

CLINICAL STUDENT HANDBOOK

Acupuncture Program
2009

*With the drawing of this Love
and the voice of this Calling
We shall not cease from exploration
And the end of all our exploring
Will be to arrive where we started
And know the place for the first time.
—T.S. Eliot (1942)
Little Gidding, V*

Students, faculty, and staff members are responsible for the information and policies presented in this handbook, the academic catalog, and for any information distributed to students from the administrative staff via e-mail and the intranet. Information presented here is effective immediately and supersedes previously published student handbooks. Occasionally, policy revisions will be updated on the website. All students must conform to current policies at all times.

Tai Sophia Institute reserves the right to change without notice any programs, policies, requirements, dates, fees, and/or regulations published in this handbook.

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Silver Spring Natural Care Centre at The Summit Building

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301/588-8279

CHI Sites

Penn North Neighborhood Center
2410 Pennsylvania Avenue
Baltimore, MD 21217
410/728-2080

Recovery in Community

31 N. Fulton Street
Baltimore, MD 21223
410/362-1400

Howard Community College

Wellness Center, L230
10901 Little Patuxent Parkway
Columbia, MD 21044
410/772-4640

Healthcare for the Homeless

111 Park Avenue
Baltimore, MD 21201
410/837-5533

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Letter from the Clinic Director

Dear Students,

On behalf of the faculty, staff, and students that work in Tai Sophia Institute's clinics of Baltimore, Laurel, Silver Spring, and the CHI sites, welcome to your clinical experience. We honor your commitment to the study of acupuncture, which has brought you to this point in your training, and we look forward to being your mentors, along with your supervisors, as you begin your practice.

The clinical program at the Institute is your training ground for practicing clinical skills and becoming a practitioner. It also provides you with the opportunity to learn the business and administrative skills necessary to develop and maintain an acupuncture practice. Issues and concerns may arise around these aspects of practice as you journey through the clinical portion of the program. Your commitment to acupuncture and training as a practitioner will determine the way in which you deal with these concerns and with other students in a "group practice" environment. Each of you is on a unique journey and will find your own challenges as you focus on your patients and practice. This handbook is designed to assist you in meeting these challenges. Graduates who cultivate their patients and practice during the clinical program will succeed in private practice.

Tai Sophia Institute does not provide patients for you to treat. Building your own practice is a significant part of the clinical work, and to some students, it is a particularly challenging aspect. Please use your core group and class time to bring up issues related to recruiting patients. Practice building is an area that often brings some students head on with their own learning edges as practitioners. The support of other students and faculty can help you meet the challenges you may confront in this part of the program.

As well as building your practice, you will, of course, be sharpening your skills and capacities as a practitioner. This is your opportunity to bring all of who you are into the clinic and to put the skills and knowledge that you have learned since beginning the program into use as you treat patients. You will find that you know more and less than you thought. Use the time well, relying on the support you have available to you from faculty, senior students, and your classmates. Our alumni say this support was their most valuable resource.

Faculty supervision of your work in the clinic will be more directive at the beginning, and will decrease as you gain experience. Each clinical site has a team of faculty members available to support you. Each clinic will have a senior faculty Core Group Leader and an assistant or two, depending upon how busy the clinic is. All supervisors are licensed acupuncturists. Remember that as far as the law is concerned, you are treating under that supervisor's license.

Tai Sophia Institute has an extremely high rate of graduates who earn their living practicing acupuncture, a much higher rate than most graduate schools. A large part of that is due, we believe, to the design of our clinical program. The program offers you the opportunity to deal with many of the personal challenges of being a practitioner while being supported by classmates and faculty. Please take advantage of all that is available to you during your time in the clinic.

As well as being a guide to the clinic, this handbook serves to steer you through the completion process in the latter part of Level III. We hope this handbook will serve as a useful guide to you as you complete the requirements of the Faculty Supervised Student Clinic. Many students, faculty, and staff have worked to create this handbook, as they have worked to create the design of the clinical program over the past 30 years. Please let us know if you have any suggestions as to how to make this handbook more useful to you.

At Tai Sophia Institute we are fortunate to have great teachers and to be alive together at the same time as our founders, Dianne Connelly and Bob Duggan. If not for their disciplined practice of the distinctions they share so generously in SOPHIA, there would not even be a Faculty Supervised Student Clinic. Thanks to them we are here creating our "watering hole" for the sake of the patients we treat in the clinic and those who await our practice after graduation.

Welcome to the clinic.



Marla Peoples, M.Ac, L.Ac
Div. Chair, M.Ac. Clinical Practices



Sherry Smith, M.Ac, L.Ac
Former Director of FSSC

PART I: THE FACULTY SUPERVISED CLINICS

Section 1: Introduction To Supervised Practice

This handbook is a guide to clinical practice during the coming months. It contains valuable instructions on how to coordinate with colleagues in group practice, how to use clinic forms and instructions on how to maintain patient records. The student is advised to become solidly familiar with the contents of this book soon after beginning clinic.

This section gives an overview of the purpose, primary objectives and learning outcomes of the clinical course.

Purpose

The purpose of this course is to enable students to learn the skills necessary to become effective, safe and independent practitioners of acupuncture.

Primary Objectives

The primary objectives are the overarching goals for study and practice during the clinical program. These are summarized as follow:

- The student will progress in clinical skills (diagnosis, treatment planning, treatment delivery and patient management) through treatment supervision and core group discussion. The student will progress from requiring close supervision to working independently.
- The student will learn to practice safely and effectively and to critically evaluate his own work.
- The student will progress in personal awareness and clarity, will understand how his* presence affects the patient and will develop an awareness of personal issues he may have with the patient. The student will develop an ability to ask for and receive guidance and will use supervisors as a resource.
- The student will develop skills in a supportive learning community, gaining the ability to use the issues that arise in the clinic as a model for dealing with similar issues that will arise in private practice.
- The student will develop professional business skills related to opening and managing an office, including practice development, finances, insurance, and the ability to effectively coordinate with other colleagues to manage a group practice.
- The student will become aware of the literature of the acupuncture profession and related fields.

* For ease of reading either “he” or “she” will be used instead of the cumbersome “he or she, s/he, he/she, or his or her, or his/her.

Learning Outcomes

Each student will participate in 250 treatments, attend core group, help manage a group practice, and will successfully achieve the following learning outcomes:

- Be able to demonstrate safe, effective practice and an ability to critically evaluate his own work.
- Be able to demonstrate the application of diagnostic skills and treatment principles with patients.
- Be able to discover and bring forth the individual competencies, skills, and healing presence that will allow progression in a timely manner according to the stages of learning through the clinical program.
- Be able to carry out written/administrative tasks in a timely manner including the following:
 - o Creating and maintaining complete patient records.
 - o Obtaining HIPAA consent signatures and medical exam forms from patients as required.

- o Obtaining necessary signatures in a timely manner for treatment sheets, Record of Partnered Treatments, Clinical Skills Competence Form, journal forms, monthly reports and the clinic reading assignment.
- o Upholding all clinic policies.
- o Complying with all legal requirements, including adherence to the Blood Borne Pathogens Policy, maintaining an active CPR certification, and either completing the hepatitis B vaccine series or signing the declination to receive the vaccine. Sign annual TB test waiver or submit TB test results annually.
- Be able to demonstrate competence in the practice of clean needle technique (CNT).
- Be able to demonstrate competence in testing akabanes and using moxa.
- Be able to achieve the level of technical competence required to be a safe and effective practitioner in the treatment room by demonstrating the following:
 - o Creating and maintaining rapport with patients
 - o Performing a physical examination of patients
 - o Taking pulses
 - o Testing akabanes
 - o Planning treatments
 - o Accurately locating points
 - o Needling and using moxa
 - o Coaching patients/creating homework
 - o Ethically and effectively managing all patient issues
- Be able to create and maintain a professional manner and a professional working relationship with all faculty, students, staff, and patients.

Clinical Program Requirements

Each student will perform a minimum of 250 treatments with the following guidelines:

- At least 125 treatments performed on a minimum of ten patients personally generated and brought to the clinic for treatment. Each patient generated must have a TD, complete patient chart with a valid physical exam (if started prior to August 1, 2008), and at least three complete needle treatments to be counted as one of the ten patients.
- Each treatment scheduled must have one partner present.
- The supervisor must take pulses before and after the student needles the patient.
- An additional 125 treatments will be performed in partnership with another student practitioner who has generated the patient. These partnered treatments are to be performed on at least 40 different patients. Only one partner is allowed with each patient. (Credit for 39 of these partnered treatments may be obtained at CHI sites after the student has completed the requirements for 718: Introduction to Community Health/Supervised Treatment.)
- If a student performs treatments in excess of 125, up to 35 of these treatments may count toward partnered treatments. For example, if a student performs 160 treatments on ten generated patients, 35 may count towards partnered treatments. In this case, only 90 partnered treatments are necessary.

- All treatments must be performed in the Faculty Supervised clinics. No treatments or TD's may be performed outside the clinics. The only time a student is permitted to use needles or moxa is under Tai Sophia Institute faculty supervision while at a Faculty Supervised Student Clinic, at a CHI site, and in formal Tai Sophia acupuncture classes where these skills are taught. Any exception granted for a student already authorized by the state of Maryland to practice with needles and/or moxibustion will have been noted in an addendum to the student's New Student Orientation Agreement.
- Students must limit their scope of practice in the student clinic to their specific areas of study at Tai Sophia. Students will refrain from making suggestions to patients about remedies, specific exercises for certain problems, etc. The patients must be referred for such recommendations. If a student is trained/licensed to practice another modality, she can offer that to the patient outside the Institute. The supervisor should be consulted about making such an offering or performing another modality in which the student is trained/licensed.
- Each student is required to keep a clinic journal. Master copies of the journal pages are provided by the Institute. The student will record observations and learnings from each treatment in response to the questions in the journal.
- Students are required to complete the clinic reading assignment and write four book reports in support of their learning.
- Students are responsible to obtain all required signatures from supervisors in a timely manner.
- A student will be allowed one (1) excused absence from core group each trimester plus an additional absence to be used in a twelve month period starting with the trimester she started clinic. Any unexcused absence or additional excused absence(s) will require make-up work. The Core Group Leader will determine the nature and content of this makeup assignment. If a student is late to core group two times in a trimester, it will count as one absence.
- Students are required to keep all health-related requirements (CPR, PPD (if applicable), Hepatitis B vaccine, and Blood Borne Pathogen training) current throughout the program including clinic. The student should anticipate expiration dates and renew before they occur. Expiration dates are listed on the Monthly report by the student in the space provided. As health requirements are renewed the student must submit a copy of the documentation to the Jenny Cook, the Administrative Coordinator for FSSC, Always keep a copy for yourself. Students with expired requirements will be suspended from all coursework including clinic until the requirement is made current.
- Students are responsible for picking up their mail at least once a week. If the student is not on campus, he should arrange for a friend or classmate to bring it to him.
- Students are responsible for checking their email daily. Hard copies of announcements will not be distributed; the student must stay current by checking email. Each student will be held responsible for information such as policy changes that are distributed by email.

Note: 718: Introduction to Community Health/Supervised Treatment requires an additional ninety (90) treatments and ninety (90) client interactions performed over sixty (60) hours at the treatment sites of Maryland Community Health Initiatives. The student is required to complete a minimum number of hours each trimester and pass written and practical exams.

NADA Training

In the fourth trimester, students receive the basic NADA Training in preparation for their work at the CHI sites in course ACU 718, Introduction to Community Health/Supervised Treatment.

Additionally, students will be offered the opportunity to take the Advanced CHI Training, ACU 740E. Because this is an elective course, students may decide not to participate. Students should be aware that if they do not take this course when a student and then later decide, as a graduate, to take it, they will be charged a fee.

Required Supplies

The following supplies are required:

- Clean white lab coat three quarter length or longer which must be worn whenever the student is in the treatment room.
- Closed toed shoes
- Name badge
- Students should create a “treatment kit” containing the following:
 - Needles: It is recommended that the student have ½”, 1” and 1 ½” needles and may want to have some 1” needles in gauge 2 in addition to gauge 3.
 - A moxa stick.
 - Lighter.
 - A stethoscope and blood pressure cuff. (A large cuff will be provided by the clinic.)
 - It is recommended that the student have forceps.
 - Either a watch or small clock to keep track of time in the treatment room.

Student Health Requirements

Maintaining Health Requirements

For health requirements that need to be updated regularly, the update must be completed prior to or within the same month of expiration. Please note that students who are not current with these health requirements by the end of the month in which the health requirement expires will be suspended until they are in compliance. All health requirements must be current for a student to practice.

All health requirement documentation must be submitted to Jenny Cook, Administrative Coordinator for FSSC.

Supporting Students in Maintaining Health Requirements

The Institute believes that all students, as current and future professionals, have the ability and the responsibility to maintain the items necessary for them to perform their work. The Institute, therefore, will provide access to the expiration dates for student health requirements through the Institute’s intranet. No individual medical information will be posted on the Intranet, only testing and training expiration dates. Students are expected to review their information at any time in order to stay up to date.

In addition, the Institute will send email alerts to individuals approximately 60 days before a health care requirement expires.

All health requirement documentation should be submitted to Jenny Cook, Administrative Coordinator for FSSC. Jenny will update the new expiration information in the system on a weekly basis.

Expired Health Requirements

Students with expired health requirements will be temporarily suspended from the Institute. This includes suspension from classes, treatment privileges in the student clinics and the Maryland CHI sites, and from graduation (completion and ceremony). Students should be aware that extended suspension may impact the ongoing status of their financial aid and could impede normal transition from one trimester to another or from one stage of learning to another.

Students will receive a formal letter of suspension from the Academic and Student Affairs Advisor and all faculty and clinical supervisors will be notified when a student is suspended.

Suspension will continue until the student submits documentation to the Academic and Student Affairs Advisor that his requirements are up to date. Once documentation has been submitted, all faculty and clinical supervisors will be notified that the student has been reinstated.

PPD (TB) Test Results

TB tests are no longer required unless there is a specific case for such testing. If the student chooses to waive the test, a waiver form must be signed. If the student chooses to have the test and decides to no longer be tested, a waiver must be signed. Waivers are available at the Administrative Coordinator of FSSC’s office and an email will be sent via email. Those with a positive PPD test must provide documentation of a negative chest x-ray or proof of completed treatment for active infection.

Positive PPD Results

Should a student have a positive PPD test, she should be aware that all future PPD tests will be positive. In the case of a positive PPD, it is necessary to have a chest x-ray, and a physician must certify that there are no signs of active disease or that treatment is in process. The x-ray must be repeated every five years. Please take the PPD or x-ray result to Jenny Cook, Administrative Coordinator for FSSC.

PPD Testing Available to Students, Staff, Faculty and Residents

Students, faculty, staff and residents may go to Concentra Medical Centers to obtain their PPD tests. You must pay for the test at the time of the test. The institute will not pay for your PPD test. You do not need an appointment. Go to www.Concentra.com for locations, maps, hours of operations and phone numbers. There are Concentra centers around Baltimore, in Columbia and in Lanham.

Adult CPR

Acupuncture students must take copies of current Adult CPR cards to Jenny Cook, Administrative Coordinator for FSSC for their student file. It is the student's responsibility to keep track of when the CPR card will expire, to retake the training and to bring the new CPR card to the Student Clinic office before the previous card expires. **Online CPR certification will not be accepted.**

Hepatitis B Vaccination

Tai Sophia Institute requests that each student decide whether or not to receive the Hepatitis B vaccination series for protection from hepatitis B virus. Students must either provide documentation of the series of Hepatitis B vaccinations or sign a statement that they have been counseled on the pros and cons of being vaccinated and have declined the vaccination.

All students/prospective students are provided with the "Hepatitis B Virus and Vaccination Information Packet" to help them with their decision. Students are also requested to consult with a physician if they desire further information and guidance before making a decision.

OSHA: Bloodborne Pathogens Training (BBP)

All students are required by federal law to attend a bloodborne pathogens training every twelve months. This training teaches how to prevent or minimize exposure to blood or body fluids while working with patients and how to follow the Institute's process for dealing with an exposure incident. The Institute provides BBP training to all current students. Students continuing clinical work beyond their expected completion date are required to maintain their annual BBP certification in order to treat in the student clinic and to graduate.

Receiving Regular Acupuncture Treatment

While enrolled in the acupuncture program, students must be in regular (e.g. seasonally or five times a year minimum) treatment with a practitioner of acupuncture who is familiar with the five element tradition. If needed, call Tai Sophia Institute for the most up-to-date referral information or go to the website at www.tai.edu. It is advised that a faculty member who is directly responsible for a student not treat her. Appointments should be made so as not to conflict with class time. A letter from the practitioner should be submitted to the Jenny Cook, Administrative Coordinator for FSSC stating that the student is in treatment. This letter should be submitted at the beginning of Level I and the end of Level II.

Documentation of Exposure Incidents

All exposure incidents must be documented. Exposure Incident Report Folders, the Institute's Exposure Control Plan and Sample Completed Report Forms are posted next to the Practitioner Resource Center board in each core group room. The Exposure Incident Report Folders contain instructions for how to handle an exposure incident, report forms and a counseling sheet for the exposed individual. Specific instructions for completing the forms are included on the back of the each form and sample completed forms are available for review if necessary.

The Exposure Control Plan, found in the three-ring binder, contains complete information about exposure incidents, blood borne pathogens, preventing and/or minimizing exposure, caring for an exposed individual, the Institute's emergency response policy and procedures, and BBP training.

Maintaining Minimum Enrollment Requirements

In order to qualify for an in school loan deferment and /or for continued federal financial aid eligibility, financial aid students must be enrolled in a minimum of 4.5 credits (half-time enrollment) **per** trimester. If minimum credits are not met, the school is required to notify the student's lender and the student may enter into their grace period or repayment of their student loan.

Clinic Reading Assignment Completion Form

Each student must complete the clinic reading assignments by the end of the eighth trimester before entering into the Fire Stage of clinical practice and to pass the ninth trimester Wood Stage. A copy of suggested readings is available in the library. The reading assignment creates an opportunity to further explore the fields of healing and acupuncture. The written discussion of the

book/literature should explain how the work contributed to the student's learning and how the information could be applied in the treatment room with a specific patient.

Clinic Competency Form

In the initial stage of a student's time in clinic, she will be observed by a supervisor for the following:

- Use of clean needle technique
- Needling competence
- Use of moxa
- Testing akabanans

This is an opportunity for coaching and feedback in each technique to ensure mastery in all areas. The clinic competency form must be signed and submitted during the Wood Stage. The form shows that the student is competent in the use of Clean Needle Technique, and can needle, use moxa and test akabanans without supervision.

Progress through Clinic

Healing Presence and Stages of Learning

The work that the student does in the Faculty Supervised Student Clinic is progressive in nature. As the student begins treating, supervision will be close and directive. The intensity of supervision will decrease over time, and the student will be given increasing levels of independence to enhance confidence in his own skill and ability as a practitioner. The student will be counseled as he progresses through the various stages by his Core Group Leader during supervision and at individual mentoring sessions. Privileges will be granted at each new stage as described in the Stages of Learning with the advice and consent of the Core Group Leader. On occasion the Core Group Leader may allow an exception to the policies laid out for the Stages of Learning if she thinks it is in the best interest of the student.

The Core Group Leader will base her decision regarding the student's grade on the following requirements: the number of TD's, treatments and partnerings and having attained certain landmarks for each stage, demonstration of the competencies of each stage, and demonstration of healing presence. Moving from stage to stage is not merely a matter of numbers, but also of the development of clinical competencies and healing presence as more and more patients are treated. Many of the competencies are repeated in each stage; it is expected that the student will demonstrate greater and greater mastery of those competencies as he progresses through the stages. Likewise, the attributes of healing presence should be deepened as the student progresses through the Stages of Learning. A student must minimally meet the requirements for each stage in the designated trimester. Students may progress through the stages more rapidly than indicated by trimester if they meet the requirements for a stage before the end of the trimester. In doing so, the student is advanced mid-trimester. **A student may not progress to the next Stage of Learning if he is on probation.**

One senior student advises:

"You may also wish to ask for additional help because every student can expect one or more periods of struggle while moving through clinic. When you hit those times, remember that struggle shows you are growing. Do not hesitate to reach out for whatever assistance you need. Additional clinical learning is available through CHI sites or individual work with a faculty practitioner. If your struggle is academic, you may be able to audit appropriate courses. When the struggle is personal, reach out and make sure you remember to get treated yourself. Struggle and challenge are part of the process. At the same time, you owe it to yourself and your future patients to do more than just get by. Take any help you need and learn all you can. Clinic may seem to go by very fast."

Healing Presence

As in all levels of Tai Sophia, in addition to academic work, each student must cultivate a healing presence. Healing presence is reflected in the wood element through creation, direction and clarity; in the fire element through partnership, communication, joy, and lightness of being. It reveals itself in earth through support, encouragement, and thoughtfulness and in metal through allowing, honoring, acknowledging and respect. Water's contribution to healing presence is through listening, wisdom, being in the unknown, and stillness. The following outline lists some of the ways in which a student might demonstrate to the faculty that she is cultivating a healing presence:

- Willingness to be a "learner"
 - a. Asking for help when needed
 - b. Listening receptively

- c. Being responsive vs. reactive
 - d. Being respectful
 - e. Being open to receiving coaching
- Developing an observing self
 - a. Being aware of how one presents himself to others.
 - b. Developing the tools/practices to “recover” the observing self when not being observant.
- Holding oneself accountable for one’s actions; being accountable for one’s commitments to self, other students and patients
- Developing rapport skills
- Developing the ability to bring forth the appropriate mood, emotion, or disposition.
- Conscientiously using words and presence as instruments to effect change
- Being in partnership with others
- Exhibiting a professional demeanor and dress

The Water Stage – Trimesters Six and Seven

The Water Stage of the clinical program is a time to manifest courage, ambition and excitement about building confidence in the skills and work of being a practitioner. While each student has been prepared to begin the clinical training of the M.Ac. Program, he may also be in some unknowing as to his unique ability to complete the work required in the clinic. The Water Stage is Trimesters 6 and 7.

Patients, treatments and partnerings required by the end of the 6th and 7th trimesters of water respectively are as follows:

- Patients
 - Trimester 6: 0-2¹
 - Trimester 7: 2 total (minimum)
- Treatments
 - Trimester 6: 0-2
 - Trimester 7: 10 minimum
- Partnerings
 - Trimester 6: 15 minimum (required)²
 - Trimester 7: 25 (recommended)

During the Water Stage, Sixth Trimester, the student will:

- Observe changes in phenomena during a treatment.
- Observe which element(s) are most present in the patient.
- Recognize possible treatments based on level, pulses, CSOE, spirit and presence of patient.
- Demonstrate an awareness of the patient’s energetics in the treatment room as evidenced in the treatment planning discussion.

During the Water Stage, Seventh Trimester, the student will:

- Present two TD’s to the Core Group.
- Demonstrate competence to perform clinical skills (needling, moxa, and akabane testing) without supervision. Clinic Competency form signed by Core Group Leader.

- Accurately locate command and AE points.
- Demonstrate basic pulse reading skills by showing pulse relativity in pulse picture.
- Perform pre-treatment interview and notate details on treatment sheet including CSOE, sleep, appetite, bowels, urination and menstrual cycle.
- Complete patient and student records: treatment sheet, clinic journal page, and chart, including required signatures, in a timely manner.

Level of Supervision

During the Water Stage of the clinical program, the student will require close monitoring and supervision in all aspects of patient management, record keeping, and diagnosis and treatment planning. Supervisor feedback will be required on all point location and a supervisor will be present for all needling, akabane testing, and moxa use until competency in each skill is noted by the Core Group Leader.

Privileges in the Water Stage

The student may:

- Have one or two treatment spots on the Core Group day only.
- Begin the first two patients six weeks apart. The third patient may begin four weeks after that.
- Request that the Core Group Leader complete the Clinic Skills Competence Form when the supervisor observes the student's needling, moxibustion and testing akabanes and determines that the student is competent. (This is needed by the end of the Seventh Trimester in order to move out of the Water Stage.)
- Select a book for the first book report which is due in the Wood Stage.

The Wood Stage – Trimesters Eight and Nine

The Wood Stage of the clinical program is the time to exhibit increased confidence and clarity with regard to the direction of one's clinical training. This stage of learning is more self-directed than the Water Stage. The Wood Stage is Trimesters 8 and 9.

Patients and treatments required to complete the 8th and 9th trimesters of Wood respectively are as follows:

- Patients

Trimester 8: 2 additional (4 total)

Trimester 9: 2 additional (6 total)

¹ N.B. Numbers listed for each trimester indicate the total number (of patients, treatments, partnerings) by the end of the trimester.

² A particular number of partnerings is not required in the later stages. However, the student is encouraged to keep up with partnerings. Eighty-five partnerings are required to sign up for the Oral Exam in the Fire Stage and 125 partnerings (or the equivalent) must be done to complete the clinical program. Up to 39 CHI Site hours may be used as partnerings once the student has met the requirements for course 718, Introduction to Community Health / Supervised Treatments.

- Treatments

Trimester 8: 35 total minimum

Trimester 9: 65 total minimum

- Partnerings (recommended)

Trimester 8: 55 total minimum

Trimester 9: 80 total minimum

During the Wood Stage Eighth Trimester, the student will:

- Demonstrate awareness of the patient's energetics in the treatment room by presenting such information to the supervisor and using it to state a diagnosis and construct a treatment plan based on sound treatment principles.
- Accurately locate command points and AE points.
- Demonstrate increased accuracy in locating body points.
- Demonstrate pulse reading skills by showing pulse relativity in pulse picture.
- Demonstrate confidence and wise judgment in patient management.
- Demonstrate solid treatment planning skills and increased diagnostic skills. Be able to state two treatment possibilities for each treatment and determine level of treatment. Be able to articulate treatment principles for each treatment.
- Perform pre-treatment interview and notate details on treatment sheet including CSOE, sleep, appetite, bowels, urination and menstrual cycle.
- Consistently begin and end treatments on time.
- Demonstrate ability to manage record keeping.
- Demonstrate increasing proficiency in observing and recording CSOE.
- Present the third TD to the Core Group.
- Complete patient records: treatment sheet and chart, including required signatures, in a timely manner.
- Complete student records including journal page and Partnering and Treatment Record, in a timely manner.

By the end of the Wood Stage, Ninth Trimester, the student will:

- Have at least two continuing patients of at least eight treatments each.
- Complete the Book Report Assignment; completion of the book reports is necessary to move to the Fire Stage.

Level of Supervision

During the Wood Stage of the clinical program, the student will require less intense monitoring and supervision with record keeping and patient management. Diagnostic and treatment planning conferences with the clinical faculty will continue to provide in depth guidance, while allowing the student to test his wings in presenting treatment ideas. Feedback will continue to be required on all point location.

Privileges in the Wood Stage

The student may:

- Perform the fourth and following TD's unsupervised at the core group site.
- "Wait list" and treat on another day at the same clinic site after starting the third patient, being signed off for clinic skills and with permission from the Core Group Leader.
- Request a third treatment spot after having begun five patients and completing eight treatments in an average month.
- Begin new patients at a rate of every two to three weeks.
- Perform treatments in shorter time slots.
- Treat on Saturdays during the ninth trimester of Wood with the core group leader's permission and the concurrence of the Saturday supervisor. These privileges may be suspended if faculty has concerns about a student's demonstrated skill level.

The Fire Stage – Trimester Ten

The Fire Stage of the clinical program is the time to practice the ability to work without close supervision and with increasing levels of independence. The student will consistently demonstrate her ability to act as an advocate for her patient and receive coaching in service of the patient. In the Fire Stage, the student will exhibit an ability to take responsibility for all aspects of patient management, record keeping, diagnosis and treatment planning while demonstrating wisdom and maturity in using the supervisor effectively as a partner and advisor. Trimester 10 is the Fire Stage.

Patients and treatments required to complete the Fire Stage are as follows:

- Patients
Trimester 10: 2 additional (8 total)
- Treatments
Trimester 10: 95 total (85 required to take the Oral Exam)
- Partnerings (recommended)
Trimester 10: 105 total (85 required to take the Oral Exam)

During the Fire Stage, the student will:

- Lead the discussion with the supervisor about the patient, presenting a clear statement of energetic observations of the patient along with a treatment plan based on sound treatment principles.
- State three treatment possibilities with supporting treatment principles for each possibility.
- Demonstrate increased competence and independence in treatment planning and execution.
- Accurately locate command points, AE points, and body points.
- Demonstrate pulse reading skills by showing pulse relativity in pulse picture.
- Perform pre-treatment interview and notate details on treatment sheet including CSOE, sleep, appetite, bowels, urination and menstrual cycle.
- Demonstrate the ability to manage record keeping.
- Demonstrate increased confidence and wise judgment in patient management.
- Complete patient records: treatment sheet and chart, including required signatures, in a timely manner
- Complete student records including journal page and Partnering and Treatment Record, in a timely manner.
- Consistently begin and end treatments on time.

Level of Supervision

During this stage of the clinical program, the student will require even less supervision than in the previous Wood Stage. He will take a more active role in leading diagnostic and treatment planning conversations with the supervisor and require less faculty input. Point location skills will only be spot checked on command points and will continue on “body points.”

Privileges in the Fire Stage

The student may:

- Request a fourth treatment spot after having begun six patients and completing twelve treatments a month.
- Work at another clinic day and site.
- See patients in the Saturday clinic. Saturday privileges are at the discretion of the Saturday Clinic Faculty. These privileges may be suspended if faculty has concerns about a student’s demonstrated skill level.
- Prepare the “Clinic Portfolio.”

- Sign up for the Oral Exam (85 treatments and 85 partnerings required).

The Earth Stage – Trimester Eleven

The Earth Stage of the clinical program is a time to continue to build one’s practice with referrals from earlier patients. The student will reap the harvest of her learning, deepening her embodiment of practice and will now generate patients more easily. In the Earth Stage, all of the “Stages of Learning” are present in every moment of a practice. In some skills the student will be confident and directed, while at the same time remaining a beginner in others.

Patients, treatments and partnerings required to complete the Earth Stage are as follows:

- Patients started
Trimester 11: 2 additional (10 total)
- Treatments
Trimester 11: 125 total
- Partnerings (required)
Trimester 11: 125 total

During this Stage, the student will:

- Lead the discussion with the supervisor about the patient, presenting a clear statement of energetic observations of the patient along with a treatment plan based on sound treatment principles.
- Accurately locate command points, AE points, and body points.
- Demonstrate pulse reading skills by showing pulse relativity in the pulse picture.
- Perform pre-treatment interview and notate details on treatment sheet including CSOE, sleep, appetite, bowels, urination and menstrual cycle.
- Complete patient records: treatment sheet and chart, including required signatures, in a timely manner.
- Complete student records including journal page and Partnering and Treatment Record, in a timely manner.
- Consistently begin and end treatments on time.
- Complete all outstanding program requirements.
- Demonstrate increased confidence and ability to work independently in treatment planning and execution.
- Support and encourage fellow students in tending their learning.

Level of Supervision

During this stage of the clinical program, the student will require even less supervision than in the previous stages. Students are expected to have greater quality of treatment planning and more in depth understanding of managing a successful practice.

Privileges in the Earth Stage

The student may:

- Cease to attend core group with the consent of the Core Group Leader.
- Formally present his Clinic Portfolio to a senior faculty member of his choice.
- See patients in the Saturday clinic. Saturday privileges are at the discretion of the Saturday Clinic Faculty. These privileges may be suspended if faculty has concerns about a student’s demonstrated skill level.
- Work on other days and at other sites.

The Metal Stage – Completion and Acknowledgement

This final stage of the program encompasses the steps for completion of the program including a thorough review of the student’s academic record, acknowledgement of the student through the program completion review and ritual Bell Ringing.

For an important detailed discussion of the student's responsibilities at this stage, see the Clinic Completion Review section of this handbook.

Privileges of the Metal Stage

The student may:

- Apply for the Trainee Program two weeks before completion.
- The student may copy patient files, with the documented permission of the patient, to use for further treatment in the Trainee Program or in the student's private practice.

Post Graduate Trainee Program

The Trainee Program may be used between completion of the clinical program and licensure. Students wishing to participate in the Trainee Program must complete an application to obtain professional liability insurance at least two weeks prior to the completion review. Applications for the program and the insurance are available from the Student Clinic Office. Because the student must be approved for professional liability insurance before being accepted into the Trainee Program, he must plan ahead in applying for this program before the completion review so that he may continue to treat without interruption. More information regarding the Trainee Program may be found on page 57.

Privileges

During this program, the student may:

- Continue to practice under faculty supervision.
- Prepare for a new level of independence.
- Relinquish the supervision and support that has brought him to this point.

During this program, the student will:

- Continue to follow all clinic policies and agreements.
- Continue to submit Monthly Reports along with payment to the Student Clinic Office every month he is in the clinic
- Submit all original treatment sheets performed during the Trainee Program to the Student Clinic Office with each Monthly Report.
- Notify the Student Clinic Office when his license has been received.
- Schedule a Trainee Completion Review with the Clinic Coordinator; the Trainee must bring the following to the review:
 - all original treatment pages for treatments done as a Trainee
 - the Tracking Form
 - complete, signed patient files for all patients with a TD and treatment(s) done during the Trainee period.
- Explore the value of beginning again as a graduate.

Level of Supervision

During this stage of the clinical program, the supervisor is required to take pulses before and after treatment, and to briefly review treatment planning.

Evaluation Through Clinic

Evaluation is based on the student's attainment of the specific learning objectives and outcomes as well as by timely progression through the Stages of Learning and completion of the clinical requirements for each trimester. Evaluation is not based on numbers alone; it also includes assessing skills and healing presence as well as the ability to manage a clinical practice. Each student will receive an assessment sheet at the end of each trimester or when she meets the requirements for a

particular Stage of Learning before the end of the trimester. The items on the Assessment Sheet correspond to the numbers of patients, treatments, competencies, and healing presence items listed for each Stage of Learning.

Every moment in the clinic is an opportunity for evaluation and feedback. The student can count on all clinic supervisors for coaching.

More formally, each Core Group Leader will regularly have a short conversation with each student in the core group regarding her learning. The supervisor will circle the appropriate stage on the student's monthly report.

Each trimester, the student will receive an evaluation of her clinical work. Students who fall behind in treatment numbers may receive an incomplete grade. Students who fail to meet minimum competencies in skills and healing presence may fail the course. Please see student handbook for more information on academic policies.

Communication is important! Students should keep their Core Group Leader (and in some cases, the Student Clinic Office and the Academic Student Affairs Advisor apprised of situations in their lives that are affecting their ability to meet clinic requirements such as generating patients, submitting paperwork, meeting financial obligations, maintaining health requirements, etc. Students who fail to meet their requirements may have their clinic privileges suspended until the requirements are met.

Sanctions in Clinic

A student who has a serious problem in the Faculty Supervised Student Clinic, such as failure to adhere to clinic protocols or serious difficulties relating with patients, other student practitioners, and/or faculty or staff may have special conditions imposed by the Core Group Leader and/or the Academic Student Affairs Advisor.

The Core Group Leader or Academic Student Affairs Advisor may limit the student's clinic activities, which might include treating, partnering, or participating in core group, until the next scheduled faculty consensus meeting. In urgent cases, the Academic Student Affairs Advisor may convene a special faculty consensus meeting. Limitations placed on a student's clinic activities reflect serious concerns about the student's ability to function in the clinic. The student will be notified in writing of sanctions limiting participation in clinic activities. The staff member initiating the sanctions will give copies of the written notice about the sanctions to the Academic Student Affairs Advisor, the Clinic Chair and the Core Group Leader..

If a clinic student does not abide by sanctions imposed by the Core Group Leader or the Academic Student Affairs Advisor, or if additional problems are observed, the student may face academic probation, suspension or even dismissal from the program, depending on the outcome of the faculty consensus meeting.

A student who lapses in one or more of her health requirements, or is outstanding in submitting all or portions of her Monthly Reports or fees may have clinic privileges suspended until all requirements have been made current with the Clinic Chair's Office. For more details about academic policies with regard to incomplete grades, midterm warnings, probation, and suspension, consult the Student Handbook.

Students who have progressed to a level where they may schedule treatments on Saturdays may still be barred from treating on Saturdays if the Saturday Supervisor expresses in writing, serious doubts about some or all of that student's demonstrated skills. The Saturday supervisor should make a notice of concern to the student's Core Group Leader, Academic Student Affairs Advisor, Student Clinic office, and the student in question.

Section 2: Welcome to Group Practice

Upon entering the student clinic, each student is joining a group practice on a number of levels: core group, which will constitute the student's "home base" during the clinical portion of the program; the students who treat at the same clinic site and the faculty who supervise at the student's assigned site; and finally, the even larger community of student practitioners and faculty supervisors who are currently working at all three clinical sites. This section will describe the students and clinical supervisor's roles and responsibilities and treatment room use.

Core Group

At the beginning of the clinical experience, each student will elect a core group assignment; that is, a particular day of the week at one of the Institute's clinical sites which will serve as the student's primary practice day. As the student moves through the Stages of Learning and the patient load increases, additional treatment times, days, and sites may be granted.

Core groups meet for one hour each week prior to the beginning of clinical treatment time. The specific format of the core group meetings varies from week to week and from group to group, depending upon the needs of the students and the vision of the faculty supervisors. It is a wonderful opportunity for students to learn from one another, about themselves, about how to be with patients and about clinical skills.

The faculty member serving as Core Group Leader will be the primary support in the core group. In addition to meeting as a group, the Core Group Leader will meet with each student individually once a trimester and more often if an individual student needs or requests it. The Core Group Supervisor also monitors and submits grades at the end of each trimester.

Occasionally, due to the flow of students in the clinic and/or changes in staffing, a core group and clinic may be closed or moved to a different day. Faculty supervisors might change in a given core group. In each instance, students will be given as much advance notice as possible.

Attendance in core group is mandatory until the student is in the Earth stage of the program and has permission from his Core Group Leader to no longer attend. More than four absences within a calendar year (one each trimester with an additional floating absence) will require that the student do additional work as determined by the Core Group Leader. If a student is late to core group two times in a trimester, it will be counted as an absence by his Core Group Leader. A student is considered late if he/she arrives 10 minutes or more after the start of the core group. He/she should contact a core group member and/or supervisor if there is an emergency or if traffic is an issue.

Student Roles in Clinic

Student Practitioner: The student practitioner is the student who generates the patient. This student is responsible for the care of the patient, the privacy of the patient file, completion of the treatment record and other paperwork, the collection of fees, and monthly reporting and payment of fees to the Institute.

Partner Practitioner: The partner works with the student practitioner, before, during, and after the treatment. As the treatment is discussed with the supervisor, the partner participates in the discussion along with the practitioner. The partner is encouraged to interact with the patient, take pulses and participate in the treatment planning discussion. A student may not partner if the patient is from the same class and/or the partner knows the patient. Exceptions will be made if the patient is comfortable with student partnering. The partner will complete a treatment page on the back of the journal page. The partner will note his observations of the patient on the treatment page along with what treatment he would propose based on stated treatment principles.

The partner is expected to assist the student practitioner by setting up the clean field and rolling moxa as requested by the student practitioner. Neither the student practitioner nor the patient may specify the gender of the partner. No student may be excluded as a partner. Students may not allow gender to be an impediment to treating a patient. ***A partner must be present for the entire treatment and take beginning and end pulses for the partnering to count. Only two (2) partnerings per clinic session are allowed. Only one partner will be allowed per treatment. All personal belongings should be left in the core group room or closet.*** The commitment to partner is equal to the commitment to treat one's own patients. If this is not acceptable to the patient, the student clinic may not be the proper setting for this patient and they should be referred to a licensed practitioner.

Faculty Roles in Clinic

Each clinic is staffed by two or three supervisors in some combination of the following: a head supervisor (Core Group Leader), an Associate Supervisor; and/or an Assistant Supervisor. All supervisors are charged to uphold the policies and regulations for clinic. Any supervisor may give feedback to a student and communicate concerns about a student to the student's Core Group Leader and the Academic Student Affairs Advisor.

Core Group Leader/#1 Supervisor

The Core Group Leader is the primary faculty contact throughout a student's time in the clinic. He will provide continuity for learning and support the student in the management and care of patients. The role of the Core Group Leader is to support, coach, document, and challenge each student practitioner. The Core Group Leader will document students' progress through assessment grades, and contracts. Each student will have a senior practitioner who will facilitate her successful completion of the clinical experience.

Associate Supervisor/#2 Supervisor

The Associate Supervisor's primary task is to assist the Core Group Leader in all aspects of student practitioner supervision. The Associate Supervisor attends core group and is also charged to support, coach, and challenge all students. The Associate Supervisor will read and sign off on the student's book reports. She will also perform the duties of the Assistant Supervisor if one is not assigned on a particular clinic day.

Assistant Supervisor/#3 Supervisor

The Assistant Supervisor's primary task is to support the smooth harmonious moment by moment operation of the clinical program. She will attend core group, create the flow chart for the clinic session, check points, coach the student on the proper location of a point and how to find it, track the timeliness of the student's treatment, and inform the other supervisors of the specific needs of individual students. She will also inform the Core Group Leader when a student is ready to be observed and signed off by the Core Group Leader in needling skills, use of moxa, and akabane testing.

Specific duties for each supervisor are available for review in the Clinic Director's office.

Student Liaison

A Student Liaison is assigned to each clinic site. This person is responsible for disinfecting the treatment rooms and replenishing and ordering the supplies. Liaisons for the off site clinics also carry faculty mail to and from the clinic sites when requested by a faculty person. They are an important link in keeping the Student Clinic Office informed of conditions at the clinics.

If a student discovers that an item is low or missing, he should inform the liaison by leaving a written note in the liaison's file folder in the clinic room at each site. Students are requested to assist the clinic flow by making copies of clinic forms that are running low instead of asking the liaison.

Treatment Room Use

Each student will be assigned a room in which to treat his patient, the room number listed on the patient flow record. The first student to use the room that day should make certain to have the necessary linens and table paper. The last practitioner of the day in that treatment room should check the linen schedule to determine if linens should be removed and then remove the appropriate linens/blankets as scheduled.

Students are expected to use treatment rooms in accordance with OSHA Regulations. Students may not eat or drink in the treatment room or hallways outside treatment rooms. They must wear closed toed shoes, lab coats and identifying name tags.

Each treatment room is supplied with table paper, a sheet, a blanket, two pillows, a step stool and all acupuncture supplies except needles. Table paper should be placed over pillows used by patients. Items (including furniture) must not be moved from one room to another. Paper draping gowns are available should the patient need or request one. If the student needs something that is not available in the assigned room, the student should consult with the Assistant Supervisor. *At the Laurel Clinic, students may not ask the main Clinical Services desk staff questions about supplies or other needs.*

Linens

Linens are changed three times a week at each site. Table paper must be changed after each patient to keep the table clean. If linens become soiled they should be changed. If linens are soiled with blood or body fluids, the student should inform the

Assistant Supervisor and take precautions as listed on the Red Practitioner Resource Center Bulletin Board and in the Blood Borne Pathogen Training (BBP) on guidelines for preventing the spread of infectious disease. The treatment room may require a special cleaning and the soiled linens require special handling.

The process for changing the linens is as follows:

- There will be no bottom sheets used in the clinics—table paper only (unless the table has been designated as needing a bottom sheet because of the condition of the table top).
- One top sheet and two pillowcases will be changed every other day in all clinic rooms.
- Each room will have two pillows.
- Each room will have one clean blanket each week.
- Each clinic will have three extra sets of sheets and pillowcases and one extra blanket to use when special room care procedures are necessary.
- Paper gowns will be used for draping in the clinics, not other linens.
- Student practitioners may not bring any linens or cloth gowns to use in the clinics.

Additionally:

- If a clinic does not receive its regular delivery of linens, the supervisor or liaison should contact the Administrative Coordinator for FSSC at extension 6656.
- On days when used linens need to be removed, the communicator should make sure all rooms – whether used or not during that clinic – have been tended.
- The communicator should check the schedule page for that day for any notation of a change in the linen schedule and tell the core group during the core group session of the change.

In most cases, all student practitioners will have something to do each day, either before or after clinic, to deal with the linens. It will be important that changes on the schedule page are noted and that students ensure that all rooms are tended, even if they weren't used on that day. If each student takes responsibility for removing linens on days they are to be removed, it will make the communicator's job easier. It is everyone's responsibility to help make this system work smoothly and effectively.

Each clinic has a linen schedule chart that provides simple clear instructions on what to do and when to do it. For discussion purposes, the following discussion of overall procedures is intended to give an idea. When a student is practicing on a day other than their core group day the student should familiarize themselves with the linen requirements for that day by referring to the top left corner of the schedule page or to the linen schedule for that site.

Overall Procedures for Linen Schedule

Before clinic begins on the day that the linens are delivered, the core group practitioners are responsible for picking up one sheet, one blanket, and two pillowcases from the closet and putting them in each room. The pillowcases should be put on the pillows. *Please be aware that the blankets are changed weekly, so they are put in the rooms on the day they are delivered and removed from the rooms the day before delivery.*

When treating on a day other than one's usual core group day, students should review the linen schedule for that day as printed on the schedule page and posted in the core group room.

- The next day, at the end of clinic, students are responsible for removing the used sheet and pillowcases from each room and placing them in the blue laundry bag in the closet. It is not necessary to wear rubber gloves to change the linens if there is no known infection. If there is known infection, follow special room care procedures.
- The next day, before clinic, core group practitioners are responsible for picking up one sheet and two pillowcases from the closet and putting them in each room. The pillowcases are to be put on the pillows.

- Repeat according to the schedule that is posted at each clinic site or printed on that day's schedule page. On days without a designated communicator, such as Saturdays or other open clinic days, all students treating that day are asked to follow the linen schedule printed on that day's schedule page. The supervisor may assign the duties of linen setup or removal from all rooms to any student in clinic that day.

Holidays and weather closures may change the rotation schedule. Students should check with the schedule page for that day and/or the Student Clinic Office.

Section 3: Coordinating Practice at Each Clinic Site

Not all students who are treating patients or serving as partners during a particular clinic are members of the core group for that day. Many students are assigned to the same clinical site on different days, while some may be primarily treating at a different site.

To help facilitate communications, students will meet together several times during the clinical year in Group Practice (Course #735). This course will serve as a forum to address clinic issues and to initiate improvements in serving patients and students during the clinical phase of the program.

Students Operate the Clinic

Students are the staff for clinic! Each student must be alert for the arrival of his patient and bring her promptly to the treatment room. Students may not ask Institute or Clinical Services staff for any kind of assistance. There is a waiting room at each of the three clinics. Patients should arrive and leave by the appropriate passageways.

Students should request that patients arrive for their appointments on time. It is extremely important that each student adhere to the schedule. If for some extraordinary reason an appointment will run over time, the practitioner or his partner must speak with the Assistant Supervisor to determine if the treatment may run past the scheduled time. Any student who runs overtime is likely to inconvenience other students and patients who are waiting for the room as scheduled.

The image presented to the public about one's practice is an important one. The reception area is the waiting room for Student Clinic (as well as Clinical Services in Laurel). It is everyone's responsibility to keep the area clean and neat so that it presents a professional image to the public. Only material about Tai Sophia sponsored programs or services may be displayed in the waiting area.

Students should be mindful of clinic property, such as supplies, equipment, and reference materials. Clinic property should be returned to its place after use. All windows must be closed and rooms returned to an appropriate state of readiness. This is the responsibility of each member of the group practice.

Student practitioners may not eat or drink in the treatment room. If necessary, only patients may have a drink in the treatment room. Hand washing sinks may only be used for hand washing; dishes or food may not be washed in the sinks meant for hand washing. Hallway sinks must be free of dishes or personal items.

Scheduling and Using the Appointment Book

The scheduling system used in the student clinic was designed by students to allow each person to fulfill her clinical requirements with ease and harmony. Students are requested to read this section with care, and to bring any questions to the Student Clinic Office as soon as possible. Concerns should be brought to the student's Group Practice Class for discussion.

The system in place is designed to support each student practitioner in fulfilling the required clinical hours by providing each student with an assigned schedule for clinical space. As the schedule permits, each student may be assigned a total of two clinical appointment times per week on her core group day. Each student has autonomy over this allotted time and space for up to *one week prior to that date*. Additional appointment space may be made available as the student progresses through the clinic. The use of the wait list (described later in this chapter) will provide equitable distribution of clinic scheduling times.

Procedures

- The schedule book with student assignments is located in the reception desk at each clinical site. To protect patient privacy, the schedule book should be stored out of sight when unattended and not in use.
- Practitioners update the book with "confirmed" appointments in person or, if within one week prior to the time requested, by leaving a telephone message for the daily communicator (another student) on the clinic site voicemail. It is ultimately the student practitioner's responsibility to see that his information in the book is correct and that if an appointment is cancelled, it is erased.
- The communicator's job is to keep the book up to date so that other students may sign up to partner and schedule patients. When leaving a message on the voicemail, the student should leave the date and time of the message as well as his name and phone number.

- The communicator for the day retrieves and updates the schedule book daily, for the one week ahead (or in the case of holidays, it may be more than one week ahead).
- If a clinical space assigned to a particular student has not been filled seven days in advance, it becomes available to other students. This clinical space is filled according to the waitlist.
- Patients should be encouraged to call their student practitioner directly and not rely on the clinic phone for messages.

Guidelines for Making Appointments

Each patient's appointment is entered in the schedule book kept in the reception area at each clinic. Each student's first three patients must be scheduled for a TD and treatment on the assigned core group day in the assigned treatment slots.

The schedule book is updated with blank pages weekly, so that four weeks (current and three weeks ahead) of appointments are always available for scheduling purposes. Each student practitioner is totally responsible to keep to the allotted time for a treatment. *Students may not change the beginning or ending times of an appointment.* The schedule is designed to allow for optimal supervision of each student. Changing the times disrupts this rhythm and causes hardship for the supervisors and other students. Running over the allotted time can create chaos for fellow students, partners, patients, and faculty supervisors. If a patient is late, the student should consult with the supervisor about either proceeding with the treatment or rescheduling the patient if there is not enough time for an effective treatment. A \$15 no show fee must be paid to the Institute even if no treatment takes place.

Only confirmed appointments may be entered in the schedule book. Students will owe a \$15 charge to Tai Sophia Institute for a "no show" or "late cancel" which is any cancellation made with less than 24 hours notice, unless it is an emergency. Monday appointments need to be canceled on the proceeding Friday by end of clinic that day. Appointments for the Thursday morning clinic in Laurel must be cancelled by the start of clinic on Wednesday.

The student has the option of either charging the patient the \$15 or paying it herself. Charging the patient carries a powerful message about the importance of keeping the commitment of the appointment. Patients should be made aware of this policy prior to their first appointment. Timely cancellations keep the schedule flowing smoothly and allow more opportunities for more patients to be treated. **Communicator error is not an excuse if a wait list entry is not deleted and an appointment is scheduled resulting in a no show.** Each student is ultimately responsible to check the schedule book for the status of any changes requested. Only requests that are made no more than one week ahead should be left for the Communicator.

Students are not charged the \$15 fee if the no show is a TD (the TD must be indicated on the schedule or there will be a charge). Students should check the Patient Flow Record for that day to ensure that all TD's are noted as such. The first and last name of the patient, practitioner and partner (the partner's phone number makes it easier to contact her if there is a cancellation), and the type of treatment (TD, 1st TX) should be noted for each appointment. This helps the faculty supervisors plan accordingly.

Requesting Additional Treatment Times

Additional treatment spaces may be made available as the student progresses through the clinic. Eventually, students may perform TDs and treatments outside their regularly scheduled clinic time at the discretion of their Core Group Leader. Saturday privileges are at the discretion of the Core Group Leader and the Saturday Clinic Faculty. These privileges may be suspended if faculty has concerns about a student's demonstrated skill level.

Students should submit the Request for Additional Treatment Time Form (available at each site) to the Student Clinic Office to request additional space on the clinic schedule pages. In order to receive an additional appointment slot, students must be current with all their requirements and financial obligations. The schedules are printed three to four weeks ahead. Therefore, additions to the schedule will not appear immediately.

Leave of Absence

See the **Student Handbook** for detailed information on taking a leave of absence.

When a student takes, or is requested to take, a leave of absence, the following actions are taken:

- The student must contact the Academic and Student Affairs Advisor for approval to take a leave of absence and to return from leave of absence
- The student's name is removed from the clinic schedule pages.

- The student's name is removed from the core group roster.
- The core group space is not "held" for the student's return.
- The student must deliver all patient files and the Tracking Form to the Student Clinic Office; these files will be held for the student's return.
- The student must submit a Monthly Report signed by the Core Group Leader to the Student Clinic Office with a check for all fees owed up until the start date leave of absence.

When the student returns from leave, all health requirements and fees must be current. The student must make an appointment in advance of returning with the Student Clinic Office and the Academic Student Affairs Advisor. The student will be given a core group assignment, schedule spaces in the appointment book, and her patient files. Whenever possible, the student will be reassigned to the same clinic site though the day may differ.

Using the Wait List

The wait list is designed to allow as many students as possible to schedule patients. The wait list sheet is on the left-hand side of the appointment book, across from each day's clinic schedule page. Students who have been approved to treat outside their core group day, may request an appointment slot by using the wait list. To wait list, the student should enter the date and time(s) requested, his full name and phone number and the patient's full name. If the patient is flexible, a first, second, and third time choice may be noted. If it is a TD, "TD" should be circled. If a student finds he no longer needs the wait listed time before it is communicated (more than one week ahead), the student should draw a line through the wait list and the words "not needed" written across it. This is the student's personal responsibility; the communicator should not be asked to do this unless it is less than a week before the date.

The communicator will fill empty clinic slots seven days in advance and will notify the student practitioner that the appointment has been scheduled. A patient may only be wait listed one time per week. Students may not "hold a space" by listing a patient multiple times per week or by listing a fictitious patient. It is each student's responsibility as a practitioner to check his personal messages in case he is notified that his wait list request has been fulfilled. If the student or the patient cannot keep the newly assigned time, the appointment should be cancelled as soon as possible to allow another student practitioner access to the time slot.

Last minute cancellations result in the time slot going unused which means that a patient who could have been scheduled will go untreated. Students are responsible to one another in the use of the wait list and the schedule book.

Communicator Role

On core group days, Monday through Friday, a member of each core group should arrive early before core group and remain after the formal clinic times in order to perform the communicator role. This role should rotate among the students in the core group, with a schedule posted in the core group room or by the telephone in the reception area.

Clinics with no core group, such as Saturdays, rely on a volunteer to perform the communicator role. If there is no volunteer, the Saturday communicator duties will be assigned by the Saturday supervisor to a student who is treating on that day. It is important that someone from that day communicates for the next week's clinic and any changes for the next week.

Communicator Responsibilities

Generally, practitioners are asked to limit their phone requests to events scheduled within that one week. Practitioners with requests more than one week out should handle these in person. If a practitioner cancels his own appointment, he should schedule the next person on the wait list and call that person to let him know they have been scheduled.

Before Core Group

All changes to that day's clinic schedule requested via telephone or written message should be handled prior to core group; the communicator should allow enough time to do this and be on time to core group. If a snow day or other unexpected clinic closures happened the day(s) before, the communicator should also communicate for that day(s). The communicator should:

- Arrive at least twenty minutes prior to the start of core group to take all messages off the clinic phone and record them on the message pad.

- Remind the core group of any linen schedule changes noted on that day's schedule page.
- Remind core group members to schedule appointments ahead if communicating "ahead" due to clinic closure for the next week.
- Make any of the necessary changes listed below in the clinic appointment book:

Emergency Cancellation (less than 24 hours notice with acceptable reason)

- Draw a line through the space and write "emergency cancellation."
- Move the partner to another scheduled treatment at the same time if possible. A partner's name should not be erased unless there has been a cancellation and he or she is being moved to another spot with a patient and a practitioner listed.
- Call the partner if there is no space available at the same time.

Late Cancellation (less than 24 hours notice without an acceptable reason for canceling)

- Draw a line through the space and write "late cancellation."
- Call the practitioner if someone other than he left the message.
- Move the partner to another treatment at the same time if possible. A partner's name should not be erased unless there has been a cancellation and he or she is being moved to another spot with a patient and a practitioner listed.
- Call the partner if no space is available at the same time.
- Cancellations for Monday must be made by the previous Friday by end of clinic. Cancellations for Thursday morning must be made by the start of clinic on Wednesday.

Regular Cancellation (24 hours or more notice)

- Erase practitioner and patient names.
- Call the practitioner if someone other than he left the message.
- Move partner to another treatment at the same time if possible. A partner's name should not be erased unless there has been a cancellation and he or she is being moved to another spot with a patient and a practitioner listed.
- Call partner if no partnering is available at the same time.

Practitioner Wait Listing

When a practitioner leaves a message requesting wait listed space (one week before or less):

- Go to the wait list page for date requested.
- Fill in all needed information on wait list.
- Call the practitioner and tell her where she is on the wait list or, if there is no one else on the wait list and it's less than a week before the requested time, the patient may be written directly in an available slot and the student practitioner notified that she has the appointment time.

As a reminder, when you are signing up on the Wait List, please go in order of the numbered slots. The waitlist slots are numbered from top left to bottom left, move over a column top to bottom and so on. As the Communicator, it is important for you to follow the same order when transferring practitioners to treatment slots.

Schedule Patient in Practitioner's Regularly Assigned Treatment Space

When a practitioner leaves a message requesting regular treatment space (one week before or less):

- Fill in requested treatment space with all required information. Wait list the request if no space is available.
- Call practitioner to confirm treatment slot or wait listing.

After Core Group

The communicator should allow enough time at the end of clinic to perform the tasks listed below. If there is insufficient time to perform all the tasks, a fellow student may be asked to assist. Calling practitioners from the wait list to notify them that they got their spaces should be done at the **end of clinic** when all other core group members have filled in their patients and it is clear what times slots are available.

Make Schedule Page Changes - The goal is to schedule as many patients as possible for treatment.

The communicator should:

- Remind all practitioners they need to fill in their needed treatment slots for next week before the end of that clinic day so the communicator can complete the scheduling.
- Check the wait list for that day for the first practitioner who has requested a particular treatment time. Place the practitioner's name in the space and call him. Cross out the practitioner's request on the wait list and initial.
- Go to clinic appointment book and turn to the wait list for the core group day for the following week (e.g., on Monday 5/3 turn to 5/10). If that next week is a closed clinic (i.e., a holiday), communicate for the next open clinic.
- Fill in treatment slots starting with the first practitioner listed on the wait list page. Continue through the wait list until all requests that can be scheduled have been completed. Draw a line through each appointment scheduled and initial. Circle any wait list requests that did not get the requested treatment slot.
- Check the wait list for the days remaining for a week out (e.g., 5/4-5/9) to see if anyone can now be placed from the wait list into a cancelled treatment slot on the day and time requested. Follow the same procedure described above.
- Sign at the bottom left of the schedule page in the space provided for the communicator's name and phone number.

Check the Clinic and Core Group Rooms – The goal is to ensure that the linens are rotated properly, clinic is cleared and ready for the next clinic session.

- Verify that all treatment rooms have been put back to original order: **windows are closed, blinds down, and lights off.**
- If the linens are to be removed on that particular day, check that all treatment rooms due for linens the next day have had the linens removed and placed in the dirty linen bag. Blankets are only removed on the day before linen delivery. The linen schedule, including blanket removal, is noted on a posted schedule and at the top of schedule page.
- Check that the core group room has been cleared of all food and is ready for the next day.
- Make certain that the patient file cabinet is locked and the schedule book is closed and put away in the designated drawer.

The “Hot Call” List

A hot call is a call to the clinic from someone seeking information about acupuncture and/or looking for a student practitioner.

When a hot call comes in, the student taking the hot call will tell the caller that he will hear from a student practitioner as soon as possible. The student then gives the hot call coordinator the information about the caller. All hot calls are funneled through the hot call coordinator. The hot call coordinator will contact the caller to determine what is needed. If it appears that the caller is serious, the next student on the list is given the caller's name and contact information.

If the Hot Call is for the faculty clinic, please transfer the message to ext 6614.

Guidelines for the Hot Call List

- To be eligible as a practitioner to sign up on the hot call list, a student must have started at least three patients (be in the Wood Stage). As with all privileges associated with the five phases of the clinical program, adjustments to this guideline may be made at the discretion of the student's Core Group Leader. For example, a practitioner who has been in clinic six to nine months, is treating at least one patient and who is "stuck" in obtaining a second client may be granted permission to list on the hot call list.
- If the caller never begins treatment (does not come in for a first visit), the student stays at the top of the list and receives another hot call. The student has a total of two opportunities to stay at the top of the list. Please note that only serious inquiries will be referred to the student practitioner. If a student has been given two opportunities to start a hot call client and has not successfully scheduled the patient, it is the student's responsibility to notify the hot call coordinator and to place her name at the bottom of the list.
- When a hot call becomes a client, that student is no longer eligible to receive hot calls, so that as many others may benefit as possible from the program.
- Students may not give a hot call that they receive to another student. If they are unable or ineligible to receive a hot call, the hot call coordinator should be notified so that the next person on the list receives the call.
- It is the student's responsibility to remove his name from the list after the completion review, when he has obtained ten clients and/or is nearing completion, or sooner if he no longer wants to be on the list.

Section 4: Coordinating Practice Within the Community

The agreements students make with each other and the standards they maintain for themselves regarding clinical guidelines will impact everyone in the community and will be reflected in their ability to move smoothly through the clinical portion of the program. This section of the handbook will help each student stay in step with the group practice guidelines of the student clinic.

Community Standards

An adept practitioner of the healing arts requires skills beyond the mastery of technique. Proficiency in these arts requires that practitioners cultivate the qualities of being that enhance the practitioner-patient relationship and preserve the larger community's respect for and trust in the work. In other words, the practitioner develops a healing presence.

These qualities correspond to the Chinese character *de (te)*, or virtue: the blending of the will and the heart. *De* is authenticity – staying true to our genuine nature in all our relationships.

The students and faculty of Tai Sophia are committed to offering safe, effective, and ethical care to all their patients. As practitioners they:

- Commit to providing the appropriate quality of care to all who seek their service.
- Represent their skills and qualifications honestly, including educational achievements, licensure, and professional affiliations, and provide only those services that lie within the scope of their competence and the practice of the Faculty Supervised Student Clinic.
- Accurately inform their patients, allied health care practitioners, and the public of the capacities, limitations, and contraindications of their work.
- Provide treatments only when it is reasonable that it will be advantageous to the patient.
- Refer patients as appropriate to and collaborate with other healthcare professionals and community resources.
- Maintain and improve excellence through regular assessment of their strengths and weaknesses as practitioners and through continued education and training.
- Conduct all activities—personal, business, and professional—with honesty and integrity.
- Refuse to discriminate against patients or other healthcare professions.
- Safeguard the confidentiality of all patient information unless disclosure is required by law or court order, or is absolutely necessary for the protection of the public.
- Respect the patient's right to terminate treatment at any time regardless of prior consent given.
- Provide treatment in a manner that ensures the safety of the patient.
- Provide draping of the patient that ensures respect, privacy and comfort.
- Respect the patient's right to informed and voluntary consent before treatment. In the Faculty Supervised Student Clinic this consent must be written.
- Refrain, under all circumstances, from initiating or engaging in any sexual conduct or sexual activities with a patient, including any behavior that could be construed as sexual.
- Comply with the Maryland laws requiring that any illegal or unethical activities by practitioners be reported to the Maryland State Board of Acupuncture.
- Provide treatment only when they are able to stay present to the patient and leave the treatment room if and when they are not serving the patient.

- Uphold the patient’s reasonable expectation of professional behavior.
- Refuse to treat a person or part of the body when there is compelling and reasonable cause to deny care.
- Refrain from treating patients while under the influence of alcohol, drugs, or medication that impairs their abilities.
- Avoid activities that are in conflict with their obligation to act in the best interest of the patient or the profession.
- Respect the inherent worth of each patient and his autonomy with regard to privacy, exposure, limits of expression, and beliefs.
- Refuse any gifts or benefits that are intended to influence a referral, recommendation, or treatment.
- Refrain from advertising workshops or seminars or other offerings that are not related to the Institute in student mailboxes, student email, core group rooms or in the public waiting room of Tai Sophia’s clinics. Such information may be posted in “Information Alley” on the main floor of the building.
- Refrain from talking about views of a religious or personal nature with the patients as a way of attempting to persuade the patient to change his views.
- Follow all policies, regulations, codes, and requirements of the Maryland State Board of Acupuncture, OSHA and the Institute.

Confidentiality

Patient information must be kept confidential. Before speaking about a patient to someone else, the practitioner must be clear that this will benefit the patient. Discussing a patient’s case with family or friends will not serve the patient and is not acceptable; it may be a violation of confidentiality. However, speaking with a treatment partner, clinic faculty, in core group, in observation class or mentor group may assist and support the practitioner in treating the patient. The patient’s name should not be used when speaking with persons not directly responsible for treatment of the patient.

Students must control the distribution of written patient information with utmost care. When presenting a patient for a class, a preface sheet with only the patient’s first name should be used, only information that is necessary for presentation or discussion purposes should be included, and all copies of information should be recovered and destroyed after use.

Students are not at liberty to view the patient file of another student.

Schedule books should be stored out of sight when not in use and file cabinets containing patient information must be locked at all times.

Guidelines for Treating at Other Clinical Sites and or Saturdays

With prior review and approval of each case, the Core Group Leader may allow a student in the Fire Stage of Learning to treat at another site (or on Saturday) and may allow a student in the Wood Stage Ninth Trimester to treat on Saturday. When a student has been granted permission to treat at another site, she must set up a hanging file folder for patient records at the new site. Also, the site at which the patient will be regularly treated should be noted on the Tracking Form. This form is located in a notebook called the Tracking Book at the core group clinic site.

Each student will maintain this patient record at the new clinic site. Patient records are not to be moved between sites unless the supervisor has given permission to do so or they are being transported to the Laurel site for submission to the Clinic Coordinator at the completion of the program requirements.

Students should not move patients between sites for treatment; it is important to maintain continuity of supervision for the sake of the patient and the student’s own learning. Once treating at the new site, the student is advised to treat the patient under the same supervisor for at least six treatments.

Substituting for Another Student Practitioner

Occasionally a student practitioner must be away from clinic and has a patient that would benefit from being seen in his absence. In this case, another student practitioner may treat the patient on the absent practitioner's behalf. To ease this substitution, it would be thoughtful if the patient had already met the substitute, perhaps the substitute would have partnered with the original student practitioner when treating the patient.

- So that each student receives the proper credit for treating a patient, the following procedures must be followed when one student treats a patient on behalf of the patient's regular student practitioner: The substituting practitioner will set up a file for the patient and keep the treatment in the file with a note attached stating that it was done as a substitute treatment.
- A copy of the substituting practitioner's treatment sheet is kept in the original file with a note attached stating that the treatment was done by the substitute; this allows for continuity of the patient's records the regular practitioner will not receive credit for such a treatment.

It is not necessary to obtain another consent form or a Disclosure Request form.

Referral to Other Healthcare Practitioners

In the initial examination or subsequent treatment of a patient, a student practitioner may become aware of conditions that are medically urgent (for example, acute pain, high blood pressure, mental or emotional instability) and that another modality of treatment may be needed either prior to, or in conjunction with, acupuncture. The student should have a conversation with the supervisor in this situation and have clarity about the intention in making a referral to another healthcare practitioner.

These occurrences are relatively rare, although students do make recommendations and/or referrals that are discretionary or optional with the supervisor's approval. The large majority of patients do very well with care centered on acupuncture and moxibustion. This is the focus of our clinical program.

The following questions may be helpful in determining the appropriateness of a recommendation or a referral:

- What are the phenomena? If the symptoms do not represent a red flag, what do they represent? A healing crisis? Something that acupuncture can't help? Something that the patient may need to bear in the course of life?
- If a recommendation or a referral is made, how will the outcome be assessed?
- Some treatment modalities are less forgiving than acupuncture. Surgical procedures or lengthy regimes of medications can create new energetic dilemmas for a patient. Have the possibilities offered by acupuncture been exhausted? Is the student in a conversation with supervisor regarding what else might be done with the tools available?
- Does the student know the providers with whom the patient is already working? Would it serve for the student or supervisor to speak with them about the patient?
- Has the patient been offered a choice of providers? Is the student making a referral to providers who are safe and licensed to practice?
- Is the patient clear about what might be achieved by seeing another provider? How will the student speak to and tend the patient if no change results from another modality of care?
- If the student believes the patient is in danger of committing suicide, the supervisor should be consulted immediately. The supervisor will decide if a call to 911, the patient's therapist (if they have one), or a family member is in order.

Communication with a Patient's Physician

A patient should only change medication or other therapy regime in consultation with the prescribing physician. If the student practitioner or supervisor has a concern regarding medication or other therapies, the Core Group Leader will determine whether that recommendation should be discussed with the patient's other health care practitioner by the patient, student practitioner, or Core Group Leader. This may be an opportunity to build collaboration with other health care practitioners. *The law permits communication with the patient's physician as long as the patient has acknowledged receipt of the Notice of Privacy Practices and has not submitted a "Restriction Form," stipulating a restriction from contacting the physician.* Nevertheless, as a courtesy, the patient should always be informed of the practitioner is interested in contacting the physician.

Scope of Practice

All students and faculty of Tai Sophia programs are prohibited from regulating a patient's medications. Suggesting that a patient in any way modify his or her medication amounts to practicing medicine without a license which neither an acupuncture practitioner nor a student clinician may do. A patient should only change his or her medication or other therapy regime in consultation with his or her prescribing physician. Talking with the patient's physician may be an opportunity for the clinic level student to build collaboration with other health care practitioners. It is important, however, to note that before the student clinician may speak with the patient's physician or other health-care practitioner, the patient must furnish written permission for the student clinician to speak with the other health-care practitioner and, of course, for the other health-care practitioner to speak with the student clinician.

By the time the student enters clinic, he will have signed a statement that he has read, understands and agrees to abide by the above policy.

Faculty Supervision in the Clinic—General Policy

In accordance with the legal requirements of the state of Maryland, and in accordance with the Institute's accreditation approval, it must be understood by all clinical supervisors and students that a patient may only be treated by a student under the direct supervision of a faculty clinic supervisor; the supervisor must meet the patient, approve the treatment plan, and take pulses prior to and following the treatment with needles and/or moxa. Students are responsible to obtain the Core Group Leader's signature of approval on the "Tracking Form" prior to doing a TD with that patient. It is not acceptable, nor is it legal, that a patient be treated by a student without being supervised by a supervisor appointed by the Institute, on each visit in advance of the needles being inserted. Violation of this policy may result in suspension or dismissal from the program.

It is understood that faculty supervision will be very intense and close during each student's first 25 to 35 treatments. It is appropriate that supervision be less intense during the subsequent 50 or 60 treatments. By the student's final 40 treatments, supervision may be at a minimum, with the supervisor assessing the condition of the patient, taking initial pulses, approving the student's proposed treatment plan, and taking final pulses. This is the natural and expected progression. However, it must not be interpreted that a student may ever treat a patient outside the clinic or without the approval of the treatment by an Institute supervisor before being independently licensed.

Use of Herbs and Other Healing Modalities

The Faculty Supervised Student Clinic provides the opportunity for students to gain practice in the use of acupuncture and moxibustion. Supervisors in the acupuncture student clinic are not authorized by Tai Sophia to offer guidance to students in the dispensing of herbs, and clinic supervisors and students are prohibited from offering herbs or practicing other modalities, eg., shamanism or Reiki, in the clinic. If the student or the supervisor feel the patient could be served, a referral may be made to another practitioner (see "Referral to Other Healthcare Practitioners").

Treatment Reactions/Urgent or Emergency Calls

All treatment reaction calls should be discussed with the supervisor who last saw the patient or, if this is not possible, with the Core Group Leader. A patient should be directed to go to his doctor or to the emergency room with any unusual health threatening reaction. While calls should go directly to the student, the student should, in turn, contact the supervisor about patient emergencies.

Ombudsman

Gail Geller, Sc.D., Associate Professor at John's Hopkins University in the Bioethics Institute, is the Ombudsman for the Tai Sophia Institute Faculty Supervised Student Clinic. Her role is to advise on issues that a patient may have regarding his treatment in the clinic that cannot be resolved with the student practitioner or the supervisor. Dr. Geller may be reached at work (410-955-7894) or at home (410-467-7262).

Attire in the Clinic

Attire within the clinic must reflect a professional attitude and demeanor. The dress and grooming guidelines at Tai Sophia is one way to practice the virtues of the Metal element.

On a personal level, it is assumed that each student holds a commitment of quality and integrity in her work. Clothing and grooming express that commitment publicly. Appropriate attire demonstrates respect for the patient and patients of classmates as well as oneself, classmates, the Institute and the profession.

On an institutional level, appearing neat, clean and professional in the Faculty Supervised Student Clinic provides the patients (and family or friends who may accompany them) with the clear impression that this institution is dedicated to quality in treatment and committed to cleanliness and safety in treatment.

To meet these dress and grooming guidelines, some student practitioners may need to let go of old beliefs about themselves. At the same time, it is an opportunity to consciously and intentionally present oneself as a professional in the acupuncture community.

The dress and grooming guidelines apply at all times in the clinic, whether the student is the practitioner or the partner. The specifics of the guidelines are as follows:

- A clean white lab coat at least three quarter lengths, (though full length is recommended).
- Identifying name badge clearly displayed on the lab coat.
- Closed toe shoes as required by OSHA.
- Neat, clean and pressed clothing.
- For women, nice dress, slacks or skirt, blouses or polo shirts. Dresses and skirts should be of appropriate length; no miniskirts or exposed midriffs. No low cut tops.
- For men, collared shirts, button front collarless shirts, turtlenecks, polo shirts and nice slacks. Ties are recommended.
- Unless bearded, men are to be clean-shaven.
- Athletic wear including the following is not acceptable: Casual t-shirts or t-shirts that are logo laden or have billboard advertising, athletic shoes, denim blue jeans or shorts.
- No ripped, faded or oversized (falling off the body) clothing.
- No suggestive clothing.
- No strong smelling personal products such as colognes, shampoos, and perfumes.

Insurance Coordinator

Tai Sophia Institute employs an Insurance Coordinator who is available to students as a guide for questions about insurance. The Coordinator's phone is 410-888-9048, extension 6631. She is available throughout the clinical portion of the program. Through her assistance, the student will learn how to handle client claim submission and other third party payer issues. It is essential that all correspondence regarding insurance reimbursement and insurance issues go through the Coordinator.

Insurance statements and insurance coversheets are kept with other clinic forms either in the file cabinet or on the shelf. Students who do not refer all insurance matters to the Insurance Coordinator risk suspension of their clinic privileges. If a client is requesting insurance reimbursement for acupuncture treatment, the physical examination must include a diagnosis by a medical doctor. It is recommended that the same supervisor sign all insurance statements for a client; this supervisor will sign the insurance statement as the licensed practitioner.

Under no circumstances is a student to use official Tai Sophia stationery for any communication with insurance companies or other medical professionals.

Phones in the Clinic

Patients are to contact the student practitioner directly about all matters. Each patient should be given all phone numbers appropriate for reaching the student. There is a phone equipped with an answering machine in each clinic. Patients should call the clinic line *only* for emergency last minute cancellations. These numbers are listed at the front of this handbook.

The Clinic phone is available for students and patients to make brief, important, outgoing Tai Sophia related calls. No toll calls are to be made on any phones unless they are charged to a personal credit card. No personal calls are to be made from the clinic phone.

Cell phones are to be turned off during core group and in the treatment rooms.

The phone in the core group room may be called in extreme emergency in order to communicate quickly and directly with a supervisor while clinic is in session.

Clinic Closures/Inclement Weather/Power Outage

If the Laurel campus is closed due to inclement weather, the Laurel student clinic is automatically closed. A Laurel building closure does not necessarily affect the Baltimore and Silver Spring clinics. If the building is not closed, it is the responsibility of the Core Group Leader to determine whether the clinic will close due to inclement weather. It is always the responsibility of Silver Spring and Baltimore Core Group Leaders to determine whether those clinics will close due to inclement weather.

Each core group should create an emergency phone tree. An agreed-upon student representative from each core group should contact their Core Group Leader (or will be contacted by the Core Group Leader) if there is a question about whether that particular clinic will close. That student will then initiate contact with the other core group members through the phone tree. Each student will be responsible for informing his patients scheduled for that day. All students are advised to call their student representative or Core Group Leader should any question arise. Patients should call their student practitioner – not the clinic phone.

If a student has scheduled a treatment on a day other than his core group day, the student must contact a student from that day's core group to determine if the clinic is closed. It is important for each student to maintain a list of other students' phone numbers as well as a list of patients' phone numbers.

The same procedures will be followed if there is a power outage. If any of the clinics experience an outage, it is the responsibility of the core group leader to determine if the clinic will be closed. This determination will be influenced by the outside light at different times of the year. Candles are a fire hazard and may not be used if there is a power outage.

Note: Student Clinics do not necessarily follow the same closing schedule as Tai Sophia Institute classes. Do not assume that because classes are canceled or are not scheduled that the clinics will be closed as well.

Forms

Clinic forms are available at each clinic site. They are either stored in the patient file cabinet or on a shelf in the core group room. Students are asked to make additional copies of a form if it is running low. Many forms are available on line.

Lend a Hand

Students can increase the smooth flow of clinic by taking the initiative to do what needs doing. This might include replacing the table paper when it runs low, picking up "trash" in the clinic area, replacing an obviously dirty linen, or turning in lost items to Lost and Found (the front desk in the lobby). This is everyone's clinic!

Section 5: Patient Management

The previous sections of this handbook have described the clinical requirements and progression and the way in which the clinics are managed. Now it's time to begin to explore how students will work with their patients within the clinical setting. This section provides some basic information on patient flow. The next section will provide information on patient record keeping requirements.

Practice Building

Over the years students have contributed the following advice:

- *You probably need to contact 250 people who don't already know about acupuncture in order to get ten patients. The people you know and who are interested in acupuncture are probably already receiving treatment.*
- *Let go of thoughts about where you will be practicing after graduation. If you can build a practice while at Tai Sophia Institute, you will be able to do it no matter where you are. The patients you see while in the clinic will either travel to see you once you graduate, or will transfer to another practitioner. Nothing will happen until you clear this tension, if it exists for you.*
- *As you describe treatment in the student clinic, be sure to discuss the increased time and attention that patients receive, the healing energy of the faculty and other students, plus the other wonderfully unique aspects about receiving treatment at this clinic.*
- *Set a goal of meeting two new people a week with whom to discuss acupuncture. Speak about your acupuncture work to at least fifteen people per week. Visit places where casual conversation can occur. If you are not practiced in this, recruit a friend or fellow student who is and have fun!*
- *Plan an evening lecture every few weeks. Create a group to sponsor these. Plan the event and then invite people to it. Be sure that each evening is alive and creative.*
- *Don't try to "get" patients. Share your enthusiasm about your studies, your classmates, your faculty, and Tai Sophia Institute. Make generous referrals. It will all come back to you. It will take much longer trying to "get" for yourself.*
- *Form small discussion groups with recent graduates to keep your energy high and to ferret out your hidden blockages. Use mentor group time to discuss your clinical learning with your classmates.*

Trading of Clinical Services

As previously mentioned, building and maintaining your own practice is a significant part of the clinical experience. It is a benefit to the student to look outside of his/her network when seeking clients. Based on this, trading of clinical services is allowed and limited to two (2) clients while in clinic. When trading clinical services, care should be made to ensure that there is a *true valuing of the treatment* by the client so that the foundation of the clinical partnership has depth, meaning and integrity.

If the student chooses to trade services, the agreement is between the student and the individual with whom you choose to do so. When trading with a client, remember the student may be responsible for a portion or the entire treatment fee. All fees are due with the monthly report on the 1st of each month and considered late if not received by close of business the 10th day. No exceptions will be made for late monthly reports.

Starting a New Patient

The first few weeks of attending core group and being in the clinic are designed to provide a time of transition from academic work to clinical practice. Participating as a partner practitioner is a good way to become familiar with the treatment procedures followed in the student clinic. During the first four weeks in the clinic, students are expected to complete nine partnered treatments. Up to five of these partnered treatments may have been done in the pre-clinic partnering.

After completing the nine partnered treatments, the student may begin the first patient. The student will perform a TD and present the information in core group. After receiving permission from the Core Group Leader, a student may begin a second patient. This usually takes place after six weeks of treatments of the first patient. Subsequent patients may be started with

permission from the Core Group Leader, usually after treating the second patient between four to six times. After starting four or five patients, a student can typically begin a new patient every two to three weeks.

After completing three TD's under supervision, students may do unsupervised TD's. No supervision will be done at the time of the TD; the supervisor will meet the patient at the first needle treatment.

When making first contact with a prospective new patient, it's a good idea for the student to obtain the person's full name, address and telephone number(s), and give the person her phone number(s). The student would do well to consider having business cards with her name, student intern, and her phone numbers on it.

Note: Students must have the Core Group Leader's permission before starting any new patient, even on another day or at another site. The supervisor will determine a student's readiness to take on an additional patient, will review information about the proposed patient, and will determine that the student's health requirements are up to date, and sign the Tracking Form granting permission to start the patient.

Who Cannot Be a Patient?

Students may not treat the following persons in Student Clinic:

- Close family members.
- Students who are in the same class or core group as the student practitioner.
- Patients who are receiving payment from worker's compensation for their treatments.
- Patients who refuse to have a medical exam prior to treatment if required.
- Patients who refuse to have a partner or want to specify the sex of the partner in the treatment room.

Starting May 2009, students may treat pregnant patients, patients with cancer and children under 8 with the approval of the supervisor. Students must be in the 8th trimester of Wood to begin treating these populations. If a supervisor does not want to supervise a student treating a specific population, he/she may decline. The student can then speak with another supervisor and begin treating with that individual. The student must communicate regularly with the supervisor and identify a substitute if the supervisor is going to be absent. All scheduling procedures remain the same.

A student will treat patients solely on his assigned core group day for at least the first 14–15 weeks in the clinic and until he has started a third patient. In the Wood Stage students will have earned the privilege to request a treatment spot on an additional day. After obtaining permission from the Core Group Leader, the student may make a request to the Student Clinic Office for an additional treatment spot by submitting the request for an additional scheduled space form.

It serves both the patient and the student to schedule a patient for the first six to ten treatments with the same supervisor. The supervisor is legally responsible for the patient and must ascertain that the patient is making satisfactory progress before allowing the patient to move to another treatment day.

While the student's Core Group Leader will provide continuity throughout clinic, there are benefits to working with other supervisors as well. Each student must be supervised by at least three different supervisors during the clinical experience. Treating at least two patients with each of those three supervisors is recommended in order for the student to have a range of experiences and so that a number of faculty members can assess the student. The Commencement Requirement Form requires signatures from three supervisors.

Clean Needle Technique

It is the standard of the Faculty Supervised Student Clinic to follow the most current guidelines for CNT. Students will be provided a copy of these guidelines soon after beginning clinic; CNT will be reviewed in the core group. If changes are made to the guidelines, students will be given the new guidelines and training in applying them.

Patient Safety

Occasionally a patient who is sitting up with needles inserted will faint. Therefore, the patient who is sitting up for treatment should be sitting in a chair facing the treatment table. The patient must never be seated on the treatment table during treatment

and should never be left alone when seated with needles. The student should institute the protocol for fainting if it appears that the patient is about to faint or has fainted.

If a patient needs to leave the treatment room during treatment, the student should request that she wear shoes. Though everyone is careful, it is possible that there might be a needle on the floor and stepping on one could be quite unpleasant and upsetting for the patient.

Health care practitioners have a duty to report child abuse to the authorities. If a patient tells a student that he is aware of child abuse, the student should speak with the supervisor.

Threats to harm oneself or another person are taken seriously and must be reported to the authorities.

Supervision and Treatment Flow

During each clinic session, a supervisor will complete and post a Patient Flow Record in the core group room. This is a listing of the patients, practitioners, supervisors, and room assignments for the clinical day. It is important that the Patient Flow Record accurately reflect who was treated, the type of treatment (e.g., TD's), no-shows, late cancellations and emergency cancellations.

After receiving a room assignment, the student should place her name and the patient's name on the sign indicating the room number next to the door, prepare the room, and greet the patient in the reception area. In the appointments following the TD appointment, the initial conversation and pulse reading should take no more than twenty minutes. Then the student meets with the supervisor in the core group room to discuss the treatment plan. All conversations with other students or faculty must take place in the core group room (with the door closed).

For each treatment the student should have the following information available for the supervisor:

- Patient preface sheet.
- List of treatments performed to date.
- Final pulse picture from the last treatment.
- Today's treatment sheet with pulses, CSOE, and patient information noted.

After discussing the treatment plan, the supervisor will meet the patient, take pulses, and either give approval for the discussed treatment plan or suggest a different approach.

After treatment, the supervisor must take pulses again and sign the treatment sheet before the patient may leave the clinic. If the student fails to have a supervisor take final pulses, the supervisor may refuse to sign the treatment sheet and the journal page and the treatment will not count. A note should be attached to the treatment sheet explaining why there is no supervisor signature. The student will still be expected to pay for this treatment.

Needle Sticks

Occasionally a practitioner or patient is inadvertently stuck with a used needle. If this happens, the student should immediately inform a supervisor and follow the procedures outlined in the red *Blood Borne Pathogen Manual* and/or on the red board posted at all clinic sites.

Medical Exam Prior to Treatment

All new patients started prior to August 1, 2008 are required to have a physical exam before the first needle treatment with a practitioner in order to:

- Screen patients for any problems or potential problems.
- Encourage the patient to have a relationship with a western medical professional.
- Encourage the student practitioner to establish a working relationship with other healthcare providers including physicians.

All patients started prior to August 1, 2008 are required to have a documented medical examination performed within one year prior to coming for their first treatment with needles. These exams may be performed by physicians (MD or DO), nurse practitioners, certified nurse midwives (CNM), or physician's assistants (PA). Each practitioner may perform the exam within the scope of his license. Only MD's and DO's may render a diagnosis which may be used for insurance purposes. Students and other health care practitioners who have appropriate medical credentials and have been approved by the Clinic Director may offer to perform Physical exams on the Tai Sophia campus or off site clinics.

Patients started on or after August 1, 2008 are not required to have a physical examination unless deemed necessary by the supervisor. If a physical examination is necessary, treatments may not occur until the patient receives an exam based on the requirements above.

If needed, the use of the exam form provided to students is preferred. However, the examining practitioner may choose to use his own form. In that case, the information must correspond to the information on the Institute's form. A note from the patient's physician only stating that the patient may receive acupuncture treatment or a "work clearance" are NOT acceptable – that does not constitute a physical exam. If the supervisor thinks the information provided is inadequate, she may choose to not allow treatment until the proper information is provided. If a patient does not have his physical exam and shows up for a treatment, she may not be treated. There is no supervision and no fee is due. The student clinic is not the appropriate place for a patient who refuses to have the medical exam or whose exam is incomplete or if a physician refuses to release the information. Such patients should be directed to a licensed practitioner outside the student clinic.

At the final review, if a patient file has an incomplete or no physical exam form, this reviewer may choose to remove this patient from the total number of patients treated. This may happen even if the supervisor erroneously signed the front of that patient file folder. All treatments done for this patient will continue to count towards the total number of treatments.

The student is responsible for reviewing the patient's medical information with the supervisor prior to treating with needles in order to determine what, if any, medical factors may affect treatment decisions. In addition, this review identifies any conditions, such as hypertension, diabetes, or thyroid conditions, that should be followed by the patient's physician.

Although Tai Sophia Institute accepts physical examinations performed by healthcare professionals other than medical doctors, only medical doctors can give a diagnosis that is accepted by health insurance companies. Therefore, if a patient started prior to August 1, 2008 is requesting insurance reimbursement for acupuncture treatment, the physical examination will have to be completed by an MD or DO who will render a diagnosis. If a patient is started on or after August 1, 2008 the diagnosis may be taken from page one of the Patient Intake Form under "special problems or symptoms". The patient is responsible for complying with her health insurance company requirements regarding medical diagnosis for the purpose of obtaining insurance coverage for acupuncture treatment.

Payment for Treatments

Patients pay the student practitioner directly for treatment at the time of treatment; checks are made out directly to the student. The student should fill out a receipt, located in the desk of the treatment room or near the schedule book, and give the patient one copy. The duplicate copy is retained for the student's records. The student may need this information for tax purposes and should consult with an accountant to determine if this is so.

The patient fees charged by students for treatment in the Faculty Supervised Student Clinic are not to exceed \$80 for the TD and \$70 for each treatment. Students may not charge more than this amount. Students are responsible for paying Tai Sophia Institute \$70 for each TD and \$55 for each treatment. The difference between the amount collected from a patient and the amount owed Tai Sophia Institute provides a bit of leeway to purchase needles and to adjust fees downward for some patients if necessary.

If a student wishes to charge a patient less than the suggested fee, the student is still responsible for paying Tai Sophia Institute the stipulated fee. Any decision made regarding fee adjustment should be made on the basis of the patient's ability to pay. Under no circumstances may fees be adjusted based on insurance coverage. This is a serious ethical and legal issue, and could have serious consequences.

Students are strongly advised to seek guidance from their core group supervisors when making decisions about reducing fees. It is desirable to be collecting at least 80% of the overall fees owed by patients. If a student is not collecting full fees from a high percentage of patients, she may have an unnecessary financial challenge in clinic and when beginning private practice after graduation. A student should use this time in the clinical program to clear up this tension if it exists.

Insurance

If clients ask about insurance reimbursement, the student must explain there are no assurances that acupuncture will be covered. Each client must check with his insurance company to see if reimbursement is possible and if a referral or preauthorization is required. If the client does have insurance coverage, the student practitioner must complete the necessary paperwork for the client on a regular basis. The supervisor working with the client is the licensed practitioner who signs the form. It is recommended that the same supervisor sign insurance statements for each client. The client must pay as he receives treatment and then seek personal reimbursement directly from the insurance company. Worker's compensation clients cannot be accepted in the student clinic. These cases may be referred to a licensed practitioner.

With the elimination of the physical exam form, some changes have been made with insurance filing for patients seen in clinic. ICD-9 codes books are located in each clinic..

If a patient is interested in insurance reimbursement, students will:

1. Look up the appropriate code
 - a. If started on or after 8/1/08, this is based on patient intake form, page 1 "Special problems or symptoms"
 - b. If started prior to 8/1/08, this is based on the physical exam form
2. Complete the insurance cover sheet and insurance statement form
3. Have supervisor sign insurance statement form
4. Submit insurance cover sheet, signed insurance statement form and a copy of the patient intake form if patient started on or after 8/1/08 *or* a copy of the physical exam form if started prior to 8/1/08 to Marcia Yurko for review.
5. Add the class/track to the sheet

Transfer of Patients

Patients may be transferred from one student practitioner to another for a variety of reasons. This is most commonly done when the original student practitioner is graduating and the patient wishes to continue to receive treatment at the student clinic. Additionally, a patient who was treated in Small Group may want to continue with one of the Small Group students as they move into clinic. A student will be given credit for no more than two transfer patients in the calculation of her number of required patients. To ensure that the transfer of a patient, either from another student or from the Small Group, results in a smooth transition, the following procedures must be followed:

- The new practitioner must discuss the plan to transfer the patient with her core group leader, as with any new patient. The new student's core group leader will evaluate whether the transfer is appropriate.
- The original practitioner must update her tracking form to indicate that the transfer took place if she is still in the student clinic.
- A new patient file will be started by the new practitioner.
- The new practitioner must update her tracking form (as with any new patient) to indicate that the transfer took place. The new practitioner should also notify the insurance coordinator if the patient has previously sought insurance coverage.
- *Original patient files are not given to a new practitioner.* Instead, a copy of the patient physical (if started prior to August 1, 2008) and other documents may be obtained from the medical chart used by the previous practitioner. When transferring to another student practitioner, the patient must submit a signed Disclosure Form requesting that a copy of this information be released to the new student practitioner. This written request is then taken to the Student Clinic Office; the student will then be allowed to make a copy.
- Any transfer of a patient from one student practitioner to another may be done only with the consent of the core group leader.
- The patient must sign a new HIPAA consent form; this will acknowledge that the patient is being treated by a new practitioner.
- The new student practitioner must establish her own rapport and diagnosis of the transferring patient. Therefore, the new practitioner must perform a TD on the transferring patient, regardless of how long the patient has been in treatment. The core group leader may allow needle treatment during this first appointment. If treatment is allowed, it will still count as one visit and must be listed and paid as a TD on the Monthly Report.

- Fees due to Tai Sophia Institute for a transferred patient are the same as those charged for a new patient. The first visit will be considered a TD for the purpose of the fee. The new student may therefore choose between charging the transferred patient the TD fee or paying the difference in fees personally in exchange for gaining the patient.
- If a patient is transferred to a practitioner outside the Institute or wishes to stay with a student once they graduate, all original paperwork remains the property of and must remain at the Institute. The student practitioner must have the patient sign a Disclosure Request Form to request that the Student Clinic Office send copies of records requested to the new practitioner; this is not necessary if the new practitioner does not want a copy of the records.
- The transfer of patient procedures described above continue to apply as students expand their practices beyond the assigned core group clinic.

Section 6: Patient Record Keeping

Clinical record keeping consists of two components:

- Patient records related to patients and their treatment progress
- Students' records that track their progress through the clinic and are required documentation for graduation.
- This chapter will discuss the guidelines and requirements for patient record keeping. The next chapter on "Student Record Keeping" will provide information on record keeping related to graduation requirements.

Patient Folders

At the Clinic Orientation, each student receives enough forms and folders to assemble ten patient charts. Each Student should write her name on the folders as soon as she receives them. Additional materials for patient charts will be made available if necessary. When assembled, these folders contain the forms that are needed to begin a patient in the clinic. Extra blank patient file folders may be purchased from the Meeting Point Cafe. (If students wish to supply their own folders, they must be letter size straight cut two-ply tab manila file folders with fasteners on the inner front and back. End tab or other types of files will not be acceptable.)

Patient Record/Chart

Once the forms in a patient folder contain information regarding the patient, the folder becomes a *legal medical document* and must comply with the laws governing the use and confidentiality of patient information. In addition to the forms, the patient's chart will contain a complete record of the student practitioner's diagnosis and treatment of the patient including the diagnostic indicators, the effects of treatment noted by the practitioner and the patient, and any recommendations made to the patient.

The Health Insurance Portability and Accountability Act (HIPAA) requires that all patients acknowledge receipt of the *Notice of Privacy Practices* that outlines policy regarding the use of a patient's personal information, and that receipt of this notice is acknowledged by the patient. There is space on the form for the patient's name and address which will be used by the Institute to send information to the patient. The Institute's notice may be given to the patient. Consistent with the law, it is the Institute's policy that anyone involved in the patient's treatment, payment, or quality monitoring is entitled to use the patient's personal health information, as necessary. In addition, there are other legal circumstances that require disclosure of patient information, such as a legal subpoena and matters of public health. It is important that the student become well versed in the requirements outlined in the *Notice of Privacy Practices*.

The student practitioner is solely responsible for the maintenance of the patient's records. Complete and accurate records must be kept, using the appropriate forms. Handwriting must be legible and in accordance with state regulations, must be made in blue or black ink. Nothing should be erased or blacked out on any record included in the patient's chart. If an error is made, the student should draw a straight line through the error and initial next to the line. All charts must be kept in the locked file cabinet at the clinic at the end of the clinic session. *Patient records and charts cannot, under any circumstances, be removed from Tai Sophia Institute facilities without the Core Group Leader's approval. Removal of a patient record from the clinic site may result in a suspension of treatment privileges.*

Each student is expected to observe the privacy of other students' patients' records. Records for patients, other than each student's own patients, should not be read or removed from the file cabinet for any reason. This applies to the files of patients seen by Herbal Medicine and Chinese Herb students.

Chart Order and Organization

Some forms are received before starting the patient, some are added after. The chart is organized as follows:

Left Side

- Treatment Summary Sheets
- Individual Patient File Review Form
- Preface Sheet

- TD Physical Report
- TD Notes/Transcript
- Disclosure form (if the patient transferred to a new practitioner)
- Insurance Forms (if the patient is submitting for insurance)
- Medical Exam Form (if started prior to August 1, 2008)
- Information and Consent to Services Form

Right Side

- Treatment sheets
- Milcom Health History Questionnaire/Patient Intake Form

It is the student's responsibility to arrange the patient charts as outlined above. In some cases, it may be necessary to add supplementary forms discussed later.

Note that the preface sheet, TD physical report, TD notes/comeo/transcript, and treatment sheets will be added once treatment begins.

Primary Forms

Below is a brief description of each form used in the patient's chart.

Chart Check List (front of file folder)

On the cover of each folder is a chart checklist label. The form must be completed and signed by the supervisor before needle treatments can begin. All materials should be in the proper order and presented to the supervisor to review. The student may not proceed with needle treatment until the chart contains the listed items and has been signed by the supervisor. It is the student's responsibility to bring this to the attention of the supervisor.

Chart Label (across top of file folder)

There is space designated on the label for the patient's full name, age, and sex, date of birth, diagnosis and the modality in which the patient is being treated. Fill in the patient's last name first; include the patient's date of birth and sex, and check the "acup" space to indicate the program. This label assures easy access to some of the information needed to determine how long the file must be archived according to law and ensures that the chart will be properly archived when the student has graduated.

Treatment Summary Sheet (left side of folder as top sheet)

This form provides a quick summary at a glance of all patient treatment dates and the points used in each treatment.

Individual Patient File Review Form (left side under Treatment Summary Sheet)

This form summarizes the number of treatments done on a patient each trimester. It is submitted along with the Trimester Summary of Student Records to a core group supervisor at the end of each trimester for review and signature. It is maintained in the patient file.

Preface Sheet (left side)

This form, of the student's own design, provides a summary of the initial assessment and patient history at the time of the TD. It is completed during the TD appointment and must be made available to the supervisor at the time of the TD and at each subsequent treatment visit. The preface sheet should include pertinent facts with which the practitioner needs to be familiar in order to proceed with treatment planning.

TD Physical Report (left side)

The TD physical report is a form of the student's own design and provides a summary of practitioner findings during the physical exam portion of the TD.

Medical Physical Examination Form (left side as bottom sheet)

This form is only required if started prior to August 1, 2008 or at supervisors request. The requirements for a current medical examination were discussed in Section Five. The patient's health care provider completes this form. The patient must give it to the student practitioner before the first needle treatment. It is recommended that the student have the Medical Exam Form returned directly to her. The student may, however, have it faxed to the appropriate clinic site. Fax numbers are listed in the front of this handbook. The student practitioner's name must be written in the space provided on the form so it is recognized as student clinic related and the student is responsible for picking it up at the fax machine. Some questionable or older faxes may be placed in the bottom of the file cabinet housing patient files in the Laurel Student Clinic.

Patient Intake Forms

The patient will receive two forms: the Information and Consent to Services form and the double-sided Notice of Privacy Practices/Practices Regarding Disclosure of Patient Health Information form. Because of the amount of information contained in these documents, they should be given to the patient at the time of the TD so that they have time to read and understand the material before signing it in front of a witness at the next appointment.

Notice of Privacy Practices/ Practices Regarding Disclosure of Patient Health Information Form (given to patient and must be discussed)

This form must be given to the patient. The student must understand this document, be able to explain it to the patient, and be able to answer any questions the patient has.

Among other things, the notice states that the patient has the right to review or obtain a paper copy of his health record, and to request that appropriate amendments be made to the health record. The patient has a right to request restrictions on certain uses and disclosures of his patient information, to authorize disclosure of the record to others, and be given an account of those disclosures. Finally, the patient has the right to request communication by alternate means or to alternate locations if it is necessary to contact him.

Information and Consent to Services Form (left side)

As the practitioner, you must review the form in its entirety with the patient and the form *must* be signed before the first treatment with needles. When the patient completes and signs this form, he is acknowledging that he has read and understands this form and that he has received, read and understands the Notice of Privacy Practices/Practices Regarding Disclosure of Patient Health Information form. Students should thoroughly understand the contents of the forms and explain them in full to the patient, answering any questions the patient may have. The student will submit the yellow copy of this form with his Monthly Report so that the patient's name and address may be added to the Institute's mailing list for use in outreach mailings.

A supervisor may be present for both the explanation and the signing of this form. The Assistant Supervisor, or another adult may sign as a witness to the consent in the place provided on the form. The pink copy is given to the patient; the original is kept in the chart; the yellow copy is submitted with the Monthly Report.

Records Transfer Form (left side)

This is a special form that the patient signs giving permission for his student practitioner to copy the treatment records should the patient desire to continue treatment in that student's private practice after graduation. A copy is given to the patient, and the original is kept in his chart.

TD Report (left side)

Any narrative notes or transcripts that the student prepared during the TD should be included in the chart.

Treatment Sheets (right side, most recent on top)

Only treatment sheets provided by the Institute may be used in the Student Clinic. These sheets are used to record each treatment and are available in each of the treatment rooms. The patient's report, CSOE findings, jiao and other diagnostic information, the treatments done, immediate reactions to treatment, and other information for each treatment should be recorded on the treatment sheet.

The supervisor who supervises the treatment must sign the treatment sheet at the conclusion of the treatment. The student should print her name and the supervisor's name; the student signs her name at the bottom of the sheet; besides being legally required, if the treatment sheet becomes separated from the file accidentally, it can be returned to the practitioner. The treatment sheets are filed on the right side of the patient record with the most recent treatment on top.

For the TD only, the student should include a treatment sheet with “TD” written on it. No other information is necessary since the student will include the information on a preface sheet. The supervisor will sign the sheet.

Milcom Health History Questionnaire/Patient Intake Form (right side)

This form provides a quick and easy reference that can help to guide questioning at the time of the TD and during subsequent treatments. This form may be given to the patient, along with the patient fact sheet and the physical exam form, prior to the patient’s TD appointment. The Milcom Questionnaire is being phased out and replaced by the Patient Intake Form which is available on line and in the core group rooms.

Prior to Treatment

The following forms are given to the patient prior to the first needle treatment:

- Medical exam cover letter/Medical exam form if required by supervisor
- Patient Intake Form
- Disclosure Request Form (if patient is a transfer)

First Needle Treatment

At the first needle treatment, the following forms must be completed and placed in the patient file before the patient can be treated with needles:

- Current medical exam signed by an M.D. , D.O., nurse practitioner, certified nurse midwife, or by physicians assistant if required by the supervisor
- Information and Consent to Services Form (HIPAA) Restriction Request Form, if there are any restrictions
- Restriction Request Form, if there are any restrictions
- Preface sheet
- Completed TD
- Completed TD physical

Supplemental Forms

These forms will be required in some patient charts depending on individual need. They can be found in the file cabinet or book shelf at each clinic site. These forms are not included on the list showing chart order and organization. They should be included on the left side of the chart.

Insurance Cover Sheet (left side)

The student practitioner fills out the insurance form on a regular basis for clients whose treatments are covered by their insurance companies. Completed forms must be reviewed with and signed by the supervisor, who is the licensed practitioner, then forwarded to the Tai Sophia Institute Insurance Coordinator for review. When the Coordinator returns the completed form to the student, the student should make a copy of the form for the client’s chart, and give the original to the client to mail to the insurance company. It is important that the student be supervised consistently by the supervisor signing the form.

- All insurance forms must go through the Insurance Coordinator before leaving the Institute.
- The same supervisor should supervise and sign all insurance forms for a particular patient.
- All forms must be legible, completed in blue or black ink, and be free of white out or cross outs. These are legal documents and must be treated as such. Serious consequences could result from failure to follow these guidelines.

The Insurance Coordinator will review how to handle insurance submissions in the class on insurance.

Releasing Patient Information

Though the HIPAA Consent Form allows releasing patient information to the patient's other health care providers, it is the policy of the Institute to ask the patient's permission to do so. The student should consult with the supervisor prior to releasing any information.

The double-sided Notice of Privacy Practices/Practices Regarding Disclosure of Patient Health Information form outlines various circumstances that allow for routine disclosures. If the patient has acknowledged receipt of this notice, and the student and the patient have agreed that there will be no restrictions, then the rules in this notice apply. However, the patient should be consulted before making any disclosures. Non-routine requests for patient health information must be approved by the Clinic Director, and may require specific authorization by the patient.

Institute Mailing List

All patients will be placed on the Tai Sophia mailing list and may receive information about Institute programs and other activities. Tai Sophia does not sell, rent, or otherwise share the mailing list with outside parties except as legally required or expressly stated in the Privacy Statement. Patients who do not wish to be on the mailing list should state that on the Restriction Request Form.

Disclosure Request Form (left side if patient is a transfer from another student or small group class)

The Disclosure Request Form is used to document exceptions to the Notice of Privacy Practices/Practices Regarding Disclosure of Patient Health Information. The Practices Regarding Disclosure of Patient Health Information states that patient health information will be used routinely for treatment/consultation, payment, quality monitoring, other legally-required disclosures, and several practices particular to Tai Sophia Institute. Patient consent is not necessary in these instances. Any exceptions to these uses must be authorized by use of the Disclosure Request form.

An individual's authorization to disclose his patient health information should be submitted on the Disclosure Request Form, specifying the information being requested for disclosure, the recipient of the information, expiration date, a statement of the patient's right to revoke, and dated signature. Professional judgment should be used to limit disclosure to the minimum necessary information needed to accomplish the purpose specified in the authorization. Minimal information does not apply to healthcare providers providing treatment to a mutual patient. A request for disclosure of patient health information may be denied by the Clinic Director for extreme reasons, such as information that may endanger life or well-being.

If a patient transfers from one student practitioner to another, a signed Disclosure Request Form is submitted to the Clinic Director's office who will copy materials from the previous practitioner's chart for that patient. Each practitioner maintains a separate file on the patient. It is not permissible for one student practitioner to simply "hand over" a patient file if a patient transfers to another practitioner or to make copies without the Clinic Director's Office receiving a signed Disclosure Request Form.

Medical Record Retention

Based on HIPAA regulations, medical records of patients seen in the student clinic will be retained for six years from the last appointment. In the case of a minor child, the record will be kept until the patient attains the age of majority plus three years or for eight years after the last appointment, whichever is later. After these dates, all patient files are shredded.

Section 7: Student Record Keeping

There is a variety of paperwork for which the student is responsible while in the clinical portion of the program. This chapter will introduce some of the required forms and provide guidance for their completion.

Clinic Journal Forms (original reviewed at trimester record review)

The student will be issued materials for a Student Journal. The Student Journal is used to document the completion of 125 treatments as practitioner and 125 treatments as a partner. (See the Clinical Requirements and Progress through Clinic sections of this manual for more information.) The Student Journal must be kept up to date at all times with each journal entry signed within one month of the treatment by the faculty member who supervised the treatment. (If it is not signed within one month of the treatment, the supervisor may choose not to sign it and the treatment must be made up.) The journal is a means of tracking the student's work as practitioner and as partner. These journal pages are the student's record of treatments, experiences and learnings. The student is responsible to bring the journal to any clinic in which she participates. It will contain confidential patient information and should not be left where someone else could read it. The journal with all original signatures is submitted for inspection during each trimester record review including the final review.

Student Practitioner Journal Forms

These forms provide a record of each treatment performed. Note that there is a different form for each Stage of Learning. Directions for completing this form will be given during Clinic Orientation.

Student Partner Journal Forms

These forms provide a record of each treatment in which the student was a partner. Again, the forms change the number of partnerings completed; the student may progress to the next Journal form when she has fulfilled the recommended number of partnerings. Directions for completing this form are given during Clinic Orientation.

Record of Treatments (original submitted at completion review)

This form provides a cumulative list of the treatments done on one's own patients. The original is submitted prior to graduation and should be completed in ink. Directions for completing this form are given during Clinic Orientation. The original form is submitted to the supervisor for inspection at each trimester chart review and during the final record review and then to the Clinic Coordinator at the completion of clinic. This information will be given to the Registrar's Office for accurate transcript information.

Record of Partnered Treatments (original submitted at completion review)

This form provides a cumulative list of partnered treatments and serves as an index to the partner treatment journal pages. It is the official record of the student's fulfillment of this requirement. This form, along with the Student Journal, should be brought to clinic for each partnering. The clinic supervisor's initials are required on this sheet to receive partnering credit.

Once in clinic, a copy of this form is submitted each month along with the Monthly Report to provide the data for the number of partnered treatments done each month; the original is submitted to the supervisor for inspection at the trimester record review and given to the Clinic Coordinator at the completion of clinic. Note that partnered treatments must be done on a minimum of 40 different patients. Directions for completing this form are reviewed during Clinic Orientation.

If a student is using extra primary treatments as partnering treatments, those extra treatments should not be listed on the Record of Partnered Treatments. The extra treatments will be tallied as partnered treatments at the final record review by the supervisor.

Trimester Review Form (submitted one week prior to end of trimester)

The trimester review form is to be completed by the students and a requirement for a passing grade. The forms should be completed no later than the week before the trimester ends. The forms are located in the file box in each clinic. Only a completed form may be signed by the supervisor. It is the students' responsibility to maintain organized records with the most up-to-date and accurate information. Files and the tracking book will be checked throughout the trimester by the supervisors and clinical practices office.

Monthly Report (submitted monthly)

The supervised clinical practice Monthly Report is a summary of treatments and partnerings performed during the month. Each student will receive one personalized copy and should make additional copies of it for each month's submission. It is due, along with payment to the Institute for the treatments performed, on the first of each month. The student's name must be on the report and the payment. The student must fill in the expiration dates of the health requirements each month. The supervisor will not sign the report unless the information is complete. The student must submit a Monthly Report each month – even if no treatments have been done. The report is due to the Student Clinic Office by the 1st of each month by close of business for the preceding month; it will be considered late if it is not submitted by close of business on the 10th of the month. The student retains a copy for his records. Should the 10th fall on the weekend, a holiday or a snow-day, the report is due by close of business of the next open business day.

The Monthly Report Form is the official documentation that the student is completing the required treatments in the student clinic. By the first of each month, the student is responsible for submitting:

- A completed supervised clinical practice Monthly Report signed by the Core Group Leader. All the expiration dates of health requirements and other information regarding treatments and partnering must be complete. If the Core Group Leader is unavailable to sign, the student submits a copy with a note explaining when the signed original will be submitted.
- A copy of the record of partnered treatments with all entries initialed by a clinic supervisor.
- A copy of the Record of CHI Partnered Treatments, if applicable.
- A check made out to Tai Sophia Institute or cash to cover the cost of all treatments for the month. If the student turns in a report without a check to cover the treatments performed, it will be considered incomplete and the student will be charged a \$25 late fee.
- An additional resource fee of \$150 per month for any student who has not completed the program by the anticipated completion date (the end of the 11th trimester). This fee is due each month along with the Monthly Report until completing the program.
- A list of any no-shows for that month; payment should be included in the check submitted with the report.

Note:

- Tai Sophia will not accept postdated checks.
- All checks, personal or business, submitted should have the student's name printed on it.
- If a check is returned due to insufficient funds the student will be charged a return check fee of \$25.
- All clinic privileges will be revoked if these reports and fees are not kept current.
- The form and check must be placed in a sealed envelope.
- Math errors in the total due with the Monthly Report will be noted and a memorandum will be sent to the student by email. Any outstanding amount is due within two weeks of the dated memorandum. Students are responsible for checking their email in order to receive these notices.
- Students should retain a copy of the Monthly Report for their own records.

Community Health Initiative—Record of CHI Partnered Treatments

(submitted with the Monthly Report)

Any student may fulfill a portion of the partnered treatment requirements at a CHI site (see the Clinical Requirements listed in Section One). The Record of CHI Partnered Treatments is used to record these visits. A total of 39 partnerings (26 CHI site visits) at a CHI site may be used as partnerings and can only be counted after completing the requirements for Course 718.

The CHI office will provide the Record of CHI Partnered Treatments when the student completes the Course 718.

Each CHI site visit counts as 1.5 partnered treatments. The form must be initialed by the CHI site supervisor in the appropriate space in order to receive credit for each visit.

The student must bring the record sheet to each CHI site visit. A copy is submitted along with the Monthly Report and the original is submitted for inspection at the trimester record review and at the time of the final review.

Late or Incomplete Reports and Fees

A student who has not submitted reports or fees for any two months will receive a warning notice from the Administrative Coordinator for FSSC office by email. If the student subsequently owes three months' reports and/or fees, all clinic privileges will be suspended. The student will be informed via email. All supervisors will be notified of the suspension along with the Academic Student Affairs Advisor and Financial Aid Office. The student should be aware that if the situation is not corrected, it could impact student loan status. The student must contact the Student Clinic Office and submit all reports and fees to be reinstated.

The student's name must be printed on the Monthly Report and check. Any report submitted without a name or incomplete in any other way, will be marked as a late submission and the student will be charged a \$25 late fee.

No-shows are negotiable for a period of three months; after the three month period, the fee must be paid.

Clinic Skills Competency Form

(Original submitted when signed off before entering the Wood Stage)

When students begin treating patients, one of the supervisors will observe them as they needle, use moxa, and perform akabane testing until it is determined that they are competent in both clean needle technique and these clinical skills. A clinical supervisor must evaluate the student's performance and initial the Clinical Skills Competency Form each time he observes the student until the student is deemed competent. At this point, the Core Group Leader "signs off" on the form and the original of the signed form is submitted with the Monthly Report. The student should keep a copy of the form for her records.

Clinic Reading Assignment Completion Form

(Original submitted when signed off before entering Fire Stage)

The student must read and report on four books (or sections of a book that is especially long). Of the four books, one book may be about a subject related to health and patient care, eg., nutrition or exercise. Three books must be about acupuncture. Each report should contain a section explaining how the student will apply the information in the book to a particular patient. The library maintains a list of book possibilities. The student should clear his choice of book (or section of a book) with the core group leader.

Once the student has completed the four reading assignments and has obtained the #2 supervisor's signature on the form, it is submitted with the Monthly Report. The student retains a copy as a record. All reports must be completed in order to advance to the Fire Stage of Learning.

Tracking Form (submitted at each record review)

Each student has a Tracking Form, which is kept in the Tracking Book in each clinic. The form lists each patient that a student has seen for treatment and the dates on which every third treatment is done, and details about the student's attendance. It is used for a variety of reasons:

- To quickly locate the main supervisor for a patient
- To ensure the supervisor approved of this patient before being seen in clinic
- To quickly assess a student's current experience
- To quickly assess how long a patient has been in treatment
- To document the number of patients a student is seeing at any given time
- To track a student's absences from core group
- To allow easy access to a patients name for insurance companies

Each student is responsible for keeping the form updated. The supervisors will regularly check the tracking book and confirm that it is up to date. The form is submitted to the supervisor for inspection at the trimester record review and at the completion review.

Student Record Review

Student records are reviewed each trimester for accuracy, signatures and agreement of numbers of patients, partnerings, and treatments as reflected in the following documents:

- Tracking Form
- Patient files Folders
- Record of Treatments
- Record of Partnered Treatments
- Practitioner Journal Pages
- Partner Journal Pages
- Record of CHI Partnerings
- Trimester Review Form

Regular review of the student records ensures that all records are complete and accurate at all times during the clinic program. Having a clear record of treatments done in each trimester will allow the office of the registrar to show the number of hours a student has completed in clinic by trimester on the transcript.

Each trimester the review proceeds forward from the date of the last review. The student will request a final review from the core group leader when all clinic requirements have been fulfilled and the student is ready to graduate. The copies of Clinic Trimester Summary of Student Records will serve as the final review of the student's fulfillment of clinic requirements and replaces the Completion Review.

The core group leader will submit all original Clinic Trimester Summary of Student Records to the Clinic Coordinator. Copies should be maintained by the supervisor and the student.

Section 8: Oral Examination

Preparation to Take the Oral Exam

The Oral Exam is administered when the student has reached eighty-five (85) treatments and eighty-five (85) partnerings, and when the student has declared that she is ready for the exam. At this point the student may then complete the Oral Exam Application available on the bulletin board outside the MAc Program Director's office. This form must be read and signed by the Core Group Leader and Academic Student Affairs Advisor, who will then submit it to the Oral Exam Coordinator to schedule exams. The Oral Exam Coordinator will notify the student by email that she may sign up for the oral exam. The student will receive a copy of the Oral Exam Application for their records.

The student is responsible for knowing all course materials and should be aware that any relevant question may be asked.

Exam Administration

Each examining team is composed of a lead examiner who will assume the role of the team leader, and two additional faculty members. Each may either be a Core Faculty or Associate Faculty member.

The Oral Exam is an interactive process between the student and the examining committee. It is a process of "delving into a question," often using one question as a springboard for follow-up questions. The questions are integrative and are not to be a repetition of questions asked at a lower level or based solely on memorization. Each team member keeps a written record of each question asked during the exam, who asked it, and the basic elements of the answer. If there is any question as to the "correctness" of the answer, or if there is any equivocation amongst the examiners, these written notes will serve as a reference. The Oral Exam Coordinator will retain a copy of these records after the exam if the student has failed the exam. These records are destroyed once the student passes.

The team leader will communicate the outcome of the exam to the Oral Exam Coordinator in writing. The Oral Exam Coordinator will distribute copies of the results to the student, Academic Student Affairs Advisor, the Registrar, Clinic Chair's office and the student's core group leader.

In the event that a student does not pass the exam and is required to do remedial work, the team leader will communicate with the student about the additional requirements, and the student will follow up with the team leader upon the completion of the requirements

In the event that extensive work is required of the student, the Academic Student Affairs Advisor, may assist in overseeing that the requirements are fulfilled before the student can retake the oral exam.

Evaluation and Assessment

The exam is graded as either Pass or Fail; the student must pass each category listed in the scope of the exam. The student's performance is rated according to a five (5) point scale.

- 1 – unacceptable; the student could not answer the question, no pass;
- 2 – a poor answer, mostly incorrect, confusion, and/or a poor understanding of a correct response, no pass;
- 3 – an insufficient/incomplete answer, less than 80% correct, no pass;
- 4 – a satisfactory response that is at least 80% correct, pass;
- 5 – an excellent and thorough answer, pass.

The student's ability to realistically assess her own strengths and weaknesses as a practitioner, her professional demeanor, and professional appearance are noted but will not cause the student to fail if the committee does not think the student rated well in these areas. However, the student will be given feedback. Generally, the student will be assessed that he:

- Is able to speak about how to treat safely, knowledgably and effectively.
- Reflects the values and ethics of the profession.
- Is able to extemporaneously think and speak in the moment as a practitioner and has a sense of responsibility.
- Specifically that he understands how to plan and execute safe and effective treatments, including:

- Awareness of red flags
- Proper use of needles
- Proper use of moxa
- Patient/treatment room management
- Treatment principles, such as:
 - ❖ How an element shows up in a patient
 - ❖ CSOE and other observations made of the patient
 - ❖ The goal and direction of treatment
 - ❖ The rationales and guiding principles for specific treatments
- Ethical and legal issues of the profession
- Basic patient/practice management, such as:
 - ❖ Understanding how to handle “challenging” clients
 - ❖ Understanding how to deal with various patient interactions
- The ability to assess himself in the areas of challenges and strengths

It is not the intention of the exam to trick or trip up the student. The questions are those that any soon-to-be-graduate could answer without “looking it up.” For example, a question about the reasoning behind forbidden points during pregnancy would be fair, but questions such as which points are forbidden during the fourth month of pregnancy are not considered fair.

Procedure

The following steps are followed when applying for the Oral Exam:

- On the Oral Exam Application: the student declares by signature his readiness to sit for the Oral Exam.
- The Core Group Leader signs the form attesting to the student’s readiness. Academic Student Affairs Advisor also signs attesting that the student is not on probation, has no incompletes, nor any concerns expressed by the faculty. The Academic Student Affairs Advisor submits the form to the Oral Exam Coordinator, Robin Reel extension 6663, to begin the scheduling process.
- Upon receiving email notice from the Oral Exam Coordinator, the student may print her name on one of the sign-up sheets outside the M.Ac. Program Director’s Office indicating the date and time he will be available to take the exam.
- The Oral Exam Coordinator will send a confirmation email or note to the student (and faculty) for the upcoming Oral Exam date approximately two to three weeks prior to the exam date depending on the time available between the student eligibility and the exam time.
- A member of the Oral Exam Committee will communicate with the student’s Core Group Leader to determine any areas in need of special attention by the committee during the exam.
- In order to complete for graduation, the student must sit for the Oral Exam at least one month prior to graduation. It is recommended that the student sit for the Oral Exam within one month of completing the eighty-five treatments and partnerings.
- The length of the Oral Exam will be forty-five (45) minutes with an additional fifteen (15) minutes for discussion among examiners.

Outcomes

Pass: The student has given the information necessary to pass each category, and has met the criteria of the general assessment mentioned above. The student is given the Commencement Requirement Form (“Blue Form”) to process. The blue form must be turned in to Jenny Cook, the Administrative Coordinator for FSSC, at least one week prior to scheduled completion review.

Fail: The student’s performance was insufficient and inadequate. The exam must be taken again. A “fail” must be the unanimous decision of the three examiners with proper documentation to support the decision. The second exam may be as focused on particular category/categories or as general as the exam committee deems necessary to retest the student.

PART II: THE COMPLETION PROCESS

Section 1: STEPS TO COMPLETION

Level III is a time when students focus on treating their own patients in the Faculty Supervised Student Clinic. It is also the final portion of the degree program, a time to integrate the knowledge and skills students have gained on the path to becoming a healer.

An awareness of the steps entailed in completing the program will help the student move smoothly through the later portion of Level III. The completion process consists of five steps that you must be fulfilled to be granted the Master of Acupuncture degree.

They are as follows:

- Presentation of the Clinic Portfolio to a Faculty Member
- Completion of the Commencement Requirement Form (“Blue Form”)
- Transcript Audit Request
- Final Clinic record review
- Registrar’s Completion Review

Clinic Portfolio Presentation

Near the end of the clinical experience, the student will meet with a faculty member who is familiar with his progress through the program to formally review the student’s Clinic Portfolio and engage in a special discussion with the student about his experience in clinic and his plans as a licensed practitioner.

This faculty member must be a full faculty member or an associate faculty member. The student will schedule a specific day and time for meeting with this faculty member.

The portfolio will consist of a collection of letters from some patients, at least one fellow student, and at least one faculty member (this may be the person reviewing the student’s portfolio). The student will also include a brief story of a significant learning he has had in the Faculty Supervised Student Clinic— that is, a teaching story written by the student, from his own experience with a patient (the kind of story might be shared with a new student in the program).

The student will ask at least three patients to write about the benefit(s) they received while in treatment and how the experience of their time in the clinic served them. The student will explain to the patients that writing a letter is voluntary, that the letter will be included in an archive for future use as a reference for the work the student did while at Tai Sophia Institute, and that patient names will be obliterated in the archived copy of the portfolio to maintain confidentiality.

The letters written by fellow students and faculty should address the unique qualities the student brings to her work with patients and colleagues. Letters may be accepted by email and do not require the signature of the person sending it. Letters do need to be printed and placed in the portfolio.

The intention for the discussion with the faculty member the student has selected will be to explore the following topics: What has been the student’s greatest challenge in the clinic? What specific strengths does the student bring to the practice of acupuncture? How will the student design her practice? Who will partner the student in her ongoing learning? Where will the student live and work? How will the student tend herself as a practitioner? What will keep the student’s work inspired?

This discussion and presentation of the student’s Clinic Portfolio is a time to honor the practitioner that the student has become.

Once the student has completed and presented his portfolio of letters and teaching story to his selected faculty member, the student will make a duplicate copy to be included in a library of graduate portfolios. *Patient names must be obliterated to protect confidentiality.* The student will turn in this duplicate portfolio to the Academic Student Affairs Advisor, when performing the ritual Bell Ringing.

In summary, the Clinic Portfolio will contain the following:

- Letters from patients (minimum of three)
- Letters from student colleague(s) (minimum of one)

- Letters from faculty member (minimum of one)
- A brief teaching story of a significant learning the student had in the student clinic that would be shared with a new student in the program.

Completion Meeting Workshops with the Registrar Staff and the Academic and Student Affairs Advisor

Several times during the last trimester of academic classes, the Academic Student Affairs Advisor and the Administrative Coordinator for FSSC will offer meetings to review the steps each student must take in order to complete the program, participate in commencement, and finalize the release of the student's transcript. Students are responsible for the material covered during this meeting. The meetings are open to all clinic level students.

Transcript Audit

A transcript audit (status request report) is done when the Registrar's Office receives notice that the student has successfully passed her Oral Exam. These audits will inform the student of outstanding items that need to be cleared in order to be eligible for graduation and for finalizing the official transcript.

Clinic Completion Review

Once the oral exam is successfully completed, the student will receive a Commencement Requirement Form ("Blue Form") from the Oral Exam Coordinator when they are given the results of the oral exam. Then the following steps are taken:

1. Upon notice of the student's successful passage of the oral exam, the Information Coordinator, Registrar's Office will audit the student's course records for completeness. The student will be notified if any portion of the student's record is incomplete. The student is responsible for ensuring that all records are complete in order to proceed with the program completion process.
2. The student will obtain all signatures necessary for the completion of the Commencement Requirement form. Once the Commencement Requirement form is complete and the student has completed all program requirements, he is eligible for a clinic completion review.
3. The student has given the information necessary to pass each category, and has met the criteria of the general assessment mentioned above. The student is given the Commencement Requirement Form ("Blue Form") to process. The blue form must be turned in to Jenny Cook, the Administrative Coordinator for FSSC, at least one week prior to scheduled completion review.
4. When the student is near completion of all required treatments and partnerings in the student clinic, he should request that the supervisor be prepared to perform a final review once the final treatments and partnerings are done. (See Student Record Review, p. 52) The final Trimester Summary of Student Records Form reviews the Tracking Sheet, patient file folders, Record of Treatments, Record of Partnered Treatments, Practitioner and Partner Journal pages and Record of CHI Partnerings (if used for partnerings). The final Trimester Summary of Student Records Form is submitted to the Clinic Coordinator. Failure to provide all of the information required for the review will result in a delay which will allow the student time to gather and/or complete the required documentation. Failure to submit the final Trimester Summary of Student Records Form to the Clinic Coordinator will result in a delay of program completion.
5. Upon receiving the student's final Trimester Summary of Student Records Form and the items listed below, the Clinic Coordinator will submit verification of clinical records to the Information Coordinator, Registrar's Office. This will include verification that:
 - All patient folders have been submitted to the Clinic Coordinator.
 - The current monthly report and a check to pay for all treatments and/or outstanding fees have been submitted.
 - The original signed, completed Tracking Form has been submitted.
 - The original completed Record of Partnered Treatments Sheet has been submitted.

- The original completed Record of Treatments Form has been submitted.
 - The completed Record of CHI Partnered Treatments Form (if any CHI visits are used for partnerings) has been submitted.
6. When the Information Coordinator, Registrar’s Office receives verification that a student has fulfilled all clinic requirements, the student may then request an appointment with the Administrative Coordinator for FSSC. At that time the Administrative Coordinator for FSSC will notify the Information Coordinator and the Alumni Coordinator of the date and time. The Administrative Coordinator for FSSC may request a two week window but the students do not need to request a separate meeting with the Information Coordinator, Registrar’s Office, for the following:
- To complete a Degree Requirements Completion Certification.
 - To request an official transcript. There is a \$5 fee for all official transcripts. If the student requests for special mailing, he will be responsible for paying these additional fees. Students are responsible for determining and meeting application deadlines in the state in which he will apply for licensure.
 - To complete an Alumni Contact Sheet
 - To apply for a diploma. Students who are seeking a diploma must complete the diploma application and submit a \$50 non-refundable fee to the Information Coordinator, Registrar’s Office.
 - Please be advised that diploma replacement fees are \$50.
7. Upon successful conclusion of the program completion review, the student may schedule the ritual bell ringing with the Academic Student Affairs Advisor.

The completion process may take more time than expected. Students should allow time to finalize any outstanding program requirements. This may include, but not be limited to health requirements, paperwork indicating final treatments/partnerings, financial aid exit interview, completion of any outstanding course incomplete grades, and payment of all tuition and/or fees. Each of these requirements must be fulfilled before the student’s transcript can be sent to the state in which he plans to practice.

The Institute cannot guarantee release of transcripts by any specific deadline for licensure. It is the student’s responsibility to know and adhere to the deadlines for the state in which he will be practicing. Students are responsible for submitting requests in writing at least two weeks in advance for release of transcripts and submitting the required fee to the Information Coordinator in the Registrar’s Office.

Copying Patient Records

A student may copy her patient records by obtaining a signed “Disclosure Request Form” from each patient either before or after the completion review.

Removing Student Records

With the completion of work in the student clinic, the student is required to:

- Check all schedule pages that may list his name (both as pre-printed name in a scheduled space and all wait list spaces) and cross through his name to ensure the Communicator has accurate schedule information.
- Remove his name from the “Hot Call” list.
- Remove his hanging file folder from the file cabinet and return it to the Student Clinic Office.
- Remove lab coat from clinic

Ringing the Bell

After the completion review is successfully completed, the student contacts the Academic Student Affairs Advisor to make an appointment for the ritual Bell Ringing. This beautiful ritual, begun by previous generations of students, will mark the

successful completion of the Master of Acupuncture program and honor the student's new beginning as a licensed acupuncturist. At this time, the student will submit two duplicate copies of his clinic portfolio with patient names obliterated.

Graduate Trainee Program

The trainee program was conceived as a way to do additional treatments should these be needed to be licensed in another state or to allow the student to continue to treat for a short time in the student clinic until his license is issued. The Maryland Higher Education Commission has approved a Trainee Program for students who have completed the M.Ac. Program and *have not yet* been licensed to practice acupuncture. Should a student need additional time, as with awaiting licensure in a state other than Maryland, they may request up to four months of Trainee time. These additional supervised treatment hours can be documented to licensing agencies if needed to meet the particular requirements of the licensing authority. Applications for the Trainee Program and the required malpractice insurance are available from the Student Clinic Office. This program is subject to change.

Students must review their specific licensure deadlines to determine when they will be receiving a license before their Completion Review. **Upon receiving a license (even a temporary one), Trainees are no longer eligible for the Trainee Program and should turn in all files immediately.** Licensed individuals may apply for the Resident Program once they have obtained personal malpractice insurance. Please be aware there may be a short lag time between these programs since you must have an active license number to obtain personal malpractice insurance.

Privileges

- Each Trainee may continue to schedule patients through the waitlist.
- Treatments will be supervised by the clinic supervisor on duty at the time of the treatment.
- The Core Group Supervisor each Trainee had as a student will continue to function as a primary supervisor.

Requirements

Trainees must:

- Continue to comply with clinical health and Blood-Borne Pathogen requirements.
- Set up a complete new file for each patient that they continue to treat or begin to treat in the clinic as a trainee.
- Maintain individual Patient Treatment records (signed by a Supervisor) for all treatments.
- Submit a Trainee Monthly Report with all applicable fees by the 10th of the following month.
- Continue to follow all other clinical policies and agreements.
- Schedule a final, short Completion Review of all Trainee materials with Student Clinic Office.
- Submit the original treatment sheets for each month's treatments, keeping one for personal records if a Disclosure Request form has been signed by the patient.
- Obtain a completion signature from the Student Clinic Office before beginning the Resident program.

Level of Supervision – During the Trainee program, the supervisor will take pulses before and after the treatment, review the Trainee's diagnosis and treatment plan and answer any questions and concerns. The supervisor will raise questions and further the trainee's education with comments and discussions that the supervisor deems appropriate. There will be no formal classes.

Fees – A \$50 Application fee should be submitted with the application for the program at the Completion Review. Additionally, fees are \$30 per TX & TD, \$15 per No-Shows and \$25 for Late Report submissions.

Insurance Coverage – In advance of their completion, students are required to secure malpractice insurance through the American Acupuncture Council in order to be eligible for the Trainee Program. The forms are available at the Student Clinic Office. The cost of coverage is \$60; checks are made payable to American Acupuncture Council. The completed AAC Acupuncture Intern Malpractice Insurance Application and check should be mailed to:

The American Acupuncture Council
1851 E First St #1160
Santa Ana, CA 9 2705.

As soon as Tai Sophia is informed by AAC that the trainee is covered, the trainee may start treating patients. If the student wishes to continue coverage by ACC upon entering private practice, the \$60 fee will be applied to a new ACC policy. Any questions about continuing coverage should be directed to the AAC at 1-800-838-0383.

Finishing the M.Ac. Program

The following definitions may help to make the process of completing the program and graduating clearer.

- **Earliest Completion Date:** The earliest date that a student can graduate. Assuming the student has fulfilled the clinical requirement, this would be the last day of academic classes or the end of the ninth trimester.
- **Anticipated Completion Date:** The date the student will most likely complete the program; the end of the eleventh trimester. If the student continues in the program after this date, he will incur a \$150 a month fee for the duration of the program.
- **Latest Completion Date:** The date by which a student must complete or leave the program.
- **Last Day of Attendance:** The last date of a student's attendance in a course, the date of the completion review meeting. Note: For financial aid recipients, this date will be reported to the student's lender which will initiate the grace or repayment period of students' loans.
- **Graduation:** The date on which the last of all designated officials (the final signature being the Registrar) certify that a student has completed all program and institutional requirements and obligations.
- **Commencement:** The ceremony that celebrates the actual graduation and a new beginning as a graduate.

Resident Program

Upon licensure, students are invited to apply to continue practicing at Tai Sophia in the Resident Program. Information on this program is available from the Coordinator of the Resident Program at ext. 6626.

Frequently Asked Questions

Q: What if I want to treat my patients for a month or more after completion while I wait for my license?

A: At least two weeks before your completion review, apply for the Trainee Program and for professional liability (malpractice) insurance.

Q: What do I need to do to obtain graduation clearance and certification?

A: As it gets closer to the time of your program completion and subsequent graduation, the Registrar's Office will provide students with more specific information related to this aspect of the clearance process. However, there are several steps that should be taken at least two months before you complete the program:

- Through the transcript audit you will be notified by the Information Coordinator in the Registrar's Office of your course history, including any, incompletes on your record that must be resolved, your current status and health requirement compliance, and including your current CPR, TB and Hepatitis B clearances and certifications.
- Students must ask the Business Office to review your account for tuition payments.
- If the student has received loans, he will be required to attend a financial aid exit interview. If the student has not done so, he will need to meet with the director of financial aid to conduct a final exit interview and finalize paperwork. To allow sufficient time to audit a student's file, the student is required to contact the Office of Financial Aid two weeks prior to the registrar's completion review.
- The final transcript will note the actual date of graduation.
- Carefully check over your patient records to make sure that documentation is complete and accurate and that all payment (fee) submissions are up to date.

Q: Why does the Financial Aid Office need to sign my Degree Completion Certification when I haven't received financial aid?

A: The Registrar signs the form only after the Director of Financial Aid has done so. Because the Registrar does not always know that a student has taken out a loan, the Director of Financial Aid signs for everyone. Her signature indicates that the student either did not receive financial aid or has completed all financial aid requirements.

Q: What can I do to expedite the graduation clearance review and completion certification process?

A: Make sure that all your “ducks” are in order (i.e., that you have followed all of the suggestions given above).

Q: What is the process for a Maryland or other state license?

A: We are committed to working on your completion process efficiently. However, we cannot guarantee that the graduation and transcription processes will be complete in time for your state license board deadline. State deadlines are beyond our control!

You can expedite the process by contacting your state board as soon as you’re approaching completion. (The Maryland State Board number is 410-764-4766.) The board office (not the Registrar’s Office), will answer your questions about the application, deadline, and fees. Most states require a final school transcript, some states require a sealed copy of your diploma, and some require that the registrar complete a certification form. Students are responsible for ensuring that the state board is provided with appropriate documentation, submitting requests to the Registrar’s Office accordingly and allowing 4-6 weeks for processing and sending the necessary documentation.

You may continue to practice in the student clinic as a trainee until you receive your license or license number from the Maryland State Board of Acupuncture. If you are going to another state, it is your responsibility to abide by the laws regulating acupuncture in that state.

Q: How long will it take to receive my diploma?

A: Diplomas are customized by an outside source and may take up to eight weeks for delivery.

Q: How do I obtain copies of my patient records to take with me to my new practice

A: If your patient has signed a “Disclosure Request Form,” you may copy the records before your completion review. If you have already turned in your patient files, you must submit a “Disclosure Request Form” signed by the patient before the records may be copied.

Section 2: Commencement Events

At Tai Sophia Institute, completion of the M.Ac. program is celebrated in three different domains:

- In the personal domain, students are invited to an event—the Acknowledgment Evening, held near the time of the last formal classes—during which students have the opportunity to acknowledge one another and share the joy of their accomplishments.
- In the institutional domain, students are invited to a day of visioning their future practice and relationship with Tai Sophia Institute, along with a celebratory luncheon with faculty and staff.
- The formal commencement ceremony is in the public domain, because it marks the conferring of the Master of Acupuncture degree as prescribed by the state. Students may invite friends and family members to attend to bear witness. Participants in this ceremony include those who were formally graduated since last year’s ceremony and those who qualify for this commencement.

These ceremonial events are meant to encourage students to reflect on the totality of their journey while at Tai Sophia Institute, to savor the acknowledgment so richly deserved, and to look forward to the next stage of the journey with confidence.

Students interested in processing in Commencement activities will be required to complete necessary paperwork and submit appropriate payment to the Registrar’s Office.

Section 3: Returning Current

As the door to student life seems to be closing, another great one is opening at the same time. Students are invited and encouraged to take advantage of all the Institute has to offer and to continue to move with the Institute as it seeks to serve life for the sake of the children's children and honoring the ancestors. Here are some of the portals Tai Sophia Institute provides:

Publications

- **Reunion Point** is the newsletter specifically for Tai Sophia Institute alumni. It is published three times a year and provides news of your fellow alumni, what's happening at Tai Sophia Institute and within the national wellness arena, as well as listings of graduate education offerings. You can submit your news directly to the editor at pdlorenzo@tai.edu.
- www.tai.edu is our website. This is perhaps the quickest way to get the scoop on happenings at Tai Sophia Institute (including positions open to newly graduated alumni). Check it out regularly. Recommend it to patients and friends.
- Tai Sophia Institute maintains a referral list of Tai Sophia Institute graduates by location. Be aware that the address and phone you provide will be available to the public (unless you specifically request that you not be listed) by checking www.tai.edu.

Graduate Education

The Office of Special Programs coordinates learning programs for alumni and the community, so that you can earn continuing education units (CEUs). These programs range from one-day or weekend courses, to programs like animal acupuncture, which take longer to complete. This department is always interested in knowing your needs and interests. For more information please check out *The Pulse*, a wonderful publication to put in the waiting room of your new office!

Resources for Your Patients

Meeting Point Bookstore-Cafe offers unique books on acupuncture, complementary medicine, and natural healing. Check the Institute website for current titles.

The range and quality of seminars and workshops that may benefit your patients is quite extraordinary. We heartily encourage you to recommend Redefining Health—why not attend again yourself and bring someone along.

Here are some other suggestions for continuing your participation in the life of this “watering hole” community we call Tai Sophia Institute:

- Register for the weekend SOPHIA program—send your patients!
- Start your own SOPHIA group.
- Participate in the annual fall symposium—think of it as your “homecoming.”
- Come to opening day (in January and September) and welcome the new students to Tai Sophia Institute.
- Take or create a course to be offered in *The Pulse*.
- Become an assistant instructor in either academic classes or clinic.
- Stay in touch with your Tai Sophia Institute colleagues and classmates. Create and attend alumni gatherings.
- Join the alumni email group at Yahoo groups. Visit our web site under “alumni” to join a group.
- Participate in your local alumni network.
- Start your own local Tai Sophia Institute gathering or form a study group.
- Refer people to become students at Tai Sophia Institute.
- Participate in your state acupuncture society.

- Join a national acupuncture organization.
- Visit the Tai Sophia Institute website from time to time!
- Shop at the Meeting Point Bookstore-Cafe. (Order books by phone and get the alumni member discount.)
- Complete and return the annual alumni survey.
- Volunteer at the CHI sites, Sign of Jonah, Underground Railroad, or similar clinic in your community.
- Apply to be a #3 substitute in the student clinic.
- Inform other alumni about opportunities to practice in your area by contacting our web master at webmaster@tai.edu
- Attend the annual graduation ceremony in June and celebrate our community!
- Become a donor to Tai Sophia Institute.
- Avail yourself of the many resources available through the resources learning center (library) ext. 6644.
- Offer to mentor a new graduate and help him/her establish a practice.
- Join any number of positions opens to new grads.

Your contributions are vitally important. The classes of 1993B and 1994A, as class gifts, committed themselves to giving \$10,000. This sounds impossible, doesn't it? Here's how these alumni designed their "gift of postgraduate *Qi*." Over a period of 10 years, each classmate donates the fee from one treatment each year—a simple yet effective action.

Your continued participation, support, and committed action will foster the ongoing creation of Tai Sophia Institute as a learning community, today and for future generations.