

# Standard of Practice and Performance Expectations for Acupuncture

Most Recent Revision: July 15, 2009  
Initial policy: January, 1995

Board publications contain practice considerations and standards that, in the absence of extenuating circumstances, must be adopted by all Registrants in the care of their patients and in the practice of the profession. Board standards and guidelines are developed in consultation with professional practice leaders and describe current professional expectations. It is important to note that these publications may be used by the Board or other bodies in determining whether appropriate standards of practice and professional responsibilities have been maintained.

**Definition of Standard of Practice:** An approach to a professional issue that is generally accepted as appropriate by informed and competent Registrants.

**Definition of Performance Expectation:** The manner in which a Registrant typically achieves the corresponding standard of practice.

**Purpose:** Acupuncture will soon be a controlled act under the *Regulated Health Professions Act*. Naturopathic Doctors are authorized to perform this procedure. The Board of Directors of Drugless Therapy-Naturopathy (BDDT-N) has developed the following Standard of Practice for the safe and effective performance of needle acupuncture in Ontario.

**Intent:** To assist Registrants in maintaining a reasonable standard of care and skill when using acupuncture procedures.

## Standard of Practice

### 1.0 COMPETENCY

The Registrant acquires the knowledge, training, competence and judgment necessary to perform needle acupuncture safely and effectively, to be able to identify contraindications to acupuncture and to be able to identify when acupuncture is expected to provide an effective treatment for the patient's disease, disorder or dysfunction.

*Note:* If a Registrant performs moxibustion and/or electro acupuncture s/he must be familiar with the contra-indications for these methods.

*Refer to the Performance Expectation in the opposite column.*

## Performance Expectation

### 1.0 COMPETENCY

The Registrant has, and is able to demonstrate, current knowledge of:

- TCM/TAM assessment, diagnosis, treatments,
- theory, philosophy and principles of acupuncture,
- anatomy, acupuncture points, acupuncture meridians,
- treatment techniques,
- indications and contraindications,
- when to refer,
- emergency procedures.

## **2.0 INFECTION CONTROL**

Direct contact with blood and other body fluids must be avoided in all patient care settings.

## **3.0 NEEDLE ACUPUNCTURE THERAPY**

For the purpose of this document needle acupuncture is the insertion and removal of filiform needles into specific points in the body for therapeutic purposes.

### **3.1. Establishing the Clean Field**

The Registrant establishes and maintains a clean field and uses only single use, sterile, disposable needles.

## **2.0 INFECTION CONTROL**

For the protection of the public and the Registrant, it is best to take the same precautions for all patients that would be taken for a patient known to have a communicable disease.

Direct contact with blood and other body fluids is avoided in all patient care settings. Disposable gloves are worn whenever there is a reasonable possibility of coming into contact with body fluids.

The Registrant:

- uses only disposable sterile needles,
- never reuses needles, under any circumstances,
- attends to the proper disposal of used needles and cotton swabs,
- takes the necessary precautions to minimize the risk of needle stick accidents, e.g. never re-caps or re-tubes a needle,
- ensures proper treatment table hygiene, ensures proper hand hygiene

## **3.0 NEEDLE ACUPUNCTURE THERAPY**

### **3.1 Establishing the clean field**

The clean field is established by laying out clean paper on a work surface in the treatment room. Sharps/bio-hazard waste containers are located in each room, but do not come in contact with the clean field. Only the following items may be placed on the clean field:

- sterile disposable needles,
- alcohol swabs and/or,
- 70% isopropyl alcohol and cotton swabs.

### **3.2 Preparing the Patient**

The Registrant obtains informed consent and formulates a naturopathic assessment, based on subjective and objective findings, prior to commencing a series of acupuncture treatments.

### **3.2 Preparing the Patient**

Before initiating an acupuncture treatment, the Registrant does the following:

- places the patient in a comfortable position,
- instructs the patient to remain in the same position during the treatment,
- appropriately drapes the patient.

### **3.3 Preparing the skin for treatment**

- The skin is intact and not compromised in any way.
- Medical best practice is to clean the area to be needed with a 70% isopropyl alcohol-impregnated swab. A competent Registrant will use a new swab for each region of the body.

### **3.4 Clean Needle Technique**

- The needle is in a sterile state right up to the time of insertion. A competent Registrant performs acupuncture without contacting the shaft of the needle. If the needle shaft is contaminated, the needle is not used and is discarded in the bio-hazard container.
- Only acupuncture needles that have not reached their expiry date are used.
- Each needle is checked for visible flaws or defects.
- A guide tube may be used repeatedly for the purpose of marking on the same patient during the same treatment session, but is discarded after the treatment session.
- When withdrawing the needle, the bare fingers are not used to press down at the insertion site. A clean cotton swab is used to protect the Registrant from contact with the patient's body fluid. Wearing surgical non-latex gloves when withdrawing the needle is recommended.

#### 4.0 NEEDLE DISPOSAL

The Registrant ensures proper disposal of acupuncture needles immediately after use.

#### 5.0 EMERGENCY PROCEDURES

In the event of an adverse reaction, the Registrant proceeds with appropriate emergency protocol for the safety of the patient.

The Registrant writes an incident report documenting any emergency procedures.

#### 4.0 NEEDLE DISPOSAL

- Biohazard containers are within reach of the treatment area.
- Needles are disposed of immediately after each patient use.
- Needles are disposed of according to local regulations for the disposal of biohazardous waste.

#### 5.0 EMERGENCY PROCEDURES

Should there be an adverse reaction, the Registrant initiates appropriate emergency protocol for the safety of the patient.

##### 5.1 Fainting

Needles are removed immediately, and the patient is allowed to lie flat with the head slightly lowered. The patient is allowed to recover on his/her own (while vitals are monitored) unless unusual signs of distress are evident. A competent Registrant may, where indicated, needle or moxa recovery points, and/or may use smelling salts. If the patient does not recover in an appropriate time, emergency protocol is followed.

##### 5.2 Stuck Needle

The Registrant asks the patient to relax their muscles, then massages around the point. If the needle is still held fast, another needle is inserted nearby so as to relax the muscle. The needle is turned slightly in the opposite direction until it becomes loose, then is withdrawn.

##### 5.3 Broken Needle:

- The patient is asked to remain still to avoid causing the broken needle to move deeper.
- If a part of the needle is still exposed above the skin, it is removed with forceps.
- If it is on the same level with the skin, the tissue around the site is pressed gently until the broken end is exposed, then it is removed with forceps.
- If it is completely under the skin, the patient is instructed not to move and a call for emergency treatment is made.

#### **5.4 Needle Stick Injury**

In the case of a needle stick injury, the following steps are taken:

- bleeding is encouraged from all sharps injuries,
- the wound is washed well with soap and warm water,
- both parties proceed immediately to the nearest hospital emergency room,
- if gloves were worn, they are taken to the emergency room,
- both parties are, with informed consent, tested for HIV, HBV and HCV.

The injured party may be offered a variety of medications such as Hepatitis B vaccine, Hepatitis B immune globulin and triple therapy for post-exposure prophylaxis (PEP) against HIV infection. PEP is thought to be less effective if administered more than 2 hours post-injury.

The injured party will, with informed consent, be re-tested for these viruses at specified intervals according to the standards set by the Medical Officer of Health.

#### **5.5 Injury of Vital Parts**

If the Registrant suspects injury to a vital organ, brain or spinal cord, the patient is immediately transported by ambulance for emergency medical care.

#### **5.6 Incident Report**

The Registrant writes an incident report documenting the date and time of injury, the name of the patient involved, how the injury occurred, results of all medical tests administered and names of any medications given. A copy of this report is kept in the patient file and a copy in a master incident report file.

## 6.0 RECORD KEEPING

Registrants maintain records in accordance with BDDT-N standards of practice.

## 7.0 SAFETY CONCERNS WITH THE USE OF ELECTRICAL STIMULATION

Registrants are knowledgeable about Electro-acupuncture contraindications.

## 8.0 SAFETY CONCERNS WITH THE USE OF MOXIBUSTION (MOXA)

Registrants are knowledgeable about absolute and relative contra-indications for the use of moxibustion.

## 6.0 RECORD KEEPING

In addition to the requirements set out in the Record Keeping Standards of Practice for Naturopathic Doctors, Registrants performing acupuncture also record the specific points that were needled and any adverse reaction to treatment.

## 7.0 SAFETY CONCERNS WITH THE USE OF ELECTRICAL STIMULATION

Electro-acupuncture is contraindicated for patients with pacemakers or other electronic implants.

Since electrical stimulation may interfere with the action of the heart muscle, electrical stimulation is not applied from one side of the chest across to the other side of the chest (front to back, or side to side) in the region of the heart.

## 8.0 SAFETY CONCERNS WITH THE USE OF MOXIBUSTION (MOXA)

Absolute contra indications for the use of moxa:  
when the patient is hot or febrile,

- in hypertension, especially on the head and neck,
- directly on the face, breasts or over large blood vessels and tendons.

Relative contra indications for the use of moxa:

- on the abdominal area in pregnancy,
- on patients with diabetes,
- on patients with any condition where the patient may have decreased temperature sensations.

**Related Board Publications:**  
**Consent to Treatment**  
**Record Keeping Standards of Practice**  
**Standards of Practice**

**APPENDIX I**

**SAMPLE**

*[This form is a suggestion only to assist Registrants in identifying the professional aspects of the informed consent process. Registrants should obtain their own legal advice as to the contractual and other civil law aspects of informed consent forms.]*

**INFORMED CONSENT FOR ACUPUNCTURE**

Patient Name: \_\_\_\_\_

File No.: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ P.Code: \_\_\_\_\_

Attending ND: \_\_\_\_\_

Tel No.: \_\_\_\_\_

Assistant: \_\_\_\_\_

**Recommended Procedure(s) and point(s) to be treated:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I, the undersigned, do hereby acknowledge that I have been informed of and understand the nature and purpose of the recommended acupuncture treatment procedure and have discussed this to my satisfaction with the naturopathic doctor named above. I further acknowledge that I understand the expected benefits, potential risks and side effects, the likely consequences of not following the after-care instructions, and what alternative course(s) of action are available to me (including having no treatment).

As a result, I do hereby voluntarily consent for the recommended acupuncture treatment as specified above.

\_\_\_\_\_  
*Signature of Patient or Lawful Guardian*

\_\_\_\_\_  
*Date Signed*

\_\_\_\_\_  
*Signature of Witness\**

\_\_\_\_\_  
*Signature of attending ND*

\*Witness signature is advised but not required