

# **NCCAOM CONTENT DOMAIN CODE REFERENCE GUIDE FOR EXAMSOFT**

*\*NOTE: Every single question in your assessment has been tagged to its relevant standards and NCCAOM content domains. You will use this reference guide to interpret the Assessment Reports released to the Exam Taker Portal by your instructors. This will help you determine the different strengths and weaknesses in the subject materials that is being evaluated.*

## **Acupuncture With Point Location**

### DOMAIN I: Safety and Professional Responsibilities

- A. Professional practice
  - 1. Describe risks and benefits of acupuncture treatment and adjunctive therapies (e.g., ear seeds, moxibustion, exercises) (APL I A1)
- B. Acupuncture-related adverse events
  - 1. Recognize and manage adverse events (e.g., burns, pneumothorax, hemorrhage, needle shock, stuck needle) (APL I B1)
  - 2. Recognize risk factors for individual patients (e.g., blood thinners, diabetes) (APL I B2)
- C. Infection control
  - 1. Apply infection control procedures to acupuncture practice (e.g., bloodborne pathogens, Universal Precautions, CDC and OSHA Guidelines) (APL I C1)
  - 2. Practice according to Clean Needle Technique (CNT) standards and procedures (APL I C2)
- D. Case management
  - 1. Patient education and communication
    - a. Communicate diagnosis, treatment plan, and prognosis using patient-appropriate language (APL I D1a)
    - b. Communicate/collaborate with patient to set treatment goals and expectations (APL I D1b)
  - 2. Follow-up care
    - a. Refer and/or discharge patient as appropriate (APL I D2a)
    - b. Communicate and collaborate with other health care providers to identify the most effective treatment for patient (e.g., evidence-informed practice, applying integrative patient care) (APL I D2b)

### DOMAIN II: Treatment Plan

- A. Strategies and treatment methods
  - 1. Determine strategies and treatment methods (APL II A1)
  - 2. Determine modifications based on special populations (e.g., pediatrics, geriatrics, pregnancy, special needs) (APL II A2)
- B. Acupuncture treatment strategies according to diagnosis
  - 1. Perform point selection based on differentiation/symptoms, functions and indications (APL II B1)
  - 2. Select points according to traditional Chinese medicine concepts
    - a. Channel Theory (APL II B2a)

- b. Five Elements Theory (APL II B2b)
- c. Point Categories
  - i. Five Transporting (Shu)/Antique points (e.g., Jing-Well, Ying-Spring, ShuStream, Jing-River, He-Sea) (APL II B2ci)
  - ii. Extra points (Refer to Appendix of Extra Points) (APL II B2cii)
  - iii. Eight Influential points (APL II B2ciii)
  - iv. Eight Confluent points (APL II B2civ)
  - v. Four Seas points (APL II B2cv)
  - vi. Front-Mu (Alarm) points, Back-Shu (Associated) points and their combination(s) (e.g., excess/def, systemic imbalances) (APL II B2cvi)
  - vii. Source (Yuan) and Connecting (Luo) points (APL II B2cvii)
  - viii. Tonification and/or sedation points (APL II B2cviii)
  - ix. Five elements (APL II B2cix)
  - x. Xi-Cleft points (APL II B2cx)
- d. Root and Branch Theory (APL II B2d)
- e. Organ Theory (Zang Fu) (APL II B2e)
- f. Eight Principles (APL II B2f)
- g. Point Combinations (e.g., Four Gates, Mother/Son, Entry/Exit) (APL II B2g)
- h. Tender Points (Ashi) (APL II B2h)
- i. Chinese organ clock (APL II B2i)
- 3. Select points according to other acupuncture concepts
  - a. Auriculotherapy (APL II B3a)
  - b. Local, adjacent, distal (APL II B3b)
  - c. Mirroring (e.g., elbow-for-knee, right-for-left, front-for-back) (APL II B3c)
  - d. Scalp acupuncture (APL II B3d)
- 4. Select points according to biomedical concepts
  - a. Trigger points (APL II B4a)
  - b. Motor points (APL II B4b)
  - c. Myofascial treatments (APL II B4c)
  - d. Effects on blood flow, neurohormonal regulation, and brain connectivity (APL II B4d)
- C. Cautions and contraindications
  - 1. Identify cautions and contraindications (e.g., pregnancy, organ damage, inflamed or non-intact skin) (APL II C1)
- D. Treatment plan modifications
  - 1. Re-evaluate and modify treatment plan based on response (APL II D1)

### DOMAIN III: Treatment Techniques

- A. Acupuncture
  - 1. Determine position of patient for treatment (APL III A1)
  - 2. Select needles to achieve desired treatment goals (e.g., length, gauge, filiform or other types of needles) (APL III A2)
  - 3. Needling technique
    - a. Apply insertion techniques (e.g., angle, depth, stretching skin) (APL III A3a)
    - b. Apply needle manipulation (e.g., arrival of Qi, reinforcing, reducing, lifting and thrusting) (APL III A3b)
    - c. Determine needle retention time (APL III A3c)
    - d. Apply needle removal techniques (e.g., order, speed, pressure) (APL III A3d)
    - e. Adjust technique based on patient presentation (e.g., stimulation method, intensity, needle retention time) (APL III A3e)
- B. Moxibustion
  - 1. Identify functions, indications, and contraindications (APL III B1)

2. Determine and apply techniques (e.g., direct, indirect, warming needle) (APL III B2)
- C. Adjunctive therapies
1. Identify functions, indications, contraindications, and application (APL III C1)
  2. Determine and apply techniques during treatment
    - a. Bleeding (APL III C2a)
    - b. Cupping (APL III C2b)
    - c. Ear seeds, balls, magnets (APL III C2c)
    - d. Electroacupuncture (APL III C2d)
    - e. Gua Sha (APL III C2e)
    - f. Heat (APL III C2f)
- D. Asian bodywork therapy
1. Recognize appropriate application of Asian bodywork therapy (e.g., Tui Na, Shiatsu, acupressure) (APL III D1)

#### DOMAIN IV: Acupuncture Point Location

- A. Acupuncture point location methods
1. Identify points on images (APL IV A1)
  2. Identify points according to cun measurement and anatomical landmarks (APL IV A2)

### Foundations of Oriental Medicine

#### DOMAIN I: Clinical Examination Methods

- A. Looking (Wang)
1. Spirit (Shen)
    - a. Identify outward manifestation of Spirit (Shen) (e.g., complexion, expression, demeanor, general behavior) (FOM I A1a)
    - b. Identify and relate state of Spirit (Shen) to clinical significance (FOM I A1b)
  2. Face, eyes, nose, ears, mouth, lips, teeth, head, and throat
    - a. Identify normal and abnormal conditions and changes of the eyes, nose, ears, mouth, lips, teeth, throat, face, and complexion (including color, moisture, texture, and organ-indicative locations) (FOM I A2a)
    - b. Identify and relate the pathological manifestations of the face, including color, moisture, texture, to organ correspondence and to pattern/syndrome differentiation\* (FOM I A2b)
  3. Tongue
    - a. Identify normal and abnormal manifestations, patterns, conditions, and changes of the tongue and sublingual veins (FOM I A3a)
    - b. Identify and relate features of the tongue and tongue coating, including color, size, moisture, texture, shape, position, movement, organ correspondence to pattern/syndrome differentiation\* (FOM I A3b)
  4. Physical characteristics of the body
    - a. Identify normal and abnormal form, movement, and physical characteristics (e.g., head, hair, neck, back, chest, abdomen, extremities, nails) (FOM I A4a)
    - b. Identify and relate form, movement, and physical characteristics to pattern/syndrome differentiation\* (FOM I A4b)
    - c. Identify normal and abnormal conditions and changes of the skin (FOM I A4c)
    - d. Identify and relate the pathological significance of conditions and changes of the skin to pattern/syndrome differentiation\* (FOM I A4d)

- e. Identify normal and abnormal excretions (e.g., sputum, saliva, sweat, discharge, stool, urine) (FOM I A4e)
    - f. Identify and relate the pathological significance of excretions to pattern/syndrome differentiation\* (FOM I A4f)
- B. Listening and smelling (Wen)
  - 1. Sounds
    - a. Identify and relate normal and abnormal respiratory sounds to pattern/syndrome differentiation\* (FOM I B1a)
    - b. Identify and relate normal and abnormal tonal qualities, voice, and speech to pattern/syndrome differentiation\* (FOM I B1b)
  - 2. Odors
    - a. Identify and relate normal and abnormal body, breath/mouth odors to pattern/syndrome differentiation\* (FOM I B2a)
    - b. Identify and relate normal and abnormal odors of excretions/secretions (e.g., urine, stool, wound exudates) to pattern/syndrome differentiation\* (FOM I B2b)
- C. Asking (Wen)
  - 1. Chief complaint
    - a. Assess presenting complaint (e.g., onset, location, aggravation) (FOM I C1a)
    - b. Identify and relate chief complaint to pattern/syndrome differentiation\* (FOM I C1b)
    - c. Identify appropriate additional questions based on patient's responses and examination findings (FOM I C1c)
  - 2. Current health conditions
    - a. Evaluate a review of systems, including the "Ten Questions" (Shi Wen) (e.g., pain, energy level, sweating) (FOM I C2a)
    - b. Identify and relate current health conditions to pattern/syndrome differentiation\* (FOM I C2b)
    - c. Identify appropriate additional questions based on patient's responses and examination findings (FOM I C2c)
  - 3. Patient environmental and social history
    - a. Identify and relate internal factors (e.g., emotions, stress) to pattern/syndrome differentiation\* (FOM I C3a)
    - b. Identify and relate external factors (e.g., environmental factors) to pattern/syndrome differentiation\* c. Identify and relate miscellaneous factors (e.g., dietary habits, work habits, occupation) to pattern/syndrome differentiation\* (FOM I C3b)
  - 4. Health history
    - a. Assess personal health history, including previous symptoms, diagnoses, and treatments (FOM I C4a)
    - b. Assess family history (FOM I C4b)
    - c. Identify and relate health history to pattern/syndrome differentiation\* (FOM I C4c)
    - d. Identify appropriate additional questions based on patient's responses and health history (FOM I C4d)
- D. Touching/palpation (Qie)
  - 1. Pulses
    - a. Differentiate radial pulse characteristics (e.g., rate, depth, strength) and relate to pattern/syndrome differentiation\* (FOM I D1a)
  - 2. Abdomen
    - a. Assess the abdomen (e.g., temperature, texture, shape, and pain) and relate to pattern/syndrome differentiation\* (FOM I D2a)
    - b. Identify abdominal regions corresponding to organ systems (e.g., abdominal diagnosis) (FOM I D2b)
  - 3. Channels

- a. Identify and correlate findings along the channels (e.g., nodules, tenderness, temperature) to pattern/syndrome differentiation\* (FOM I D3a)
4. Other body areas
  - a. Identify and correlate body sensations (e.g., pain, numbness, tingling, sensitivity), temperature changes, and quality of tissue (e.g., edema, hardness/softness, tension/flaccidity) to pattern/syndrome differentiation\* (FOM I D4a)

\*Pattern/Syndrome Differentiation:

- Eight Principles (Ba Gang)
- Organs (Zang Fu)
- Meridian/Channel (Jing Luo)
- Six Stages (Liu Jing)
- Four Levels (Wei, Qi, Ying, Xue)
- Five Elements (Wu Xing)
- Qi, Blood, Body Fluids (Qi, Xue, Jin Ye)
- Triple Burner (San Jiao)

DOMAIN II: Assessment, Analysis, and Differential Diagnosis Based Upon Acupuncture and Chinese Medicine Theory

- A. Differential diagnosis based upon chief complaint, prioritization of major signs and symptoms, knowledge of acupuncture and Chinese medicine diseases, and pattern identification
  1. Yin/Yang Theory
    - a. Assess and analyze signs and symptoms according to yin/yang theory (FOM II A1a)
    - b. Identify and apply yin/yang theory to formulate a pattern/syndrome differentiation (FOM II A1b)
  2. Five Elements Theory (Five Phases/Wu Xing)
    - a. Assess and analyze signs and symptoms according to Five Elements theory (FOM II A2a)
    - b. Identify and apply Five Elements theory to formulate a pattern/syndrome differentiation (FOM II A2b)
  3. Eight Principles (Ba Gang) (e.g., interior/exterior, heat/cold)
    - a. Assess and analyze signs and symptoms according to the Eight Principles (FOM II A3a)
    - b. Identify and apply the Eight Principles to formulate a pattern/syndrome differentiation (FOM II A3b)
  4. Qi, Blood, Body Fluids Theory (Qi, Xue, Jin Ye)
    - a. Assess and analyze signs and symptoms according to Qi, Blood, body fluids theory (FOM II A4a)
    - b. Identify and apply Qi, Blood, body fluids theory to formulate a pattern/syndrome differentiation (FOM II A4b)
  5. Channel Theory (Jing Luo) (e.g., Twelve primary channels, Eight Extraordinary channels, Luo-connecting channels)
    - a. Assess and analyze signs and symptoms according to channel theory (FOM II A5a)
    - b. Identify and apply channel theory to formulate a pattern/syndrome differentiation (FOM II A5b)
  6. Organ Theory (Zang Fu)
    - a. Assess and analyze signs and symptoms according to organ theory (FOM II A6a)
    - b. Identify and apply organ theory to formulate a pattern/syndrome differentiation (FOM II A6b)
  7. Six Stages Theory (e.g., Tai Yang, Yang Ming, Jue Yin)

- a. Assess and analyze signs and symptoms according to Six Stages theory (FOM II A7a)
  - b. Identify and apply Six Stages theory to formulate a pattern/syndrome differentiation (FOM II A7b)
- 8. Four Levels Theory (Wei, Qi, Ying, Xue)
  - a. Assess and analyze signs and symptoms according to Four Levels theory (FOM II A8a)
  - b. Identify and apply Four Levels theory to formulate a pattern/syndrome differentiation (FOM II A8b)
- 9. Triple Burner Theory (San Jiao)
  - a. Assess and analyze signs and symptoms according to Triple Burner theory (FOM II A9a)
  - b. Identify and apply Triple Burner theory to formulate a pattern/syndrome differentiation (FOM II A9b)
- 10. Etiology Theory: External, Internal, and Miscellaneous (neither External nor Internal)
  - a. External (e.g., Wind, Damp, Cold, Pestilential Qi [Li Qi])
    - i. Assess and analyze signs and symptoms according to external etiology (FOM II A10ai)
    - ii. Identify and apply external etiology theory to formulate a pattern/syndrome differentiation (FOM II A10a ii)
  - b. Internal (e.g., anger, joy, stress)
    - i. Assess and analyze signs and symptoms according to internal etiology (FOM II A10bi)
    - ii. Identify and apply internal etiology theory to formulate a pattern/syndrome differentiation (FOM II A10b ii)
  - c. Miscellaneous (e.g., diet, lifestyle, trauma, Phlegm, Blood Stasis)
    - i. Assess and analyze signs and symptoms according to miscellaneous etiology (FOM II A10ci)
    - ii. Identify and apply miscellaneous etiology theory to formulate a pattern/syndrome differentiation (FOM II A10cii)

### DOMAIN III: Treatment Principle and Strategy

- A. Treatment principle and strategies
  - 1. Formulate treatment principle and strategies based upon
    - a. Yin/Yang Theory (FOM III A1a)
    - b. Five Elements Theory (Five Phases/Wu Xing) (FOM III A1b)
    - c. Eight Principles (Ba Gang) (e.g., interior/exterior, heat/cold) (FOM III A1c)
    - d. Qi, Blood, Body Fluids Theory (Qi, Xue, Jin Ye) (FOM III A1d)
    - e. Channel Theory (Jing Luo) (e.g., Primary channels, Extraordinary channels, Luoconnecting channels) (FOM III A1e)
    - f. Organ Theory (Zang Fu) (FOM III A1f)
    - g. Six Stages Theory (e.g., Tai Yang, Yang Ming, Jue Yin) (FOM III A1g)
    - h. Four Levels Theory (Wei, Qi, Ying, Xue) (FOM III A1h)
    - i. Triple Burner Theory (San Jiao) (FOM III A1i)
    - j. Etiology Theory: External, Internal, and Miscellaneous (neither External nor Internal) (FOM III A1j)
  - 2. Prioritize treatment strategies based on acupuncture and Chinese medicine principles (e.g., Root and Branch, constitutional, seasonal) (FOM III A2)
  - 3. Modify treatment principle and/or strategy based on patient's response, disease progression, and lifestyle factors (FOM III A3)

- B. Lifestyle changes and self-care modalities
  - 1. Recommend lifestyle changes and self-care modalities
    - a. Exercise (e.g., Qi Gong, Tai Ji) (FOM III B1a)
    - b. Meditation, relaxation, and breathing techniques (FOM III B1b)
    - c. Dietary guidance (FOM III B1c)

## Biomedicine

### DOMAIN I: Biomedical Model

- A. Clinical application of biomedical sciences (e.g., anatomy, physiology, pathology, pathophysiology), pharmacology, and nutrients and supplements
  - 1. Biomedical sciences
    - a. Differentiate normal and abnormal structures and functions of body systems from a biomedical perspective (BIO I A1a)
    - b. Recognize signs, symptoms, and morbidities associated with common medical conditions (BIO I A1b)
  - 2. Pharmacology
    - a. Identify functional classifications, mechanisms, side and adverse effects related to pharmaceutical categories (BIO I A2a)
    - b. Identify routes of administration (e.g., intravenous, oral, subcutaneous) (BIO I A2b)
    - c. Demonstrate knowledge of the effects of the use of tobacco, alcohol, and drugs of abuse (BIO I A2c)
    - d. Identify clinically significant pharmaceutical-supplement interactions (BIO I A2d)
  - 3. Nutrients and supplements
    - a. Identify major classifications, known actions, and potential adverse effects related to commonly used nutrients and supplements (BIO I A3a)
    - b. Recognize signs and symptoms associated with abnormal levels of commonly used nutrients and supplements (BIO I A3b)
- B. Patient history and physical examination
  - 1. Patient history (e.g., chief complaint, allergies, medical history, personal and family history)
    - a. Conduct a medical interview to obtain patient history (BIO I B1a)
    - b. Organize information obtained during interview into appropriate sections of the patient history (BIO I B1b)
  - 2. Physical examination
    - a. Recognize how each portion of the physical examination is performed (BIO I B2a)
    - b. Identify the components and clinical significance of a general systems examination (e.g., vital signs, pulmonary, cardiovascular, gastrointestinal)
      - i. Identify relevant examination techniques such as observation, auscultation, and palpation as applied to each system (BIO I B2bi)
      - ii. Recognize how each portion of the general systems examination is performed (BIO I B2bii)
      - iii. Identify the clinically significant findings obtained from a general systems examination (BIO I B2biii)
    - c. Identify the components and clinical significance of a musculoskeletal examination

- i. Identify relevant examination techniques (e.g., range of motion, muscle strength testing, and special tests including orthopedic tests) (BIO I B2ci)
      - ii. Recognize how each portion of a musculoskeletal examination is performed (BIO I B2cii)
      - iii. Identify the clinically significant findings obtained from a musculoskeletal examination (BIO I B2ciii)
    - d. Identify the components and clinical significance of a neurological examination
      - i. Identify relevant examination techniques (e.g., assessment of cognitive function, evaluation of cranial nerves, sensory and motor function, dermatomal testing, and reflexes) (BIO I B2di)
      - ii. Recognize how neurological examinations are performed (BIO I B2dii)
      - iii. Identify the clinically significant findings obtained from a neurological examination (BIO I B2diii)
- 3. Medical imaging, laboratory tests, and other diagnostic tests
  - a. Medical imaging
    - i. Recognize the indications for common medical imaging (e.g., x-ray, MRI, CT, PET, colonoscopy, cystoscopy, bronchoscopy) (BIO I B3ai)
    - ii. Recognize the clinical significance of information from medical imaging (BIO I B3aii)
  - b. Laboratory tests
    - i. Recognize the indications for common laboratory tests (e.g., complete blood count, basic metabolic panel, thyroid panel) (BIO I B3bi)
    - ii. Recognize the clinical significance of abnormal findings for medical laboratory tests (BIO I B3bii)
  - c. Other diagnostic tests
    - i. Recognize the indications for common diagnostic tests (e.g., EMG, EKG) (BIO I B3ci)
    - ii. Recognize the clinical significance of information gathered from diagnostic tests (BIO I B3cii)
- C. Clinical assessment process
  - 1. Recognize abnormalities in the functions of the body systems (e.g., respiratory, cardiovascular, urogenital, reproductive, nervous) (BIO I C1)
  - 2. Recognize the clinical significance of normal and abnormal findings (BIO I C2)
  - 3. Recognize typical presentations of commonly encountered medical conditions (BIO I C3)
  - 4. Recognize commonly encountered red flags/ominous signs (e.g., signs of stroke, heart attack, suicidal ideation, domestic abuse, trauma) (BIO I C4)
- D. Clinical decision-making and standard of care
  - 1. Recognize medical conditions that may be treated without referral (BIO I D1)
  - 2. Recognize medical conditions that require co-management (BIO I D2)
  - 3. Recognize medical conditions that require a referral (BIO I D3)
  - 4. Differentiate the most appropriate type of referral: emergent = immediate, urgent = 24-48 hours, or routine = 48 hours - 7 days (BIO I D4)
  - 5. Recognize the conventional biomedical prognoses, management, and/or standard of care for common medical conditions (BIO I D5)

## DOMAIN II: Safety and Professional Responsibilities

### A. Risk management and safety



1. Recognize situations that require special care or emergency management (e.g., burns, seizures, falls, anaphylaxis) (BIO II A1)
  2. Implement emergency protocols in practice (e.g., contacting emergency services) (BIO II A2)
  3. Recognize the purpose of professional insurances (e.g., general liability, malpractice insurance) (BIO II A3)
- B. Infection control
1. Recognize common communicable diseases (e.g., influenza, hepatitis, HIV, tuberculosis) (BIO II B1)
  2. Identify modes of transmission of common communicable diseases (e.g., airborne, fecal-oral) (BIO II B2)
  3. Recognize and apply universal precautions (BIO II B3)
  4. Manage hazardous situations (e.g., coughing, bleeding, vomiting) (BIO II B4)
- C. Federal regulations
1. Demonstrate knowledge of Occupational Safety and Health Administration (OSHA) and other federal health agencies' requirements (BIO II C1)
  2. Demonstrate knowledge of Health Insurance Portability and Accountability Act (HIPAA) requirements (BIO II C2)
- D. Reporting and record-keeping
1. Maintain and release patient medical records in accordance with federal and state regulations (BIO II D1)
  2. Recognize and respond to mandated reportable conditions (e.g., elder and child abuse, infectious diseases, bioterrorism) (BIO II D2)
  3. Recognize the purpose of medical coding (e.g., ICD, CPT, E&M codes) (BIO II D3)
  4. Utilize medical coding (e.g., ICD, CPT, E&M codes) (BIO II D4)
- E. Ethics and professionalism
1. Demonstrate knowledge of professional ethical standards (e.g., conflict of interest, negligence, boundary violations, scope of practice) (BIO II E1)
  2. Provide informed consent related to patient care (BIO II E2)
  3. Communicate professionally with patients, the public, and other health care providers (BIO II E3)
- F. Integration of acupuncture and Chinese medicine with biomedicine
1. Communicate the differences and commonalities between acupuncture and Chinese medicine and biomedicine (e.g., correlation of diagnostic categories, differences in uses of organ systems) (BIO II F1)
  2. Explain acupuncture and Chinese medicine concepts using biomedical terminology for health care providers, patients, and the public (BIO II F2)

## Chinese Herbology

### DOMAIN I: Safety and Quality of Chinese Herbs

- A. Safety of Chinese herbs and herbal formulas
1. Cautions and contraindications of herbs and herbal formulas
    - a. Identify cautions and contraindications of herbs and herbal formulas (e.g., allergies, relevant to pattern/syndrome differentiation) (CH I A1a)
  2. Herb, supplement, and pharmaceutical interactions
    - a. Recognize potential herb, supplement, and pharmaceutical interactions (CH I A2a)

- b. Apply strategies to avoid herb, supplement, and pharmaceutical interactions (CH I A2b)
  - 3. Potential adverse effects and toxicity
    - a. Identify potential toxicity of herbs and herbal formulas (CH I A3a)
    - b. Apply strategies to prevent toxicity of herbs and herbal formulas (CH I A3b)
    - c. Identify the effects of processing herbs on efficacy and toxicity (CH I A3c)
    - d. Identify combinations of herbs that are toxic or produce adverse effects (e.g., 18 Incompatibles [Shi Ba Fan], 19 Antagonisms [Shi Jiu Wei]) (CH I A3d)
- B. Quality control of raw and prepared Chinese herbs and formulas
  - 1. Identify the quality of raw herbs based on appearance, smell, and taste (CH I B1)
  - 2. Apply substitutions for raw and prepared herbs and formulas containing obsolete substances (e.g., endangered species), animal products, and allergens (CH I B2)
  - 3. Select and prescribe raw and prepared herbs and formulas that adhere to current Good Manufacturing Practice standards (cGMP) (CH I B3)
  - 4. Store, dispense, and inventory raw and prepared herbs and formulas according to best practice and FDA requirements (e.g., temperature, moisture, expiration date) (CH I B4)
  - 5. Recognize signs of contamination of stored raw and prepared herbs and formulas (CH I B5)

## DOMAIN II: Treatment Planning and Strategies

- A. Chinese herbal recommendations based on assessment
  - 1. Individual herbs
    - a. Herbal properties
      - i. Identify characteristics (tastes, temperature, directions, and channels entered) of individual herbs (CH II A1ai)
      - ii. Identify herbs according to their therapeutic categories (CH II A1a ii)
    - b. Functions and indications
      - i. Identify the functions and indications of individual herbs (CH II A1bi)
      - ii. Identify the effects of processing (Pao Zhi) (e.g., honey-fried [Mi Zhi], dry-fried [Chao]) on the functions and indications of herbs (CH II A1bii)
      - iii. Apply/prescribe Chinese herbs for patients based on presenting signs and symptoms (CH II A1biii)
    - c. Herbal pairing (Dui Yao)
      - i. Identify the functions and indications of common herbal pairs (CH II A1ci)
      - ii. Apply/prescribe common herbal pairs for patients based on presenting signs and symptoms (CH II A1cii)
    - d. Treatment strategy
      - i. Use treatment strategies, principles, and methods of herbal medicine (e.g., tonify, harmonize, sweat) to choose herbs and/or formulas to achieve specific treatment strategies (CH II A1di)
  - 2. Chinese herbal formulas
    - a. Ingredients
      - i. Identify the ingredients of herbal formulas (CH II A2ai)
      - ii. Identify potential substitutions for individual ingredients in herbal formulas (CH II A2a ii)
      - iii. Apply strategies for combining individual herbs to create herbal formulas (CH II A2a iii)
      - iv. Identify the synergistic relationships of ingredients in herbal formulas (CH II A2a iv)
    - b. Herbal formula hierarchy

- i. Identify and analyze the Hierarchy within herbal formulas (e.g., chief [Jun], deputy [Chen]) (CH II A2bi)
    - c. Functions and indications
      - i. Identify the functions and indications of herbal formulas (CH II A2ci)
      - ii. Apply/prescribe herbal formulas based on patient assessment (CH II A2cii)
    - d. Treatment strategy
      - i. Use treatment strategies, principles, and methods of herbal medicine (e.g., tonify, harmonize, sweat) to choose herbs and/or formulas to achieve specific treatment strategies (CH II A2di)
      - ii. Modify prescribed herbal formulas based on patient assessment (e.g., signs, symptoms, constitution) (CH II A2dii)
  - B. Preparation and administration of Chinese herbs and formulas
    - 1. Forms of administration (e.g., decoction, raw, pills, granules, topical)
      - a. Differentiate and apply herbs and formulas based on forms of administration (CH II B1a)
      - b. Demonstrate knowledge of techniques for external applications (e.g., plasters, poultices, soaks) (CH II B1b)
    - 2. Specific decoction methods
      - a. Apply specific decoction methods to prepare herbs and herbal formulas (e.g., add near the end, pre-decoct, wrap in cheesecloth) (CH II B2a)
    - 3. Dosage of herbs and formulas
      - a. Apply common dosages of herbs and formulas (CH II B3a)
      - b. Identify the effect of dosage on therapeutic effectiveness and toxicity (CH II B3b)
  - C. Chinese dietary therapy
    - 1. Identify the characteristics, actions, and indications of foods based on Chinese medicine principles (CH II C1)
    - 2. Recommend dietary therapy according to Chinese medicine principles (CH II C2)

### DOMAIN III: Patient Management

- A. Patient assessment
  - 1. Evaluate the suitability of herbal treatment for the patient (CH III A1)
  - 2. Assess whether patient is better served by another modality (e.g., biomedicine, acupuncture, psychotherapy) (CH III A2)
- B. Patient education
  - 1. Advise patients of the benefits and expectations of herbal therapy (CH III B1)
  - 2. Advise patients of the potential adverse effects and risks of herbal therapy (CH III B2)
  - 3. Advise patients on the preparation and administration methods for herbs and formulas (CH III B3)
- C. Treatment evaluation and modification
  - 1. Assess effectiveness of herbal therapy (CH III C1)
  - 2. Monitor patient response to herbal therapy for adverse effects (CH III C2)
  - 3. Monitor effects of herbal therapy when combined with pharmaceuticals and supplements (CH III C3)
  - 4. Evaluate and modify treatment plans based on patient response to herbal therapy (CH III C4)