

**Saskatchewan Association of Naturopathic Practitioners
Policies and Procedures**

Acupuncture -
Adopted April 26, 2009.

Purpose: The Saskatchewan Association of Naturopathic Practitioners provides the following guidelines for the safe standard protocol of acupuncture in order to protect the health of both patient and practitioner.

Definition: For the purpose of this policy, acupuncture is the traditional Asian method of inserting fine needles into critical points in the body to promote healing. It is the Member's responsibility to adhere to these guidelines while using acupuncture during naturopathic practice.

1. Special Precautions

For the protection of the public and the practitioner, it is best to assume that all patients potentially have communicable diseases so that meticulous attention should be given to sterilization techniques, the use of disposable needles, isolation of used needles and cotton swabs, the avoidance of needle stick accidents and hand washing between treatments.

Direct contact with blood and body fluids should be avoided in all patient care settings. Disposable gloves should be worn in handling blood and fluid samples and used in all examinations which have the possibility of contacting body fluids.

2. In case of a needle stick injury:

- a) Immediately obtain the HIV/hepatitis antibody status of the patient.
- b) If the patient is HIV positive, assess the baseline HIV antibody test of the injured practitioner as soon as possible.
- c) The injured practitioner should repeat the tests as follows: at six weeks, and three, six and twelve months after accident.

3. Standards for Needle Acupuncture Therapy

a) Basic Principles

An approach to clean needle technique is based on medical protocols for giving injections. It includes the following basic elements:

- i) Sterile disposable needles only
- ii) Cotton swabs
- iii) Clean hands
- iv) Clean field
- v) Surgical, non-latex gloves

- vi) Needle disposal container in each room
- b) Immediate isolation and disposal of all used needles
 - i) Only sterile disposable needles are acceptable for use, preventing any risk of infection, e.g.: HIV or hepatitis
 - ii) All acupuncture instruments that penetrate the skin must be sterile, disposable and not reused. This includes acupuncture needles, plum-blossom or other types of needles. Any other equipment that might break the skin must also be sterile.
 - iii) Needles should be disposed of after each patient use. These must be kept in special containers and disposed of according to local regulations for the disposal of contaminated or infectious waste.
 - iv) Acupuncture should be performed with filiform acupuncture needles only.
 - v) Seven-star or plum-blossom needles may be used on more than one site on a single patient, but they must be sterile for each patient. Needle guide tubes must be disposable, sterile, used for one patient only, and be discarded after each treatment.
 - vi) All needle trays (holders) that contain sterile needles must themselves be sterile. Disposable needle trays should be discarded after each patient use.
 - vii) All forceps, if they are used to pick up sterile needles, should themselves be sterile.
- 4. Standard Protocol For Acupuncture Treatment
 - a) Work-up

All patients must have had a complete naturopathic work up including case history, appropriate physical examination, diagnosis and plan of treatment before acupuncture treatment is initiated.
 - b) Establishing the clean field for treatment equipment:
 - i) The clean field is established on the work surface in the treatment room.
 - ii) Wash your hands.
 - iii) Lay out clean paper toweling.
 - iv) Place treatment equipment on the clean field. This includes: sterile needles, cotton and alcohol container.
 - v) Containers for used needles and for contaminated waste should be kept away from the clean field.
 - c) Preparing the skin for treatment:
 - i) Check that the skin areas to be treated are free of any

cuts, wounds, eczema or infection. Acupuncture needles should never be inserted through inflamed, irritated, diseased, or broken skin.

ii) The areas to be needled should be cleaned with a 70% isopropyl alcohol-impregnated swab. Swab the area once in the direction from the torso toward the extremities. Alcohol should be allowed to dry to reduce discomfort on needling.

d) Clean needle technique:

i) The needle shaft must be maintained in a sterile state prior to insertion. If the needle shaft is contaminated (by the practitioner's hand or other non-sterile object or surface) the needle should not be used.

ii) Guide tubes, sterile at the beginning of the treatment, may be used repeatedly on the same patient during the treatment.

iii) Needle manipulation must be performed without the practitioner's hands coming into contact with the shaft of the needle.

iv) When withdrawing the needle, the bare fingers should not be used to press down at the insertion site. The clean cotton ball is used for protecting the practitioner from contact with the patient's body fluid. Wearing surgical non-latex gloves when withdrawing the needles (if the patient is not infectious) is not mandatory, but strongly recommended.

e) Disposal of needles:

All needles should be immediately placed in the special infectious waste containers or sharp's container and disposed of by proper infectious waste management regulations in the local area.

5. Treatment of High Risk Patients

The patient with a compromised immune system has special needs that go beyond the average. Such a person has a greater susceptibility to infection. This group includes patients with HIV, patients undergoing chemotherapy, severely malnourished or debilitated persons receiving immuno-suppressant drugs, organ transplant patients, post-splenectomy patients, etc.

a) Protocol for the treatment of high risk patients

i) After the previous patient has left, change the sheets or examination table paper.

ii) Wash your hands with a germicidal soap.

iii) Ask about allergic reaction to local disinfectants before using one. Prepare the patient's skin with Betadyne (or other surgical type disinfectant) swab and allow to dry. Wipe the

Betadine off with an alcohol swab and allow area to dry.

- iv) Use disposable needles only.
- v) When withdrawing the needles from patients with an infectious disease that is transmitted with the blood (e.g. HIV, hepatitis) the practitioner should wear a clean rubber or vinyl glove on the hand that holds the cotton ball against the skin.
- vi) Cotton balls used for swabbing the skin may be discarded in the usual manner.
- vii) Clean, unused cotton balls should be used for drawing the needles or closing the hole.

6. Guidelines for the Management of Accidents

a) Fainting:

The needles should be removed immediately, and the patient allowed to lie flat with the head slightly lower. Generally, allow the patient to recover on his/her own unless unusual signs of distress are evident.

b) Stuck Needle:

For nervous patients, the practitioner should give reassurance, ask the patient to relax their muscles, then massage around the point. If the needle is still held fast, insert another needle nearby so as to relax the muscle. Turn needle slightly in the opposite direction until it becomes loose, then withdraw it.

c) Broken Needle:

- i) Ask the patient not to move so as to avoid causing the broken part of the needle to sink in deeper.
- ii) If a part of the needle is still exposed above the skin, remove with forceps.
- iii) If it is on the same level with the skin, press tissue around the site gently until the broken end is exposed, then remove with forceps.
- iv) If it is completely under the skin, refer for emergency treatment.

7. Management of Inadvertent Injury to Important Organs

- a) *Injury of the lung, heart, liver, spleen, kidney:* The patient should be immediately transported for emergency medical care if there are any signs of an injury to these organs (e.g.: pneumothorax, internal bleeding). Prior to the acupuncture treatment, examine the patient for any suspected organ enlargement.
- b) *Brain and spinal cord:* If any neurological symptoms occur, needles should be

withdrawn and patient should be transferred immediately for emergency medical care.

- c) *Blood vessels:* Extra care should be taken when inserting needles in the vicinity of large blood vessels. If persistent bleeding occurs, call for emergency medical care (special care with SI 17 over carotid body).
NOTE: Special care should be taken during insertion and manipulation of the needle with Governing Vessels points GV 15, GV 16 to avoid injury of the brain and spinal cord. Scalp needle acupuncture should be avoided in children before fontanelles have closed.

- 8. Safety issues with the use of electrical stimulation
 - a) Electro-acupuncture is contraindicated for patients with pacemakers or other electronic implants.
 - b) Since electrical stimulation may interfere with the action of the heart muscle, it is prudent not to apply electrical stimulation from one side of the chest across to the other side of the chest (front to back, or side to side) in the region of the heart.
- 9. Safety Concerns with the use of Moxibustion
 - a) Generally do not use moxa in hot, febrile diseases.
 - b) Limit the use of moxa in hypertension, especially in the head and neck.
 - c) Do not use direct moxa on the face, breasts, over large blood vessels and tendons.
 - d) Be cautious about the use of moxa on the abdominal area in pregnancy.
 - e) Be especially careful to avoid burns when using moxa on diabetics.