CALIFORNIA ACUPUNCTURE BOARD

OCCUPATIONAL ANALYSIS OF THE ACUPUNCTURIST PROFESSION

CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS

OFFICE OF PROFESSIONAL EXAMINATION SERVICES

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July 2026

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OFFICE OF PROFESSIONAL EXAMINATION SERVICES

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This occupational analysis report is mandated by California Business and Professions Code § 139 and by DCA *OPES 22-01 Licensure Examination Validation Policy*.

EXECUTIVE SUMMARY

The California Acupuncture Board (Board) requested that the Department of Consumer Affairs' Office of Professional Examination Services (OPES) conduct an occupational analysis (OA) of the acupuncturist profession in California. The purpose of the OA is to define practice in terms of critical tasks that acupuncturists must be able to perform safely and competently at the time of licensure. The results of this OA provide a description of practice for the acupuncturist profession and provide the basis for constructing a valid and legally defensible California Acupuncture Licensing Examination (CALE).

OPES test specialists began by researching the profession and conducting telephone interviews with licensed acupuncturists working throughout California. The purpose of these interviews was to identify the tasks performed by acupuncturists and to specify the knowledge required to perform those tasks safely and competently. Using the information gathered from the research and interviews, OPES test specialists developed a preliminary list of tasks performed by acupuncturists in their practice, along with a list of the knowledge needed to perform those tasks.

In October 2025, OPES convened a workshop to review and refine the preliminary lists of tasks and knowledge statements describing acupuncturist practice in California. Acupuncturists participated in the workshops as subject matter experts (SMEs). The SMEs represented the profession in terms of location of practice and years licensed. In November 2025, OPES convened a second workshop to review and finalize the preliminary lists of tasks and knowledge statements describing acupuncturist practice in California. The SMEs also linked each task with the knowledge required to perform that task and reviewed demographic questions to be used on a two-part OA questionnaire to be completed by a sample of acupuncturists statewide.

After the second workshop, OPES test specialists developed the OA questionnaire. The development included a pilot study that was conducted using a group of acupuncturists who participated in the October and November 2025 workshops. The pilot study participants' feedback was incorporated into the final questionnaire, which was administered from February to April 2026.

The OA questionnaire had two parts. In the first part, acupuncturists were asked to provide demographic information related to their work settings and practice. In the second part, acupuncturists were asked to rate specific tasks by frequency (i.e., how often the acupuncturist performs the task in their current practice) and importance (i.e., how important the task is to effective performance in their current practice).

In February 2026, on behalf of the Board, OPES sent an email to 10,062 actively practicing acupuncturists, inviting them to complete the online OA questionnaire. The email invitation was sent to acupuncturists for whom the Board had an email address on file. Reminder emails were sent weekly after the initial invitation was made. Additionally, the Board provided a link to the survey during the March 26, 2026 board meeting.

A total of 1,686 acupuncturists, or approximately 16.8% of the acupuncturists who received an email invitation, responded to the OA questionnaire. The final number of respondents included in the data analysis was 1,319 (13.1%). This response rate reflects two adjustments. First, OPES excluded data from respondents who indicated they were not currently licensed and practicing as an acupuncturist in California. Second, OPES excluded data from questionnaires that contained a large portion of incomplete responses.

OPES test specialists then performed data analyses of the task and knowledge ratings obtained from the OA questionnaire respondents. The task frequency and importance ratings were combined to derive an overall criticality index for each task.

Once the data were analyzed, OPES conducted a third workshop with SMEs in April 2026. The SMEs evaluated the criticality indices and determined whether any tasks should be excluded from the examination outline. They also reviewed the list of knowledge statements to verify that each statement was critical for safe and competent entry-level performance as an acupuncturist in California. The SMEs established the final linkage between tasks and knowledge statements, organized the tasks and knowledge statements into content areas, and wrote descriptions of those content areas. The SMEs then evaluated the preliminary content area weights and determined the final weights for the CALE outline.

The examination outline is structured into four content areas weighted relative to each of the other content areas. The new outline identifies the tasks and knowledge critical to safe and competent acupuncturist practice in California at the time of licensure. The examination outline developed as a result of this OA provides a basis for developing the CALE.

Results of this OA provide information regarding current practice that can be used to develop valid and legally defensible examinations and to make job-related decisions regarding occupational licensure.

OVERVIEW OF THE CALIFORNIA ACUPUNCTURE LICENSING EXAMINATION OUTLINE

CONTENT AREA	CONTENT AREA DESCRIPTION	PERCENT WEIGHT
1. Patient Assessment	This area assesses the practitioner's knowledge of assessing patient's chief complaint and underlying health conditions using Asian and Western medicine methods.	26
2. Diagnosis and Treatment Planning	This area assesses the practitioner's proficiency in evaluating assessment findings to develop a diagnosis and treatment plan according to Asian Medicine theories. It also evaluates the practitioner's proficiency in monitoring and evaluating patient response to treatment at follow-up visits and modifying treatment plans based on evaluation results.	20
3. Treatment	This area assesses the practitioner's proficiency in using acupuncture, herbal therapy, and adjunct modalities to treat the patient's health imbalance.	44
4. Professional Responsibilities	This area assesses the practitioner's knowledge of legal requirements, ethical guidelines, and professional standards related to the acupuncturist profession in California.	10
TOTAL		100

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CHAPTER 1 | INTRODUCTION

PURPOSE OF THE OCCUPATIONAL ANALYSIS

The California Acupuncture Board (Board) requested that the Department of Consumer Affairs' Office of Professional Examination Services (OPES) conduct an occupational analysis (OA) as part of the Board's comprehensive review of the acupuncturist profession in California. The purpose of the OA is to identify critical activities performed by acupuncturists in California. The results of this OA provide a description of practice for the acupuncturist profession and a basis for developing a valid and legally defensible California Acupuncture Licensing Examination (CALE).

PARTICIPATION OF SUBJECT MATTER EXPERTS

California acupuncturists participated as subject matter experts (SMEs) during the OA to ensure that the description of practice directly reflects current acupuncturist practice in California. These SMEs represented the occupation in terms of geographic location of practice and years licensed. The SMEs provided technical expertise and information regarding different aspects of current acupuncturist practice. During the workshops, the SMEs developed and reviewed the tasks and knowledge statements describing acupuncturist practice, organized the tasks and knowledge statements into content areas, evaluated the responses to the OA questionnaire, and developed the examination outline.

ADHERENCE TO LEGAL STANDARDS AND GUIDELINES

Licensure programs in the State of California adhere strictly to federal and state laws and regulations, as well as to professional guidelines and technical standards. For the purposes of OAs, the following laws and guidelines are authoritative:

- California Business and Professions Code (BPC) § 139
- 29 Code of Federal Regulations Part 1607 – Uniform Guidelines on Employee Selection Procedures (1978)
- California Fair Employment and Housing Act, Government Code § 12944

- *Principles for the Validation and Use of Personnel Selection Procedures* (2018), Society for Industrial and Organizational Psychology (SIOP)
- *Standards for Educational and Psychological Testing* (2014), American Educational Research Association, American Psychological Association, and National Council on Measurement in Education

For a licensure, certification, or registration program to meet these standards, it must be solidly based upon the occupational activities required for practice.

DESCRIPTION OF OCCUPATION

California BPC Code § 4927(d) defines acupuncture as follows:

> "Acupuncture" means the stimulation of a certain point or points on or near the surface of the body by the insertion of needles to prevent or modify the perception of pain or to normalize physiological functions, including pain control for the treatment of certain diseases or dysfunctions of the body, and includes the techniques of electroacupuncture, cupping, and moxibustion.

California BPC Code § 4937 describes authorized practices under an acupuncturist license as follows:

> An acupuncturist's license authorizes the holder thereof:
>
> (a) To engage in the practice of acupuncture.
>
> (b) To perform or prescribe the use of Asian massage, acupressure, breathing techniques, exercise, heat, cold, magnets, nutrition, diet, herbs, plant, animal, and mineral products, and dietary supplements to promote, maintain, and restore health. Nothing in this section prohibits any person who does not possess an acupuncturist's license or another license as a healing arts practitioner from performing or prescribing the use of any modality listed in this subdivision.
>
> (c) For purposes of this section, a "magnet" means a mineral or metal that produces a magnetic field without the application of an electric current.
>
> (d) For purposes of this section, "plant, animal, and mineral products" means naturally occurring substances of plant, animal, or mineral origin,

except that it does not include synthetic compounds, controlled substances or dangerous drugs as defined in Sections 4021 and 4022, or a controlled substance listed in Chapter 2 (commencing with Section 11053) of Division 10 of the Health and Safety Code.

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

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CHAPTER 2 | OCCUPATIONAL ANALYSIS QUESTIONNAIRE

SUBJECT MATTER EXPERT INTERVIEWS

The Board provided OPES with a list of acupuncturists to contact for telephone interviews. During the semi-structured interviews, 14 acupuncturists were asked to identify the major content areas of practice and the tasks performed in each area. The SMEs were also asked to identify the knowledge necessary to perform each task safely and competently.

TASKS AND KNOWLEDGE STATEMENTS

To develop a preliminary list of tasks and knowledge statements, OPES test specialists integrated information gathered from literature reviews of profession-related sources (e.g., previous OA reports, articles, laws and regulations, industry publications) and from interviews with SMEs. The statements were then organized into major content areas of practice.

In October and November 2025, OPES test specialists facilitated two workshops. Seventeen SMEs with varying years of experience and practicing in different geographic locations participated in these workshops. During the first workshop in October, SMEs evaluated the tasks and knowledge statements for technical accuracy, level of specificity, and comprehensiveness of assessment of practice. In addition, SMEs evaluated the organization of tasks within content areas to ensure that the content areas were independent and non-overlapping.

During the second workshop, the SMEs performed a preliminary linkage of the tasks and knowledge statements. The linkage was performed to identify the knowledge required for performance of each task and to verify that each identified knowledge statement was important for safe and competent performance as an acupuncturist. The linkage ensured that all tasks were linked to at least one knowledge statement and that each knowledge statement was linked to at least one task. The SMEs also evaluated the scales that would be used for rating tasks and knowledge statements. Finally, the SMEs reviewed and revised the proposed demographic questions for the online OA questionnaire.

OPES used the final list of tasks, associated knowledge statements, demographic questions, and rating scales to develop the online OA questionnaire that was sent to a sample of California acupuncturists.

QUESTIONNAIRE DEVELOPMENT

OPES test specialists developed the online OA questionnaire designed to solicit acupuncturists' ratings of the tasks and knowledge statements. The surveyed acupuncturists were asked to rate how often they perform each task in their current practice (Frequency) and how important each task is to effective performance of their current practice (Importance). The OA questionnaire also included a demographic section to obtain relevant professional background information about responding acupuncturists. The OA questionnaire is Appendix A.

PILOT STUDY

Before administering the final questionnaire, OPES conducted a pilot study of the online questionnaire. The draft questionnaire was sent to the 17 SMEs who had participated in the OA workshops. OPES received feedback on the pilot study from seven respondents. The SMEs reviewed the tasks in the questionnaire for technical accuracy and for whether they reflected acupuncturist practice. The SMEs also provided feedback about the estimated time for completion, online navigation, and ease of use of the questionnaire. OPES used this feedback to refine the final questionnaire, which was administered from February 27 to April 7, 2026.

CHAPTER 3 | RESPONSE RATE AND DEMOGRAPHICS

SAMPLING STRATEGY AND RESPONSE RATE

In February 2026, on behalf of the Board, OPES sent an email to 10,062 actively practicing acupuncturists, inviting them to complete the online OA questionnaire. The email invitation was sent to acupuncturists for whom the Board had an email address on file. The email invitation is Appendix B. Participants were offered 4 continuing education credits for completing the survey. Reminder emails were sent weekly after the initial invitation was made. Additionally, the Board provided a link to the survey during the March board meeting.

A total of 1,686 acupuncturists, or approximately 16.8% of the acupuncturists who received an email invitation, responded to the OA questionnaire. The final number of respondents included in the data analysis was 1,319 (13.1%). This response rate reflects two adjustments. First, OPES excluded data from respondents who indicated they were not currently licensed and practicing as acupuncturists in California. Second, OPES excluded data from questionnaires that contained a large portion of incomplete responses.

DEMOGRAPHIC SUMMARY

As shown in Table 1 and Figure 1, the responding acupuncturists reported a range of years licensed from more than 30 years of experience (11.37%) to 0–5 years of experience (18.42%). A majority of respondents (54.21%) reported holding an acupuncturist license for 15 years or fewer, while 45.78% reported holding an acupuncturist license for 16 years or more.

Table 2 and Figure 2 show that 28.05% of respondents reported working as an acupuncturist 31–40 hours per week, while 25.70% reported working 21–30 hours per week.

Table 3 and Figure 3 show the number of patients seen per week, with 22.37% of respondents reporting seeing 21–30 patients per week and 21.68% seeing 0–10 patients per week.

Table 4 and Figure 4 show that 88.32% of respondents reported that their primary work setting was located in an urban area, and 10.84% reported that it was located in a rural area.

Table 5 and Figure 5 show that 56.48% of respondents reported having a primary practice setting of sole proprietor, while 10.46% reported acupuncture medical group as the primary practice setting. In addition, approximately 9.25% of respondents reported that they worked in a group acupuncture practice.

Table 6 and Figure 6 show that 61.41% of respondents do not work in a secondary setting, while 11.37% described their secondary practice setting as sole proprietor, 5.84% as mobile practice, and 2.81% as group acupuncture practice.

Table 7 and Figure 7 show that 71.95% of respondents reported an employment status of self-employed, while 9.55% reported working as salaried employee, and 8.49% reported working as an hourly employee.

Table 8 and Figure 8 show that a majority of respondents (75.82%) reported cash as a primary method of payment used by patients, 52.99% reported health insurance, and 21.53% reported workers' compensation.

Table 9 and Figure 9 show that 74.75% of respondents reported no use of telehealth over the past 12 months, while 18.12% reported providing 6–10 percent of services via telehealth.

Table 10 and Figure 10 show that a majority of respondents (79.08%) reported pain management as the primary focus of practice, while 44.28% reported general acupuncture as a primary focus. As shown in Table 11 and Figure 11, 56.56% of respondents indicated that pain management is the most common category of treatment applied.

Table 12 and Figure 12 show that 98.41% of respondents use acupuncture as the treatment modality in their practice, and 79.30% use cupping. As shown in Table 13 and Figure 13, a majority of respondents indicated acupuncture as the treatment modality used most often (85.29%) followed by electroacupuncture (4.47%).

Table 14 and Figure 14 show that 57.85% of respondents reported English as their native language, with 20.55% reporting Chinese and 14.18% reporting Korean. Table 15 and Figure 15 show the primary language spoken by clients, with 85.06% reporting English and 7.43% reporting Chinese.

Table 16 and Figure 16 show that 47.84% of respondents reported obtaining a master's degree, with 45.26% reporting obtaining a doctorate. As shown in Table 17 and Figure 17, 75.51% of respondents indicated feeling that their education or training adequately prepared them for the first year of practice.

Table 18 and Figure 18 show that 66.19% of respondents indicated that additional training in the subject areas of practice management and business skills would have been beneficial for the first year of practice. Additionally, 31.77% would have liked training in patient education and counseling.

Table 19 shows the geographical regions where respondents perform most of their work. A breakdown of regional data organized by county is Appendix C.

Additional demographic information from respondents can be found in Tables 1–19 and Figures 1–18.

TABLE 1 – NUMBER OF YEARS LICENSED AS AN ACUPUNCTURIST

YEARS	NUMBER (N)	PERCENT
0–5	243	18.42
6–10	221	16.76
11–15	251	19.03
16–20	183	13.87
21–25	176	13.34
26–30	95	7.20
More than 30	150	11.37
TOTAL	1,319	99.99*

*NOTE: Percentages do not add to 100 due to rounding.

FIGURE 1 – NUMBER OF YEARS LICENSED AS AN ACUPUNCTURIST

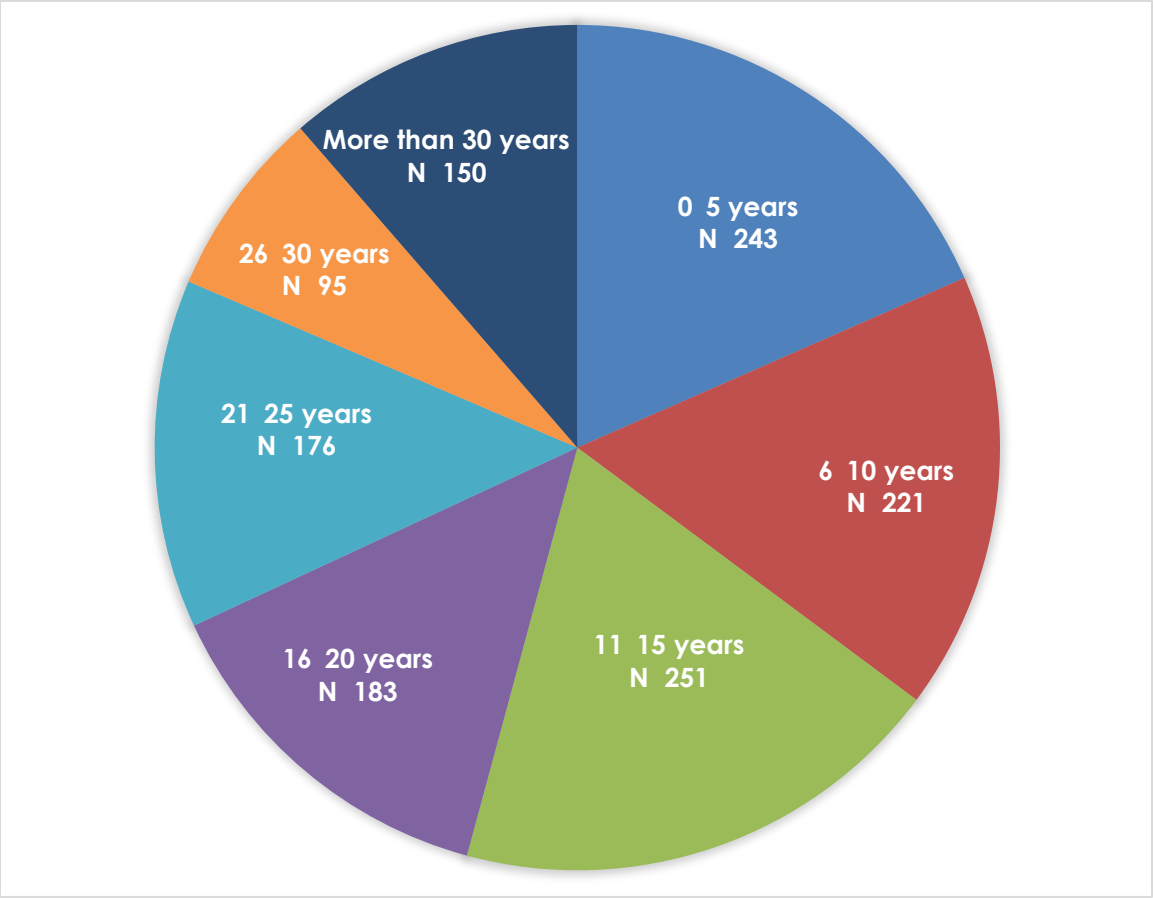

TABLE 2 – HOURS WORKED PER WEEK AS AN ACUPUNCTURIST

HOURS	NUMBER (N)	PERCENT
0–10	187	14.18
11–20	255	19.33
21–30	339	25.70
31–40	370	28.05
More than 40	165	12.51
Missing	3	0.23
Total	1,319	100

FIGURE 2 – HOURS WORKED PER WEEK AS AN ACUPUNCTURIST

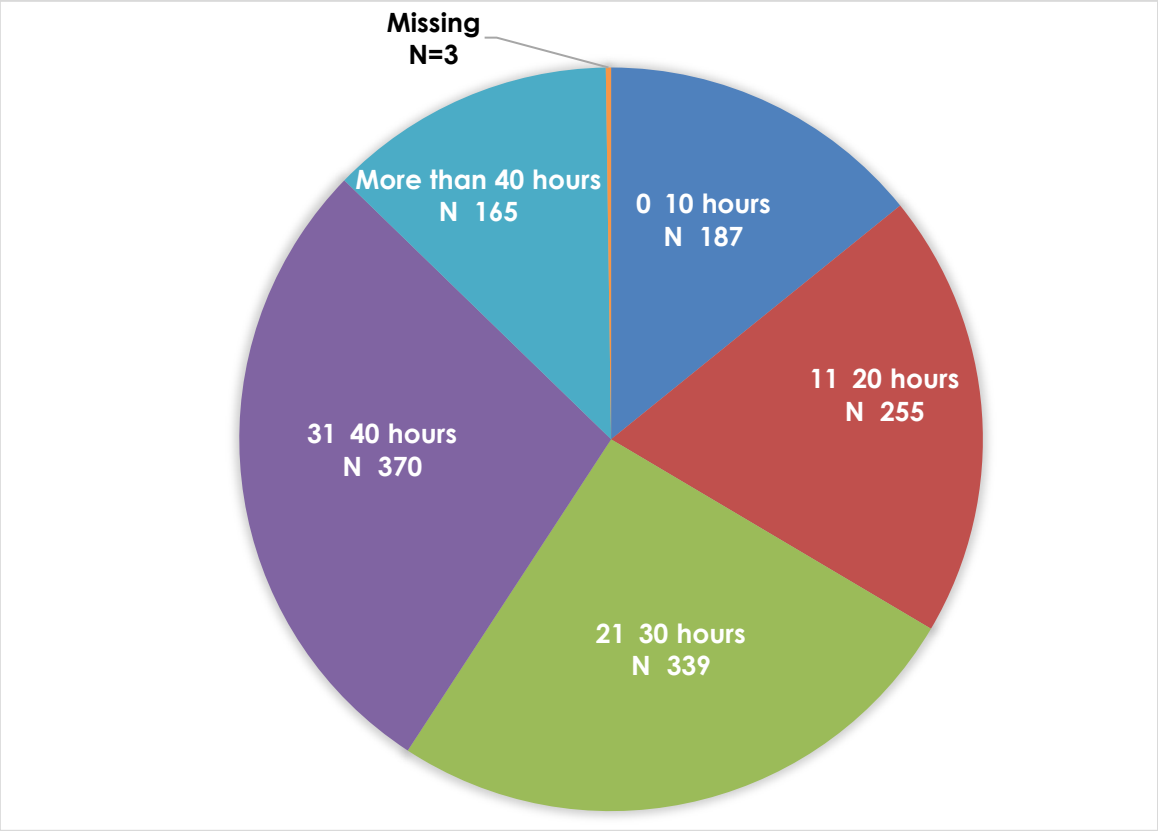

TABLE 3 – PATIENTS SEEN PER WEEK

PATIENTS SEEN	NUMBER (N)	PERCENT
0–10	286	21.68
11–20	280	21.23
21–30	295	22.37
31–50	266	20.17
More than 50	188	14.25
Missing	4	0.30
Total	1,319	100

FIGURE 3 – PATIENTS SEEN PER WEEK

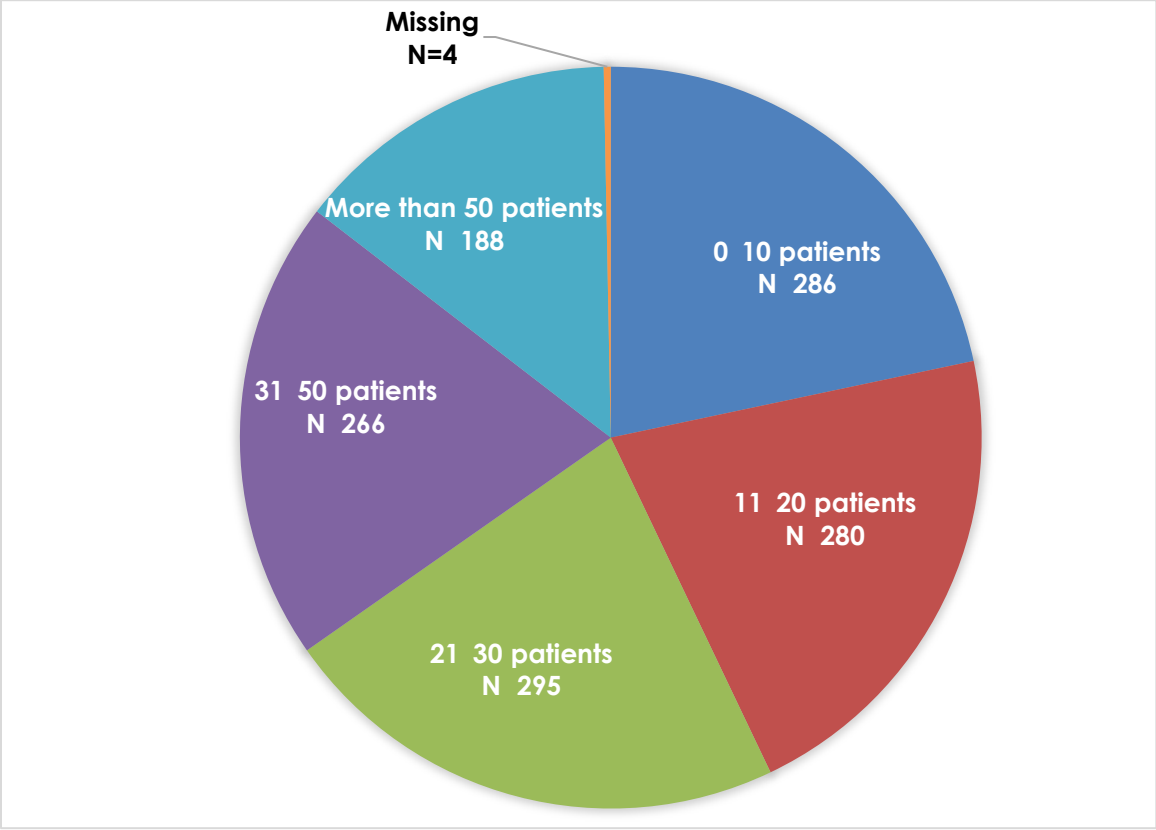

TABLE 4 – LOCATION OF PRIMARY WORK SETTING

LOCATION	NUMBER (N)	PERCENT
Urban (more than 50,000 people)	1,165	88.32
Rural (fewer than 50,000 people)	143	10.84
Missing	11	0.83
Total	1,319	99.99*

*NOTE: Percentages do not add to 100 due to rounding.

FIGURE 4 – LOCATION OF PRIMARY WORK SETTING

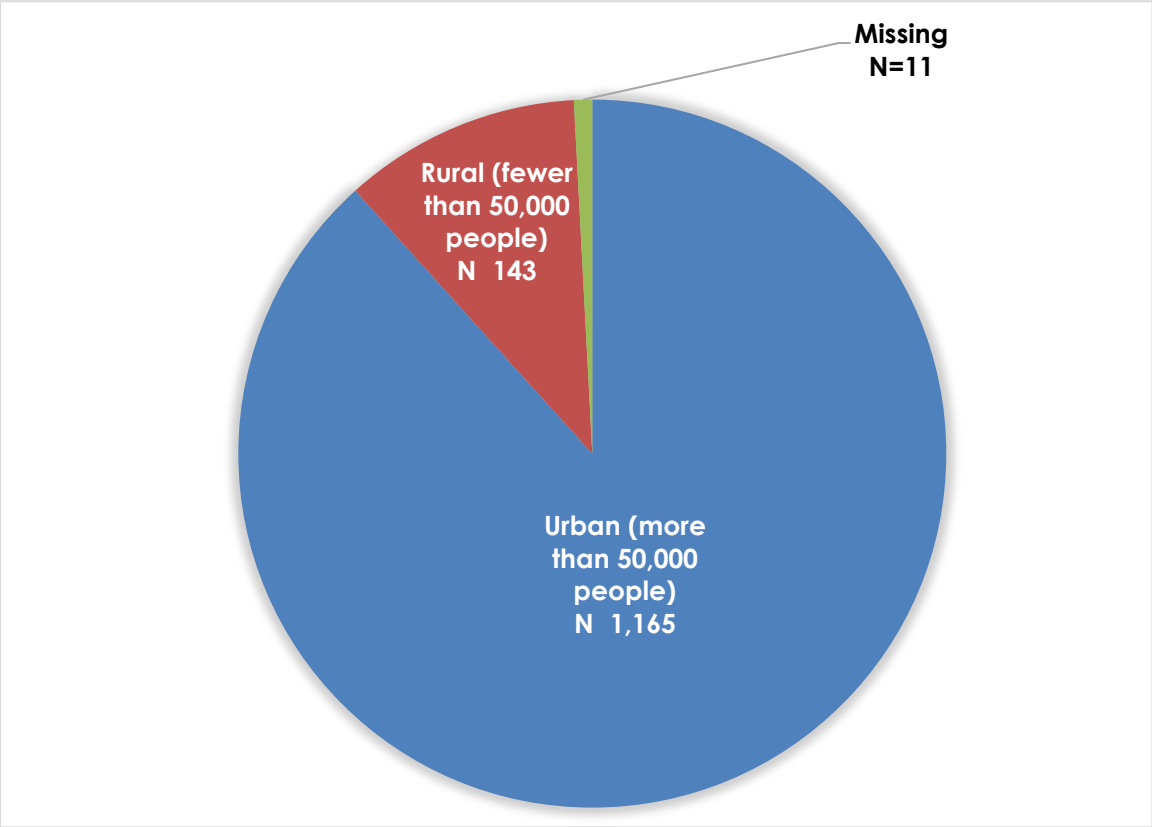

TABLE 5 – PRIMARY PRACTICE SETTING

PRIMARY SETTING	NUMBER (N)	PERCENT
Other	54	4.09
Sole proprietor	745	56.48
Group acupuncture practice	122	9.25
Group multidisciplinary practice	116	8.79
Community acupuncture clinic	26	1.97
Acupuncture medical group (Inc. or LLC)	138	10.46
Hospital	42	3.18
Spa	5	0.38
Mobile practice (house calls/home visits)	29	2.20
Multiple settings	17	1.29
Telehealth	8	0.61
Educational institution (e.g., instructor)	14	1.06
Missing	3	0.23
Total	1,319	99.99*

*NOTE: Percentages do not add to 100 due to rounding.

FIGURE 5 – PRIMARY PRACTICE SETTING

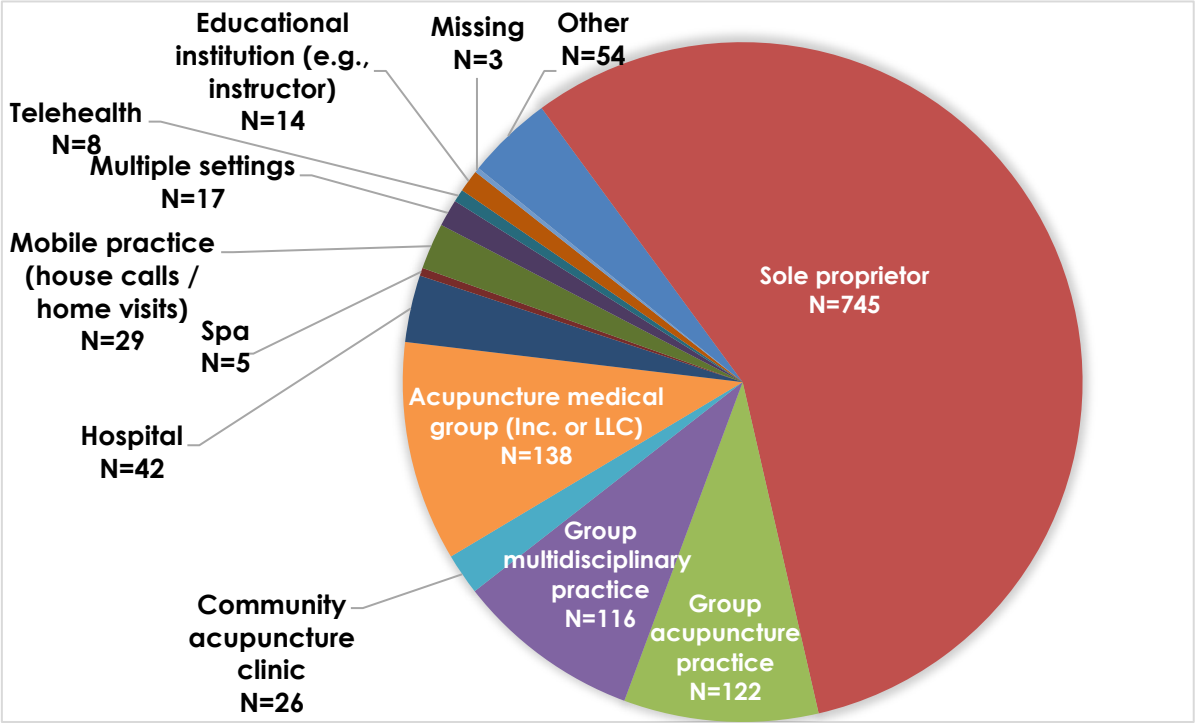

TABLE 6 – SECONDARY PRACTICE SETTING

SECONDARY SETTING	NUMBER (N)	PERCENT
Other (please specify)	24	1.82
Not applicable	810	61.41
Sole proprietor	150	11.37
Group acupuncture practice	37	2.81
Group multidisciplinary practice	50	3.79
Community acupuncture clinic	17	1.29
Acupuncture medical group (Inc. or LLC)	18	1.36
Hospital	15	1.14
Spa	8	0.61
Mobile practice (house calls/home visits)	77	5.84
Multiple settings	15	1.14
Telehealth	23	1.74
Educational institution (e.g., instructor)	45	3.41
Missing	30	2.27
Total	1,319	100

FIGURE 6 – SECONDARY PRACTICE SETTING

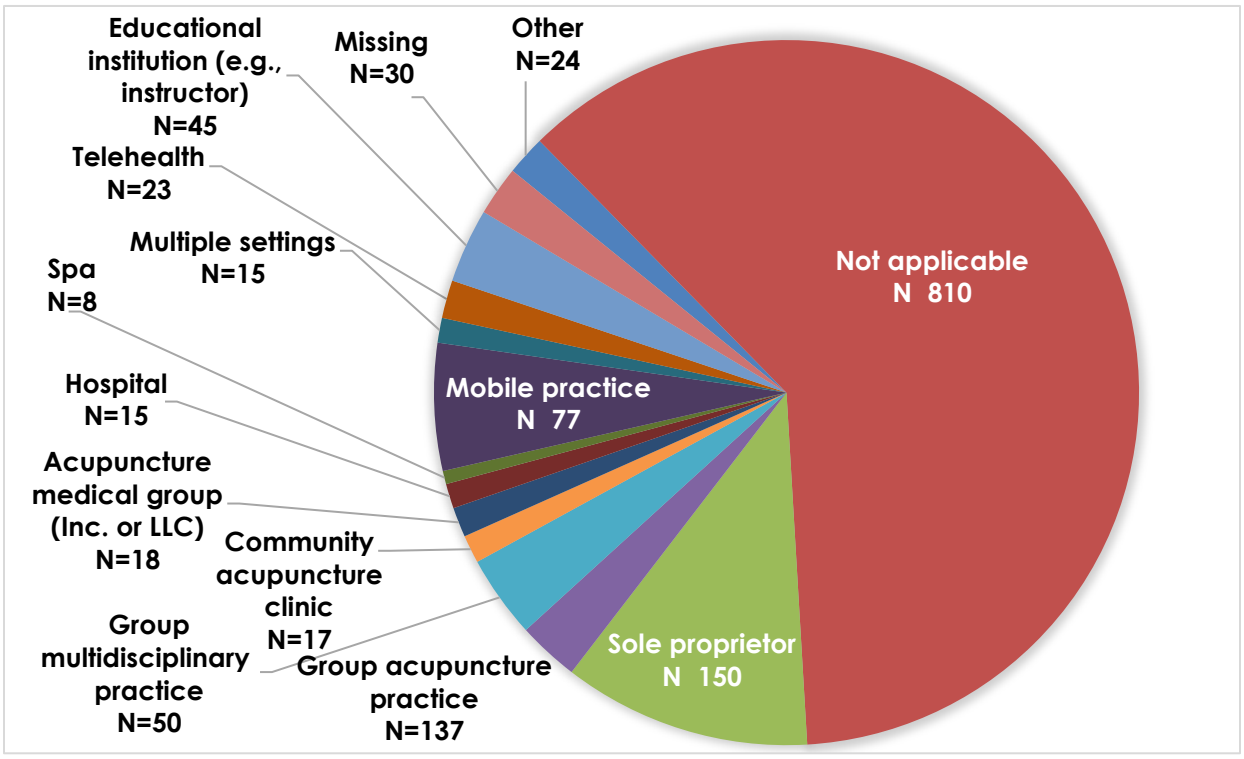

TABLE 7 – EMPLOYMENT STATUS

STATUS	NUMBER (N)	PERCENT
Self-employed	949	71.95
Independent contractor	100	7.58
Hourly employee	112	8.49
Salaried employee	126	9.55
Commissioned employee	25	1.90
Missing	7	0.53
Total	1,319	100

FIGURE 7 – EMPLOYMENT STATUS

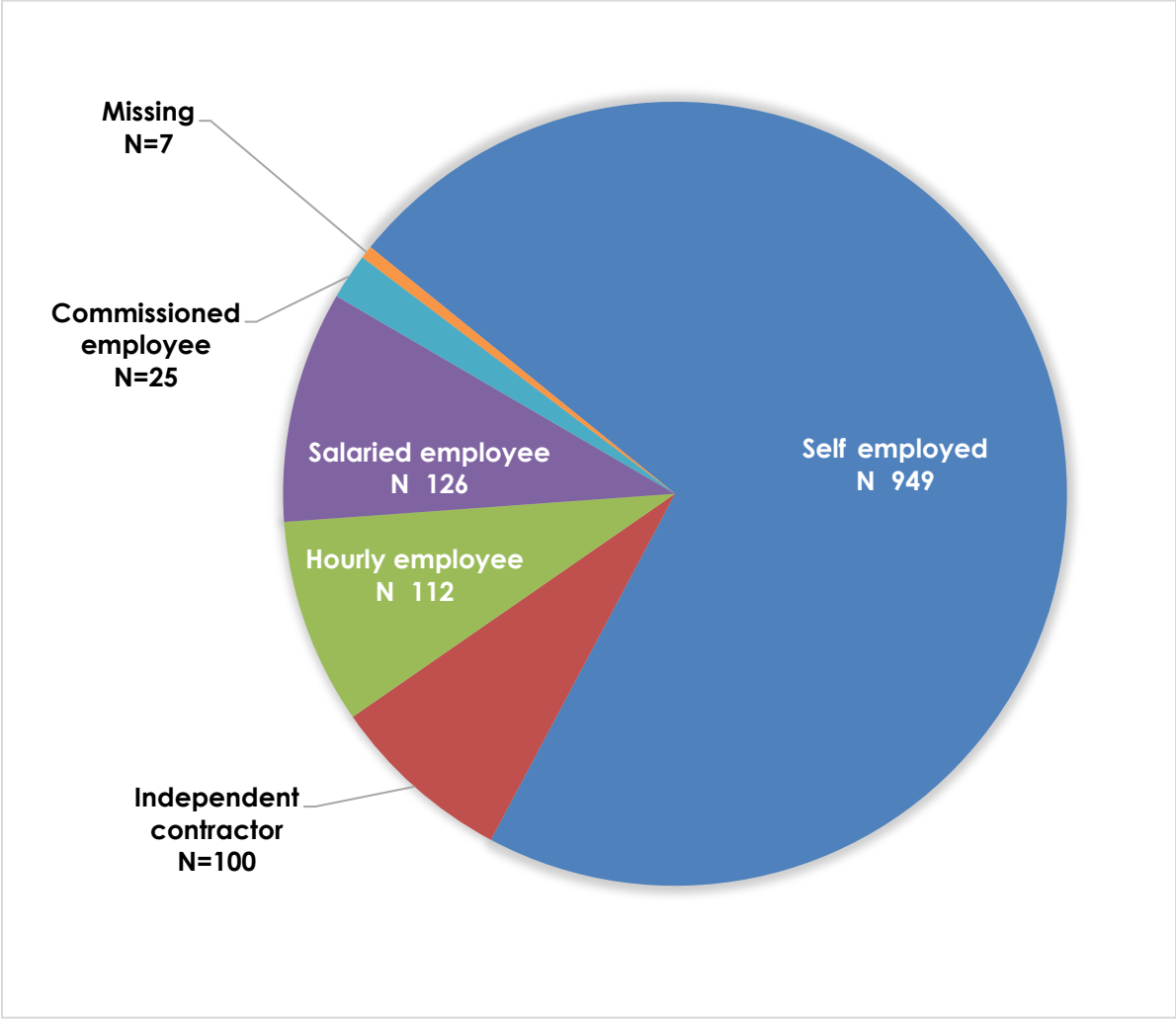

TABLE 8 – PRIMARY METHOD OF PAYMENT FOR PATIENTS

PAYMENT METHOD	NUMBER (N)	PERCENT*
Cash	1,000	75.82
Health insurance (e.g., HMO, PPO)	699	52.99
Workers' compensation	284	21.53
Medicaid/Medicare	150	11.37
Personal injury	190	14.40
Veterans Affairs	133	10.08
Other	78	5.91

*NOTE: Respondents were asked to select all that apply.

FIGURE 8 – PRIMARY METHOD OF PAYMENT FOR PATIENTS

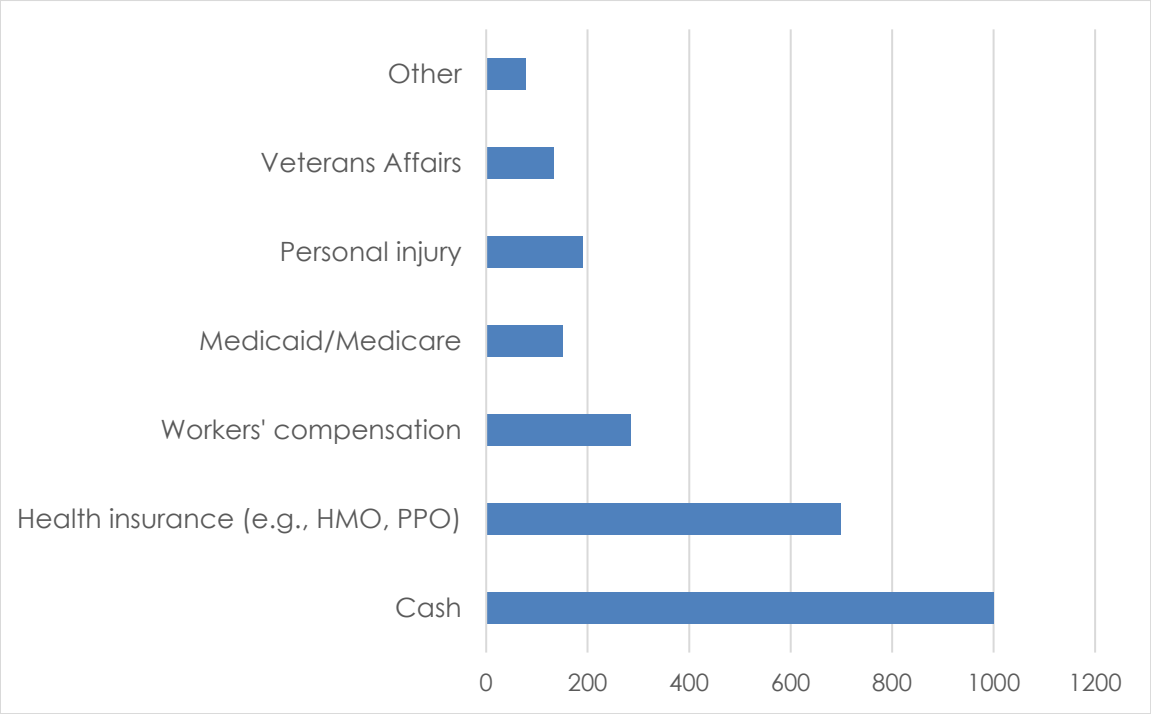

TABLE 9 – PERCENTAGE OF SERVICES PROVIDED VIA TELEHEALTH OVER THE PAST 12 MONTHS

PERCENTAGE	NUMBER (N)	PERCENT
None; I did not use telehealth to provide patient care.	986	74.75
6–10	239	18.12
11–20	40	3.03
21–30	17	1.29
31–50	15	1.14
51–75	5	0.38
76–95	5	0.38
96–100	9	0.68
Missing	3	0.23
	1,319	100

FIGURE 9 – PERCENTAGE OF SERVICES PROVIDED VIA TELEHEALTH OVER THE PAST 12 MONTHS

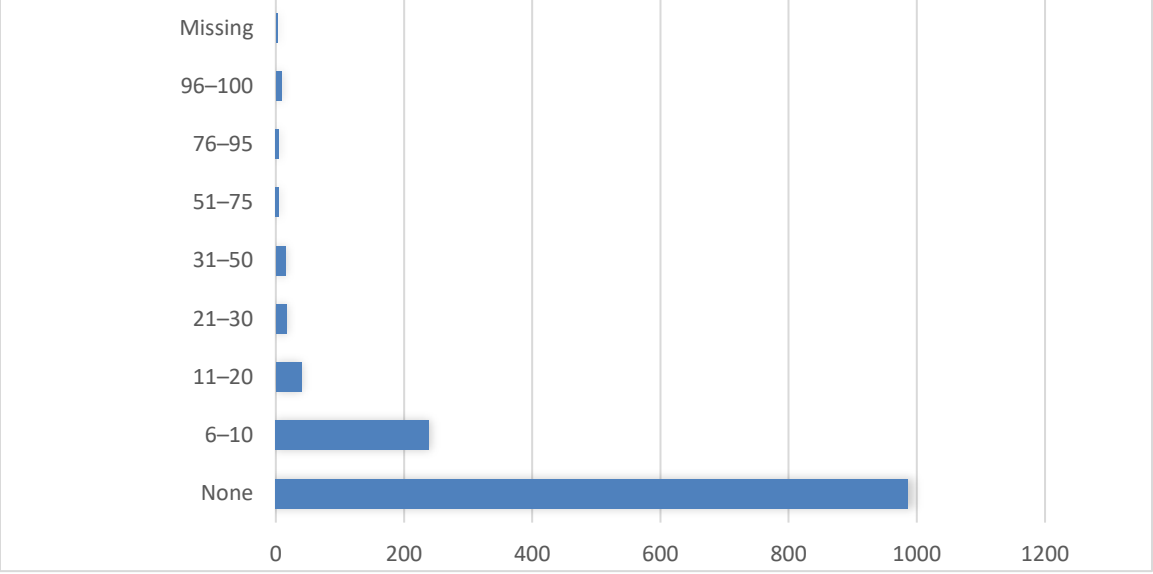

TABLE 10 – PRIMARY FOCUS OF PRACTICE

FOCUS	NUMBER (N)	PERCENT*
Addiction	45	3.41
Cardiovascular	73	5.53
Dermatological or cosmetic	101	7.66
Endocrine health	133	10.08
Fertility	281	21.30
Gastrointestinal	296	22.44
General	584	44.28
Geriatrics	99	7.51
Immune disorders	197	14.94
Men's health	82	6.22
Mental health	298	22.59
Neurological	206	15.62
Oncology support	110	8.34
Orthopedics	346	26.23
Pain management	1,043	79.08
Pediatrics	56	4.25
Respiratory	93	7.05
Sports medicine	236	17.89
Women's health	504	38.21
Other	68	5.16

*NOTE: Respondents were asked to select all that apply.

FIGURE 10 – PRIMARY FOCUS OF PRACTICE

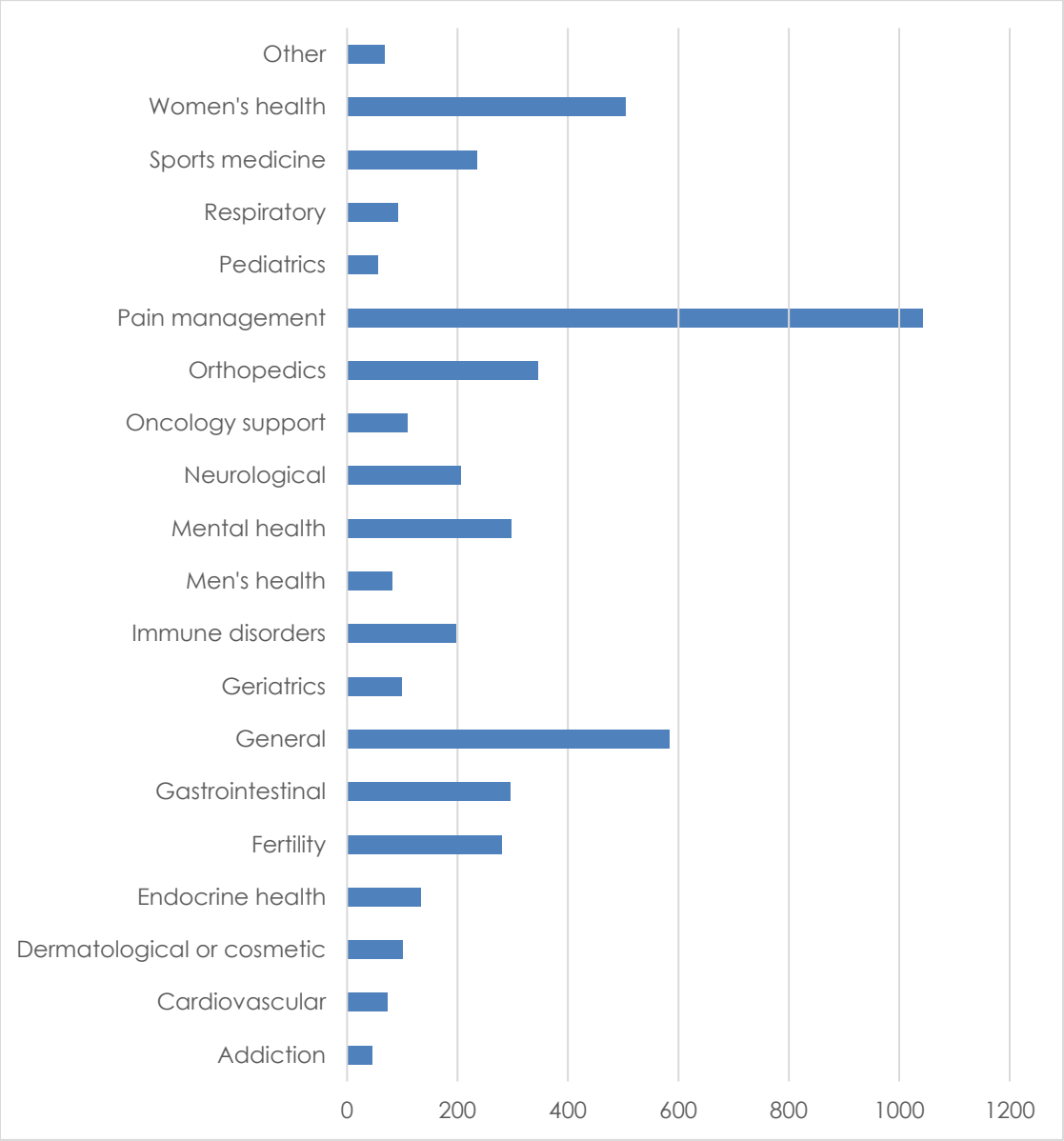

TABLE 11 – TREATMENT CATEGORY APPLIED MOST OVER THE LAST 12 MONTHS

TREATMENT CATEGORY	NUMBER (N)	PERCENT*
Other	28	2.12
Addiction	2	0.15
Cardiovascular	4	0.30
Dermatological or cosmetic	5	0.38
Endocrine health	6	0.45
Fertility	40	3.03
Gastrointestinal	24	1.82
General	145	10.99
Geriatrics	11	0.83
Immune disorders	20	1.52
Men's health	1	0.08
Mental health	42	3.18
Neurological	15	1.14
Oncology support	12	0.91
Orthopedics	99	7.51
Pain management	746	56.56
Pediatrics	4	0.30
Respiratory	5	0.38
Sports medicine	24	1.82
Women's health	79	5.99
Missing	7	0.53

*NOTE: Respondents were asked to select up to three categories.

FIGURE 11 – TREATMENT CATEGORY APPLIED MOST OVER THE LAST 12 MONTHS

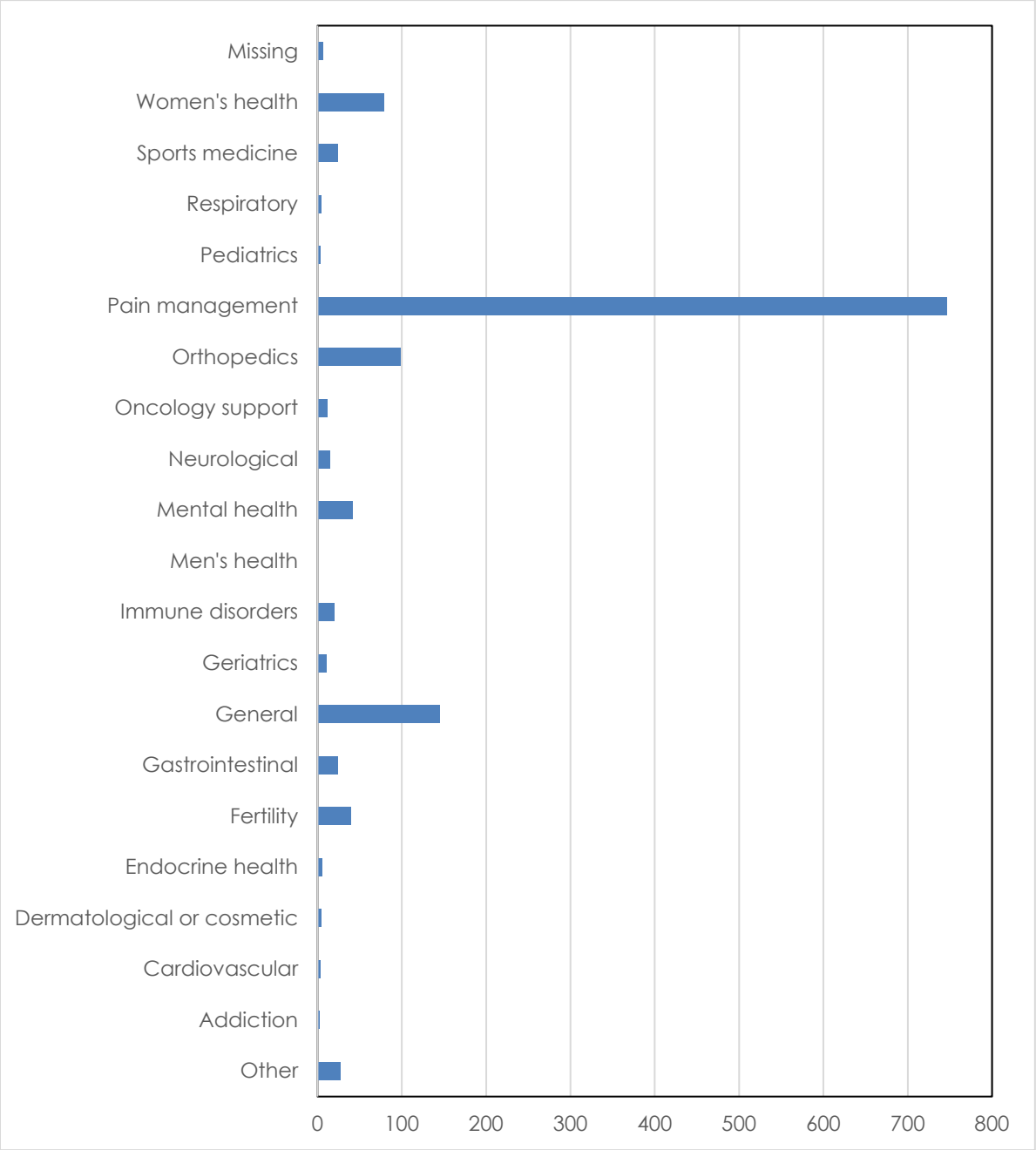

TABLE 12 – TREATMENT MODALITIES USED

MODALITIES	NUMBER (N)	PERCENT*
Acupuncture	1,298	98.41
Breathing techniques	496	37.60
Cupping	1,046	79.30
Diet and nutrition	840	63.68
Ear seeds	731	55.42
Electroacupuncture	861	65.28
Exercise	701	53.15
Gua Sha	617	46.78
Heat therapy	728	55.19
Herbal plaster	264	20.02
Herbal therapy	856	64.90
Infrared therapy	850	64.44
Kinesiology tape	202	15.31
Laser acupuncture	58	4.40
Manual therapy	701	53.15
Moxibustion	634	48.07
Other	103	7.81

*NOTE: Respondents were asked to select all that apply.

FIGURE 12 – TREATMENT MODALITIES USED

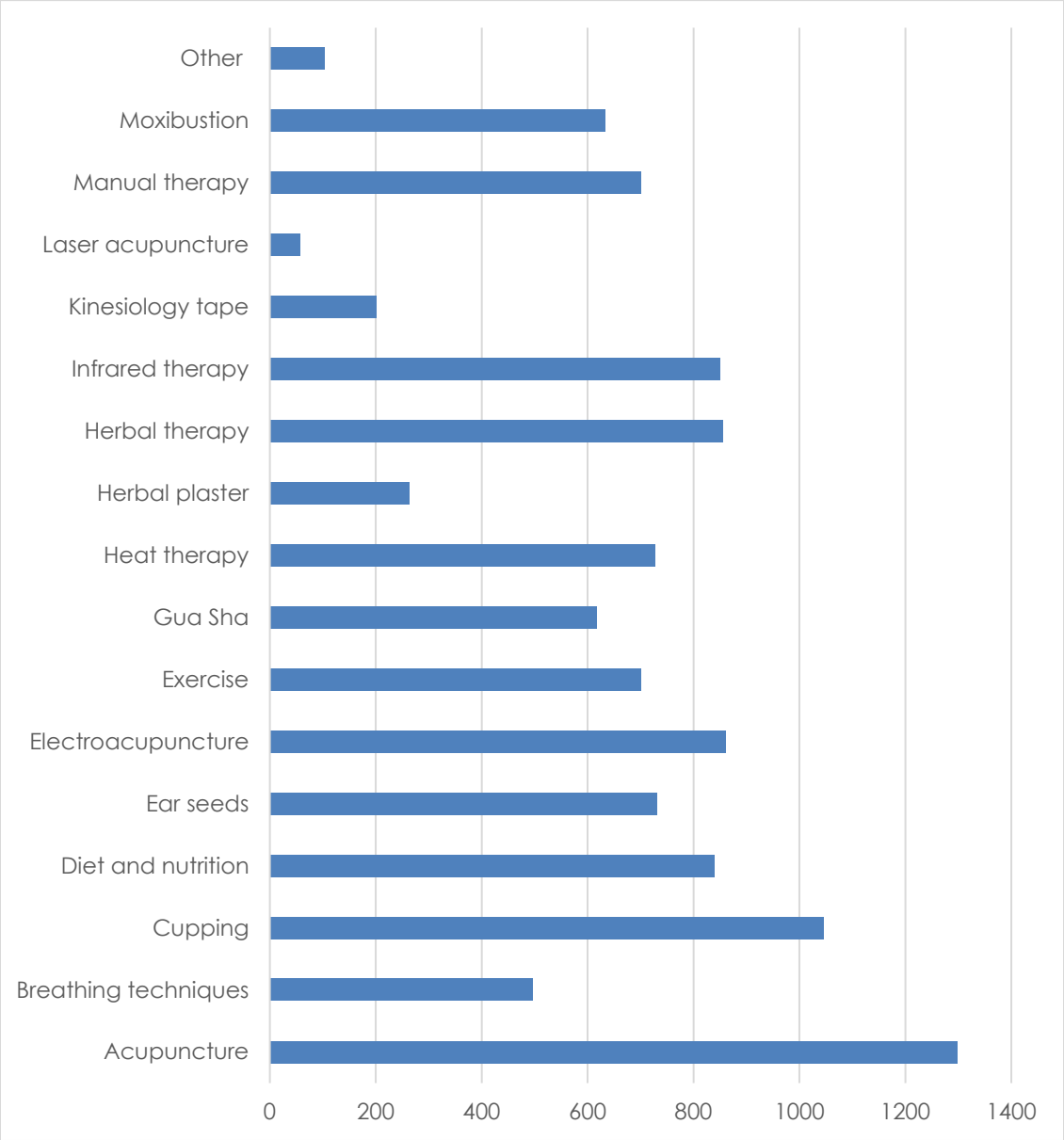

TABLE 13 – TREATMENT MODALITY USED MOST OVER THE LAST 12 MONTHS

TREATMENT MODALITY	NUMBER (N)	PERCENT
Other	24	1.82
Acupuncture	1,125	85.29
Breathing techniques	3	0.23
Cupping	9	0.68
Diet and nutrition	8	0.61
Ear seeds	2	0.15
Electroacupuncture	59	4.47
Exercise	3	0.23
Gua Sha	2	0.15
Heat therapy	7	0.53
Herbal plaster	1	0.08
Herbal therapy	39	2.96
Infrared therapy	6	0.45
Kinesiology tape	1	0.08
Manual therapy	22	1.67
Moxibustion	4	0.3
Missing	4	0.3
Total	1,319	100

FIGURE 13 – TREATMENT MODALITY USED MOST OVER THE LAST 12 MONTHS

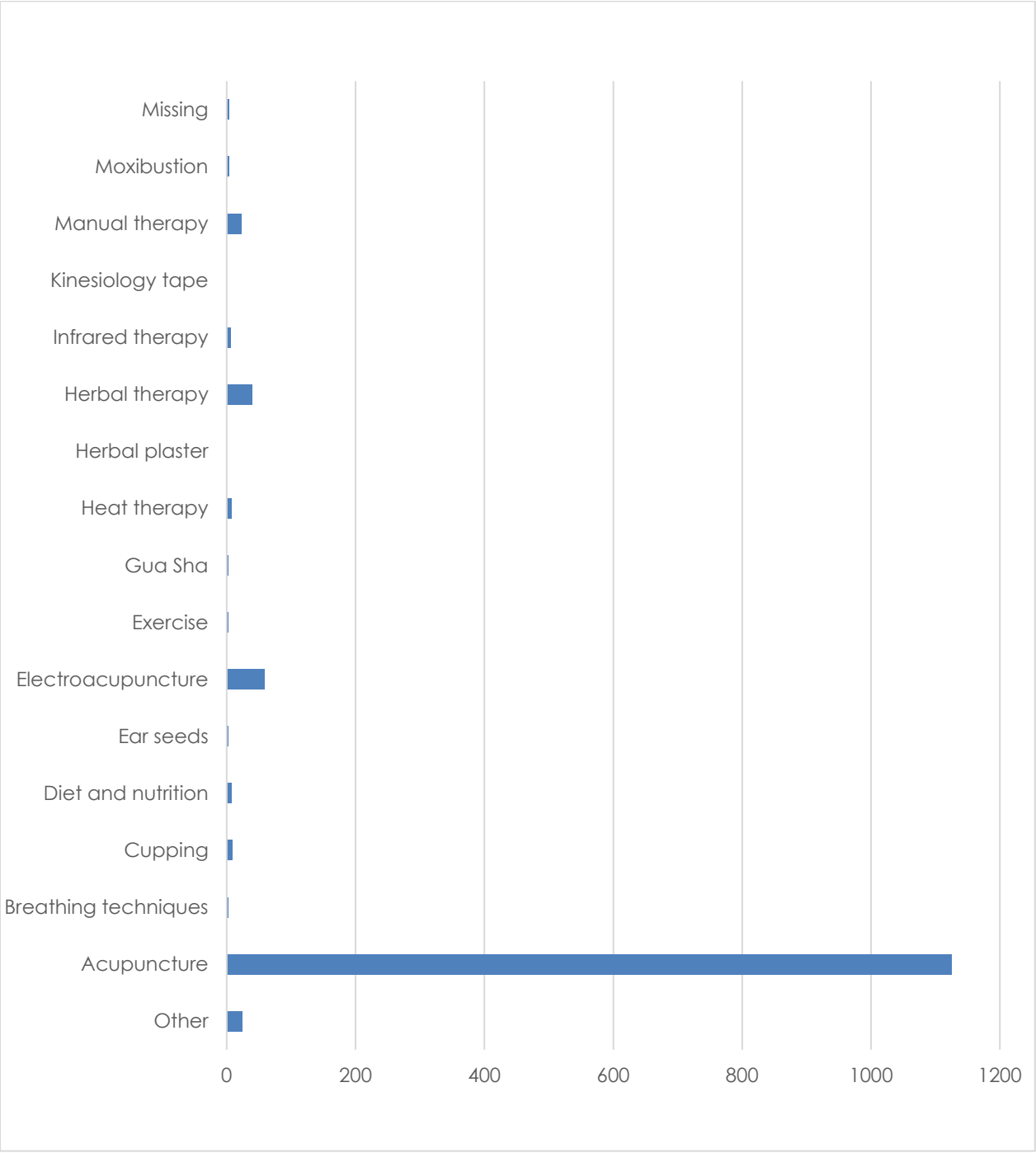

TABLE 14 – NATIVE LANGUAGE OF ACUPUNCTURIST

LANGUAGE	NUMBER (N)	PERCENT
Other (please specify)	79	5.99
English	763	57.85
Chinese	271	20.55
Korean	187	14.18
Spanish	17	1.29
Missing	2	0.15
Total	1,319	100.01*

*NOTE: Percentages do not add to 100 due to rounding.

FIGURE 14 – NATIVE LANGUAGE OF ACUPUNCTURIST

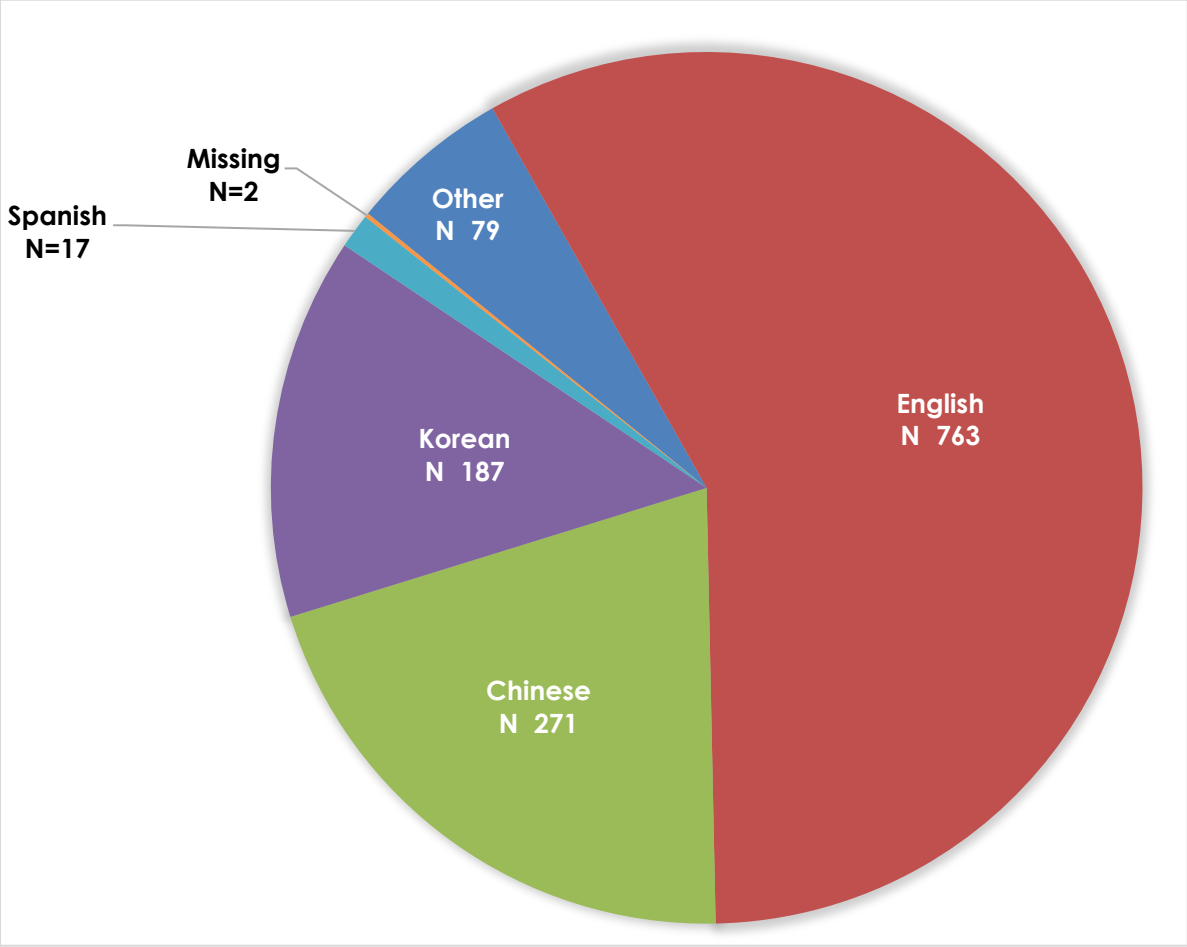

TABLE 15 – PRIMARY LANGUAGE SPOKEN BY CLIENTS

LANGUAGE	NUMBER (N)	PERCENT
Other	15	1.14
English	1,122	85.06
Chinese	98	7.43
Korean	46	3.49
Spanish	35	2.65
Missing	3	0.23
Total	1,319	100

FIGURE 15 – PRIMARY LANGUAGE SPOKEN BY CLIENTS

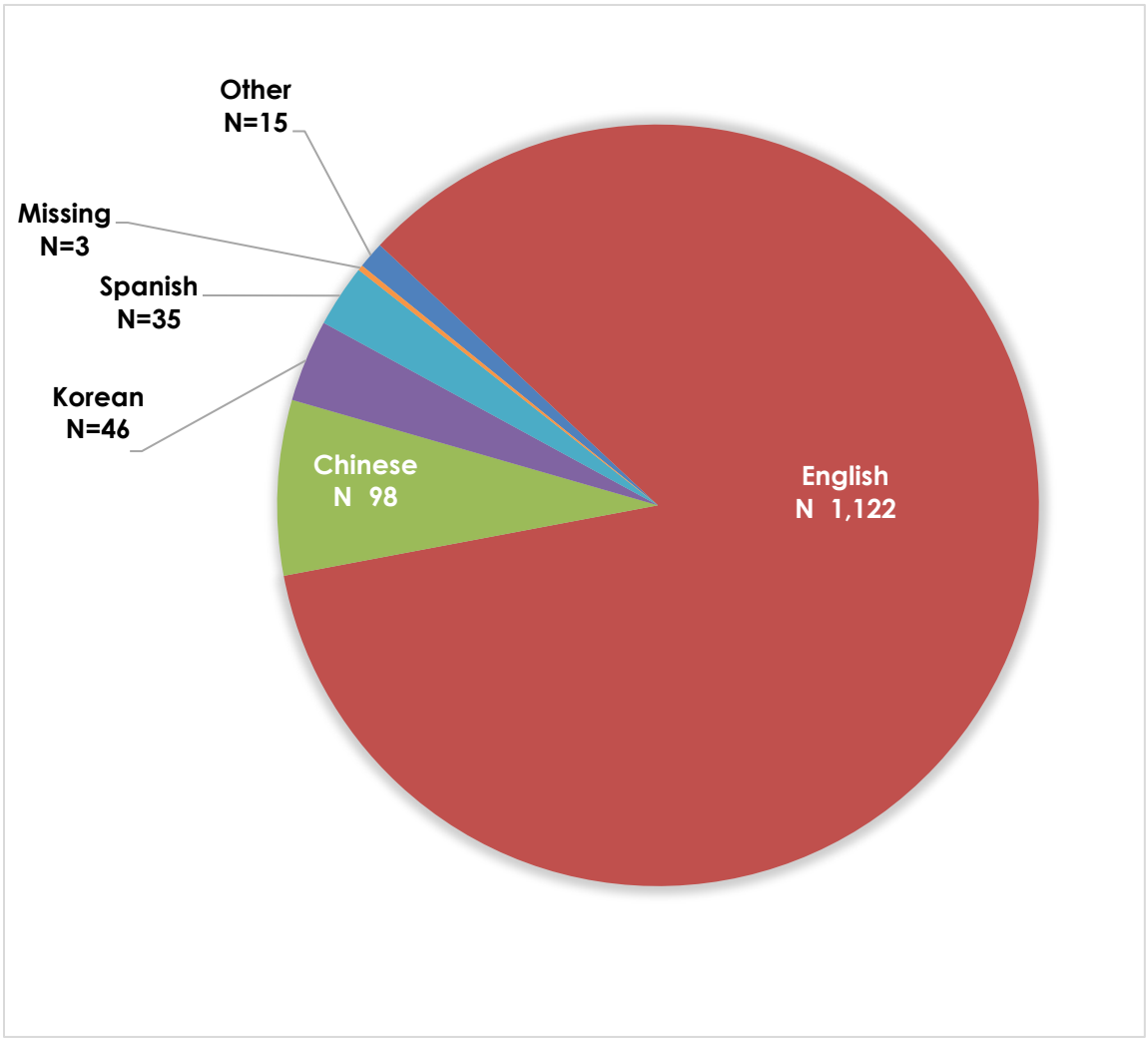

TABLE 16 – HIGHEST LEVEL OF EDUCATION ACHIEVED RELATED TO ACUPUNCTURE OR ASIAN MEDICINE

EDUCATION	NUMBER (N)	PERCENT
Other formal education	26	1.97
Associate degree	7	0.53
Bachelor's degree	40	3.03
Master's degree	631	47.84
Doctorate	597	45.26
Certificate	14	1.06
Missing	4	0.30
Total	1,319	99.99*

*NOTE: Percentages do not add to 100 due to rounding.

FIGURE 16 – HIGHEST LEVEL OF EDUCATION ACHIEVED RELATED TO ACUPUNCTURE OR ASIAN MEDICINE

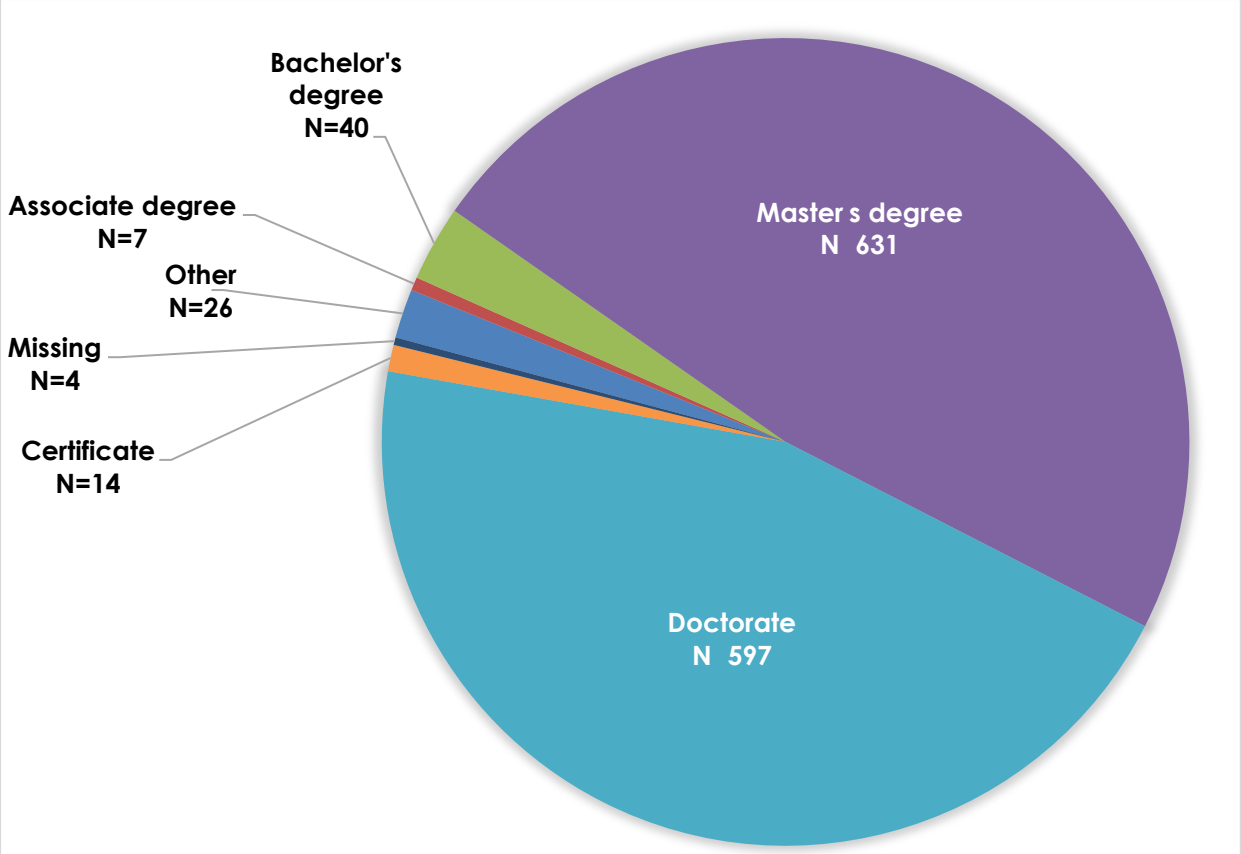

TABLE 17 – RESPONDENT FEELS ADEQUATELY PREPARED FOR FIRST YEAR OF PRACTICE

FEELS PREPARED	NUMBER (N)	PERCENT
Yes	996	75.51
No	319	24.18
Missing	4	0.30
Total	1,319	99.99*

*NOTE: Percentages do not add to 100 due to rounding.

FIGURE 17 – RESPONDENT FEELS ADEQUATELY PREPARED FOR FIRST YEAR OF PRACTICE

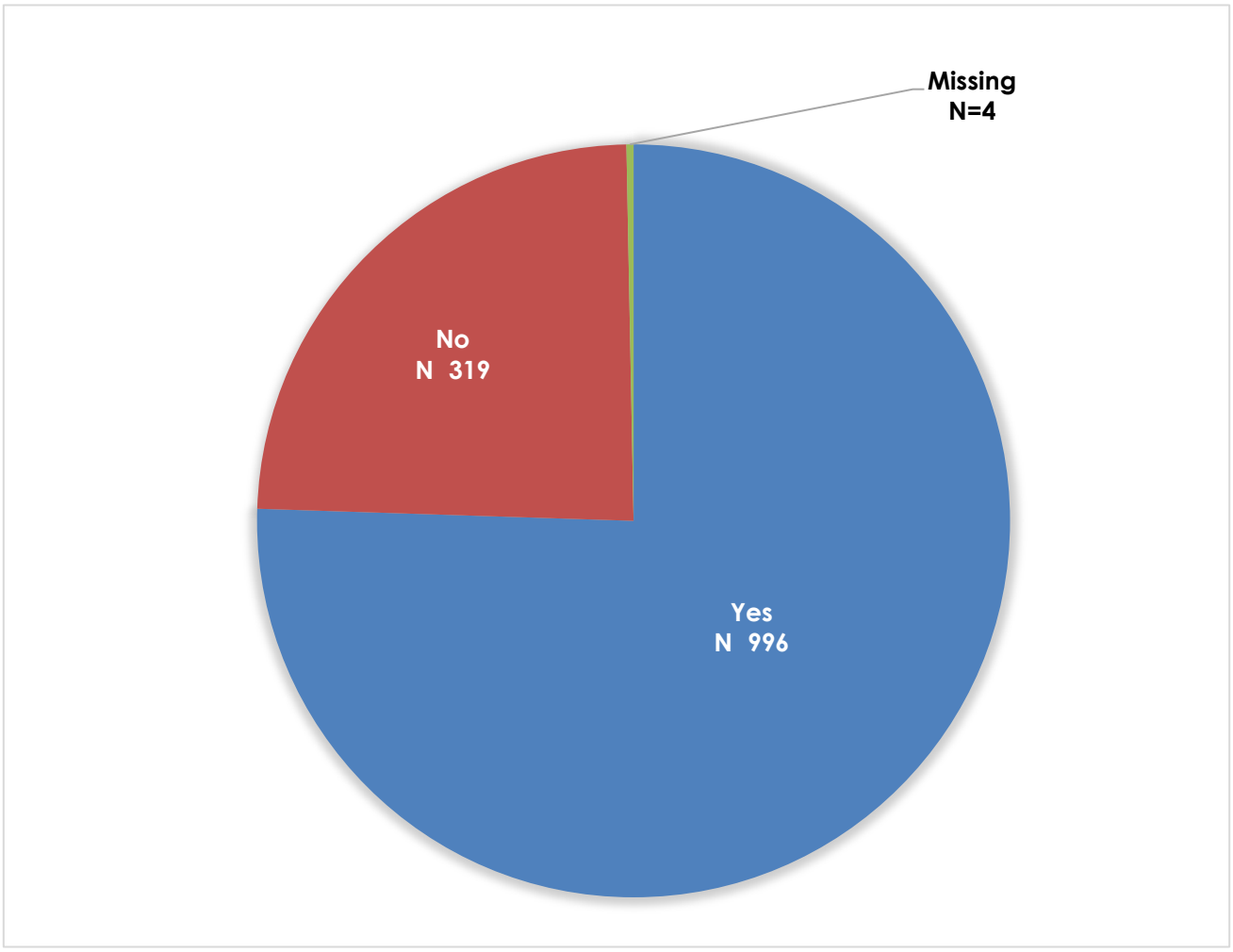

TABLE 18 – SUBJECTS THAT WOULD HAVE BEEN BENEFICIAL FOR ADEQUATE PREPARATION FOR FIRST YEAR IN PRACTICE

SUBJECTS	NUMBER (N)	PERCENT*
Practice management and business skills	873	66.19
Patient education and counseling	419	31.77
Additional clinical practice hours	249	18.88
Clinical experience in diverse practice settings	400	30.33
Clinical experience with diverse patient populations	300	22.74
Insurance billing	621	47.08

*NOTE: Respondents were asked to select all that apply.

FIGURE 18 – SUBJECTS THAT WOULD HAVE BEEN BENEFICIAL FOR ADEQUATE PREPARATION FOR FIRST YEAR IN PRACTICE

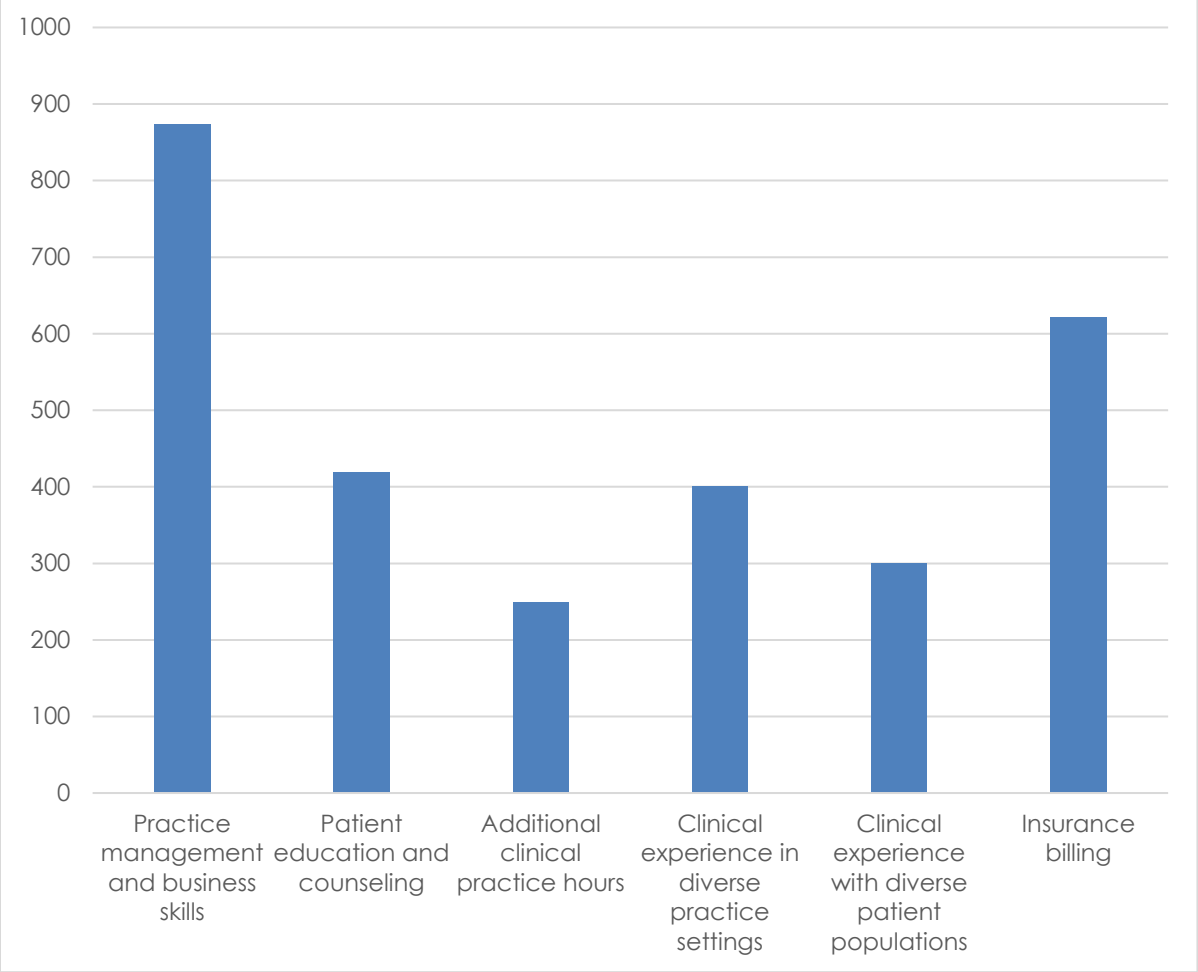

TABLE 19 – RESPONDENTS BY REGION

REGION NAME*	NUMBER (N)	PERCENT
Los Angeles County and Vicinity	511	38.74
San Francisco Bay Area	405	30.71
San Joaquin Valley	20	1.52
Sacramento Valley	40	3.03
San Diego County and Vicinity	136	10.31
Shasta-Cascade	4	0.30
Riverside and Vicinity	45	3.41
Sierra Mountain Valley	26	1.97
North Coast	39	2.96
South Coast and Central Coast	76	5.76
Missing	17	1.29
Total	1,319	100

*NOTE: Appendix C shows a more detailed breakdown of the frequencies by region.

CHAPTER 4 | DATA ANALYSIS AND RESULTS

RELIABILITY OF RATINGS

OPES evaluated the task ratings obtained from the questionnaire respondents with a standard index of reliability, coefficient alpha (α), which ranges from 0 to 1. Coefficient alpha is an estimate of the internal consistency of the respondents' ratings of the tasks. A higher coefficient value indicates more consistency between respondent ratings. Coefficients were calculated for all respondent ratings.

Table 20 displays the reliability coefficients for the task rating scale in each content area. The overall ratings of task frequency and task importance across content areas were highly reliable (Frequency α = .98; Importance α = .98). These results indicate that the responding acupuncturists rated the tasks consistently throughout the questionnaire.

TABLE 20 – TASK SCALE RELIABILITY

CONTENT AREA	NUMBER OF TASKS	α FREQUENCY	α IMPORTANCE
1. Patient Assessment	42	.97	.97
2. Diagnosis and Treatment Planning	24	.92	.93
3. Treatment	70	.96	.97
4. Professional Responsibilities	17	.86	.92
Overall	153		

TASK CRITICALITY INDICES

To calculate the criticality indices of the task statements, OPES test specialists used the following formula. For each respondent, OPES first multiplied the frequency rating (Fi) and the importance rating (Ii) for each task. Next, OPES averaged the multiplication products across respondents as shown below.

$$\text{Task criticality index} = \text{mean } [(Fi) \times (Ii)]$$

The tasks were grouped by content area and sorted in descending order by their criticality index. The tasks included in the questionnaire, their mean frequency and importance ratings, and their associated criticality indices are Appendix D.

OPES test specialists convened a workshop consisting of eight SMEs in April 2026. The purpose of this workshop was to identify the essential tasks and knowledge required for safe and competent acupuncturist practice. The SMEs reviewed the mean frequency and importance ratings for each task and its criticality index to determine whether to establish a cutoff value below which tasks should be eliminated. Based on their review of the relative importance of tasks to acupuncturist practice, the SMEs determined that no cutoff value should be set and that all tasks should be retained.

TASK-KNOWLEDGE LINKAGE

The SMEs who participated in the April 2026 workshop then confirmed the final linkage of tasks and knowledge statements. During the workshop, the SMEs determined that one new task should be added to content area 0101. That task was T154, "Assess tongue body and coating to inform pattern differentiation." The SMEs worked individually to verify that the knowledge statements linked to each task were critical to competent performance of that task.

CHAPTER 5 | EXAMINATION OUTLINE

CONTENT AREAS AND WEIGHTS

The SMEs who participated in the April 2026 workshop were also asked to finalize the weights of the content areas that would form the CALE outline. OPES test specialists presented the SMEs with preliminary weights that had been calculated by dividing the sum of the criticality indices for the tasks in each content area by the overall sum of the criticality indices for all tasks, as shown below.

$$\frac{\text{Sum of Criticality Indices for Tasks in Content Area}}{\text{Sum of Criticality Indices for All Tasks}} = \text{Percent Weight of Content Area}$$

The SMEs evaluated the preliminary content area weights in terms of how well they reflected the relative importance of each content area to entry-level acupuncturist practice in California. Through discussion, the SMEs determined that adjustments to the preliminary weights were necessary to more accurately reflect the relative importance of each area to acupuncturist practice. A summary of the preliminary and final content area weights for the acupuncturist examination outline is presented in Table 21.

TABLE 21 – CONTENT AREA WEIGHTS

CONTENT AREA	PERCENT PRELIMINARY WEIGHT	PERCENT FINAL WEIGHT
1. Patient Assessment	**27**	**26**
0101. Patient Assessment Using Asian Medicine Methods	23	20
0102. Patient Assessment Using Western Medicine Methods	4	6
2. Diagnosis and Treatment Planning	**16**	**20**
0201. Diagnosis	7	10
0202. Treatment Planning	4	7
0203. Communication with Other Health Care Providers	5	3

CONTENT AREA WEIGHTS, continued

	CONTENT AREA	PERCENT PRELIMINARY WEIGHT	PERCENT FINAL WEIGHT
3.	**Treatment**	**41**	**44**
	0301. Acupuncture Point Selection	20	16
	0302. Acupuncture Point and Needling Techniques	7	10
	0303. Adjunct Treatment Modalities	5	5
	0304. Herbal Therapies	9	13
4.	**Professional Responsibilities**	**15**	**10**
	0401. Records, Confidentiality, and Mandated Reporting	6	4
	0402. Infection Control and Environmental Safety	5	3
	0403. Professional Conduct and Ethics	4	3
Total		99*	100

*NOTE: Percentage does not add to 100 due to rounding.

The SMEs reviewed the content areas and wrote descriptions for each content area. They organized the tasks and knowledge statements into subareas within each content area and distributed the content area weight across the subareas. The content areas, subareas, and associated weights were then finalized and provide the basis for the CALE outline. The final examination outline is presented in Table 22.

TABLE 22 – CALIFORNIA ACUPUNCTURE LICENSING EXAMINATION OUTLINE (2026)

CONTENT AREA 1: Patient Assessment (26%)
This area assesses the practitioner's knowledge of assessing patient's chief complaint and underlying health conditions using Asian and Western medicine methods.

Tasks		Associated Knowledge Statements	
0101	Patient Assessment Using Asian Medicine Methods (20%)		
T001	Identify patient's chief complaint.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K002	Knowledge of observational techniques for obtaining information about patient health.
T002	Collect information about patient's family health history.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K003	Knowledge of effects of patient and family health history on current health status.
		K004	Knowledge of clinical indicators of Essence.
		K005	Knowledge of prenatal (pre-heaven) and hereditary constitution.
T003	Collect information about patient's health history.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K003	Knowledge of effects of patient and family health history on current health status.
		K005	Knowledge of prenatal (pre-heaven) and hereditary constitution.
T004	Collect information about past and current Asian medicine therapies and modalities.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K003	Knowledge of effects of patient and family health history on current health status.
T005	Identify supplements, herbs, and formulas that the patient is taking.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K008	Knowledge of signs and symptoms associated with use of supplements and herbs.

CONTENT AREA 1: Patient Assessment (26%), continued

This area assesses the practitioner's knowledge of assessing patient's chief complaint and underlying health conditions using Asian and Western medicine methods.

Tasks		Associated Knowledge Statements	
0101	Patient Assessment Using Asian Medicine Methods (20%), cont.		
T006	Assess emotional health to inform pattern differentiation.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K002	Knowledge of observational techniques for obtaining information about patient health.
		K004	Knowledge of clinical indicators of Essence.
		K009	Knowledge of clinical indicators of the level and quality of Blood.
		K010	Knowledge of clinical indicators of the level and quality of Qi.
		K011	Knowledge of clinical manifestations of Shen.
		K014	Knowledge of signs and symptoms of psychosocial dysfunction associated with disharmony patterns (Zang Fu, Five Elements, etc.).
		K015	Knowledge of emotions associated with disharmony patterns (Zang Fu, Five Elements, etc.).
T154	Assess tongue body and coating to inform pattern differentiation.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K002	Knowledge of observational techniques for obtaining information about patient health.
		K040	Knowledge of tongue characteristics associated with disharmony patterns (Zang Fu, Five Elements, etc.).

CONTENT AREA 1: Patient Assessment (26%), continued

This area assesses the practitioner's knowledge of assessing patient's chief complaint and underlying health conditions using Asian and Western medicine methods.

Tasks		Associated Knowledge Statements	
0101	Patient Assessment Using Asian Medicine Methods (20%), cont.		
T007	Assess level and quality of Qi to inform pattern differentiation.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K002	Knowledge of observational techniques for obtaining information about patient health.
		K004	Knowledge of clinical indicators of Essence.
		K006	Knowledge of listening and smelling techniques for obtaining information about patient health.
		K010	Knowledge of clinical indicators of the level and quality of Qi.
		K012	Knowledge of clinical manifestations of Body Fluids.
		K024	Knowledge of gastrointestinal signs and symptoms associated with disharmony patterns (Zang Fu, Five Elements, etc.).
		K025	Knowledge of genitourinary signs and symptoms associated with disharmony patterns (Zang Fu, Five Elements, etc.).
		K026	Knowledge of signs and symptoms of reproductive functioning associated with disharmony patterns (Zang Fu, Five Elements, etc.).
		K027	Knowledge of respiratory signs and symptoms associated with disharmony patterns (Zang Fu, Five Elements, etc.).
		K043	Knowledge of disease progression from superficial to deep levels of the human body.
		K044	Knowledge of gynecological signs and symptoms associated with disharmony patterns (Zang Fu, Five Elements, etc.).

CONTENT AREA 1: Patient Assessment (26%), continued

This area assesses the practitioner's knowledge of assessing patient's chief complaint and underlying health conditions using Asian and Western medicine methods.

Tasks		Associated Knowledge Statements	
0101	Patient Assessment Using Asian Medicine Methods (20%), cont.		
T008	Assess Shen to inform pattern differentiation.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K002	Knowledge of observational techniques for obtaining information about patient health.
		K004	Knowledge of clinical indicators of Essence.
		K006	Knowledge of listening and smelling techniques for obtaining information about patient health.
		K009	Knowledge of clinical indicators of the level and quality of Blood.
		K011	Knowledge of clinical manifestations of Shen.
		K012	Knowledge of clinical manifestations of Body Fluids.
		K024	Knowledge of gastrointestinal signs and symptoms associated with disharmony patterns (Zang Fu, Five Elements, etc.).
		K025	Knowledge of genitourinary signs and symptoms associated with disharmony patterns (Zang Fu, Five Elements, etc.).
		K026	Knowledge of signs and symptoms of reproductive functioning associated with disharmony patterns (Zang Fu, Five Elements, etc.).
		K027	Knowledge of respiratory signs and symptoms associated with disharmony patterns (Zang Fu, Five Elements, etc.).
		K044	Knowledge of gynecological signs and symptoms associated with disharmony patterns (Zang Fu, Five Elements, etc.).
T009	Identify lifestyle factors (e.g., activity level, occupation, social activities) influencing health.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K016	Knowledge of exogenic pathology (environment, sounds, climate, weather, etc.) that affects health.
		K017	Knowledge of effects of lifestyle factors on health.
T010	Identify sleep patterns to inform pattern differentiation.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K008	Knowledge of signs and symptoms associated with use of supplements and herbs.
		K009	Knowledge of clinical indicators of the level and quality of Blood.
		K018	Knowledge of sleep patterns indicating health imbalance.

CONTENT AREA 1: Patient Assessment (26%), continued

This area assesses the practitioner's knowledge of assessing patient's chief complaint and underlying health conditions using Asian and Western medicine methods.

Tasks		Associated Knowledge Statements	
0101	Patient Assessment Using Asian Medicine Methods (20%), cont.		
T011	Identify exogenous actors (e.g., stress, pollutants, sounds, climate, weather) influencing health.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K016	Knowledge of exogenic pathology (environment, sounds, climate, weather, etc.) that affects health.
T012	Assess physical characteristics to inform pattern differentiation.	K002	Knowledge of observational techniques for obtaining information about patient health.
		K004	Knowledge of clinical indicators of Essence.
		K006	Knowledge of listening and smelling techniques for obtaining information about patient health.
		K007	Knowledge of palpation examination methods and techniques.
		K009	Knowledge of clinical indicators of the level and quality of Blood.
		K010	Knowledge of clinical indicators of the level and quality of Qi.
		K011	Knowledge of clinical manifestations of Shen.
		K012	Knowledge of clinical manifestations of Body Fluids.
		K013	Knowledge of the associations between patient physical characteristics and disharmony patterns (Zang Fu, Five Elements, etc.).
		K034	Knowledge of conditions associated with abnormal localized temperature upon palpation.
T013	Identify dietary habits to inform pattern differentiation.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K019	Knowledge of effects of dietary habits and nutrition on health and wellness.
T014	Identify food and drink flavor preferences, cravings, aversions, and intolerances to inform pattern differentiation.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K020	Knowledge of food and drink flavor preferences, cravings, aversions, and intolerances associated with disharmony patterns (Zang Fu, Five Elements, etc.).
T015	Identify gastrointestinal signs and symptoms (characteristics of bowel movements, pain) to inform pattern differentiation.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K021	Knowledge of food and drink temperature preferences and aversions associated with disharmony patterns (Zang Fu, Five Elements, etc.).
		K024	Knowledge of gastrointestinal signs and symptoms associated with disharmony patterns (Zang Fu, Five Elements, etc.).

CONTENT AREA 1: Patient Assessment (26%), continued

This area assesses the practitioner's knowledge of assessing patient's chief complaint and underlying health conditions using Asian and Western medicine methods.

Tasks		Associated Knowledge Statements	
0101	Patient Assessment Using Asian Medicine Methods (20%), cont.		
T016	Identify genitourinary signs and symptoms to inform pattern differentiation.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K004	Knowledge of clinical indicators of Essence.
		K010	Knowledge of clinical indicators of the level and quality of Qi.
		K012	Knowledge of clinical manifestations of Body Fluids.
		K025	Knowledge of genitourinary signs and symptoms associated with disharmony patterns (Zang Fu, Five Elements, etc.).
T017	Identify gynecological signs and symptoms to inform pattern differentiation.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K003	Knowledge of effects of patient and family health history on current health status.
		K004	Knowledge of clinical indicators of Essence.
		K009	Knowledge of clinical indicators of the level and quality of Blood.
		K010	Knowledge of clinical indicators of the level and quality of Qi.
		K044	Knowledge of gynecological signs and symptoms associated with disharmony patterns (Zang Fu, Five Elements, etc.).
T018	Identify signs and symptoms of reproductive systems to inform pattern differentiation.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K004	Knowledge of clinical indicators of Essence.
		K009	Knowledge of clinical indicators of the level and quality of Blood.
		K010	Knowledge of clinical indicators of the level and quality of Qi.
		K026	Knowledge of signs and symptoms of reproductive functioning associated with disharmony patterns (Zang Fu, Five Elements, etc.).

CONTENT AREA 1: Patient Assessment (26%), continued

This area assesses the practitioner's knowledge of assessing patient's chief complaint and underlying health conditions using Asian and Western medicine methods.

Tasks		Associated Knowledge Statements	
0101	Patient Assessment Using Asian Medicine Methods (20%), cont.		
T019	Identify respiratory signs and symptoms to inform pattern differentiation.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K007	Knowledge of palpation examination methods and techniques.
		K010	Knowledge of clinical indicators of the level and quality of Qi.
		K012	Knowledge of clinical manifestations of Body Fluids.
		K027	Knowledge of respiratory signs and symptoms associated with disharmony patterns (Zang Fu, Five Elements, etc.).
		K028	Knowledge of mucus characteristics in relation to disharmony patterns (Zang Fu, Five Elements, etc.).
		K029	Knowledge of phlegm characteristics in relation to disharmony patterns (Zang Fu, Five Elements, etc.).
T020	Identify mucus characteristics to inform pattern differentiation.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K002	Knowledge of observational techniques for obtaining information about patient health.
		K012	Knowledge of clinical manifestations of Body Fluids.
		K028	Knowledge of mucus characteristics in relation to disharmony patterns (Zang Fu, Five Elements, etc.).
T021	Identify phlegm characteristics to inform pattern differentiation.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K002	Knowledge of observational techniques for obtaining information about patient health.
		K012	Knowledge of clinical manifestations of Body Fluids.
		K029	Knowledge of phlegm characteristics in relation to disharmony patterns (Zang Fu, Five Elements, etc.).

CONTENT AREA 1: Patient Assessment (26%), continued

This area assesses the practitioner's knowledge of assessing patient's chief complaint and underlying health conditions using Asian and Western medicine methods.

Tasks		Associated Knowledge Statements	
0101	Patient Assessment Using Asian Medicine Methods (20%), cont.		
T022	Identify cardiovascular signs and symptoms to inform pattern differentiation.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K009	Knowledge of clinical indicators of the level and quality of Blood.
		K010	Knowledge of clinical indicators of the level and quality of Qi.
		K030	Knowledge of cardiovascular signs and symptoms associated with disharmony patterns (Zang Fu, Five Elements, etc.).
		K041	Knowledge of pulse characteristics associated with patterns of disharmony.
		K042	Knowledge of methods for obtaining pulse information from various locations on the body.
		K043	Knowledge of disease progression from superficial to deep levels of the human body.
T023	Identify patient perspiration patterns to inform pattern differentiation.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K002	Knowledge of observational techniques for obtaining information about patient health.
		K007	Knowledge of palpation examination methods and techniques.
		K009	Knowledge of clinical indicators of the level and quality of Blood.
		K010	Knowledge of clinical indicators of the level and quality of Qi.
		K031	Knowledge of skin characteristics and conditions associated with disharmony patterns (Zang Fu, Five Elements, etc.).
		K034	Knowledge of conditions associated with abnormal localized temperature upon palpation.
T024	Identify ocular and visual signs and symptoms to inform pattern differentiation.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K009	Knowledge of clinical indicators of the level and quality of Blood.
		K036	Knowledge of ocular signs and symptoms associated with disharmony patterns (Zang Fu, Five Elements, etc.).

CONTENT AREA 1: Patient Assessment (26%), continued

This area assesses the practitioner's knowledge of assessing patient's chief complaint and underlying health conditions using Asian and Western medicine methods.

Tasks		Associated Knowledge Statements	
0101	Patient Assessment Using Asian Medicine Methods (20%), cont.		
T025	Identify auditory signs and symptoms to inform pattern differentiation.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K004	Knowledge of clinical indicators of Essence.
		K010	Knowledge of clinical indicators of the level and quality of Qi.
		K037	Knowledge of auditory signs and symptoms associated with disharmony patterns (Zang Fu, Five Elements, etc.).
		K038	Knowledge of the relationship between quality and strength of voice and patterns of disharmony.
T026	Identify preferences and aversions related to temperature of food and drinks to inform pattern differentiation.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K021	Knowledge of food and drink temperature preferences and aversions associated with disharmony patterns (Zang Fu, Five Elements, etc.).
T027	Identify skin conditions and characteristics to inform pattern differentiation.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K002	Knowledge of observational techniques for obtaining information about patient health.
		K007	Knowledge of palpation examination methods and techniques.
		K009	Knowledge of clinical indicators of the level and quality of Blood.
		K010	Knowledge of clinical indicators of the level and quality of Qi.
		K031	Knowledge of skin characteristics and conditions associated with disharmony patterns (Zang Fu, Five Elements, etc.).
		K034	Knowledge of conditions associated with abnormal localized temperature upon palpation.

CONTENT AREA 1: Patient Assessment (26%), continued

This area assesses the practitioner's knowledge of assessing patient's chief complaint and underlying health conditions using Asian and Western medicine methods.

Tasks		Associated Knowledge Statements	
0101	Patient Assessment Using Asian Medicine Methods (20%), cont.		
T028	Assess thirst and fluid intake to inform pattern differentiation.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K012	Knowledge of clinical manifestations of Body Fluids.
		K016	Knowledge of exogenic pathology (environment, sounds, climate, weather, etc.) that affect health.
		K022	Knowledge of thirst characteristics associated with patterns of disharmony.
		K023	Knowledge of relationship between fluid intake and disharmony patterns (Zang Fu, Five Elements, etc.).
		K043	Knowledge of disease progression from superficial to deep levels of the human body.
T029	Assess pain characteristics (level, nature, locations, frequency) to inform pattern differentiation.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K002	Knowledge of observational techniques for obtaining information about patient health.
		K007	Knowledge of palpation examination methods and techniques.
		K009	Knowledge of clinical indicators of the level and quality of Blood.
		K010	Knowledge of clinical indicators of the level and quality of Qi.
		K039	Knowledge of methods and procedures for assessing pain.
T030	Assess patient perception of heat and cold to inform pattern differentiation.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K010	Knowledge of clinical indicators of the level and quality of Qi.
		K032	Knowledge of fever and chills associated with disharmony patterns (Zang Fu, Five Elements, etc.).
		K033	Knowledge of patient's perception of heat and cold associated with health imbalance.
		K035	Knowledge of abnormal perspiration associated with disharmony patterns (Zang Fu, Five Elements, etc.).
		K043	Knowledge of disease progression from superficial to deep levels of the human body.

CONTENT AREA 1: Patient Assessment (26%), continued

This area assesses the practitioner's knowledge of assessing patient's chief complaint and underlying health conditions using Asian and Western medicine methods

Tasks		Associated Knowledge Statements	
0101	Patient Assessment Using Asian Medicine Methods (20%), cont.		
T031	Assess fever and chills to inform pattern differentiation.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K010	Knowledge of clinical indicators of the level and quality of Qi.
		K032	Knowledge of fever and chills associated with disharmony patterns (Zang Fu, Five Elements, etc.).
		K033	Knowledge of patient's perception of heat and cold associated with health imbalance.
		K034	Knowledge of conditions associated with abnormal localized temperature upon palpation.
		K035	Knowledge of abnormal perspiration associated with disharmony patterns (Zang Fu, Five Elements, etc.).
		K043	Knowledge of disease progression from superficial to deep levels of the human body.
T032	Assess sounds, voice quality, and vocal strength to inform pattern differentiation.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K006	Knowledge of listening and smelling techniques for obtaining information about patient health.
		K010	Knowledge of clinical indicators of the level and quality of Qi.
		K011	Knowledge of clinical manifestations of Shen.
		K038	Knowledge of the relationship between quality and strength of voice and patterns of disharmony.
T033	Assess patient odors to inform pattern differentiation.	K001	Knowledge of interview techniques for obtaining information about patient health.
		K006	Knowledge of listening and smelling techniques for obtaining information about patient health.
		K013	Knowledge of the associations between patient physical characteristics and disharmony patterns (Zang Fu, Five Elements, etc.).

CONTENT AREA 1: Patient Assessment (26%), continued

This area assesses the practitioner's knowledge of assessing patient's chief complaint and underlying health conditions using Asian and Western medicine methods

Tasks		Associated Knowledge Statements	
0101	Patient Assessment Using Asian Medicine Methods (20%), cont.		
T035	Assess pulse to inform pattern differentiation.	K009	Knowledge of clinical indicators of the level and quality of Blood.
		K004	Knowledge of clinical indicators of Essence.
		K010	Knowledge of clinical indicators of the level and quality of Qi.
		K033	Knowledge of patient's perception of heat and cold associated with health imbalance.
		K041	Knowledge of pulse characteristics associated with patterns of disharmony.
		K042	Knowledge of methods for obtaining pulse information from various locations on the body.
		K043	Knowledge of disease progression from superficial to deep levels of the human body.
T036	Palpate areas of body or channels to inform pattern differentiation.	K045	Knowledge of physical examination methods and techniques (e.g., observation, auscultation, palpation, vital signs).

CONTENT AREA 1: Patient Assessment (26%), continued

This area assesses the practitioner's knowledge of assessing patient's chief complaint and underlying health conditions using Asian and Western medicine methods.

Tasks		Associated Knowledge Statements	
0102	Patient Assessment Using Western Medicine Methods (6%)		
T034	Review diagnostic reports (e.g., bloodwork, MRI, X-ray) or clinical notes from Western medical professionals to gather additional information regarding patient's chief complaint.	K046	Knowledge of human anatomy, physiology, and pathology.
		K053	Knowledge of genetics and hereditary conditions.
		K054	Knowledge of clinical significance of common diagnostic and laboratory tests used for diagnostic and treatment purposes.
		K055	Knowledge of common Western diagnoses, terminology, and definitions.
		K056	Knowledge of the classification, clinical indications, contraindications, and side effects of commonly prescribed Western medications.
		K057	Knowledge of interactions between commonly used supplements, herbs, foods, Western medications, and recreational substances.
		K059	Knowledge of the relationship between Western diagnoses and Asian Medicine patterns.
T037	Identify signs and symptoms that require emergency management.	K046	Knowledge of human anatomy, physiology, and pathology.
		K047	Knowledge of procedures for obtaining vital signs.
		K048	Knowledge of normal range of vital signs.
		K049	Knowledge of methods and procedures for assessing neuromusculoskeletal function and integrity.
		K050	Knowledge of pathways and functions of cranial nerves for determination of neurological pathology.
		K052	Knowledge of neuromusculoskeletal conditions.
		K055	Knowledge of common Western diagnoses, terminology, and definitions.
		K060	Knowledge of methods for administering cardiopulmonary resuscitation.
		K061	Knowledge of methods for providing first aid treatment.
		K062	Knowledge of signs and symptoms that indicate the need for emergency medical interventions.
		K063	Knowledge of signs and symptoms that indicate the need to abstain from Asian Medicine interventions.

CONTENT AREA 1: Patient Assessment (26%), continued

This area assesses the practitioner's knowledge of assessing patient's chief complaint and underlying health conditions using Asian and Western medicine methods.

Tasks		Associated Knowledge Statements	
0102	Patient Assessment Using Western Medicine Methods (6%), cont.		
T038	Assess signs and symptoms associated with the use of medications, supplements, or recreational substances.	K055	Knowledge of common Western diagnoses, terminology, and definitions.
		K056	Knowledge of the classification, clinical indications, contraindications, and side effects of commonly prescribed Western medications.
		K058	Knowledge of actions and side effects of commonly used supplements.
		K064	Knowledge of actions and side effects of commonly used recreational substances.
T039	Perform neurological examination (e.g., sensation, strength) to determine health condition.	K046	Knowledge of human anatomy, physiology, and pathology.
		K049	Knowledge of methods and procedures for assessing neuromusculoskeletal function and integrity.
		K050	Knowledge of pathways and functions of cranial nerves for determination of neurological pathology.
		K051	Knowledge of dermatome technique for assessment of neuromuscular pathology.
		K053	Knowledge of genetics and hereditary conditions.
		K055	Knowledge of common Western diagnoses, terminology, and definitions.
		K059	Knowledge of the relationship between Western diagnoses and Asian Medicine patterns.
T040	Perform orthopedic examination to determine health condition.	K046	Knowledge of human anatomy, physiology, and pathology.
		K049	Knowledge of methods and procedures for assessing neuromusculoskeletal function and integrity.
		K052	Knowledge of neuromusculoskeletal conditions.
		K055	Knowledge of common Western diagnoses, terminology, and definitions.
		K059	Knowledge of the relationship between Western diagnoses and Asian Medicine patterns.
T041	Perform physical examination (observation, auscultation, olfaction, palpation, vital signs) to determine health condition.	K045	Knowledge of physical examination methods and techniques (e.g., observation, auscultation, palpation, vital signs).
		K046	Knowledge of human anatomy, physiology, and pathology.
		K047	Knowledge of procedures for obtaining vital signs.
		K048	Knowledge of normal range of vital signs.
		K055	Knowledge of common Western diagnoses, terminology, and definitions.
		K059	Knowledge of the relationship between Western diagnoses and Asian Medicine patterns.

CONTENT AREA 1: Patient Assessment (26%), continued

This area assesses the practitioner's knowledge of assessing patient's chief complaint and underlying health conditions using Asian and Western medicine methods.

Tasks		Associated Knowledge Statements	
0102	Patient Assessment Using Western Medicine Methods (6%), cont.		
T042	Order diagnostic tests to determine patient's health condition.	K046	Knowledge of human anatomy, physiology, and pathology.
		K053	Knowledge of genetics and hereditary conditions.
		K054	Knowledge of clinical significance of common diagnostic and laboratory tests used for diagnostic and treatment purposes.
		K055	Knowledge of common Western diagnoses, terminology, and definitions.
		K059	Knowledge of the relationship between Western diagnoses and Asian Medicine patterns.
		K065	Knowledge of available diagnostic and laboratory tests.

CONTENT AREA 2: Diagnosis and Treatment Planning (20%)

This area assesses the practitioner's proficiency in evaluating assessment findings to develop a diagnosis and treatment plan according to Asian Medicine theories. It also evaluates the practitioner's proficiency in monitoring and evaluating patient response to treatment at follow-up visits and modifying treatment plans based on evaluation results.

Tasks		Associated Knowledge Statements	
0201	Diagnosis (10%)		
T043	Evaluate patient information to determine whether additional details are needed.	K066	Knowledge of methods for integrating assessment information to develop a differential diagnosis.
		K067	Knowledge of methods for integrating tongue and pulse characteristics to identify disharmony patterns.
		K070	Knowledge of clinical indicators associated with disease of the channels.
T044	Interpret and integrate assessment findings (pulse, tongue, history, channel, diagnostic test results) to inform pattern differentiation.	K066	Knowledge of methods for integrating assessment information to develop a differential diagnosis.
		K067	Knowledge of methods for integrating tongue and pulse characteristics to identify disharmony patterns.
		K068	Knowledge of the relationship between the Organs and channels in disease progression and transformation.
		K069	Knowledge of the relationship between the Zang Fu and vital substances.
		K070	Knowledge of clinical indicators associated with disease of the channels.
		K071	Knowledge of the functions, distribution, and clinical significance of the channels.
T045	Determine phase of pathogen progression.	K073	Knowledge of methods for prioritizing indicators of disharmony to develop a differential diagnosis.
T046	Determine affected channels.	K068	Knowledge of the relationship between the Organs and channels in disease progression and transformation.
		K070	Knowledge of clinical indicators associated with disease of the channels.
		K071	Knowledge of the functions, distribution, and clinical significance of the channels.
T047	Determine Root and Branch condition.	K071	Knowledge of the functions, distribution, and clinical significance of the channels.
		K072	Knowledge of principles for treating Root versus Branch disharmony patterns.
T048	Determine Five Elements disharmony patterns.	K067	Knowledge of methods for integrating tongue and pulse characteristics to identify disharmony patterns.
		K074	Knowledge of the interrelationships of the Five Elements.
		K076	Knowledge of the Five Elements theory and pattern differentiation methods.

CONTENT AREA 2: Diagnosis and Treatment Planning (20%), continued

This area assesses the practitioner's proficiency in evaluating assessment findings to develop a diagnosis and treatment plan according to Asian Medicine theories. It also evaluates the practitioner's proficiency in monitoring and evaluating patient response to treatment at follow-up visits and modifying treatment plans based on evaluation results.

Tasks		Associated Knowledge Statements	
0201	Diagnosis (10%), cont.		
T049	Determine Zang Fu disharmony patterns.	K067	Knowledge of methods for integrating tongue and pulse characteristics to identify disharmony patterns.
		K069	Knowledge of the relationship between the Zang Fu and vital substances.
		K075	Knowledge of the functions of and the relationship between the Zang Fu and the channels.
		K081	Knowledge of the clinical indications associated with Zang Fu disharmonies.
		K082	Knowledge of methods for identifying simultaneous Zang Fu disharmonies.
T050	Determine Eight Principles categorization.	K077	Knowledge of the Eight Principles theory and pattern differentiation methods.
T051	Determine disharmony pattern using Six Stages (Shang Han Lun) of differentiation.	K079	Knowledge of the Six Stages (Shang Han Lun) theory and pattern differentiation methods.
		K068	Knowledge of the relationship between the Organs and channels in disease progression and transformation.
T052	Determine disharmony pattern using Four Levels (Wei, Qi, Ying, Xue) of differentiation.	K080	Knowledge of the Four Levels theory and pattern differentiation methods.
		K068	Knowledge of the relationship between the Organs and channels in disease progression and transformation.
T053	Determine disharmony pattern using Triple Burner (San Jiao) differentiation.	K078	Knowledge of the Triple Burner theory and pattern differentiation methods.
T054	Develop a differential diagnosis for identified disharmony patterns.	K066	Knowledge of methods for integrating assessment information to develop a differential diagnosis.
		K067	Knowledge of methods for integrating tongue and pulse characteristics to identify disharmony patterns.
		K073	Knowledge of methods for prioritizing indicators of disharmony to develop a differential diagnosis.
		K084	Knowledge of treatment principles based on different theories of pattern differentiation (Zang Fu, Five Elements, etc.).

CONTENT AREA 2: Diagnosis and Treatment Planning (20%), continued

This area assesses the practitioner's proficiency in evaluating assessment findings to develop a diagnosis and treatment plan according to Asian Medicine theories. It also evaluates the practitioner's proficiency in monitoring and evaluating patient response to treatment at follow-up visits and modifying treatment plans based on evaluation results.

Tasks		Associated Knowledge Statements	
0202	Treatment Planning (7%)		
T055	Determine treatment principles (tonify, sedate, harmonize) to be applied during treatment planning.	K084	Knowledge of treatment principles based on different theories of pattern differentiation (Zang Fu, Five Elements, etc.).
		K085	Knowledge methods for combining treatment strategies.
		K086	Knowledge of treatment strategies for using tonification, sedation, harmonizing points.
T056	Develop treatment plans by applying treatment principle (tonify, sedate, harmonize).	K086	Knowledge of treatment strategies for using tonification, sedation, harmonizing points.
		K087	Knowledge of the association between stimulation techniques and treatment principles.
T057	Identify a measurable metric for assessing treatment efficacy (e.g., outcome measures, questionnaires).	K084	Knowledge of treatment principles based on different theories of pattern differentiation (Zang Fu, Five Elements, etc.).
		K085	Knowledge methods for combining treatment strategies.
		K086	Knowledge of treatment strategies for using tonification, sedation, harmonizing points.
		K087	Knowledge of the association between stimulation techniques and treatment principles.
		K088	Knowledge of methods for evaluating patient progress.
T058	Evaluate patient progress during follow-up visits to determine the need to modify treatment plan.	K088	Knowledge of methods for evaluating patient progress.
		K089	Knowledge of clinical conditions that require referral to other health care providers.
T059	Modify treatment plans based on patient response to treatment.	K084	Knowledge of treatment principles based on different theories of pattern differentiation (Zang Fu, Five Elements, etc.).
		K086	Knowledge of treatment strategies for using tonification, sedation, harmonizing points.
		K087	Knowledge of the association between stimulation techniques and treatment principles.
		K088	Knowledge of methods for evaluating patient progress.
		K089	Knowledge of clinical conditions that require referral to other health care providers.

CONTENT AREA 2: Diagnosis and Treatment Planning (20%), continued

This area assesses the practitioner's proficiency in evaluating assessment findings to develop a diagnosis and treatment plan according to Asian Medicine theories. It also evaluates the practitioner's proficiency in monitoring and evaluating patient response to treatment at follow-up visits and modifying treatment plans based on evaluation results.

Tasks		Associated Knowledge Statements	
0203	Communication with Other Health Care Providers (3%)		
T060	Communicate assessment findings and diagnosis to patients.	K090	Knowledge of Western diagnoses and physiological processes involved with disease progression.
		K091	Knowledge of techniques for communicating assessment findings, diagnoses, and treatment plans to patients.
T061	Discuss treatment plan and possible outcomes with patients.	K090	Knowledge of Western diagnoses and physiological processes involved with disease progression.
		K091	Knowledge of techniques for communicating assessment findings, diagnoses, and treatment plans to patients.
T062	Discuss treatment procedures with patients.	K092	Knowledge of the clinical actions, indications of points, and other treatment modalities.
		K093	Knowledge of techniques for communicating with patients during treatment.
T063	Explain Asian Medicine diagnostic concepts using common Western terminology to patients and health care providers.	K090	Knowledge of Western diagnoses and physiological processes involved with disease progression.
		K091	Knowledge of techniques for communicating assessment findings, diagnoses, and treatment plans to patients.
		K094	Knowledge of techniques for communicating assessment findings, diagnoses, and treatment plans to other health care providers.
		K092	Knowledge of the clinical actions, indications of points, and other treatment modalities.
		K093	Knowledge of techniques for communicating with patients during treatment.
T064	Educate patients regarding differences and similarities between Asian Medicine and Western medicine.	K090	Knowledge of Western diagnoses and physiological processes involved with disease progression.
		K091	Knowledge of techniques for communicating assessment findings, diagnoses, and treatment plans to patients.
		K092	Knowledge of the clinical actions, indications of points, and other treatment modalities.
		K093	Knowledge of techniques for communicating with patients during treatment.

CONTENT AREA 2: Diagnosis and Treatment Planning (20%), continued

This area assesses the practitioner's proficiency in evaluating assessment findings to develop a diagnosis and treatment plan according to Asian Medicine theories. It also evaluates the practitioner's proficiency in monitoring and evaluating patient response to treatment at follow-up visits and modifying treatment plans based on evaluation results.

Tasks		Associated Knowledge Statements	
0203	Communication with Other Health Care Providers (3%), cont.		
T065	Collaborate with other health care providers (e.g., physicians, specialists, physical therapists) to identify the most effective treatment for patients.	K090	Knowledge of Western diagnoses and physiological processes involved with disease progression.
		K094	Knowledge of techniques for communicating assessment findings, diagnoses, and treatment plans to other health care providers.
T066	Refer patient to other health care providers based on assessment findings.	K090	Knowledge of Western diagnoses and physiological processes involved with disease progression.
		K091	Knowledge of techniques for communicating assessment findings, diagnoses, and treatment plans to patients.
		K094	Knowledge of techniques for communicating assessment findings, diagnoses, and treatment plans to other health care providers.
		K095	Knowledge of assessment findings that indicate the need for emergency referral.

CONTENT AREA 3: Treatment (44%)

This area assesses the practitioner's proficiency in using acupuncture, herbal therapy, and adjunct modalities to treat the patient's health imbalance.

Tasks		Associated Knowledge Statements	
0301	Acupuncture Point Selection (16%)		
T067	Prioritize treatment principles and management of presenting problems.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K097	Knowledge of principles for selecting sedation and tonification points.
		K136	Knowledge of signs and symptoms of patient distress during point selection.
T068	Develop a point prescription based on treatment principles.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K097	Knowledge of principles for selecting sedation and tonification points.
		K059	Knowledge of the relationship between Western diagnoses and Asian Medicine patterns.
		K106	Knowledge of principles for combining points from different channels.
		K107	Knowledge of principles for choosing points according to channel theory.
		K108	Knowledge of treatment modification based on patient response to treatment.
		K109	Knowledge of clinical significance of the sequence in which needles are inserted.
T069	Identify contraindicated points by evaluating patient condition.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K097	Knowledge of principles for selecting sedation and tonification points.
		K106	Knowledge of principles for combining points from different channels.
		K107	Knowledge of principles for choosing points according to channel theory.
T070	Select distal or proximal points.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K104	Knowledge of principles for combining distal and proximal points.
		K105	Knowledge of principles for choosing local points.
T071	Select local points along the affected Meridian.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K105	Knowledge of principles for choosing local points.
		K107	Knowledge of principles for choosing points according to channel theory.

CONTENT AREA 3: Treatment (44%), continued

This area assesses the practitioner's proficiency in using acupuncture, herbal therapy, and adjunct modalities to treat the patient's health imbalance.

Tasks		Associated Knowledge Statements	
0301	Acupuncture Point Selection (16%), cont.		
T072	Select points to treat Root and Branch.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K097	Knowledge of principles for selecting sedation and tonification points.
		K109	Knowledge of clinical significance of the sequence in which needles are inserted.
T073	Select points using mirroring methods (e.g., elbow-for-knee, hip-for-shoulder, ankle-for-wrist).	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K110	Knowledge of therapeutic effects of needling points on the opposite side of the body from the location of the condition.
		K111	Knowledge of the principles for balancing the points on the upper part of the body with those of the lower part.
T074	Select points to balance point distribution (e.g., right and left, above and below).	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K110	Knowledge of therapeutic effects of needling points on the opposite side of the body from the location of the condition.
		K111	Knowledge of the principles for balancing the points on the upper part of the body with those of the lower part.
T075	Select points from Yin and Yang channels to balance treatment prescription.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K097	Knowledge of principles for selecting sedation and tonification points.
		K106	Knowledge of principles for combining points from different channels.
		K107	Knowledge of principles for choosing points according to channel theory.
		K109	Knowledge of clinical significance of the sequence in which needles are inserted.
		K111	Knowledge of the principles for balancing the points on the upper part of the body with those of the lower part.
		K118	Knowledge of principles for combining Front-Mu points and Back-Shu points.

CONTENT AREA 3: Treatment (44%), continued

This area assesses the practitioner's proficiency in using acupuncture, herbal therapy, and adjunct modalities to treat the patient's health imbalance.

Tasks		Associated Knowledge Statements	
0301	Acupuncture Point Selection (16%), cont.		
T076	Select points on extremities to treat conditions occurring in the center.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K104	Knowledge of principles for combining distal and proximal points.
		K113	Knowledge of principles for choosing points on the extremities to treat conditions occurring in the center.
T077	Select points that are centrally located to treat conditions occurring in the extremities.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K104	Knowledge of principles for combining distal and proximal points.
		K112	Knowledge of principles for choosing points in the center to treat conditions occurring on extremities.
		K123	Knowledge of principles for choosing Intersecting or Crossing points of channels.
T078	Select Ashi points.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K105	Knowledge of principles for choosing local points.
		K114	Knowledge of the therapeutic use of Ashi points.
T079	Select Front-Mu and Back-Shu points.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K116	Knowledge of principles for choosing Front-Mu points in treatment.
		K117	Knowledge of principles for choosing Back-Shu points in treatment.
		K118	Knowledge of principles for combining Front-Mu points and Back-Shu points.
T080	Select points along the Muscle channels.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K115	Knowledge of the therapeutic use of points along the Muscle channels.
T081	Select lower He-Sea points.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K119	Knowledge of principles for choosing lower He-Sea points.
T082	Select Five Shu (Five Transporting) points.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K120	Knowledge of principles for choosing Five Shu (Five-Transporting) points.

CONTENT AREA 3: Treatment (44%), continued

This area assesses the practitioner's proficiency in using acupuncture, herbal therapy, and adjunct modalities to treat the patient's health imbalance.

Tasks		Associated Knowledge Statements	
0301	Acupuncture Point Selection (16%), cont.		
T083	Select Confluent points of the Eight Extraordinary channels.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K106	Knowledge of principles for combining points from different channels.
		K121	Knowledge of principles for choosing Confluent points of the Eight Extraordinary channels.
T084	Select Extra points.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K122	Knowledge of principles for choosing Extra points.
T085	Select Intersecting or Crossing points.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K123	Knowledge of principles for choosing Intersecting or Crossing points of channels.
T086	Select Luo-Connecting points.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K124	Knowledge of principles for choosing Luo-Connecting points.
T087	Select Yuan-Source points.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K125	Knowledge of principles for choosing Yuan-Source points.
T088	Select Xi-Cleft points to treat acute conditions.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K126	Knowledge of principles for choosing Xi-Cleft points.
T089	Select Eight Influential points.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K128	Knowledge of principles for choosing Eight Influential points.

CONTENT AREA 3: Treatment (44%), continued

This area assesses the practitioner's proficiency in using acupuncture, herbal therapy, and adjunct modalities to treat the patient's health imbalance.

Tasks		Associated Knowledge Statements	
0301	Acupuncture Point Selection (16%), cont.		
T090	Select points to treat muscle or joint mechanism dysfunction.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K105	Knowledge of principles for choosing local points.
		K115	Knowledge of the therapeutic use of points along the Muscle channels.
		K126	Knowledge of principles for choosing Xi-Cleft points.
		K134	Knowledge of principles and indications for selecting motor points.
		K135	Knowledge of principles and indications for selecting trigger points.
T091	Select points based on dermatome map.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K132	Knowledge of dermatome map for point selection.
T092	Select scalp points or areas.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K104	Knowledge of principles for combining distal and proximal points.
		K105	Knowledge of principles for choosing local points.
		K130	Knowledge of principles for choosing scalp points.
T093	Select auricular points.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K104	Knowledge of principles for combining distal and proximal points.
		K131	Knowledge of principles for choosing auricular points.
T094	Select points according to the Five Elements theory.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K133	Knowledge of point selection using the Five Elements theory.

CONTENT AREA 3: Treatment (44%), continued

This area assesses the practitioner's proficiency in using acupuncture, herbal therapy, and adjunct modalities to treat the patient's health imbalance.

Tasks		Associated Knowledge Statements	
0301	Acupuncture Point Selection (16%), cont.		
T095	Select Command points.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K141	Knowledge of principles for choosing Command points.
T096	Select Empirical points.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K137	Knowledge of principles for choosing Empirical points.
T097	Select motor points.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K049	Knowledge of methods and procedures for assessing neuromusculoskeletal function and integrity.
		K105	Knowledge of principles for choosing local points.
		K134	Knowledge of principles and indications for selecting motor points.
T098	Select Four Seas points.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K127	Knowledge of principles for choosing Four Seas points.
T099	Select trigger points.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K135	Knowledge of principles and indications for selecting trigger points.
T100	Select Entry Exit points.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K138	Knowledge of principles for choosing Entry Exit points.
T101	Select Ghost points.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K139	Knowledge of principles for choosing Ghost points.
T102	Select Window of the Sky points.	K096	Knowledge of the interrelationships between points, channels, and internal Organs.
		K140	Knowledge of principles for choosing Window of the Sky points.

CONTENT AREA 3: Treatment (44%), continued

This area assesses the practitioner's proficiency in using acupuncture, herbal therapy, and adjunct modalities to treat the patient's health imbalance.

Tasks		Associated Knowledge Statements	
0302	Acupuncture Point and Needling Techniques (10%)		
T103	Identify cautions and contraindications for needling by evaluating patient condition.	K142	Knowledge of signs and symptoms of emergency conditions.
		K144	Knowledge of anatomical landmarks and proportional measurements (Cun) used in point location.
		K150	Knowledge of points and patient conditions that are contraindicated for needling.
		K151	Knowledge of points and patient conditions that require needling with caution.
		K152	Knowledge of potential side effects of acupuncture treatment.
		K153	Knowledge of signs of patient distress during treatment.
T104	Identify points that require needling with caution due to anatomical considerations (e.g., over arteries, over internal organs).	K144	Knowledge of anatomical landmarks and proportional measurements (Cun) used in point location.
		K149	Knowledge of recommended needling depths and angles.
		K151	Knowledge of points and patient conditions that require needling with caution.
T105	Select needle length and gauge according to treatment area, patient characteristics, and patient diagnosis.	K143	Knowledge of the therapeutic use of tonification and sedation techniques.
		K144	Knowledge of anatomical landmarks and proportional measurements (Cun) used in point location.
		K145	Knowledge of needle manipulation techniques.
		K148	Knowledge of patient positions for locating and needling acupuncture points.
		K149	Knowledge of recommended needling depths and angles.
		K151	Knowledge of points and patient conditions that require needling with caution.
		K154	Knowledge of principles for selecting needles.
T106	Determine needle retention time.	K146	Knowledge of needle retention methods for patterns of disharmony.
		K147	Knowledge of the impact of patient constitution and condition on duration of needle retention.
		K152	Knowledge of potential side effects of acupuncture treatment.

CONTENT AREA 3: Treatment (44%), continued

This area assesses the practitioner's proficiency in using acupuncture, herbal therapy, and adjunct modalities to treat the patient's health imbalance.

Tasks		Associated Knowledge Statements	
0302	Acupuncture Point and Needling Techniques (10%), cont.		
T107	Determine patient position for needle insertion.	K148	Knowledge of patient positions for locating and needling acupuncture points.
		K151	Knowledge of points and patient conditions that require needling with caution.
		K153	Knowledge of signs of patient distress during treatment.
T108	Locate points for needle insertion by using anatomical landmarks and proportional measurements (cun).	K144	Knowledge of anatomical landmarks and proportional measurements (Cun) used in point location.
		K148	Knowledge of patient positions for locating and needling acupuncture points.
T109	Insert needle within standard depth range to stimulate point.	K143	Knowledge of the therapeutic use of tonification and sedation techniques.
		K144	Knowledge of anatomical landmarks and proportional measurements (Cun) used in point location.
		K149	Knowledge of recommended needling depths and angles.
		K153	Knowledge of signs of patient distress during treatment.
T110	Insert needle using recommended insertion angle.	K143	Knowledge of the therapeutic use of tonification and sedation techniques.
		K144	Knowledge of anatomical landmarks and proportional measurements (Cun) used in point location.
		K149	Knowledge of recommended needling depths and angles.
		K153	Knowledge of signs of patient distress during treatment.
T111	Manipulate needle to elicit therapeutic effects.	K143	Knowledge of the therapeutic use of tonification and sedation techniques.
		K145	Knowledge of needle manipulation techniques.
		K152	Knowledge of potential side effects of acupuncture treatment.
		K153	Knowledge of signs of patient distress during treatment.

CONTENT AREA 3: Treatment (44%), continued

This area assesses the practitioner's proficiency in using acupuncture, herbal therapy, and adjunct modalities to treat the patient's health imbalance.

Tasks		Associated Knowledge Statements	
0303	Adjunct Treatment Modalities (5%)		
T112	Monitor patients before, during, and after adjunct treatment for adverse reactions and comfort level.	K156 K158 K160 K162 K164 K166 K168 K172	Knowledge of indications, contraindications, and side effects of moxibustion. Knowledge of indications, contraindications, and side effects of electrotherapy. Knowledge of indications, contraindications, and side effects of cupping. Knowledge of indications, contraindications, and side effects of Gua Sha. Knowledge of indications, contraindications, and side effects of manual therapy. Knowledge of indications, contraindications, and side effects of heat therapy. Knowledge of indications, contraindications, and side effects of the application of ear seeds and ear tacks. Knowledge of signs of patient distress during adjunct treatment.
T113	Apply moxibustion techniques.	K155 K156 K166	Knowledge of moxibustion (i.e., direct and indirect) techniques. Knowledge of indications, contraindications, and side effects of moxibustion. Knowledge of indications, contraindications, and side effects of heat therapy.
T114	Perform electrotherapy (e.g., electroacupuncture, electrostimulation, TENS).	K157 K158	Knowledge of electrotherapy techniques. Knowledge of indications, contraindications, and side effects of electrotherapy.
T115	Apply ear seeds or ear tacks.	K167 K168	Knowledge of the application of ear seeds and ear tacks. Knowledge of indications, contraindications, and side effects of the application of ear seeds and ear tacks.
T116	Educate patients regarding therapeutic exercises.	K170	Knowledge of therapeutic exercises to support patient treatment goals.
T117	Perform cupping techniques.	K159 K160	Knowledge of cupping techniques. Knowledge of indications, contraindications, and side effects of cupping.
T118	Perform Gua Sha techniques.	K161 K162	Knowledge of Gua Sha techniques. Knowledge of indications, contraindications, and side effects of Gua Sha.
T119	Perform manual therapy (e.g., Tui Na, acupressure).	K163 K164	Knowledge of manual therapy techniques (Tui Na, acupressure). Knowledge of indications, contraindications, and side effects of manual therapy.
T124	Perform heat therapy (e.g., infrared light, heat pad).	K165 K166	Knowledge of heat therapy techniques. Knowledge of indications, contraindications, and side effects of heat therapy.

CONTENT AREA 3: Treatment (44%), continued

This area assesses the practitioner's proficiency in using acupuncture, herbal therapy, and adjunct modalities to treat the patient's health imbalance.

Tasks		Associated Knowledge Statements	
0303	Adjunct Treatment Modalities (5%), cont.		
T127	Educate patients regarding diet and nutrition.	K171	Knowledge of dietary modifications to support patient treatment goals.
T128	Educate patients regarding lifestyle recommendations.	K169	Knowledge of lifestyle changes and stress reduction techniques that improve health condition.

CONTENT AREA 3: Treatment (44%), continued

This area assesses the practitioner's proficiency in using acupuncture, herbal therapy, and adjunct modalities to treat the patient's health imbalance.

Tasks		Associated Knowledge Statements	
0304	Herbal Therapy (13%)		
T120	Identify conditions that contraindicate herbal therapy.	K173	Knowledge of cautions, contraindications, and side effects of herbs and herbal formulas.
		K191	Knowledge of herbal formula recommendations based upon patient constitution.
T121	Determine type of herbal therapy indicated for the patient (e.g., powder, granular, raw herb, decoction, patent, topical).	K184	Knowledge of the principles and guidelines for herbal formula preparation.
		K189	Knowledge of forms (raw, granules, decoction, topical, etc.) used for administering herbs.
T122	Select or develop herbal formulas based on treatment principle (tonify, sedate, harmonize).	K173	Knowledge of cautions, contraindications, and side effects of herbs and herbal formulas.
		K174	Knowledge of categories of herbs and herbal formulas.
		K175	Knowledge of the interrelationships between points, channels, internal Organs, and herbs.
		K176	Knowledge of modifications of herbal formulas.
		K177	Knowledge of the synergistic and antagonist relationships of ingredients in herbal formulas.
		K178	Knowledge of the hierarchical principles governing herbal formulas.
		K181	Knowledge of therapeutic uses, indications, and primary functions of herbs and herbal formulas.
		K185	Knowledge of the relationships between herbal formulas and treatment principles.
		K189	Knowledge of forms (raw, granules, decoction, topical, etc.) used for administering herbs.

CONTENT AREA 3: Treatment (44%), continued

This area assesses the practitioner's proficiency in using acupuncture, herbal therapy, and adjunct modalities to treat the patient's health imbalance.

Tasks		Associated Knowledge Statements	
0304	Herbal Therapy (13%), cont.		
T123	Select or develop herbal therapies (external or internal) that complement acupuncture treatments.	K173	Knowledge of cautions, contraindications, and side effects of herbs and herbal formulas.
		K174	Knowledge of categories of herbs and herbal formulas.
		K175	Knowledge of the interrelationships between points, channels, internal Organs, and herbs.
		K178	Knowledge of the hierarchical principles governing herbal formulas.
		K179	Knowledge of the association between therapeutic effects of points and herbal therapy.
		K181	Knowledge of therapeutic uses, indications, and primary functions of herbs and herbal formulas.
		K189	Knowledge of forms (raw, granules, decoction, topical, etc.) used for administering herbs.
T125	Determine dosage of herbal therapy.	K173	Knowledge of cautions, contraindications, and side effects of herbs and herbal formulas.
		K175	Knowledge of the interrelationships between points, channels, internal Organs, and herbs.
		K176	Knowledge of modifications of herbal formulas.
		K181	Knowledge of therapeutic uses, indications, and primary functions of herbs and herbal formulas.
		K183	Knowledge of dosages of herbs and herbal supplements.
		K187	Knowledge of methods for modifying herbal formulas to treat changes in patient condition.
T126	Determine authenticity and purity of herbs and herbal formulas.	K173	Knowledge of cautions, contraindications, and side effects of herbs and herbal formulas.
		K189	Knowledge of forms (raw, granules, decoction, topical, etc.) used for administering herbs.
		K190	Knowledge of methods for determining reputability of suppliers of herbs (e.g., tracing supply chains).
T129	Identify contraindications for herbs when combined with Western medications and supplements to avoid adverse interactions.	K173	Knowledge of cautions, contraindications, and side effects of herbs and herbal formulas.
		K180	Knowledge of interactions between herbal therapies, supplements, and Western medications.
		K183	Knowledge of dosages of herbs and herbal supplements.

CONTENT AREA 3: Treatment (44%), continued

This area assesses the practitioner's proficiency in using acupuncture, herbal therapy, and adjunct modalities to treat the patient's health imbalance.

Tasks		Associated Knowledge Statements	
0304	Herbal Therapy (13%), cont.		
T130	Label packaging containing herbal prescriptions following legal guidelines.	K193	Knowledge of requirements for labeling of containers used for storing or dispensing of herbal preparations.
T131	Prepare herbs following safety guidelines.	K173	Knowledge of cautions, contraindications, and side effects of herbs and herbal formulas.
		K183	Knowledge of dosages of herbs and herbal supplements.
		K184	Knowledge of the principles and guidelines for herbal formula preparation.
		K185	Knowledge of the relationships between herbal formulas and treatment principles.
		K187	Knowledge of methods for modifying herbal formulas to treat changes in patient condition.
		K193	Knowledge of requirements for labeling of containers used for storing or dispensing of herbal preparations.
T132	Provide information about herbal therapy prescriptions to patients.	K173	Knowledge of cautions, contraindications, and side effects of herbs and herbal formulas.
		K175	Knowledge of the interrelationships between points, channels, internal Organs, and herbs.
		K181	Knowledge of therapeutic uses, indications, and primary functions of herbs and herbal formulas.
		K182	Knowledge of interactions between diet and herbal therapies.
		K183	Knowledge of dosages of herbs and herbal supplements.
		K184	Knowledge of the principles and guidelines for herbal formula preparation.
		K185	Knowledge of the relationships between herbal formulas and treatment principles.
		K193	Knowledge of requirements for labeling containers used for storing or dispensing of herbal preparations.

CONTENT AREA 3: Treatment (44%), continued

This area assesses the practitioner's proficiency in using acupuncture, herbal therapy, and adjunct modalities to treat the patient's health imbalance.

Tasks		Associated Knowledge Statements	
0304	Herbal Therapy (13%), cont.		
T133	Instruct patients on use of herbs (dosage, cooking, application) to produce intended therapeutic effect.	K173	Knowledge of cautions, contraindications, and side effects of herbs and herbal formulas.
		K183	Knowledge of dosages of herbs and herbal supplements.
		K184	Knowledge of the principles and guidelines for herbal formula preparation.
		K185	Knowledge of the relationships between herbal formulas and treatment principles.
		K187	Knowledge of methods for modifying herbal formulas to treat changes in patient condition.
		K193	Knowledge of requirements for labeling containers used for storing or dispensing of herbal preparations.
T134	Monitor and evaluate patient response to herbal therapy.	K173	Knowledge of cautions, contraindications, and side effects of herbs and herbal formulas.
		K175	Knowledge of the interrelationships between points, channels, internal Organs, and herbs.
		K185	Knowledge of the relationships between herbal formulas and treatment principles.
		K186	Knowledge of herbs and combinations of herbs that are toxic or produce undesired side effects.
		K191	Knowledge of herbal formula recommendations based upon patient constitution.
T135	Monitor and evaluate patient response to herbs when combined with Western medications.	K173	Knowledge of cautions, contraindications, and side effects of herbs and herbal formulas.
		K180	Knowledge of interactions between herbal therapies, supplements, and Western medications.
		K181	Knowledge of therapeutic uses, indications, and primary functions of herbs and herbal formulas.

CONTENT AREA 3: Treatment (44%), continued

This area assesses the practitioner's proficiency in using acupuncture, herbal therapy, and adjunct modalities to treat the patient's health imbalance.

Tasks		Associated Knowledge Statements	
0304	Herbal Therapy (13%), cont.		
T136	Modify herbal prescription based on response to herbal therapy.	K173	Knowledge of cautions, contraindications, and side effects of herbs and herbal formulas.
		K174	Knowledge of categories of herbs and herbal formulas.
		K176	Knowledge of modifications of herbal formulas.
		K182	Knowledge of interactions between diet and herbal therapies.
		K183	Knowledge of dosages of herbs and herbal supplements.
		K186	Knowledge of herbs and combinations of herbs that are toxic or produce undesired side effects.
		K187	Knowledge of methods for modifying herbal formulas to treat changes in patient condition.

CONTENT AREA 4: Professional Responsibilities (10%)

This area assesses the practitioner's knowledge of legal requirements, ethical guidelines, and professional standards related to the acupuncturist profession in California.

Tasks		Associated Knowledge Statements	
0401	Records, Confidentiality, and Mandated Reporting (4%)		
T137	Document assessment, treatment, and patient response to treatment in accordance with legal and professional standards.	K195	Knowledge of legal requirements and professional standards pertaining to documentation of assessment, treatment, and patient response.
		K196	Knowledge of professional standards for writing medical records and reports.
T138	Maintain patient records in accordance with legal requirements.	K195	Knowledge of legal requirements and professional standards pertaining to documentation of assessment, treatment, and patient response.
		K196	Knowledge of professional standards for writing medical records and reports.
		K197	Knowledge of legal requirements pertaining to maintenance and retention of patient records.
		K198	Knowledge of legal requirements pertaining to confidentiality of patient information (i.e., HIPAA).
T139	Maintain patient privacy and confidentiality in accordance with legal requirements.	K198	Knowledge of legal requirements pertaining to confidentiality of patient information (i.e., HIPAA).
		K199	Knowledge of legal requirements pertaining to disclosure of patient information.
T140	Identify and report cases of known or suspected abuse and neglect.	K196	Knowledge of professional standards for writing medical records and reports.
		K199	Knowledge of legal requirements pertaining to disclosure of patient information.
		K200	Knowledge of legal requirements pertaining to reporting of child, elder, and dependent adult abuse and neglect.
		K202	Knowledge of indicators of child, elder, and dependent adult abuse and neglect.
T141	Identify and report cases of communicable disease.	K196	Knowledge of professional standards for writing medical records and reports.
		K199	Knowledge of legal requirements pertaining to disclosure of patient information.
		K201	Knowledge of legal requirements pertaining to reporting of communicable disease.

CONTENT AREA 4: Professional Responsibilities (10%), continued

This area assesses the practitioner's knowledge of legal requirements, ethical guidelines, and professional standards related to the acupuncturist profession in California.

Tasks		Associated Knowledge Statements	
0401	Records, Confidentiality, and Mandated Reporting (4%), cont.		
T142	Obtain informed consent for treatment in accordance with legal and ethical guidelines.	K198	Knowledge of legal requirements pertaining to confidentiality of patient information (i.e., HIPAA).
		K203	Knowledge of legal and ethical requirements pertaining to informed consent.
		K204	Knowledge of methods to assess patient capacity to make health care decisions.
T143	Assess patient capacity to make health care decisions.	K199	Knowledge of legal requirements pertaining to disclosure of patient information.
		K203	Knowledge of legal and ethical requirements pertaining to informed consent.
		K204	Knowledge of methods to assess patient capacity to make health care decisions.

CONTENT AREA 4: Professional Responsibilities (10%), continued

This area assesses the practitioner's knowledge of legal requirements, ethical guidelines, and professional standards related to the acupuncturist profession in California.

Tasks		Associated Knowledge Statements	
0402	Infection Control and Environmental Safety (3%)		
T144	Implement standard procedures to prevent disease transmission and minimize risk of infection.	K205	Knowledge of infection control guidelines.
		K206	Knowledge of the risks of infectious diseases in the practitioner and patient environment.
		K207	Knowledge of standards and procedures for the Clean Needle Technique.
		K208	Knowledge of legal requirements for maintaining clinical environments in accordance with OSHA and Cal/OSHA requirements and clinical standards.
		K209	Knowledge of methods for disposal of used needles.
		K210	Knowledge of legal requirements for disposal of contaminated materials.
T145	Implement measures to safely perform acupuncture and adjunct treatments on patients.	K205	Knowledge of infection control guidelines.
		K206	Knowledge of the risks of infectious diseases in the practitioner and patient environment.
		K207	Knowledge of standards and procedures for the Clean Needle Technique.
		K208	Knowledge of legal requirements for maintaining clinical environments in accordance with OSHA and Cal/OSHA requirements and clinical standards.
		K209	Knowledge of methods for disposal of used needles.
		K210	Knowledge of legal requirements for disposal of contaminated materials.
T146	Practice clean needle technique (CNT).	K207	Knowledge of standards and procedures for the Clean Needle Technique.
		K208	Knowledge of legal requirements for maintaining clinical environments in accordance with OSHA and Cal/OSHA requirements and clinical standards.
		K209	Knowledge of methods for disposal of used needles.
		K210	Knowledge of legal requirements for disposal of contaminated materials.
T147	Maintain a clinical environment that adheres to OSHA and Cal/OSHA requirements and clinical standards.	K205	Knowledge of infection control guidelines.
		K206	Knowledge of the risks of infectious diseases in the practitioner and patient environment.
		K208	Knowledge of legal requirements for maintaining clinical environments in accordance with OSHA and Cal/OSHA requirements and clinical standards.

CONTENT AREA 4: Professional Responsibilities (10%), continued

This area assesses the practitioner's knowledge of legal requirements, ethical guidelines, and professional standards related to the acupuncturist profession in California.

Tasks		Associated Knowledge Statements	
0402	Infection Control and Environmental Safety (3%), cont.		
T148	Dispose of needles, contaminated materials, and containers in accordance with OSHA and Cal/OSHA guidelines.	K205	Knowledge of infection control guidelines.
		K208	Knowledge of legal requirements for maintaining clinical environments in accordance with OSHA and Cal/OSHA requirements and clinical standards.
		K209	Knowledge of methods for disposal of used needles.
		K210	Knowledge of legal requirements for disposal of contaminated materials.

CONTENT AREA 4: Professional Responsibilities (10%), continued

This area assesses the practitioner's knowledge of legal requirements, ethical guidelines, and professional standards related to the acupuncturist profession in California.

Tasks		Associated Knowledge Statements	
0403	Professional Conduct and Ethics (3%)		
T149	Maintain professional competency in accordance with legal and ethical guidelines.	K211	Knowledge of laws and regulations that define scope of practice and professional competence for acupuncturists.
		K212	Knowledge of legal requirements for maintaining licensure (continuing education, renewal periods).
		K213	Knowledge of legal requirement for reporting changes to status of license.
		K214	Knowledge of current acupuncture research.
T150	Recognize and report situations and behaviors that constitute unprofessional conduct in accordance with legal and ethical guidelines.	K211	Knowledge of laws and regulations that define scope of practice and professional competence for acupuncturists.
		K215	Knowledge of laws and regulations pertaining to unprofessional conduct for licensed acupuncturists.
		K217	Knowledge of ethical and professional standards for licensed acupuncturists.
T151	Evaluate potential conflicts of interest for impact on patients or therapeutic process in accordance with legal and ethical guidelines.	K211	Knowledge of laws and regulations that define scope of practice and professional competence for acupuncturists.
		K215	Knowledge of laws and regulations pertaining to unprofessional conduct for licensed acupuncturists.
		K217	Knowledge of ethical and professional standards for licensed acupuncturists.
T152	Establish and maintain professional boundaries in accordance with legal and ethical guidelines.	K211	Knowledge of laws and regulations that define scope of practice and professional competence for acupuncturists.
		K215	Knowledge of laws and regulations pertaining to unprofessional conduct for licensed acupuncturists.
		K216	Knowledge of legal requirements pertaining to advertisement and dissemination of information about professional qualifications and services.
T153	Safeguard patient right to dignity in accordance with legal and ethical guidelines.	K215	Knowledge of laws and regulations pertaining to unprofessional conduct for licensed acupuncturists.
		K217	Knowledge of ethical and professional standards for licensed acupuncturists.

CHAPTER 6 | CONCLUSION

The OA of the acupuncturist profession described in this report provides a comprehensive description of current practice in California. The procedures employed to perform the OA were based upon a content validation strategy to ensure that the results accurately represent acupuncturist practice. Results of this OA provide information regarding current practice that can be used to develop valid and legally defensible examinations and to make job-related decisions regarding occupational licensure.

Use of the CALE outline contained in this report ensures that the Board is compliant with BPC § 139.

This report provides all documentation necessary to verify that the analysis has been completed in accordance with legal, professional, and technical standards.

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APPENDIX A | QUESTIONNAIRE

STATE OF CALIFORNIA – DEPARTMENT OF CONSUMER AFFAIRS – BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY GAVIN NEWSOM, GOVERNOR

CALIFORNIA ACUPUNCTURE BOARD

1625 North Market Blvd., Suite N-219
Sacramento, CA 95834
P 916.515.5200 F 916.928.2204
www.acupuncture.ca.gov

February 25, 2026

Dear Licensed Acupuncturist,

The Acupuncture Board (Board) is conducting an occupational analysis (OA) of the acupuncture profession in California. An OA is a comprehensive study of the profession that uses a survey to identify the key tasks currently performed by licensed acupuncturist throughout California. This survey was developed with input from groups of licensed acupuncturists, and we invite all licensees to participate in the OA survey.

The OA survey identifies the knowledge, skills and abilities required for the safe and effective practice of acupuncture in California today. The results of the OA will be used to update and improve the California Acupuncture Licensing Examination. Participation from the licensed community is essential to accurately define the competencies required to practice acupuncture safely and effectively at the time of licensure.

The Board encourages all licensed California acupuncturists to participate so that all practice settings and geographic regions are well represented. Responses will remain confidential and will not be linked to your license or personal information.

The Acupuncture Board understands that your time is valuable and to acknowledge your effort, acupuncturists who complete the entire survey will receive four (4) Category 1 Distance hours. Certificates of Completion will be issued approximately 4-6 weeks after the survey closes.

Once the OA survey opens, it will be available 24/7. You do not need to complete it in one session. You may stop at any time and resume later, as long as you use the same computer and web browser and do not delete your browser cookies. Please note that this feature is not available if you access the survey in private or incognito mode.

Please complete the OA survey by Tuesday, March 31, 2026.

The Acupuncture Board appreciates your time, input, and continued dedication to the exemplary practice of acupuncture in California.

Sincerely,

Benjamin Bodea

Ben Bodea
Executive Officer
California Acupuncture Board

CALIFORNIA ACUPUNCTURE BOARD

2026 Acupuncturist Occupational Analysis Questionnaire

Continue Education Credits

If you have completed all questions on this survey, you will receive 4 continuing education credits.

To issue the credits, the California Acupuncture Board (Board) needs to know your name, license number, and email address. Your personal information will be kept confidential and will not be linked to your responses on this survey.

The Board will issue the continuing education certificates approximately 4-6 weeks after the survey closes.

1. Please enter your first and last name.

2. Please enter your license number. Please carefully check your license number entry for accuracy. If you do not know your license number you can search for it using the Department of Consumer Affairs license search tool located here: https://search.dca.ca.gov/

3. Please enter your email address.

CALIFORNIA ACUPUNCTURE BOARD

2026 Acupuncturist Occupational Analysis Questionnaire

INSTRUCTIONS

In order to progress through this questionnaire, please use the following navigation buttons:

- **Next to continue to the next page**
- **Prev to return to the previous page**
- **Exit this Survey if you need to exit the questionnaire and return to it at a later time**
- **Done/Submit to submit your questionnaire when fully completed**

Any questions marked with an asterisk (*) require an answer in order to progress through the questionnaire.

<u>This questionnaire has two parts:</u>

PART I asks you for background information about yourself and your current practice.

PART II asks you to rate tasks in terms of:
HOW OFTEN you perform each task in your current practice; and
HOW IMPORTANT the performance of each task is to your current practice.

CALIFORNIA ACUPUNCTURE BOARD

2026 Acupuncturist Occupational Analysis Questionnaire

Part I - Personal Data

Complete this survey only if you are currently licensed as an acupuncturist in California.

The Board recognizes that every acupuncturist may not perform all of the tasks and use all of the knowledge contained in this survey. However, your participation is essential to the success of this study, and your contributions will help establish standards for safe and effective acupuncturist practice in the State of California.

The information you provide here is voluntary and confidential. It will be treated as personal information subject to the Information Practices Act (Civil Code section 1798 et seq.) and will be used only for the purpose of analyzing the data from this survey.

* 4. Are you currently licensed as an acupuncturist in California?

- ◯ Yes
- ◯ No

CALIFORNIA ACUPUNCTURE BOARD

2026 Acupuncturist Occupational Analysis Questionnaire

Part I - Personal Data

* 5. Have you worked as an acupuncturist within the past 12 months?

- ◯ Yes
- ◯ No

CALIFORNIA ACUPUNCTURE BOARD

2026 Acupuncturist Occupational Analysis Questionnaire

Part I - Personal Data

If you currently work as a licensed acupuncturist, please answer the questions as they pertain to your current work.

If you do not currently work as a licensed acupuncturist, then answer the questions as they pertain to the most recent employment you held as a licensed acupuncturist.

* 6. How many years have you been licensed as an acupuncturist in California?

- ◯ 0–5
- ◯ 6–10
- ◯ 11–15
- ◯ 16–20
- ◯ 21–25
- ◯ 26–30
- ◯ More than 30

7. On average, how many hours per week do you work as a licensed acupuncturist?

- ◯ 0–10
- ◯ 11–20
- ◯ 21–30
- ◯ 31–40
- ◯ More than 40

8. On average, how many patients do you see per week as a licensed acupuncturist?

- ◯ 0–10
- ◯ 11–20
- ◯ 21–30
- ◯ 31–50
- ◯ More than 50

9. Which describes the location of your primary practice setting?

- ◯ Urban (more than 50,000 people)
- ◯ Rural (fewer than 50,000 people)

10. What is your primary practice setting?

- ◯ Sole proprietor
- ◯ Group acupuncture practice
- ◯ Group multidisciplinary practice
- ◯ Community acupuncture clinic
- ◯ Acupuncture medical group (Inc. or LLC)
- ◯ Hospital
- ◯ Spa
- ◯ Mobile practice (house calls / home visits)
- ◯ Multiple settings
- ◯ Telehealth
- ◯ Educational institution (e.g., instructor)
- ◯ Other (please specify)

11. What is your secondary practice setting?

- ◯ Not applicable
- ◯ Sole proprietor
- ◯ Group acupuncture practice
- ◯ Group multidisciplinary practice
- ◯ Community acupuncture clinic
- ◯ Acupuncture medical group (Inc. or LLC)
- ◯ Hospital
- ◯ Spa
- ◯ Mobile practice (house calls / home visits)
- ◯ Multiple settings
- ◯ Telehealth
- ◯ Educational institution (e.g., instructor)
- ◯ Other (please specify)

CALIFORNIA ACUPUNCTURE BOARD

2026 Acupuncturist Occupational Analysis Questionnaire

Part I - Personal Data

If you do not currently work as an acupuncturist, please answer the questions as they pertain to your current work.

If you previously answered that you do not currently work as a licensed acupuncturist, then answer the questions as they pertain to the most recent employment you held as a licensed acupuncturist.

12. How would you describe your employment status?

- ◯ Self-employed
- ◯ Independent contractor
- ◯ Hourly employee
- ◯ Salaried employee
- ◯ Commissioned employee

13. In your primary practice setting, what is the primary way your patients pay for services? (Select all that apply.)

- ☐ Cash
- ☐ Health insurance (e.g., HMO, PPO)
- ☐ Workers' compensation
- ☐ Medicaid/Medicare
- ☐ Personal injury
- ☐ Veterans Affairs
- ☐ Other (please specify)

14. Over the past 12 months, what percentage of your time spent providing patient care involved providing telehealth services?

- ◯ None, I did not use telehealth to provide patient care.
- ◯ 6-10
- ◯ 11–20
- ◯ 21–30
- ◯ 31–50
- ◯ 51–75
- ◯ 76–95
- ◯ 96–100

15. Which of the following treatment categories best describes the primary focus of your acupuncture practice? (Select up to 3 options.)

- ☐ Addiction
- ☐ Cardiovascular
- ☐ Dermatological or cosmetic
- ☐ Endocrine health
- ☐ Fertility
- ☐ Gastrointestinal
- ☐ General
- ☐ Geriatrics
- ☐ Immune disorders
- ☐ Men's health
- ☐ Mental health
- ☐ Neurological
- ☐ Oncology support
- ☐ Orthopedics
- ☐ Pain management
- ☐ Pediatrics
- ☐ Respiratory
- ☐ Sports medicine
- ☐ Women's health
- ☐ Other (please specify)

16. Over the last 12 months, which of the following treatment categories have you applied most often with your patients? (Select one.)

- ◯ Addiction
- ◯ Cardiovascular
- ◯ Dermatological or cosmetic
- ◯ Endocrine health
- ◯ Fertility
- ◯ Gastrointestinal
- ◯ General
- ◯ Geriatrics
- ◯ Immune disorders
- ◯ Men's health
- ◯ Mental health
- ◯ Neurological
- ◯ Oncology support
- ◯ Orthopedics
- ◯ Pain management
- ◯ Pediatrics
- ◯ Respiratory
- ◯ Sports medicine
- ◯ Women's health
- ◯ Other (please specify)

17. Which of the following treatment modalities do you use as an acupuncturist? (Select all that apply.)

- [ ] Acupuncture
- [ ] Breathing techniques
- [ ] Cupping
- [ ] Diet and nutrition
- [ ] Ear seeds
- [ ] Electroacupuncture
- [ ] Exercise
- [ ] Gua Sha
- [ ] Heat therapy
- [ ] Herbal plaster
- [ ] Herbal therapy
- [ ] Infrared therapy
- [ ] Kinesiology tape
- [ ] Laser acupuncture
- [ ] Manual therapy
- [ ] Moxibustion
- [ ] Other (please specify)

18. What treatment modality have you used most often in your practice over the last 12 months? (Select one.)

- ◯ Acupuncture
- ◯ Breathing techniques
- ◯ Cupping
- ◯ Diet and nutrition
- ◯ Ear seeds
- ◯ Electroacupuncture
- ◯ Exercise
- ◯ Gua Sha
- ◯ Heat therapy
- ◯ Herbal plaster
- ◯ Herbal therapy
- ◯ Infrared therapy
- ◯ Kinesiology tape
- ◯ Laser acupuncture
- ◯ Manual therapy
- ◯ Moxibustion
- ◯ Other (please specify)

19. What is your native language?

- ◯ English
- ◯ Chinese
- ◯ Korean
- ◯ Spanish
- ◯ Other (please specify)

CALIFORNIA ACUPUNCTURE BOARD

2026 Acupuncturist Occupational Analysis Questionnaire

Part I - Personal Data

20. What language is spoken by the majority of your patients?

- ◯ English
- ◯ Chinese
- ◯ Korean
- ◯ Spanish
- ◯ Other (please specify)

21. What is the highest level of education you have achieved in acupuncture or Asian medicine?

- ◯ Associate degree
- ◯ Bachelor's degree
- ◯ Master's degree
- ◯ Doctorate
- ◯ Certificate
- ◯ Other formal education (please specify)

22. Do you feel that your acupuncture training program prepared you for your first year in practice?

- ◯ Yes
- ◯ No

23. During your education and training, what subjects would have been beneficial to adequately prepare you for your first year in practice?

- [ ] Practice management and business skills
- [ ] Patient education and counseling
- [ ] Additional clinical practice hours
- [ ] Clinical experience in diverse practice settings
- [ ] Clinical experience with diverse patient populations
- [ ] Insurance billing
- [ ] Other (please specify)

24. What reference materials are most useful to you during your daily acupuncture practice activities? Please specify.

CALIFORNIA ACUPUNCTURE BOARD

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Part I - Personal Data

25. In what California county do you perform the majority of your work?

- Alameda
- Alpine
- Amador
- Butte
- Calaveras
- Colusa
- Contra Costa
- Del Norte
- El Dorado
- Fresno
- Glenn
- Humboldt
- Imperial
- Inyo
- Kern
- Kings
- Lake
- Lassen
- Los Angeles
- Madera
- Marin
- Mariposa
- Mendocino
- Merced
- Modoc
- Mono
- Monterey
- Napa
- Nevada
- Orange
- Placer
- Plumas
- Riverside
- Sacramento
- San Benito
- San Bernardino
- San Diego
- San Francisco
- San Joaquin
- San Luis Obispo
- San Mateo
- Santa Barbara
- Santa Clara
- Santa Cruz
- Shasta
- Sierra
- Siskiyou
- Solano
- Sonoma
- Stanislaus
- Sutter
- Tehama
- Trinity
- Tulare
- Tuolumne
- Ventura
- Yolo
- Yuba

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Part II - Task Ratings

The following section contains 120 task statements. Please rate each task according to how often you perform it (Frequency) and how important it is for effective performance as an acupuncturist (Importance). Please consider each scale separately so that the ratings from one scale do not influence the ratings of the other.

FREQUENCY SCALE: How often do you perform this task compared to other tasks you have performed in your current role over the past year?

0 – NEVER. "I do not perform this task in my current role."
1 – RARELY. "I rarely perform this task compared to other tasks I perform in my current role."
2 – SELDOM. "I do not perform this task very often compared to other tasks I perform in my current role."
3 – REGULARLY. "I perform this task as often as other tasks I perform in my current role."
4 – OFTEN. "I perform this task more often than other tasks I perform in my current role."
5 – VERY OFTEN. "I perform this task much more often than other tasks I perform in my current role."

IMPORTANCE SCALE: How important is this task for effective performance compared to other tasks you have performed in your current role over the past year?

0 – DOES NOT APPLY. "I do not perform this task in my current role."
1 – OF MINOR IMPORTANCE. "This task is not very important for effective performance in my current role."
2 – FAIRLY IMPORTANT. "This task is fairly important for effective performance in my current role."
3 – MODERATELY IMPORTANT. "This task is moderately important for effective performance in my current role."
4 – VERY IMPORTANT. "This task is very important for effective performance in my current role."
5 – CRITICALLY IMPORTANT. "This task is critically important for effective performance in my current role."

26. Please rate the following tasks based on how often you perform the task (Frequency) and how important the task is for effective performance of your practice (Importance).

ASSESSMENT AND DIAGNOSIS

	Frequency	Importance
T001. Identify patient's chief complaint.		
T002. Collect information about patient's family health history.		
T003. Collect information about patient's health history.		
T004. Collect information about past and current Asian medicine therapies and modalities.		
T005. Identify supplements, herbs, and formulas that the patient is taking.		
T006. Assess emotional health to inform pattern differentiation.		
T007. Assess level and quality of Qi to inform pattern differentiation.		
T008. Assess Shen to inform pattern differentiation.		
T009. Identify lifestyle factors (e.g., activity level, occupation, social activities) influencing health.		
T010. Identify sleep patterns to inform pattern differentiation.		
T011. Identify exogenous actors (e.g., stress, pollutants, sounds, climate, weather) influencing health.		
T012. Assess physical characteristics to inform pattern differentiation.		
T013. Identify dietary habits to inform pattern differentiation.		
T014. Identify food and drink flavor preferences, cravings, aversions, and intolerances to inform pattern differentiation.		
T015. Identify gastrointestinal signs and symptoms (characteristics of bowel movements, pain) to inform pattern differentiation.		

T016. Identify genitourinary signs and symptoms to inform pattern differentiation.

T017. Identify gynecological signs and symptoms to inform pattern differentiation.

T018. Identify signs and symptoms of reproductive systems to inform pattern differentiation.

T019. Identify respiratory signs and symptoms to inform pattern differentiation.

T020. Identify mucus characteristics to inform pattern differentiation.

T021. Identify phlegm characteristics to inform pattern differentiation.

T022. Identify cardiovascular signs and symptoms to inform pattern differentiation.

T023. Identify patient perspiration patterns to inform pattern differentiation.

T024. Identify ocular and visual signs and symptoms to inform pattern differentiation.

T025. Identify auditory signs and symptoms to inform pattern differentiation.

T026. Identify preferences and aversions related to temperature of food and drinks to inform pattern differentiation.

T027. Identify skin conditions and characteristics to inform pattern differentiation.

T028. Assess thirst and fluid intake to inform pattern differentiation.

T029. Assess pain characteristics (level, nature, locations, frequency) to inform pattern differentiation.

T030. Assess patient perception of heat and cold to inform pattern differentiation.

T031. Assess fever and chills to inform pattern differentiation.

T032. Assess sounds, voice quality, and vocal strength to inform pattern differentiation.

T033. Assess patient odors to inform pattern differentiation.

T034. Review diagnostic reports (e.g., bloodwork, MRI, X-ray) or clinical notes from Western medical professionals to gather additional information regarding patient's chief complaint.

T035. Assess pulse to inform pattern differentiation.

T036. Palpate areas of body or channels to inform pattern differentiation.

T037. Identify signs and symptoms that require emergency management.

T038. Assess signs and symptoms associated with the use of medications, supplements, or recreational substances.

T039. Perform neurological examination (e.g., sensation, strength) to determine health condition.

T040. Perform orthopedic examination to determine health condition.

T041. Perform physical examination (observation, auscultation , olfaction, palpation, vital signs) to determine health condition.

CALIFORNIA ACUPUNCTURE BOARD

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Part II - Task Ratings

27. Please rate the following tasks based on how often you perform the task (Frequency) and how important the task is for effective performance of your practice (Importance).

DIAGNOSIS AND TREATMENT PLANNING

	Frequency	Importance
T042. Order diagnostic tests to determine patient's health condition.		
T043. Evaluate patient information to determine whether additional details are needed.		
T044. Interpret and integrate assessment findings (pulse, tongue, history, channel, diagnostic test results) to inform pattern differentiation.		
T045. Determine phase of pathogen progression.		
T046. Determine affected channels.		
T047. Determine Root and Branch condition.		
T048. Determine Five Element disharmony patterns.		
T049. Determine Zang Fu disharmony patterns.		
T050. Determine Eight Principles categorization.		
T051. Determine disharmony pattern using Six Stages (Shang Han Lun) of differentiation .		

T052. Determine disharmony pattern using Four Levels (Wei, Qi, Ying, Xue) of differentiation.

T053. Determine disharmony pattern using Triple Burner (San Jiao) differentiation.

T054. Develop a differential diagnosis for identified disharmony patterns.

T055. Determine treatment principles (tonify, sedate, harmonize) to be applied during treatment planning.

T056. Develop treatment plans by applying treatment principle (tonify, sedate, harmonize).

T057. Identify a measurable metric for assessing treatment efficacy (e.g., outcome measures, questionnaires).

T058. Evaluate patient progress during follow-up visits to determine the need to modify treatment plan.

T059. Modify treatment plans based on patient response to treatment.

T060. Communicate assessment findings and diagnosis to patients.

T061. Discuss treatment plan and possible outcomes with patients.

T062. Discuss treatment procedures with patients .

T063. Explain Asian Medicine diagnostic concepts using common Western terminology to patients and health care providers.

T064. Educate patients regarding differences and similarities between Asian Medicine and Western medicine.

T065. T067. Collaborate with other health care providers (e.g., physicians, specialists, physical therapists) to identify the most effective treatment for patients.

T066. Refer patient to other health care providers based on assessment findings.

CALIFORNIA ACUPUNCTURE BOARD

2026 Acupuncturist Occupational Analysis Questionnaire

Part II - Task Ratings

28. Please rate the following tasks based on how often you perform the task (Frequency) and how important the task is for effective performance of your practice (Importance).

TREATMENT

	Frequency	Importance
T067. Prioritize treatment principles and management of presenting problems .		
T068. Develop a point prescription based on treatment principles.		
T069. Identify contraindicated points by evaluating patient condition.		
T070. Select distal or proximal points.		
T071. Select local points along the affected Meridian.		
T072. Select points to treat Root and Branch.		
T073. Select points using mirroring methods (e.g., elbow-for-knee, hip-for-shoulder, ankle-for-wrist).		
T074. Select points to balance point distribution (e.g., right and left, above and below).		
T075. Select points from Yin and Yang channels to balance treatment prescription.		
T076. Select points on extremities to treat conditions occurring in the center.		
T077. Select points that are centrally located to treat conditions occurring in the extremities.		

T078. Select Ashi points.

T079. T080. Select Front-Mu and Back-Shu points.

T080. Select points along the Muscle channels.

T081. Select lower He-Sea points.

T082. Select Five Shu (Five Transporting) points.

T083. Select Confluent points of the Eight Extraordinary channels.

T084. Select Extra points.

T085. Select Intersecting or Crossing points.

T086. Select Luo-Connecting points.

T087. Select Yuan-Source points.

T088. Select Xi-Cleft points to treat acute conditions.

T089. Select Eight Influential points.

T090. Select points to treat muscle or joint mechanism dysfunction.

T091. Select points based on dermatome map.

T092. Select scalp points or areas.

T093. Select auricular points.

T094. Select points according to the Five Element theory.

T095. Select Command Points.

T096. Select Empirical points.

T097. Select motor points.

T098. Select Four Seas points.

T099. Select trigger points.

T100. Select Entry Exit points.

T101. Select Ghost points.

T102. Select Window of the Sky points.

T103. Identify cautions and contraindications for needling by evaluating patient condition.

T104. Identify points that require needling with caution due to anatomical considerations (e.g., over arteries, over internal organs).

T105. Select needle length and gauge according to treatment area, patient characteristics, and patient diagnosis.

T106. Determine needle retention time.

T107. Determine patient position for needle insertion.

T108. Locate points for needle insertion by using anatomical landmarks and proportional measurements (cun).

T109. Insert needle within standard depth range to stimulate point.

T110. Insert needle using recommended insertion angle.

T111. Manipulate needle to elicit therapeutic effects.

T112. Monitor patients before, during, and after adjunct treatment for adverse reactions and comfort level.

T113. Apply moxibustion techniques.

T114. Perform electrotherapy (e.g., electroacupuncture, electrostimulation, TENS).

T115. Apply ear seeds or ear tacks.

T116. Educate patients regarding therapeutic exercises.

T117. Perform cupping techniques.

T118. Perform Gua Sha techniques.

T119. Perform manual therapy (e.g., Tui Na, acupressure).

T120. Identify conditions that contraindicate herbal therapy.

T121. Determine type of herbal therapy indicated for the patient (e.g., powder, granular, raw herb, decoction, patent, topical).

T122. Select or develop herbal formulas based on treatment principle (tonify, sedate, harmonize).

T123. Select or develop herbal therapies (external or internal) that complement acupuncture treatments.

T124. Perform heat therapy (e.g., infrared light, heat pad).

T125. Determine dosage of herbal therapy.

T126. Determine authenticity and purity of herbs and herbal formulas.

T127. Educate patients regarding diet and nutrition.

T128. Educate patients regarding lifestyle recommendations .

T129. Identify contraindications for herbs when combined with Western medications and supplements to avoid adverse interactions.

T130. Label packaging containing herbal prescriptions following legal guidelines.

T131. Prepare herbs following safety guidelines.

T132. Provide information about herbal therapy prescriptions to patients.

T133. Instruct patients on use of herbs (dosage, cooking, application) to produce intended therapeutic effect.

T134. Monitor and evaluate patient response to herbal therapy.

T135. Monitor and evaluate patient response to herbs when combined with Western medications.

T136. Modify herbal prescription based on response to herbal therapy.

CALIFORNIA ACUPUNCTURE BOARD

2026 Acupuncturist Occupational Analysis Questionnaire

Part II - Task Ratings

29. Please rate the following tasks based on how often you perform the task (Frequency) and how important the task is for effective performance of your practice (Importance).

PROFESSIONAL RESPONSIBILITES

	Frequency	Importance
T137. Document assessment, treatment, and patient response to treatment in accordance with legal and professional standards.		
T138. Maintain patient records in accordance with legal requirements.		
T139. Maintain patient privacy and confidentiality in accordance with legal requirements.		
T140. Identify and report cases of known or suspected abuse and neglect.		
T141. Identify and report cases of communicable disease.		
T142. Obtain informed consent for treatment in accordance with legal and ethical guidelines.		
T143. Assess patient capacity to make health care decisions.		
T144. Implement standard procedures to prevent disease transmission and minimize risk of infection.		
T145. Implement measures to safely perform acupuncture and adjunct treatments on patients .		
T146. Practice clean needle technique (CNT).		

T147. Maintain a clinical environment that adheres to OSHA and Cal/OSHA requirements and clinical standards.

T148. Dispose of needles, contaminated materials, and containers in accordance with OSHA and Cal/OSHA guidelines.

T149. Maintain professional competency in accordance with legal and ethical guidelines.

T150. Recognize and report situations and behaviors that constitute unprofessional conduct in accordance with legal and ethical guidelines.

T151. Evaluate potential conflict of interests for impact on patients or therapeutic process in accordance with legal and ethical guidelines.

T152. Establish and maintain professional boundaries in accordance with legal and ethical guidelines.

T153. Safeguard patient rights to dignity in accordance with legal and ethical guidelines.

CALIFORNIA ACUPUNCTURE BOARD

2026 Acupuncturist Occupational Analysis Questionnaire

Thank you!

Thank you for taking the time to complete this survey. The California Acupuncture Board values your contribution to this study.

APPENDIX B | EMAIL INVITATION TO PRACTITIONERS

Dear Licensed Acupuncturist:

The California Acupuncture Board is requesting your assistance with an important study that will define the entry-level job tasks of the Licensed Acupuncturist profession in California and inform the content of the California Acupuncture Licensing Examination. As part of the study, a questionnaire has been developed in cooperation with a group of licensed acupuncturists. Please complete the questionnaire by March 31, 2026. Acupuncturists who complete the survey are eligible to receive four (4) Category 1 Distance hours.

Thank you for your participation!

Office of Professional Examination Services

APPENDIX C | RESPONDENTS BY REGION

LOS ANGELES COUNTY AND VICINITY

County of Practice	Frequency
Los Angeles	374
Orange	137
Total	511

NORTH COAST

County of Practice	Frequency
Del Norte	1
Humboldt	5
Mendocino	6
Sonoma	27
Total	39

RIVERSIDE AND VICINITY

County of Practice	Frequency
Riverside	24
San Bernardino	21
Total	45

SACRAMENTO VALLEY

County of Practice	Frequency
Butte	6
Lake	1
Sacramento	29
Yolo	2
Yuba	2
Total	40

SAN DIEGO COUNTY AND VICINITY

County of Practice	Frequency
Imperial	1
San Diego	135
Total	136

SAN FRANCISCO BAY AREA

County of Practice	Frequency
Alameda	85
Contra Costa	32
Marin	28
Napa	3
San Francisco	60
San Mateo	25
Santa Clara	126
Santa Cruz	39
Solano	7
Total	405

SAN JOAQUIN VALLEY

County of Practice	Frequency
Fresno	3
Kern	6
Madera	2
San Joaquin	2
Stanislaus	4
Tulare	3
Total	20

SHASTA-CASCADE

County of Practice	Frequency
Shasta	4
TOTAL	4

SIERRA MOUNTAIN VALLEY

County of Practice	Frequency
Amador	1
Calaveras	1
El Dorado	4
Inyo	1
Mariposa	1
Nevada	5
Placer	13
Total	26

SOUTH COAST AND CENTRAL COAST

County of Practice	Frequency
Monterey	11
San Luis Obispo	7
Santa Barbara	22
Ventura	36
Total	76

APPENDIX D | CRITICALITY INDICES FOR ALL TASKS IN DESCENDING ORDER BY CONTENT AREA

Content Area 1: Patient Assessment

	Task	Mean Frequency	Mean Importance	Task Criticality Index
T001.	Identify patient's chief complaint.	4.81	4.78	23.10
T003.	Collect information about patient's health history.	4.59	4.54	21.25
T029.	Assess pain characteristics (level, nature, locations, frequency) to inform pattern differentiation.	4.64	4.58	21.16
T010.	Identify sleep patterns to inform pattern differentiation.	4.28	4.18	18.77
T009.	Identify lifestyle factors (e.g., activity level, occupation, social activities) influencing health.	4.27	4.11	18.57
T037.	Identify signs and symptoms that require emergency management.	3.80	4.45	17.89
T006.	Assess emotional health to inform pattern differentiation.	4.11	4.05	17.79
T015.	Identify gastrointestinal signs and symptoms (characteristics of bowel movements, pain) to inform pattern differentiation.	4.13	4.09	17.67
T036.	Palpate areas of body or channels to inform pattern differentiation.	4.10	4.06	17.49
T005.	Identify supplements, herbs, and formulas that the patient is taking.	4.05	3.99	17.20
T007.	Assess level and quality of Qi to inform pattern differentiation.	3.98	4.00	16.73
T035.	Assess pulse to inform pattern differentiation.	3.97	3.98	16.68
T011.	Identify exogenous actors (e.g., stress, pollutants, sounds, climate, weather) influencing health.	3.99	3.94	16.63
T017.	Identify gynecological signs and symptoms to inform pattern differentiation.	3.91	3.92	16.41
T013.	Identify dietary habits to inform pattern differentiation.	3.96	3.91	16.39

Content Area 1: Patient Assessment, continued

	Task	Mean Frequency	Mean Importance	Task Criticality Index
T012.	Assess physical characteristics to inform pattern differentiation.	3.91	3.82	15.83
T008.	Assess Shen to inform pattern differentiation.	3.88	3.85	15.80
T041.	Perform physical examination (observation, auscultation , olfaction, palpation, vital signs) to determine health condition.	3.74	3.94	15.76
T038.	Assess signs and symptoms associated with the use of medications, supplements, or recreational substances	3.77	3.99	15.75
T034.	Review diagnostic reports (e.g., bloodwork, MRI, X-ray) or clinical notes from Western medical professionals to gather additional information regarding patient's chief complaint.	3.74	3.82	15.33
T022.	Identify cardiovascular signs and symptoms to inform pattern differentiation.	3.77	3.93	15.23
T018.	Identify signs and symptoms of reproductive systems to inform pattern differentiation.	3.70	3.74	14.79
T019.	Identify respiratory signs and symptoms to inform pattern differentiation.	3.73	3.75	14.79
T030.	Assess patient perception of heat and cold to inform pattern differentiation.	3.77	3.77	14.77
T016.	Identify genitourinary signs and symptoms to inform pattern differentiation.	3.68	3.67	14.44
T002.	Collect information about patient's family health history.	3.69	3.41	13.56
T031.	Assess fever and chills to inform pattern differentiation.	3.41	3.67	13.33
T028.	Assess thirst and fluid intake to inform pattern differentiation.	3.52	3.53	13.28
T021.	Identify phlegm characteristics to inform pattern differentiation.	3.48	3.57	13.23
T040.	Perform orthopedic examination to determine health condition.	3.31	3.61	13.07

Content Area 1: Patient Assessment, continued

	Task	Mean Frequency	Mean Importance	Task Criticality Index
T020.	Identify mucus characteristics to inform pattern differentiation.	3.45	3.54	13.07
T014.	Identify food and drink flavor preferences, cravings, aversions, and intolerances to inform pattern differentiation.	3.55	3.49	13.02
T027.	Identify skin conditions and characteristics to inform pattern differentiation.	3.45	3.47	12.89
T004.	Collect information about past and current Asian medicine therapies and modalities.	3.53	3.13	12.10
T026.	Identify preferences and aversions related to temperature of food and drinks to inform pattern differentiation.	3.35	3.32	12.08
T039.	Perform neurological examination (e.g., sensation, strength) to determine health condition.	3.12	3.51	11.83
T023.	Identify patient perspiration patterns to inform pattern differentiation.	3.31	3.41	11.81
T024.	Identify ocular and visual signs and symptoms to inform pattern differentiation.	3.16	3.26	11.00
T032.	Assess sounds, voice quality, and vocal strength to inform pattern differentiation.	3.14	3.18	10.98
T025.	Identify auditory signs and symptoms to inform pattern differentiation.	3.02	3.12	10.18
T033.	Assess patient odors to inform pattern differentiation.	2.86	2.99	9.38
T042.	Order diagnostic tests to determine patient's health condition.	1.92	2.64	7.47

Content Area 2: Treatment Planning and Diagnosis

	Task	Mean Frequency	Mean Importance	Task Criticality Index
T059.	Modify treatment plans based on patient response to treatment.	4.40	4.43	19.97
T058.	Evaluate patient progress during follow-up visits to determine the need to modify treatment plan.	4.37	4.36	19.37
T061.	Discuss treatment plan and possible outcomes with patients.	4.35	4.31	19.27
T062.	Discuss treatment procedures with patients.	4.39	4.28	19.17
T044.	Interpret and integrate assessment findings (pulse, tongue, history, channel, diagnostic test results) to inform pattern differentiation.	4.21	4.28	18.58
T060.	Communicate assessment findings and diagnosis to patients.	4.20	4.13	18.05
T046.	Determine affected channels.	4.14	4.13	17.63
T043.	Evaluate patient information to determine whether additional details are needed.	3.93	3.87	16.11
T055.	Determine treatment principles (tonify, sedate, harmonize) to be applied during treatment planning.	3.89	3.92	16.00
T063.	Explain Asian Medicine diagnostic concepts using common Western terminology to patients and health care providers.	3.98	3.81	15.78
T047.	Determine Root and Branch condition.	3.81	3.88	15.61
T056.	Develop treatment plans by applying treatment principle (tonify, sedate, harmonize).	3.83	3.88	15.52
T064.	Educate patients regarding differences and similarities between Asian Medicine and Western medicine.	3.82	3.68	15.09
T049.	Determine Zang Fu disharmony patterns.	3.65	3.76	14.73
T066.	Refer patient to other health care providers based on assessment findings.	3.34	3.87	14.09
T054.	Develop a differential diagnosis for identified disharmony patterns.	3.56	3.63	13.91

Content Area 2: Diagnosis and Treatment Planning, continued

	Task	Mean Frequency	Mean Importance	Task Criticality Index
T057.	Identify a measurable metric for assessing treatment efficacy (e.g., outcome measures, questionnaires).	3.51	3.67	13.57
T050.	Determine Eight Principles categorization.	3.39	3.51	13.33
T045.	Determine phase of pathogen progression.	3.18	3.41	12.40
T065.	Collaborate with other health care providers (e.g., physicians, specialists, physical therapists) to identify the most effective treatment for patients.	3.02	3.50	12.02
T048.	Determine Five Element disharmony patterns.	2.87	3.03	10.45
T052.	Determine disharmony pattern using Four Levels (Wei, Qi, Ying, Xue) of differentiation.	2.77	3.08	9.84
T051.	Determine disharmony pattern using Six Stages (Shang Han Lun) of differentiation.	2.55	2.92	8.72
T053.	Determine disharmony pattern using Triple Burner (San Jiao) differentiation.	2.35	2.72	7.84

Content Area 3: Treatment

	Task	Mean Frequency	Mean Importance	Task Criticality Index
T104.	Identify points that require needling with caution due to anatomical considerations (e.g., over arteries, over internal organs).	4.36	4.55	20.73
T105.	Select needle length and gauge according to treatment area, patient characteristics, and patient diagnosis.	4.41	4.42	20.29
T108.	Locate points for needle insertion by using anatomical landmarks and proportional measurements (cun).	4.45	4.38	20.18
T107.	Determine patient position for needle insertion.	4.44	4.36	20.17
T112.	Monitor patients before, during, and after adjunct treatment for adverse reactions and comfort level.	4.42	4.39	20.15
T103.	Identify cautions and contraindications for needling by evaluating patient condition.	4.36	4.44	19.91
T110.	Insert needle using recommended insertion angle.	4.35	4.32	19.19
T109.	Insert needle within standard depth range to stimulate point.	4.36	4.28	19.09
T069.	Identify contraindicated points by evaluating patient condition.	4.14	4.33	18.31
T070.	Select distal or proximal points.	4.34	4.17	18.27
T068.	Develop a point prescription based on treatment principles.	4.22	4.22	18.07
T106.	Determine needle retention time.	4.22	4.03	17.63
T071.	Select local points along the affected Meridian.	4.21	4.08	17.61
T128.	Educate patients regarding lifestyle recommendations.	4.05	4.06	17.50
T067.	Prioritize treatment principles and management of presenting problems.	4.15	4.16	17.49
T127.	Educate patients regarding diet and nutrition.	3.95	4.00	16.95
T078.	Select Ashi points.	4.09	3.97	16.86
T129.	Identify contraindications for herbs when combined with Western medications and supplements to avoid adverse interactions.	3.71	4.08	16.80

Content Area 3: Treatment, continued

	Task	Mean Frequency	Mean Importance	Task Criticality Index
T134.	Monitor and evaluate patient response to herbal therapy.	3.65	3.94	16.50
T135.	Monitor and evaluate patient response to herbs when combined with Western medications.	3.57	3.94	16.06
T124.	Perform heat therapy (e.g., infrared light, heat pad).	4.07	3.73	16.02
T090.	Select points to treat muscle or joint mechanism dysfunction.	3.96	3.87	15.87
T120.	Identify conditions that contraindicate herbal therapy.	3.60	3.92	15.79
T136.	Modify herbal prescription based on response to herbal therapy.	3.52	3.92	15.71
T133.	Instruct patients on use of herbs (dosage, cooking, application) to produce intended therapeutic effect.	3.46	3.78	15.45
T072.	Select points to treat Root and Branch.	3.87	3.88	15.44
T125.	Determine dosage of herbal therapy.	3.45	3.74	15.14
T111.	Manipulate needle to elicit therapeutic effects.	3.74	3.74	15.09
T132.	Provide information about herbal therapy prescriptions to patients.	3.51	3.76	15.08
T116.	Educate patients regarding therapeutic exercises.	3.71	3.72	14.85
T076.	Select points on extremities to treat conditions occurring in the center.	3.78	3.68	14.74
T126.	Determine authenticity and purity of herbs and herbal formulas.	3.30	3.61	14.69
T122.	Select or develop herbal formulas based on treatment principle (tonify, sedate, harmonize).	3.31	3.62	13.93
T084.	Select Extra points.	3.67	3.56	13.58
T074.	Select points to balance point distribution (e.g., right and left, above and below).	3.49	3.42	13.32
T079.	T080. Select Front-Mu and Back-Shu points.	3.53	3.51	13.24

Content Area 3: Treatment, continued

	Task	Mean Frequency	Mean Importance	Task Criticality Index
T123.	Select or develop herbal therapies (external or internal) that complement acupuncture treatments.	3.27	3.53	13.23
T130.	Label packaging containing herbal prescriptions following legal guidelines.	2.97	3.18	13.16
T093.	Select auricular points.	3.38	3.40	12.98
T117.	Perform cupping techniques.	3.43	3.48	12.97
T121.	Determine type of herbal therapy indicated for the patient (e.g., powder, granular, raw herb, decoction, patent, topical).	3.20	3.39	12.85
T131.	Prepare herbs following safety guidelines.	2.85	3.12	12.79
T087.	Select Yuan-Source points.	3.44	3.43	12.78
T080.	Select points along the Muscle channels.	3.41	3.48	12.73
T075.	Select points from Yin and Yang channels to balance treatment prescription.	3.35	3.38	12.61
T099.	Select trigger points.	3.28	3.36	12.51
T083.	Select Confluent points of the Eight Extraordinary channels.	3.37	3.39	12.35
T119.	Perform manual therapy (e.g., Tui Na, acupressure).	3.15	3.24	12.19
T082.	Select Five Shu (Five Transporting) points.	3.34	3.40	12.14
T073.	Select points using mirroring methods (e.g., elbow-for-knee, hip-for-shoulder, ankle-for-wrist).	3.27	3.34	12.09
T114.	Perform electrotherapy (e.g., electroacupuncture, electrostimulation, TENS).	3.08	3.30	11.84
T081.	Select lower He-Sea points.	3.30	3.31	11.78
T088.	Select Xi-Cleft points to treat acute conditions.	3.21	3.29	11.36
T089.	Select Eight Influential points.	3.18	3.22	11.19
T092.	Select scalp points or areas.	3.03	3.28	11.08

Content Area 3: Treatment, continued

	Task	Mean Frequency	Mean Importance	Task Criticality Index
T086.	Select Luo-Connecting points.	3.18	3.20	11.02
T095.	Select Command Points.	3.07	3.18	10.86
T077.	Select points that are centrally located to treat conditions occurring in the extremities.	3.03	3.19	10.84
T096.	Select Empirical points.	3.04	3.15	10.55
T085.	Select Intersecting or Crossing points.	3.02	3.12	10.30
T091.	Select points based on dermatome map.	2.88	3.07	9.96
T097.	Select motor points.	2.78	3.01	9.85
T094.	Select points according to the Five Element theory.	2.65	2.88	9.16
T115.	Apply ear seeds or ear tacks.	2.68	2.86	9.04
T118.	Perform Gua Sha techniques.	2.49	2.84	8.60
T098.	Select Four Seas points.	2.61	2.81	8.56
T113.	Apply moxibustion techniques.	2.28	2.83	8.17
T100.	Select Entry Exit points.	2.27	2.59	7.11
T102.	Select Window of the Sky points.	2.05	2.43	6.21
T101.	Select Ghost points.	1.82	2.26	5.34

Content Area 4: Professional Responsibilities

	Task Statement	Mean Frequency	Mean Importance	Task Criticality Index
T148.	Dispose of needles, contaminated materials, and containers in accordance with OSHA and Cal/OSHA guidelines.	4.78	4.79	23.12
T149.	Maintain professional competency in accordance with legal and ethical guidelines.	4.75	4.77	22.85
T146.	Practice clean needle technique (CNT).	4.75	4.72	22.76
T139.	Maintain patient privacy and confidentiality in accordance with legal requirements.	4.73	4.73	22.76
T147.	Maintain a clinical environment that adheres to OSHA and Cal/OSHA requirements and clinical standards.	4.69	4.68	22.29
T145.	Implement measures to safely perform acupuncture and adjunct treatments on patients .	4.66	4.70	22.28
T153.	Safeguard patient rights to dignity in accordance with legal and ethical guidelines.	4.65	4.71	22.19
T138.	Maintain patient records in accordance with legal requirements.	4.68	4.63	21.98
T142.	Obtain informed consent for treatment in accordance with legal and ethical guidelines.	4.62	4.65	21.93
T144.	Implement standard procedures to prevent disease transmission and minimize risk of infection.	4.56	4.68	21.87
T152.	Establish and maintain professional boundaries in accordance with legal and ethical guidelines.	4.59	4.65	21.75
T137.	Document assessment, treatment, and patient response to treatment in accordance with legal and professional standards.	4.59	4.57	21.39
T143.	Assess patient capacity to make health care decisions.	3.93	4.32	17.57

Content Area 4: Professional Responsibilities, continued

	Task Statement	Mean Frequency	Mean Importance	Task Criticality Index
T151.	Evaluate potential conflict of interests for impact on patients or therapeutic process in accordance with legal and ethical guidelines.	3.55	4.36	15.93
T150.	Recognize and report situations and behaviors that constitute unprofessional conduct in accordance with legal and ethical guidelines.	3.00	4.42	13.48
T140.	Identify and report cases of known or suspected abuse and neglect.	2.50	4.42	11.12
T141.	Identify and report cases of communicable disease.	2.40	4.21	10.47