

## ACAOM COMPREHENSIVE STANDARDS AND CRITERIA

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<b>Criterion 7.01: PROGRAM LEVEL</b>	
<i>Related Policies:</i>	
<i>References:</i>	

**INSTITUTIONAL COMPONENTS**

*There are no institutional components for this criterion.*

**PROGRAMMATIC COMPONENTS**

ALL PROGRAMS

The program must:

- A. be appropriate to an institution of higher education offering a graduate-level professional degree in acupuncture or Oriental medicine.
- B. be sufficiently rigorous in breadth and depth, and appropriate to graduate professional education and training for practitioners in the field of acupuncture and/or Oriental medicine.
- C. ensure that the sequencing, duration, nature and content of all didactic, practical, and clinical training courses are appropriately integrated and consistent with program purpose, goals, and expected student learning outcomes.
- D. show evidence that it has developed appropriate course prerequisites and that students have completed all prerequisites prior to enrollment in a course.
- E. demonstrate that institutional commitment, the level of instruction, supervision, oversight, and opportunities for graduates, are comparable for each language track of programs taught in multiple languages.
- F. demonstrate that institutional commitment, the level of instruction, supervision, oversight, and opportunities for graduates, are comparable at each location for programs taught at multiple locations.

<b>Criterion 7.02: MINIMUM PROGRAM LENGTH, CREDITS AND HOURS</b>	
<i>Related Policies:</i>	<a href="#">ACAOM Glossary</a>
<i>References:</i>	

**INSTITUTIONAL COMPONENTS**

*There are no institutional components for this criterion.*

**PROGRAMMATIC COMPONENTS**

MASTER'S LEVEL PROGRAMS

These credit requirements are over and above the 60 semester credits required for admission to the professional master's level program and must meet ACAOM credit related definitions.

A. Professional **acupuncture programs** must:

1. be at least three (3) academic years in length
2. be a minimum of 105 semester credits of instruction, including at least:
  - a) 705 clock (contact) hours of instruction in Oriental medical theory, diagnosis and treatment techniques in acupuncture, and related studies.
  - b) 660 clock hours of instruction in clinical training, including at least 150 hours in clinical observation and 500 clock hours of instruction in clinical internship.
  - c) 450 clock hours of instruction in biomedical clinical sciences.
  - d) 90 clock hours of instruction in counseling, communication, ethics and practice management.

B. Professional **Oriental medicine programs** must:

1. be at least four (4) academic years in length
2. be a minimum of 146 semester credits of instruction, including at least:
  - a) 705 clock hours of instruction in Oriental medical theory, diagnosis and treatment techniques in acupuncture, and related studies.
  - b) 450 clock hours of instruction in didactic Oriental herbal studies.
  - c) 870 clock hours of instruction in integrated acupuncture and herbal clinical training, including at least 150 hours in clinical observation and 700 clock hours of instruction in clinical internship.
  - d) 510 clock hours of instruction in biomedical clinical sciences.
  - e) 90 clock hours of instruction in counseling, communication, ethics, and practice management.

PROFESSIONAL DOCTORATE [PD] PROGRAMS

These credit requirements are over and above the 90 semester credits required for admission to the professional doctorate program and must meet ACAOM credit-related definitions.

C. Professional doctoral programs in **acupuncture** must:

1. be at least four (4) academic years in length
2. be a minimum of 121 semester credits of instruction and include a minimum of 790 clock hours of instruction of clinical training, comprised of at least 150 hours in clinical observation and 500 clock hours of instruction in clinical internship.

3. meet or exceed all existing ACAOM standards and criteria required for master's level acupuncture programs, in addition to meeting the PD standards, criteria, and professional competencies defined in this document.

D. Professional doctoral programs in **Oriental medicine** must:

1. be at least four (4) academic years in length
2. be a minimum of 162 semester credits of instruction and include a minimum of 1,000 clock hours of instruction of clinical training, comprised of at least 150 hours in clinical observation and 700 clock hours of instruction in clinical internship.
3. meet or exceed all existing ACAOM standards and criteria required for master's level Oriental medicine programs, in addition to meeting the PD standards, criteria, and professional competencies defined in this document.

E. **Professional doctorate completion tracks** in acupuncture or Oriental medicine must:

1. be a minimum of 16 semester credits of instruction (accounting for a minimum of 300 clock hours of instruction) and include a minimum of 130 clock hours of instruction of demonstrated clinical experience that leads to the development of professional competencies in the systems-based medicine domain outlined in *Criterion 7.04: Professional Competencies*.
2. meet or exceed all existing ACAOM standards and criteria for accreditation required for master's level acupuncture or Oriental medicine programs, in addition to meeting the PD standards, criteria, and professional competencies defined in this document.

CHINESE HERBAL MEDICINE CERTIFICATE PROGRAMS

These credit requirements are over and above the requirements for admission to the program and must meet ACAOM credit related definitions.

F. **Chinese herbal medicine certificate programs** must be a minimum of 41 semester credits of instruction, including at least:

1. 450 clock hours of instruction in didactic AOM-related herbal studies,
2. 200 clock hours of instruction in herbal clinical internship training,
3. 60 clock hours of instruction in related biomedical clinical sciences.

POST-PROFESSIONAL DOCTORATE [DAOM] PROGRAMS

These hour requirements are over and above the requirements for admission to the post-professional doctorate program.

G. Post-professional doctoral programs must be a minimum of 1,200 clock hours of instruction and include a minimum of 650 clock hours of instruction of demonstrated clinical experience

(such as observation, internship, externship, clinical tutorials, case study composition, case study presentation, scholarly writing for publication, clinical pedagogy/supervision, etc.). The demonstrated clinical experience must include of a minimum of 200 clock hours of instruction of clinical training, as defined in [ACAOM's glossary](#).

<b>Criterion 7.03: MAXIMUM PROGRAM LENGTH, CREDITS AND HOURS</b>	
<i>Related Policies:</i>	
<i>References:</i>	

#### **INSTITUTIONAL COMPONENTS**

*There are no institutional components for this criterion.*

#### **PROGRAMMATIC COMPONENTS**

##### ALL PROGRAMS

The program must implement a written policy establishing a maximum time frame in which a student must complete the program, which must be a period that is no longer than 200 percent of the published length of the educational program.

<b>Criterion 7.04: PROFESSIONAL COMPETENCIES</b>	
<i>Related Policies:</i>	
<i>References:</i>	<a href="#">CCAOM Clean Needle Technique Manual</a>

#### **INSTITUTIONAL COMPONENTS**

*There are no institutional components for this criterion.*

#### **PROGRAMMATIC COMPONENTS**

##### ALL PROGRAMS

The program must adopt and implement a curriculum that reflects the attainment of the program learning outcomes and the achievement of all relevant required professional competencies, as outlined by this criterion.

##### MASTER'S LEVEL PROGRAMS

Master's level program learning outcomes must address and lead to the development of all professional competencies designated as master's level, as outlined by this criterion.

##### CHINESE HERBAL MEDICINE CERTIFICATE PROGRAMS

Chinese herbal medicine certificate program learning outcomes must address and lead to the development of all professional competencies designated as master's level as outlined by this criterion, with the exception of specified components of Patient Care Domain 6.

*\*Note that many of the competencies may be addressed via education completed in master's degree programs prior to or concurrent with enrollment in the Chinese herbal medicine certificate program, and not within the certificate curriculum itself.*

### PROFESSIONAL DOCTORATE [PD] PROGRAMS

Professional doctorate program learning outcomes must address and lead to the development of all professional competencies designated as master's level by this criterion; and all professional competencies designated as professional doctoral level professional competencies, as outlined by this criterion.

*Professional doctorate completion tracks* must address each of the domains and related professional competencies identified as professional doctoral level:

- Patient Care Domain 8: Advanced Diagnostic Studies
- Systems-Based Medicine Domain 2: Patient Care Systems
- Systems-Based Medicine Domain 3: Collaborative Care
- Professional Development Domain 2: Formulating and Implementing Plans for Individual Professional Development
- Professional Development Domain 3: Incorporating Scholarship, Research and Evidence-Based Medicine/Evidence-Informed Practice into Patient Care

### POST-PROFESSIONAL DOCTORATE [DAOM] PROGRAMS

Post-professional doctorate program learning outcomes must address and lead to the development of all professional competencies designated as post-professional doctoral level professional competencies, as outlined by this criterion under the following domains:

- Patient Care Domain 1: Foundational Knowledge
- Patient Care Domain 4: AOM Diagnosis (applied with qualitatively advanced competence beyond master's-level)
- Patient Care Domain 6: AOM Treatment (applied with qualitatively advanced competence beyond master's-level)
- Patient Care Domain 8: Advanced Diagnostic Studies
- Systems-Based Medicine Domain 3: Collaborative Care
- Professional Development Domain 3: Incorporating Scholarship, Research and Evidence-Based Medicine/Evidence-Informed Practice into Patient Care

## **PATIENT CARE COMPETENCIES**

### **Definitions and Rationale**

Critical thinking is the cognitive process of objectively analyzing and evaluating propositions that have been offered as true. It includes reflecting upon the specific meaning of statements, examining evidence, and reasoning to form a judgment. AOM practitioners use critical thinking to improve the likelihood of desirable patient outcomes. Critical thinking also involves evaluating the decision-making process, including the reasoning that went into conclusions and the factors considered in making a decision concerning patient care. The development of critical thinking skills is an essential precursor of professional judgment.

Professional judgment involves the application of professional knowledge and experience to define objectives, solve problems, establish guidelines, evaluate the work of others, interpret results, provide advice or recommendations, assess recommendations of others, and other matters which have an element of latitude in decision-making.

Diagnostic studies consist of comprehensive evaluations for formulating an AOM diagnosis. AOM practitioners are expected to be able to review, understand, and communicate about diagnostic studies pursuant to AOM principles and theory.

AOM Diagnosis is the act of collecting and analyzing relevant clinical information to inform AOM treatment, and the decision reached by such analysis.

Case management is a process of managing the patient's care, including treatment, follow-up, referral and collaboration.

AOM treatment may include, but is not limited to: the use of AOM clinical procedures to stimulate specific locations via mechanical, electrical, magnetic, thermal, laser, photon, or wave-generating means; needle insertion (e.g., acupuncture, dry-needling); moxibustion and localized heat therapy; therapeutic blood withdrawal; cupping; scraping/gua sha; manual therapy (e.g., bodywork, tui na, shiatsu); therapeutic exercise (e.g., taiji, qigong); nutritional counseling; lifestyle recommendations; and internal and/or external herbal therapy.

Emergency Management is employing inpatient and outpatient services to prevent the death or serious health impairment of the recipient.

### **Patient Care Domain 1: FOUNDATIONAL KNOWLEDGE**

#### **Master's Level Competencies**

The student must demonstrate the ability to acquire and utilize the knowledge of AOM basic principles, modes of diagnosis, and treatment strategies in the care of patients.

#### **Post-Professional Doctoral Level Competencies**

The student must demonstrate the ability to:

- A. make and defend judgments based on comprehensive, in-depth knowledge of AOM principles, modes of diagnosis, and treatment strategies in the care of patients.
- B. interpret historical cultural perspectives and use them to clarify essential concepts represented in the classical texts of AOM.
- C. demonstrate relevant Chinese language terminology skills sufficient to clarify essential concepts represented in the classical texts of AOM.

**Patient Care Domain 2: CRITICAL THINKING/PROFESSIONAL JUDGMENT**

Master's Level Competencies

The student must demonstrate the ability to:

- A. engage in good judgment that relies on knowledge and experience, is sensitive to context, and is self-correcting.
- B. apply critical thinking skills, professional judgment, and cultural sensitivity to patient health care concerns.
- C. document and support AOM treatment choices.
- D. identify, locate, and assess appropriate sources of information to support professional judgment and the analysis of clinical courses of action.

**Patient Care Domain 3: HISTORY TAKING AND PHYSICAL EXAMINATION**

Master's Level Competencies

The student must demonstrate the ability to:

- A. provide a comfortable, safe environment for history taking and the patient examination.
- B. conduct a history and physical examination with appropriate documentation.
- C. recognize clinical signs and symptoms that warrant referral to, or collaborative care, with other health professionals.

**Patient Care Domain 4: AOM DIAGNOSIS**

Master's Level Competencies

The student must demonstrate the ability to:

- A. collect and organize relevant data to facilitate the development of an AOM diagnosis.
- B. access relevant resources such as classical and modern literature, research literature, and clinical experience in arriving at an AOM diagnosis.



- C. formulate an AOM diagnosis pursuant to AOM principles and theory.
- D. describe and apply the biomedical pathophysiological process responsible for the patient's clinical presentation.
- E. integrate relevant physical exam findings, laboratory, and diagnostic tests and procedures into an AOM diagnosis.
- F. explain the subjective and objective findings that warrant consultation with or referral to other health care providers.

#### Post-Professional Doctoral Level Competencies

The student must demonstrate the ability to:

- A. apply all master's-level professional competencies of Patient Care Domain 4: AOM Diagnosis in core and concentration areas with competence that is qualitatively advanced beyond entry-level.
- B. appraise and apply in-depth knowledge of AOM principles and theory to formulate a comprehensive AOM diagnosis.

#### **Patient Care Domain 5: CASE MANAGEMENT**

##### Master's Level Competencies

The student must demonstrate the ability to:

- A. describe the role of the patient in successful treatment outcomes.
- B. demonstrate cultural competence in case management.
- C. employ a comprehensive process for the care of patients.
- D. collaborate with the patient to develop short, medium, and long-term treatment plans.
- E. modify plans consistent with changes in the patient's condition.
- F. assess patient outcomes.
- G. communicate with other health care providers to determine an appropriate plan of care.
- H. manage inappropriate patient behavior.
- J. educate patients about behaviors and lifestyle choices that create a balanced life and promote health and wellness.
- K. provide a report of findings and health care plan to the patient.

- L. create reports and professional correspondence relevant to the care of patients.
- M. identify a range of referral resources and the modalities they employ.
- N. use information systems in case management.

### **Patient Care Domain 6: AOM TREATMENT**

#### Master's Level Competencies

The student must demonstrate the ability to:

- A. describe the fundamental theory underlying the application of AOM treatment.
- B. describe the principles and methods of AOM treatment and its related clinical procedures.
- C. accurately and appropriately locate acupuncture points. (not relevant to Chinese herbal medicine certificate programs)
- D. articulate acupuncture point functions and the decision-making process for point selection. (not relevant to Chinese herbal medicine certificate programs)
- E. administer AOM treatment and use AOM treatment equipment consistent with relevant recognized safety guidelines, including the best practices for acupuncture needles safety and related procedures described in the *Clean Needle Technique (CNT) Manual* (see [CCAOM Clean Needle Technique Manual](#) specifically referenced and incorporated herein), and OSHA protocols.
- F. recognize potential adverse events for each clinical procedure, including, but not limited to, healthcare associated infections.
- G. describe safety considerations and guidelines to prevent adverse events for each clinical procedure.
- H. describe state and federal regulations relevant to the practice of acupuncture and herbal medicine, if applicable, including scope of practice, vendor compliance with manufacturing standards, and appropriate mechanisms for the reporting of serious adverse events.
- J. describe and demonstrate appropriate patient draping and positioning to optimize AOM treatment and maintain the patient's dignity.
- K. employ health, cleanliness, and safety practices to reduce transmission of diseases through hygienic methods.
- L. describe and employ appropriate cleaning and pathogen reduction techniques in healthcare and AOM practice locations.

- M. recognize ethical issues and evaluate appropriate actions when administering an AOM treatment.
- N. For Oriental medicine (OM) programs and Chinese herbal medicine certificate programs, in addition to the above competencies, the student must:
1. describe the fundamental theory underlying the use of herbs, natural products and formulations.
  2. accurately articulate properties and functions of herbs and natural products in the materia medica.
  3. recognize obsolete or restricted herbs and natural products (i.e., endangered species, restricted or toxic substances) and identify appropriate alternatives for said substances.
  4. accurately articulate properties, functions, principles, dosages and ingredients of traditional formulations.
  5. compose and revise formulations of appropriately dosed herbs and natural products based on traditional practice and patient assessment.
  6. safely and effectively administer herbs and natural products, formulations, and prepared products (i.e., dietary supplements).
  7. evaluate the efficacy of appropriately administered herbs, natural products, and formulations through the identification and review of current research.
  8. recall elementary concepts of botany and common chemical constituents of herbs and natural products.
  9. appraise potential toxicity, side effects, contraindications, and pharmaceutical interactions for herbs and natural products, formulas and prepared products.
  10. describe state and federal regulations relevant to the practice of Oriental medicine, including scope of practice, vendor compliance with manufacturing standards, and appropriate mechanisms for the reporting of serious adverse events.
  11. describe the various forms of formulation preparation.
  12. describe dispensary practices that provide quality assurance, including product storage, facility management, preparation practices, product tracking, and record-keeping,
  13. recognize ethical issues and evaluate appropriate actions when administering herbs and natural products.

### Post-Professional Doctorate Competencies

The student must demonstrate the ability to administer AOM treatment, including Chinese herbal medicine as applicable, in core and concentration areas with competence that is qualitatively advanced beyond entry-level.

### **Patient Care Domain 7: EMERGENCY MANAGEMENT**

#### Master's Level Competencies

The student must demonstrate the ability to:

- A. identify subjective and objective findings that indicate urgent referral.
- B. identify risk factors and findings that suggest medical conditions requiring referral.
- C. implement key emergency first-aid procedures, including CPR.
- D. describe the legal implications of inappropriate emergency management.
- E. describe correct emergency management documentation and follow-up procedures.
- F. develop an emergency management plan for private office and multi-disciplinary settings.

### **Patient Care Domain 8: ADVANCED DIAGNOSTIC STUDIES**

#### Professional and Post-Professional Doctoral Level Competencies

The student must demonstrate the ability to:

- A. describe the relevant laws and regulations, including scope of practice, that may govern or limit conducting diagnostic studies.
- B. explain the clinical indications, risks, and benefits for diagnostic procedures.
- C. outline the principles and applications of equipment utilized for diagnostic imaging, laboratory, and other relevant diagnostic tools.
- D. assess written diagnostic reports, including the range of values that distinguish normal from abnormal findings, as relevant to patient care and communication with other health care providers.
- E. review findings from relevant diagnostic studies with objective and subjective findings from the assessment of the patient.
- F. communicate effectively with other health care providers regarding the results of diagnostic studies.

## **SYSTEMS-BASED MEDICINE COMPETENCIES**

### **Definitions and Rationale**

Systems-based medicine is the description of the organization, practice, and components of medicine in terms of the whole medical system, including medical theories, standards of care, regulatory requirements, business practices, and policy. Medical systems are described in terms of the relationship between individuals and whole systems. Individual and collective systems may be expressed in terms of: self-and-other, self-and-collective, and between collectives. More specifically, the systems view may be seen in terms of medical theories, but also in the areas of business practices and policy development. AOM Practitioners must be able to deliver and coordinate care within healthcare systems, provide collaborative care such as that found in team-based and multi-disciplinary health care settings, and engage other health care professionals regarding the appropriate use of AOM. Note that a critical component of AOM practice in integrative practice settings includes the competencies necessary to educate other health care professionals regarding the appropriate use of AOM. This requires practitioners to possess the attitudes, knowledge, and skills to communicate with other health care providers in appropriate, readily understandable terms.

### **Systems-Based Medicine Domain 1: EDUCATION AND COMMUNICATION**

#### Master's Level Competencies

The student must demonstrate the ability to:

- A. summarize the applicability of AOM to diseases and syndromes in the biomedical model.
- B. communicate with other health care professionals in their own terms.
- C. demonstrate knowledge of other health care disciplines.
- D. discuss AOM in terms of relevant scientific theories.
- E. articulate expected clinical outcomes of AOM from a biomedical perspective.
- F. translate, explain and discuss AOM terminology for effective communication.
- G. demonstrate AOM techniques and discuss their relevance in multi-disciplinary settings.
- H. access relevant and appropriate information from a wide variety of sources to support the education of colleagues.
- J. describe and discuss the clinical scope of AOM in an informed, authoritative, and appropriate manner.

## **Systems-Based Medicine Domain 2: PATIENT CARE SYSTEMS**

### **Professional Doctoral Level Competencies**

The student must demonstrate the ability to:

- A. guide a patient into health care systems, e.g., homeless care, elder care, and family services.
- B. identify, describe, and assess possible solutions to healthcare disparities due to socioeconomic factors.
- C. describe the role of AOM professionals within current health care systems and the impact of that role on patient care.
- D. employ patient care in the context of relevant health care systems.
- E. differentiate between models of care and treatment modalities.

## **Systems-Based Medicine Domain 3: COLLABORATIVE CARE**

### **Professional and Post-Professional Doctoral Level Competencies**

The student must demonstrate the ability to:

- A. recognize the impact that organizational culture and established systems have on patient care.
- B. interact appropriately and skillfully with other members of the health care team and within that health care system.
- C. describe the prevailing and emerging organization, structure and responsibilities of the health care team.
- D. discuss, in the appropriate context, the patient's condition using vocabulary and concepts common to other members of the health care team.
- E. articulate the importance of supporting and participating in professional activities and organizations.
- F. compare and contrast common medical models.

## **PROFESSIONAL DEVELOPMENT COMPETENCIES**

### **Definitions and Rationale**

Professional development is a process for continued development of individual practitioners that enables them to expand their knowledge base and fulfill their potential to better meet the needs of patients. Scholarship is a systematic pursuit of a topic in the form of an objective, rational inquiry that involves critical analysis.

Evidence-based medicine is the conscientious, explicit, and judicious use of current best evidence in making decisions about the care of individual patients<sup>1</sup>. Evidence-based medicine includes sophisticated methods of evidence collection, analysis, and integration. Evidence-informed practice is based on the principle that the development and implementation of interventions is informed by the most current, relevant, and reliable evidence about the effectiveness. AOM practitioners should understand the purpose and process of evidence-based medicine and evidence-informed practice, and be able to appraise and apply the evidence, then reflect on their practice. Scholarly research in source and contemporary works in the field of Oriental medicine constitutes an important evidentiary resource in support of clinical practice.

Practitioners of acupuncture and Oriental Medicine must have a comprehensive knowledge of ethics and practice management to succeed in professional practice.

### **Professional Development Domain 1: EDUCATION AND COMMUNICATION**

#### **Master's Level Competencies**

The student must demonstrate the ability to:

- A. apply data and information concerning confidentiality and HIPAA, informed consent, scope of practice, professional conduct, malpractice and liability insurance, requirements of third-party payers, OSHA, professional development, other applicable legal standards to improve practice management, and records management systems.
- B. develop risk management and quality assurance programs.
- C. practice ethically and behave with integrity in professional settings.
- D. articulate the strengths and weaknesses of multiple practice and business models, and create and implement:
  1. practice/office policies and procedures.
  2. business/professional plans designed to support success in professional practice.
  3. marketing/outreach plans designed to support success in professional practice.

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<sup>1</sup> Sackett DL, Rosenberg WM, Gray JA, Haynes RB, Richardson WS. Evidence based medicine: what it is and what it isn't. *BMJ*, 1996 Jan 13; 312 (7023): 71-72. PubMed PMID: 8555924

- E. describe and apply a variety of billing and collection systems.
- F. demonstrate use of electronic health records and electronic medical records systems.

**Professional Development Domain 2: FORMULATING AND IMPLEMENTING PLANS FOR INDIVIDUAL PROFESSIONAL DEVELOPMENT**

Professional Doctoral Level Competencies

The student must demonstrate the ability to:

- A. identify and remediate areas of professional weakness.
- B. propose improvement methods in the analysis of practice for the purpose of developing a program of learning on a lifelong basis.
- C. identify sources of ongoing professional development, education, and research, both classical and contemporary.
- D. describe emerging technology systems for information access and management.
- E. assess professional development needs and use available professional development resources to respond to changes in the local, state, regional, and national health care environment.

**Professional Development Domain 3: INCORPORATING SCHOLARSHIP, RESEARCH AND EVIDENCE-BASED MEDICINE/EVIDENCE-INFORMED PRACTICE INTO PATIENT CARE**

Professional and Post-Professional Doctoral Level Competencies

The student must demonstrate the ability to:

- A. describe evidence-based medicine and evidence-informed practice; and differentiate between the two.
- B. describe data collection methods to facilitate information dissemination in the field.
- C. assess research, including hypothesis, design, and methods, both qualitative and quantitative.
- D. describe the role and purposes of outcomes research.
- E. modify treatment plans and protocols using new information from current quantitative and qualitative research.
- F. use evidence-based medicine and/or evidence-informed practice to improve the patient care process.



<b>Criterion 7.05: CLINICAL TRAINING</b>	
Related Policies:	<a href="#">ACAOM Glossary</a>
References:	

### **INSTITUTIONAL COMPONENTS**

*There are no institutional components for this criterion.*

### **PROGRAMMATIC COMPONENTS**

#### MASTER'S LEVEL, CHINESE HERBAL MEDICINE CERTIFICATE, AND PROFESSIONAL DOCTORATE [PD] PROGRAMS

- A. The clinical internship must be conducted in a clinical internship location (see [ACAOM Glossary](#)).
- B. The clinical training must provide sufficient patient contacts to fulfill the professional competencies expected of program graduates.
  1. An **acupuncture program** must ensure that the clinical internship training, conducted under the supervision of program approved supervisors, consists of at least 250 treatments of student-delivered patient care where student interns conduct patient interviews, perform diagnosis and treatment planning, perform appropriate acupuncture and/or Oriental medicine treatments, and follow-up on patients' responses to treatment.
  2. An **Oriental medicine program** must ensure that the clinical internship training, conducted under the supervision of program approved supervisors, consists of at least 350 treatments of student-delivered patient care where student interns conduct patient interviews, perform diagnosis and treatment planning, perform appropriate acupuncture and/or Oriental medicine treatments, and follow-up on patients' responses to treatment.
  3. A **Chinese herbal medicine certificate program** must ensure that the clinical internship training, conducted under the supervision of program approved supervisors, consists of at least 100 treatments of student-delivered patient care where student interns conduct patient interviews, perform diagnosis and treatment planning, administer appropriate herbal medicine treatments, and follow-up on patients' responses to treatment.
- C. Clinical training must place students in internship settings with an adequate number and variety of supervisors; and must provide a wide range of educational experiences.
- D. The program must incorporate two or more stages or levels of clinical training, which must be associated with clearly defined outcomes that describe the achievement of competency.

#### MASTER'S LEVEL AND PROFESSIONAL DOCTORATE [PD] PROGRAMS ONLY

- E. The program must ensure that each student fulfills at least 150 hours observing acupuncturists and senior student interns performing AOM therapies in a clinical setting. A majority (greater than 50%) of the clinical observation experience must include patient diagnosis and/or treatment performed by experienced practitioners that have all necessary state authority to perform the AOM therapies and associated faculty duties.

**PROFESSIONAL DOCTORATE [PD] PROGRAMS ONLY**

- F. As part of its clinical training, the PD program must provide opportunities for interns to engage in collaborative interactions with other medical providers in appropriate clinical settings.

**POST-PROFESSIONAL DOCTORATE [DAOM] PROGRAMS**

- G. The program must offer a concentration in at least one clinical specialty area and/or AOM-related (see [ACAOM Glossary](#)) modality.
- H. The program must provide in-depth, advanced clinical training in the defined concentration(s) that leads to development of clinical expertise beyond entry-level.
- J. The program must provide in-depth didactic and practical training in the area(s) of concentration sufficient to support the clinical experience.
- K. As part of its clinical training, the program must provide opportunities for interns to engage in collaborative interactions with other medical providers in appropriate clinical settings.
- L. The clinical curriculum of the doctoral program must provide the student opportunities for assuming in-depth professional responsibilities and demonstrating professional role modeling. This may include supervised: teaching assignments, participation in administration of services, quality assurance activities, clinical research activities, and supervision responsibilities.
- M. The clinical program must promote the integration of practice and scholarly inquiry.

<b>Criterion 7.06: SYLLABI</b>	
<i>Related Policies:</i>	
<i>References:</i>	

**INSTITUTIONAL COMPONENTS**

*There are no institutional components for this criterion.*

**PROGRAMMATIC COMPONENTS**

**ALL PROGRAMS**

- A. A syllabus must be prepared for each program course or major unit of instruction including clinical instruction.
- B. Syllabi must be:
  - 1. maintained in the program's curriculum files;
  - 2. distributed to each student in the course/clinical experience; and

3. available to all faculty.
- C. Syllabi must contain all required information needed for a student to successfully complete the requirements of the course, including at minimum:
1. the course description;
  2. learning outcomes described in measurable terms;
  3. prerequisites for enrolling in the course;
  4. an outline of the content of the course and didactic and clinical instruction in enough detail to permit the student to see its full scope;
  5. schedule of deadlines for course requirements (e.g., papers, projects, examinations);
  6. method(s) of instruction;
  7. assessment and grading methods;
  8. type of grading system used;
  9. attendance policy;
  10. procedure for accommodations request;
  11. required and recommended reading; and
  12. expected out of class study time and specific out of class requirements.

<b>Criterion 7.07: CONTINUING EDUCATION</b>	
<i>Related Policies:</i>	
<i>References:</i>	

### ***INSTITUTIONAL COMPONENTS***

For institutional offerings of continuing education and/or special instructional activities, provision for such activities must include an adequate administrative structure, a sound financial base, and appropriate facilities.

### ***PROGRAMMATIC COMPONENTS***

#### **ALL PROGRAMS**

Continuing education activities or hours must be non-credit bearing and cannot be converted into academic credits for any purpose.

<b>Criterion 7.08: CLINICAL RESEARCH PROJECTS</b>	
<i>Related Policies:</i>	
<i>References:</i>	

**INSTITUTIONAL COMPONENTS**

*There are no institutional components for this criterion.*

**PROGRAMMATIC COMPONENTS**

POST-PROFESSIONAL DOCTORATE [DAOM] PROGRAMS

- A. The doctoral program must require students to demonstrate the achievement of professional competencies under the *Professional Development Domain* as outlined in *criterion 7.04* by completing an acceptable clinically oriented research project. The project must demonstrate the necessary knowledge and skills for designing and critiquing approaches to systematic inquiry and the use of qualitative and/or quantitative methods. Clinical research projects may include, but are not limited to:
  - 1. Theoretical analyses
  - 2. Surveys or analyses of archival data
  - 3. Outcomes research
  - 4. Systematic, qualitative investigations
  - 5. Public policy issues
  - 6. Case studies
  - 7. Evaluative research
  - 8. Interpretive translation research
  - 9. Educational research - professional and patient
  
- B. The products from clinical research projects must meet academic form and style standards suitable for peer-reviewed professional publications.
  
- C. The program must develop a comprehensive, faculty committee-based review process for the clinical research projects that includes, at a minimum, evaluation of:
  - 1. the research interest, ethical issues, and methods of addressing such in the research,
  - 2. data gathering methods,
  - 3. progress toward completion, and
  - 4. final project content, format, and delivery.