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<b>DATE</b>	June 23, 2023
<b>TO</b>	Board Members, Acupuncture Board
<b>FROM</b>	Sarah Rankin, Education Coordinator
<b>SUBJECT</b>	Acupuncture Curriculum Survey Report

On May 20, 2022, the California Acupuncture Board (Board) hosted a California Acupuncture Curriculum Stakeholder Meeting to hear from stakeholders regarding the current Board curriculum requirements based on their experiences and opinions. At the time, the Board sent licensees, training programs, and other interested stakeholders a survey asking for their experiences with the curriculum requirements. The entire stakeholder meeting can be viewed and heard online at <https://www.youtube.com/watch?v=vKnMEv8o0W4>.

Although there is no clear consensus on opinions regarding the current regulatory curriculum requirements, staff has been able to identify some trends in the voices heard. On average, the survey found that about 45% of stakeholders think the curriculum is sufficient and another 45% think the curriculum is insufficient. Whereas only 10% of stakeholders believe the curriculum is excessive.

In the Basic Sciences portion of the curriculum requirements, many surveyed believe that physics is unnecessary for Acupuncture education and that more anatomy would be beneficial. When it comes to the Case Management and Practice Management requirements there were several stakeholders who requested increased education in Insurance Billing.

Similar comments were received by the voices heard at the stakeholder meeting and the responses received to the written. However, there were several opinions provided that argued that the focus of education should not be on hours but on quality of education, as well as meeting necessary professional competencies.

The final reporting includes the staff takeaway summaries of the stakeholder responses received, evaluated question by question as well as the full survey results.

## Curriculum Survey Question Takeaways:

1. Basic Sciences (350 hours):
  - Split evenly between the Board requiring enough hours and not requiring enough hours, 45.07% each.
  - Most of the respondent's, 80.82%, stated that science prerequisites are vital to the educational requirements of California acupuncturists, however, there was no clear consensus on why science prerequisites are vital as part of the education and training for Licensed Acupuncturists.
  - There were several suggestions that removing the physics coursework from the current Basic Sciences requirement would be beneficial, those that gave an explanation as to why simply stated that physics isn't necessary to a licensed acupuncturist.
  - No clear consensus on how much science and clinical science training would be the optimal to allow California acupuncturists to achieve safe entry-level practice and communication with other healing arts primary care practitioners for the purposes of referrals
2. Acupuncture & Oriental Medicine Principles, Theories & Treatment (1,255 hours):
  - A majority, 57.14%, responded that the Board requires enough hours.
  - There were no notable repeated suggestions as to what coursework in Acupuncture and Oriental Medicine Principles, Theories and Treatment would be beneficial to add to or remove from the current requirements.
3. Clinical Medicine, Patient Assessment and Diagnosis (240 hours):
  - A slight majority, 55.71%, responded the Board does not require enough hours. There were no notable repeated suggestions as to what coursework in Clinical Medicine, Patient Assessment and Diagnosis would be beneficial to add to or remove from the current requirements.
4. Case Management (90 hours):
  - A slight majority, 54.93%, stated the Board requires enough hours. There were several suggestions that it would be beneficial to increase the current requirements for coursework in Insurance billing in Case Management.
5. Practice Management (45 hours):
  - A slight majority, 52.86%, state the Board does not require enough hours. There were several suggestions that it would be beneficial to increase the current requirements for coursework in Insurance billing in Practice Management.
6. Public Health (40 hours):

- A majority, 70%, responded the Board requires enough hours. There were no notable repeated suggestions as to what coursework in Public Health would be beneficial to add to or remove from the current requirements.
7. Professional Development (30 hours):
- A slight majority, 53.52%, stated the Board requires enough hours. There were no notable repeated suggestions as to what coursework in Professional Development would be beneficial to add to or remove from the current requirements.
8. Herbal Medicine (450 hours):
- A near even split, 47.76% and 44.78%, of stakeholders stated that the current Herbal Medicine requirements of 450 hours of didactic training is sufficient or insufficient.
  - A slight majority, 56.92%, stated that the current educational requirements in Herbal Medicine are preparing CA acupuncturists for the safe and effective use of herbs. There were no notable repeated suggestions as to what Herbal Medicine coursework would be most beneficial to have.
9. Clinical Practice (950 hours):
- Upon further review, Q21 was found to be confusing, it states, "Currently 75% of clinical practice needs to be completed at a clinic that is owned and operated by the school, with 25% allowed at an approved externship site. This amount is:" The question is unclear if it is referencing the 75% or 25%, depending on how the reader reads it, the meaning is opposite.\*
  - A majority, 71.01%, stated that it is necessary to have a specified amount of Clinical Practice training hours completed at a clinic that is owned and operated by the school.
    - There were no notable repeated suggestions as to the benefits of having a specified amount of Clinical Practice training hours completed at a clinic that is owned and operated by the school.
  - A majority, 76.12%, state that having a minimum amount of Clinical Practice training completed in an approved externship not owned and operated by the school would be sufficient to prepare acupuncturists for entry level practice, however, there was no clear consensus as to how many hours of Clinical Practice training at an approved externship would be sufficient for the entry level of practice.
    - There was no clear consensus as to what Clinical Practice training coursework would be sufficient for entry level practice of acupuncture.

#### 10. Overall Curriculum (3000 hours):

- There was no clear consensus as to what changes to the curriculum requirements would prepare acupuncturists for entry level practice.
- A small majority, 59.7% state that their school's didactic and clinical curriculum did adequately prepare them for entry level practice.
- Of those that stated that their school's didactic and clinical curriculum did *not* adequately prepare them for entry level practice, there were two overall themes of what additional training would be needed to address this deficiency:
  - i. Increased clinical hours, whether through schools, hospitals, or private practices, and,
  - ii. Increased training in practice management/business.

# Q1 How much science and clinical science training would be the optimal to allow CA acupuncturists safe entry-level practice and communication with other healing arts primary care practitioners for the purposes of referrals?

Answered: 61 Skipped: 13

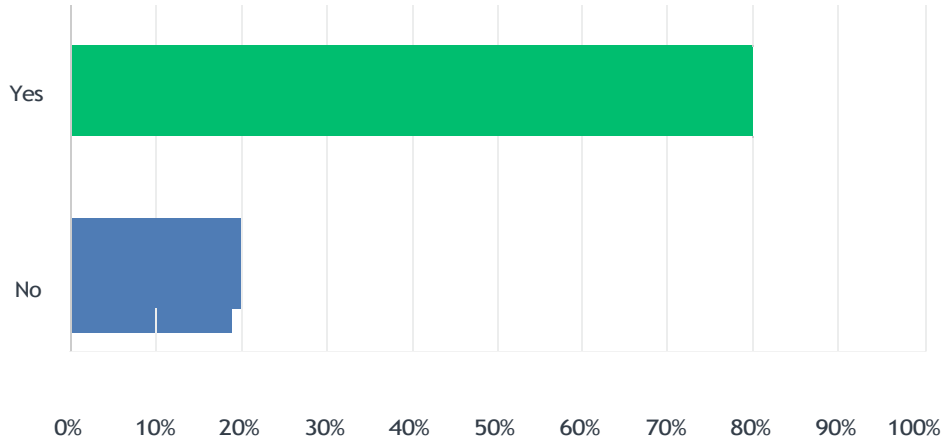
#	RESPONSES
1	Nursing level of competence
2	The material included in the transitional Doctorate program at Pacific College of Health and Science should be minimum education for all licensed acupuncturists. Additionally, all acupuncturists should have at least one anatomy/cadaver lab. Given that we insert needles into patients' bodies, massage therapists, who often also have cadaver labs, as well as other health professionals are often shocked that we do not have more extensive anatomy training.
3	It's not the hours issue. It's the content of the textbook and how the curriculum is embedded in ideas. Do you mean the science in Western medicine or in Chinese medicine?
4	Dr degree is good and a minimum of 5yrs experience and learning some western medicine examination procedures
5	current curriculum is good enough. the ratio of Anatomy hours should be higher.
6	Anatomy, physiology, pathology, psychology, pharmacology, basic diagnostics
7	350hours
8	0
9	3years
10	At least 5000hours
11	40%
12	2 years clinical
13	4000hrs
14	Human body such as anatomy and physiology
15	Anatomy, physiology, psychology, nutrition, microbiology, chemistry, physics, computer
16	In Traditional Chinese medicine it is very important That After Students Complete all the courses. Need internship To achieve clinical practice and direct by experiences practitioner With enough patien and time.
17	4 years
18	The more the better
19	Biology Chemistry Physics Calculus
20	At least 1/3 of the whole program
21	The clinic science training shall be enough for the acupuncturist to understand the mechanism of brain anatomy and chemical interaction on how acupuncture works.
22	Increase income and social status
23	Unsure of an exact number of hours. Quality is so much more important than quality.
24	same as required for other professional schools. Chiropractic, Optometry, Physical therapy etc
25	enough
26	Bachelor of Science Degree requirement before entering or being considered for applying to Acupuncture School (at a minimum). Then in the curriculum for acupuncture school a requirement of 3 anatomy/physiology courses, 2 orthopedic/neurological examination courses, and 1 biochemistry course.
27	3 years worth of a combination of mainstream biological science, laboratory and clinical experience.
28	A Physician Assistant or a Registered Nurse's level of science and clinical science training would be optimal for CA Acupuncturist's practice and communication.
29	1000 hours
30	How is science being defined here? If the basic biology, physics, and chemistry coursework, then no. Western physiology and anatomy, yes.

## CA Acupuncture Curriculum

31	40%
32	The current science and clinical science training is ok.
33	1000 hours
34	basic life sciences - chem/bio, advanced A and P, diagnosis / pathology
35	add 90 hours on radiology and labs
36	Our current classes meet the safe-entry level practice. We can increase how to communicate with western providers through CEU trainings.
37	What is currently being offered
38	Need some basic understanding of lab testing, how to properly interpret lab results.
39	To the same standard where according to the country where acupuncture originated China is accepted: that is for CA acupuncturists to have at least same level of trainings as graduates of Bachelor of Medicine in TCM or Acupuncture had
40	Pre-Admission: Biology, Chemistry, Biochemistry And then, Medical Terminology, Anatomy & Physiology, Western Clinical Science, Pharmacology, Pathology, Lab Tests (ordering & reading blood, urine & diagnostic imaging tests/results)...and something that takes the basic TCM diagnostic treatment principles and connects them to related/non-related western medicine.
41	Biology, Organic Chemistry, Microbiology, Anatomy and Physiology
42	It's not really a matter of hours but of competency. The fundamentals of understanding science should be taught with critical reasoning and researching skills emphasized.
43	3500 Hours
44	Should be an ongoing requirement along with any CM training. The lack of ability to explain basic science by practitioners is concerning. More so when it's practitioners explaining it to patients.
45	450 hours of curriculum competent education , content of curriculum is more important then hours
46	1000
47	120 hours
48	Enough to know if what you are treating is in or out of your scope of practice and who to effectively refer to.
49	What a vague question. There should be at least 20.
50	We have more training then 48 of the 50 states, we have the training in our curriculum
51	2 years
52	At least as much as is currently required.
53	this question is overly broad. The basics should not include microbiology - all major body systems (nerve, blood, organ) should be understood at an advanced level for safety. Communication with PCP is a completely different topic - advanced understanding of what is required to present in a report back to the PCP is key (resolution, potential recurrence, aggravation and preventive measures specified to the patient - with records)
54	Current number of hours, but with more rigor required.
55	All pre-med classes except physics
56	Basic biology, anatomy and physiology and chemistry
57	90%
58	The more you can include on Pharmaceutical and Herb interaction the better.
59	why physics???
60	Ideally a bachelor's of science level in biology, like most other healthcare professionals
61	the current requirement is good

## Q2 Are science prerequisites vital to the educational requirements of CA acupuncturists?

Answered: 73 Skipped: 1



ANSWER CHOICES	RESPONSES	
Yes	80.82%	59
No	19.18%	14
<b>TOTAL</b>		<b>73</b>

### Q3 If you answered Yes to Question 2, what about those prerequisites make them vital?

Answered: 55 Skipped: 19

#	RESPONSES
1	Acupuncturists work daily with patients who use bioscience medicine. Their diagnosis are bioscience diagnosis. To be able to take care of these patients and to be able to effectively communicate with their healthcare team, it is necessary for all acupuncturists to be well versed in biomedicine.
2	The healthcare system consists of healthcare professionals with similar science prerequisites. Some background in these sciences is crucial to integration, communication, and the longevity of our medicine in a modern setting.
3	Because in modern day, vital education is widely used, at the same time people are busy.
4	The guidelines and procedures are prepared for successful treatment. If we studied western medicine but not Chinese medicine, the study will become redundant, because we paid the school to learn the real acupuncture not become a western medical staff, it will be the wrong direction
5	Further to understand the principal acupuncture technology
6	These are the based knowledge to understand human body.
7	Anatomy, physiology, pathology, psychology, pharmacology, basic diagnostics
8	yes
9	I think it is not necessary.
10	1: clinical trial 2:Safety and communication skills
11	Doctor
12	It is going to modern practitioner.
13	Only through scientific training can one understand the purpose and theory behind acupuncture.
14	Anatomy,physiology, biology
15	Anatomy, chemistry, physiology, microbiology, psychology,
16	Medical terminology, Pathology Physiological Anatomy.
17	Not sure
18	Biology Chemistry Physics Calculus
19	Basic life biology
20	The biology, chemistry and neuro-science entry level knowledges.
21	Raise income,education levels and Ph.D. levels
22	Licensed doctor degree with 4000 hrs education
23	If dispensing herbs you need to know interactions with pharmaceuticals
24	Be prepared for the science of Acupuncture and herbs
25	In order for an acupuncturists to operate and be a competent Primary Care Physician, they need to be able to make judgements about when to refer out to emergency medicine or other physicians. Also, being able to interpret labs and diagnostics from a western doctor is vital.
26	1. A complete understanding of today's medical methodologies and practices, and how the west and the east interact, conflict and compliment eachother, enables cooperation and mutual respect in the outside medical world. 2. One of the main deterrents for acupuncturists working amidst mainstream medical professionals, is the inability to communicate and respect eachothers fields. 3. To not obtain a sound appreciation and understanding of physical anatomy, physiology and pathology, is for the practice of acupuncture, herbology and the many other Asian techniques, to remain obscure, fringe and sidelined by modern medicine in general. 4. Likewise, the entry level acupuncturist is cut off from modern medicine and its professionals. The assumption remains that we are blinded by history, that we are inept and irresponsible, even a joke to society and our patients. This is futher isolating and supports failure rather than success in the field.

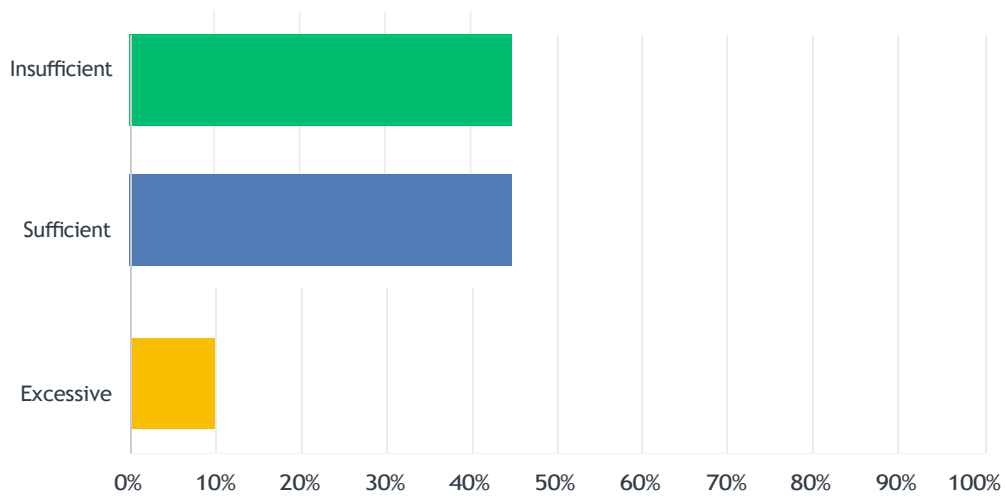


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- 27 CA acupuncturists are primary care practitioners, using acupuncture, Chinese herbal medicine, tuina, qigong, diet and other various treatment techniques, to improve symptoms extensively involved with almost all modern medical diagnoses, including internal medicine, pediatric, gynecology, orthopedic, podiatric, digestive-respiratory-cardiology-nephrology, and neuro- endocrine-immune systems, physical and mental, internal and external. Therefore, science prerequisites are vital for acupuncturists to understand their patients' diseases diagnosed by their MDs and other health professionals, before starting Acupuncture and Chinese medicine treatment.
- 
- 28 These are common knowledge to communicate with other medicine and patients.
- 
- 29 Making the acupuncture students have important basic knowledge of Western medicine.
- 
- 30 Communication with allopathic practitioners, understanding research and disease conditions
- 
- 31 They help set you up for success in more advanced science based courses and set up basic understanding of science
- 
- 32 physics and chemistry not vital at all for acupuncture practice
- 
- 33 Understanding scientific papers is important. Communicating with other Western trained providers and patients is important to increase referrals and help patients understand treatment.
- 
- 34 Important yes, not VITAL.
- 
- 35 Acupuncture is a specialization of General Oriental medicine , just like Oncology, Pediatrics, Neurology, Surgery are to the general medicine. ALL science pre- reqs ARE required to properly understand the general Chinese Medicine, let alone the art of Acupuncture
- 
- 36 First, it demonstrates that the student has the capacity to complete that coursework. Otherwise, they should not be admitted because it would be a waste of their money. However, with the exception of the physics of optics & radiation physics, I do not think that a Physics course is necessary. Add applicable physics to the first year curriculum-no need to require the rest of it. It's not necessary and used to weed people out or to make us look like a western Pre-Med. What's the point.
- 
- 37 A solid baseline of knowledge.
- 
- 38 Having a solid foundational set of knowledge allows clinicians to understand the pathomechanisms from a Chinese medicine perspective and enables them to critically reason their way through a successful treatment. It is not possible to train acupuncturists to the same level of knowledge as a Western practitioner but we can train them to be good researchers and with a strong enough foundational knowledge, how to understand their patient's Western pathology.
- 
- 39 Because our patients are well educated in science, how can doctors answer patients' questions if they are not well educated in science?
- 
- 40 Basis WM anatomy, WM physiology, pharmacology, and basic biology. For those doing herbal medicine, then chemistry, biochemistry, and pharmacology are necessary.
- 
- 41 knowledge and skills of Asian Medical science refer to understanding and applying the same world body of medical physiology and pathology universally accepted. requires prerequisite science courses in order to comprehend core biomedical science. Theories and concepts in Asian medicine in today's world can be explainable in terms of biomedical science.
- 
- 42 Prepare practitioners to communicate with MDs and other healing professionals, read and order lab tests, understand anatomy and physiology, understand body systems in the western paradigm, communicate with clients, the public and children
- 
- 43 To be able to recognize more serious conditions that need referral. To be able to speak to other health care practitioners in a common language. To be able to help patients with their test results.
- 
- 44 You need to know Anatomy, a class that is in our curriculum
- 
- 45 Acupuncturist and all health care practitioners must have a basic understanding of human physiology and anatomy before they begin the rigorous training that, upon licensure, makes them responsible for the health and well-being of every individual they treat. To provide adequate treatment, stay current with new treatment protocols, and understanding of disease and injury, practitioners must have more than a basic understand of human physiology and anatomy. If students enter a program without basic knowledge in these subjects they are at risk for not being able to progress in the curriculum and patient care may be jeopardized due to lack of preparation. Students must also have preparation in chemistry. Herbal medicine is chemistry. To safely prescribe herbs it is important to understand the chemistry of these herbs.
- 
- 46 I feel that because Western/Allopathic doctors are not trained in our medicine, we must be trained in their medicine, to a certain extent. Otherwise there can be no proper dialogue, exchange of ideas, and integration into the medicine system.
- 
- 47 OMG - you are sticking a needle into someone. If it wasn't necessary from that one aspect, then all acupuncturists become the same level or lesser to a physical therapist.
- 
- 48 We need to be trained in basic sciences in order to have a foundation for medical knowledge, just as Western physicians do. It also allows us to truly be integrative practitioners, which is the future of our medicine in the US.
-

- 49 Thorough understanding of general biology gives the basis for human bio and plant/animal bio which helps for herbal pharmacology and Oriental nutritional counseling and is the basic prerequisite for understanding human health and illness, prepping for Pathology classes and Western and Eastern pharmacology. Chemistry is necessary for best understanding of biochemistry in human health and pharmacokinetics. Anatomy and Physiology should be a given, as it is essential for competency in understanding human health/illness and in performing acupuncture.
- 
- 50 Anatomy and physiology as we have to anatomically know where the points are
- 
- 51 Anatomy, Pharmaceutics, Statistics
- 
- 52 Your question is confusing. I think it needs to be a pre-requisite to be accepted into a medical graduate program. This will help in understanding herbs (how they work) and the interactions between herbs and pharmaceuticals.
- 
- 53 biology , anatomy and physiology...drug herb interaction...some biochemistry, etc.....But why physics???
- 
- 54 Being able to understand western terminology, communicate with other healthcare providers, and to elevate the profession as a whole in an integrative setting
- 
- 55 Science is the foundation of medicine. Without the acupuncturist will not be taken seriously as a professional
-

## Q4 350 hours of training in Basic Sciences

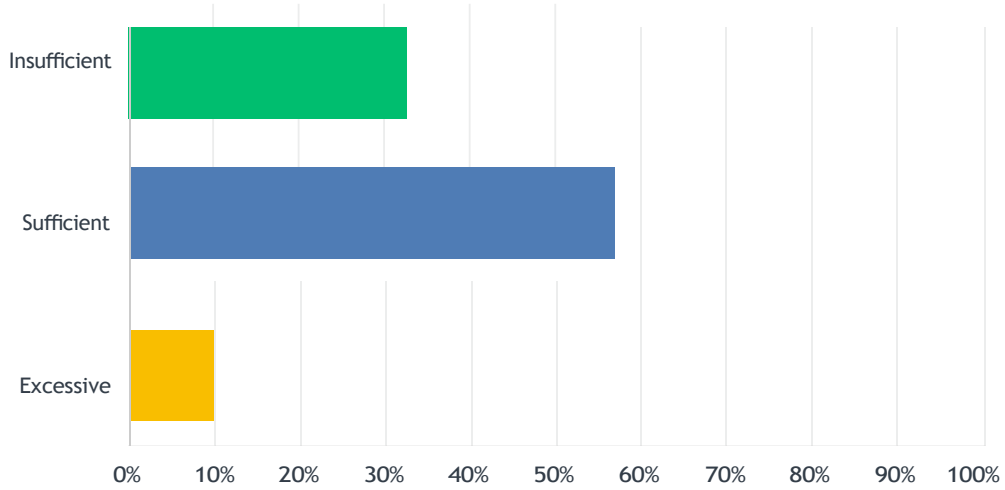
Answered: 71 Skipped: 3



ANSWER CHOICES	RESPONSES	
Insufficient	45.07%	32
Sufficient	45.07%	32
Excessive	9.86%	7
<b>TOTAL</b>		<b>71</b>

## Q5 1,255 hours of training in Acupuncture and Oriental Medicine Principles, Theories and Treatment

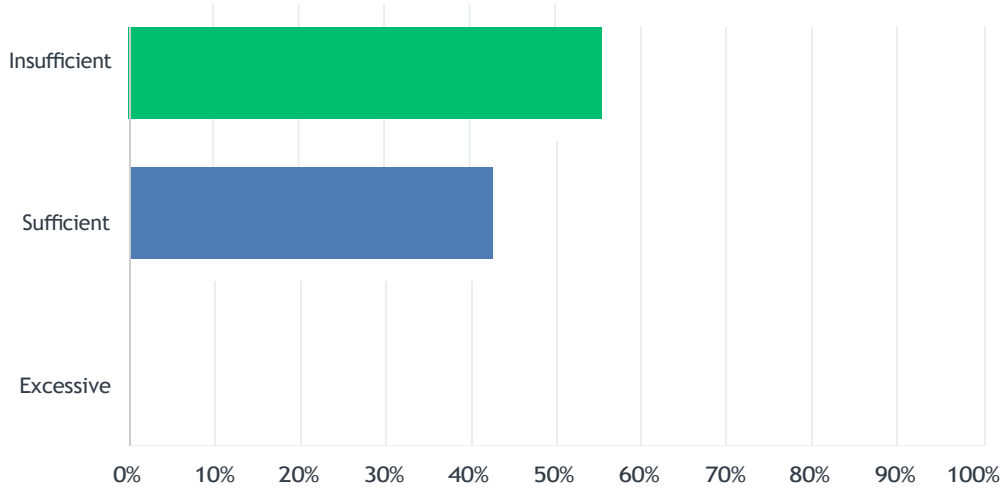
Answered: 70 Skipped: 4



ANSWER CHOICES	RESPONSES	
Insufficient	32.86%	23
Sufficient	57.14%	40
Excessive	10.00%	7
<b>TOTAL</b>		<b>70</b>

## Q6 240 hours of training in Clinical Medicine, Patient Assessment and Diagnosis

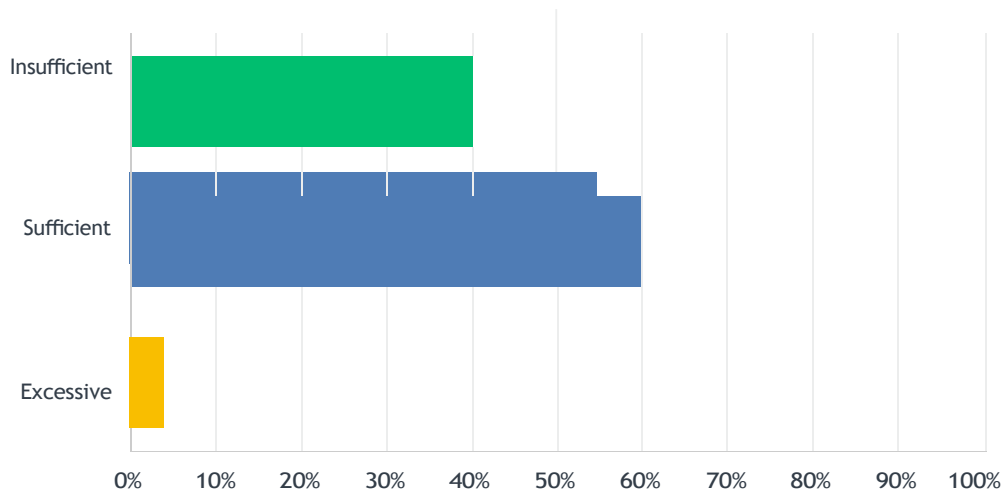
Answered: 70 Skipped: 4



ANSWER CHOICES	RESPONSES	
Insufficient	55.71%	39
Sufficient	42.86%	30
Excessive	1.43%	1
<b>TOTAL</b>		<b>70</b>

## Q7 90 hours of training in Case Management

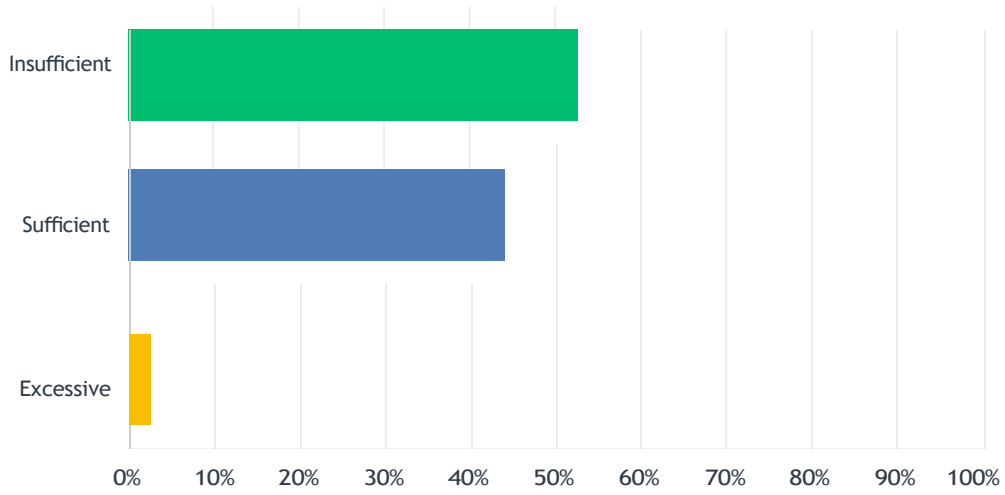
Answered: 71 Skipped: 3



ANSWER CHOICES	RESPONSES	
Insufficient	40.85%	29
Sufficient	54.93%	39
Excessive	4.23%	3
<b>TOTAL</b>		<b>71</b>

## Q8 45 hours of training in Practice Management

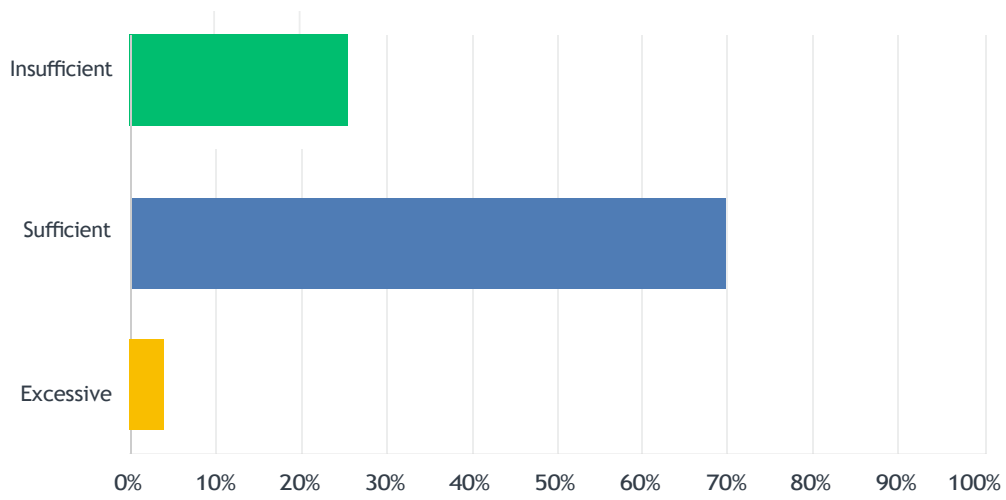
Answered: 70 Skipped: 4



ANSWER CHOICES	RESPONSES	
Insufficient	52.86%	37
Sufficient	44.29%	31
Excessive	2.86%	2
<b>TOTAL</b>		<b>70</b>

## Q9 40 hours of training in Public Health

Answered: 70 Skipped: 4

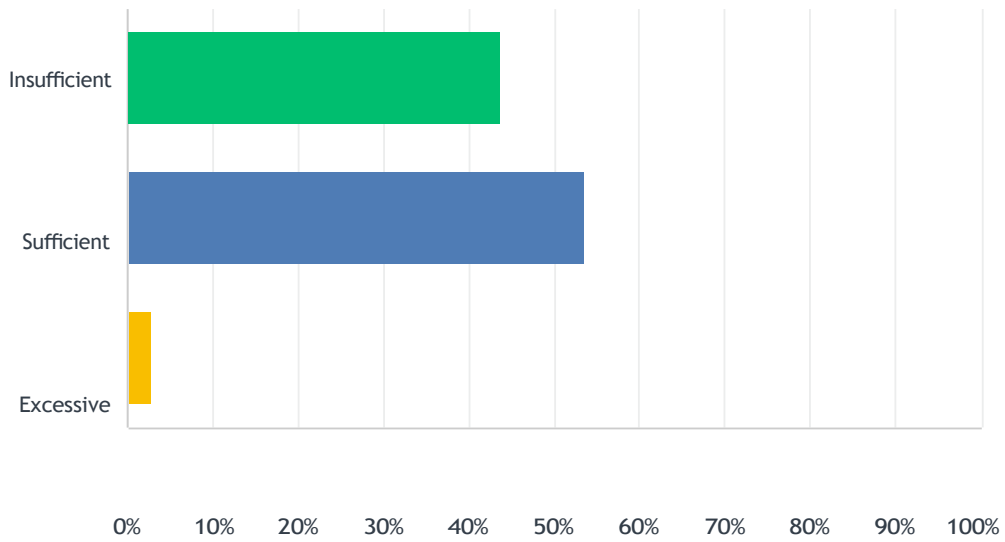


ANSWER CHOICES	RESPONSES	
Insufficient	25.71%	18
Sufficient	70.00%	49
Excessive	4.29%	3
<b>TOTAL</b>		<b>70</b>



## Q10 30 hours of training in Professional Development

Answered: 71 Skipped: 3



ANSWER CHOICES	RESPONSES	
Insufficient	43.66%	31
Sufficient	53.52%	38
Excessive	2.82%	2
<b>TOTAL</b>		<b>71</b>

## Q11 What coursework in Basic Sciences do you think would be beneficial to add to or remove from the current requirements?

Answered: 49 Skipped: 25

#	RESPONSES
1	Add in more case studies approach to biomedicine. Students know the values for labs but often are not able to assess what these results mean in a real world setting.
2	N/A
3	四大经典 [Four Classics]
4	TCM is not Western Medicine, they are two different theory and approach to treat and maintain the health. If an attempt is made to create Western medicine in terms of acupuncture, when there is incurable disease, a trained acupuncturist will not able comprehensive disease and find solutions to treat patients. Therefore, We should remove (1) General biology; (2) Chemistry, including organic and biochemistry; (3) General physics, including a general survey of biophysics; (4) General psychology, including counseling skills; (5) Anatomy-- a survey of microscopic, gross anatomy and neuroanatomy; (6) Physiology-- a survey of basic physiology, including neurophysiology, endocrinology, and neurochemistry; (7) Pathology and Pathophysiology-- a survey of the nature of disease and illness, including microbiology, immunology, psychopathology, and epidemiology; (8) Nutrition and vitamins and laboratory instruction in the following basic science courses: and add more hours and courses on Acupuncture and Oriental Medicine Principles, Theories and Treatment, etc. such as Classical acupuncture and Oriental medicine literature, including Jin Gui, Wen Bing/Shang Han, Nei Jing etc.
5	remove General physics. add the time to Anatomy
6	none, the current regulation is good enough
7	Clinical practice
8	Medical related subject.
9	Add into anatomy - working with cadavers; just learning the anatomy through text is not enough
10	Add biology
11	Add biochemistry
12	Acupuncture research
13	The essence of basic sciences requirements is not hours. The material shall focus on and oriented to how acupuncture works.
14	Add Traditional Chinese Medicine Clinical Teaching and clinical Practice
15	More hours of nutrition would be beneficial.
16	Add general chemistry, organic chemistry, calculus, physics
17	Organic Chemistry, Micro biology
18	add more anatomy, physiology, biochemistry, pathophysiology
19	It is my opinion that some subjects require more in depth study and others are a bit overdone and unnecessary. -Biology should be a basic survey for an understanding in life science be it plant based or animal. Beyond that it is useless to functional acupuncture and herbology. - Chem (organic and biochem) should also be a survey to support the basic understanding of chemistry and how it impacts the process of life. -The same with Physics, Physical Science with the exception of 'Biophysics' as there are many useful and complimentary methods available to an acupuncturist which fall within their scope of practice. -Psychology should be basic as well, introductory essentially. However it should be adequately inclusive of simple and effective therapies which are available to the average individual as well as his/her acupuncturist. 'Tapping' and emotional neutralizing techniques using acupuncture points, meditation, breathing techniques, etc. are great examples. -Anatomy, Physiology, Pathology should be in much greater depth than I experienced in acupuncture school. Had I not already earned a BS in college Biology, complete with labs, dissections, histology, etc., I would have been woefully ill equipped to digest and understand these areas. They should each be college based 101 courses in my opinion, complete with adjacent labs. -Human dissection is a needed bonus for the appreciation and comprehension of the human body, regardless of old fashioned, superstitious hold overs of TCM. -Nutrition should be expanded considerably. Today the average individual knows more about nutritional supplementation and a wide variety of dietary types and protocols than the entry level acupuncturist has gained knowlegde of. When it comes to supplementation, vitamins are just not enough. All nutrient impacts and deficits need to be explored and explained such as minerals, enzymes, herbs in general, amino acids, glandulars, aromatherapy, ayurvedic medicines, vibrational medicines such as homeopathy and flower essence remedies, and of course vitatmins and all the many combinations of the above. Essentially that which supports comprehension and medical foundation for the acupuncturist should be enhanced. Unless the acupuncturist wants to pursue a sideline practice as a chemist, psychologist or biologist, those courses should be a general survey.

## CA Acupuncture Curriculum

20	The list of coursework in 350 basic Sciences looks strong , schools already emphasize anatomy, physiology, pathology, but immunology needs to have sufficient time to teach, because in modern society autoimmune disorder patients are growing rapidly. I would suggest increasing the total hours from 350 to 400, and immunology should have at least 50 hours.
21	N/A
22	Remove "Physics", Increase the hours of Anatomy, Physiology and pathology.
23	Remove physics, add microbiology
24	none
25	add more labs and radiology
26	none
27	Decreasing chem, physics + increasing anatomy
28	Chemistry, organic chemistry, physics are unnecessary. Other science courses are important, with more emphasis needed on anatomy and lab thereof.
29	Physiology, Pathology, Pharmacology, Anatomy, Medical Bio-chemistry, medial Bio-physics, Microbiology, Epidemiology
30	Remove Physics. Add more emphasis on how to order and read Lab Tests & Diagnostic Imaging (inlcude x-ray, ultra sound, CT & MRI).
31	I'd remove Physics. The rest make sense.
32	cadaver-based anatomy or some form of three-dimensional anatomy training.
33	I think this course is very good
34	Add pharmacology. Add in depth physiology, regular physical exam testing, muscle and bone testing.
35	Specific courses were outlined in the CAB Education Committee and Curriculum Competency Committee reports in the early 2000's ..There is significant need to increase the basic sciences education level for the profession to cope with the growth that has occurred and will likely continue to occur,to continue to maintain an excellent safety record.
36	500
37	Basic biology, chemistry and physics are not beneficial to entry-level clinical practice or communication with/referral to other providers. Medical terminology, current hospital protocols, common prescriptions, and anatomy are the most useful from a practical standpoint.
38	(1) General biology - Keep (2) Chemistry, including organic and biochemistry - REMOVE (3) General physics, including a general survey of biophysics - REMOVE (4) General psychology, including counseling skills - KEEP (5) Anatomy-- a survey of microscopic, gross anatomy and neuroanatomy - KEEP (6) Physiology-- a survey of basic physiology, including neurophysiology, endocrinology, and neurochemistry - KEEP (7) Pathology and Pathophysiology-- a survey of the nature of disease and illness, including microbiology, immunology, psychopathology, and epidemiology - KEEP (8) Nutrition and vitamins - KEEP
39	I think general physics can be removed and replaced with an additional pathophysiology or grand rounds course.
40	remove physics
41	Less general biology (this could be a prerequisite for program admission) Add neuroanatomy/neurophysiology
42	Pharmacognosy should be a required course.
43	try and get new practitioner to know the limits of their scope - 'so tired of hearing 'acupuncture can heal everything'
44	Surface anatomy with a hands on lab would be a beneficial additional requirement.
45	I did not find physics helpful at all but my class did not contain biophysics. It was a long time ago.
46	Add pharmacology for herb drug interactions
47	Remove and make it a pre-requisite to get into an Acupuncture program: General biology; (2) Chemistry, including organic and biochemistry
48	physics ..... intense biochemistry
49	Pathology should be expanded upon to understand infectious disease more, especially during these past years with the pandemic and seeing acupuncturists not understand basic germ theory and being clean

## Q12 What coursework in Acupuncture and Oriental Medicine Principles, Theories and Treatment do you think would be beneficial to add to or remove from the current requirements?

Answered: 50 Skipped: 24

#	RESPONSES
1	N/A
2	Add: Classical Chinese Medicine and how it differs from the TCM produced as a result of China's cultural revolution. Also add: Much more extensive training in pulse reading, given its importance in thorough diagnostics. In my masters program, I was taught almost nothing but the most basic characteristics of the pulse.
3	500s should be added
4	针灸甲乙经
5	Jin Gui, Wen Bing/Shang Han, Nei Jing; Nan Jin 81 chapters,
6	Add the Classical traditional Chinese medicine literatures
7	none, the current regulation is good enough
8	Treatment should be more
9	Practice
10	Yes.
11	In "herbal prescription" add toxicity and adverse event for herbals as well as management of adverse events
12	Add manual technique
13	Add more herbal prescription courses will be beneficial Acupuncture and Oriental Medicine Principles, Theories and Treatment.
14	Meridian acupuncture Study
15	Add Shan Han Lun in the course requirements. While teaching the classic subject, the Principles, Theories and Treatment shall be incorporated in the classic subject. In brief, 4 in 1.
16	Increase the study of traditional Chinese medicine acupuncture, internal medicine, and orthopedics
17	You should do surveys on what aspects of OM theory and acupuncture are most commonly used by practitioners. There is way too much volume covered in the coursework on obscure patterns and techniques that seldom, if ever, come up in clinical practice. There is no reason to be tested on every obscure OM theory that has ever existed. Things like what planet corresponds to the wood element has no clinical significance and offers no additional safety for patients. There is a point where it becomes memorizing for the sake of memorizing.
18	More than just Chinese herbs ..... global herbology
19	enough
20	add OM theory, study of classical Chinese texts, learn Mandarin for medicine, basic Mandarin, learn Chinese philosophy, Chinese history and perspective of the body in relation to the earth, herbal medicine, hands on palpation for point location
21	A decrease in classical and modern acupuncture could be considered as it is of minimal value to the practicing acupuncturist. Other than that, all other facets in this area are important and necessary as they are the core of this field.
22	This part of coursework is sufficient, as long as students take them seriously and absorb well.
23	N/A
24	Add pain management related courses. Add TCM specialty courses.
25	no change
26	make optional: Oriental Massage (e.g., Tui Na or Shiatsu) Principles and Theory;
27	applied and integrated pathology in TCM and Conventional medicine
28	add cold laser add the term "Dry Needling" - we already learn the technique of Ashi point needling, it would be good to update this language to reflect what we do with the Western term for what we already do.
29	N/A
30	All important, especially foundation and acupuncture points location and how to properly palpate for body landmarks to accurately locate the points.
31	shorten/remove nutrition vitamins

## CA Acupuncture Curriculum

32	Sufficient
33	leave as is
34	A significant increase in emphasis on classic texts and modern research would both be beneficial.
35	I think this course is very good
36	Add Channel Palpation as per Dr Wang Juyi. Add auricular medicine - Nogier, Strittmater, Huang, etc.
37	Specific courses were outlined in the CAB Education Committee and Curriculum Competency Committee reports in the early 2000's ...Training to completely form differential diagnosis (TCM and western ICD-9 .Essential training as primary care practitioners requires an ability to form an integrated modern medical approach. An acupuncture diagnosis is determined in part using methods similar to other healthcare providers: thorough history of health, chief complaints performing physical exam , understanding and ordering laboratory test, x-rays MRI ,signs palpation range of motion strength tests neurological exam orthopedic tests ,treatments/surgeries received etc and TCM principles theories and treatment that coordinate and compliment both medicines.
38	200
39	I think that theory should not be loaded into first year curriculum but spread out to when the student will see real live examples in clinical internship of how those principles and treatments apply. Also we introduce too many different systems at once.
40	(G) Classical acupuncture and Oriental medicine literature, including Jin Gui, Wen Bing/Shang Han, Nei Jing - REMOVE REDUCE REQUIRED HOURS AND TO REMOVE REDUNDANCIES in education.
41	Require Qi cultivation practices as relates to practitioner presence
42	At least in my training, I felt additional diagnosis and adjunctive procedure (moxa, e-stim, bleeding, cupping) would have been helpful.
43	Reduce the content on classic acupuncture and oriental medicine and focus more on where this field of medicine is now.
44	There should be a class studying where herbal medicine plants naturally grow, how to cultivate them, and what a healthy plant of each species might look like. It may become necessary for more of us to grow our own medicine.
45	No changes
46	All are good.
47	Western and eastern combined musculoskeletal course. Estim course
48	Looks good
49	keep as is ..... the learning never stops
50	We need to add dry needling to our curriculum as to combat physical therapists and DC's. We also need to add injection therapy if possible to our scope of practice

## Q13 What coursework in Clinical Medicine, Patient Assessment and Diagnosis do you think would be beneficial to add to or remove from the current requirements?

Answered: 42 Skipped: 32

#	RESPONSES
1	N/A
2	Greater rigor in pulse, lab, imaging, auscultation, palpation, and percussion diagnostics, differential diagnostics, and physical and neurological examination as well as nutritional prescriptions based on patient presentation.
3	300hours should be added and all need to be face to face
4	Add Sì zhěn xīn fǎ 四诊心法 [Four Diagnostic Methods]/the act of apprehending the inner nature of four types of diagnosis
5	none, the current regulation is good enough
6	All as needed more
7	Add Diagnosis
8	Need practice in hospital.
9	Understanding and utilizing conventional medicine lab reports
10	Add orthopedic
11	Auricular therapy
12	Standard patient assessment and the diagnosis
13	Each Clinic Medicine, Patient Assessment and Diagnosis cover the full range of medical practice. The current scope of training at master level is not competent to reach the requirements. Only pain related treatment by acupuncture, herbs and TuiNa in the Orthopedic field may be self-sufficient to meet the requirements. The next attainable field is OBGYN. #13 question is too general. It shall be modified and individualized.
14	All is needed to Add Basic quality of TCM and clinical teaching of TCM
15	Functional medicine, Food medicine
16	Enough
17	add Techniques, diagnosis and treatment, herbal rx, western med rx
18	In my experience there is simply insufficient time spent on all these areas to be able to obtain proficiency.
19	The coursework is great, but 240 hours are not enough to teach and let students have clinical experience. Suggest increase to 300 hours.
20	N/A
21	Add "Differentiative Diagnosis in Western Medicine"
22	no change
23	optional: Oriental massage (e.g., Tui Na or Shiatsu), acupressure, and other techniques utilizing manual therapy and mechanical devices; (D) Exercise therapy, including breathing, qi gong and taiji quan; (E) Herbal prescription, counseling and preparation
24	interchangeable or comparable TCM diagnosis and biomedical diagnosis
25	Qualified Medical Examiner class - prepare students to be a QME
26	Not add or remove but integrate real world skills like how to bill for your assessment
27	Chinese Language
28	How to order & interpret Lab tests & diagnostic imaging
29	leave as is
30	I think this course is very good
31	Add sections on treating diverse patient populations.

## CA Acupuncture Curriculum

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32	Specific courses were outlined in the CAB Education Committee and Curriculum Competency Committee reports in the early 2000's ..... Perform TCM physical medicine exams ,properly document TCM evaluations and treatment , modern medical evaluations, perform modern medical evaluations, read and dictate reports, perform adequate case management and how to communicate with other healthcare providers and insurance case managers
33	500
34	More hands-on assessment and diagnosis is always helpful. Again, diagnosis or clinical medicine shouldn't be one single discrete class but a subject that comes up repeatedly later in the program.
35	I think an assessment after year one or two should include standard physical and neurological exams.
36	-
37	No changes
38	All are good.
39	Patient assessment more detail in assessments to figure out wha muscles and joints are involved
40	ADD: more time on herb-drug interaction!!!! Trauma-informed clinical practices and perspectives.
41	I left school over 25 years ago...hard to remember...other than the course work was very hard and very intense but how else can the information be retained?
42	More information on clinic medicine and integrative medicine

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## Q14 What coursework in Case Management do you think would be beneficial to add to or remove from the current requirements?

Answered: 44 Skipped: 30

#	RESPONSES
1	N/A
2	Add: the actual procedure of referring a patient to a specialist, ordering labs and imaging, communicating with a PCP to coordinate care. Cost-effective (for the patient) coordination of care.
3	10 hours need to added
4	to add Shang Han Lun
5	none, the current regulation is good enough
6	Need to keep it
7	Add more hours
8	Need more patients from hospital.
9	More focus on standardized past medical history documentation
10	Add diagnosis
11	Communication with patients
12	Integrate Internal medicine
13	Add CA Physician Guide for W.C. QME exams.
14	Western medicine should also increase the class hours
15	Utilizing all available natural medicine approach to case management including integrating allopathic medicine
16	Enough
17	add double or triple case management in clinic, to allow for further learning in insurance billing and superbills, in referring to other physicians and letter writing, in speaking and interacting with physicians in the western medical model, increase learning in treatment plan formation for different health issues.
18	Again more time and practice is required in these areas, not less.
19	Encourage the student to take coursework to function as a workers compensation (WC) physician, and a qualified medical evaluator (QME). Suggest 30 hours extra curriculum be included in the "(1399.434 - h Clinical Practice"
20	Should add clinical case analysis, including the major specialties, such as OBGY, internal medicine, ENT, autoimmune disorders, etc. during 90 hours of Case Management, there is enough time to add cases, so that the students can establish authentic thinking of classic TCM identifications, herbal formulations and acupuncture formulations.
21	The current curriculum is ok
22	no change
23	none
24	Integrative approach from both TCM and biomedical science
25	none
26	N/A
27	TCM Chinese
28	Sufficient
29	leave as is
30	Increased emphasis on integrative case management. In this time, it is rare to have a patient that is not receiving care from other practitioners, Being able to understand those interventions and how the acupuncturist's chosen interventions interface with them is crucial to successful patient outcomes.
31	I think this course is very good
32	Coursework on dealing with insurance, workers compensation, and VA.
33	It is important that Acupuncturists understand their role on the "Team" of medical providers. Specific courses were outlined in the CAB Education Committee and Curriculum Competency Committee reports in the early 2000's



## CA Acupuncture Curriculum

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34	50
35	No opinion; the schools I attended did not focus on case management. Whatever course I took to fulfill the requirements I cannot even recall now.
36	Additional guidance on determining prognosis and future care would have been appreciated.
37	-
38	I would personally recommend that all acupuncturists have a full certification in either Functional Medicine or Nutrition
39	No changes
40	More practice needed.
41	N/a
42	add: Suicide training - what to do when a patient expresses suicidal ideations add or emphasize: What to do in emergencies in clinic, practical exercises, i.e. a person passes out. A person gets up with needles in. fire alarm goes out and you have people with needles in them. a person has a heart attack in your clinic. just to name a few
43	whatever they need to add.....
44	Insurance integration and medicare/worker's compensation note taking standards need to be implemented to show that we as a profession are worthy

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## Q15 What coursework in Practice Management do you think would be beneficial to add to or remove from the current requirements?

Answered: 44 Skipped: 30

#	RESPONSES
1	More skills training for practice management, marketing, advertising and the ins and outs of running a clinic.
2	Add: overview of various practice management software and what it would actually look like to use them on a daily basis. The pros and cons of EHR versus paper-based patient records.
3	15hours need to added
4	To add Zá bìng xīn fǎ/雜病心法/ miscellaneous disease comprehend methods
5	none, the current regulation is good enough
6	Insurance need to be more information
7	Add more hours
8	Need more practice in actual office.
9	N/A
10	Add bill insurance
11	Insurance information and applied
12	Integrated Gynecology
13	Add Can increase everyones income
14	Telemedicine
15	Enough
16	add 3 times the amount of curriculum to teach how to keep good records, EHR, letter writing, clinic management, time management, financial accounting and budgeting, keeping abreast of new developments in health care policies
17	Practice Management is an alien concept to the majority of students I've encountered who are young and inexperienced in the field of business. It is insufficient in terms of depth and the root cause of many failures and mistakes made at the onset of clinical practice.
18	To have internship and residency training in the hospitals or medical groups.
19	Add: clinic marketing strategies, including social networks, how to boost up referrals, social media, ticktalk, clubhouse, etc.
20	Increase hours of this category from 45 to 60.
21	no change
22	add: insurance billing
23	california business and professions code in regards to medical practice
24	more insurance billing classes
25	Actual business training for people who are expected to be small business owners
26	Not enough emphasis on this course. This is a very important course. Most new graduates have no idea how to run a practice.
27	Discipleship with senior Chinese TCM Specialists.
28	Human Resources & Taxes.
29	leave as is
30	The current number of required hours does not allow time for substantial teaching on successful practice management and practice building techniques. Most schools follow the minimum requirements. Increasing these hours would force schools to provide an adequate amount of training in this area.
31	I think this course is very good
32	Basic marketing and sales classes. Students need to come up with a viable budget plan and proposal for running a business. Not enough emphasis on how to pay basic bills, let alone student loan payments and cost of living bills. Students should have opportunity or requirement to shadow other practitioners in running a clinic.

## CA Acupuncture Curriculum

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33	Specific courses were outlined in the CAB Education Committee and Curriculum Competency Committee reports in the early 2000's ...The number of practitioners and consumers suffering from this lack of practice management core curriculum is reflected in the recent and past occupational analysis documents.
34	100
35	I think practice management should include how to get into mainstream clinics and hospitals instead of primarily focusing on how to run a private practice.
36	Additional guidance in submitting a "real" insurance claim would have been good.
37	more info on how to set up a practice so acupuncturists can walk out all ready to go
38	-
39	More realism and resources for helping new practitioners and business owners. The business plan was a great project, but a realistic budget is also important.
40	Real life experience needed. Externships ideal.
41	Business management. How to start and maintain a practice via insurance and cash payers. The legalities of practicing with insurances
42	SO MANY HOURS need to be added because this is actually what pays off your ridiculously large student loans and allows you to have a home and food. This part of the curriculum needs to be improved drastically. ADD: school clinics are required to pay/compensate their students for their work and time in the clinic like medical school.
43	more practice management and letting students know how expensive it is to run a practice
44	More business courses on how to run a business properly

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## Q16 What coursework in Public Health do you think would be beneficial to add to or remove from the current requirements??

Answered: 43 Skipped: 31

#	RESPONSES
1	Add: the acupuncturist's role in preventative care, including statistics on preventable forms of disease that dominant healthcare costs in the United States.
2	10 hours need to added
3	none, the current regulation is good enough
4	Add more hours
5	Need more practice.
6	Treatment of chemical dependency should be in clinical medicine because that is a whole field of study; it might be appropriate for documenting or identifying chemical dependency to be in the public health section
7	Remove qigong
8	Preventing transmitted diseases, as COVID-19, Monkeypot
9	Don't know
10	Add mental health
11	A PhD can boost everyone's income and social status
12	Epidemiology
13	Public health for foods
14	add 3 times the amount of course work in PH, Immunology, epidemiology, and health education of our staff and patients and other physicians.
15	If COVID 19, societal misinformation and a lack of appreciation for facts and scientific endeavor hasn't taught us how important an impact on Public Health is, I just don't know what will. Therefore, more than ever it's value and understanding should be expanded for the acupuncturist who intends to mingle with the society within which he/she operates.
16	Add 20 hours on the treatment of chemical dependency will be really beneficial, in helping to prepare acupuncturists to play a role in tackling the social burden of drug and alcohol addiction in California.
17	N/A
18	The current curriculum is ok.
19	more coursework in immunology, virology
20	none
21	public education in preventative care
22	none
23	N/A
24	Chinese management of epidemics.
25	Sufficient.
26	leave as is
27	A specific focus on how Chinese medicine could assist in public health crises in the areas of mental health, health maintenance and disease prevention.
28	I think this course is very good
29	How to talk to prospective patients and clients how draw them in as patients and clients.
30	Specific courses were outlined in the CAB Education Committee and Curriculum Competency Committee reports in the early 2000's ...This is an evolving area in coursework and needs to be increased and maintained continuously over time
31	39
32	Not sure about this one; what I was offered wasn't useful. Topics that are important in public health right now: long-haul covid19, diabetes, cancer, mental health.
33	Add emphasis on mandated reporting (examples, case studies, role play).

## CA Acupuncture Curriculum

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34	I feel curriculum as stated is fine.
35	Public Health should have a broader outlook - perhaps a US course and a Global course. We should also incorporate management of local/global epidemics/pandemics into the training.
36	when to turn away a patient
37	No changes
38	Fine as is.
39	N/a
40	ADD: discussion of health disparities, community acupuncture model, bringing acupuncture to public health and city clinics
41	disease contagions and dealing with borderline personalities, etc..... know your psychiatric medications
42	Understanding public health mandates and what that means as an acupuncturist in California, understanding all the requirements and paperwork when running a practice
43	course work on domestic violence should be mandatory

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## Q17 What coursework in Professional Development do you think would be beneficial to add to or remove from the current requirements?

Answered: 42 Skipped: 32

#	RESPONSE
1	Add: How to manage troublesome or dangerous patients. Speaking: the most effective and risk-protective ways to speak and communicate when administering and managing patient care. -Also add different options of running a practice, including being a house-call or for- businesses acupuncturists and the legal ramifications of running such a business.
2	5 hours need to added
3	Learn how to respect the professionalism in Chinese medicine and value it. It includes acupuncture and herbal cupping and tuina, etc.
4	none, the current regulation is good enough
5	Safety and communications skills
6	Add more hours
7	That is fine.
8	History of medicine should be a larger part in the clinical medicine.
9	Patient communication
10	Lab test results, as CT scan, Ultra sound, MRI,
11	Morden acupuncture
12	Facing the clinical teaching of traditional Chinese medicine
13	Practical courses not obscure..... ie bridgingthe gap between ancient medicine and modern practice
14	enough
15	add 3 times the amount of course work in PD, being involved in schools and public and politics to better our profession, and include research based support of all our treatments for our patients, ourselves and other physicians.
16	For starters, there is never enough 'hands on' practice to instill confidence (not bravado) in the student for outside practice. This should be expanded to include basic professional courtesy, hygiene, professional attire and professional demeanor. I can't believe I have to include those topics, but I do, not entirely but a bit too often to a portion of my fellows. I am actually routinely ashamed to be part of a supposedly professional group who don't primarily observe the basics of polite human interaction.
17	Add 15 hours of medical statistics and scientific research design.
18	Acupuncture and the whole traditional medicine and its scientific theories, such as research and the scientific approval of meridians, and scientific theory of acupuncture, why needling works, what's the physics behind and beyond.
19	The current curriculum is ok.
20	no change
21	none
22	Public presentation and communication skills
23	insurance billing
24	Actual training appropriate to small business owners
25	Ethics and moral of Ancient TCM specialists
26	Need more dedication to managing Insurance, Human Resources (laws) & basic business office management/entrepreneurship.
27	leave as is
28	The ACAHM requirements for self-assessment would be a good guide for this question.
29	I think this course is very good
30	sampling of other types of specialties that are popping up to fill niches.

## CA Acupuncture Curriculum

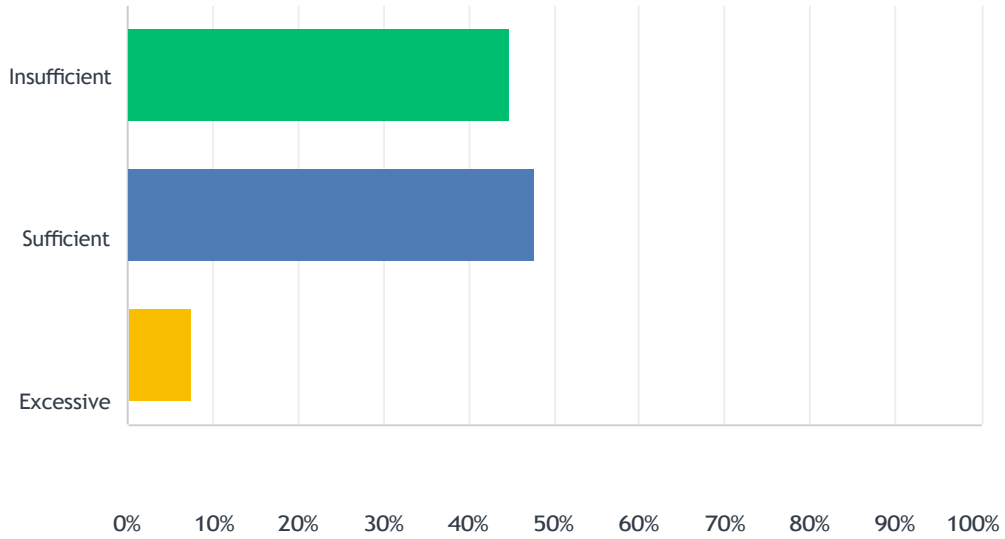
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31	This is a question that has several answers...General professional development and specific professional development skills need to address many of the cultural nuances that have not been previously explored.Again.. Specific courses were outlined in the CAB Education Committee and Curriculum Competency Committee reports in the early 2000's
32	10
33	Not sure about this one either. More opportunities for hands-on externships? What was most helpful to me in my education was traveling to see how acupuncture is practiced in other countries like China and Japan, but that doesn't seem safe to implement during a pandemic...
34	Curriculum as stated is fine.
35	A business course should be required so that actually setting up a strong practice is more likely. Too many new acupuncturists give up on the work too early.
36	how to refer out a patient to other practioners
37	No changes
38	Fine
39	Above as well as good clear patient communication
40	Add: Self-care for Acupunturists and topics of burn-out and compassion fatigue.
41	anything ....I left school totally unprepared to run a busy practice
42	Understanding more about state associations

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### Q18 To achieve competency in Herbal Medicine, 450 hours of didactic training is:

Answered: 67 Skipped: 7

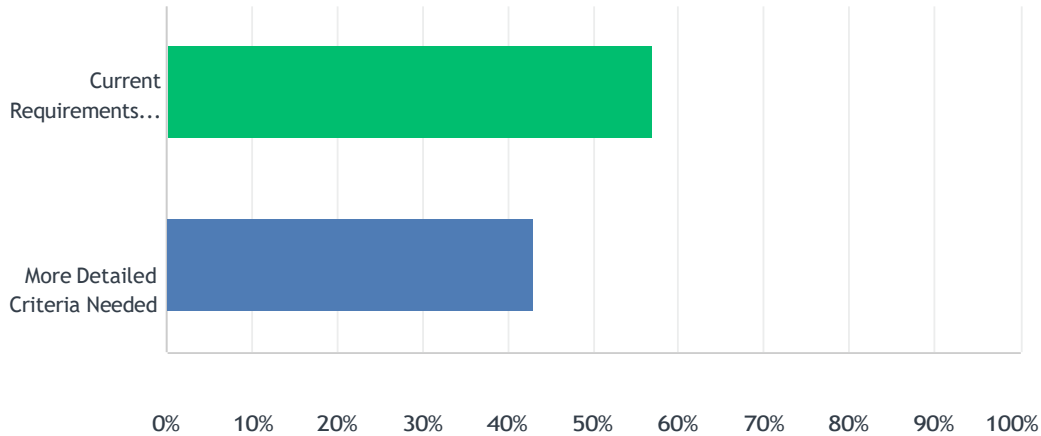


ANSWER CHOICES	RESPONSES	
Insufficient	44.78%	30
Sufficient	47.76%	32
Excessive	7.46%	5
<b>TOTAL</b>		<b>67</b>



### Q19 Are current educational requirements in Herbal Medicine preparing CA acupuncturists for the safe and effective use of herbs or will licensees and consumers be better served to include more detailed criteria for the Herbal Medicine training?

Answered: 65 Skipped: 9



ANSWER CHOICES	RESPONSES	
Current Requirements are Preparing CA Acupuncturists sufficiently	56.92%	37
More Detailed Criteria Needed	43.08%	28
<b>TOTAL</b>		<b>65</b>

## Q20 If more detailed Herbal Medicine criteria is needed, what Herbal Medicine coursework would be most beneficial to have?

Answered: 37 Skipped: 37

#	RESPONSES
1	Add: drugs and the ones that commonly interfere with foods and herbs. Add: food and nutrition that commonly interfere with drugs and herbs. There is some education on this in school but there is a lot more than is covered. Add: the 200 drugs that nurses have to memorize should also be required of acupuncturists in order to raise the standard of our profession and also improve our confidence in working in integrative medical settings.
2	More prescription need to be learn
3	Learn how to preserve the herbs in a traditional and natural way
4	Use herbal to treat patients
5	Clinical usage of herbal medicine
6	Herbalist require more mentoring after graduation.
7	Herb toxicity
8	Traditional herbals prescriptions practices
9	Traditional herbal formula
10	It is pending on how the students are trained to applied the knowledge to the case in front of them. It is not the coursework issue. It is the student is unable to apply the knowledge to the living case. It is an issue of how to teach the students.
11	Traditional Chinese Medicine Clinical Teaching and clinical Practice
12	Again, it is a lot of rote memorization. So little of it sticks for most students. Volume is emphasized over in depth understanding of the most clinically useful details. There is coverage of so many herbs and formulas that are rarely, if ever, used in the United States in modern times.
13	biochemical understanding
14	herbal lab
15	Where herbs are sourced, how patients cannot go buy herbs themselves and self treat, herbs for CM doctors are used like pharmaceuticals, we should also increase training to use caution with drug-herb interaction.
16	I'm not sure more critria is needed. I just don't see enough familiarity and understanding post graduation. I think in practice the ball is dropped for the most part. Perhaps fear of the complications involved in mixing remedies or lack of appreciation for what these plant materials truly can and cannot do???
17	1. Herbal Medicine that can treat the symptoms of infectious diseases, including Covid 19 and Covid 19 sequelae. 2. Herbal Medicine that can improve immune deficiency and immune overreaction 3. Herbal Medicine that can improve digestive disorders, balance emotions, reduce respiratory symptoms, etc.
18	N/A
19	More hours course work. 450 hours training is way too less.
20	More hours devoted to Shang Han Lun and Jing Gui Yao Lue
21	since not everyone ends up using herbs this should be optional
22	Chinese Herbal Formulas curriculum from China itself.
23	Use portion of Dr. John Chen's book (but not the whole thing).
24	American students are not well enough prepared for the herbal portion of the CALE. More herbal training is needed.
25	An overall change in the approach to teaching and assessing herbal medicine is needed more than a change in the number of hours devoted to the subject. Reconfiguring the training away from rote memorization and towards clinical applicability with guided inquiry would make graduates better herbalists.
26	The current training plan is not very purposeful. If it is to train an acupuncturist, the courses in herbal medicine can be reduced, but the basic and clinical aspects of modern medicine should be increased. If you are a Chinese herbalist, prescription courses and clinical courses of Chinese and Western medicine are insufficient, and acupuncture and meridians are too much.
27	Understanding HM from a pharmacology aspect and how other pharmaceuticals may assist or deter HM treatments.
28	More better curriculum competent education Integrated Herbs and drug herb interactions The scientific advancements here are enormous and we have not upgraded our education nor dealt with this issue properly

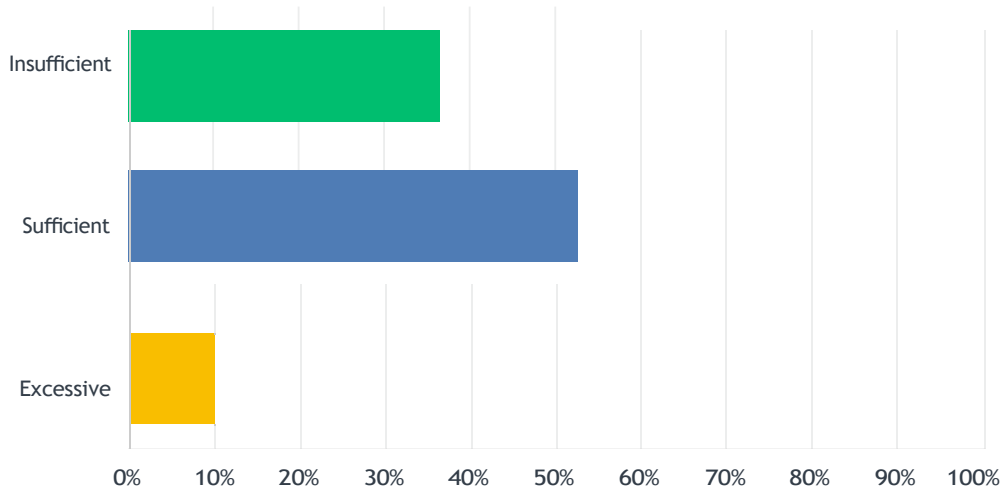
## CA Acupuncture Curriculum

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- 29 I would start with patent herbs in year one, progress to herbal formulas and modifications in year two, and get more in-depth with single herbs in year three. In short, offer classes in reverse order of how they are currently arranged in the curriculum. I may also combine medical history with formulas by teaching them in a more historical chronological order (ie by time period/famous herbalist and their publications, which build on or depart from predecessors), rather than organize it by disease pattern/treatment principle as our current textbooks do. For single herbs, plant part.
- 
- 30 Greater integration into Clinical Practice where it has equal attention as acupuncture.
- 
- 31 I wish I knew. All I know is that what I left school with left me feeling like I had barely scratched the surface.
- 
- 32 Increase emphasis on herb/herb interactions, herb/drug interactions, polypharmacy
- 
- 33 Pharmacognosy, and a practical course on what the herbs look like, where they grow, and how to plant and cultivate at least 30 herbs or so locally. This will reduce our import burden.
- 
- 34 Case study
- 
- 35 Coursework is not necessarily needed but REAL LIFE application. Require students to spend 2 years (1 intern position per term for 2 years) preparing formulas. It's not all about the needling.
- 
- 36 herb drug interaction.....and current western meds that one will encounter...especially if treating many pain/chronic pain patients
- 
- 37 N/a
-

Q21 Currently 75% of clinical practice needs to be completed at a clinic that is owned and operated by the school, with 25% allowed at an approved externship site. This amount is:

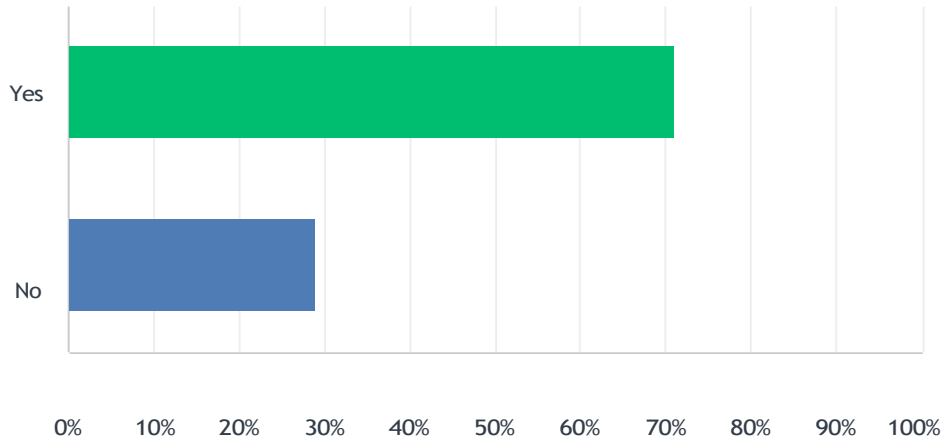
Answered: 68 Skipped: 6



ANSWER CHOICES	RESPONSES	
Insufficient	36.76%	25
Sufficient	52.94%	36
Excessive	10.29%	7
<b>TOTAL</b>		<b>68</b>

**Q22 From an educational and training viewpoint, is having a specified amount of Clinical Practice training hours completed at a clinic that is owned and operated by the school necessary?**

Answered: 69 Skipped: 5



ANSWER CHOICES	RESPONSES	
Yes	71.01%	49
No	28.99%	20
<b>TOTAL</b>		<b>69</b>

## Q23 If you answered Yes to Question 22, what are the benefits?

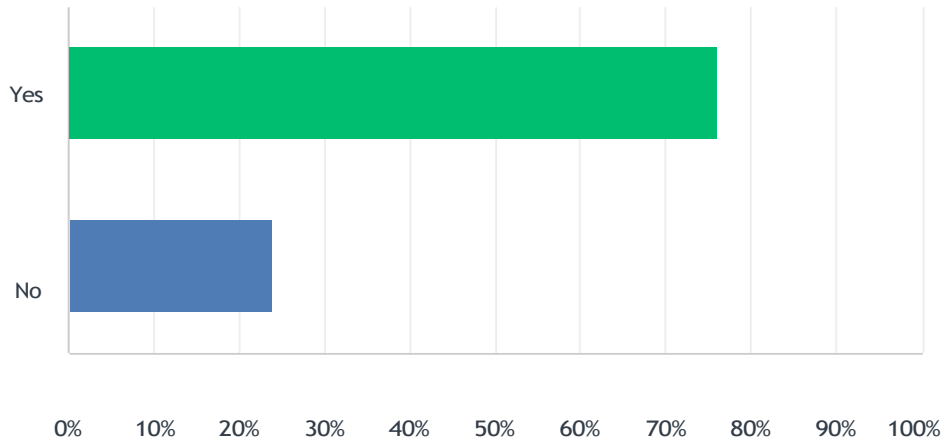
Answered: 45 Skipped: 29

#	RESPONSES
1	Direct and convenient, it is easier to obtain resources if there are teachers nearby
2	Proficient operating procedure
3	allow the student to get some basic experience of practice and transfer smoothly to real practice environment.
4	It's more manageable for school to keep track of the students' training, more convenient for students to get chances to practice.
5	More experience
6	For patients
7	N/A
8	There is a lot more guided practice
9	Well organized
10	Private
11	Acupuncturists will get academic training and patients will have safety treatments.
12	Under supervision of qualified acupuncturists and more practice of cases
13	Not sure
14	School has better management and facility
15	Gaining more experiences.
16	Improve the clinical efficacy of acupuncture
17	A more virtual reality clinical setting
18	Because it can do it on the same day as the class
19	Constant training by fundamental of diagnosis.
20	Supervision of clinic interns is imperative for a college supervised clinic. feedback and corrective comments are how we develop better clinical skills.
21	The onus should be completely or mostly upon the school because it is their responsibility to provide the best product, versatility, instruction and supervision.
22	Because it has been proved necessary and effective, the school clinic has standards and requirements for the supervisors to follow, guaranteeing the quality of teaching.
23	Teacher knows how much to expect from the students, because they know the curriculum and where the student is at. Students can have happier learning experience and more brain storming idea exchange with other students.
24	School clinic is the only avenue to train the students for their clinical competencies.
25	Under strict supervising, the students will learn how to practice acupuncture efficiently.
26	Control, assessment and evaluation
27	supervised by licensed and regulated LAc's with extra support of clinic deans and managers.
28	In a school-owned clinic, every patient knows it's a teaching clinic so they are fine with teacher taking the time to explain things to students and to do palpation, etc, etc. This is important. A lot of the times, people just learn acupuncture protocols without understanding why. Need to take the students through the process of seeing a patient, do an intake, give diagnosis and formulate a treatment plan, from start to finish. In a real clinic/externship, it's a lot harder because patients might not necessarily have the time or want to watched by so many students.
29	Depending o the school clinics competency... students are allowed opportunities to fly solo.
30	Supervision by trained and experienced teachers.
31	Regardless of where the hours are completed, ensuring that the clinical education experience allows students to expand their exposure to patient types and improve their clinical reasoning is where the emphasis on change should be.
32	Verify that you have mastered what you have learned
33	50/50 would allow for more flexibility for the schools. More approved externship sites would be better for scheduling for students and clinic supervisors.
34	Consistency, oversight, accountability.

- 35 Greater oversight and supervisory support at school owned and operated clinic. However, externships are very useful and couple be increased to 1/3 from 1/4. The wording of Q24 is odd and I wouldn't agree that having "a minimum amount of approved externship... (is) sufficient" though I would say that having some amount is very helpful or even necessary. But not minimally "sufficient."
- 
- 36 Being able to regulate and assess how training is done.
- 
- 37 You get actual mentoring, where if the training acupuncturist might end up in a clinic with less oversight
- 
- 38 The accredited educational institution can be held to a high standard since there is oversight by the accrediting body. This is not the case for privately owned clinical sites. There needs to be a mechanism in place to insure students placed outside the school-based clinic are receiving the mentorship and level of patient-care experience that will prepare them for entry- level practice and licensure.
- 
- 39 First - question 21 is not clear; is which amount insufficient/sufficient/excessive - the internship or the externship. Second - the school should train for at least the first 25% to assure that students are not going to externships unprepared. They should have supervisors watching their needling during this time.
- 
- 40 Standardized knowledge and environment geared toward students. Makes it a teaching clinic.
- 
- 41 Hands on practice and grasping the flow of a treatment and time management
- 
- 42 standardized
- 
- 43 Benefits: A place to start and students have built a rapport with many of the clinical supervisors already. HOWEVER, I do think MORE HOURS OUTSIDE the school clinic should be required. This is where the REAL WORLD experiences happen. More programs that allow for internship outside and even after graduation (paid mentorships after graduation are missing in our profession). Almost all other medical professions have this paid entry level work model.
- 
- 44 a complete herb pharmacy ....supervisors who have been in practice for many years, and who also are teaching in the class rooms plus the patient load is high so one learns how to manage your time
- 
- 45 Understanding basic social requirements of being a licensed practitioner by having support of licensed acupuncturists
-

Q24 From an educational and training viewpoint, would having a minimum amount of Clinical Practice training completed in an approved externship, such as at a hospital, medical clinic, or private practice that is not owned and operated by the school be sufficient to prepare acupuncturists for entry level practice?

Answered: 67 Skipped: 7



ANSWER CHOICES	RESPONSES	
Yes	76.12%	51
No	23.88%	16
TOTAL		67



## Q25 If you answered Yes to Question 24, how many hours of Clinical Practice training at an approved externship would be sufficient for the entry level practice of acupuncture?

Answered: 46 Skipped: 28

#	RESPONSES
1	2080 hours, which is 40 hrs a week, 52 weeks in a year. This would be the minimum to be competent.
2	At least half should be in outside school externship
3	960
4	It depends on what is the entry-level practice of acupuncture?
5	One term
6	60% of the total clinical practice training hours.
7	1000
8	250hours
9	A year training
10	2000
11	50%.
12	6 months or 1 year of rotations
13	1200hrs
14	1000
15	600 hours
16	2000
17	800h
18	50% of the whole clinical training.
19	1400 Hr
20	100
21	it prevents training and developing a school "clone" practitioner
22	25%
23	1 year of practice during school, 1 year of practice after graduation.
24	500 hours
25	40%
26	To enrich the knowledge of hospital establishment for the students.
27	200 hrs.
28	90
29	n/a
30	50% or more should be allowed for externship which is more practical and helpful prepare interns for future practice.
31	adding a hospital externship would be great
32	Need a balance between hours at a school-owned clinic and externship. In school-owned clinic setting, teacher can take the time needed to explain why he/she is doing what he/she doing. Palpation on patient can also be done with students watching. In externship, this is much more limited but the experience would be more real-life, which is more fast-paced and need to think on one's feet. Both are necessary to prepare students.
33	100 hours
34	Shadow day in at least 5 different departments in a Hospital is a good idea (such as ER, diagnostic imaging, surgery, physical therapy/Occupational Therapy/Speech Therapy, admitting).
35	60+
36	After completing about 2000 hours of theoretical courses in school, 1500 hours of internship in a clinic or hospital.

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37	150-160 hours for the externship site or more
38	I do not know , but believe it needs to be increased I mentor many senior students and recent graduates and find their clinical practice skills and other areas needed to be successful must be enhanced.In extern clinical setting we see a more diverse patient population and a better hands on real world experience for students
39	I think 25% is a bare minimum requirement and more real-life experience is valuable as compared to clinical experience curated by the schools.
40	40 hours seems sufficient as a base.
41	It should be optional as part of the already required hours, like it is one of the clinic shifts to choose from
42	Question 24 is unclear. What is that minimum amount? Is this a minimum amount that is added to the internship? Are you asking if externships should be required? I think externships should be optional. If the student meets the best supervisors for them at the school, they should be allowed to train with them as much as possible.
43	Same amount of hours but shouldn't have to be done at the school clinic. Ideally, it could be done at a number of different facilities.
44	50 hours
45	a whole year's worth (3 terms minimum)
46	Of 950, I would say that at least 250 should be done in an externship format to see how it is set up in real-life

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## Q26 In addition, if you answered Yes to question 24, what Clinical Practice training coursework would be sufficient for entry level practice of acupuncture?

Answered: 34 Skipped: 40

#	RESPONSES
1	Talking about medications, real-life experience with complicated cases and the decision to refer by experienced integrative practitioners.
2	Practice training course
3	Observation and diagnostic practice
4	don't understand the question.
5	the current curriculum is good enough.
6	Practical training classes
7	See more patients independently
8	In qualified TCM offices.
9	Good to have rotations at hospital, community practice, etc. wide range of experiences
10	1000
11	1300 hours
12	TC M Diagnosis, Acupuncture practice, Herbal formula practice.
13	Not sure
14	Medical clinic
15	Increase the study of traditional Chinese medicine acupuncture, internal medicine, and orthopedics
16	Radiology
17	960 hours
18	Externship at a private practice or hospital seeing different types of patient care and time management, space management, herbs, community style, distal needling, etc. all of it is important for exposing students to real life clinical situations prior to graduation.
19	Learning the interdisciplinary medical settings in the hospital, medical centers, or private practice. Select the series of conditions where Acupuncture and Chinese medicine can play a main role through prioritized clinical practice training coursework, to make sure the graduating students learn how to treat these conditions, so they have confidence to communicate with MDs and other health professionals.
20	basic sciences
21	If the externship is in a hospital or medical clinic, it is helpful. In current situation, I don't think a private acupuncture practice would be beneficial to students.
22	Interns need the broad exposure to a diverse and specialized training to better prepare them for future job market.
23	ALL departments of medicine
24	Exposing students to practice alternatives to sole proprietorship will enhance employment opportunities. Giving them an opportunity to develop skills interfacing in integrative environments will improve their employability.
25	First of all, have the ability to make a correct diagnosis of traditional Chinese medicine and western medicine. The second is to master the various methods of correct Chinese medicine treatment. The third is how to establish a good relationship with the patient and let the patient know how to benefit from the treatment of Chinese medicine. The fourth is how to educate patients to take care of themselves and prevent the occurrence of diseases.
26	72-80 hours
27	Specific courses were outlined in the CAB Education Committee and Curriculum Competency Committee reports in the early 2000's
28	That's hard to say. I believe instructors need to be allowed to fail interns who are not ready to progress toward entry level practice. On the other hand, entry level practice can and should begin much sooner than it currently does...
29	I don't feel I have sufficient knowledge to say.
30	-

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|----|--|
| 31 | The same coursework but more time spent with physical examination and diagnosis.   |
| 32 | ?  |
| 33 | The coursework is foundational but you learn so much more in clinic from your supervisors. The more people you treat earlier on, the better off you'll be. |
| 34 | Working as a secretary/front desk staff at a clinic outside of school for a trimester.   |
-

## Q27 What changes to the curriculum requirements would prepare acupuncturists for entry level practice?

Answered: 42 Skipped: 32

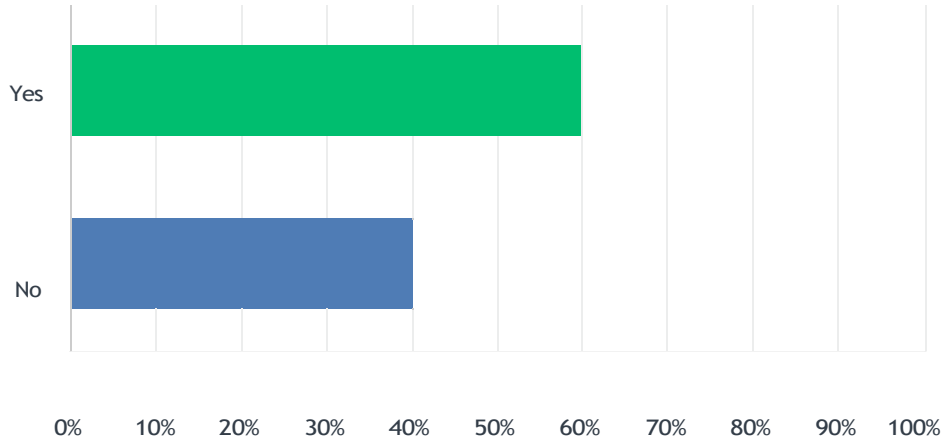
#	RESPONSES
1	See question one. Anatomy/cadaver lab is absolutely essential to improve confidence from other health professionals in our profession. Schools that have policies catering to students that just want to pass the exam, so that they will have enough students to have the income to stay open need to be weeded out for the standards and respect of our profession to improve. If we want to be better respected in the medical community, we have to raise our minimum standards of training.
2	Should add practice hours and diagnosis course hours
3	Qigong, such as Taijiquan, the Theory of Yin Yang and Five Elements etc.
4	1. have the students to start clinical internship from third year. 2. make sure the most of clinical internship is done in "real practice/small clinic", not in teaching clinic.
5	none
6	How to make a correct decision about patients symptoms
7	5000 hours minimum training
8	Add clinical medicine courses and internship in hospitals.
9	More case practices, understanding utilizing conventional medicine diagnostic reports
10	More practice
11	I think those subjects are enough
12	Basic Traditional Chinese medicine theory And modern acupuncture
13	The changes shall be how to teach. For the same subject, the lecture will cover across multiple subjects. The teachers shall have meeting before the semester/quarter for the course arrangement concurrently and supported by the evidence based materials.
14	Added to doctoral degree and Chinese medicine specialist content
15	As listed above
16	herbal lab, and nutritional consultation
17	minimum level Doctorate. instead of 3 years of Masters degree, 5 years for a doctorate. on top of the doctorate 1 year post graduate/post licensing working apprenticeship at an established clinic. minimum.
18	I have nothing but praise for external and approved clinical externships. However it should be a bonus training program as opposed to a credit based program. I have little confidence that adequate, concentrated and correct supervision will occur in an outside setting, not even a hospital. Either the student becomes a 'free worker' for the employer, or an after thought because the coordinator, doctor or supervisor is generally too busy to give the student adequate time and direction for it to be of value to either party.
19	Applying an integrated Chinese medicine and Western medicine comprehensive teaching model with sufficient hours of didactic instruction and clinical training, would prepare acupuncturists for entry level practice CA consumers need.
20	existing courses
21	To assess the curriculum is successfully completed or not, a comprehensive exam in every program is necessary.
22	more hands on practice, more time actually running a practice
23	see all above
24	adding "dry needling" adding Cold Laser Qualified Medical Examiner
25	Less focus on herbs (occupational analysis shows we are using hers minimally yet have extensive training) and sciences not directly applicable to acupuncturists (physics) and increasing training for business
26	See the above
27	more practical time with patients
28	Students must become physicians who practice medicine safely and to the satisfaction of their patients. Therefore, it is necessary to strengthen Chinese and Western medicine diagnosis, psychology and medical ethics.
29	Remedial basic writing skills for some or a test to pass. A number of students I have encountered cannot do basic writing beyond quick informal text messaging.

## CA Acupuncture Curriculum

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- 30 There have been many changes and advances in medicine ,both TCM and modern medicine...We need more curriculum competent requirements to adequately train practitioners at entry level...The courses in post graduate education often hear students saying..."Why did I not learn this when I was in school? This should be part of our core curriculum"
- 
- 31 Hands-on practice (not just observation) opportunities in actual clinical settings, preferably group or community clinics, low-stakes situations such as hospice, free services for addiction, etc.
- 
- 32 The curriculums generally feel bloated. There are redundancies in the AOM courses and very unnecessary basic science courses. Entry level practitioners need more clinical management and professional development courses to have a better chance at being successful.
- 
- 33 Requiring an externship, but not in a 'minimally sufficient' way as described in Q24,25,26. Those questions don't even make sense.
- 
- 34 I wish I remembered.
- 
- 35 practice management classes would be helpful
- 
- 36 -
- 
- 37 More rigor in anatomy and physiology and basic sciences, more resources and realism for practice management.
- 
- 38 Be sure to add training in electro acupuncture, scalp acupuncture and other micro systems, use of other treatment tools such as far infrared, laser, etc. within the scope of California's practice.
- 
- 39 See above
- 
- 40 All the in's and outs of entrepreneurship and how to make money!
- 
- 41 business training...and not at the end of a 10 hour day.....
- 
- 42 Working as a front desk staff of a private practice/clinic
-

### Q28 As a Licensee, do you think that your school's didactic and clinical curriculum adequately prepared you for entry level practice?

Answered: 67 Skipped: 7



ANSWER CHOICES	RESPONSES	
Yes	59.70%	40
No	40.30%	27
TOTAL		67

## Q29 If you answered No to Question 28, what additional training would be needed to address this deficiency?

Answered: 30 Skipped: 44

#	RESPONSES
1	All the information included in the Pacific College of Health and Science's transitional Doctorate program should be the minimum for any licensed acupuncturists. This includes familiarizing oneself with the evidence-based practice of acupuncture as well as integrative communication practices.
2	Extership should added
3	providing the school is in the United States, the ratio of clinical curriculum need to be increased.
4	Case seminar
5	Practice
6	N/A.
7	My main education in acupuncture and herbal medicine was not done in the US.
8	Private training
9	Mostly internship
10	Clinical study
11	Whether the answer is yes or no, one shall remember, this is a life long training. The acupuncturist shall be self-inspired and look into the fields related to self interest and professional developments.
12	The clinical level and teaching of the school are very poor now
13	Llsted above
14	extra 2 years of clinical practice and practice management, insurance billing training, treatment plan training, inter-personal skills with patients training, more hands on palpation skills for channel pathology diagnosis and treatment, more herbal formula writing, custom per specific disease/health issue.
15	More clinical hours. Real anatomy, physiology, etc. Not just book learning. I was lucky with my background in biology, botany, medical family, recipe development and business management. If I hadn't been I would have been a failure on opening my practice; which was the unhappy fate of many of my classmates. My school (probably all of them) seem to be more interested in duping young and floundering adults into this romantic field for the dollars, than actually ensuring their success in this tough field and poorly understood field of medicine. That --- is a terrible shame.
16	Hospital training would be needed to make up the deficiency.
17	CA Board should not interfere the approved programs to have graduation exam for assessing the curriculum training result. It is Board's serious error to tell school that graduation exam is not required. Although for the foreign equivalency and tutoring applicants, a graduation exam may not necessary, for the Board approved training program, graduation exams are definitely necessary.
18	We are expected to be small business owners with little to no business training. Practitioners are not failing because they don't know an acupuncture protocol, they are failing because they know nothing about the realities of being in business.
19	People who are better teachers for American students. Chinese teachers are more experienced, not all are good teachers.
20	Practice management and Case management were lacking. Practice management in how to fully run a business. Hearts go into school wanting to heal the world, but it requirements a business mindset and training to really succeed. Case management for how to deal with unhappy customers and patients not progressing in treatments.
21	Need time to discuss further, but Specific courses were outlined in the CAB Education Committee and Curriculum Competency Committee reports in the early 2000's This is a great staring point
22	The teachers need to be paid more if you want the quality of teaching to be higher.
23	I answered yes, but would have liked more public health, mandated reporting, externship opportunities, practice management.
24	The quality of mentorship differs greatly among clinic supervisors. Many of the items included in 1399.434 were not covered in the curriculum in a manner that was practically useful.



- 25 I was not prepared to start a business. Also, the herbal training is slightly insufficient to actually practice, perhaps because the number of formulas taught is too few.
- 
- 26 In every way other than practice management I was prepared. We need more training on how to start and run a business so there is not so much of a harsh transition. We were not prepared for how difficult and expensive the first few years are or how to ramp up more affordably to owning your own clinic.
- 
- 27 Business and working with insurances was a huge learning curve
- 
- 28 Business practices
- 
- 29 I answered yes...but feel my training as a practitioner was good, but the business aspect was barely touched                      Who knew it would be so expensive and stressful to set up a truly viable business practicing this medicine...especially if one is taking insurance ..... and who decided our very low rate of compensation from the insurance companies??? Very insulting
- 
- 30 More courses on business practice, understanding insurance billing, preparing students for integration in addition to being able to have medical competency with other healthcare providers
-