ACAOM
14502 Greenview Drive | Suite 300B | Laurel, MD 20708 | p: 301-313-0855 f: 301-313-0912

APPLICATION COVER SHEET FOR SELF STUDY REPORT

I. BASIC INSTITUTIONAL INFORMATION

Name of program: Master of Science in Acupuncture & Oriental Medicine (MSAOM)

Corporate name of sponsoring institution: Alhambra Medical University

Mailing address: 55 South Raymond Avenue #105

City/State/Zip: Alhambra / California / 91801

Area code/Phone number: 626-289-7719

FAX number: 626-289-8641 E-mail: jjiang@amuedu.com

Location address (if different from mailing address)

25 South Raymond Avenue #201

Alhambra, CA 91801

List by name and title the chief administrative officers of the institution:
(Include academic official in charge of the program and the clinic coordinator/director and their titles):

1. Jonathan Wu, M.D., President, CEO
2. Jerome Jiang, L.Ac., Dean of Academic Affairs, CAO
3. Rachel Chen, L.Ac., COO
4. Kevin Chen, M.B.A., CFO
5. Anyork Lee, L.Ac., Clinic Director

II. LEGAL ORGANIZATION

1. By what agency is the institution legally authorized to provide a program of education beyond high school?
   Bureau for Private Postsecondary Education (BPPE); California Acupuncture Board (CAB)

2. Name and phone number of the person in your state education department with whom you are

working Kimberly Harris; Ben Bodea , (phone)916-431-6959; 916-515-5200

3. Date institution was chartered or authorized to operate: 2004
4. Date of last renewal: Jan. 2010
5. Expiration of current authorization: Feb. 2015
6. Type of institutional control: (check one)

Public	Private
State	For profit corporation
City	Not for profit corporation
Other	Sole proprietorship
	Partnership X
	Other (specify)

III. CURRENT STUDENT STATISTICS

1. Date program first enrolled students: April 4, 2005
   (Please answer 2,3 or 4,5 depending upon whether your program has graduated a class)
2. Date program graduated first class: June 2009
3. Total number of graduates to date : 54; Percentage currently in practice: 70.38 %.
4. Expected date of graduation of first class: NA
5. Total number of students expected to graduate on above date:
6. Student population: number currently enrolled in the professional master's degree level program: 98

a. 65 full time	e. 36 1st year students
b. 33 part-time	f. 23 2nd year students
c. 28 males	g. 19 3rd year students
d. 70 females	h. 20 4th year students (if applicable)

7. If your program has had graduating classes, compare the number of students who enrolled in the program with the number who graduated, and indicate your program's completion rate: 42.11 %

8. If applicable, give your pass rate of graduates on the NCCAOM exam: 100 %; your state licensing exam: 84.3 %.

IV. PROGRAM DEFINITION

1. Length of program in academic years: 4; in hours: 3270; numbers of credits required to graduate: 279.

2. Calendar system used: (semester/quarter/trimester) quarter

3. Title of certificate, degree or diploma issued upon completion of the professional master's degree level program: Master of Science in Acupuncture & Oriental Medicine (MSAOM)
4. Indicate whether program is a certificate, diploma or degree program: Degree

5. Indicate total number of didactic hours and total number of clinical hours of the program: 2310 didactic hours; 960 clinical hours.

6. Please complete attached charts indicating precisely: (a) in what courses in your program each core curriculum subject is taught and, (b) in what courses a student attains each of the professional competencies. Use course number or name to identify these.

7. Of the didactic hours, indicate the number of hours dedicated to: (a) Acupuncture and related topics __930__; (b) biomedical clinical sciences: __780__; (c) herbal therapy (if applicable): __450__.

8. Of the clinical hours, the number of hours of observation required: __200__; the number of hours if clinical supervision required: __760__. Of the clinical hours, the number that are dedicated to Oriental herbal therapy training __340__ (if applicable).

9. Tuition and fees per academic year for full time students: $ 7,730.00 .

10. Number of full time faculty: __2__; part-time faculty: __40__.

V. OTHER PROGRAMS OFFERED BY THE INSTITUTION

1. Number of students enrolled in other programs or courses offered at the institution __80__

2. Name of Course/Program	Documentation of Completion Given	No. of Students
Asian Bodywork Program	Certificate	80

VI. OTHER ACCREDITATION

1. Indicate any accreditation held by the institution or any of its programs.

NA

2. List programs that are accredited and the respective dates of accreditation.

NA

3. List any denials or revocations of accredited or pre-accredited status of any programs of the institution by another accrediting body and the date of denial or revocation.

NA

VII. Does the program or institution have any unresolved lawsuits or litigation pending? (if yes, please explain fully):

NA

VIII. RECORD BRIEFLY THE CENTRAL ELEMENTS IN THE HISTORY OF THE INSTITUTION:

Alhambra Medical University(AMU) was established in 2003 to offer MSAM and a certificate Massage program. On March 1, 2007, AMU was approved to fully operate by the California Bureau of Private Postsecondary Education and authorized to admit international students by the US Bureau of Homeland Security on Jan. 31, 2007. In August 2008, MSAM was changed to MSAOM. We had our first graduating class in June 2009 and ACAOM granted AMU 3 years of candidacy in Feb. 2011. As of Jan. 2013, AMU has a total of 98 students enrolled in the MSAOM program.

IX. CERTIFICATION STATEMENT: COMPLIANCE WITH ACAOM ELIGIBILITY REQUIREMENTS & FEDERAL TITLE IV REQUIREMENTS

An institution/program seeking accreditation must affirm that it meets or continues to meet established Accreditation Commission for Acupuncture and Oriental Medicine (ACAOM) Eligibility Requirements and Federal requirements relating to Title IV program participation.

If it is not possible to certify compliance with all Eligibility Requirements and Federal Title IV requirements (if applicable), the institution must attach specific details to this self-study application cover sheet.

❑ Exceptions are noted in the attached memorandum. Please provide a detailed explanation of the exceptions in your attachment.

THE SIGNATURES AFFIXED TO THIS SELF-STUDY APPLICATION COVER SHEET SERVE AS AFFIRMATION THAT THE INSTITUTITON NOW MEETS OR CONTINUES TO MEET ESTABLISHED ACAOM ELIGIBILITY REQUIREMENTS AND FEDERAL REQUIREMENTS RELATING TO TITLE IV PROGRAM PARTICIPATION (IF APPLICABLE), EXCEPT AS NOTED BY THE INSTITUTION.

IN ADDITION THESE SIGNATURES CERTIFY THAT TO THE BEST OF OUR KNOWLEDGE THE INFORMATION IN THIS REPORT IS TRUE AND ACCURATE.

(Chief Executive Officer) 3-19-2013 (Date)

(Chair, Board of Trustees or Directors) 3-19-2013 (Date)

FEE: If this is a self-study report for **renewal of accreditation**, attach a check in the amount of $4,000 with the copy that is submitted to ACAOM's office: ACAOM, 14502 Greenview Drive, Laurel, MD 20708. For each branch campus, please add $4,000 per branch to the reaccreditation fee.

NUMBER OF REPORTS:
Submit seven (7) copies of the cover sheet and the self study report on CDs or USB drives.

When the Self-Study has been reviewed and accepted, a site visit will be arranged.

PART TWO - APPLICATION COVER SHEET FOR SELF-STUDY REPORT

STANDARD 8–PROGRAM OF STUDY
The professional program in acupuncture shall be based on the following critical elements: It must be at least three academic years in length; it must be a resident program; it must demonstrate attainment of professional competence; it must have an adequate clinical component; and it must include the following minimum core curriculum (#1-10) designed to train students to achieve the competencies of an independent acupuncture provider.

The professional program in Oriental medicine shall be based on the following critical elements: it must be at least four academic years in length; it must be a resident program; it must demonstrate attainment of professional competence; it must have an adequate clinical component; and, it must include the following minimum core curriculum (#1-12) designed to train students to achieve the competencies of an independent Oriental medical provider.

The structure and content of these curriculum areas must lead students to achieve or exceed the professional competencies of an independent acupuncture or Oriental medicine provider as listed in Criterion 8.10.

PLEASE INDICATE THE COURSE (S) IN YOUR PROGRAM (BY COURSE # OR COURSE NAME) IN WHICH THE FOLLOWING SUBJECTS ARE COVERED

1. History of Acupuncture and Oriental Medicine

OM100	1. Discussion of different traditions in acupuncture and Oriental Medicine and how they relate to Chinese medical history.
OM100	2. History of the development of acupuncture and Oriental medicine in the US, and of development of current professional trends.
OM100	3. Discussion of history and professional trends in acupuncture and Oriental medicine outside the U.S. and China.

2. Basic Theory

OM101-102	4. Qi
OM101-102	5. Tonification (supplementation) and sedation (draining) of qi, creation of harmony
OM101-102	6. Dao
OM101-102	7. Yin Yang
OM101-102	8. Eight Parameters/Ba Gang
OM101-102	9. Five Elements (phases, correspondences)/Wu Xing and their laws and cycles
OM101-102	10. Twelve Officials/Shi Er Guan
OM101-102	11. Viscera & Bowels/Zang Fu
AC100	12. Theory of channel vessels (Meridians)/Jing Luo

OM101-102	13.	Internal and External causes of disease such as Six External Evils/Liu Xie, Seven Emotions/Qi Qing and Non-internal or External Reasons/bu nei wai yin
OM101-102	14.	Oriental medicine pathology (bing ji)
OM101-102	15.	Meaning (significance) of disease, symptoms, signs
OM101-102	16.	Fundamental Body Substances (e.g. shen, qi, blood, fluid.)

3. Acupuncture, Point Location and Channel (meridian) Theory

AC101-102	17.	Location systems: anatomically, proportionally, by palpation, Anatomical Chinese inch (cun), fen.
AC101-102	18.	Systems of nomenclature and knowledge of standards of the WHO Scientific Group to Adopt a Standard International Acupuncture Nomenclature, 1991
AC101-102	19.	Anatomical locations
AC101-102	20.	All points on the twelve bilateral channels (meridians) and the Conception/Ren and Governing/Du vessels
AC101-102	21.	Forbidden points, contraindications of points
AC101-102	22.	Classification of points
AC201-202	23.	Functions and Indications of acupuncture points
AC101-102	24.	Extra Acupuncture Points
AC302	25.	Other categories and types of acupuncture points (e.g. auricular points, scalp points, hand points)
AC101-102	26.	Special groupings of acupuncture points (for example: transport points, painful or tender points (Ah Shi), local and distal points, Associated Effect and Alarm points, Windows of the Sky, Internal and External Dragons, Seas and Oceans, thirteen ghost points), and other recognized point combinations.
OM100	27.	Traditions of acupuncture; respect for different traditions of evaluating and diagnosing and influencing and correcting the balance of Qi.

4. Diagnostic Skills

OM201-203, WM301	28.	History Taking/Charting
OM201-203	29.	Acupuncture and Oriental Medicine: Methods: Observation/Wang, Audio-Olfaction/Wen, Inquiry/Wen, Palpation/qie, Differential diagnosis
WM301	30.	Biomedical: Measuring and recording vital signs, i.e., respiratory rate, pulse rate, temperature and blood pressure
WM301-303	31.	Referrals: recognition of symptoms requiring referrals, including infectious disease

5. Treatment Planning in Acupuncture and Oriental Medicine

AC401-402	• Methods and systems for planning, carrying out and evaluating a treatment
AC401-402	• Prognosis
AC401-402	• Contraindication of treatment
AC401-402	• Making appropriate referrals
OM301-304 OM401-404	• Consideration of special factors or symptoms indicating: potential for increased risk to the patient (e.g., immune compromised patient, diabetic patient), the need to modify standard therapeutic approach (e.g., infants and children, pregnancy) and apparently benign presentations that may have a more serious cause (hypertension, headaches).

6. Treatment Techniques

AC301-302	32. Needle insertion: depth, duration, manipulation and withdrawal
AC301-302	33. Moxa: application, direct & indirect. etc.
AC301-302	34. Other techniques (e.g., bleeding, moxibustion, cupping, gua sha, seven star)
AC301-302	35. Tonification (supplementation)/bu and sedation (draining)/xie
AC301-302	36. Knowledge of methods and application of acupuncture relating to the treatment of acute and chronic conditions, first aid, analgesia, anesthesia and electrical stimulation.
AC300	37. Safety issues
TB200-201	38. Oriental bodywork therapy (e.g. tui na, shiatsu, amma, acupressure etc.)

7. Equipment & Safety

AC301 CNT	39. Selection and maintenance of equipment: Needles: gauge, types, selection, replacement, inspection Other equipment: cups, moxa, seven star, etc. Sterilization: necessity and various methods Electronic equipment: selection, maintenance, inspection for hazards Relevant State and Federal regulations concerning equipment
AC301 PH201 CNT	40. Safety of patient and practitioner: Asepsis, Clean Needle Technique Avoiding harm from typical procedures: needling, moxa, cupping, bloodletting, etc. Fainting during treatment Relevant State and Federal Regulations concerning safety First Aid and CPR Personal & office cleanliness and hygiene

8. Counseling and Communication Skills

CM301-303 OM204	41.	Communications skills: listening, counseling, explaining, and teaching
CM301-303	42.	Managing psychological reactions that may arise during the course of treatment and the ability to make appropriate referrals

9. Ethics and Practice Management

MG401-402	43.	Confidentiality
MG401-402	44.	Informed Consent
MG401-402	45.	Understanding the scope of practice
MG401-402	46.	Record Keeping: legal requirement, release of data
MG401-402	47.	Ethical and legal aspects of referring patients to another practitioner
MG401-402	48.	Professional conduct and appropriate interpersonal behavior
MG401-402	49.	Overview of the status of acupuncture and Oriental medicine in the U.S.
MG401-402	50.	Understanding laws and regulations governing the practice of acupuncture and Oriental medicine in the state where the program is offered and that laws and regulations vary from state to state.
MG401-402	51.	Recognition and clarification of patient expectations
MG401-402	52.	General liability insurance and legal requirements
MG401-402	53.	Professional liability insurance: risk management and quality assurance
MG401-402	54.	Building and managing a practice including ethical and legal aspects of third party reimbursement
MG401-402	55.	Professional development
MG401-402	56.	Basic bookkeeping

10. Biomedical Clinical Sciences

The acupuncture program shall include a minimum of 30 semester credits (450 hours) in biomedical clinical sciences. The Oriental medicine program shall include a minimum of 34 semester credits (510 hours) in biomedical clinical sciences.		
BS101-106	57.	Relevant basic sciences *(e.g., biology including microbiology, chemistry, physics, psychology)* that are directed toward attaining the biomedical clinical competencies. *(May be met in baccalaureate undergraduate courses outside the program. If transferred into the program, they must be consistent with the program's objectives.)*
WM100	58.	Biomedical and clinical concepts and terms
BS201-204	59.	Human anatomy and physiology
BS311-313	60.	Pathology and the biomedical disease model
WM301-303 WM401-404	61.	The nature of the biomedical clinical process including history taking, diagnosis, treatment and follow-up

WM301-303 WM401-404	62. The clinical relevance of laboratory and diagnostic tests and procedures, as well as biomedical physical examination findings
CNT PH101	63. Infectious diseases, sterilization procedures, needle handling and disposal, and other issues relevant to blood borne and surface pathogens
WM304	64. Biomedical pharmacology including potential medication, herb and nutritional supplement interactions, contraindications and side effects and how to access this information
WM500	65. The basis and need for referral and/or consultation
WM500	66. The range of biomedical referral resources and the modalities they employ

11. Oriental Herbal Studies

The Oriental medicine program shall include a minimum of 30 semester credits (450 hours) in didactic Oriental herbal studies. (This component shall be included in any continuing education program in herbal therapy or any herbal component of any other type of program that provides students with sufficient knowledge to enable them to use Oriental herbs in the practice of Oriental medicine.)	
HB100	67. Introduction to Oriental Herbal Medicine • Development of herbal medical systems throughout the Orient • History of the development of Oriental herbal medicine in the USA • Legal and ethical considerations of herbal medicine
OM201-203 OM301-304 OM401-404 HB401-403	68. Oriental Diagnostic And Treatment Paradigms As They Pertain To Herbal Medicine, e.g., • Shan Han/6 stages • Wen Bing/4 levels • Zang Fu • Chinese Internal Medicine, e.g., cough, amenorrhea.
HB100 HB101-104	69. Basic Herbal Medicine Theory • Plant-part terminology and significance to usage • Herbal properties, e.g., concepts of herbal categories, taste, temperature, entering meridians • Methods of preparation, i.e., dried, honey-baked, etc. • Methods of delivery, e.g., decoction, topical, timing (before meals) • Laws of combining, including common contraindications, prohibitions, precautions • Methods of treatment, i.e., induce sweat, clearing, harmonize, etc.
HB201-204 HB300-301 HB410	70. Herbal Treatment Strategies • Methods and systems for planning, carrying out and evaluating a treatment • Differentiation and modifications of herb formula for various patterns of disharmony according to Chinese medical principles • Chinese herbal medicine protocols applied to patients with a biomedical diagnosis

HB101-104	71. Materia Medica–Instruction in a minimum of 300 different herbs • Categories: functions and meaning • Visual identification including differing methods of cutting • Temperature, taste, and entering meridians • Taxonomy and nomenclature • Introduction to Chinese names of herbs • Functions and actions; classical and new developments • Specific contraindications for each herb • Applications of herbal dosages • Current developments in individual herb research • Endangered species and substitutions for them
HB201-204 HB410	72. Herbal Formulas–Instruction in a minimum of 150 formulas • Traditional formula categories, functions and meanings • Meanings of the traditional Chinese formula names • Functions and actions; classical and new developments • Specific contraindications for each formula • Current developments in formula research • Composition and proportion of individual herbs in each formula • Major modifications of formulations • Patient education regarding administration, potential side effects, preparation and storage of formulas • Prepared herbal formulations: modifications and format of delivery
HB300 BS107	73. Food Therapy/Nutrition • Categorization of foods with regard to temperature, taste, and function • Dietary advice for various conditions • Preparation of common food/herbal recipes
CL112 CL211 CL311	74. Clinical Internship and Herbal Dispensary • Clinical internship in which students interview, diagnose and write appropriate herbal formulae moving from complete supervision to independent formula development • Standards of cleanliness in a herbal dispensary • Storage of herbs (both raw and prepared formulas), covering issues of spoilage and bugs • Practice in the filling of herbal formulae in an herbal dispensary setting
HB100 WM304	75. Western Science for Herbal Medicine • Botany, non-botanical and horticulture (e.g., changes in the characteristics of herbs due to environmental factors) as they pertain to herbal medicine • General principles of pharmacognosy: a) Biochemical components of herbs and natural substances b) Considerations of pharmaceutical interactions with reference to current texts

12. Other Oriental Medicine Modalities

TB200-201	76.	Oriental manual therapy, including bodywork and physiotherapies
TB101-102	77.	Exercise/breathing therapy
HB300	78.	Diet Counseling

Criterion 8.10—Professional Competencies

The acupuncture program of study must lead to the following professional competencies (#1-7) to be attained through learning experiences included in the curriculum. The Oriental medicine program of study must lead to the following professional competencies (#1-10) to be attained through learning experiences included in the curriculum.

PLEASE INDICATE THE COURSE(S) IN YOUR PROGRAM (BY COURSE # OR COURSE NAME) IN WHICH A STUDENT ATTAINS THE FOLLOWING COMPETENCIES

1. Collecting data and using the following examinations of the patient in order to be able to make a diagnosis:

OM201	• Observation: noting the spirit, color, body structure, tongue, symptom site and complexion of the patient
OM201	• Olfactory examination: noting the general odor of the patient's body and of the patient's secretions, discharges and breath
OM201	• Audio examination: listening to the sound of the patient's voice, abdominal sounds, sounds of respiration and cough quality
OM201	• Palpation: noting the temperature, moisture, texture, sensitivity, tissue structure, rhythms and qualities of the abdomen, the chest, the ear, the channels and points, and the radial and regional pulses
OM201	• Inquiry: asking general questions, questions about medical history, chief and secondary complaints, sleep patterns, excretions, thirst and appetite, digestion, nutritional levels and patterns, medications, chills and/or fever, perspiration, pain, emotional state, life style, exercise, use of alcohol, tobacco and drugs, reproductive cycles and menstruation, leukorrhea, sensations of heat, cold, dizziness, tinnitus, palpitations and chest constriction
OM201	• Physical examination adjuncts such as akabane and electrical stimulation

2. Formulating a diagnosis by classifying the data collected and organizing it according to traditional Oriental medical theories of physiology and pathology. This skill implies comprehensive understanding of the following fundamental theories and concepts:

OM101-102	• Five Phases Theory
OM101-102	• Yin-Yang Theory
AC100	• Channel Theory

OM101-102	• Organ Theory
OM101-102	• Causes of Disease including the exogenous, endogenous and independent factors
OM101-102	• Stages of Disease Progression, including the six-stage and four-aspect disease progressions
OM101-102	• Triple Warmer Theory
OM101-102	• The natural progression of untreated disease

3. Determining Treatment Strategy based on the diagnosis formulated:

WM500	• The availability of additional appropriate modalities for patient referral
WM100 WM500	• The ability to communicate with other health professionals regarding patient care, utilizing commonly understood medical terminology
AC201-202	• The functions of the acupoints

4. Performing Treatment by applying appropriate techniques, including needles, moxa, manipulation, counseling, and the utilization of skills appropriate for preparation of tools and instruments:

CNT	• Proper sterilization and aseptic procedures
AC301-302	• Preparation of the patient, including proper positioning for application of techniques
AC401-402, OM401-404, OM201-203, OM301-304	• Effective communication with the patient regarding the nature of the illness and the treatment plan
AC101-102 AC301-302	• Accurate location of acupoints
AC101-102 AC301-302	• Safe and effective needle insertion techniques based upon the function of the point, the recommended needling depths, the underlying anatomy at the site, the desired effect of needling, and the nature of the illness
CNT	• Accepted clean needle insertion practices, including protocols adequate to allow compliance with NCCAOM guidelines on sanitation, asepsis, and clean-needle handling
AC301-302	• Safe and effective application of adjunctive techniques, including moxibustion, electrical stimulation and manipulation
AC301-302	• Effective control of emergency situations

5. Assessing the Effectiveness of the Treatment Strategy and its Execution:

CL211, CL311	• By re-examination of the patient
CL211, CL311	• By comparison with previous conditions and expectations

CL211, CL311	• By modification of the treatment plan, if required, based upon that assessment

6. Complying with Practices as Established by the Profession and Society at Large through:

MG401-402	• Application of a code of ethics
MG401-402	• Practice of responsible record keeping and patient confidentiality
MG401-402	• Maintenance of professional development through continuing education
MG401-402	• Maintenance of personal development by continued cultivation of compassion

7. Having an Adequate Understanding of:

WM100	• Relevant biomedical and clinical concepts and terms
BS201-204	• Relevant human anatomy and physiological processes
BS301-303	• Relevant concepts related to pathology and the biomedical disease model
WM301, 303	• The nature of the biomedical clinical process including history taking, diagnosis, treatment and follow-up
WM302, 303	• The clinical relevance of laboratory and diagnostic tests and procedures, as well as biomedical physical examination findings
WM304	• Relevant pharmacological concepts and terms including knowledge of relevant potential medication, herb and nutritional supplement interactions, contraindications and side effects

In order to be able to:

CM301-303 WM500	• Recognize situations where the patient requires emergency or additional care or care by practitioners of other health care (or medical) modalities, and to refer such patients to whatever resources are appropriate to their care and well-being.
CM301-303 WM500	• Appropriately utilize relevant biomedical clinical science concepts and understandings to enhance the quality of Oriental medical care provided.
CNT PH101	• Protect the health and safety of the patient and the health care provider related to infectious diseases, sterilization procedures, needle handling and disposal, and other issues relevant to blood borne and surface pathogens.
WM100, 500	• Communicate effectively with the biomedical community.

8. Making A Diagnosis/Energetic Evaluation by:

OM201-203 OM301-304 OM401-404 AC401-402	• Identifying position, nature and cause of the dysfunction, disorder, disharmony, vitality and constitution. This evaluation is based on the 13 concepts below plus knowledge of distinctive patterns of herbal combinations and recognition of medical emergencies.

9. Planning and Executing an Herbal Treatment using the following knowledge:

HB101-104	• Identification of most commonly used raw and prepared substances in Materia Medica.
HB300	• Use of common foods as healing modalities.
HB101-104	• Properties of substance in Materia Medica: Taste, temperature, entering meridians, actions and clinical applications. Identification of common biochemical constituents and common dosage guideline.
HB100 HB101-104	• Contraindications of individual herbs: Toxicity; both traditional and biochemical, rules of combination, effect of preparation, dosage variance, and possible side effects.
HB201-204	• Traditional strategies of herbal formulation: Sweating (sudorific), Clearing, Ejection (emetic), Precipitation (purgative), Harmonization, Warming, Supplementing (tonic), Dispersing.
HB201-204 HB410	• Composition of formulas: Hierarchy of ingredients, internal dynamics of ingredients, changes in hierarchy of ingredients by modification of ingredients or dosage.
HB201-204 HB410	• Preparation and administration of formulas: Dosage, timing, frequency, duration, extraction times, etc.
HB201-204, HB410	• Indications and functions of representative herbal formulas.
HB201-204 HB410	• Selection, modification and development of appropriate formulas consistent with the pattern of disharmony and treatment plan.

HB100
HB101-104
HB201-204
HB410
	• Current types of prepared formulations available, (pills, powder, tincture, etc.)
	  • Dosage variances, side effects and toxicity associated with usage, timing, frequency, duration, extraction times, etc.
	  • Understanding the issues surrounding non-traditional additives to prescriptions.

OM301-304 OM401-404	• Selection of the appropriate modality or modalities for treatment: • Acupuncture, herbs, Oriental manual therapy, exercise, breathing therapy, and diet counseling.
OM301-304 OM401-404	• Consultation with patient regarding treatment plan, side effects, outcomes, and healing process.
WM304 HB100	• Biomedical considerations of herbal preparations: • Contraindications, drug interactions, etc.

10. Understanding Professional Issues Related to Oriental Herbs:

HB100	• The ethical considerations with respect to prescribing and selling herbs to patients.
WM500 HB100	• How and when to consult and refer with appropriate biomedical or allied health practitioners regarding drug interactions and herbal therapy.

CL112	• The appropriate management, care, and storage of herbs and herbal products.