Egg-Case powder	桑螵蛸散
10. 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
	Ban Xia Hou Po Tang	Pinellia and Magnolia Bark Decoction		半夏厚朴湯
	Zhi Shi Xie Bai Gui Zhi Tang	Unripe Bitter Orange, Chinese Garlic, and Cinnamon Twig Decocion		枳實薤白桂枝湯
	Hou Po Wen Zhong Tang	Magnolia Bark Decoction for Warming the Middle		厚朴溫中湯
	Tian Tai Wu Yao San	Top-Quality Lindera Powder		天台烏藥散
	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
	Ding Chuan Tang	Arrest Wheezing Decoction		定喘湯
	Xuan Fu Dai Zhe Tang	Inola and Hematite Decocitoon		旋覆代赭湯
	Ju Pi Zhu Ru Tang	Tangerine Peel and Bamboo Shavings Decoction		橘皮竹茹湯
	Ding Xiang Shi Di Tang	Clove and Persimmon Calyx Decoction		丁香柿蒂湯
	11. 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
	Xue Fu Zhu Yu Tang	Drive Out Stasis in the Mansion of Blood Decoction		血府逐瘀湯
	Fu Yuan Huo Xue Tang	Revive health by Invigorate the blood Decoction		復元活血湯
	Bu Yang Huan Wu Tang	Tonify the Yang to Restore Five (Tenths) Decoction		補陽還五湯
	Sheng Hua Tang	Generating and Transforming Decoction		生化湯
	Gui Zhi Fu Ling Wan	Cinnamon and Poria Pills		桂枝茯苓丸
	Shi Xiao San	Sudden Smile Powder		失笑散
	11-2 Stop bleeding 止血 (5)			
	Xiao Ji Yin Zi	Small Thistle Drink		小薊飲子
	Shi Hui San	Ten Partially-Charred Substances Powder		十灰散
	Ke Xue Fang	Coughing of Blood Formula		咳血方
	Huang Tu Tang	Yellow Earth Decoction		黃土湯
	Huai Hua San	Sophora Japonica Flower Powder		槐花散
	12. 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
	Chuan Xiong Cha Tiao San	Ligusticum Chuanxiong Powder to Be Taken with Green Tea		川芎茶調散
	Cang Er Zi San	Xanthium Powder		蒼耳子散

	Qian Zheng San	Lead to Symmetry Powder	牽正散
	Xiao Huo Luo Dan	Minor Invigorate the Channels Special Pill	小活絡丹
12-2 Distinguish internal wind 平熄內風 (5)			
	Ling Jiao Gou Teng Tang	Antelope Horn and Uncaria Decoction	羚角鈎藤湯
	Zhen Gan Xi Feng Tang	Sedate the Liver and Extinguish Wind Decoction	鎮肝熄風湯
	Tian Ma Gou Teng Yin	Gastrodia and Uncaria Decoction	天麻鈎藤飲
	Da Ding Feng Zhu	Major Arrest Wind Pearl	大定風珠
	Di Huang Yin Zi	Rehmannia Drink	地黃飲子
13. 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
	Xing Su San	Apricot Kernel and Perilla Leaf Powder	杏蘇散
	Sang Xing Tang	Mulberry Leaf and Apricot Kernel Decoction	桑杏湯
	Mai Men Dong Tang	Ophiopogonis Decoction	麥門冬湯
	Bai He Gu Jin Tang	Lily Bulb Decoction to Preserve the Metal	百合固金湯
	Yu Ye Tang	Jade Fluid Decoction	玉液湯
	Zeng Ye Tang	Increase the Fluids Decoction	增液湯
	Yang Yin Qing Fei Tang	Nourish the Yin and Clear the Lungs Decoction	養陰清肺湯
14. Formulas for eliminating dampness 祛濕劑 (17)			
	Ping Wei San	Calm the Stomach Powder	平胃散
	Huo Xiang Zheng Qi San	Agastache Powder to Rectify the Qi	藿香正氣散
	Yin Chen Hao Tang	Artemisiae Yinchenhao Decoction	茵陳蒿湯
	Ba Zheng San	Eight Herb Powder for Rectification	八正散
	San Ren Tang	Three Seed Decoction	三仁湯
	Gan Lu Xiao Du Dan	Sweet Dew Special Pill to Eliminate Toxin	甘露消毒丹
	Er Miao San	Two-Marvel Powder	二妙散
	Wu Ling San	Five-Ingredient Formula with Poria	五苓散
	Fang Ji Huang Qi Tang	Stephania and Astragalus Decoction	防己黃耆湯
	Zhu Ling Tang	Polyporus Decoction	豬苓湯
	Wu Pi Yin	Five Peel Decoction	五皮飲
	Zhen Wu Tang	True Warrior Decoction	真武湯
	Shi Pi Yin	Bolster the Spleen Decoction	實脾飲
	Bei Xie Fen Qing Yin	Dioscorea Hypoglauca Decoction to Separate the Clear	萆薢分清飲

	Ling Gui Zhu Gan Tang	Poria, Cinnamon Twig, Atractylodes and Licorice Decoction	苓桂朮甘湯
	Du Huo Ji Sheng Tang	Angelica Pubescens and Taxillus Decoction	獨活寄生湯
	Qiang Huo Sheng Shi Tang	Notopterygium Decoction to Overcome Dampness	羌活勝濕湯
<b>15. Formulas for eliminating phlegm 痰癥劑 (11)</b>			
	15-1 Dissolve phlegm and drying dampness 燥濕化痰 (2)		
	Er Chen Tang	Decoction of Two Aged (Cured) Drugs	二陳湯
	Wen Dan Tang	Warm Gallbladder Decoction	溫膽湯
	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
	Xiao Xian Xiong Tang	Minor Decoction (for Pathogens) Stuck in the Chest	小陷胸湯
	Gun Tan Wan	Vaporize Phlegm Pill	滾痰湯
	15-3 Dissolve phlegm and moisten dryness 潤燥化痰 (1)		
	Bei Mu Gua Lou San	Fritillaria and Trichosanthis Fruit Powder	貝母瓜萎散
	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
	San Zi Yang Qin Tang	Three Seed Decoction to Nourish One's Parents	三子養親湯
	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
	Ding Xian Wan	Arrest Seizures Pill	定癇丸
	Zhi Sou San	Stop Coughing Powder	止嗽散
<b>16. Formulas for improving digestion 消導劑 (7)</b>			
	Bao He Wan	Preserve Harmony Pill	保和丸
	Jian Pi Wan	Strengthen the Spleen Pill	健脾丸
	Zhi Shi Dao Zhi Wan	Unripe Bitter Orange Pill to Guide out Stagnation	枳實導滯丸
	Mu Xiang Bin Lang Wan	Aucklandia and Betel Nut Pill	木香檳榔丸
	Zhi Zhu Wan	Unripe Bitter Orange and Atractylodes Pill	枳朮丸
	Zhi Shi Xiao Pi Wan	Unripe Bitter Orange Pill to Reduce Focal Distention	枳實消痞丸
	Bie Jia Jian Wan		鱉甲煎丸
<b>17. Formulas for parasite diseases 驅蟲劑 (2)</b>			
	Wu Mei Wan	Mume Pill	烏梅丸
	Fei Er Wan	Fat Baby Pill	肥兒丸

<b>18. Formulas for abscess (yong yang) 瘰瘍劑 (7)</b>			
	Xian Fang Huo Ming Yin	Immortals' Formula for Sustaining Life	仙方活命飲
	Wu Wei Xiao Du Yin	Five Ingredient Decoction to Eliminate Toxin	五味消毒飲
	Yang He Tang	Balmy Yang Decoction	陽和湯
	Si Miao Yong An Tang	Four-Valient Decoction for Well Being	四妙勇安湯
	Wei Jing Tang	Reed Decoction	葦莖湯
	Da Huang Mu Dan Pi Tang	Rhubarb and Moutan Decoction	大黃牡丹皮湯
	Yi Yi Fu Zi Bai Jiang San	Coix, Aconite Accessory Root and Patrinia Powder	薏苡附子敗醬散

Total formulas listed above: 171

<b>Internal Medicine</b>	
1	abdominal mass (ji ju)
2	abdominal pain (fu tong)
3	atrophy-flaccidity (wei zheng)
4	bleeding disorders (xue zheng)
5	chest impediment (xiong bi)
6	common cold (gan mao)
7	constipation (bian bi)
8	consumptive disease (xu lao)
9	consumptive thirst (xiao ke)
10	convulsive syndromes (jing zheng)
11	cough (ke shou)
12	depression (yu zheng)
13	diarrhea (xie xie)
14	drum distension (gu zhang)
15	dysentery (li ji)
16	dysphagia occlusion syndrome (ye ge)
17	dyspnea (chuan zheng)
18	edema (shui zhong)
19	epigastric pain (wei tong)
20	epilepsy (xian zheng)
21	fainting (jue zheng)
22	goiter (ying bing)
23	headache (tou tong)
24	hiccupping and belching (e ni)
25	hypochondrial pain (xie tong)
26	impediment syndrome (bi zheng)
27	impotence (yang wei)
28	insomnia (bu mei)

29	internal damage fever (nei shang fa re)
30	ischuria (long bi)
31	jaundice (huang dan)
32	lumbago (yao tong)
33	lung distention (fei zhang)
34	malaria (nue ji)
35	mania (dian kuang)
36	palpitation (xin ji)
37	pulmonary abcess (fei yong)
38	pulmonary tuberculosis (fei lao)
39	seminal emission (yi jing)
40	spontaneous sweats, night sweats (zi han, dao han)
41	stranguria (lin zheng)
42	tinnitus and deafness (er ming er long)
43	vertigo (xuan yun)
44	vomiting (ou tu)
45	watery phlegm/sputum (tan yin)
46	wheezing syndrome (xiao zheng)
47	wind stroke (zhong feng)
<b>External Medicine</b>	
48	acne (fen ci)
49	acute mastitis (ru yong)
50	alopecia areata (you feng)
51	anal fissure (gang lie)
52	bedsore (ru chuang)
53	boil (ding chuang)
54	breast cancer (ru yan)
55	breast lump (ru pi)
56	carbuncle (yong)

57	contact dermatitis (jie chu xing pi yan)
58	digital gangrene (tuo ju)
59	drug rash (yao wu xing pi yan)
60	eczema (shi chuang)
61	erysipelas (dan du)
62	furuncle (jie)
63	goiter (ying)
64	hemorrhoid (zhi)
65	herpes zoster (she chuan chuang)
66	phlegmon (fa)
67	prostatic hyperplasia (qian lie xian zeng sheng zheng)
68	prostatitis (qian lie xian yan)
69	scrofula (luo li)
70	sebaceous cyst (zhi liu)
71	shank ulcer (lian chuang)
72	tinea (xian)
73	urticaria (yin zhen)
74	varicose veins (jin liu)
75	warts (you)
<b>Gynecology</b>	
76	abdominal masses (zheng jia)
77	amenorrhea (bi jing)
78	bleeding during pregnancy, unstable pregnancy (tai lou, tai dong bu an)
79	dysmenorrhea (tong jing)
80	infertility (bu yun)
81	insufficient breastmilk (que ru)
82	intermenstrual bleeding (jing jian qi chu xue)
83	irregular menstruation (yue jing bu tiao)
84	leukorrhagia (dai xia)

85	lochiorrhea (chan hou e lu bu jue)
86	menstrual breast aching (jing xing ru fang zhang tong)
87	menstrual edema (jing xing fu zhong)
88	menstrual headache (jing xing tou tong)
89	menstrual hematemesis and epistaxis (jing xing tu niu)
90	menstrual mental disorder (jing xing qing zhi yi chang)
91	menstrual oral ulcer (jing xing kou mei)
92	metrorrhagia and metrostaxis (beng lou)
93	miscarriage (zhui tai, xiao chan, hua tai)
94	morning sickness (ren chen e zu)
95	perimenopausal syndrome (jue jing qian hou zhu zheng)
96	postpartum abdominal pain (chan hou fu tong)
97	postpartum convulsion (chan hou jing zheng)
98	postpartum dizziness (chan hou xue yun)
99	postpartum fever (chan hou fa re)
100	postpartum retention of urine (chan hou pai niao yi chang)
101	uterine prolapse (yin ting)
<b>Pediatrics</b>	
102	anorexia (yan shi)
103	asthma (xiao chuan)
104	chang dao chong zheng (intestinal parasitic worms)
105	chicken pox (shui dou)
106	common cold (gan mao)
107	convulsions (jing feng)
108	cough (ke shou)
109	diarrhea (xie xie)
110	enuresis (yi niao)
111	epilepsy (xian zheng)
112	erysipelas (chi you dan)

113	fetal jaundice (tai huang)
114	food retention (ji zhi)
115	malnutrition (gan zheng)
116	measles (ma zhen)
117	mumps (zha sai)
118	pneumonia (fei yan ke sou)
119	purpura (zi dian)
120	retardation and flaccidity (wu chi wu ruan)
121	rubella (feng sha)
122	scarlatina (dan sha)
123	sweating (han zheng)
124	thrush (e kou chuang)
125	whooping cough (dun ke)
126	xiao er shui zhong (infantile edema)
<b>Orthopedics and Traumatology</b>	
127	Achilles tendon injury (gen jian sun shang)
128	acute lumbar muscle sprain (yao bu niu cuo shang)
129	bone fracture (gu zhe)
130	calcaneodynia (gen tong zheng)
131	carpal tunnel syndrome (wan guan zong he zheng)
132	cervical spondylosis (jing zhui bing)
133	frozen shoulder (jian guan jie zhou wei yan)
134	ganglionic cyst (jian qiao nang zhong)
135	joint dislocation (tuo wei)
136	knee joint collateral ligament injury (xi guan jie ce fu ren dai sun shang)
137	lumbar muscle strain (yao bu lao sun)
138	meniscal injury (ban yue ban sun shang)
139	prolapse of lumbar intervertebral disc (yao zhui jian pan tu chu zheng)
140	pyriformis syndrome (li zhuang ji zong he zhang)

141	sprained ankle (huai guan jie niu cuo shang)
142	strained neck (luo zhen)
143	tennis elbow (hong gu wai shang ke yan)

**References:**

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<b>Infectious &amp; Parasitic Diseases</b>	
1	bacillary dysentery
2	cholera
3	epidemic encephalitis
4	leptospirosis
5	malaria
6	mumps
7	schistosomiasis
8	typhoid fever
9	viral hepatitis
<b>Respiratory Diseases</b>	
10	bronchial asthma
11	bronchitis
12	pneumococcal pneumonia
13	pneumothorax
14	primary bronchopulmonary carcinoma
15	pulmonary tuberculosis
<b>Cardiovascular Diseases</b>	
16	chronic heart failure
17	chronic lung cardiopathy
18	hypertension
19	ischemic heart disease
20	rheumatic fever
21	rheumatic heart disease
22	viral myocarditis
<b>Gastrointestinal Diseases</b>	
23	acute pancreatitis
24	chronic gastritis
25	gastrointestinal ulcers

26	hepatocirrhosis
27	primary hepatic carcinoma
28	stomach carcinoma
29	ulcerative colitis
	<b>Urinary System Diseases</b>
30	chronic glomerulonephritis
31	chronic renal failure
32	urinary tract infection
	<b>Hematological Diseases</b>
33	aplastic anemia
34	leukemia
35	leukopenia & agranulocytosis
36	thrombocytopenic purpura
	<b>Endocrine Diseases</b>
37	diabetes
38	hyperthyroidism
	<b>Nervous System Diseases</b>
39	acute cerebrovascular diseases
40	epilepsy
41	facial paralysis
42	Guillain-Barre syndrome
43	Meniere's disease
44	neurosis
45	sciatica
46	trigeminal neuralgia
	<b>Acute Poisoning</b>
47	acute poisoning
48	organic phosphate insecticide poisoning

Reference:

Western Medicine Internal Medicine Foundations (for Chinese medicine, acupuncture and tui-na specializations), 1986, by Yin Fengli et al, Shanghai Science and Technology Publishing House

<b>Efferent Nervous System Pharmacology</b>	
1	adrenergic drugs (noradrenaline; isoproterenol; adrenaline; ephedrine; dopamine)
2	antiadrenergic drugs (propranolol; acetabulol; atenolol; metoprolol)
3	anticholinergic drugs (atropine)
4	cholinergic drugs (pilocarpine; nicotine; pyridine; neostigmine)
<b>Central Nervous System Pharmacology</b>	
5	analgesic drugs (morphine; codeine; naloxone; dolantin; fentanyl; methadone; pentazocine)
6	antiepileptic & antiparkinsonism drugs (phenytoin; ethosuximide; valproate; phenobarbital; clonazepam; levodopa)
7	antipyretic analgesic drugs (aspirin; paracetamol; indomethacin; ibuprofen; aminopyrine; phenylbutazone)
8	central stimulants (caffeine; coramine; doxapram)
9	psychotherapeutic drugs (chlorpromazine; haloperidol; imipramine; amitriptyline)
10	sedative hypnotic drugs (benzodiazepines; barbituates)
<b>Cardiovascular System Pharmacology</b>	
11	antianginal drugs (nitroglycerin; beta blockers; dipryamidole; nifedipine)
12	antiarrhythmic drugs (quinidine; procainamide; lidocaine; phenytoin; propranolol; amiodarone; verapamil)
13	antihypertensive drugs (reserpine; beta blockers; prazosin; hydralazine; hydrochlorothiazide; captopril)
14	cardiacglycosides (digoxin)
15	diuretic drugs (thiazides; furosemide; antisterone; spironolactone; triamterene; mannitol)
16	drugs for hyperlipidemia (clofibrate; nicotinic acid; cholestyramine)
<b>Respiration, Gastrointestinal, Hematologic and Uterine Pharmacology</b>	
17	drugs for gastrointestinal tract disorders (antacids; H2 receptor antagonists; magnesium sulfate; irritant laxatives; diphenoxylate; loperamide)
18	drugs for respiratory tract disorders (salbutamol; aminophylline; beclomethasone)
19	hematologic and hemopoetic drugs (heparin; dicoumarol; warfarin; aspirin; vitamin K; ferrous sulfate; folic acid; vitamin B12)
20	uterine stimulant drugs (oxytocin; ergot; prostaglandins)
<b>Endocrine Pharmacology</b>	
22	adrenal steroids and related drugs (cortisone; hydrocortisone; prednisone; prednisolone; dexamethasone)
23	drugs for diabetes mellitus (insulin; tolbutamide; metformin)

24	drugs for hyperthyroidism and hypothyroidism (thyroxine; triiodothyronine; methylthiouracil; carbimazole)
25	endogenous peptides and their antagonists (histamine; diphenylhydramine; cimetidine; prostaglandin; 5-HT; methylsergide; angiotensin)
<b>Chemotherapy</b>	
26	antibacterial drugs (penicillins; cephalosporins; erythromycin; clindamycin; aminoglycosides; tetracyclines; chloramphenicol)
27	antimycotic & antiviral drugs (griseofulvin; amphotericin B; nystatin; clotrimazole; amantadine)
28	antineoplastic drugs (cyclophosphamide; methotrexate; mercaptopurine; fluorouracil; hydroxyurea; bleomycin; vincristine; colchicine)
29	antiparasitic drugs (chlorquine; primaquine; pyrimethamine; piperazine; pyrantel; mebendazole)
30	antitubercular drugs (isoniazid; streptomycin; rifampicin; ethambutol; pyrazinamide)
31	sulfonamides & other drugs (sulfisoxazole; sulfadiazine; sulfamethoxazole; sulfamidine; phthalylsulfathiazole; sulfacetamide; silver sulfadiazine; sulfamylon; trimethoprim; furantoin)

Reference:

Pharmacology (for Chinese medicine, Chinese herbology specializations), 1984, by Wang Qinmao et al, Shanghai Science and Technology Publishing House