

# The Clinical Relevance and Utilization of Acupuncture in Today's Evidence-Based World

**Paul A. Jaskoviak, BS , DC, Dipl Med Ac, FIMA, DCRC, DACAN, CCSP, FICC**







### Chiropractic Experience:

Graduated National College of Chiropractic – 1975

Dean of Postgraduate Studies – National College of Chiropractic

Dean of Postgraduate Seminars - Parker College of Chiropractic

Dean of Postgraduate Division, Texas Chiropractic College

Wrote the first book on Chiropractic Physical Rehab

Constructed one of the first CA training programs in the US

Over a 1,000 lectures in 48 States and Numerous Countries

Helped construct the first Neurology and Acupuncture Diplomate Board exams

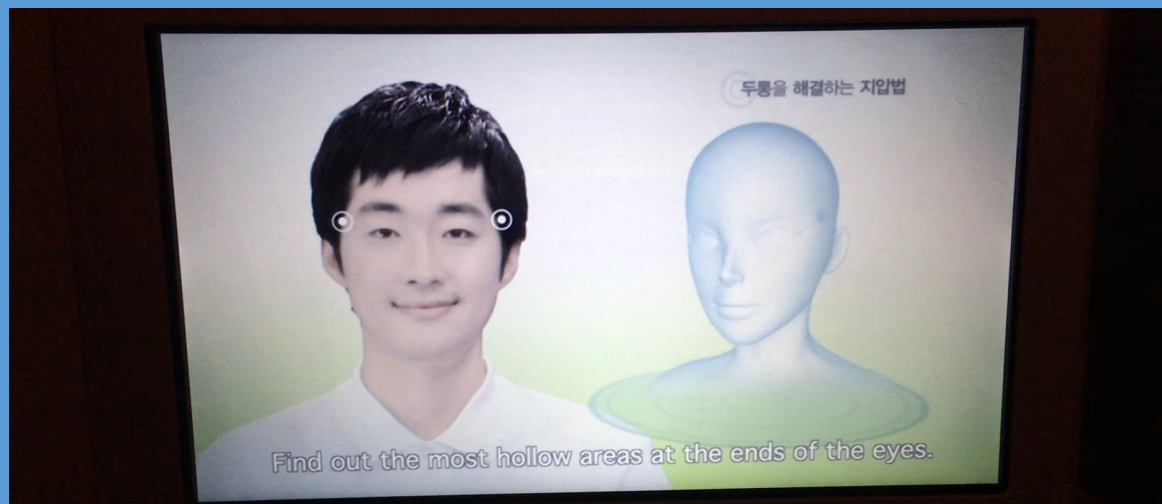
One of the first to publish a stroke research in the profession

### • Acupuncture experience:

Published two research manuals in Acupuncture at NUHS

- Taught the first Acupuncture Course offered by a Chiropractic College
- Educated in China, and studied various ways of using acupuncture including Japanese, Korean, and Chinese systems
- Studied under Wu Wei Ping, Amaro, and others
- Provided testimony throughout the to have Acupuncture included in Chiropractic state scopes of practice

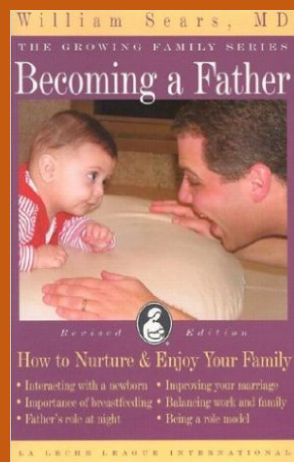
# Introduction of Acupuncture into the United States



# RISK MANAGEMENT

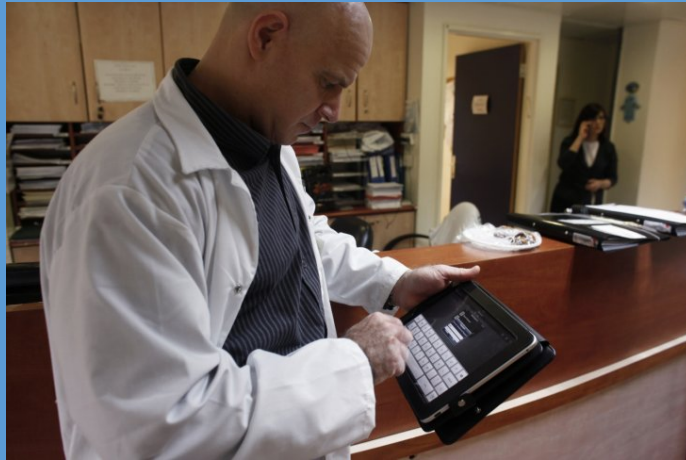
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The real keys to avoiding litigation start with the doctor/patient relationship



- TOUCH
- LOOK
- MAKE MENTAL CONTACT

“What you gonna do if they come for you?”



The party's  
over



- It's not that bad
- It's business ...
- Don't panic
- Don't close the doors
  
- Let's start at the beginning

## What do you do if you are placed on notice

- 1) Immediately call your malpractice carrier
- 2) Be sure that your complete file on the patient is secured
- 3) You may discuss with your staff: but don't keep notes
- 4) DO NOT:
  - Alter your records in any way
  - Call the patient, the patient's attorney, other DC's that you may want to have as experts
  - Write things down – or post on any social media
- 4) Follow your attorney's instruction
- 5 Relax – it's business

## What's are common mistakes

- Stupid is as stupid does
  - "Your stylist cut my ear!!"
- How about three free visits?
- Your office staff is your first defense – TRAIN YOUR STAFF

## What are the common allegations

- In general – the most common allegations in cases of malpractice in general are:
  - Herniated discs
  - Cerebrovascular accidents
  - Misdiagnosis
  - Aggravating of pre-existing conditions
  - Failure to refer
  - Vicarious liability: --- up to 10%  
(Vicarious liability is a legal doctrine that assigns liability for an injury to a person who did not cause the injury but who has a particular legal relationship to the person who did act negligently. It is also referred to as imputed Negligence.)

## Laws and Regulations Governing Chiropractic Medicine

- Use of Acupuncture: 38-7; 64B2-17.003
- 100 hour Board Approved Course - pass exam
- Notify Board of Chiropractic Medicine of your Certification and that you have passed the examination administered by the Department of Health
- Regarding acupuncture coverage – make sure you notify your malpractice company and provide them with your certification/documentation to use acupuncture in your state
- As an example, NCMIC excludes coverage under the DC's policy but will add the coverage with an endorsement when documentation is received verifying they are legal to practice acupuncture



## Acupuncture – Board Definition

- Acupuncture is defined as a modality of diagnosing and treating physical conditions by stimulating various points on the body or interruption of the cutaneous (skin's) integrity by insertion of a needle to secure a reflex relief of the symptoms by nerve stimulation.

## Meridian Therapy

- Stimulation of points
  - Needling
  - Non-needling
- Physical therapy procedures: heat, cold
- Psychotherapy
- Herbalism

## State Law does NOT allow acupuncture to be used in the treatment of:

- Cancer
- Leukemia
- Tuberculosis
- Syphilis
- Gonorrhea
- Hepatitis
- Anthrax
- Diphtheria
- Hansen's Disease
- Hookworm Disease
- Malaria
- Rabies
- Typhoid Fever
- Typhus Fever
- AIDS

## Board Required Procedures

- 1) Non-disposable needles MUST be sterilized
- 2) Needles must be individually packaged
- 3) Destroy following patient dismissal or place in permanent file
- 4) Use only non-corrosive needles
- 5) Use generally acceptable cleansing agents

## ESSENTIAL ELEMENTS IN AVOIDING MALPRACTICE

PRACTICE ETHICALLY

DOCUMENT

MANAGE YOUR RISKS

### THE BASICS

- Keep your license up to date
- Always practice within your scope of practice
- License your facility with your state board
- Be certain that you always comply with state and local ordinances
- Pay all appropriate taxes and fees

## Manage your RISKS

- Types of risks
  - Civil Liability
    - 1) Negligence – no intention: requires four elements
      - Didn't protect patient from normal risks
      - Didn't exercise a reasonable standard of care
      - There must be a causal connection between the breach and the resulting injury
      - There must be actual physical or mental injury resulting from the negligence
    - 2) Intentional Torts, e.g. assault
  - Criminal Liability
    - Practicing outside your scope, sexual contact, fraudulent billing
  - Professional Disciplinary (Licensure) Action

## WARNING SIGNS

- Patient posing questions to your staff, but not to you
- Your records are not legible or are obliterated
- Your records are not dated or signed
- No records of informed consent
- Your records do not accurately reflect what took place
- Your staff/you don't record phone calls
- Lots of blank spaces
- You only chart the ABNORMAL
- "Same as before," "same as before," "SAME as before."

In the Office

I'm sure your files  
are in here  
someplace!



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## In the office

- Keep your facilities looking clean AND professional
  - If things are dirty and unkempt – patients notice – A dirty facility may leave the patient with the PERCEPTION that you aren't professional
- Always immediately update changes of address with your board
- Keep your CME hours and specialty hours up-to-date
- Register your facility

- Train your staff

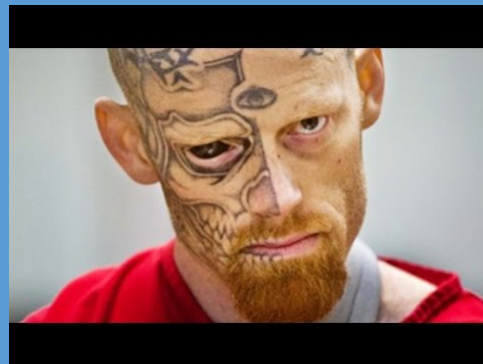
- This is the patient's first contact .... Be sure it's a fabulous first impression!
- Be sure your staff is aware of HIPPA regulations
- Be sure your staff is ALWAYS positive ....and up-beat
- Train your staff in phone call etiquette and in message taking
- Staff represent your first line of defense --- all negative comments need to be brought to you PRIOR to you seeing the patient
- Do NOT allow your staff to ever offer health care advice
- BE PROACTIVE – NOT REACTIVE



Which office would you be visiting? Dress for success!!!



What's your problem today?



## Privacy



- Why are you here Mrs. Smith?
- Be sure to speak up so everyone can hear?

## ETHICS – Values and judgments

### • INFORMED CONSENT

- Everyone has a right to decide what they want you to do to their body
- As per the Council of Colleges of Acupuncture and Oriental Medicine, Informed Consent should contain five salient elements:
  - 1) the working diagnosis
  - 2) the proposed procedure (e.g., acupuncture) and goals of therapy
  - 3) risks and consequences ---- NOT EVERY SIDE EFFECT .... The rule of thumb is to disclose risks which occur more than 1% of the time for a set procedure
  - 4) alternative treatments
  - 5) the risks of NOT being treated .... And alternatives
- Consent should be written, (but may be oral) in the language of the patient
  - Signed is best – but oral approvals should be documented

## HIPPA

- Established in 1996: A major goal of the Privacy Rule is to assure that individuals' health information is properly protected while allowing the flow of health information needed to provide and promote high quality health care and to protect the public's health and well being. The Rule strikes a balance that permits important uses of information, while protecting the privacy of people who seek care and healing. Given that the health care marketplace is diverse, the Rule is designed to be flexible and comprehensive to cover the variety of uses and disclosures that need to be addressed.
- Penalties range from \$100 to \$50,000 per violation on up to \$1,500,000 per calendar year
- Those who knowingly disclose private information for personal gain may have the opportunity to spend up to 10 years imprisoned.

## Practice in an ethical fashion

- Avoid: abject stupidity!





## SEXUAL MISCONDUCT

- Verbal
  - You're really looking good today
  - You look 'hot'
  - So what do you like to do in the bedroom that brought on your low back pain?
  - I'll be at Joe's Bar and Grill Saturday night, just in case you're not busy
- Visual
  - Suggestive gestures, touches
  - Kissing or fondling
  - Physical acts that could be interpreted to be of a sexual nature

## CONSENT is NOT a defense

- Great meeting you here – your back seems better after your treatment this morning!
- YOU MAY date a patient if you've waited a minimum of one (1) year after they've been discharged



## Other ethical considerations

### Social media

- Don't friend patients
- Don't violate privacy rules
- Avoid political comments
- YOU are held to a higher standard.
- YOU are a physician

### On-line posts

- Be careful with your advertising
- Be sure you understand your state board rules
- Avoid sexual misconduct online
- DON'T offer medical advice
- Be careful when posting articles
- Be sure your web-site is professional

## The goal of your exam is to arrive at an appropriate working diagnosis AND to DOCUMENT everything

- Even if you treat using 'Five Element Theory,' you are still obligated to perform a complete physical exam
  - 1) Patient completes basic information form (possibly on-line)
  - 2) Elements of a good exam include family history and current and past patient history. Work related events and exercise; activities of daily living may be significant.
  - 3) Follow SOAP format
  - 4) Don't be shy about writing things down
  - 5) When performing acupuncture you may want to incorporate elements of the Oriental exam

"Good, comprehensive, routine record entries are not only vital to minimizing your risk of having problems with insurance companies, attorneys, peer review committees, and the Board of Chiropractic Medicine, but they also facilitate good communication with insurance companies and other third party payers."

## ELEMENTS OF THE EXAM AND HISTORY

- Initial history – may be done on line – certainly prior to you first seeing patient
- First time you see patient: BP, Pulse, Respiration, temperature, height, weight, medications, secondary complaints
- Past history, family history, current complaint: R/O underlying systemic issues. Elucidate the mechanism of onset, the symptoms, prior care, and ADL (including occupational issues) that may be contributory
- Physical Exam – (lab or imaging when justified) and Working Diagnosis
- SOAP (subjective, objective, assessment and plans)
- LISTEN – LISTEN - LISTEN
  
- EHR – Electronic health records – be sure to append

## INFORMED CONSENT

- Can only take place after the exam, the working diagnosis and you've laid out the treatment plans
- Remember - Risk Managements means minimizing risks!
- Important elements
  - Your working diagnosis
  - The objective of your treatment – what your treatment consists of
  - Risks and consequences of not getting the treatment
  - Discuss alternative treatments
  - Discuss the prognosis if no treatment takes place

## Elements of the patient visit

- If EHR – be sure to supplement
- Review – notate changes or lack of changes – since initial visit
- DOCUMENT – treatment given – response to treatment
- Be sure to note clinical progress
- Use SOAP notes

## Forms that are required

- Informed consent – if verbal – be sure to document. Also document if you give patient home instructions, brochures or have them view videos
- Initial history form
- Exam forms
- Any ancillary reports, e.g. imaging reports
- Your working diagnosis
- Day-to-day entries

## KEEP YOUR RECORDS

- For at least four (4) years from the date of the patient's last appointment. Required by Florida law.
- For liability purposes, seven (7) years is recommended for adult patients and at least eight (8) years for pediatric patients.
- Records may NOT be altered – however there may be times when they need to be corrected

## Medical Records

- 1) Do you need to have?
  - A) records of drugs dispensed by other practitioners
  - B) hospitalizations
  - C) a key for all abbreviations
  - D) reports of consultations with others
  - E) all of the above

## True or False

- All entries in the medical records must be DATED.

Late entries into the medical records are permitted.

- The treating physician must be identified in the records by initials and/or printed name.

- Daily records should be in SOAP note format.

## Out of office issues



## Issues specifically pertaining to acupuncture

Be sure you can explain acupuncture to your patients  
 Be sure your staff understands acupuncture

- The more a patient understands, the more receptive they will be
- Gear your discussions to include evidence-based information in conjunction with a little of the Oriental basis for acupuncture

It will just be one "stick"





## Acupuncture Procedures

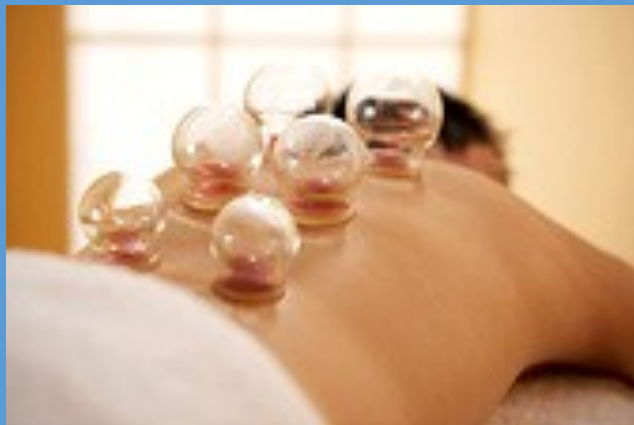
### Ways to stimulate points

- Needling
- Electrical
- Finger pressure
- Moxibustion
- Cupping
- Laser
- Magnets



## Cupping

UGH!!



## Allegations involving Acupuncture

- In general: “43 “significant” events were reported giving a rate of 14 per 10,000.”
- White in 2004 reported a serious risk percentage of only .55 per 10,000 individual patients
- In general – all cases had cleared within one week, except for one incident of pain that lasted two weeks and one of sensory symptoms that lasted several weeks.
- As a general rule – acupuncture is extremely safe
- A total of 2135 minor events were reported
  - Bleeding, aggravation of symptoms
  - Others include: pain at the sites of insertion, tiredness, fainting, and vomiting

## Significant events associated with acupuncture

- Lao et al performed a study from 1965-1999 and reported just 202 incidents
- Pneumothorax ( as of 2015, 4 deaths had been reported)
- Cardio-vascular lesions
- Hemorrhage or hematomas including the CNS
- Infections (primarily hepatitis)

## A review of the serious and minor complications associated with acupuncture

- 1) A 64 year-old healthy male was admitted with shortness of breath
- 2) An 82-year old female with COPD was admitted with severe shortness of breath
- 3) A 66 year-old male being treated for chronic back pain experienced a severe sharp pain stabbing from his central chest through to his back. He also experienced shortness of breath
- 4) Following acupuncture a 54-year old female complained of sudden weakness on the entire left side of her body
- 5) Penetration of the Stomach Cavity after acupuncture
- 6) Case reported in The American Chiropractor Magazine

### Points to be careful with: pneumothorax

**GB 21** - midway between C7 and the highest point of the shoulder

**BL 13** - 1 ½ cun lateral to the lower border of the SP of 3<sup>rd</sup> thoracic

**SI 9** - 1 cun superior to the posterior axillary fold



Be careful with tall thin individuals, or patients with COPD, and with smokers

## Accidental injury to other organs

- Central Nervous system injury have been reported: Be cautious with GV (DU) 15 - between SP of C7 and T1; and GV 16 – just below the EOP
- Heart injuries have been reported
- Before inserting needles, be certain that the body's internal organs are NOT enlarged

## Infections

- Local or systemic
- The most common – scabs form at the site of needle insertion if a patient is on cortisone – wait 30 days
- Failure to wash your hands OR to wear gloves could create a situation where you cross-infect a patient
- A patient who is immune-suppressed MAY be more prone to infections

## Bleeding and bruising

Be careful with the following:

- Needling of the scalp
- Needling of the ear
- Patients on Blood thinners or anti-coagulants
- When needling any acupuncture point over or next to major blood vessels e.g. Lu 9
- Oh yes – did someone say - Cupping?



## Moxibustion

- Mugwort – *Artemisia vulgaris*
- Concerns are:
  - burns
  - allergic reactions
  - bruises
  - cellulitis
- Take care around sensitive areas of the body such as the face and hair line. Also be careful of falling ashes.



## Pain and Needle sensation

Poor needle insertion technique plays a part

There may be some discomfort if alcohol is still on the skin

De qi or Tae chi sensation

Avoid needling directly into a nerve

Caffeine may attenuate the individual's perception of pain – however it may also heighten anxiety which is associated with increased perception of pain



## Other considerations

1. Be careful when needling points that lie over or next to major blood vessels e.g., LU 9, ST 9, ST 12, ST 13, ST 42, SP 11, HT 1, LV 12
2. Fainting - .027% actually faint
3. Take caution with children or the aged
4. Be careful with debilitated patients
5. LIMIT the number of needles
6. Needle disposal

## What if the needle gets stuck

You have several options:

- insert a second needle, a third needle, a fourth needle!!!
- Stimulate the tip of the needle with low volt current
- Insert the needle deeper
- Massage
- Do nothing – Wait!



## What if the needle breaks off

Hopefully you'll avoid this lucky event; however the risk is minimal



## Failure to remove needles

You could always try charging the patient a little extra if they take your needles home with them



## Contraindications to acupuncture

- Patients who have been on steroids (wait 30 days)
- Patients on blood thinners or anticoagulants (hemophiliacs)
- LI 4, SP6, the big toe, abdomen or low back during pregnancy
- Patients on recreational drugs or intoxicated patients
- LV 3 – may trigger an epileptic seizure
- LI 4 – may trigger syncope
- No electrical stimulation if patients have a pacemaker
- Be cautious with young children under 6
- Skin that is currently inflamed OR has an active lesion
- The NIH says not to “give injections” if the skin is burned, hardened, inflamed, swollen or damaged
- BE SURE NOT TO MASK AN UNDERLYING SYSTEMIC COMPLAINT



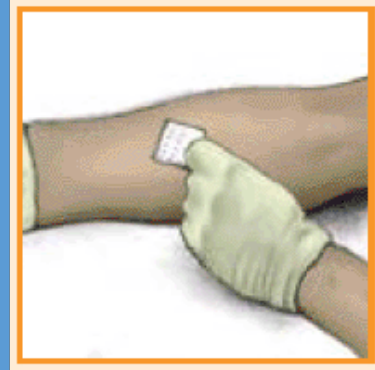
## Skin preparation

NIH – “Since the skin is the body’s first defense against infections, it must be cleansed thoroughly before a needle is inserted.”

Staphylococcus aureus  
Streptococcus pyogenes  
Coryneform bacteria

Guidelines (NIH, CDC, and WHO)

1. The skin must be clean – follow clean needle technique
2. Practitioner’s hands must be clean
3. Standard practice is to use 70% isopropyl alcohol swabs: a five second application is 82-91% effective against microbes
4. However – the CDC (2002) stated that unless the skin was dirty or contaminated – alcohol, soap and water, or chemical agents were of no significant value in preventing infection.



## Other Considerations

### Human Immunodeficiency Disease (HIV)

To date there are NO confirmed cases of HIV transmission following an accidental needle stick. One case has been reported in Thailand.

**Hepatitis A** – the concern here is contaminated blood on the practitioner’s hand.

**Hepatitis B** – this is a blood-borne pathogen – it is spread by way of contact with blood and body fluids. Acupuncturists have a risk of exposure to HBV if not vaccinated. There’s a 6-30% rate of transmission after a single needlestick exposure to a HBV-infected patient. It remains active on the skin for about a week.

OSHA requires all employers to offer HBV vaccination to personnel performing invasive procedures or those cleaning contaminated equipment.

# Human Immunodeficiency Disease (HIV)

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THE  
END



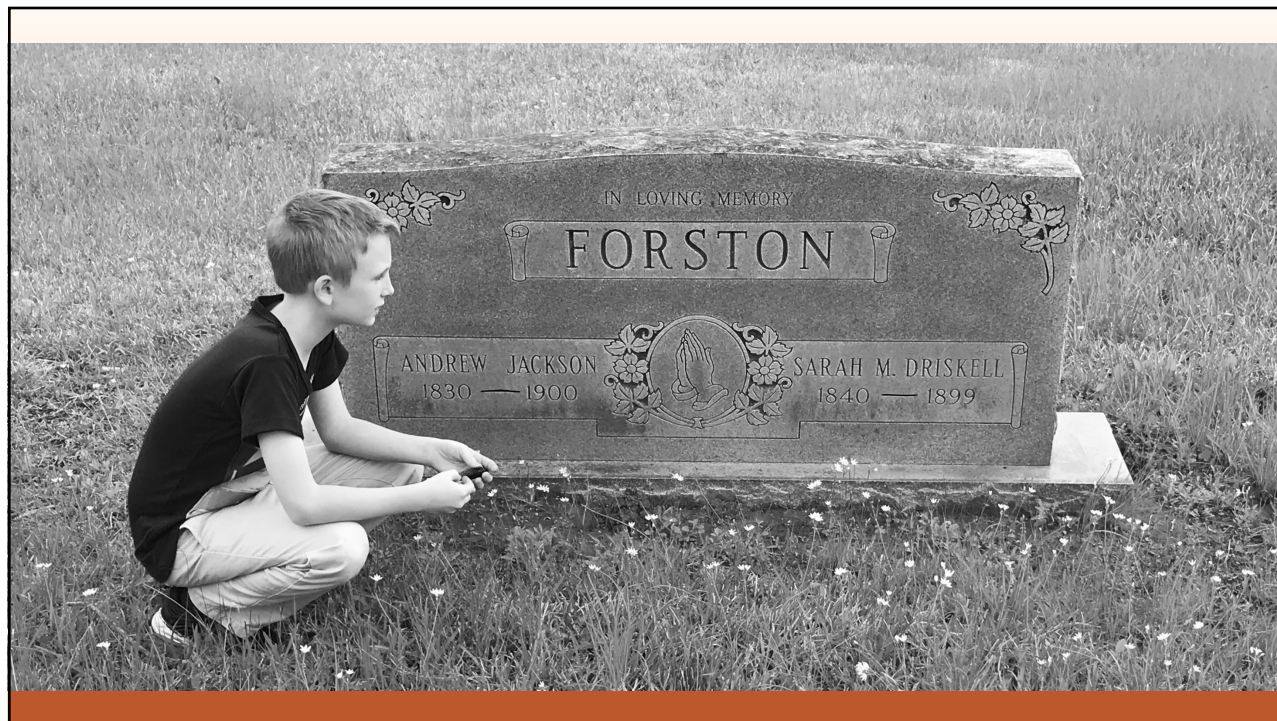
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# Introduction of Acupuncture into the United States

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## Acupuncture Certification (Most States)

100 hours

Complete course

- Requirements of course
- Attendance
- Paper – 4 hours
- Pass final exam

NBCE Exam

Acupuncturists are required to have a minimum of 1725 hours of acupuncture training, before they can sit the exam from the National Certification Commission for Acupuncture and Oriental Medicine

## TBCE New Acupuncture Laws Effective December 5, 2018

Texas Administrative Code	
Title 22	Examining Board
Part 3	Texas Board of Chiropractic Examiners
Chapter 78	Scope of Practice
RULE §78.14	Acupuncture

(a) Acupuncture, and the related practices of acupressure and meridian therapy, includes methods for diagnosing and treating a patient by stimulating specific points on or within the musculoskeletal system by various means, including manipulation, heat, cold, pressure, vibration, laser, ultrasound, light electrocurrent, and the insertion of acupuncture needles or solid filiform needles for the purpose of obtaining a bio-positive reflex response by nerve stimulation.

(b) A licensee shall practice acupuncture **only after obtaining a permit** from the Texas Board of Chiropractic Examiners (Board).

(d) A licensee with an acupuncture permit cannot delegate the performance of acupuncture.

(i) A licensee's advertising may include the terms "Board Certified" or "Board Certified in Chiropractic Acupuncture" if it also clearly identifies the nationally recognized certifying board and credentials

## TBCE New Acupuncture Laws (cont)

Effective December 5, 2018

Texas Administrative Code	
Title 22	Examining Board
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RULE §78.14	Acupuncture

(e) Requirements for an acupuncture permit:

(1) **On or after the effective date of this rule**, a licensee may receive an acupuncture permit from the Board by completing at least one hundred (100) hours of training in acupuncture and passing the National Board of Chiropractic Examiners' examination.....

(2) **A person who became a licensee after January 1, 2010**, and before the effective date of this rule, who has been practicing acupuncture in compliance with previous Board rules, shall have until September 1, 2019, to obtain an acupuncture permit from the Board by passing the National Board of Chiropractic Examiners' standardized certification examination in acupuncture and completing 100 hours of acupuncture training.

(3) **A person who became a licensee before January 1, 2010**, shall have until September 1, 2019, to obtain an acupuncture permit from the Board by having:

## TBCE New Acupuncture Laws (cont)

Effective December 5, 2018

Texas Administrative Code	
Title 22	Examining Board
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Chapter 78	Scope of Practice
RULE §78.14	Acupuncture

(e) Requirements for an acupuncture permit:

(3) **A person who became a licensee before January 1, 2010**, shall have until September 1, 2019, to obtain an acupuncture permit from the Board by having:

(A) Successfully completed and passed an examination in a one hundred (100) hour training course in acupuncture; or

(B) Successfully completed and passed either the National Board of Chiropractic Examiners' standardized certification examination in acupuncture or the examination offered by the National Certification Commission of Acupuncture before the effective date of this rule; or

(C) Successfully completed formal training along with providing a statement to the Board of having practiced acupuncture in clinical practice for at least ten years before January 1, 2010, and is in good standing with the Board and the regulatory entities of the other jurisdictions in which the licensee is licensed. The Board may audit any statement for accuracy.



## Acupuncture Continuing Education Requirements

(4)(f) A licensee permitted to practice acupuncture must complete a minimum of eight (8) hours in Board-approved acupuncture courses every biennium.

## What about Us?



Subjects	Class Hours	Class Hours
	Chiropractic Students	Medical Students
Anatomy	540	510
Chemistry	165	325
Diagnosis	630	325
Microbiology	120	115
Neurology	320	110
Obstetrics	60	150
Orthopedics	210	155
Pathology	360	400
Physiology	240	325
Psychiatry	60	145
Radiology	360	150
<b>HOURS</b>	<b>3,065</b>	<b>2,710</b>
	<b>ADDITIONALLY REQUIRED STUDIES</b>	
	Spinal Manipulation	Pharmacology
	Nutrition	Immunology
	Physiotherapy	General Surgery
	Advanced Radiology	
<b>TOTAL HOURS</b>	<b>4,485</b>	<b>4,250</b>

## My patient Paula ....

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## The relationship between Chiropractic and Acupuncture

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The Emotional Component of the Subluxation Complex

When to Adjust

U. of VA – The brain is related to the immune system

When acupuncture is indicated

## Science-Based vs. Yin/Yang and Five Element theory

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## How to explain Acupuncture to your patients

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Traditional

Oriental

For centuries in the Orient acupuncture consisted of:

- Specific point stimulation

Science - based

- Physical modalities (such as heat, cold and massage)
- Counseling (psychotherapy)
- Herbalism (nutrition)

## Meridian Therapy

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### Definitions

Meridian therapy is the 'evaluation' and treatment of meridians by stimulation of points or combinations of points on the meridians.

Barefoot doctors are generally considered to be non-medical para-professional individuals who learned the art of acupuncture like a trade

## TAO

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Of heaven, of earth, and of man

Taoism – the pathway of life – the secret to longevity

Not living one's life in accordance with the principles of the tao leads to a susceptibility to dis-ease by creating an imbalance in the original or fundamental chi – the protecting chi

## CHI/QI

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This is the life force energy

- Protecting chi – the original or fundamental chi
- Nourishing chi – found within the meridians: horary cycle

### **The basics of Classical Oriental Diagnosis & the causes of dis-ease**

- 1) Internal Factors** – not living in accordance with the principles of the TAO: PREDISPOSED – this is an imbalance in the protecting chi
- 2) External Factors (Ten)**
- 3) Symptoms**

## Ten External Factors

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An imbalance in the meridians: too much or too little energy (an excess or a deficiency of chi)

**Factors (10):** climate, emotions, excess food and drink, physical labor, unregulated sexual activity, epidemics, wounds/bites, worms/infestations, poisons, heredity.  
*Only effects an already weak body.*

All disease is caused or associated with a disturbed harmony between the yin and yang. If yang becomes dominant in an organ, the organ becomes hyperactive; if yin becomes dominant in an organ, then the organ becomes hypoactive.

## Climate:

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- wind (wood) – cough, headache, rhinitis
- cold (water) – fevers, headache, body pain
- summer heat (fire) – parched mouth, sweating, palpitation
- dampness (earth) – nose blocked, dyspnea is upper damp; edema in ankles and vaginal discharge is lower damp; exterior damp is hot flashes, sweating, malaise and generalized edema; interior dampness is fullness in chest, jaundice, abdominal swelling and diarrhea
- dryness (metal) – headaches, coughing, bloody sputum

## Emotions – Psychosomatic:

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Excess of

- Joy – heart
- Anger – liver
- Anxiety – lungs
- Concentration – spleen
- Grief or sorrow – Triple Heater or Heart Constrictor
- Fear – kidneys
- Fright – mainly the heart

## Other 10 External Factors

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- Excess of food and drink
- Physical Labor
- Unregulated sexual activity
- Epidemics
- Wounds and insect bites
- Worms and Infestations
- Poisons
- Heredity

## Symptoms

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Excess of energy – pain, inflammation, hyperactivity or hyperfunctioning

Deficiency of energy – edema, conditions of body organs

## Dis-ease

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1) PREDISPOSED

2) EFFECTED BY ONE OF 10 EXTERNAL FACTORS

IMBALANCES OF ENERGY IN THE MERIDIANS:

- EXCESS
- DEFICIENCY



## YIN and YANG

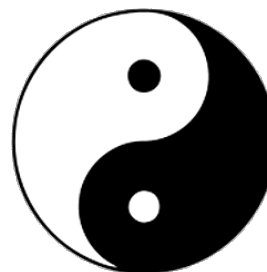
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**YIN** – the yin meridians are referred to as Zang organs

- Cloudy, negative, passive, front, inside of an organ, inside of a cell, lower, parasympathetic symptoms, and female

**YANG** – the yang meridians are referred to as Fu organs

- Sunny, positive, active, back, outside of an organ, outside of a cell, upper, sympathetic symptoms, and male



The definitions can be carried out to some length, e.g., the sunny side of a hill is yang and the shady side is yin .....

## Criterion for a healthy life

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- Life essences
- Life force energy
- Shen (religious term for God or spirit)

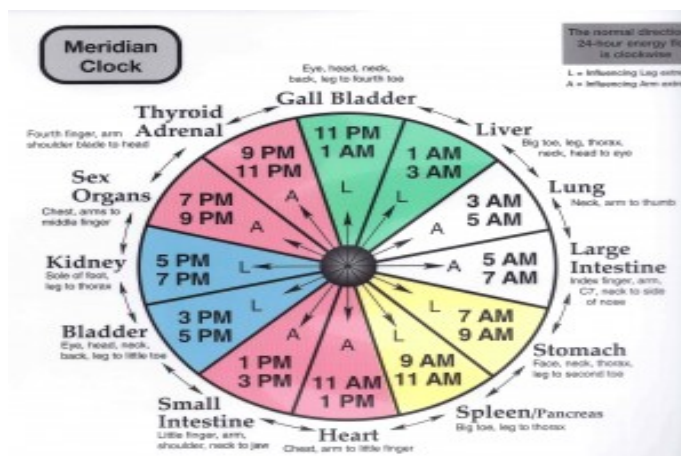
# MERIDIANS

12 bilaterally paired meridians

8 extraordinary meridians including the two unilateral meridians

Divergent meridians – connect to interior

## Meridian Cycle

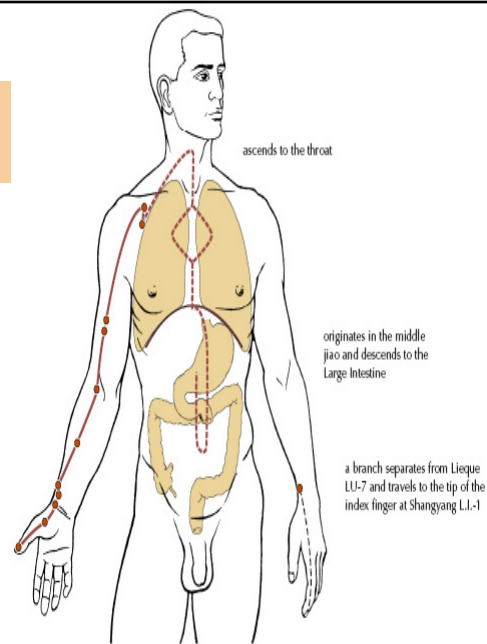


## Lung meridian (LU)

ANTERIOR – YIN 3-5 AM

Problems related to the respiratory system, edema (especially pitting edema), cough, dyspnea, asthma, sore throat, common cold

Conditions associated with the lungs



## Large Intestine (LI)

POSTERIOR – YANG 5 AM – 7 AM

Pain in the upper extremity, head and neck

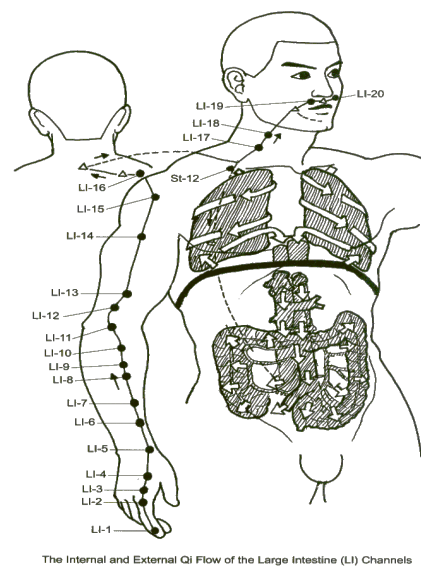
Pain in the gastrointestinal tract

Dermatological complaints

Toothache

Pain along the course of this meridian

This meridian crosses to the opposite side!



## Stomach (ST)

POSTERIOR – YANG 7 AM – 9 AM

Tonification

Tonifies diseases that occur in the GI tract

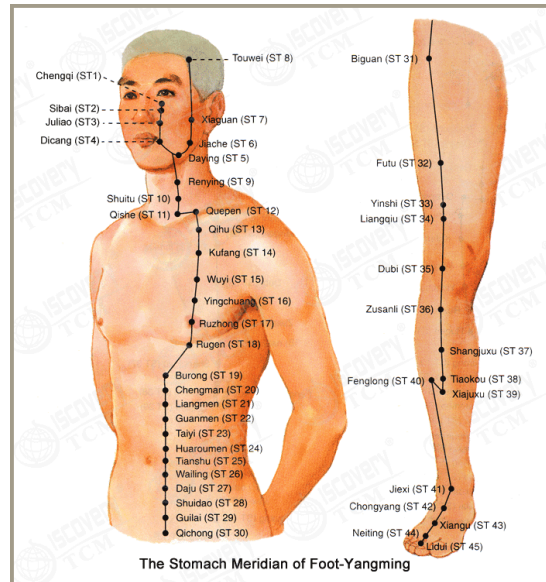
Pain that radiates from the back to the front of the body

Cellular elements of the blood

Vomiting

Pain along the course of the meridian

Facial Nerve Paralysis



## Spleen (SP)

ANTERIOR – YIN 9 AM – 11 AM

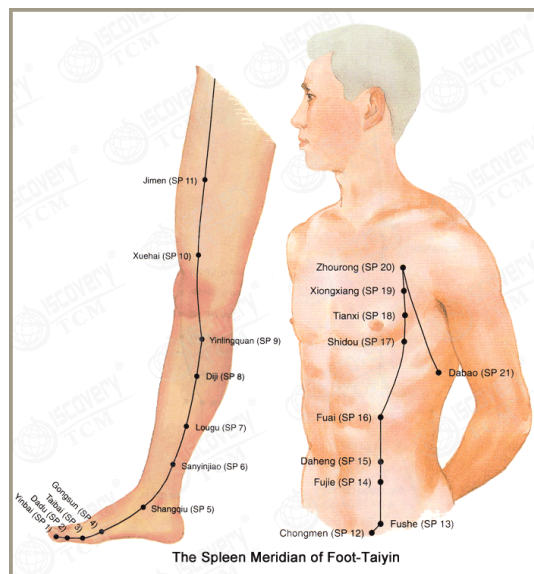
Diseases associated with female complaints  
e.g. menstrual complaints, menopause

Urinary Problems

Some endocrine disorders

Pain or conditions of the tongue

Abdominal distension



## Heart (HT)

ANTERIOR – YIN 11 AM – 1 PM

Palpitations

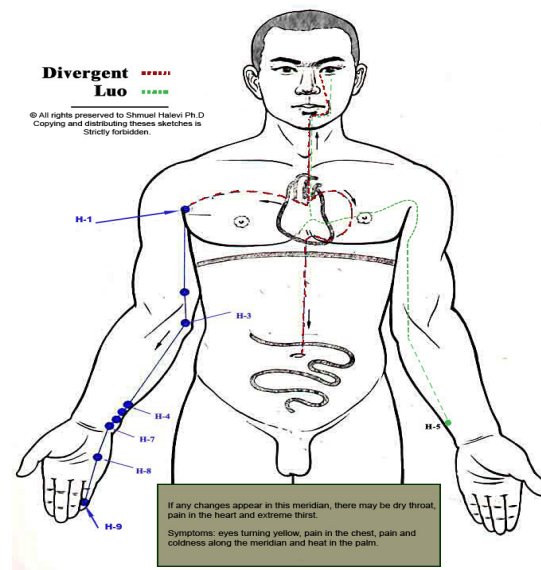
Hypertension

Angina

Nervousness, depression

Hyper .....

Forgetfulness



## Small Intestine (SI)

POSTERIOR – YANG 1 PM – 3 PM

Disorders of hearing

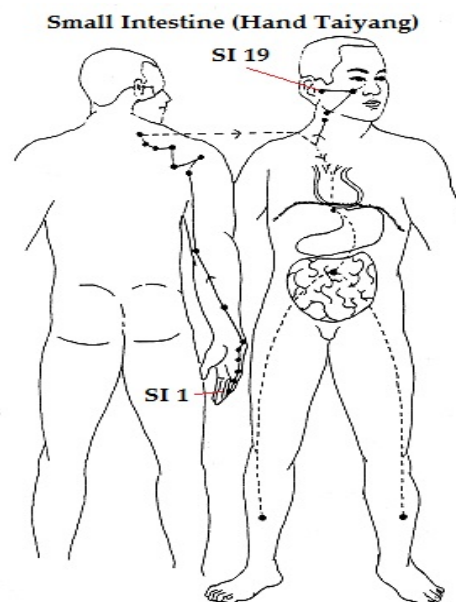
Heart Disease

Pain in the lower abdomen

Deafness

Sore throat

Pain along the course of the meridian



# Bladder/Urinary Bladder (BL)

POSTERIOR – YANG 3PM – 5 PM

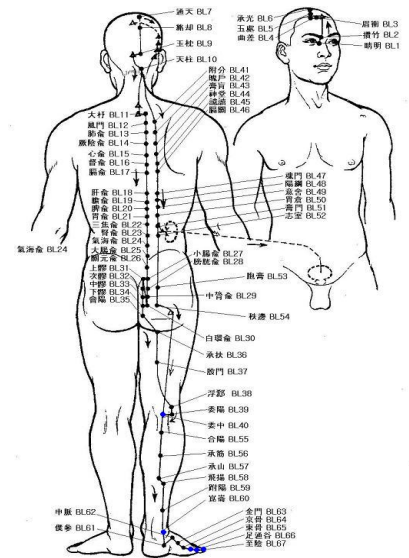
Pain posteriorly

Generalized edema

Problems with fluids e.g. urinary problems

Visual disorders

Association points



# Kidney (KI)

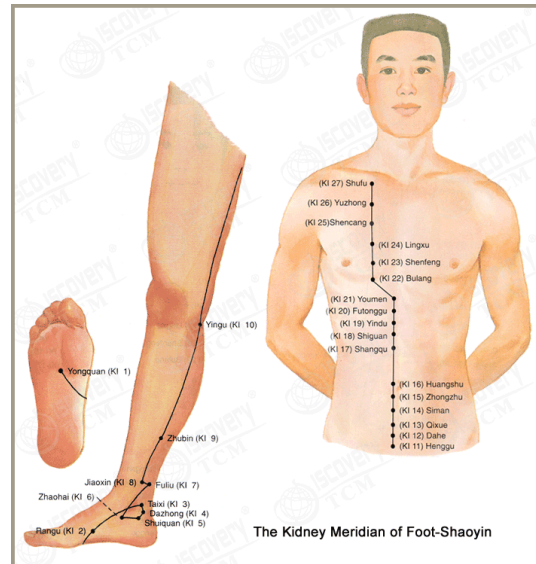
ANTERIOR – YIN 5PM – 7 PM

Major water imbalances e.g. ascites, sweating, dry skin

Impotence

Urinary problems

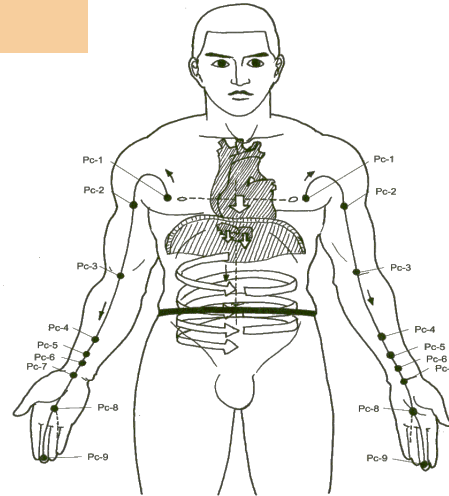
Motor impairment and muscular atrophy of the lower extremity



# Heart Constrictor (HC) or Pericardium (P)

ANTERIOR – YIN 7 PM – 9 PM

Conditions ABOVE the anatomical diaphragm  
e.g. lung disease



The Internal and External Qi Flow of the Pericardium (Pc) Channels

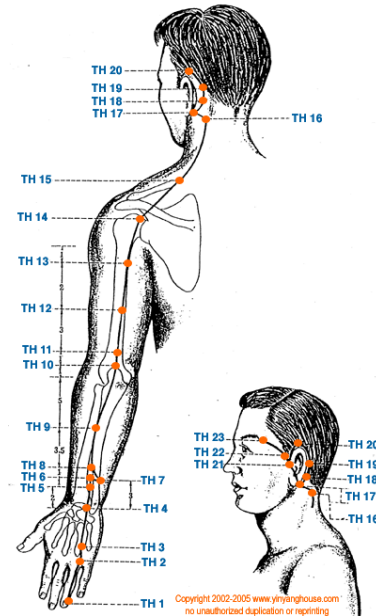
# Triple Heater (warmer) TH

POSTERIOR – YANG 9 PM – 11 PM

Balance to the autonomic nervous system

Balance from the left to the right side of the body

A functional meridian made up of three parts (heaters)



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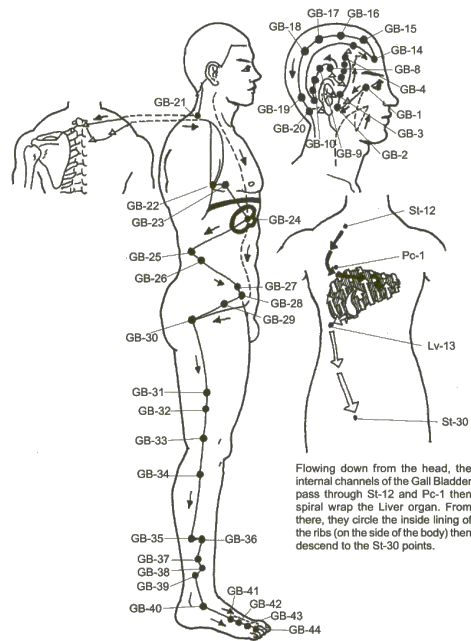
## Gall Bladder (GB)

POSTERIOR – YANG 11 PM – 1 AM

Pain on the lateral aspect of the body

Diseases of the biliary tract

Cranial acupuncture for stroke, paralysis



The Internal and External Qi Flow of the Gall Bladder (GB) Channels

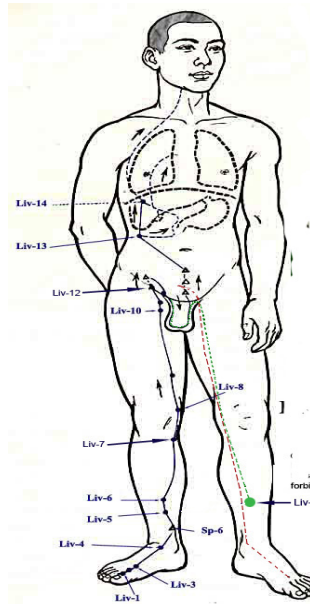
## Liver (LV) (Liv)

ANTERIOR – YIN 1 AM – 3 AM

Detoxification of the body

Enuresis

Urinary complaints

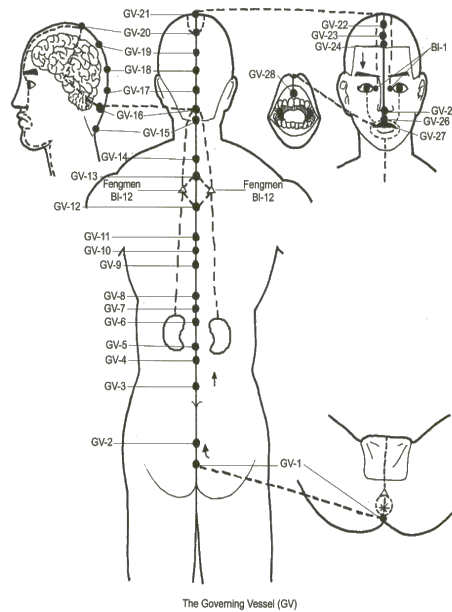




## Governing Vessel (GV) Du Mai/Sea of Yang

YANG – POSTERIOR MIDLINE

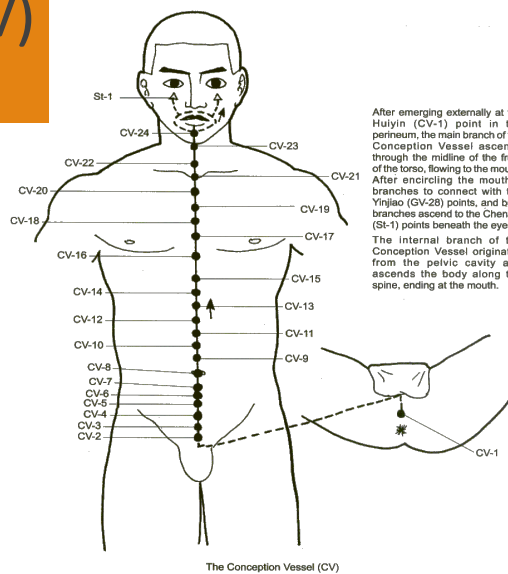
- Febrile diseases
- Mental disorders
- Pain in the back
- Controls the yang meridians
- Originates in kidneys
- Flows up and down kidney meridian
- Master point – SI 3
- Couple point – BL 62 – to Yang Chiao Mai



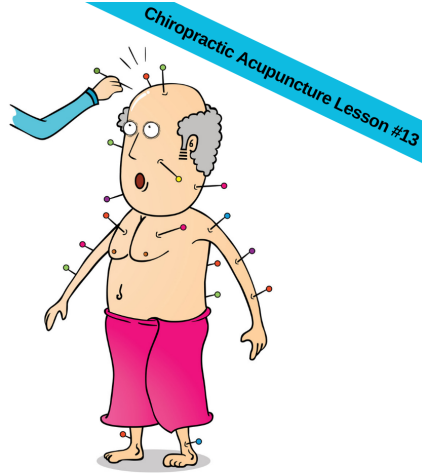
## Conception Vessel (CV) Ren Mai/ Sea of Yin

YIN – ANTERIOR MIDLINE

- Diseases of the urogenital system
- Acute and chronic diarrhea
- Hernia
- Originates in Kidneys (uterus)
- Breathing imbalances
- Master point: LU 7
- Couple point – KI 6 on the yin chiao mai meridian



## THE SCIENCE BEHIND ACPUNCTURE



If you run out of clean acupuncture needles,  
don't improvise with push pins.



## Scientific basis of acupuncture

Acupuncture in the Successful Treatment of Leukoderma – *Am J. Acupuncture*, Vol 8, No. 3, July-September 1980

Revolutionary New Pain Theory and Acupuncture Treatment Procedure Based on New Theory of Acupuncture Mechanism – *American Journal of Acupuncture*, Vol. 11, No4, October – December 1983

Long-Lasting Reduction of Blood Pressure by Electroacupuncture in Patients with Hypertension – *Medical Acupuncture*, Vol. 27, No. 4, 2015

Analgesic effect on primary dysmenorrhea treated with conventional and sham acupuncture at San-yin-jiao (SP 6) – *Zhongguo Zhen Jiu* 2016 Apr;35 (4): 318-22

## Scientific basis of acupuncture (continued)

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Effect of Zusanli (ST 36) Electroacupuncture at Two Frequencies on the Bioavailability of Tc-Sodium Pertechnetate and on Labeling of Blood Constituents in Rats – J. Acupuncture Meridian Stud 2009: 2(2):135-146

Electroacupuncture at Bilateral Zusanli Points (ST 36) Protects Intestinal Mucosal Immune Barrier in Sepsis – Evidence-Based Complementary and Alternative Medicine, Vol. 2015, Article ID 639412

PC acupoint stimulation for prevention of postoperative nausea and vomiting in patients undergoing craniotomy: study protocol for a randomized controlled trial – by Feng and Li

## Pain Control

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➤ Endorphins: 100 times more potent than morphine

➤ Enkephalins

## Endorphins

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First – Stimulate a specific site

The stimulation of specific sites or combinations of sites sends a impulse to the brainstem triggering the release of a complex molecule:

- Beta-lipotrophin/ACTH

## Endorphins

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Based on the site or combination of sites – one or more of several reactions are triggered

Increase or decrease of hormonal levels (male or female)

Increase or decrease of cortisone

Increase or decrease of prostaglandins (associated with inflammation)

And....release of over 200 types of endogenous endorphins which are site specific

## Other factors with Endorphins

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L-Tryptophane is a precursor to endorphin production

Endorphins circulate in the blood stream, cerebrospinal fluid, and gastrointestinal tract for up to 3 days with a peak within 30-45 seconds of treatment commencement

Pomeranz has conducted numerous research studies that document endorphin production

## In triggering endorphins – locate a trigger point or an “Ah shi” point

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- Stimulation occurs with a needle or with a small diameter

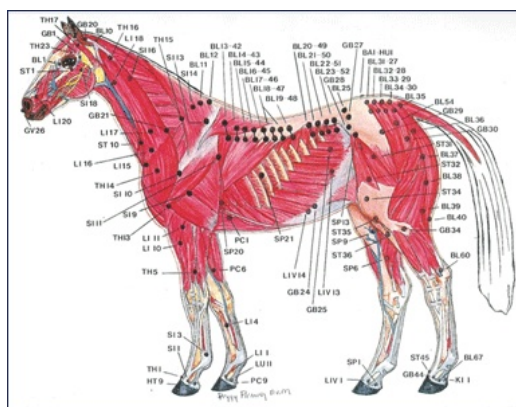
electrode; 3-5 pps; motor stimulation

- Treatment time is 20-30 seconds per site

## Enkephalin

- large myelinated nerve fibers of the skin have an inhibitory effect on the small pain bearing fibers that enter the same segment of the spinal cord
- block out pain – this occurs with high volt therapy at 70-90 pulses per second generally with intensity to patient perception (sensory levels of stimulation) with pad placement directly over the site of the pain OR with interferential therapy in which case pad placement is around the site of the pain and 80-100 pulses per second

## ACUPUNCTURE POINTS



## Gorillas in the Mist

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## Types of points

There are many different types of points, e.g. Local points, Ah Shi points, tonification and sedation points, horary points, connecting points (luo), intersection points, accumulation points (Xi-Cleft), cardinal points, miracle points, moxa points, thermal reflex areas, internal points and amphoteric points (alarm, association, source, akabane, master points)

## Ah Shi Points & Local Points

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- Ah shi points are literally trigger points – these are the main points of focus in Dry Needling
- Local points are points in local area that are treated

## Master Points

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Master points are examples of amphoteric points

2-3 times the energy that other points have

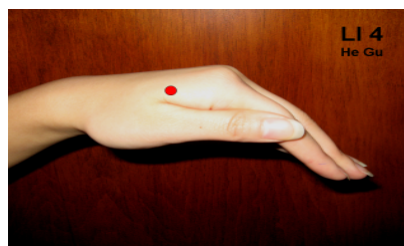
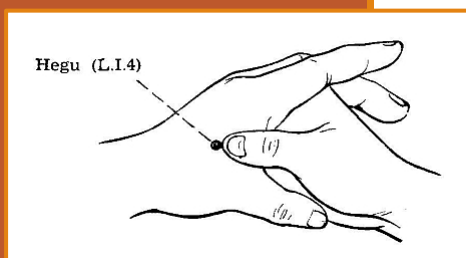
Method of stimulation of these points is generally irrelevant

- LI 4
- ST 36
- SP 6
- LU 7
- LV 3
- GB 20
- BL 54



# LI 4

Ho Ku  
He gu/ Hegu



## Physiological Effects

- Pain in the upper extremity head and neck
- Analgesia – lower jaw
- Promotes drainage, stagnation

Recent studies from the Journal of Orofacial Pain showed that the stimulation of He Gu (LI4) significantly reduced myofascial pain of the jaw muscles [2]. A recent Cochrane systematic review on acupuncture in migraine and tension-type headaches suggests stimulation of acupoints as an effective and valuable option for alleviating migraines and tension-type headaches [1].

### References

- [Schiapparelli P, Allais G, et al. Acupuncture in primary headache treatment. \*Neurol Sci.\* 2011 May; 32 Suppl 1:S15-8.](#)
- [Shen YF, Younger J, et al. Randomized clinical trial of acupuncture for myofascial pain of the jaw muscles. \*J Orofac Pain.\* 2009 Fall; 23\(4\): 353-9.](#)

## Combining points changes the physiological effects of the points

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### Examples:

LI 4 and ST 36

LI 4 and SP 6

LI 4 and LI 11

LI 4 and LV 3

## LI 4 and ST 36

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### Gastrointestinal complaints

- The order of needle insertion may make a difference
- The frequency utilized makes a difference with electrical stimulation
- The side of treatment may matter
- Even the length of time each point is stimulated may make a difference

## LI 4 and SP 6

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- Gynecological Complaints

## LI 4 and LI 11

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Dermatological issues

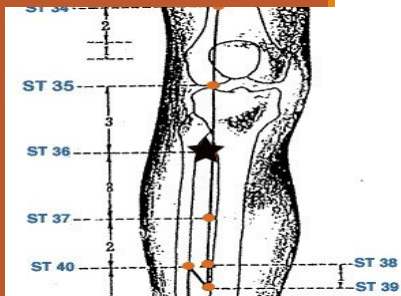
- Treatment is bilateral

## LI 4 and LV 3

Major sedation

## ST 36

Zsusanli  
Zu San li  
Tsu san li



ST 36  
Zu San Li

## Physiological Effects

- Knee pain/lateral aspect of the knee
- Gastrointestinal conditions e.g. diarrhea, constipation
  - Order of needle insertion matters
- Nausea and vomiting
- Stress and fatigue
- Health promotion and longevity
- Pain on the lateral aspect of the knee
- Major tonification point for the body
- hiccups
- Bilateral treatment of this point effects the cellular elements of the blood; some studies have demonstrated increased white blood count (during infections) and increased red blood count in cases of anemia. In one study ST 36 and SP 6 were more effective in raising leukocytes than Western drugs
- Research shows electro-acupuncture results with P 6 (HC 6) in cases of hypertension
- When needling, don't stand in front of the patient

## Research

There are many studies conducted with Zu San Li (ST36) in the scientific literature. In neuroimaging studies, stimulation of Zu San Li (ST36) has been shown to affect the limbic and paralimbic systems in the brain[2] which may affect the body's response to stress [3]. The Journal of Autonomic Neuroscience also published an article that showed that both [Nei Guan \(P6\)](#) and Zu San Li (ST 36) used together have an effect on gastrointestinal motility[1].

### References

[Yin J, Chen JD. Gastrointestinal motility disorders and acupuncture. Auton Neurosci. 2010 Oct 28;157\(1-2\):31-7. Epub 2010 Apr 3.](#)

[Feng Y, Bai L, Ren Y, Wang H, Liu Z, Zhang W, Tian J. Investigation of the large-scale functional brain networks modulated by acupuncture. Magn Reson Imaging. 2011 Sep;29\(7\):958-65. Epub 2011 May 25.](#)

[Pavao TS, Vianna P, Pillat MM, Machado AB, Bauer ME. Acupuncture is effective to attenuate stress and stimulate lymphocyte proliferation in the elderly. Neurosci Lett. 2010 Oct 22;484\(1\):47-50. Epub 2010 Aug 13.](#)

# SP 6

San Yin Jiao



## Physiological Effects

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Crossroads of the three Yin Meridians: Spleen, Liver, and Kidney

digestive

gynecological

emotional conditions

Menstrual problems e.g. irregular menstruation, dysmenorrhea, amenorrhea, infertility

Nocturnal emissions, enuresis, dysuria

impotence

Generalized body edema

Abdominal distention

Master point for circulation .... For individuals that bruise easily, cold feet, and varicose vein

## Research

Spleen 6 is commonly used for urological and pelvic disorders, insomnia, and menstrual cramps.

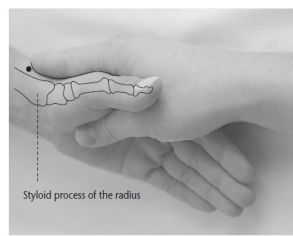
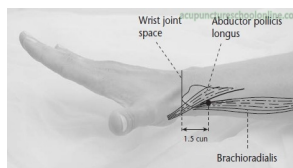
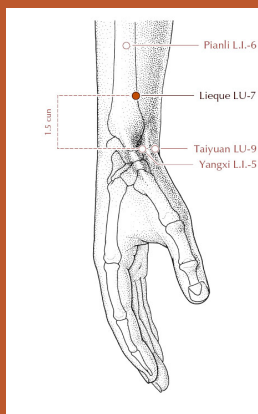
Effects on labor pain with acupressure: improve labor, manage labor pain, and shorten delivery time

Wong CL, Lai KY, Tse HM, Effects of SP6 acupressure on pain and menstrual distress in young woman with dysmenorrhea, Complement Ther Clin Pract. 2010 May;16 (2):64-9, Epub 2009 Nov 14

Effects of SP6 Acupuncture Point Stimulation on Labor Pain and Duration of Labor ....Iran

## LU 7

Lieque



## Physiological Effects

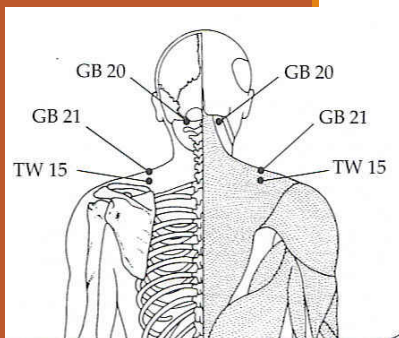
Good for localized edema caused by musculoskeletal problems especially those of an acute nature, e.g. a sprained ankle

Asthma: Lu 7 is treated in conjunction with points on the kidney and stomach meridians which are located on the chest – over the anatomical lungs (points on the chest and back may be considered local points). Few distant points are found in any formulas, however LI 4 is an exception – and this point is known to “decongest”

Needle insertion should be toward the wrist

## GB 20

Feng chi





## Physiological Effects

### Suboccipital headaches

Pain and stiffness in the neck

Conditions involving the parasympathetic nervous system (rest and digest; feed and breed)

Paralysis, twitching, tremors, numbness and dizziness and vertigo

Seizures, memory issues

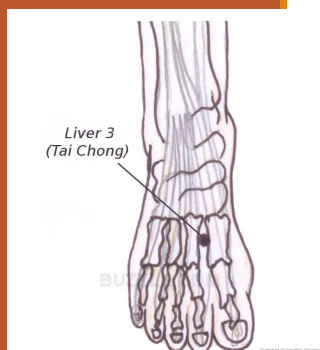
May effect conditions involving the eyes, e.g. blurred vision and red painful eyes

Tinnitus, nasal congestion, and runny nose

When using needles, angle toward opposite eye ...shallow insertion

## LV 3

Tai chong



## Physiological Effects

This point will rapidly detoxify the body .... Angle needle toward heel of foot about ½ “ deep

Neurological complaints, e.g. Parkinson’s, MS, depression, epilepsy, infantile convulsions

Weakness, numbness and pain in the lower extremities; difficulties in walking

Major sedation point – especially for the lower part of the body

Migraine headache

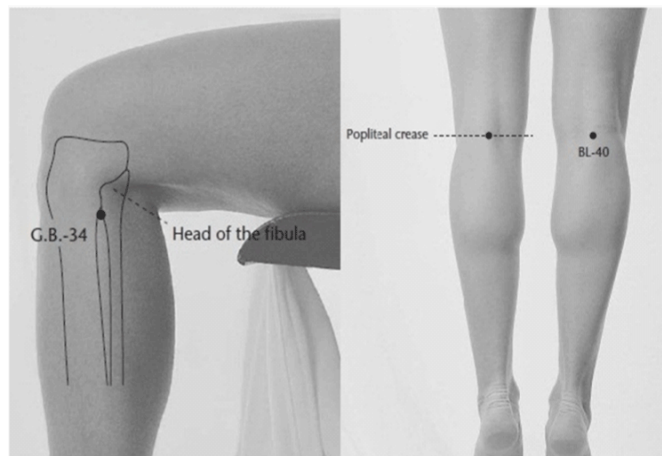
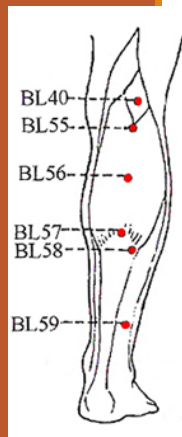
Drug rehab

Use care in treating if patient has epilepsy, is on drugs, or is intoxicated

Needles should be angled toward the heel

## BL 40

Wei Zhong  
(some older texts list  
as BL 54)



## Physiological Effects

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Pain in the knee joint

Meniscal or arthritic pain in the knee

Sciatic pain that radiates to the knee

Bend knee prior to needle insertion

## THE MANAGEMENT OF MUSCULOSKELETAL COMPLAINTS

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## Why Acupuncture?

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## Managing musculoskeletal complaints Phase One

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### Acute Inflammatory Phase

- This phase may last for up to 72 hours, depending on the severity of the injury and constitutes a non-specific reaction involving both cellular and humoral elements
- Swelling, redness, warmth and pain
- Muckle has emphasized the prominent part played by prostaglandins in the mechanism of both pain production and increased capillary permeability
- Management: cold, anti-prostaglandins, TNS, enkephalins and endorphins
- Local and distant point treatment; along with LU 7 for localized edema; and GB 20-21 to relax muscle spasm in the upper extremity and GB 34 in the lower extremity. LV 3 detoxifies.

## Phase 2

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- Healing phase
  - This stage may last from 48 hours on up to 6 weeks or more and is characterized by the synthesis and deposition of collagen
  - According to Van der Meulin, “the repair of tissue is only possible when the wound has become clean” and macrophages are mobilized freely in the removal of cellular debris, erythrocytes and the fibrin clot
  - The goal is collagen synthesis with an emphasis on the quantity of the collagen
  - Management: Create movement, heat therapies, e.g. ultrasound, diathermy, hot packs
  - Acupuncture: Local points combined with ST 36 – the major tonification point of the body

## Phase 3

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- The Rehabilitative or Remodelling Phase
  - This phase may last from 3 weeks to 12 months or more (Frank et al.) and is a period in which collagen is remodeled to increase the functional capabilities of the tendon or ligament to withstand the stresses imposed on it.
  - The distinction between phases 2 and 3 is largely one of increasing the quantity of collagen during the repair phase and of an improvement in the quality (orientation and tensile strength) in the latter phase.
  - The highly organized appearance of normal ligament substance has not been approached by the remodeled scar even after 40 weeks of healing and there is an apparent plateau in scar collagen concentration at just over 70% of normal. In short, collagen is deficient both in content and quality at least 40 weeks after injury.

Reference: Acute soft tissue injuries – a review of the literature, John Kellett, *Medicine and Science in Sports and Exercise*, Vol. 18, No 5, 1986.

## Shoulder, Elbow, wrist and hand

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Treat local points – add points based upon symptomatology

In cases of decreased mobility – treat trigger point on opposite side and create movement

## Hip Joint

---

Treat local points – add points based upon symptomatology

In cases of decreased mobility – treat trigger point on opposite side and create movement

## Knee, ankle and foot

---

Treat local points – add points based upon symptomatology

In cases of decreased mobility – treat trigger point on opposite side and create movement

## Reactions to needle insertion

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Tae chi or Da chi

Fainting

Seizures

Redness around site  
(except the ear – blanches)

Nothing!!



## Depth of insertion

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Based on the site

Traditionally, deeper during the winter and with ex spouses and shallower during the summer

Shallow in children, the aged and the debilitated

GB 30



## Oriental/Western Diagnosis

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How to meld oriental evaluation procedures with western examination





## Basic steps in the exam

Is the imbalance yin or yang?

Determine the meridian that's involved

Is there an excess or a deficiency of energy?



## Try to keep it scientific

Be thorough in your patient work-up – “the body knows what’s wrong”

Pain on the lateral aspect of the body ---- gall bladder meridian

Pain that radiates from the back to the front of the body --- stomach meridian

What TIME of the day did the condition start, what TIME of the day are the symptoms the worst

## Look at the eyes

Pupil – KI

Iris - LV

Upper white area – SP

Lower white area – ST

Lateral white area – SI

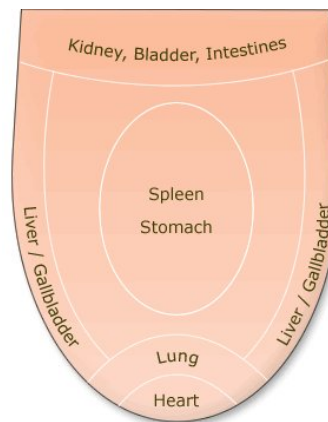
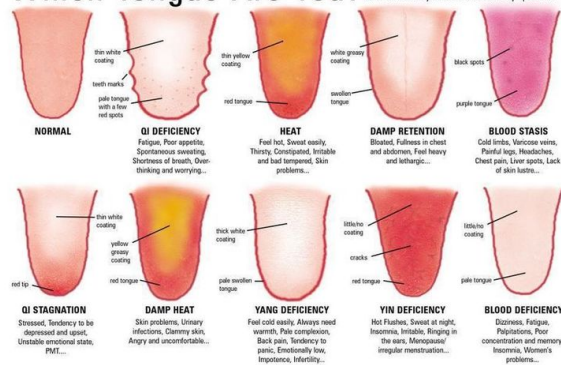
Medial white area – HT



## Stick your tongue out

### Which Tongue Are You?

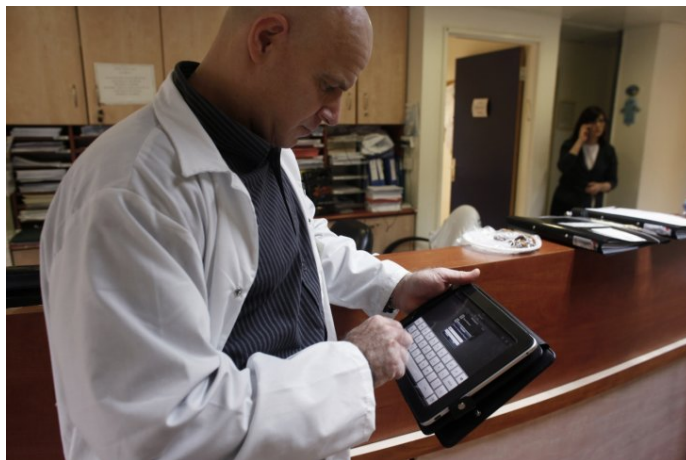
Nine Common Syndromes & Possible Symptoms...



# RISK MANAGEMENT ACUPUNCTURE

“What you gonna do if they come for you?”

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## The party's over



- It's not that bad
- It's business ....
- Don't panic
- Don't close the doors
  
- Let's start at the beginning

## What do you do if you are placed on notice

- 1) Immediately call your malpractice carrier
- 2) Be sure that your complete file on the patient is secured
- 3) You may discuss with your staff: but don't keep notes
- 4) DO NOT:
  - Alter your records in any way
  - Call the patient, the patient's attorney, other DC's that you may want to have as experts
  - Write things down – or post on any social media
- 4) Follow your attorney's instruction
- 5) Relax – it's business

## What's are common mistakes

---

Stupid is as stupid does

- “Your stylist cut my ear!!”

How about three free visits?

Your office staff is your first defense – TRAIN YOUR STAFF

## What are the common allegations

---

In general – the most common allegations in cases of malpractice in general are:

- Herniated discs
- Cerebrovascular accidents
- Misdiagnosis
- Aggravating of pre-existing conditions
- Failure to refer
- Vicarious liability: --- up to 10%

(Vicarious liability is a legal doctrine that assigns liability for an injury to a person who did not cause the injury but who has a particular legal relationship to the person who did act negligently. It is also referred to as imputed [Negligence](#).)

## ESSENTIAL ELEMENTS IN AVOIDING MALPRACTICE

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PRACTICE ETHICALLY

DOCUMENT

MANAGE YOUR RISKS

## THE BASICS

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Keep your license up to date

Always practice within your scope of practice

License your facility with your state board

Be certain that you always comply with state and local ordinances

Pay all appropriate taxes and fees

## In the Office



I'm sure your files are in here someplace!

## In the office

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Keep your facilities looking clean AND professional

- If things are dirty and unkempt – patients notice – A dirty facility may leave the patient with the PERCEPTION that you aren't professional

Always immediately update changes of address with your board

Keep your CME hours and specialty hours up-to-date

Register your facility

## Train your staff

- This is the patient's first contact .... Be sure it's a fabulous first impression!
- Be sure your staff is aware of HIPPA regulations
- Be sure your staff is ALWAYS positive ....and up-beat
- Train your staff in phone call etiquette and in message taking
- Staff represent your first line of defense --- all negative comments need to be brought to you PRIOR to you seeing the patient
- Do NOT allow your staff to ever offer health care advice
- BE PROACTIVE – NOT REACTIVE



## Which office would you be visiting? Dress for success!!!

WHAT'S YOUR PROBLEM TODAY?





## Privacy

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Why are you here Mrs. Smith?

Be sure to speak up so everyone can hear?



## Practice in an ethical fashion

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- Avoid: abject stupidity!

## SEXUAL MISCONDUCT

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### Verbal

- You're really looking good today
- You look 'hot'
- So what do you like to do in the bedroom that brought on your low back pain?
- I'll be at Joe's Bar and Grill Saturday night, just in case you're not busy

### Visual

- Suggestive gestures, touches
- Kissing or fondling
- Physical acts that could be interpreted to be of a sexual nature

## CONSENT is NOT a defense

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- Great meeting you here – your back seems better after your treatment this morning!

YOU MAY date a patient if you've waited a minimum of one (1) year after they've been discharged



## Issues specifically pertaining to acupuncture

BE SURE YOU CAN EXPLAIN ACUPUNCTURE TO YOUR PATIENTS

BE SURE YOUR STAFF UNDERSTANDS ACUPUNCTURE

The more a patient understands, the more receptive they will be

Gear your discussions to include evidence-based information in conjunction with a little of the Oriental basis for acupuncture

IT WILL JUST BE ONE "STICK"



## Allegations involving Acupuncture

In general: "43 "significant" events were reported giving a rate of 14 per 10,000."

White in 2004 reported a serious risk percentage of only .55 per 10,000 individual patients

In general – all cases had cleared within one week, except for one incident of pain that lasted two weeks and one of sensory symptoms that lasted several weeks.

As a general rule – acupuncture is extremely safe

A total of 2135 minor events were reported

- Bleeding, aggravation of symptoms
- Others include: pain at the sites of insertion, tiredness, fainting, and vomiting

## Significant events associated with acupuncture

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Lao et al performed a study from 1965-1999 and reported just 202 incidents

Pneumothorax ( as of 2015, 4 deaths had been reported)

Cardio-vascular lesions

Hemorrhage or hematomas including the CNS

Infections (primarily hepatitis)

## A review of the serious and minor complications associated with acupuncture

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- 1) A 64 year-old healthy male was admitted with shortness of breath
- 2) An 82-year old female with COPD was admitted with severe shortness of breath
- 3) A 66 year-old male being treated for chronic back pain experienced a severe sharp pain stabbing from his central chest through to his back. He also experienced shortness of breath
- 4) Following acupuncture a 54-year old female complained of sudden weakness on the entire left side of her body
- 5) Penetration of the Stomach Cavity after acupuncture
- 6) Case reported in The American Chiropractor Magazine

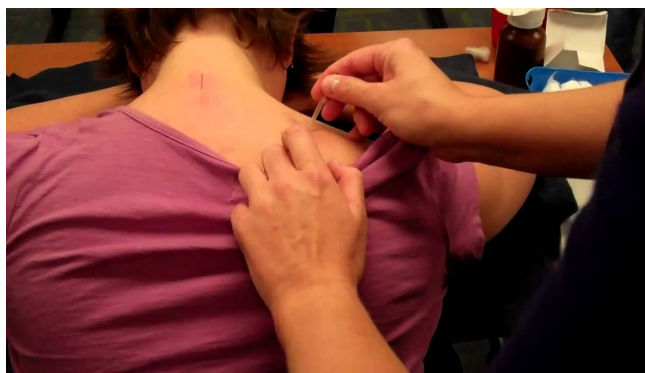
## Points to be careful with: pneumothorax

**GB 21** - midway between C7 and the highest point of the shoulder

**BL 13** – 1 ½ cun lateral to the lower border of the SP of 3<sup>rd</sup> thoracic

**SI 9** -1 cun superior to the posterior axillary fold

Be careful with tall thin individuals, or patients with COPD, and with smokers



## Accidental injury to other organs

Central Nervous system injury have been reported: Be cautious with GV (DU) 15 - between SP of C7 and T1; and GV 16 – just below the EOP

Heart injuries have been reported

Before inserting needles, be certain that the body's internal organs are NOT enlarged

## Infections

Local or systemic

The most common – scabs form at the site of needle insertion if a patient is on cortisone – wait 30 days

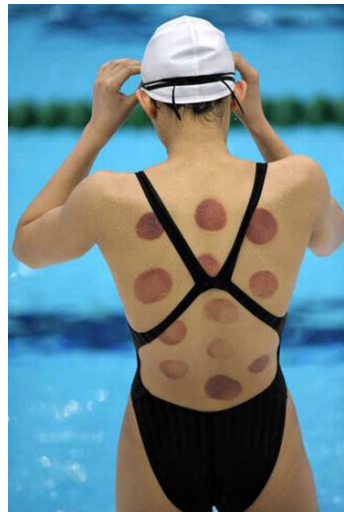
Failure to wash your hands OR to wear gloves could create a situation where you cross-infect a patient

A patient who is immune-suppressed MAY be more prone to infections

## Bleeding and bruising

Be careful with the following:

- Needling of the scalp
- Needling of the ear
- Patients on Blood thinners or anti-coagulants
- When needling any acupuncture point over or next to major blood vessels e.g. Lu 9
- Oh yes – did someone say - Cupping?



## Other considerations

1. Be careful when needling points that lie over or next to major blood vessels e.g. LU 9, ST 9, ST 12, ST 13, ST 42, SP 11, HT 1, LV 12
2. Fainting - .027% actually faint
3. Take caution with children or the aged
4. Be careful with debilitated patients
5. LIMIT the number of needles
6. Needle disposal

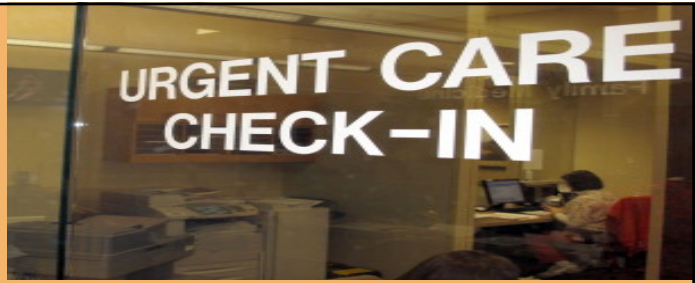
## What if the needle gets stuck

You have several options:

- insert a second needle, a third needle, a fourth needle!!!
- Stimulate the tip of the needle with low volt current
- Insert the needle deeper
- Massage
- Do nothing – Wait!



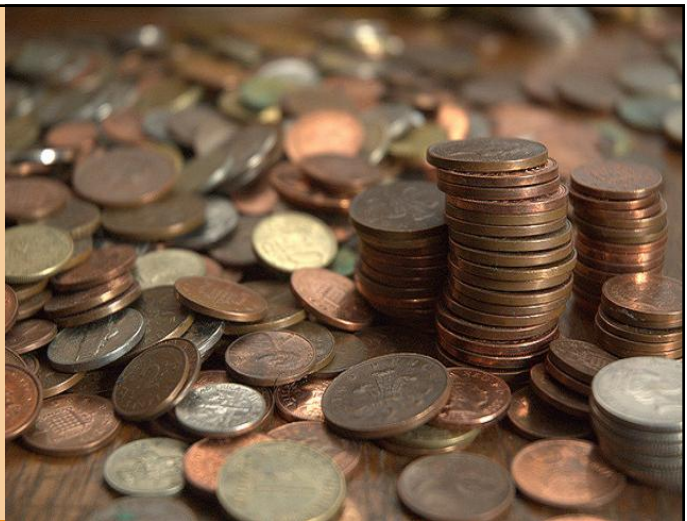
What if the needle breaks off



Hopefully you'll avoid this lucky event; however the risk is minimal

Failure to remove needles

You could always try charging the patient a little extra if they take your needles home with them





## Contraindications to acupuncture

Patients who have been on steroids (wait 30 days)

Patients on blood thinners or anticoagulants (hemophiliacs)

LI 4, SP6, the big toe, abdomen or low back during pregnancy

Patients on recreational drugs or intoxicated patients

LV 3 – may trigger an epileptic seizure

LI 4 – may trigger syncope

No electrical stimulation if patients have a pacemaker

Be cautious with young children under 6

Skin that is currently inflamed OR has an active lesion

The NIH says not to “give injections” if the skin is burned, hardened, inflamed, swollen or damaged

BE SURE NOT TO MASK AN UNDERLYING SYSTEMIC COMPLAINT

## Skin preparation



NIH – “Since the skin is the body’s first defense against infections, it must be cleansed thoroughly before a needle is inserted.”

Staphylococcus aureus

Streptococcus pyogenes

Coryneform bacteria

Guidelines (NIH, CDC, and WHO)

1. The skin must be clean – follow clean needle technique
2. Practitioner’s hands must be clean
3. Standard practice is to use 70% isopropyl alcohol swabs: a five second application is 82-91% effective against microbes
4. However – the CDC (2002) stated that unless the skin was dirty or contaminated – alcohol, soap and water, or chemical agents were of no significant value in preventing infection.

## Saving Private Ryan



## Contact Information

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