



Chinese Medicine  
Registration Board  
of Victoria

# **Guidelines on registration examinations**

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These guidelines provide information for candidates intending to sit the CMR Board's examinations for registration. The information provided relates to the administration of and structure and content of the theory and clinical examinations.

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## Acronyms and abbreviations

App	Approximate
CM	Chinese medicine
CMR Act	Chinese Medicine Registration Act 2000
CMR Board	Chinese Medicine Registration Board of Victoria
HPR Act	Health Professions Registration Act 2005
NOOSR	National Office of Overseas Skills Recognition
OQU	Overseas Qualification Unit
SUSDP	Standard for Uniform Scheduling of Drugs and Poisons
WHO	World Health Organisation

# 1.0 Background

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## 1.1 The CMR Board's power to require practitioners sit an examination

The main purpose of the *Health Professions Registration Act 2005* (HPR Act) is to protect the public by providing for the registration of health practitioners including practitioners of Chinese medicine (both acupuncture and Chinese herbal medicine) and dispensers of Chinese herbs, as well as by providing for investigations into the professional conduct and fitness to practise of registered practitioners.

The Chinese Medicine Registration Board of Victoria (CMR Board) has the statutory responsibility to assess applications for registration in the divisions of acupuncturist, Chinese herbal medicine practitioner and Chinese herbal dispenser. From 1 January 2005, the CMR Board can register persons who have completed an approved course<sup>1</sup> or who have successfully completed both written examination/s and clinical examination/s set by the CMR Board.

In November 2002, the CMR Board issued *Examination Guidelines for Applicants for Registration Under Section 94 (1)(c) of the Chinese Medicine Registration Act 2000*. These guidelines were developed for applicants who applied for registration but for whom an examination was necessary to assist the CMR Board's decision to grant or refuse registration during the grandparenting period. The grandparenting period, which applied from 1 January 2002 to 31 December 2004, was covered by the transitional provisions of the *Chinese Medicine Registration Act 2000*. These guidelines have now been superseded as the grandparenting period has expired.

From 1 January 2005, the CMR Board was empowered to require a person, who has not satisfied requirements stipulated in Sections 5(1)(a)<sup>2</sup>, (b) or (d), to pass an examination set by, or on behalf, of the CMR Board before the CMR Board grants that person general registration. The examination is set to assess adequate mastery of underlying theory, understanding of professional issues and competence to practise, before registration may be granted.

These guidelines have been prepared to assist practitioners who wish to gain registration by sitting an examination as per section 5(1)(c) of the HPR Act. The guidelines cover examinations for the purpose of registration in the divisions of acupuncture and/or Chinese herbal medicine.

## 1.2. Eligibility to sit examination/s

To be eligible to sit the exam/s, the applicant must possess a minimum qualification of an advanced diploma in Chinese medicine either:

- accredited under the Australian Qualifications Framework; or
- recognised as the equivalent by the National Office of Overseas Skills Recognition (NOOSR – see Appendix 1 for details);

**AND**

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<sup>1</sup> For details of currently approved courses see <http://www.cmrb.vic.gov.au/registration/approvedcourses.html>.

<sup>2</sup> The *Policy on Equivalence Applications* is found at [www.cmrb.vic.gov.au/information/p&c/registration.html](http://www.cmrb.vic.gov.au/information/p&c/registration.html).

- that includes sufficient study in Chinese medicine, biomedical sciences and supervised clinical training<sup>3</sup>.

In addition candidates must meet the CMR Board's English language proficiency requirements (see section 1.3).

### **1.3 English language proficiency**

Candidates must satisfy the Board of English proficiency prior to undertaking any components of the examination that are conducted only in English, specifically the common paper and the clinical examination.

In addition applicants for registration must satisfy the Board of English proficiency before registration will be granted. The CMR Board's *Policy on English Language* outlines the methods by which English language competence can be demonstrated the relevant information has been extracted and is presented in Appendix 2. To access the full policy go to <http://www.cmr.vic.gov.au/information/p&c/practiceconduct.html>.

### **1.4 Application process**

All applicants are required to submit the *Application for registration examinations form* which is available on the CMR Board website or by phoning the office staff on 03 9499 3800. It must be accompanied by the application fee and a recent passport size photograph of the candidate.

A letter will be sent confirming eligibility to sit the exam and providing information regarding location, time and any other specifics.

Candidates who pass the examinations set by the CMR Board will be eligible to be granted general registration as acupuncturists and/or Chinese herbal medicine practitioners, subject to the common requirements for all applicants as stipulated in Section 6 (2) of the HPR Act.

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<sup>3</sup> The CMR Board reserves the right to reject an examination application if it deems the Chinese medicine qualification to be inadequate.

## 2.0 Examination structure and content

### 2.1 Introduction

The examination eligibility criteria preclude the necessity for testing basic knowledge. The examination questions will be targeted at advanced levels of Chinese medicine and biomedical knowledge, comparable to the level of mastery expected at the completion of a Bachelor-level course.

The theory examination must be passed in full (see section 2.2 below) before the clinical examination can be attempted.

### 2.2 Format of theory examination

The theory examination encompasses three written examination papers structured into nine subsections. The papers include a common, acupuncture and Chinese herbal medicine paper.

Applicants applying in one division of the register are required to sit two examination papers, being the common paper plus either the acupuncture or Chinese herbal medicine paper. Applicants applying for two divisions are required to sit all three papers.

The common paper comprises subjects that are common to both the acupuncture and Chinese herbal medicine divisions of the register and thus must be sat by all applicants.

Table 2.1 – Subsection breakdown of the theory examination papers

	Common paper			Acupuncture paper			Chinese herbal medicine paper		
		App. % of paper	App. number question		App. % of paper	App. number question		App. % of paper	App. number question
Subsection	Biomedical sciences	70	90	Classical literature, meridian, point and needling theory, microsystems and moxibustion	20	25	Pharmacopoeia, formula, classical literature	20	25
Subsection	Australian health care context	15	20	Clinical (CM) diagnosis & treatment	60	80	Clinical (CM) diagnosis & treatment	60	80
Subsection	Ethics and professional issues	15	20	Surface anatomy, needling and aseptic technique, safety and clinical setting	20	25	Pharmacology, toxicology, safety and clinical setting	20	25
Total no. (approx)			130			130			130
Time	1.5 hours			1.5 hours			1.5 hours		

Each examination paper consists of approximately 130 multiple-choice questions. Ninety minutes are allowed for each examination paper.

The candidate must mark the ONE most correct answer for each question. Candidates will not be penalised for wrong answers. If more than one answer is selected no marks will be gained for that question.

It is possible to sit two or three theory papers in the same session if the applicant requests it; however the CMR Board recommends that applicants sit one theory exam in a given session.

Theory examinations are scheduled at least three times per year. Applicants are able to sit one full paper per session plus resit any failed subsections from any previous examination if necessary. See section 2.6 for further information on pass rates and section 4.4 for information on resitting exams.

See Appendix 3 for sample questions and Appendix 4 for the exam schedule.

## **2.3 Content of written examination**

The areas of study within the scope of the written examination are set out below. In addition Appendix 5 contains more detailed synopses and graduate outcomes for each of the topic areas that may be included in the written and clinical examinations. The information in Appendix 5 has been extracted from the course approval guidelines<sup>4</sup> published by the CMR Board as a guide for educational institutions providing qualifying courses in acupuncture and/or Chinese herbal medicine.

### **2.3.1 Scope of the common paper**

#### **2.3.1.1 Biomedical sciences**

Biomedical sciences questions will typically cover the following areas:

- cell biology
- biochemistry and molecular biology
- anatomy and physiology
- microbiology
- pathology
- pharmacology and toxicology
- radiology and imaging
- laboratory diagnosis
- clinical biomedicine (including diagnosis in western medicine)

#### **2.3.1.2 Australian health care context**

Typical areas examined include:

- treatment and referral to public hospitals and other health professionals

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<sup>4</sup> CMR Board course approval guidelines are available at <http://www.cmr.vic.gov.au/information/p&c/registration/GuidelinesApprovalCourses-Nov06.pdf>

- health insurance arrangements
- regulation of medicinal substances
- registration of Chinese medicine practitioners and other health professions
- use and advertising of titles
- health research in Australia
- health complaints systems
- funding of health services
- health issues and health consumers in Australia
- continuing professional development for Chinese medicine practitioners
- role of various health and Government bodies (e.g. national, state and local Governments, hospitals, funding bodies, professional associations etc.)

### **2.3.1.3 Ethics and professional issues**

Typical areas examined include:

- informed consent
- *Health Records Act 2001*
- privacy and confidentiality
- *Health Professions Registration Act 2005*
- referral and discharge of patients
- receipting practices
- proper professional conduct
- conflicts of interest
- professional boundaries
- ethical advertising
- disrobing / treating intimate body areas

## **2.3.2 Scope of the acupuncture paper**

### **2.3.2.1 Classical literature, meridian, point and needling theory, microsystems and moxibustion**

Typical areas examined include:

- classical literature (*Nei Jing, Zhen Jiu Jia Yi Jing, Nan Jing, Ling Shu & Su Wen*)
- meridian/channel systems
- point location, function and application
- needling methods and other stimulating methods
- needling theory and practice
- moxibustion theory and practice
- acupuncture microsystems (ear and scalp acupuncture).

### **2.3.2.2 Clinical (CM) diagnosis and treatment**

Typical areas examined include:

- Chinese medicine diagnosis, clinical examination, planning and delivery of treatment
- treatment details including point selection, stimulation methods, duration of treatment, frequency of treatment and general advice to the patient
- the clinical areas that may be examined include, but are not limited to, internal medicine, gynaecology and obstetrics, paediatrics, traumatology and dermatology.

### **2.3.2.3 Surface anatomy, needling and aseptic technique, safety and clinical setting**

Typical areas examined include:

- surface anatomy of commonly used points
- deep anatomy of dangerous points to include typical needle depth and angles
- clean needling and aseptic technique theory
- managing clinical equipment and infection control theory

## **2.3.3 Scope of the Chinese herbal medicine paper**

### **2.3.3.1 Pharmacopoeia, formula and classical literature**

Typical areas examined include:

- Chinese Materia Medica (see Appendix 6 – List of Chinese Materia Medica);
- the most commonly used herbs will represent the larger proportion, while lesser used herbs comprise less proportion
- Chinese medicinal formula (see Appendix 7 – List of Commonly Used Formula);
- classical literature – *Shang Han Lun* and *Wen Bing Xue*

### **2.3.3.2 Clinical (CM) diagnosis and treatment**

Typical areas examined include:

- Chinese medicine diagnosis, clinical examination, planning and delivery of treatment
- treatment details including the prescription and modification of herbal formulas, duration of the treatment, frequency of treatment and general advice to the patient
- the clinical areas that may be examined include, but are not limited to, internal medicine, gynaecology and obstetrics, paediatrics, traumatology and dermatology.

### **2.3.3.3 Pharmacology, toxicology, safety and clinical setting**

Typical areas examined include:

- basic principles of pharmacology and toxicology, main types of drug interactions
- prevention and management of adverse and toxic reactions to drugs
- the inclusion of Chinese medicinal substances in the Standard for Uniform Scheduling of Drugs and Poisons (SUSDP)
- the mechanisms of western pharmaceuticals and phytochemical interaction

- commonly used drugs of Chinese pharmacopoeia and their interactions with other commonly used forms of chemical substance
- clinical setting, managing equipment and safe and hygienic handling of herbs

Recommended reference texts are provided for each area in Appendix 8.

## 2.4 Format of the clinical examination

The clinical examination is conducted in a clinical setting with two examiners. The exam involves treating two patients, 1½ hours is allowed per patient. Real patients are provided.

Each candidate is expected to manage a consultation and treatment within the specified time. Additional time is set aside at the end for discussion with the examiners. This is to avoid breaking the flow of the consultation. If discussion between the candidate and the examiners during the consultation is appropriate this should occur but discussion that can reasonably be left to the end is delayed.

Candidates applying for both divisions of the Register i.e. acupuncture and Chinese herbal medicine have the option of sitting a combined clinical exam or a discrete clinical exam for each division.

The combined clinical exam involves the candidate being assessed in both acupuncture and Chinese herbal medicine in the same sitting. Candidates are expected to manage treatment in both acupuncture and Chinese herbal medicine in the specified time. Candidates must receive an overall pass mark in order to pass in either division, see section 2.6 for the pass mark. Candidates who chose to sit the combined exam are required to pay the set fee for a clinical exam see Appendix 4.

Candidates who choose to sit discrete clinical exams i.e. a clinical exam in acupuncture and a clinical exam in Chinese herbal medicine are assessed in each division independently. Candidates who chose to sit discrete clinical exams are required to pay the set fee for each examination; therefore paying two clinical exam fees see Appendix 4.

Candidates are asked to actually treat the patient as thoroughly as you normally would. This way the examiners can assess the real effectiveness of the treatment and the capability of you as the candidate and most importantly, it is fair to the patients who are real patients

In some cases the candidate may think it appropriate to recommend other forms of treatment such as moxibustion or massage. As real patients are being used and their receiving a full and proper treatment is a concern this may be appropriate, however it must be done so within the following considerations:

- as this is a registration exam the skills being assessed must be demonstrated;
- additional treatments must be managed within the time allocated.

## 2.5 Content of the clinical examination

The clinical examination involves a skills assessment and includes an assessment of patient record keeping. Candidates are expected to be able to explain or record their rationale for pathogenesis, aetiology, diagnosis and treatment.

The examiners assess and score:

### **General skills assessment**

- history taking and physical examination; including palpation, tongue and pulse
- patient management and communication skills (patients score this too); including general communication, effective explanations and general manner towards patient; also attention to time management, informed consent, and privacy/modesty.
- case analysis and treatment planning; candidates need to demonstrate their reasoning process
  - aetiology and pathogenesis
  - diagnosis and differentiation (inc. presenting complaint, disease where relevant and Chinese medicine syndrome) consistent with case;
  - treatment principle and strategy
  - adjuncts: assessment and general advice on lifestyle, diet, emotions etc., relevant referrals, other treatments if appropriate (e.g. moxa, guasha, cupping)
- evaluation of the patient record see below for further information on the Patient Record and Appendix 10 for an example *Initial Patient Consultation Form*

### **Acupuncture skills assessment**

- acupuncture prescription; appropriateness of selected points, manipulation methods and consistency with treatment principle
- point location and needling technique
  - locate minimum of 8 points on different regions of the body based on the patient's condition; include palpation and measurement, accounting for size and physique etc.
  - needling technique (inc. insertion, depth, manipulation etc.)
- aseptic technique, including hand-washing, preparation of workspace, opening packets and preparation and insertion of acupuncture needles and appropriate disposal of swabs and needles (simulated if necessary) details of aseptic technique are included in Appendix 9.

### **Chinese herbal medicine skills assessment**

- herbal prescription rationale:
  - appropriateness/consistency with treatment principle
  - name of prescription base (if appropriate) and individual herbs (pao zhi if applicable)
  - dosages (of individual herbs)
- herbal dispensing
- herbal recognition 20 herbs and materia medica
- explanation to client (e.g. how to prepare and take a herbal decoction, cooking process, frequency and dosage for one day)

## **Patient Record**

Candidates are expected to create a proper patient record and record adequate detail in accordance with the CMRB *Guidelines on Patient Record*<sup>5</sup>. The patient record MUST be legible.

See Appendix 10 for the Board's recommended *Initial Patient Consultation Form*. Candidates who elect to use their own 'Initial Patient Consultation Form' may do so but it must comply with the Board's expectations. Candidates who bring their own form must also bring a spare blank form for the examiners to look at.

Candidates are NOT expected to explain all their thinking AND write it all down. Some things are more amenable to verbal explanation – for example a practitioner would write all signs and symptom and diagnosis in the record and may explain the analysis of pathogenesis and aetiology. It can of course be an element of informed consent to explain some of this to a patient, which also demonstrates communication skills. The examiners need to be satisfied that the candidate can evaluate and explain pathogenesis and aetiology. Separately the examiners need to be satisfied that the patient record is adequate and meets the CMR Board guidelines.

See section A5.6 of Appendix 5 for further information on clinical assessment.

## **2.6 Pass rates**

The pass rate for a written examination is 50% in each of the three subsections in each paper: common, acupuncture and Chinese herbal medicine (see table at 2.2). All subsections of the written examination must be passed in order to sit the clinical examination.

The pass rate for the clinical examination is 70%.

If a candidate performs poorly in any area the CMR Board considers is related to public safety, despite an overall pass, the CMR Board reserves the right to offer conditional registration.

## **2.7 Exam materials**

### **Acupuncture Points**

Acupuncture points are described using the WHO standardised terms as outlined in *WHO Standard Acupuncture Point Locations in the Western Pacific Region*. Pinyin and point number only are provided. For example Chongyang (ST42), Mingmen (GV4), Xingjian (LR2) etc.

### **Herb and formula lists**

Single herbs and herbal formulas are written only in pinyin in the examination paper.

The reference lists found in Appendixes 6 and 7 are provided during the exam to all candidates sitting the Chinese herbal medicine paper.

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<sup>5</sup> The *Guidelines on Patient Records* are available at <http://www.cmrb.vic.gov.au/information/p&c/practiceconduct.html>

The majority of single herbs and herbal formulas described in the examination paper are contained in these reference lists however the lists are not exhaustive and some single herbs or herbal formulas that are not on the list may appear in the exam. The herbal formula list applies to the basic study of herbal formulas note that the exam may include specialised formulas that apply to the clinical disciplines e.g. gynaecology, paediatrics etc.

## 3.0 Administration of examinations

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### 3.1 Administrative process for applying for CMR Board examinations

Registration applicants who cannot meet the requirements set in Section 5(1)(a), (b) or (d) for the division of acupuncture or Chinese herbal medicine may apply to the CMR Board to sit the examinations as per section 5(1)(c) of the HPR Act.

An *Application for Examination* form is available from the CMR Board's website <http://www.cmr.vic.gov.au/registration/exams.html> or by contacting the office staff. This form and the relevant evidence to support the application plus a non-refundable application fee of \$50 is required.

If deemed eligible, the applicant will be notified and advised of the next scheduled date, times and venue for examinations.

The fee arrangements are that the application fee must be paid by the application closing date and the examination fee must be paid by the booking date see Appendix 4. Cancellation rules and fees also apply see Appendix 4.

Those who apply for a single division of the register will need to sit two written examinations (being the common paper and either the acupuncture or Chinese herbal medicine paper), followed by a clinical examination (acupuncture or Chinese herbal medicine). In other words, they will need to sit a total of three examinations.

Those who apply for both the divisions of acupuncture and Chinese herbal medicine, will need to sit three written examinations (common paper, acupuncture and Chinese herbal medicine), followed by a combined clinical examination (acupuncture and Chinese herbal medicine). In other words, they will need to sit a total of four examinations.

Generally, acupuncture exams will be conducted in the mornings and Chinese herbal medicine examinations will be conducted in the afternoons. Dates and times are confirmed with each individual.

Candidates who have not completed and passed all subsections of the written examinations will not be eligible to take the clinical examination.

### 3.2 Conduct and supervision of examinations

#### 3.2.1 Language

The examinations are conducted in English unless the candidate requests the acupuncture or Chinese herbal medicine papers to be translated (see section 3.4).

If requested, an extra 30 minutes, per theory paper, may be granted to candidates for whom English is not their first language.

#### 3.2.2 Use of dictionary

Non-medical dictionaries (paper only) will be permitted if a request is submitted to the CMR Board at least one week prior to the examination date, and if the dictionary is

examined and deemed satisfactory by the examination supervisor prior to commencement of the examination. If notes are written on the non-medical dictionary, or additional pages are inserted into the dictionary, or if the dictionary is not submitted one week prior to the examination, this will not be allowed in the examination room.

Electronic dictionary devices are not permitted.

### **3.2.3 Supervision of exams**

The supervision of both the written exams and the clinical exams is the responsibility of the Registrar (or delegate) and a nominated practitioner member of the CMR Board.

### **3.2.4 Contact with examiners**

It is forbidden for examination candidates to inappropriately contact any of the examiners or exam supervisors (except for the Registrar or her Personal Assistant), or to in any way attempt to influence the examiners in the official conduct of their duties.

## **3.3 Attending and sitting examinations**

The following conditions will apply:

- candidates are required to arrive at the examination room at least 15 minutes prior to the examination commencement time
- candidates must bring with them the confirmation letter from the CMR Board
- no food or drinks, other than that provided by the CMR Board, will be allowed in the examination room
- candidates will be allowed to ask questions during the reading time, which is the first 10 minutes of the examination
- no writing will be permitted during the reading time
- no text book, printed material or electronic device will be allowed in the examination; with the exception of pre-approved paper dictionaries
- approval for the use of non-medical dictionaries (see 3.2.2) should be obtained at least one week before the exam date and these must be checked by the exam supervisors
- candidates who arrive late for their scheduled examination time (15 minutes or more after the examination commencement time) will forfeit their examination booking. These applicants will be required to re-apply for the examination and will be liable again for all fees involved.

## **3.4 Translation of written examinations into Chinese language**

It is possible for the Chinese medicine papers (i.e. acupuncture and Chinese herbal medicine theory examination papers) to be translated if the applicant is willing to meet the cost of this translation. For Chinese translation the cost is \$600 per paper. At least one month's notice is required to organise the translation and is subject to the availability of a suitable translator.

### **3.5 Resitting examinations**

Those who fail a subsection must resit and pass that subsection. If two or all subsections of a paper are failed then those two subsections or the entire paper must be repeated in one sitting. Those who fail any of the subsections are able to resit the failed subsection/s at the next examination round<sup>6</sup>. Those who fail all subsections of a written paper must resit the paper in its entirety. A different paper to the original one will be given when resitting examinations.

Those who fail the clinical examination may resit at the next scheduled round<sup>6</sup>.

Candidates must reapply to resit the examination upon failing any subsection or the clinical exam, to do this a new *Application for Examination* form must be submitted and a \$50 application fee is required.

A fee will be charged to resit any examination. For resitting a subsection of a written exam a prorata (rounded up) fee and allocation of time will be set, see Appendix 4.

For the clinical examination the fee for resitting will be the same as the set fee.

While there is no limit to the number of resits, the CMR Board may recommend, and enforce, a 6-12 month study period before the candidate is admitted to resit.

### **3.6 Notification of examination results**

The results will be forwarded to the CMR Board at its next monthly meeting. The CMR Board will inform all candidates of their examination results, in writing, as soon as possible after the examination.

In some cases the Board may consider the results and examiners comments first before the results are distributed.

Once the examination results are finalised, the CMR Board will advise you of your eligibility to apply for general registration.

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<sup>6</sup> The Registrar may organise an earlier resit of the failed subsections or clinical component if it is possible.

## References

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Australian Acupuncture and Chinese Medicine Association (1998), *Guidelines for Applicants Accreditation Examination in Acupuncture*, AACMA, Queensland.

Optometry Council of Australia and New Zealand (2000). *Candidate Guide for Competency-based Assessment for Entry to the Profession of Optometry in Australia and New Zealand*, OCANZ, Melbourne.

Chinese Medicine Council of Hong Kong (2002). *Examination Guidelines and Format of Examinations*, CMCHK, Hong Kong.

Chinese Medicine Council of Hong Kong (2004), *Examination Manual for Chinese Medicine Practitioner Registration – 2005*, CMCHK, Hong Kong.

Chinese Medicine Council of Hong Kong (2005). *Manual for Chinese Medicine Licensing Examinations*, CMCHK, Hong Kong.

Chinese Medicine Registration Board of Victoria (2006). *Guidelines for Approval of Courses of Study in Chinese Medicine as a Qualification for Registration*, CMR Board, Melbourne.

Singapore Ministry of Health (2004). *Examination Syllabi for CAQE & Information for Candidate TCM*. Ministry of Health Singapore.

National Certification Commission for Acupuncture and Oriental Medicine in the United States of America (1999). *National Certification Acupuncture Candidates Handbook*, NCCAOM, USA.

World Health Organisation (2008), *WHO Standard Acupuncture Point Locations in the Western Pacific Region*, World Health Organisation.

## Legislation

Victorian *Chinese Medicine Registration Act 2000*

Victorian *Health Professions Registration Act 2005*

# Appendix 1 Assessment of overseas qualifications

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A qualification that is obtained from a recognised overseas institution can be assessed, depending on your circumstance, by either Overseas Qualifications Unit (OQU) or the National Office of Overseas Skills Recognition (NOOSR), which is part of the Australian Department of Education, Science and Training.

## For permanent residents or citizens and permanently living in Victoria

The OQU provides a range of free and confidential services to assist qualified professionals who are living in Victoria and have permission to enter the Victorian workforce. To be eligible for OQU services, you need to be living permanently in Victoria with a current Victorian residential address.

Current processing times for qualifications assessments, is up to 12 weeks.

Overseas Qualifications Unit  
Level 20,  
80 Collins Street  
Melbourne, VIC 3000

[http://www.business.vic.gov.au/BUSVIC/STANDARD//PC\\_62607.html#intNav1](http://www.business.vic.gov.au/BUSVIC/STANDARD//PC_62607.html#intNav1)

## For temporary residents and citizens of other countries

Australian Education International (AEI-NOOSR) is the part of NOOSR that provides official information and advice on the comparability of overseas qualifications with Australian qualifications. AEI-NOOSR helps you have your qualifications recognised in Australia by helping you meet, or prepare to meet, specific academic or professional requirements for registration. This aims to help overseas qualified people work and study in Australia.

Online application -  
<http://aei.gov.au/AEI/QualificationsRecognition/Information/EduAssessments.htm>

Assessment may take up to 3 months.

Number of qualifications to be assessed	Fee
1 or 2	\$450.00
3 or 4	\$550.00
5 or more	\$650.00

# Appendix 2 English language proficiency

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Extracted from the Board's Policy on English language

## 1.1 Introduction

Section 6(2)(f) of the *Health Professions Registration Act 2005* (HPR Act) states that the Chinese Medicine Registration Board of Victoria (CMR Board) may refuse general registration to an applicant where:

...the applicant's competency in speaking or otherwise communicating in English is not sufficient for that person to practise as a health practitioner.

From 1 January 2005, all new applicants for general registration under the HPR Act, whose first language is not English, must have completed an acceptable English language test. This is to ensure that they can communicate competently and safely with patients, their families, colleagues and other health care practitioners. The CMR Board considers that a comprehensive knowledge of English is essential to safe and effective practice of Chinese medicine in Australia.

The test must have been undertaken not more than three years before lodging the application for registration. A certified copy of the test results must be forwarded to the CMR Board before your application can be finalised.

See below for contact details regarding testing.

## 1.2 Acceptable tests

The acceptable tests are described in sections 1.2.1 through 1.2.3. For information on contacting the institutions administering these tests, see 1.5 below.

### 1.2.1 International English Language Testing System (IELTS)

Only the academic test is acceptable and the minimum requirement is 6.0 in each component.

### 1.2.2 Occupational English Test (OET)

The minimum requirement is B-level in all four sections.

### 1.2.3 American Test for English as a Foreign Language (TOEFL)

This will only be accepted if the test included the spoken component. The minimum requirement is 237 (test of written English 4.5).

## 1.3 Unacceptable tests

The Business English Certificate (BECS) is unacceptable.

## 1.4 Exemptions

The requirement to complete an English language test may be waived where the practitioner:

- has successfully completed Chinese medicine postsecondary education of at least 2 years fulltime, for which English was the medium of instruction
- has original evidence of successful completion of another test that can be demonstrated to be of an equivalent standard to one of the acceptable tests
- can otherwise demonstrate adequate proficiency in English.

## 1.5 English language tests

### International English Language Testing System (IELTS)

IELTS Australia  
GPO Box 2006  
Canberra ACT 2601  
Australia

Telephone: +61 2 6285 8222

Facsimile: +61 2 6285 3233

Email: [ielts@idp.edu.au](mailto:ielts@idp.edu.au)

Website: <http://www.ielts.org>

### Occupational English Test (OET)

Language Australia  
GPO Box 372F  
Level 4, 51 Queen St,  
Melbourne Victoria 3001  
Australia

Telephone: +61 3 9612 2600 or +61 3 9612 2610

Facsimile: +61 3 9612 2601

Email: [oet@la.ames.vic.edu.au](mailto:oet@la.ames.vic.edu.au)

Website: <http://www.languageaustralia.com.au>

### Test of English as a Foreign Language (TOEFL)

Website: <http://www.ets.org/toefl>

See the website for test centre locations, test dates, the TOEFL bulletin (PDF file) and online registration. There are two test delivery formats: paper-based and computer-based. The TOEFL exam assesses reading, writing and listening and as an option, you can also register for the Test of Spoken English (TSE). The TSE measures the ability of non-native speakers to speak in an academic or professional environment. From September 2005, a new test will assess all four communicative skills (reading, listening, speaking and writing.).

## Appendix 3 Sample questions

The following questions are example examination questions. The correct answer is printed in **bold** type. Candidates are required to identify the correct answer by circling, crossing or marking it in some way.

These example questions do not represent the entire scope of the subjects covered in the examination.

### Common paper

#### Biomedicine

	Which of the following is TRUE
	a) A glomerulus is a nephron
	b) The capillary tuft receives blood from arteriole and drains to a venule
	c) <b>A glomerulus is a capillary tuft surrounded by Bowman's capsule</b>
	d) Glomerular filtrate usually contains lots of protein
	e) All of the above are true

	Eosinophilia may be found in patients with the following diseases EXCEPT:
	a) Fungal infection
	b) <b>Viral infection</b>
	c) Hay fever
	d) Bronchial asthma
	e) All of the above conditions would always have eosinophilia

	A 4-year-old boy presents with fever, conjunctivitis, neck lymph adenopathy, strawberry tongue, and arthralgia. The most likely diagnosis is
	a) Common cold
	b) <b>Kawasaki's syndrome</b>
	c) Reye's syndrome
	d) Acute conjunctivitis
	e) Acute tonsillitis

#### Australian Health Care Context

	Which statement is CORRECT? Under the Health Professions Registration Act 2005, penalties can be imposed on a registered Chinese medicine practitioner:
	a) Immediately if the practitioner has been found guilty of an indictable offence
	b) If the Chinese medicine practitioner leaves the profession
	c) <b>If the Chinese medicine practitioner is found guilty at a hearing of unprofessional conduct</b>
	d) If the Chinese medicine practitioner fails to attend a hearing into his/her professional conduct
	e) Any of these situations

## Ethics and Professional Issues

	Financial considerations:
a)	Are the primary issue for Chinese medical practitioners
b)	Determine the way in which a practice operates
c)	Are why practitioners fail in business
d)	Whilst important take a secondary role to the patient's best interests
e)	Must always be attended to by a fully qualified accountant

## Acupuncture Paper

### Classical literature, meridian, point and needling theory, microsystems & moxibustion

	Sanyinjiao (SP6) is the:
a)	Leg Yin meeting point
b)	Meeting point of lung and liver
c)	Meeting point of the three Leg yang
d)	Meeting point of the Stomach and Spleen points
e)	Meeting point of sanjiao and Spleen

### Chinese Medicine Clinical Diagnosis and Treatment

	Which point combination is considered able to affect the uterus directly to expel pathogenic cold?
a)	Qixue (KI13) and Guilai (ST29)
b)	Siman (KI14) and Guanyuan (CV4)
c)	Mingmen (GV4) and Shenshu (BL23)
d)	Fushe (SP13) and Fujie (SP14)
e)	Tianshu (ST25) and Qugu (CV2)

### Surface anatomy, needling and aseptic technique, safety and clinical setting

	What point am I? I lie in the dorsal interosseus muscle, between the first and second metacarpal bones, my deep position is in the transverse head of the abductor hallucis muscle:
a)	Yuji (LU10)
b)	Hegu (LI4)
c)	Sanjian (LI3)
d)	Louzhen (extra point)
e)	Taiyuan (LU9)

## Chinese herbal medicine paper

### Pharmacopoeia, formula and classical literature

1	The functions of Wu Wei Xiao Du Yin are to:
	a) Clear heat in the lung and release toxins
	<b>b) Clear heat, relieve toxicity, cool blood and reduce swelling</b>
	c) Clear bighead warm fire toxin, and disperses wind heat
	d) Clear heat in the stomach and eliminate toxin
	e) Clear bighead warm fire toxin, ventilate lungs

### Clinical Diagnosis

	Which of the following treatment principle is most appropriate for Erythema Nodosum due to damp-heat?
	a) Expel pathogenic cold from channels and clear dampness to remove blockage of channels
	b) Cool blood, clear pathogenic heat, expel pathogenic wind, and stop itching
	<b>c) Clear heat to promote diuresis, remove blockage by promoting blood circulation</b>
	d) Warm the channels to expel cold, promote blood circulation to regulate channels
	e) Expel pathogenic cold from channels

### Pharmacology, toxicology, safety and clinical setting

	If a person accidentally ingests unprocessed Ban Xia, what signs and symptoms may occur?
	<b>a) Swelling and pain of mouth, throat and digestive tract, drooling and dyspnea</b>
	b) Wheezing, light headedness and palpitations
	c) Diarrhoea with undigested food in the stool
	d) Extremely dry throat, visual disturbance and hallucinations
	e) Dizziness, nose bleeding and thirst

## Appendix 4 Fee and date schedules

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### Examination fee schedule

Exam	Acupuncture	Chinese herbal medicine	Acupuncture and Chinese herbal medicine
Application fee	50	50	50
Theory – Common	250	250	250
Theory - Acupuncture	250	-	250
Theory – Chinese herbal medicine	-	250	250
Clinical	500	500	500
<b>Total</b>	<b>1050</b>	<b>1050</b>	<b>1300</b>

Please note that if examination and registration is sought in one division prior to the other e.g. acupuncture first then Chinese herbal medicine (or vice versa), it will be necessary for the applicant to sit two clinical examinations. As these would be held on separate occasions a fee of \$500 applies each clinical exam.

### Examination date schedule

2010 Exam Round	Application closing date <sup>7</sup>	Booking date & fee payable <sup>8</sup>	Exam Dates
Round A	31 December 2009	12 January 2010	12 February 2010
Round B	30 April 2010	11 May 2010	11 June 2010
Round C	3 September 2010	15 September 2010	15 October 2010

### Cancellation Policy

The following will apply:

- if cancelled before the booking date: the \$50 application fee is non-refundable but the applicant may transfer the application to the next examination round;
- if cancelled after the booking date: 50% of the examination fee (\$125 for one theory paper, \$250 for two theory papers, \$375 for three theory papers, \$250 for the clinical exam) will be refunded and the applicant may transfer the application to the next examination round at which time the examination fee becomes payable again according to the fees set at that time.

### Cost of re-sitting failed subsections

For information on resitting failed subsections see section 3.5.

Those who fail any subsection must resit that subsection before a pass is given in the respective paper. If more than one subsections of a paper are failed then those subsections must be repeated in one sitting.

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<sup>7</sup> Application form and \$50 application fee must be submitted by this date.

<sup>8</sup> If the fee is not paid by the due date the candidate will not be permitted to sit the examination and must wait until the next round.

The cost of resitting is based on the pro-rata time allocated per subsection, based on the percentage of the full paper, rounded up to cover administrative costs.

	Percent of paper	Full paper initial cost	Time allocated per subsection	Resit fee
<b>Common paper</b>		250		
Biomedical sciences	70%		60 min	200
Australian health care context	15%		15 min	75
Ethics and professional issues	15%		15 min	75
<b>Acupuncture paper</b>		250		
Classical literature, meridian, point and needling theory, microsystems and moxibustion	20%		20 min	75
Clinical (CM) diagnosis & treatment	60%		50 min	175
Surface anatomy, needling and aseptic technique, safety and clinical setting	20%		20 min	75
<b>Chinese herbal medicine</b>		250		
Pharmacopoeia, formula, classical literature	20%		20 min	75
Clinical (CM) diagnosis & treatment	60%		50 min	175
Pharmacology, toxicology, safety and clinical setting	20%		20 min	75

## Appendix 5 Areas of study and synopses

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The following table summarises the areas of study for various subjects. More detailed outlines are then included in the synopses<sup>9</sup> that follows.

Area of Study	Acupuncture	Chinese Herbal Medicine
<b>Chinese Medicine Subjects:</b>		
Terminology for Chinese medicine	X	X
Diagnosis in Chinese medicine	X	X
Channel theory	X	X
Acupuncture point theory	X	
Needling theory & practice	X	
Moxibustion theory & practice	X	
Acupuncture micro-systems: ear & scalp	X	
Materia medica of Chinese medicine		X
Chinese medicinal formulae		X
Dispensing Chinese medicinal substances		X
Classical Literature - <i>Huang Di Nei Jing</i>	X	X
Classical Literature - <i>Shang Han Lun, Wen Bing Xue</i>		X
Chinese medicine internal medicine	X	X
Chinese medicine gynaecology	X	X
Chinese medicine paediatrics	X	X
Chinese medicine traumatology	X	X
Chinese medicine dermatology	X	X
Chinese medicine health preservation & enhancement	X	X
Clinical assessment	X	X
<b>Biomedical Sciences Subjects:</b>		
Cell biology	X	X
Biochemistry/molecular biology	X	X
Anatomy	X	X
Physiology	X	X
Microbiology	X	X
Pathology	X	X
Pharmacology & toxicology	X	X
Diagnosis in western medicine	X	X
Radiology & imaging	X	X
Laboratory diagnosis	X	X
Clinical bio-medicine	X	X
<b>General Subjects:</b>		
Professional issues (ethics and Australian health care context)	X	X

<sup>9</sup> The synopses have been extracted from the course approval guidelines published by the CMR Board as a guide for educational institutions providing qualifying courses in acupuncture and/or Chinese herbal medicine.

## Synopses

### A5.1 Chinese Medicine Theoretical Paradigm

#### A5.1.a Terminology for Chinese Medicine

##### *Synopsis*

This area of study introduces the Chinese language with particular reference to the Chinese terms used in Chinese medicine. It provides an overview of the Chinese language and specific instruction in the reading, writing and pronunciation of common terms used in Chinese medicine. The use of the Pin Yin system of Romanisation is examined in detail, to enable accurate spelling and pronunciation of common Chinese medicine terms encountered in Chinese medicine. The reading and writing of basic Chinese characters enables all graduates to write common characters and recognise common terms used in Chinese medicine. Graduates can use a Chinese-English Pin Yin dictionary of Chinese medicine terminology.

##### *Graduate Outcomes*

- briefly outline the history, development and structure of the Chinese language;
- demonstrate the use of the Pin Yin system of romanisation in the writing of the main terms used in Chinese medicine;
- demonstrate the writing of simple Chinese characters used in the practice of Chinese medicine;
- demonstrate the pronunciation of terms commonly used in Chinese medicine;
- recognise and read simple Chinese characters relevant to the practice of Chinese medicine; and
- demonstrate the use of a Chinese-English Pin Yin Chinese medicine terminology dictionary.

#### A5.1.b Diagnosis in Chinese Medicine

This area is assumed to be already known by the applicant and will not be specifically examined.

##### *Synopsis*

This area of study provides comprehensive knowledge and skills in methods and procedures relevant to clinical data collection, organisation and interpretation in Chinese medicine, in order to arrive at a diagnosis including identification of the disease and pattern of disharmony. This covers five components: guiding principles of Chinese medicine diagnosis, the four data collection methods, methods of identification of patterns of disharmony, procedures for collecting diagnostic information, application of data collection and pattern identification methods and case recording.

##### *Graduate Outcomes*

- comprehend the guiding principles of Chinese medicine diagnosis;
- understand the application of the four data collection methods, including inspection, auscultation and olfaction, interrogation and palpation;

- interpret the clinical significance of the main signs and symptoms, including tongue and pulse diagnosis;
- define the concepts and inter-relationships between zheng (symptom), zheng (syndrome), and bing (disease);
- comprehend the theory of the Eight Parameter (ba gang) system and apply it in the identification of syndromes;
- explain the following syndrome identification methods, identify the main syndromes and explain the aetiology of: zang fu, qi, xue and jin ye, and jing luo;
- explain the following syndrome identification methods, identify the main syndromes and explain the aetiology of: the six stages, four phases and triple burner; and
- demonstrate the methods of taking a case history, conducting a diagnostic examination and recording the diagnostic details of cases.

## **A5.2 Modalities of Chinese Medicine – Acupuncture**

### **A5.2.a Channel and Acupuncture Point Theory**

#### *Synopsis*

This area of study covers *jing luo* and point theory. This includes the composition and functions of the *jing luo* system and acupuncture points, in sufficient detail to enable the naming/numbering of the points, the location of individual points, explanation of the classification and an understanding of their therapeutic functions and clinical indications. 400 acupuncture points are covered.

#### *Graduate Outcomes*

- outline the composition and function of the *jing luo* system, the distribution and connection of each of the various components of the system;
- explain the significance of the symptoms and signs associated with disorders of the *jing luo* system;
- apply the proportional measurement method used in acupuncture point location;
- explain the theories of the acupuncture points including the general features and functions of acupuncture points, the categories of acupuncture points and their significance, and the naming and numbering of acupuncture points; and
- identify and locate the major points of the fourteen meridians and major extraordinary channel points.

### **A5.2.b Needling Theory and Practice**

#### *Synopsis*

This area of study comprises the theory and practical techniques pertaining to the therapeutic stimulation of the acupuncture points using needles. It includes an examination of the origins and development of acupuncture needling theory, and discussion of the mechanisms by which acupuncture works according to both traditional Chinese and western scientific perspectives. The focus of this area of study is on theories of point selection and the theory and practical techniques for the safe, effective insertion, manipulation, removal and disposal of needles.

### ***Graduate Outcomes***

- explain the rationale for acupuncture treatment within the Chinese medicine theoretical paradigm;
- outline the methods of point stimulation and their significance;
- identify the types of acupuncture needles and explain their application;
- understand the principles of point selection and the combining of points in therapy;
- understand the principles of infection control and demonstrate the use of aseptic technique in needling;
- demonstrate the use of each of the modern types of acupuncture needles, including the use of filiform needles in the needling of selected points, the use of aseptic technique in needling, the insertion of the needle to the required depth and angle, the application of specific needle manipulation methods, the removal of the needle;
- explain the contraindications and cautions that relate to the application of needling and detail the management of accidents resulting from needling; and
- explain the principles and demonstrate the procedures for the management of sharps and other biohazards.

### **A5.2.c Moxibustion and Cupping Theory and Practice**

#### ***Synopsis***

This area of study covers the theory and practical techniques pertaining to the therapeutic stimulation of the body using moxa and cupping techniques. It includes an examination of the origins and development of moxibustion theory and discussion of the mechanisms by which moxibustion works according to the traditional Chinese perspective, as well as the theoretical basis for the use of cups. The focus of this area of study is on the theories of point selection and the theory and practical techniques for the safe, effective application of moxibustion and cupping.

### ***Graduate Outcomes***

- explain the functions and therapeutic aims of moxibustion and cupping treatment;
- outline the methods of point stimulation and their significance;
- identify the types of moxibustion and explain their application;
- compose a point prescription to achieve a specified therapeutic outcome and explain the relationship between the point prescription and the principle of treatment;
- demonstrate the use of each of the types of moxibustion and cupping;
- explain the contraindications and cautions that relate to the application of moxibustion and cupping; and
- detail the management of accidents resulting from moxibustion and cupping.

### **A5.2.d. Acupuncture Microsystems**

#### ***Synopsis***

This area of study provides the history, theory and practice of commonly used microsystems including ear and scalp acupuncture. The focus of this area of study should be the theoretical basis, location of points, and clinical application of ear and scalp acupuncture in the management of diseases.

### ***Graduate Outcomes***

- understand the history of the ear and scalp acupuncture systems;
- comprehend the theoretical basis of these two microsystems;
- locate ear and scalp acupuncture points and zones, and perform specific needling procedures;
- explain the importance of infection control in the needling procedure; and
- apply these two needling methods in the clinical management of common clinical conditions.

## **A5.3 Chinese Herbal Medicine**

### **A5.3.a Materia Medica of Chinese Medicine**

#### ***Synopsis***

This area of study introduces the principles of Chinese herbal materia medica. It covers the historical development of the Chinese materia medica; the theories and systems of traditional classification of Chinese materia medica; the characteristics and general clinical applications of substances within these categories; the methods of collection and processing of Chinese medicinal substances and the forms in which they are administered. About 450 Chinese medicinal substances should be studied. The depth of study may vary depending on the importance of the substance and its frequency of use. The characteristics and therapeutic applications of individual Chinese medicinal substances in each of the categories should be identified, including the names and appearance, main preparation methods, characteristics (flavour, nature, channel tropism), functions, combination with other herbs, main therapeutic applications, dosage range and any cautions or contraindications. Chinese medicinal substances that are affected by the Australian regulations should be identified.

### ***Graduate Outcomes***

- outline the historical development of the Chinese materia medica;
- explain how Chinese medicinal substances are classified and their properties defined;
- name and describe the main methods by which Chinese medicinal substances are collected and processed/prepared (pao zhi) and explain the aim and function of specific herb processing methods;
- name and describe the types of preparations of Chinese medicinal substances including decoction, infusion, powder, pill, syrups, plasters, and medicinal wines;
- identify, by name and sight, samples of Chinese medicinal substances including naming in Pin Yin and/or Chinese characters, scientific name, and common English name (if applicable);
- explain the concept of toxicity of Chinese materia medica;
- explain the compatibility and incompatibility of Chinese medicinal substances;
- explain the impact of regulations that establish restricted schedules of drugs and poisons, and what impact these have on use of toxic herbs and endangered species used in Chinese medicine practice;
- name, describe and explain the characteristics, functions and main therapeutic applications of the main traditional Chinese medicinal substances in each category

including: properties and channel tropism, the major functions of the medicinal substance, and the main therapeutic applications of the substance; and

- state the dosage range and any cautions or contraindications of the main Chinese medicinal substances and describe any special preparation requirements of the substance.

### **A5.3.b Chinese Medicinal Formulae**

#### ***Synopsis***

This area of study comprises two parts. The first part covers the theories of the classification of Chinese herbal formulae, their construction and application. This includes the historical development of formula theory, how formulae are currently classified, the functions of formulae within each of the main categories and how these relate to therapeutic methods, the methods of herbal formulae modification, the main methods by which Chinese herbal formulae are prepared and the forms in which they are administered. The second part covers the theories of how formulae are structured, the practice of formula construction and modification, the hierarchy of constituents and how they function in concert within a formula. A minimum of 120 commonly used medicinal formulae should be studied. For each of the major herbal formulae used in contemporary practice, the composition, modifications, actions, therapeutic applications, and cautions or contraindications should be covered, as well as the methods and procedures of formula preparation, administration and instructions to clients.

#### ***Graduate Outcomes***

- outline the development and explain the principles of Chinese medicine formula theory;
- explain the principal actions of formulae in each of the formula categories used in modern Chinese medicine, and the relationship between formula categories and treatment strategies;
- describe the main forms in which formulae are prepared and administered;
- explain the principles for combining substances in formulas and analyse the composition of major formulae;
- discuss the actions, main therapeutic applications, contraindications, modifications and preparation requirements of the main traditional Chinese herbal formulae;
- compare and contrast the compositions, actions and indications of principal formulae that belong to the same formula category and distinguish the most appropriate formula to achieve a particular therapeutic effect;
- demonstrate the methods of preparation and administration of Chinese herbal formulas; and
- explain how to advise patients/clients on preparation, dosage and administration of herbal formulae, and actions to take in the event of an unexpected reaction.

### **A5.3.c Dispensing Chinese Medicinal Substances**

#### ***Synopsis***

This area of study ensures the safe, accurate preparation and dispensing of individual Chinese medicinal substances and Chinese herbal formulae. The knowledge and skills required of a dispenser of Chinese medicinal substances includes six aspects: herbal storage, herb identification, herb processing, filling herbal prescriptions, instructing patients/clients and dispensary management. Graduates have practical skills and a

thorough appreciation of the ethical and legal issues involved in the supply of Chinese medicinal substances to the public.

### ***Graduate Outcomes***

- explain the requirements for the storage of Chinese medicinal substances;
- identify Chinese medicinal substances commonly held in a Chinese medicine dispensary in the form received from a wholesaler; verbally identify unlabelled samples of commonly used Chinese medicinal substances; and distinguish correctly and incorrectly labelled samples of herbs;
- distinguish the quality and condition of samples of Chinese medicinal substances;
- read, scrutinise and interpret a Chinese medicine prescription and identify each of the herbs, any preparation requirements specified, the dosage of each of the herbs and any errors or omissions in the names, preparation methods or dosages of the Chinese medicinal substances specified on the prescription;
- demonstrate the main methods by which Chinese medicinal substances are processed (pao zhi);
- explain and demonstrate the procedures involved in the dispensing of a Chinese medicine prescription including preparing individual Chinese medicinal substances; weighing each substance; preparing the specified number of packets; packaging individual substances and packets of Chinese medicinal substances as specified; labelling individually packaged substances and completed prescriptions;
- instruct patients in the use of the Chinese medicine prescription they receive including the general methods of preparing a decoction; the specific preparation methods for a particular prescription; when and how often to take a particular prescription; and explain any cautions or contraindications associated with a particular prescription;
- explain to patients what actions they should take after finishing the prescription and in the event of an unexpected reaction to the prescription;
- establish and manage a Chinese herbal dispensary including the layout and equipment required in a Chinese herbal dispensary, the labelling requirements of herbs, the safe and hygienic handling of herbs, and the record keeping requirements of a Chinese herbal dispensary; and
- explain the ethical and legal issues associated with the dispensing of Chinese medicinal substances including governmental regulatory requirements for prescribing and dispensing of scheduled substances and therapeutic goods, and use of endangered species in medicines.

## **A5.4 Chinese Medicine Classic Literature**

### **A5.4.a *Huang Di Nei Jing* (Yellow Emperor's Internal Classic)**

#### ***Synopsis***

This area of study covers the *Huang Di Nei Jing* (Yellow Emperor's Internal Classic) that constitutes the source for much of Chinese medicine theory and practice. It examines the history, structure and scope of this work, and its significance in Chinese medicine. The focus is upon the key concepts and statements that shaped later Chinese medicine theory.

### ***Graduate Outcomes***

- explain the importance of the *Huang Di Nei Jing* in the development of Chinese medicine theory and practice;

- outline the key concepts introduced in the *Huang Di Nei Jing* and explain the application of these concepts in Chinese medicine practice; and
- explain the current academic views of formation the *Huang Di Nei Jing* corpus, the methods used in studying the texts.

#### **A5.4.b *Shang Han Lun* (Treatise on Cold Damage)**

##### ***Synopsis***

This area of study introduces the *Shang Han Lun* including the diagnosis and treatment of febrile diseases. It covers an overview of the history, the *Shang Han Lun*, the historical development of *shang han* theory and its significance in modern CM practice. The focus is on clinically relevant aspects such as the application of the six channels (*liu jing*); the relationship between six channels and eight guiding principles and *zang fu bian zheng*; the processes of disease transmission through the six channels including complicated and concurrent syndromes. Graduates can apply treatment principles and use designated formulae from the *Shang Han Lun* according to syndrome identification.

##### ***Graduate Outcomes***

- explain the context, history and development of the *Shang Han Lun* and *shang han* theory;
- describe and explain the *liu jing* (six channels) system;
- apply the method of pattern identification according to *Shang Han Lun*;
- explain the relationship between *liu jing* syndrome identification and *zang fu* syndrome identification;
- explain the process of transmission according to *liu jing*;
- outline the principle of treatment in accordance with *liu jing* syndrome identification; and
- explain the differentiation and treatment of *liu jing* syndromes based on pulse, signs and symptoms.

#### **A5.4.c *Wen Bing Xue* (Studies of Diseases Due to Warm Pathogens)**

##### ***Synopsis***

This area of study provides an understanding of the diagnosis and treatment of febrile diseases, an overview of the historical development of the *Wen Bing* theories and how these relate to *Shang Han* theory. The focus of study is upon the characteristics of the four phases (*wei qi ying xue*) and *San Jiao* classifications of febrile diseases, and upon the diagnostic and treatment methods used in the management of *Wen Bing*. The treatment of specific *Wen Bing* diseases including their aetiology, differentiation of symptoms, treatment principles and formulae is included.

##### ***Graduate Outcomes***

- outline the development of *Wen Bing* theory and identify the main points that distinguish *Shang Han* theory from *Wen Bing* theory;
- discuss the concept of transmission of pathogens in *Wen Bing* theory;
- discuss the similarities and differences between the four phases (*wei qi ying xue*) and *San Jiao* classifications of febrile diseases;
- identify the specific diagnostic methods that are used in the differentiation of *Wen Bing* diseases;

- explain the diagnosis and treatment of key diseases (feng wen, chun wen, shu wen, shi wen, fu shu, qiu zao, dong wen, wen du, wen yi) including aetiology, syndrome identification, selection of formulae, components and modifications; and
- explain the cautions required when treating Wen Bing diseases.

## **A5.5 Clinical Chinese Medicine**

### **A5.5.a Internal Medicine**

#### *Synopsis*

This area of study covers the theory and practice of Chinese internal medicine (nei ke). It includes the classification of diseases, common aetiology and pathogenesis, and therapeutic methods. For each disease the syndrome differentiation, treatment principles and methods, appropriate formulae and modifications, details of the application of modalities (Chinese herbal medicine and/or acupuncture and/or tui na), cautions and contraindications, and relevant lifestyle advice are included.

#### *Graduate Outcomes*

- explain the classifications of diseases in Chinese medicine internal medicine (nei ke);
- explain the symptomatology, aetiology and pathogenesis of each of the main diseases;
- identify the main syndromes (zheng) that can be present in each of these diseases;
- explain the Chinese medicine approaches to the treatment of the main diseases in internal medicine including: the principle(s) of treatment; the relationship between the disease mechanism(s) and the principle(s) of treatment; and the most appropriate method(s) of treatment for the particular disease;
- explain the treatment of the main diseases using Chinese herbal medicine including: the principal guiding formula(s) used in the treatment of the particular condition; the ways in which the formula(s) can be modified to suit the particular condition; the function(s) of each of the herbs in the resultant formula; assigning dosages to each of the herbs in the formula; and/or
- explain the treatment of the main diseases of each of the traditional categories of bodily systems using acupuncture, moxibustion and/or tui na including: acupoints which could be used in the treatment of the particular condition; the functions of these points in treating the condition; designing a point prescription appropriate to a particular condition; the needling and manipulation techniques and/or moxa techniques to be used;
- identify and explain any cautions and contraindications which need to be considered in the treatment of the main diseases including: the complications which could arise from the particular disease; possible adverse reactions to the herbal formula; possible interactions between the formula and other medications commonly used for the particular disease; cautions and possible adverse reactions to be considered in performing the treatment using acupuncture and moxibustion;
- identify any lifestyle, dietary or other advice that needs to be given to the patient; and
- state the instructions to be given to the client regarding appropriate behaviour in the event of an adverse reaction.

## **A5.5.b Gynaecology and Obstetrics**

### ***Synopsis***

This area of study covers the theory and practice of Chinese medicine gynaecology and obstetrics. This includes the anatomy and physiology of the female reproductive system, the processes of pregnancy and birth, as well as those features of diagnosis that pertain to gynaecological and obstetric disorders. For each of the main gynaecological and obstetric disorders the aetiology, differentiation of syndromes, appropriate treatment principles and strategies are covered. Treatment approaches include Chinese herbal formulae and/or acupuncture, with appropriate adjustments for individual cases, together with lifestyle and dietary advice to support the total treatment plan.

### ***Graduate Outcomes***

- understand the anatomy and physiology of the female reproductive system;
- understand the physiological features of conception, pregnancy, parturient, puerperium and lactation;
- explain the main causes and pathogenesis of female urogenital, gynaecological and obstetric diseases;
- explain and apply the methods of diagnosis used in the identification and differentiation of gynaecological and obstetric diseases;
- explain the symptomatology, aetiology and pathogenesis of the main gynaecological and obstetric disorders including the principal symptoms and the main syndromes (zheng) that can be present in the disease;
- explain the disease mechanisms involved in the aetiology of the disease and the relationship between the symptom pattern and the disease mechanism;
- outline the Chinese medicine approaches to the treatment of the main gynaecological and obstetric disorders, identify the principle(s) of treatment and the most appropriate method(s) of treatment for particular diseases;
- describe and explain the treatment of the main gynaecological and obstetric disorders using Chinese herbal medicine including: the principal guiding formula(s) used in the treatment of the particular condition; the ways in which the formula(s) can be modified to suit the particular condition; the function(s) of the herbs in the formula; and/or
- describe and explain the treatment of the main gynaecological and obstetric disorders using acupuncture, moxibustion and/or tui na;
- identify and explain any cautions and contraindications which need to be considered in the treatment of the main gynaecological and obstetric disorders including the complications which could arise from the particular disease; possible adverse reactions to the herbal formula; possible interactions between the formula and other medications commonly used for the particular disease; cautions and possible adverse reactions to be considered in performing the treatment using acupuncture, moxibustion and/or tui na; and
- explain the measures required for the prevention and amelioration of gynaecological and obstetric conditions that are exacerbated by personal hygiene and/or dietary practices.

### **A5.5.c Paediatrics**

#### ***Synopsis***

This area of study covers the theory and practice of Chinese medicine paediatrics. It includes the physiology of children including growth, development and care needs, as well as the pathology of childhood disorders. The methods of paediatric diagnosis are covered including the Chinese medicine differentiation of the main paediatric disorders. For each condition the aetiology, differentiation of syndromes, appropriate treatment principles and strategies should be examined. Treatment approaches include Chinese herbal medicine, acupuncture/moxibustion, tui na, dietary management and parental care.

#### ***Graduate Outcomes***

- explain the characteristics of the physiology and normal development of children including the stages in child development and the characteristics of each age stage; the importance of correct feeding to the growth and development of children; the importance of the proper care and education of children;
- explain and apply the methods of diagnosis used in the identification and differentiation of paediatric diseases;
- explain the symptomatology, aetiology and pathogenesis of the main paediatric disorders including the principal symptoms and main syndromes (zheng) that can be present in the disease;
- identify the principle(s) of treatment for each of the main syndromes in a particular disease and explain the relationship between the disease mechanism(s) and the principle(s) of treatment;
- outline the Chinese medicine approaches to the treatment of the main paediatric disorders and identify the most appropriate method(s) of treatment for the particular disease;
- explain the treatment of the main paediatric disorders using Chinese herbal medicine including the principal guiding formula(s) used in the treatment of the particular condition; the ways in which the formula(s) can be modified to suit the particular condition; the function(s) of the herbs in the formula; and/or
- describe and explain the treatment of the main paediatric disorders using acupuncture, moxibustion and/or tui na;
- identify and explain any cautions and contraindications which need to be considered in the treatment of the main paediatric disorders including the complications that could arise from the particular disease; possible adverse reactions to the herbal formula; possible interactions between the formula and other medications commonly used for the particular disease; cautions and possible adverse reactions to be considered in performing the treatment using acupuncture and moxibustion; and
- explain the measures required for the prevention, amelioration and care of paediatric conditions.

### **A5.5.d Traumatology**

#### ***Synopsis***

This area of study covers the theory and practice of CM traumatology (gu shang ke). The structure of the skeleton, muscles and tendons, and normal functioning angles of body joints are covered. It includes the aetiology, pathogenesis and differentiation of syndromes for common conditions. For each condition appropriate treatment principles

and strategies using Chinese herbal formulae, acupuncture, massage and exercise methods, lifestyle advice and dietary measures are included.

#### ***Graduate Outcomes***

- understand the classification of injuries and wounds;
- explain the external and internal causes of injury and wounds, the reactions of the body to injury and the processes of healing;
- demonstrate the application of Chinese medicine diagnostic procedures in traumatology;
- demonstrate knowledge and skills relating to the pathogenesis, diagnosis, differential diagnosis and ancillary rehabilitation treatment of common fractures and dislocations and primary treatment of soft tissue injuries;
- explain the symptomatology, aetiology and pathogenesis of the main traumatological disorders including the principal symptoms and main syndromes (zheng) that can be present in the disorder;
- explain the principles and demonstrate the applications of external therapies including manual reduction, Chinese herbal medicine and rehabilitation exercises; and
- identify and explain any cautions and contraindications which need to be considered in the treatment of traumatological disorders including the complications which could arise; possible adverse reactions to the herbal formula; possible interactions between the formula and other medications commonly used for the particular disease; cautions and possible adverse reactions to be considered in performing the treatment using acupuncture, moxibustion and manual therapies.

#### **A5.5.e Dermatology**

##### ***Synopsis***

This area of study covers the theory and practice of Chinese medicine dermatology. It includes the traditional and modern classification systems of dermatological disorders, and the general features of physiology, pathology and diagnosis as applied to dermatology. For each of the common dermatological diseases the aetiology, diagnosis, differentiation and treatment should be examined. Graduates can formulate prescriptions of Chinese herbs and/or select points for acupuncture or moxibustion in order to address the specific requirements of the syndromes (zheng) involved. In addition, they can advise clients with regard to lifestyle and transmission and infection control.

#### ***Graduate Outcomes***

- explain the classification of dermatological diseases from a Chinese medical viewpoint;
- explain and apply the methods of diagnosis used in the identification and differentiation of dermatological diseases;
- explain the symptomatology, aetiology and pathogenesis of the main dermatological disorders including the principal symptoms and main symptom patterns (zheng) that can be present in the disease;
- identify the principle(s) of treatment for each of the main symptom patterns in a particular disease and explain the relationship between the disease mechanism(s) and the principle(s) of treatment;

- outline the CM approaches to the treatment of the main dermatological disorders and identify the most appropriate method(s) of treatment for the particular disease;
- explain the treatment of the main dermatological disorders using Chinese herbal medicine including the principal guiding formula(s) used in the treatment of the particular condition; the ways in which the formula(s) can be modified to suit the particular condition; the function(s) of the herbs in the formula; and/or
- describe and explain the treatment of the main dermatological disorders using acupuncture, moxibustion and/or tui na;
- identify and explain any cautions and contraindications which need to be considered in the treatment of the main dermatological disorders including the complications which could arise from the particular disease; possible adverse reactions to the herbal formula; possible interactions between the formula and other medications commonly used for the particular disease; cautions and possible adverse reactions to be considered in performing the treatment using acupuncture and moxibustion and/or tui na; and
- explain the measures required for the prevention and amelioration of dermatological conditions that are exacerbated by personal hygiene and dietary practices.

#### **A5.5.f Health Preservation and Enhancement**

##### ***Synopsis***

This area of study covers the traditional Chinese methods of preserving and enhancing health and wellbeing through life style, diet, and physical exercise. It includes the methods of maintaining proper balance between work and rest, and the cultivation of the mind and body through physical and mental training, the principles of dietary regulation, and knowledge of foods for health preservation and Chinese medicine dietary therapy. It includes practical skills in the preparation of health enhancing recipes and the practice of specific physical and mental training techniques aimed at enhancing health and fitness and preserving life.

##### ***Graduate Outcomes***

- explain the principles and methods of health preservation and enhancement in Chinese medicine and outline the features of a balanced lifestyle;
- explain the principles of mental cultivation and the relationship between mental state, lifestyle, disease and longevity;
- outline the principles of Chinese medicine dietary regulation and explain the use of diet in the maintenance of health;
- demonstrate the preparation of specific health food dishes and explain their functions;
- explain the use of Chinese medical dietary therapy in the treatment of common diseases;
- explain the principles of Chinese medicine health preservation and enhancement through physical and breathing exercises; and
- demonstrate specific physical and breathing exercises.

#### **A5.6 Clinical Assessment**

Clinical assessment can be divided into the following elements:

- managing patients and patient records;
- managing equipment used in treatment;
- assessing a patient, gathering clinical information and clinical decision-making;
- performing acupuncture treatment;
- dispensing prescriptions; and
- consulting patients and providing treatment.

Examination applicants are all graduates of Chinese medicine courses and are thus expected to be able to:

- demonstrate skilful use of relevant diagnostic equipment;
- record physical examination findings in a legible, accurate and orderly manner;
- conduct examination procedures in a way to minimise patient distress, embarrassment and risk of injury;
- understand the clinical significance of both negative and positive findings; and
- use Chinese medicine diagnostic methods to assess the dysfunctions of all systems within the patient, including the ability to perform specific Chinese medicine diagnostic procedures such as tongue and pulse diagnosis.

#### **A5.6.a Managing Patients and Patient Records**

##### *Synopsis*

This area of clinical competence focuses upon interacting with patients and engaging with the general management of a clinic and of the treatment rooms. This includes aspects of patient relations (e.g. greeting clients, seating clients, respecting privacy, preparing patient for treatment and respecting modesty), and aspects of recording patient details (including recording details of new clients).

##### *Graduate Outcomes*

- explain and demonstrate effective interaction with patients including greeting, seating and directing patients, and maintaining the privacy of patients;
- demonstrate the procedures involved in preparing patients for treatment including maintaining the modesty of patients;
- describe the general procedures involved in managing files including: retrieving and storing patient files, updating patient files, preserving the confidentiality of patient files;
- explain the general procedures involved in recording patient details on their files;
- demonstrate the interviewing of a new patient, to obtain general details, and the recording of the general details of a new patient; and
- explain the procedures involved in arranging appointments for patients and managing payment.

#### **A5.6.b Managing Equipment Used in Treatment**

##### *Synopsis*

A major focus of this area of clinical competence is upon hygiene in the clinic and general clinical procedures, including the preparation of the treatment room and the

handling of equipment. This covers areas such as personal hygiene (cleanliness, dress and handling equipment), preparing the treatment room (e.g. changing linen, removing waste and cleaning the floor), and preparing treatment equipment (including preparing materials for acupuncture, moxibustion and cupping).

#### ***Graduate Outcomes***

- explain the principles and procedures of personal hygiene in the clinic;
- demonstrate compliance with standards of personal hygiene and dress in the clinic;
- describe the procedures involved in the management of a treatment room;
- describe the changing of linen, the cleaning of the treatment room and the removal of used equipment following a patient;
- demonstrate the removal and proper disposal of sharps and other waste;
- describe the procedures involved in the management of treatment equipment;
- demonstrate the preparation of materials for acupuncture, moxibustion and cupping including electro-acupuncture devices; and
- demonstrate the hygienic handling of equipment and describe the proper storage of materials for acupuncture, moxibustion and cupping.

#### **A5.6.c Assessing a Patient, Gathering Clinical Information and Clinical Decision-Making**

##### ***Synopsis***

This area of clinical competence focuses upon the treatment process and interacting with patients in the treatment room, including assessing the patient, formulating a diagnosis and treatment plan, recording clinical information, and responding to client inquiries.

#### ***Graduate Outcomes***

- communicate with patients in the treatment room and elicit the patient's reasons for seeking treatment;
- respond to the patient's enquiries about Chinese medicine;
- advise clients regarding their health condition and lifestyle;
- demonstrate the procedures involved in recording diagnostic and treatment details;
- demonstrate the gathering of diagnostic information including questioning of the patient regarding their medical history, their current symptoms and signs;
- demonstrate the examination of the patient's tongue and pulse;
- demonstrate further physical examinations of the patient according to the case requirements;
- explain and justify the formulation of a diagnosis and treatment plan; and
- formulate an acupuncture and/or herbal prescription for a particular case and explain how the prescription achieves the principles of treatment.

#### **A5.6.d Performing Acupuncture Treatment**

##### ***Synopsis***

This area of clinical competence focuses upon selecting acupuncture treatments appropriate to actual cases and the performance of a range of acupuncture procedures.

### ***Graduate Outcomes***

- select specific acupuncture points and explain how they can achieve specific therapeutic outcomes;
- explain the methods of stimulating the selected points in order to achieve the stated therapeutic outcomes;
- explain and demonstrate the management of materials for acupuncture, moxibustion and related techniques;
- demonstrate the procedures involved in safe needling;
- demonstrate the hygienic handling of needles and treatment of surfaces;
- demonstrate the informing and positioning of the patient;
- demonstrate body acupuncture techniques, ear acupuncture techniques, moxibustion techniques, and cupping techniques;
- demonstrate the use of electro-acupuncture equipment and electro-acupuncture techniques;
- obtain and interpret feedback from the patient; and
- demonstrate the disposal of sharps and other waste following acupuncture treatment.

### **A5.6.e Dispensing Prescriptions**

#### ***Synopsis***

This area of clinical competence focuses upon the duties of a dispenser in an active clinic, including all aspects of management and the preparation and processing of herbs and the dispensing of prescriptions.

### ***Graduate Outcomes***

- explain the procedures involved in assisting in the management of a herbal dispensary including storage, labelling, inventory control, contamination control;
- demonstrate competence in herbal identification and herbal prescription scrutinising;
- demonstrate the processing of herbs including grinding, dry frying, char frying, honey frying;
- demonstrate the observation of hygienic procedures when preparing herbs;
- explain and demonstrate the procedures involved in the preparation of herbs for a prescription;
- explain and demonstrate the procedures involved in the dispensing of herbal prescriptions;
- demonstrate the packaging of a prescription; and
- instruct patients in the preparation and administration of herbal prescriptions.

### **A5.6.f Consulting Patients and Providing Treatment**

#### ***Synopsis***

This area of clinical competence focuses on dealing with patients, taking case histories, formulating diagnoses and treatments, obtaining advice from other practitioners, performing treatments using acupuncture, moxibustion and cupping and/or herbal medicine, recording details of treatments, advising patients, and evaluating one's own management of cases.

### ***Graduate Outcomes***

- explain and demonstrate the procedures involved in obtaining clinical information and formulating a treatment;
- interview and examine the patient to obtain diagnostic information;
- formulate and justify a diagnosis and treatment plan;
- treat patients using therapeutic methods including moxibustion, cupping, gua sha, tui na, acupuncture and herbal medicine according to the patient's needs;
- instruct and inform a patient regarding lifestyle;
- obtain and evaluate clinical advice from a practitioner;
- determine when referral is warranted; and
- evaluate one's own diagnoses, treatment approaches and communication skills.

## **A5.7 Basic and Biomedical Sciences**

### **A5.7.a Cell Biology**

#### ***Synopsis***

This area of study provides an introduction to cell biology through examination of the structure and function of the cell, transport mechanisms, protein synthesis, cell division and differentiation. The principles of cellular organisation, the roles of individual organelles within the cell, cellular metabolism and genetics, including the molecular basis of gene replication and expression, transcription and translation are examined. The role of the cell membrane and cytoskeleton is introduced, the cell cycle and the importance of cell cycle regulation in growth is examined. Cell proliferation in cancer and cell death is also examined.

### ***Graduate Outcomes***

- demonstrate an understanding of basic concepts of cell biology at the cellular and molecular levels;
- list the sub cellular organelles that make up the cell and explain their functions in relation to the organism as a whole;
- explain the roles of the cell membrane and cytoskeleton in relationship to metabolic processes including protein synthesis and the KREBs cycle;
- explain the cell cycle and associated metabolic processes of cell replication, differentiation and cell death; and
- explain the molecular basis of gene replication including the processes of expression, transcription and translation.

### **A5.7.b Biochemistry and Molecular Biology**

#### ***Synopsis***

This area of study provides an understanding of biochemical reactions in the human body. This includes the structures and functions of proteins and enzymes, the bioenergetics and metabolism of carbohydrates and lipids, the metabolism of proteins, amino acids and nucleic acids. The roles of minerals and vitamins are examined, as are the function of hormones in extracellular and intracellular communication. The structure of the genetic code and the mechanisms of gene expression and regulation, gene replication and repair are covered.

### ***Graduate Outcomes***

- explain the synthesis and functions of proteins and enzymes;
- explain how various cellular reactions utilise or produce energy, and the pathways by which carbohydrates are synthesised and degraded;
- describe the metabolism of amino acids and how this yields energy;
- explain the synthesis and functions of nucleic acids and their roles in the genetic code and protein synthesis;
- describe mechanisms of DNA organisation and replication, RNA synthesis, processing and metabolism; and
- describe the structure of hormones and explain their key roles in intercellular communication and metabolic regulation.

### **A5.7.c Anatomy**

#### ***Synopsis***

This area of study introduces basic histology and human anatomy. In histology the structure and function of the tissues is introduced. In anatomy the main systems of the body are covered including the skeletal, muscular, cardiovascular, lymphatic, respiratory, digestive, urinary, reproductive, integumentary, endocrine and nervous systems. This includes the names, forms and locations of the main structures of the human body and their physiological functions. Aspects of surface anatomy required in clinical application in Chinese medicine is emphasised, particularly the surface anatomy, including underlying structures, required to exactly identify acupuncture points. Basic microscopic anatomy is also covered.

### ***Graduate Outcomes***

- explain structure and function of tissues, glands and membranes;
- demonstrate an understanding of the terminology of topographic anatomy and the body plan;
- identify the major components of the skeletal, muscular, cardiovascular, lymphatic, respiratory, digestive, urinary, reproductive, integumentary, endocrine and nervous systems;
- explain the structure and functions of the major components of the skeletal, muscular, cardiovascular, lymphatic, respiratory, digestive, urinary, reproductive, integumentary, endocrine and nervous systems; and
- describe the surface anatomy of the body with specific reference to the location of acupuncture points and their underlying structures.

### **A5.7.d Physiology**

#### ***Synopsis***

This area of study introduces the structure and physiological functions of the various systems of the body. This includes examination of the functions of the musculo-skeletal, cardiovascular, lymphatic, respiratory, digestive, urinary, reproductive, integumentary, endocrine and nervous systems. Emphasis is on homeostatic control mechanisms in each system, the integration of the systems in the body, and common dysfunctions in these systems. Basic embryology is included.

### ***Graduate Outcomes***

- explain the structure and functions of the musculo-skeletal system and control of human movement, the processes of respiration and gas exchange, and the circulatory system and control of blood pressure;
- describe the processes of digestion, absorption, transport and elimination, and maintenance of human nutrition;
- demonstrate an understanding of hormonal and neural regulation in the body;
- demonstrate an understanding of the mechanisms of immunity;
- describe processes of metabolism and temperature regulation;
- demonstrate knowledge of the structure and function of the sense organs, the processes of olfaction, gustation, vision, hearing and balance, and the physiology of pain;
- describe the processes of reproduction, development and aging; and
- describe the urinary system and the mechanisms of fluid balance.

### **A5.7.e Microbiology**

#### ***Synopsis***

This area of study introduces the microorganisms including bacteria, fungi, viruses and protozoa, their structure, physiology, growth, control, diversity and relationships. Emphasis is on the role of microorganisms in infectious diseases, the nature of microbial infections in the different body systems, infection control, immunity and mechanisms of host resistance, common vaccines and the mode of action of antibiotics, and the development of drug resistance.

### ***Graduate Outcomes***

- describe and differentiate the common types of microorganisms;
- explain the structure, physiology and lifecycles of viruses, bacteria, fungi and protozoa;
- explain the roles of microorganisms in physiology and human disease;
- demonstrate knowledge of the relationship between microorganisms and human immunity;
- describe the principles of infection control; and
- explain the modes of action of commonly used antibiotics, vaccines and how microorganisms become resistant to drugs.

### **A5.7.f Pathology**

#### ***Synopsis***

This area of study introduces the causal factors in disease, disease processes and bodily responses. This includes the processes of cell damage and necrosis, inflammation and healing. The causes of genetically determined and acquired diseases are covered and the roles of physical agents, chemical poisons, nutritional deficiencies, infections and infestations, abnormal immunological responses, and psychological factors are identified. The common diseases of each bodily system are examined including aetiological factors, pathogenesis, diagnostic features, prognosis and sequelae.

### ***Graduate Outcomes***

- outline the classifications and common causes of human disease;
- explain the responses of the body to injury at both the cellular and tissue levels;
- describe the role of immunological responses in the disease process;
- explain the pathogenesis, symptomatology and control of viral, bacterial, fungal, protozoal and parasitic diseases;
- explain the pathogenesis of neoplasia and circulatory dysfunction;
- describe the aetiology and symptomatology of diseases due to chromosomal and genetic abnormalities;
- describe the aetiology, pathogenesis, and clinical manifestations of common diseases of the bodily systems including the cardiovascular, respiratory, gastrointestinal, hepatobiliary and pancreatic, urogenital, nervous, integumentary, haematological, and endocrine systems; and
- describe the aetiology, pathogenesis, and clinical manifestations of common disorders of the ear and eye.

### **A5.7.g Pharmacology and Toxicology**

#### **Synopsis**

This area of study provides an introduction to the mechanisms of drug action with particular reference to drugs that are commonly prescribed. This includes the selective therapeutic and prophylactic effects of western medical drugs according to principles of pharmacokinetics and pharmacodynamics; the biomedical rationale for the use of specific drugs in commonly encountered conditions; interactions between drugs and adverse reactions. In addition, it introduces principles for the safe use of drugs, the prevention and management of drug-related disorders, and the skills required to access information on drugs. It provides an overview of toxicology including the procedures for evaluating toxicity, the types of toxic effects, and the mechanisms of action of antidotes.

### ***Graduate Outcomes***

- explain the nomenclature, classifications, formulations and methods of administration of western pharmaceutical drugs;
- outline the basic principles of pharmacology and toxicology, including pharmacokinetics and pharmacodynamics;
- explain dose response relationship and factors that affect it;
- outline the main types of drug interactions;
- explain the therapeutic applications, pharmacological actions and contraindications of the main drugs in use;
- explain the types and mechanisms of adverse reactions to drugs and outline the management of drug related emergencies;
- demonstrate the use of reference materials and information services to obtain information on drugs;
- explain the concepts of margin of safety, predictable and unpredictable drug reactions, drug teratogenicity and carcinogenicity; and
- explain how to prevent and manage adverse and toxic reactions to drugs.

#### **A5.7.h Diagnosis in Western Medicine**

##### ***Synopsis***

This area of study provides an overview of the diagnostic process as applied in the contemporary biomedical setting. This includes the knowledge and skills required to conduct clinical interviews, obtain and analyse case histories, and undertake a range of physical examinations to establish a biomedical diagnosis. This includes the aims, structure, logic of the diagnostic interview, inter-personal and cultural issues, the rationale and procedures of relevant physical examinations, and the methods of recording information on patients. The issues relating to referral based on an understanding of underlying pathology is emphasised.

##### ***Graduate Outcomes***

- explain the principles of biomedical history taking, and physical examination, and its relevance in Chinese medicine practice;
- describe the roles of cultural and inter-personal factors in health care and outline the factors that need to be considered during the clinical interview;
- explain and demonstrate the conduct of a clinical interview;
- explain the processes and issues involved in specific physical examinations;
- describe the techniques and equipment used in physical examination and demonstrate specific non-invasive physical examinations;
- explain the rationale and need for referral in certain conditions; and
- describe the procedures involved in compiling data and maintaining clinical records.

#### **A5.7.i Radiology and Imaging**

##### ***Synopsis***

This area of study provides a basic knowledge of the range of radiographic and other imaging diagnostic procedures commonly used in clinical practice and how they are interpreted. The intent is to gain an overview for reference purposes. Chinese medicine practitioners cannot be expected to gain a command of these skills (which are full of interpretive perils) but rather, be in a position to recognise the plain radiographic and other imaging appearances of normal human anatomy, including normal variants that may easily be confused with pathology; the normal values and parameters for each measurement; and the significance of any deviation from normal. In addition, the contemporary application of imaging in diagnosis and the features of a radiologist's report are covered.

##### ***Graduate Outcomes***

- use appropriate descriptive terminology when referring to the findings of radiographic and other imaging procedures;
- identify on plain film radiographs, the densities corresponding to the skeletal and soft tissue structures (skull, spine, upper and lower extremities, chest and abdomen), and the major landmarks of individual osseous, articular and soft tissue structures of the body;
- identify the view a given radiograph represents;
- identify, describe and discuss the radiographic features of common anomalies and variants of radiographic anatomy;

- apply the basic principles of radiographic interpretation to a given plain film radiograph to identify an abnormal presentation;
- explain the features of commonly used radiographic reports and interpret the significance of an example report; and
- explain the clinical indications for requesting specialised radiographic procedures such as CT, MRI, ultrasound and nuclear medicine studies.

#### **A5.7.j Laboratory Diagnosis**

##### *Synopsis*

This area of study provides an overview of the knowledge and skills required to interpret the results of commonly used laboratory investigations. Laboratory investigations include haematological tests, coagulation tests, urine tests, renal function tests, liver function tests, and tests for endocrine diseases, cardiac diseases, infectious diseases, rheumatological disorders as well as tests for miscellaneous disorders.

##### *Graduate Outcomes*

- identify the commonly used laboratory tests and the purpose of these tests (including full blood examination, urinalysis, thyroid function, liver function etc);
- explain the rationale for the ordering of common laboratory tests, and how the results are integrated into the biomedical clinical diagnostic process;
- explain the structure and content of laboratory pathology reports for commonly ordered tests;
- distinguish between normal and abnormal values for commonly ordered tests;
- explain the relationship between abnormal laboratory test results and the diagnosis of various diseases; and
- explain how the results of laboratory tests can influence Chinese medicine diagnosis and treatment.

#### **A5.7.k Clinical Biomedicine**

##### *Synopsis*

This area of study focuses on the clinical aspects of contemporary biomedicine. It builds upon the study of pathology and diagnosis to examine the clinical management of common diseases. The main disorders of each system of the body are covered to provide an overview of the diagnosis and treatment. Graduates can then communicate effectively with medical practitioners and patients, and refer patients where appropriate. For each disorder, the aetiology, presenting signs and symptoms, diagnostic procedures, clinical management, and prognosis are examined.

##### *Graduate Outcomes*

- outline the classification of diseases in clinical medicine;
- explain the aetiology, development and progression of the common disorders;
- explain the differential diagnosis of the main diseases based on clinical data, including the results of radiographic and laboratory tests; and
- outline the clinical management of common disorders and understand the need for referral in certain conditions.

## **A5.8 Professional Issues**

### **A5.8.a Professional Issues ( Australian health care context and ethics)**

#### ***Synopsis***

This area of study outlines the requirements and procedures involved in establishing and maintaining a private CM practice, with an emphasis on the legal, ethical, interpersonal, financial, organisational and professional issues. This includes the responsibilities of registered practitioners in the Australian healthcare context. Practitioners should be familiar with the methods of establishing procedures that address the main aspects of each area. Chinese medicine practitioners are expected to have awareness of the type, scope and implications of ethical issues that may be encountered in practice. In addition effective communication, safe practice and ongoing professional development are important issues.

#### ***Graduate Outcomes***

- outline the processes involved in establishing a practice and explain the legal requirements relating to CM practice;
- explain the processes involved in managing a practice;
- identify and discuss ethical aspects of CM practice;
- explain the need for effective communication and outline key aspects of communicating with clients (including dealing with complaints);
- explain the roles of continuing education and professional development in maintaining a practice; and
- explain the responsibilities and obligations of a registered practitioner, and discuss the expectations the public has of registered practitioners.

## Appendix 6 List of Chinese *materia medica*

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Ai Ye	Artemisiae Argyi, Folium	艾叶
An Xi Xiang	Benzoinum	安息香
Ba Dou	Croton Tiglii, Semen	巴豆
Ba Ji Tian	Morindae Officinalis, Radix	巴戟天
Ba Jiao Wu Tong	Clerodendri Trichotomi, Folium	八角梧桐
Ba Yue Zha	Akebiae, Fructus	八月楂
Bai Bian Dou	Dolichoris Lablab, Semen	白扁豆
Bai Bu	Stemonaе, Radix	百部
Bai Dou Kou	Amomi Kravanh, Fructus	白豆蔻
Bai Fan	Alumen	白矾
Bai Fu Zi	Typhonii Gigantei, Rhizoma	白附子
Bai Guo	Ginkgo Bilobae, Semen	白果
Bai He	Lilia, Bulbus	百合
Bai Hua She She Cao	Heydyotidis Diffusae, Herba	白花蛇舌草
Bai Ji	Bletillae Striatae, Rhizoma	白芨
Bai Ji Li	Tribuli Terrestris, Fructus	白棘藜
Bai Jiang Cao	Patrinae, Herba cum Radice	败酱草
Bai Jie Zi	Sinapis, Semen	白芥子
Bai Lian	Ampelopsis, Radix	白蔹
Bai Mao Gen	Imperatae Cylindricaе, Rhizoma	白茅根
Bai Qian	Cynanchi Baiqian, Radix	白前
Bai Shao	Paeoniae Lactiflorae, Radix	白芍
Bai Shen	Ginseng, Radix	白参
Bai Tan Xiang	Santali Albi, Lignum	白檀香
Bai Tou Weng	Pulsatillae Chinensis, Radix	白头翁
Bai Wei	Cynanchi Baiwei, Radix	白薇
Bai Xian Pi	Dictamni Dasycarpi Radicis, Cortex	白鲜皮
Bai Zhi	Angelicae Dahuricae, Radix	白芷
Bai Zhu	Atractylodis Macrocephalae, Radix	白术
Bai Zi Ren	Biotae Orientalis, Semen	柏子仁
Ban Bian Lian	Lobeliae Chinensis cum Radice, Herba	半边莲
Ban Lan Gen	Isatidis seu Baphicacanthi, Radix	板兰根
Ban Mao	Mylabris	斑蝥
Ban Xia	Pinelliae Ternatae, Rhizoma	半夏
Ban Zhi Lian	Scutellariae Barbatae, Herba	半枝莲
Bei Sha Shen	Glehniae, Radix	北沙参
Bi Ba	Piperis Longi, Fructus	萆薢
Bi Cheng Qie	Cubebae, Fructus	萆澄茄
Bi Xie	Dioscoreae Hypoglaucae, Rhizoma	萆薢

Bian Dou	Dolichris Lablab, Semen	扁豆
Bian Xu	Polygoni Avicularis, Herba	篇蓄
Bie Jia	Amydae Sinensis, Carapax	鳖甲
Bing Lang	Arecae Catechu, Semen	槟榔
Bing Pian	Borneol	冰片
Bo He	Menthae Haplocalycis, Herba	薄荷
Bu Gu Zhi	Psoraleae Corylifoliae, Fructus	补骨脂
Can Sha	Bombycis Mori, Excrementum	蚕沙
Cang Er Zi	Xanthii Sibirici, Herba	苍耳子
Cang Zhu	Atractylodis, Rhizoma	苍术
Cao Dou Kou	Alpinniae Katsumadai, Semen	草豆蔻
Cao Guo	Amomi Tsao-ko, Fructus	草果
Cao Wu	Aconiti Kusnezoffii, Radix	草乌
Ce Bai Ye (Bian Bai Ye)	Biotae Orientalis, Cacumen	扁柏叶
Chai Hu	Bupleuri, Radix	柴胡
Chan Su	Bufois Secretio	蟾蜍
Chan Tui (Chan Yi) (Chong Yi)	Cicadea, Periostracum	蝉蜕(蝉衣)(虫衣)
Shi Chang Pu	Acori Graminei, Rhizome	石菖蒲
Chang Shan	Dichroae Febrifugae, Radix	常山
Che Qian Zi	Plantaginis, Semen	车前子
Chen Pi	Citri Reticulatae, Pericarpium	陈皮
Chen Sha	Cinnabaris	辰砂
Chen Xiang	Aquilariae, Lignum	沉香
Chi Shao	Paeoniae Rubrae, Radix	赤芍
Chi Shi Zhi	Halloysitum Rubrum	赤石脂
Chi Xiao Dou	Phaseoli Calcarati, Semen	赤小豆
Chong Cao	Cordyceps Sinensis	虫草
Chong Wei Zi	Leonuri Heterophylli, Semen	茺蔚子
Chou Wu Tong	Clerodendri Trichotomi	臭梧桐
Chu Gen Pi	Ailanthi Altissimae, Cortex	椿根皮
Chuan Bei Mu	Fritillariae Cirrhosae	川贝母
Chuan Jiao	Zanthoxyli Bugeani	川椒
Chuan Lian Zi	Meliae Toosendan	川楝子
Chuan Mu Xiang	Vladimiriae, Radix	川木香
Chuan Po	Magnoliae Officinalis, Cortex	川朴
Chuan Shan Jia	Manitis Pentadactylae, Squama	穿山甲
Chuan Wu	Aconiti Carmichaeli, Radix	川乌
Chuan Xin Lian	Andrographitis Paniculatae, Herba	穿心莲
Chuan Xiong	Ligustici Chuanxiong, Radix	川芎
Chuan Yu Jin	Curcuma, Tuber	川郁金
Chui Pen Cao	Sedi, Herba	垂盆草
Chun Pi	Ailanthi Altissimae, Cortex	椿皮
Ci Ji Li (Bai ji li)	Tribuli Terrestris, Fructus	刺蒺藜(白蒺藜)
Ci Shi	Magnetitum	磁石
Da Huang	Radix et Rhizoma Rhei	大黄
Da Ji	Cirsii Japonici, Herba seu Radix	大蓟

Da Li Zi	Arctii Lappae, Fructus	大力子
Da Qing Ye	Daqingye, Folium	大青叶
Da Suan	Alli Sativi, Bulbus	大蒜
Da Zao	Zizyphi Jujubae	大枣
Dan Da Yun	Cistanches Deserticolae	淡大云
Dan Dou Chi	Sojae Praeparatum, Semen	淡豆豉
Dan Nan Xing	Arisaemae cum Felle Boris, Pulvis	胆南星
Dan Shen	Salviae Miltiorrhizae, Radix	丹参
Dan Yu Gu	Sepiae seru Sepiellae, Os	淡鱼骨
Dan Zhu Ye	Lophatheri Gracilis, Herba	淡竹叶
Dang Gui	Angelicae Sinensis, Radix	当归
Dang Men Zi	Moschus, Secretio	当门子
Dang Shen	Codonopsis Pilosulae, Radix	党参
Dao Ya	Oryzae Sativae Germinantus	稻芽
Deng Xin Cao	Junci Effusi, Medulla	灯芯草
Di Fu Zi	Kochiae Scopariae, Fructus	地肤子
Di Gu Pi	Lycii Tadicis, Cortex	地骨皮
Di Long	Lumbricus	地龙
Di Yu	Sanguisorbae Officinalis, Radix	地榆
Di Jin Cao	Euphorbiae Humifusae, Herba	地锦草
Ding Xiang	Caryophylli, Flos	丁香
Dong Chong Xia Cao	Cordyceps Sinensis	冬虫夏草
Dong Gua Pi	Benincasae Hispidae, Epicarpium	冬瓜皮
Dong Kui Guo	Malvae, Fructus	冬葵果
Du Huo	Angelicae Pubescentis, Radix	独活
Du Zhong	Eucommniae Ulmoidis, Cortex	杜仲
E Jiao	Asini, Gelactinum Corii	阿胶
E Zhu	Curcuma Ezhu, Rhizoma	莪术
Fan Xie Ye	Cassia angustifolia, Folium	蕃泻叶
Fang Feng	Ledebouriellae Divaricatae, Radix	防风
Fang Ji	Stephaniae Tetrandrae, Radix	防己
Fei Zi	Torreyae Grandis, Semen	榧子
Fen Bi Xie	Dioscoreae Hypoglaucae, Rhizoma	粉萆薢
Feng Fang	Vespaee, Nidus	蜂房
Feng Guo	Liquidambaris Taiwanianae, Fructus	枫果
Feng Mi	Mel	蜂蜜
Fo Shou	Citri Sarcodactylis Fructus	佛手
Fu Hua	Inulae, Flos	覆花
Fu Ling	Poriae Cocos, Sclerotium	茯苓
Fu Pen Zi	Rubi Chingii, Fructus	覆盆子
Fu Pian	Aconiti Carmichaeli Praeparata	附片
Fu Ping	Lemnae seu Spirodelaee, Herba	浮萍
Fu Xiao Mai	Tritici Aestivi Levis Semen	浮小麦
Fu Zi (zhi)	Aconiti Lateralis Preparata Radix	制附子
Gan Cao	Glycyrrhizae, Radix	甘草
Gan Jiang	Zingiberis, Rhizoma	干姜

Gan Qi	Toxicodendri, Resina	干漆
Gan Sui	Kansui, Radix	甘遂
Gao Ben	Ligustici, Rhizoma	藁本
Gao Liang Jiang	Alpiniae Officinarum, Rhizoma	高良姜
Ge Gen	Puerariae, Radix	葛根
Ge Jie	Gecko	蛤蚧
Gou Ji	Cibotii, Rhizoma	狗脊
Gou Qi Zi	Polygonati, Rhizoma	枸杞子
Gou Teng	Uncariae cum Uncis, Ramulus	钩藤
Gu Jing Cao	Eriocauli, Flos	谷精草
Gua Lou	Oryzae Germinatus, Fructus	瓜蒌
Gua Lou Pi	Trichosanthis, Fructus	瓜蒌皮
Gua Lou Zi	Trichosanthis, Semen	瓜蒌子
Guan Mu Tong	Aristolochiae Manshuriensis, Caulis	关木通
Gui Jia	Carapax et Plastrum Testudinis	龟甲
Gui Zhi	Cinnamomi, Ramulus	桂枝
Hai Feng Teng	Piperis Kadsurae, Caulis	海风藤
Hai Jin Sha	Lygodii, Spora	海金沙
Hai Ma	Hippocampus	海马
Hai Piao Xiao	Sepiae, Endoconcha	海螵蛸
Hai Tong Pi	Erythrinae, Cortex	海桐皮
Hai Zao	Sargassum	海藻
Han Shui Shi	Calcitum	寒水石
He Huan Pi	Albiziae, Cortex	合欢皮
He Shi	Carpesii, Fructus	鹤虱
He Shou Wu	Polygoni Multiflori, Radix	何首乌
He Tao Ren	Juglandis, Semen	核桃仁
He Zi	Chebulae, Fructus	诃子
Hei Zhi Ma	Sesami Nigrum, Semen	黑芝麻
Hong Hua	Carthami, Flos	红花
Hong Teng	Sargentodoxae, Caulis	红藤
Hou Po	Magnoliae Officinalis, Cortex	厚朴
Hu Huang Lian	Picrorhizae, Rhizoma	胡黄连
Hu Jiao	Piperis, Fructus	胡椒
Hu Zhang	Polygoni Cuspidati, Rhizoma	虎杖
Hua Jiao	Zanthoxyli, Pericarpium	花椒
Hua Rui Shi	Ophicalcitum	花蕊石
Hua Shi	Talcum	滑石
Huai Hua	Sophorae, Flos	槐花
Huang Bai	Phellodendri, Cortex	黄柏
Huang Jing	Polygonati, Rhizoma	黄精
Huang Lian	Coptidis, Rhizoma	黄连
Huang Qi	Astragali, Radix	黄芪
Huang Qin	Scutellariae, Radix	黄芩
Huang Yao Zi	Dioscoreae Bulbiferae, Tuber	黄药子
Huo Ma Ren	Cannabis, Fructus	火麻仁

Huo Xiang	Pogostemonis, Herba	藿香
Ji Li	Tribuli, Fructus	蒺藜
Ji Nei Jin	Corneum Gigeriae Galli, Endothelium	鸡内金
Ji Xue Teng	Spatholobi, Caulis	鸡血藤
Jiang Can	Bombyx, Batryticatus,	僵蚕
Jiang Huang	Curcumae Longae, Rhizoma	姜黄
Jiang Xiang	Dalbergiae Odoriferae, Lignum	降香
Jie Geng	Platycodonis, Radix	桔梗
Jin Qian Cao	Lysimachiae, Herba	金钱草
Jin Yin Hua	Lonicerae, Flos	金银花
Jin Ying Zi	Rosae Laevigatae, Fructus	金樱子
Jing Da Ji	Euphorbiae Pekinensis, Radix	京大戟
Jing Jie	Schizonepetae, Herba	荆芥
Ju Hua	Chrysanthemi, Flos	菊花
Jue Ming Zi	Cassiae, Semen	决明子
Ku Lian Pi	Meliae, Cortex	苦楝皮
Ku Shen	Sophorae Flavescens, Radix	苦参
Ku Xing Ren	Armeniaca Amarum, Semen	苦杏仁
Kuan Dong Hua	Farfarae, Flos	款冬花
Kuan Jin Teng	Tinosporae Sinensis, Ramus	宽筋藤
Kun Bu	Thallus Laminariae, Thallus Eckloniae	昆布
Lai Fu Zi	Raphani, Semen	莱菔子
Lao Guan Cao	Herba Erodii, Herba Geranii	老鹳草
Lei Wan	Omphalia lapidescens	雷丸
Li Zhi He	Litchi, Semen	荔枝核
Lian Qiao	Forsythiae, Fructus	连翘
Lian Zi	Nelumbinis, Semen	莲子
Liu Huang	Sulphur	硫黄
Liu Ji Nu	Artemesia anomola, Herba	刘寄奴
Long Dan	Gentianae, Radix	龙胆
Long Gu	Draconis, Os	龙骨
Long Yan Rou	Longan, Arillus	龙眼肉
Lou Lu	Rhapontici, Radix	漏芦
Lü Dou	Phaseoli Radiati, Semen	绿豆
Lu Gan Shi	Calamine	炉甘石
Lu Gen	Longan, Arillus	芦根
Lu Hui	Aloe	芦荟
Lu Lu Tong	Liquidambaris, Fructus	路路通
Lu Rong	Cervi Pantotrichum, Cornu	鹿茸
Luo Bu Ma Ye	Apocyni Veneti, Folium	罗布麻叶
Luo Shi Teng	Trachelospermi, Caulis	络石藤
Ma Bo	Lasiosphaera seu Calvatia, Fructificatio	马勃
Ma Chi Xian	Portulacae, Herba	马齿苋
Ma Dou Ling	Aristolochiae, Fructus	马兜铃
Ma Huang	Ephedrae, Herba	麻黄
Ma Huang Gen	Ephedrae, Radix	麻黄根

Ma Qian Zi	Strychni, Semen	马钱子
Ma Zi Ren (Huo Ma Ren)	Cannabis Sativae, Semen	麻子仁(火麻仁)
Ma Ti Jue Ming	Cassiae, Semen	马蹄决明
Mai Dong	Ophiopogonis, Radix	麦冬
Mai Ya	Hordei Germinatus, Fructus	麦芽
Man Jing Zi	Viticis,Fructus	蔓荆子
Mang Xiao	Sulfas Natrii	芒硝
Mei Gui Hua	Rosae Rugosae, Flos	玫瑰花
Meng Shi	Micae seu Chloriti, Lapis	礞石
Mi Meng Hua	Buddlejae, Flos	蜜蒙花
Mian Bi Xie	Dioscoreae Septemlobae, Rhizoma	绵萆薢
Mian Ma Guan Zhong	Dryopteris Crassirhizomatis, Rhizoma	绵马贯众
Mo Han Lian	Ecliptae, Herba	墨旱莲
Mo Yao	Myrrha	没药
Mu Dan Pi	Moutan, Cortex	牡丹皮
Mu Gua	Chaenomelis, Fructus	木瓜
Mu Li	Ostreae, Concha	牡蛎
Mu Xiang	Aucklandiae, Radix	木香
Mu Zei	Equiseti Hiemalis, Herba	木贼
Nan Gua Zi	Cucurbitae Moschatae, Semen	南瓜子
Nan He shi	Carpesii seu Daucusi, Fructus	南鹤虱
Nan Sha Shen	Adenophorae, Radix	南沙参
Nan Shan Zha	Crataegi, Fructus	南山楂
Ji Nei Jin	Corneum Gigerriae Galli, Endothelium	鸡内金
Ning Shui Shi	Calcitum	凝水石
Niu Bang Zi	Arctii,Fructus	牛蒡子
Niu Huang	Bovis, Calculus	牛黄
Niu Xi	Achyranthis Bidentatae, Radix	牛膝
Niu Zi	Arctii Lappae, Fructus	牛子
Nu Zhen Zi	Ligustri Lucidi, Fructus	女贞子
Nuo Dao Gen Xu	Oryzae Glutinosae	糯稻根须
Ou Jie	Nelumbinis Nuciferae Rhizomatis, Nodus	藕节
Pang Da Hai	Sterculiae Lychnophorae, Semen	胖大海
Pao Jiang	Zingiberis Preparatum, Rhizoma	炮姜
Pao Shen	Adenophorae seu Glehniae, Radix	炮参
Pei Lan	Eupatorii, Herba	佩兰
Peng Sha	Borax	硼砂
Pi Pa Ye	Eriobotryae, Folium	枇杷叶
Pian Jiang Huang	Curcumae Longae, Rhizoma	片姜黄
Po Gu Zhi	Psoraleae Corylifoliae, Fructus	破故脂
Pu Gong Ying	Taraxaci, Herba	蒲公英
Pu Huang	Typhae, Pollen	蒲黄
Qi Lin Jie	Draconis, Sanguis	麒麟竭
Qi She	Agkistrodon	蕲蛇
Qian Cao	Rubiae, Radix	茜草
Qian Dan	Oxide, Lead	铅丹

Qian Gen	Rubiae Cordifoliae, Radix	茜根
Qian Hu	Peucedani, Radix	前胡
Qian Jin Zi	Euphorbiae, Semen	千斤子
Qian Nian Jian	Homalomenae, Rhizoma	千年健
Qian Niu Zi	Pharbitidis, Semen	牵牛子
Qian Shi	Semen Euryales	芡实
Qiang Huo	Notopterygii, Rhizoma et Radix	羌活
Qin Jiao	Gentianae Macrophyllae, Radix	秦艽
Qin Pi	Fraxini, Cortex	秦皮
Qing Dai	Naturalis, Indigo	青黛
Qing Fen	Calomelas	轻粉
Qing Hao	Artemisiae Annuae, Herba	青蒿
Qing Pi	Citri Reticulatae Viride, Pericarpium	青皮
Qing Xiang Zi	Celosiae, Semen	青葙子
Qu Mai	Dianthi, Herba	瞿麦
Quan Shen	Polygoni Bistortae, Rhizoma	拳参
Quan Xie	Buthus Martensi	全蝎
Ren Dong Teng	Lonicerae Japonicae, Flos	忍冬藤
Ren Gong Niu Huang	Bovis, Calculus Artificialis	人工牛黄
Ren Shen	Ginseng, Radix	人参
Rou Cong Rong	Cistanches, Herba	肉苁蓉
Rou Dou Kou	Myristicae, Semen	肉豆蔻
Rou Gui	Cinnamomi Cortex	肉桂
Ru Xiang	Olibanum, Gummi	乳香
San Leng	Sparganii, Rhizoma	三棱
San Qi	Notoginseng, Radix	三七
Sang Bai Pi	Mori, Cortex	桑白皮
Sang Ji Sheng	Taxilli, Herba	桑寄生
Sang Piao Xiao	Mantis, Ootheca	桑螵蛸
Sang Shen	Mori, Fructus	桑椹
Sang Ye	Mori, Folium	桑叶
Sang Zhi	Mori, Ramulus	桑枝
Sha Ren	Amomi, Fructus	砂仁
Sha Yuan Zi	Astragali Complanati, Semen	沙苑子
Shan Ci Gu	Pseudobulbus Cremastrae seu Pleiones	山慈菇
Shan Dou Gen	Sophorae Tonkinensis, Radix	山豆根
Shan Yang Jiao	Naemorhedis, Cornu	山羊角
Shan Yao	Dioscoreae, Rhizoma	山药
Shan Zha	Crataegi, Fructus	山楂
Shan Zhu Yu	Corni Officinalis, Fructus	山茱萸
Shang Lu	Phytolaccae, Radix	商陆
She Chuang Zi	Cnidii, Fructus	蛇床子
She Gan	Belamcandae, Rhizoma	射干
She Tui	Serpentis, Exuviae	蛇蜕
She Xiang	Moschus, Secretio	麝香
Shen Jin Cao	Common Clubmoss Herb	伸筋草

Shen Qu	Fermentata, Massa	神曲
Sheng Di Huang	Rehmanniae, Radix	生地黃
Sheng Jiang	Zingiberis Recens, Rhizoma	生姜
Sheng Ma	Cimicifugae, Rhizoma	升麻
Shi Chang Pu	Acori Talarinowii, Rhizoma	石菖蒲
Shi Di	Kaki, Calyx	柿蒂
Shi Gao	Gypsum Fibrosum	石膏
Shi Hu	Dendrobii, Herba	石斛
Shi Jue Ming	Haliotidis, Concha	石决明
Shi Jun Zi	Quisqualis, Fructus	使君子
Shi Liu Pi	Granati, Pericarpium	石榴皮
Shi Wei	Pyrrosiae, Folium	石葶
Shou Wu Teng	Polygoni Multiflori, Caulis	首乌藤
Shu Di Huang	Rehmanniae Preparata, Radix	熟地黃
Shui Niu Jiao	Bubali, Cornu	水牛角
Shui Zhi	Hirudo	水蛭
Si Gua Luo	Retinervus Luffae, Fructus	丝瓜络
Song Jie	Pini Nodi, Lignum	松节
Su He Xiang	Styrax	苏合香
Su Mu	Sappan, Lignum	苏木
Suan Zao Ren	Ziziphi Spinosa, Semen	酸枣仁
Suo Yang	Cynomorii, Herba	锁阳
Tai Zi Shen	Pseudostellariae, Radix	太子参
Tan Xiang	Santali Albi, Lignum	檀香
Tao Ren	Persicae, Semen	桃仁
Tian Dong	Asparagi, Radix	天冬
Tian Hua Fen	Trichosanthis, Radix	天花粉
Tian Ma	Gastrodiae, Rhizoma	天麻
Tian Nan Xing	Arisaematis, Rhizoma	天南星
Tian Zhu Huang	Silicea Bambusae, Concretio	天竹簧
Ting Li Zi	Lepidii, Semen Descurainiae, Semen	葶苈子
Tong Cao	Tetrapanacis, Medulla	通草
Tu Bie Chong	Eupolyphaga seu Steleophaga	土鳖虫
Tu Fu Ling	Smilacis Glabrae, Rhizoma	土茯苓
Tu Si Zi	Cuscutae, Semen	菟丝子
Wang Bu Liu Xing Zi	Vaccariae, Semen	王不留行子
Wei Ling Xian	Clematidis, Radix	威灵仙
Wu Bei Zi	Rhois Chinensis, Galla	五倍子
Wu Gong	Scolopendra	蜈蚣
Wu Jia Pi	Acanthopanax, Cortex	五加皮
Wu Ling Zhi	Trogopteri seu Pteromi, Excrementum	五灵脂
Wu Mei	Mume, Fructus	乌梅
Wu Shao She	Zaocys	乌梢蛇
Wu Wei Zi	Schisandrae Chinensis, Fructus	五味子
Wu Yao	Linderae, Radix	乌药
Wu Yi	Ulmi Macrocarpi, Praeparatio Fructus	芫夷

Wu Zhu Yu	Evodiae, Fructus	吴茱萸
Xi Xian Cao	Siegesbeckiae, Herba	豨薟草
Xi Xin	Asari, Herba	细辛
Xi Yang Shen	Panacis Quinquefolii, Radix	西洋参
Xia Ku Cao	Prunellae, Spica	夏枯草
Xian He Cao	Agrimoniae, Herba	仙鹤草
Xian Mao	Curculiginis, Rhizoma	仙茅
Xiang Fu	Cyperis, Rhizoma	香附
Xiang Ru	Moslae, Herba	香薷
Xiao Hui Xiang	Foeniculi, Fructus	小茴香
Xiao Ji	Cirsii, Herba	小蓟
Xie Bai	Allii Macrostemonis, Bulbus	薤白
Xin Yi	Magnoliae, Flos	辛夷
Xiong Huang	Realgar	雄黄
Xu Chang Qing	Cynanchi Paniculati, Radix	徐常卿
Xu Duan	Dipsaci, Radix	续断
Xuan Fu Hua	Inulae, Flos	旋覆花
Xuan Shen	Scrophulariae, Radix	玄参
Xue Jie	Draconis, Sanguis	血竭
Xue Yu Tan	Carbonisatus, Crinis	血余炭
Ya Dan Zi	Brucae, Fructus	鸭胆子
Ya Zhi Cao	Commelinae, Herba	鸭跖草
Yan Hu Suo	Corydalis, Rhizoma	延胡索
Ye Ju Hua	Chrysanthemi Indici, Flos	野菊花
Yi Mu Cao	Leonuri, Herba	益母草
Yi Tang	Granorum, Saccharum	饴糖
Yi Yi Ren	Coicis, Semen	薏苡仁
Yi Zhi Ren	Alpiniae Oxyphyllae, Fructus	益智仁
Yin Chai Hu	Stellariae, Radix	银柴胡
Yin Chen	Artemisiae Scopariae, Herba	茵陈
Yin Yang Huo	Epimedii, Herba	淫羊藿
Yu Jin	Curcuma, Radix	郁金
Yu Li Ren	Pruni, Semen	郁李仁
Yu Xing Cao	Heartleaf Houttuynia, Herba	鱼腥草
Yu Yu Liang	Limonitum	禹余粮
Yu Zhu	Polygonati Odorati, Rhizoma	玉竹
Yuan Hua	Genkwa, Flos	芫花
Yuan Zhi	Polygalae, Radix	远志
Yue Yue Hong	Rosae Chinensis, Flos et Fructus	月月红
Zao Jiao	Gleditsiae Sinensis, Fructus	皂角
Zao Xin Tu	Terra Flava Usta	灶心土
Ze Lan	Lycopi, Herba	泽兰
Ze Xie	Alismatis, Rhizoma	泽泻
Zhang Nao	Camphora	樟脑
Zhe Chong	Eupolyphaga seu Opisthoplatia	蛭虫
Zhe Bei Mu	Fritillariae Thunbergii, Bulbos	浙贝母

Zhe Shi	Haematium	赭石
Zhen Zhu	Margarita	珍珠
Zhen Zhu Mu	Margaritaferae, Concha	珍珠母
Zhi Mu	Anemarrhenae, Asphodeloidis, Rhizoma	知母
Zhi Shi	Aurantii Immaturus, Fructus	枳实
Zhi Zi	Gardeniae, Fructus	栀子
Zhu Ling	Polyporus	猪苓
Zhu Ru	Bambusae in Taeniam, Caulis	竹茹
Zhu Sha	Cinnabaris	朱砂
Zi Cao	Arnebiae, Radix Lithospermi, Radix	紫草
Zi Hua Di Ding	Violae, Herba	紫花地丁
Zi Ran Tong	Pyritum	自然铜
Zi Shi Ying	Fluoritum	紫石英
Zi Su Ye	Perillae, Folium	紫苏叶
Zi Su Zi	Perillae, Fructus	紫苏子
Zi Wan	Asteris, Radix	紫菀
Zi Zhu	Callicarpae, Folium	紫珠
Zong Lu	Trachycarpi, Petiolus	棕榈

Note: The same herb may be listed under a number of alternative Chinese names.

## Appendix 7 List of commonly used formula

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This herbal formula list applies to the basic study of herbal formulas, note that the exam may include specialised formulas that apply to the clinical disciplines e.g. gynaecology, paediatrics etc.

Ba Zhen Tang	八珍汤
Ba Zheng San	八正散
Bai He Gu Jin Tang	百合固金汤
Bai Hu Tang	白虎汤
Bai Tou Wen Tang	白头翁汤
Ban Xia Bai Zhu Tian Ma Tang	半夏白术天麻汤
Ban Xia Hou Po Tang	半夏厚朴汤
Ban Xia Xie Xin Tang	半夏泻心汤
Bao He Wan	保和丸
Bei Mu Gua Lou San	贝母瓜蒌散
Bi Xie Fen Qing Yin	萆薢分清饮
Bu Yang Huan Wu Tang	补阳还五汤
Bu Zhong Yi Qi Tang	补中益气汤
Chai Ge Jie Ji Tang	柴葛解肌汤
Chai Hu Shu Gan San	柴胡疏肝散
Chuan Xiong Cha Tiao San	川芎茶调散
Da Qin Jiao Tang	大秦艽汤
Da Bu Yin Wan	大补阴丸
Da Chai Hu Tang	大柴胡汤
Da Cheng Qi Tang	大承气汤
Da Ding Feng Zhu	大定风珠
Da Huang Fu Zi Tang	大黄附子汤
Da Huang Mu Dan Tang	大黄牡丹汤
Da Jian Zhong Tang	大建中汤
Dang Gui Bu Xue Tang	当归补血汤
Dang Gui Si Ni Tang	当归四逆汤
Dao Chi San	导赤散
Di Huang Yin Zi	地黄饮子
Ding Chuan Tang	定喘汤
Ding Xiang Shi Di Tang	丁香柿蒂汤
Duo Huo Ji Sheng Tang	独活寄生汤
Er Chen Tang	二陈汤
Er Miao san	二妙散
Er Zhi Wan	二至丸
Fang Feng Tong Sheng San	防风通圣散
Fang Ji Huang Qi Tang	防己黄芪汤
Gan Lu Xiao Du Dan	甘露消毒丹
Ge Gen Huang Qin Huang Lian Tang	葛根黄芩黄连汤

Gu Jing Wan	固精丸
Gua lou Xie Bai Bai Jiu Tang	瓜蒌薤白白酒汤
Gui Pi Tang	归脾汤
Gui Zhi Fu Ling Wan	桂枝茯苓丸
Gui Zhi Tang	桂枝汤
Hao Qin Qing Dan Tang	蒿芩清胆汤
Huai Hua Tang	槐花汤
Huang Lian Jie Du Tang	黄连解毒汤
Huang Tu Tang	黄土汤
Hui Yang Jiu Ji Tang	回阳救急汤
Huo Luo Xiao Ling Dan	活络效灵丹
Huo Xiang Zhen Qi Tang	藿香正气汤
Jia Jian Wei Rui Tang	加减薇蕤汤
Jian Pi Wan	健脾丸
Jin Ling Zi San	金铃子散
Jin Suo Gu Jing Wan	金锁固精丸
Jiu Wei Qiang Huo Tang	九味羌活汤
Ju Pi Zhu Ru Tang	橘皮竹茹汤
Ke Xue Tang	咳血汤
Li Zhong Tang	理中汤
Lian Po Yin	连朴饮
Liang Fu Wan	良附丸
Liang Ge San	凉膈散
Ling Gan Wu Wei Jiang Xin Tang	苓甘五味姜杏汤
Ling Gui Zhu Gan Tang	苓桂术甘汤
Ling Jiao Gou Teng Tang	羚角勾藤汤
Liu Wei Di Huang Tang	六味地黄丸
Long Dan Xie Gan Tang	龙胆泻肝汤
Ma Huang Tang	麻黄汤
Ma Xing Shi Gan Tang	麻杏石甘汤
Ma Zi Ren Wan	麻子仁丸
Mai Men Dong Tang	麦门冬汤
Mu Li San	牡砺散
Nuan Gan Jian	暖肝煎
Pu Ji Xiao Du Yin	普济消毒饮
Qiang Huo Sheng Shi Tang	羌活胜湿汤
Qing Gu San	清骨散
Qing Hao Bie Jia Tang	青蒿鳖甲汤
Qing Qi Hua Tan Wan	清气化痰丸
Qing Wei San	清胃散
Qing Wen Bai Du Yin	清瘟败毒饮
Qing Ying Tang	清营汤
Ren Shen Bai Du San	人参败毒汤
San Ren Tang	三仁汤
San Zi Yang Qin Tang	三子养亲汤
Sang Ju Yin	桑菊饮

Sang Piao Xiao San	桑螵蛸散
Sang Xing Tang	桑杏汤
Sha Shen Mai Dong Tang	沙参麦冬汤
Shen Ling Bai Zhu San	参苓白术散
Shen Qi Tang	参芪汤
Sheng Hua Tang	生化汤
Sheng Ma Ge Gen Tang	升麻葛根汤
Sheng Mai San	生脉散
Shi Pi Tang	实脾散
Shi Xiao San	失笑散
Shi Zao Tang	十枣汤
Si Jun Zi Tang	四君子汤
Si Ni San	四逆散
Si Shen Wan	四神丸
Si Wu Tang	四物汤
Su Zi Jiang Qi Tang	苏子降气汤
Suan Zao Ren Tang	酸枣仁汤
Tao He Cheng Qi Tang	桃核承气汤
Tian Ma Gou Teng Tang	天麻钩藤汤
Tian Wan Bu Xin Dan	天王补心丹
Tong Xie Yao Fang	痛泻要方
Wan Dai Tang	完带汤
Wen Pi Tang	温脾汤
Wei Jing Tang	苇茎汤
Wen Dan Tang	温胆汤
Wen Jing Tang	温经汤
Wu Ling San	五苓散
Wu Mei Wan	乌梅汤
Wu Wei Xiao Du Yin	五味消毒饮
Wu Zhu Yu Tang	吴茱萸汤
Xi Jiao Di Huang Tang	犀角地黄汤
Xian Fang Huo Ming Tang	仙方活命饮
Xiang Ru San	香薷散
Xiao Chai Hu Tang	小柴胡汤
Xiao Feng Tang	消风散
Xiao Ji Yin Zi	小蓟饮子
Xiao Jian Zhong Tang	小建中汤
Xiao Qing Long Tang	小青龙汤
Xiao Xian Xiong Tang	小陷胸汤
Xiao Yao San	逍遥散
Xie Bai San	泻白散
Xin Jia Huang Long Tang	新加黄龙汤
Xing Su Wan	杏苏散
Xuan Fu Dai Zhe Tang	旋覆代赭汤
Xue Fu Zhu Yu Tang	血府逐瘀汤
Yang He Tang	阳和汤

Yang Yin Qing Fei Tang	养阴清肺汤
Yi Guan Jian	一贯煎
Yin Chen Hao Tang	茵陈蒿汤
Yin Qiao San	银翘散
You Gui Wan	右归丸
Yu Nu Jian	玉女煎
Yu Ping Feng San	玉屏风散
Yue Ju Wan	越鞠丸
Zeng Ye Tang	增液汤
Zhen Gan Xi Feng Tang	镇肝熄风汤
Zhen Ren Yang Zang Tang	真人养脏汤
Zhen Wu Tang	真武汤
Zhi Gan Cao Tang	炙甘草汤
Zhi Shi Dao Zhi Wan	枳实导滞丸
Zhi Shi Xiao Pi Tang	枳实消痞汤
Zhi Sou San	止嗽散
Zhu Ling Tang	猪苓汤
Zhu Sha An Shen Wan	朱砂安神丸
Zhu Ye Shi Gao Tang	竹叶石膏汤
Zuo Gui Wan	左归丸
Zuo Jin Wan	左金丸

## Appendix 8 Recommended reading texts

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The following texts are recommended by the Chinese Medicine Registration CMR Board of Victoria for your preparation for examinations. While the examination content and questions will not necessarily be drawn from these texts, these books are recommended as being useful for people wishing to revise these subjects. In order to ensure consistency in the use of the terminologies, one dictionary is recommended for the translations of the terminologies.

### Dictionary

Wiseman N, *English-Chinese Chinese-English dictionary of Chinese medicine*, Hunan Keji Chubance (Hunan Press of Science and Technology), Changsha, China, 1995.

### Basic Theory

Deng TT, *Practical diagnosis in traditional Chinese medicine*, Churchill Livingstone, Edinburgh, 1999.

Maciocia G, *Foundations of Chinese medicine: a comprehensive text for acupuncturists & herbalists*, Churchill Livingstone, Edinburgh, 1989.

Shuai X-Z (ed.), *Fundamentals of traditional Chinese medicine*, Foreign Languages Press, Beijing, 1992.

### Acupuncture

(Qiu) Chiu ML (ed.), *Chinese acupuncture and moxibustion*, Churchill Livingstone, Edinburgh, 1993.

Deadman P & Al-Khafaji M, *A manual of acupuncture*, Journal of Chinese Medicine Publications, London, 1998.

### Pharmacology and Medicinal Formulae in Chinese Medicine

Bensky D & Barolet R, *Chinese herbal medicine: formulas and strategies*, Eastland Press, Seattle, 1990.

Bensky D & Clavey S & Schrojer E, *Chinese herbal medicine: materia medica*, 3rd edn, Eastland Press, Seattle, 2004.

Chen SY & Li F, *A clinical guide to Chinese herbs and formulae*, Churchill Livingstone, Edinburgh, 1993.

Sionneau P, *Pao zhi – An introduction to the use of processed Chinese medicinals*, Blue Poppy Press, Boulder, Colorado, 1995.

Sionneau P, *Dui yao – The art of combining Chinese medicinals*, Blue Poppy Press, Boulder, Colorado, 1997.

State Administration of Traditional Chinese Medicine, *Advanced textbook of TCM & pharmacology*, vol. 2, New World Press, Beijing, 1995.

### **Classic Literature**

Mitchell C, Ye F & Wiseman N, *Shang han lun, on cold damage: translations and commentaries*, Paradigm Publications, Brookline MA, 1999.

Liu GH, *Warm diseases: A clinical guide*, Eastland Press, Seattle, 2004.

Mi HF, *The systematic classic of acupuncture and moxibustion: Zhen jiu jia yi jing*, trans. Yang SZ & Chase C, Blue Poppy Press, Boulder CO, 2004.

Unschuld PU, *Nan-ching the classic of difficult issues*, University of California Press, Berkeley, 1986.

Ni MS, *The yellow emperor's classic of medicine*, Shambala Publications, Boston, 1995.

Wu JN, *Ling shu or the spiritual pivot*, The Taoist Center, Washington DC, 1993.

### **Clinical Chinese Medicine**

Chen SC, *Gynaecology according to traditional Chinese medicine*, Vantage Press, New York, 1993.

Flaws B, *A handbook of TCM pediatrics: a practitioner's guide to the care and treatment of common childhood diseases*, Blue Poppy Press, Boulder CO, 1997.

Hou J, *Traditional Chinese treatment for diseases of orthopaedics and traumatology*, Academy Press, Beijing, 1997.

Maciocia G, *Obstetrics and gynecology in Chinese medicine*, Churchill Livingstone, New York, 1998.

Maciocia G, *The practice of Chinese medicine: the treatment of diseases with acupuncture and Chinese herbs*, Churchill Livingstone, New York, 1997.

MacLean W & Lyttleton J, *Clinical handbook of internal medicine*, vol. 1, UWS Macarthur, Sydney, 1998.

MacLean W & Lyttleton J, *Clinical handbook of internal medicine*, vol. 2, UWS Macarthur, Sydney, 2002.

Shen DH, Wu XS & Wang N, *Manual of dermatology in Chinese medicine*, Eastland Press, Seattle, 1995.

Xu Y, *Dermatology in traditional Chinese medicine*, trans. Yi S, Donica Publishing, St. Albans, Hertfordshire, 2004.

Zhou ZY & Jin HD, *Clinical manual of Chinese herbal medicine and acupuncture*, Churchill Livingstone, New York, 1997.

### **Biomedical and Diagnostic Sciences**

#### **Anatomy**

Moore KL, *Clinically oriented anatomy*, 4th edn, Lippincott Williams & Wilkins, Baltimore, 1999.

Moore KL & Agur AMR, *Essential clinical anatomy*, Lippincott Williams & Wilkins, Philadelphia, 2002.

### **Physiology**

Guyton AC & Hall JE, *Textbook of medical physiology*, 11th edn, WB Saunders, Philadelphia, 2002.

### **Microbiology**

Madigan MT, Martinko JM & Parker J, *Brock biology of microorganisms*, 10th edn, Prentice-Hall, Upper Saddle, NJ, 2003.

### **Pathology**

Vardaxis NJ, *Pathology for the health sciences*, 1st edn, MacMillan Australia, Melbourne, 1999 (1994).

Wheate PR, Burkitt HG, Stevens A & Lowe JS, *Basic histopathology*, 3rd edn, Churchill Livingstone, Edinburgh, 1996.

### **Pharmacology**

Galbraith A, Bullock S & Manias M, *Fundamentals of pharmacology: a text for nurses and allied health professionals*, 4th edn, Addison-Wesley Publishing Company, Melbourne, 2004.

Rang HP, Dale MM & Ritter JM, *Pharmacology*, 4th edn, Churchill Livingstone, 1999.

### **Diagnosis in Western Medicine**

Bickley LS, *Bates' guide to physical examination and history taking*, 7th edn, Lippincott Williams & Wilkins, Philadelphia, 1999.

### **Clinical Western Medicine**

Axford J, *Medicine*, Blackwell Science Ltd, Oxford, 1996.

Beers M & Berkow R (eds), *The Merck manual of diagnosis and therapy*, 17th edn, Merck Research Laboratories, Whitehouse Station, NJ, 1999.

### **Australian Health Care Context and Ethics**

Duckett SJ, *The Australian health care system*, 3rd edn, Oxford University Press, Melbourne, 2007.

Victorian *Health Professions Registration Act 2005*

Victorian *Health Records Act 2001*

Relevant policies and guidelines published by the Chinese Medicine Registration Board of Victoria (available on the CMR Board website) including but not limited to:

- *Code of Ethics*
- *Guidelines on the Practice of Chinese Herbal Medicine*
- *Guidelines on Advertising*

### **Clinical Examination**

Relevant policies and guidelines published by the Chinese Medicine Registration Board of Victoria (available on the CMR Board website) including but not limited to:

- *Guidelines on Infection Prevention and Control for Acupuncturists*
- *Guidelines on the Practice of Chinese Herbal Medicine*
- *Guidelines on Patient Records*

## Appendix 9 Aseptic technique

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A major focus of this area is to ensure that practitioners maintain high standards of infection control within the frameworks of national and state regulations and guidelines.

Procedures used are designed to prevent the introduction of, or cross contamination by, microorganisms.

Candidates should be familiar with the CMR Board's *Guidelines on Infection Prevention and Control for Acupuncturists*.

- Chinese Medicine Registration CMR Board of Victoria, Guidelines on Infection Prevention and Control for Acupuncturists, March 2009 (available at <http://www.cmr.vic.gov.au/information/p&c/practiceconduct/gipca.html>)

### Areas of Knowledge and Skill

Practitioners are required to have knowledge and skills in the following areas:

- manipulation of sterile instruments in a manner designed to maintain sterility;
- standard precautions to minimise the risk of transmission of infectious agents whether they be in the body fluid, skin or blood borne;
- hand washing (personal hygiene, hand washing procedures, detergent dispensers, disinfectant hand washes, using hand's free sinks and drying hands);
- preparation of patient's skin including preparation for skin penetration, waiting time after swabbing and preparation for non-invasive devices;
- hygienic procedures with instruments for skin penetration (e.g. pre-sterilised needles, insertion tubes, sterile swabs and sterile gloves);
- special precautions in relation to pre-sterilised single-use and sterile re-usable devices, and handling of used acupuncture needles and other sharps;
- hygienic procedures after puncturing the skin;
- other hygiene factors (including skin lesions, smoking, eating and clothing)
- cleaning and sterilisation procedures; and
- safe and hygienic handling of herbs.

## Appendix 10 Initial patient consultation form

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<b>Today's Date:</b>			
<b>Name:</b>		<b>Gender:</b>	
<b>Address:</b>			
<b>Phone:</b>	<b>Home:</b>	<b>Work:</b>	<b>Mobile:</b>
<b>Emergency Contact Person:</b>	<b>Name:</b>	<b>Phone:</b>	
<b>Marital /Social/ Family Status:</b>			
<b>Nationality:</b>			
<b>Language/s Spoken</b>			
<b>Occupation:</b>			
<b>Work Place:</b>		<b>Full/Part Time</b>	
<b>Work Hazards:</b>			
<b>Private Health Insurance:</b>	<b>Yes / No</b>	<b>Name:</b>	
<b>Workcover:</b>	<b>Yes / No</b>	<b>Claim No:</b>	
<b>TAC</b>	<b>Yes / No</b>	<b>Claim No:</b>	
<b>Referred by</b>			
<b>Family Doctor:</b>	<b>Name:</b>		<b>Contact number:</b>
<b>Previous &amp; Current Health Issues and Treatments (all forms of health care):</b>			
<b>History of Allergies:</b>			

**Relevant Family History:**

**Presenting Complaint (Main reason for coming today)**

**Other Treatment for this Complaint?**

**Other Concerns (Anything else bothering you?)**

**Current Medications (Prescribed, Supplements, Pain killers, Vitamins, Minerals, Herbs etc.**

**Smoking history:**

**Patient Completes to Here**

## Chinese Medicine Systematic Classifying

### Gastro-Intestinal System

**Appetite:**

**Thirst & Taste:**

**Stools:**

### Genito-Urinary System

### Gynaecological System and Obstetric History

**Pregnancies**

**Births**

**Terminations**

**Miscarriages**

**Menses**

**Other:**

### Musculo-Skeletal System

**Pain:**

**Other:**

**Respiratory System**

**Other**

Sleep:

**Examination**

Palpation:

Observation:

Listening & Smelling:

Pulse:

Tongue:



<b>Chinese Medicine Diagnosis:</b>
<b>Chinese Medicine Treatment Principle:</b>
<b>Chinese Medicine Treatment Strategy:</b>
<b>Acupuncture Prescription:</b>
<b>Chinese Herbal Prescription:</b>
<b>Recommended Treatment Follow-Up and Frequency:</b>
<b>Dietary and Other Advice:</b>

When you attend the clinical examination, you will be provided with this form.

Candidates who elect to use their own 'Initial Patient Consultation Form' may do so but it must comply with the Board's expectations. Candidates who bring their own form must also bring a spare blank form for the examiners to look at.