



Herbal Clinic Manual

Fall 2015

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Dear Intern,

Congratulations, you are entering your clinical internship! You can be confident that your hard work and classroom studies have readied you to practice your herbal diagnostic skills in the school's clinic. Our goal is to provide you with a solid clinical training that prepares you for your next step - a career as a professional and effective practitioner of herbs. We also want it to be an enjoyable experience for all parties involved in the clinical program, including the faculty, administration, interns, and the patients, who choose to be treated in our clinic.

In addition to effective clinical training, we must always provide superior patient care. The care we provide patients will reflect positively on the acupuncture profession as a whole, and on our school, ensuring a bright future for the profession of Oriental Medicine. The Eastern School, as well as the individuals who have chosen you to treat them, have entrusted in you, as an intern, that you will treat patients with respect. We are confident that you will be kind and courteous to all of the patients, and conduct yourself in a professional manner at all times. Finally, to assist in the smooth functioning of the clinic, we ask that you respect and cooperate with all clinical staff, your fellow interns, and the policies and procedures set forth in the pages that follow.

Again, congratulations and good luck! Thank you in advance for your cooperation.

Sincerely,

Julie Puretz

Introduction

The Clinical Internship is the final component of your clinical training at the Eastern School of Acupuncture. By the time you reach the end of your second year as an Eastern School student, you will have completed the course work necessary to allow you to practice acupuncture safely and effectively in a supervised clinical setting. As a Clinical Intern, you will be asked to call upon your theoretical knowledge and developing clinical skills to approach patients as a compassionate, responsible, and respectful health care provider. This portion of the program is the transitional step between your life as a student and your life as a practitioner of acupuncture.

The Eastern School of Acupuncture's Intern Clinic is located at 440 Franklin Street, Suite 550 on the 5th Floor, Bloomfield New Jersey 07003. An externship clinic is located at the VA Hospital, 385 Tremont Ave., East Orange, NJ.

Using This Manual

This manual was designed to be your guide and reference to your clinical training as well as to the Eastern School of Acupuncture Intern Clinic. It contains information about policies and procedures, patient protocol and file set up, grading and evaluation, graduation requirements, as well as other valuable information.

Please note that policies and requirements contained in this manual may change during your time in clinic. Any updated information will either be included in an appendix of Clinic Manual Updates at the back of this manual, or in the form of a revised and updated manual. You will need to refer back to this manual often.

1. Clinical Objectives:

- I. To become more confident in your assessment skills and TCM diagnostic ability with both simple and more complex patients.
- II. To engage in outside research and continued studies in reference to your patients.
- III. To demonstrate and become confident in the ability to develop and implement an herbal treatment plan along with continued management of the patient.
- IV. To be able to identify various forms of herbs, indications and side effects of herbs and contraindications of herbs with pregnancy and Western pharmaceuticals.
- V. To demonstrate the ability to identify a need for modification of an herbal prescription.
- VI. To be able to appropriately make referrals in a timely manner.

2. Your Clinical Education:

There will be no exceptions to any of the following Clinic Prerequisites unless approved by the Academic Dean, the Clinic Dean and the Director of the school. Students may not reschedule Clinic Orientation unless they have approval from the Academic Dean, the Clinic Dean and the Director of the school, are in good standing both in terms of financial and academic obligations, and pay a fee that will be determined at the time of rescheduling.

2.1 Prerequisites for All Clinical Internship

- I. Successful completion of the following courses:
 - A. Materia Medica
 - B. Herbal Formulas (co-requisite)
 - C. Asian Nutrition (co-requisite)
 - D. Classical Texts (co-requisite)
- II. Attendance at the scheduled Clinic Orientation
- III. Successful completion of the Clean Needle Technique National examination.
- IV. Successful completion of Adult CPR certification valid to cover the clinical internship period.

2.2 Length of Clinical Internship

The Clinical Internship consists of 286 hours and is designed to be completed in 12 months. **Students finishing clinical requirements early will not be graduated early and will not be allowed to stop attending their shifts because clinic internship requirements have been met**. The internship class is 12 months in duration, and all shifts must be completed. Failure to do so will affect the final clinic grade and may negatively impact graduation.

If a student's attendance, lack of patient contacts, or disciplinary action such as suspension from the clinic cause attendance past 12 calendar months, the student will be allowed a one month grace period in which to schedule make up shifts at no additional charge. If additional shifts are needed after the one month grace period, the student will be required to pay additional tuition fees.

If a student remains in clinic beyond the one month grace period, they must request approval from the Clinic Dean and Academic Dean by submitting a target end date and plan for completion of hours. Once approved, the student must meet with the bursar to develop a contractual agreement for additional tuition fees.

Students who take more than 12 months to finish their internship must adhere to all clinical rules, including late and attendance policies.

2.3 Leave of Absence

An intern may apply for a leave of absence through the Academic Dean in case(s) of illness, pregnancy, bereavement, or other family emergency. Your request will be discussed with you and decisions will be made on a case by case basis. An individualized and specific plan will be formulated. An intern will be required to complete a Clinical Enrollment Addendum form that will state the school's policy as it applies to their situation and the intern will be required to sign it. If leave requires that an intern remain in clinic past 12 months the intern will be charged a 3 credit Student Matriculation fee per month until all clinic requirements are complete. The school cannot guarantee the availability of specific shifts upon the interns return.

3. Clinical Faculty Supervision:

3.1 Supervision Protocol

During clinic hours, a Supervising Licensed Acupuncturist certified to practice Oriental Herbal Medicine will be present at all times. All treatments provided at the Eastern School's Clinic must be authorized by the Supervisor and documented in the patient's chart. The Clinic Faculty will assess each Intern's intake and tongue and pulse exam, herbal diagnoses, nutritional and lifestyle change recommendations for final approval. If an Herb Intern is needling, all acupuncture point prescriptions and point locations must be approved by Clinic Faculty prior to insertion of needles.

3.2 Communication With Clinical Faculty

In order to obtain the highest learning objectives, it is necessary that there be an open, respectful, productive and professional dialogue maintained between Clinical Faculty and Intern. If you do not agree with Clinical Faculty's assessment of the patient calmly and clearly present your point of view so it can be discussed once you are back in the consult area. If Clinic Faculty does not support your approach, it is not appropriate to continue to argue the point. Proceed with the treatment plan Clinic Faculty has approved. If you have continued disagreement with Clinical Faculty, please communicate this with the Clinic Dean. Above all else, while in the clinic please treat your Clinical Faculty Supervisor with the respect that their years of experience deserve and understand that theirs is the last word regarding patient treatment.

Note: though the 'Herb Certificate Program Intern' may be an L.Ac. – that status is not applicable in the clinic. The Intern is to work with the Clinical Supervisor to report all clinical findings and to formulate a diagnosis and treatment principle that results with an herbal prescription that is appropriate to the patient.

4. Grading and Evaluation:

You will receive quarterly evaluations from the Clinical Faculty with whom you interact most often on your assigned shifts. These evaluations will evaluate clinical performance, i.e. preparation, patient rapport, diagnostic skills, and completion of assignments. Recommendations made during an evaluation will be monitored throughout the remainder of the term.

4.1 Patient Referral Requirements

Herb Interns are required to refer five patients for the year to the Student Clinic. You can obtain a copy of the Patient Referral Form from clinic reception to document your referrals. These forms will also be kept in your patient chart. Each of the five patients you refer receive their first visit in the clinic at no cost.

4.2 Internship Evaluation Criteria

- I. Knowledge of theoretical concepts measured by your ability to arrive at a clear diagnosis based on the following: Zang Fu, Qi, Blood and Body Fluids, 4 Levels, 5 Phases, etc.
- II. Knowledge and familiarity of herbs, their forms, indications, dosing, application and ability to communicate clear instructions on herbal preparation to the patient.
- III. Awareness of contraindications of herbs with Western pathology and pharmaceuticals.
- IV. Ability to assess and reassess patients (observation, questions, tongue, pulse, palpation) and make appropriate herbal prescription modifications.
- V. Your relationship with your patients and your overall approach to the clinical setting. This includes your ability to communicate effectively with patients, to answer their questions about their health care in general, as well as about herbs specifically, to deal appropriately with patient psychological and emotional issues, and to professionally interact with your Clinical Faculty, other Interns and Clinic Staff. This also includes attendance, punctuality and professional responsibility during your shift.
- VI. Accurate documentation in the medical records, HIPAA compliance and thorough completion of all required forms and paperwork.

VII. Completion of all assignments given by Clinic Faculty such as reading assignments, research, essays, papers, knowledge of topics that are to be discussed.

4.3 Poor Performance

Following a quarterly evaluation, if you are judged by a Clinical Faculty member to be unable to meet the evaluation criteria, you will need to demonstrate improved skills through outside assignments. The Clinic Dean and Clinical Faculty will determine if you have adequate skill to remain in clinic while participating in review, or if you need to participate in review prior to returning to any clinic shift. Outside assignments may include but are not limited to the following:

- topic specific tutoring with faculty members or school approved tutors
- participation in additional Clinical Skills classes, case review classes, or by assisting another intern or acupuncturist.

Upon completion of this remediation process, you will be required to demonstrate proficiency in those skill areas initially deemed inadequate.

After two failures, you may be withdrawn from the clinic permanently, and therefore from the Eastern School of Acupuncture program altogether. If you fail a quarterly evaluation or are removed from a clinic shift for any reason, you may be removed from all clinic shifts you are currently registered for.

In addition, an intern may be removed from the clinic at any time for failure to perform adequately academically or for inappropriate or unprofessional behavior.

4.4 <u>Student's Clinical Self-Evaluation Forms</u>

Self-Evaluation forms are utilized for self-assessment to identify student's areas of concern and as an aid in defining areas that need specific attention. They are to be completed quarterly, though the Clinical Faculty may request that a student fill out this form at any time. Once complete, the form is handed to the Clinic Faculty and a plan of action is formulated to assist the students in addressing any areas of concern.

4.5 Final Grade

Your final clinic grade is based on Clinical Faculty's assessment of your performance as seen in your quarterly evaluations, as well as Clinical Assignments that are due throughout the year. These assignments and the dates they are due are given at the beginning of your Clinical Internship in Orientation.

The Clinic Dean will give the final passing grade of the Clinical Internship provided that the requirements of all the aforementioned assignments are met in full. The Clinic Dean has the right to modify or add assignments / examinations and assessments, as needed.

5. Clinic Attendance Requirements and Policies:

Continuity of patient care and the smooth running of the clinic are dependent on student's attendance. You are required to sign in and sign out for each clinic shift, noting the time of your arrival and departure. If you do not sign in or out for a shift, you will not be given credit for attending that shift.

If you are going to be absent you must call the clinic and inform them that you will be absent (973-746-2848). You must then notify the Clinic Dean and make the effort to find coverage. Failure to call will result in disciplinary action. More than three absences may require a meeting with the Clinic Dean. Chronic absences (with or without a doctor's note) will result in a two-week suspension or possible removal from your clinic shift.

If you do not come to clinic on your assigned day and do not call, this is a serious infraction and you will be required to meet with the Clinic Dean for a disciplinary hearing. The consequences for failing to show without notification can be as severe as suspension and in the case of multiple offenses, dismissal.

5.1 Excused Absence

An Excused absence is the only absence for which there is no grade penalty. However, if a student exceeds more than three absences - Excused included - on any given shift, they risk removal from that clinic shift. If a situation arises in which a student must miss a clinic shift, the absence must fall under one of the following categories for it to be considered an excused absence:

I. Emergency Situations: You must notify the clinic immediately if possible, within hours of the event or within 24 hours of a severe emergency. This applies to the following:

This applies to the following:

- Illness or Medical emergency: Receipt or discharge summary from physician or hospital is required to document an excused absence for medical reasons.
- Family emergency or death in the family: Some manner of appropriate documentation of the emergency may be requested.
- Weather or emergency related closings: Interns are responsible to make-up any clinic days missed. All decisions regarding clinic closure will be finalized by 6:30 a.m. on the morning of the closure and by 12:00 p.m. on that day for evening appointments. Information will be posted on the clinic's web site, on the voicemail of the clinic, and in addition all students will be notified by text of such closures. A general rule of thumb is if the state colleges are closed for inclement weather, Eastern generally will follow suit. If you live at a distance from the school and the weather there precludes you traveling safely to school despite the school's clinic remaining open, you are responsible to call the clinic and also contact the Clinic Dean and inform them of this situation.

II. Holidays: Religious holidays are excused, but you must inform the Clinic Dean and the Clinic Staff **at the time of registration for that shift before the semester begins** what those holidays are and on what days you will not be attending clinic. If you do not give notice at the start of the semester, the holiday will not be considered an Excused absence.

III. Planned Absence: Such absences, with proper notification and the procurement of a substitute, will be allowed up to three times per shift each semester. **If a student exceeds the three absence limit, they are at risk for being removed from the shift for the semester.** The proper protocol for a planned absence is:

-Inform the Clinic Dean and Clinical Faculty in writing **at least two weeks in advance** of of your planned absence.

-Arrange to have another Intern cover your shift and inform the Clinic Dean and your Clinical Faculty of the substitution. This substitution has to be approved by the Clinic Dean **at least two weeks ahead of the substitution taking place.** Without a two-week window, the substitution will not be granted. Three shift substitutions per semester will be allowed.

If you cannot find another student to arrange a switch or substitute for you, you can still request a day of absence at least two weeks ahead of the planned absence. **Only one such excused absence in which an exchange or substitution was not possible per semester is allowed.** After this one allowed excused absence with no exchange/substitution, any other such absences will be counted as Unexcused.

IV. Other Absences: Various other absences as follows are excused. Interns must notify their patients, the Clinic Staff and the Clinic Dean at least TWO WEEKS in advance for:

-legal appointments, court dates, jury duty and mandatory military duty.

You may be requested to show documentation of these events.

5.2 Unexcused Absence

All absences that do not meet the above criteria for excused absence are considered unexcused. This also includes the lack of proper notice for an excused absence or failure to secure a substitute as presented above.

5.3 Penalty For Unexcused Absence

Two unexcused absences on the same shift will result in one full grade reduction. An "A" grade would become a "B". Three unexcused absences on the same shift will result in the final grade being lowered two full letter grades. Depending upon clinical performance, this could result in failure of the clinic shift and the need to repeat the shift.

Students with more than three unexcused absences total in a semester will receive an "F" for that clinic shift, will not receive credit for hours accrued on that shift, and must meet with the Clinic Dean, the Academic Dean and the Director of the School.

5.4 Lateness/Early Departure

Interns must arrive by the scheduled start of the shift. If you are late more than 15 minutes to your clinic shift, you will be marked "late". Two late arrivals on the same clinic shift will be considered an Unexcused Absence and the above rules pertaining to penalty for unexcused absences will apply.

Lateness of more than 30 minutes will be counted as two late arrivals - ie; one Unexcused Absence.

In the case of a true emergency, it is expected that Interns will make every effort to notify the clinic and Clinical Faculty if they have run into circumstances beyond their control that cause them to be late. If "emergency occurrences" happen with relative frequency (more than twice a year), then these occurrences will not be viewed as unavoidable delays but cases in which the Intern needed to allow more traveling time and they will be treated as Unexcused Absences based on the above criteria.

Interns are not to leave their clinic shift before the time it officially ends without obtaining prior permission from the Clinic Dean. Early Departure will be treated the same as Lateness - if you leave more than 15 minutes early, you will be marked as Early Departure. Two Early Departures on the same clinic shift will be considered an Unexcused Absence. Leaving the clinic shift 30 minutes or more early will be considered an Unexcused Absence.

You are expected to arrive on time and be present for your assigned hours from beginning to end, whether or not you have patients scheduled. Time not spent treating should be filled with activities such as treatment room preparation, record updates, case discussion and research.

Interns must ask the permission of the Clinic Faculty and notify the Receptionist before leaving the Intern Clinic for any reason. Please note that leaving clinic to put money in parking meters, move your car or obtain food is not acceptable behavior. There is long term parking available close to school, and you should bring any meal required with you to your shift. Plan ahead.

5.5 Make Up Shifts

Interns are **required** to complete all make up hours during the term in which the absence occurred. In the event that a student is unable to make-up missed shifts in a timely fashion, it may result in a delayed graduation date or having to take an additional semester of clinic and the accrual of additional tuition charges.

If you need to make up missed clinic time, you may do so in one of two ways:

- Register for a make-up shift. A pink Shift Make-up slip must be completed and submitted for approval. This requires the approval of the Clinic Dean and must be done at least two weeks in advance of the date on which you wish to make up the shift. Herbal Interns must complete a make up shift with a designated Herbal shift.

-Substitute for another intern who cannot attend a shift due to a planned absence. This requires the approval of the Clinic Dean at least two weeks in advance of the date on which you wish to make up the shift.

All Interns must notify the Clinic Dean in writing for make-up shift assignments or substitutions. If you do not gain prior approval in writing, you will not receive credit for the shift.

Under no circumstances are you allowed to come to the clinic to make up a day without having made prior arrangements.

When you make up a clinic shift, be sure to sign in on the Clinic Attendance Sheet by adding your name at the bottom of the sheet. If you do not sign in, you will not receive credit for the shift.

5.6 <u>Recording Attendance</u>

Students are required to sign in at the beginning of each clinic shift on the Clinic Attendance Sheet, and to sign out at the end of the shift. If you do not sign in and/or out for your clinic shift, you may not receive credit for those hours. If you are making up a shift, add your name to the Clinic Attendance Sheet and sign in and out as outlined. If you have not received prior approval from the Clinic Dean to attend the clinic shift, you may not receive credit for those hours. It is not enough to have the approval of a Supervisor or the Clinic Staff to attend a shift. You must receive prior approval, in writing, from the Clinic Dean in order to obtain credit for those clinic hours.

6. Intern Responsibilities:

As an Intern, you are expected to take your commitment to your clinic shifts very seriously. Your professional credibility is affected by your appearance, professional behavior, conduct and attitude toward patients, the Clinical Faculty, fellow Interns, School and Clinic administration and Office Staff. The following section outlines the responsibilities of each Intern while participating in the Eastern School of Acupuncture Intern Clinic.

6.1. General Rules

- I. At no time may an Intern provide acupuncture or prescribe herbs to a Patient without prior approval from the Clinical Faculty as documented in the patient file.
- II. At no time may an Intern provide acupuncture or prescribe herbs to a Patient without a NJ licensed practitioner on-site.
- III. As an Intern, you are treating/prescribing herbs to Patients under the license of the Clinical Faculty on that shift. Any and all other licensures that enable you to provide other treatment modalities are not considered while you are an Intern, including Licensed Acupuncturist. While you may be asked to perform acupuncture and are expected to do so if necessary, point prescriptions must be TCM and must be approved by the Supervisor prior to administration.
- IV. An Intern may never give advice of any kind outside of the scope of acupuncture and/or Oriental Medicine to Patients. Any advice or recommendations given that are prescriptive in nature must be done while on the premises of the Eastern School of Acupuncture Intern Clinic, approved by your Supervisor and documented in the Patient's chart.

- V. Interns are not allowed to confer with Patients about their treatment outside of the clinic and without clinical supervision. All contact with Patients should occur on clinic grounds or via the phone in the clinic area, with the appropriate Phone Notes Form filled out and added to the Patient's file documenting the content of the contact.
- VI. While in the Intern Clinic, you may only practice the modalities learned as a part of the curriculum of the Eastern School of Acupuncture. These are limited to: acupuncture, moxibustion, cupping, electrical stimulation, heat lamp, Plum Blossom massage, tui na, gua sha, bleeding, massage and Qi gong, and prescription of herbal medicine, dietary and lifestyle change recommendations.
- VII. Referrals to other health care practitioners require the approval of the Clinical Faculty before being given to the Patient, and must be documented in the Patient's chart.
- VIII. Interns may not practice skills or methods learned in continuing education or elective courses such as cranial sacral therapy, Reiki, Korean acupuncture, Hari, or other bodywork or TCM modalities not taught in the Eastern School of Acupuncture curriculum.

IX. When working with a partner, <u>both</u> Interns must be present for the intake, case discussion and treatment of the Patient in order to receive credit for the patient contact.

6.2 Dress Code

You must wear professional clothing, maintain personal hygiene and conduct yourself in a professional manner, at all times. **Interns are required to be dressed in no less than business casual attire.** Women may wear dresses, slacks and skirts with blouses or sweaters. Spandex or tight fitting leggings without a long skirt or tunic are not allowed. Revealing neckline, midriff, and skirt lengths, including mini-skirts are to be avoided. Men may wear casual pants (such as Khakis or cords) with collared dress shirts or collared polo style pullover shirts. Blue jeans/denim are not appropriate. Open toed shoes, sandals, heavy work boats and athletic attire are also not considered professional, nor are shorts, bare midriffs, clothes with ragged edges or holes , hats, or clothing with slogans, cartoon characters, etc. Please remove face/tongue jewelry. Nails should be short in length and well manicured. The overall aim is to look professional and modest. Shoulder length hair should be tied back, hair should be clean and neatly groomed. Men should either be clean shaven or have trimmed beard /facial hair

As an intern you must wear a white lab coat and a name tag identifying you as an OM Intern. Name tags will be provided for you by the Eastern School of Acupuncture Intern Clinic on your first day; however you are responsible for supplying a lab coat. You are also responsible for keeping your lab coat clean and professional looking. In the event that you lose your name tag or your name tag no longer looks professional, please alert the Clinic Receptionist to request a replacement.

If what you are wearing is not considered appropriate, your Clinical Faculty will let you know, i.e. no blue denim,. Your Clinical Faculty can decide to have you go home to change if you are dressed inappropriately. You will be responsible for making up the time missed. If you are questioning the appropriateness of what you are choosing to wear, wear something else.

To accommodate the health needs of Patients, Staff, Faculty and Interns who may have allergies or chemical sensitivities, the Eastern School of Acupuncture Intern Clinic is designated as a scent free facility. **Please do not wear any perfume or scented products while working in the clinic.**

6.3 <u>Cell Phone Use</u>

Other than for use of Reference Applications that directly relate to clinic, cell phones are not allowed in the clinic at any time. Family members should be given the number to the Intern Clinic and be instructed to use it in the event of an emergency, only.

Please remember that Clinical Internship is a class that must be passed in order to graduate. In the same way that you are not allowed to take or make phone calls in a classroom, you are not allowed to take or make personal phone calls while you are completing time at the clinic. The clinic phone is primarily for use of the Reception Staff and Clinic Faculty in the performance of school related duties. No student is to make long distance calls from this phone.

6.4 <u>Recording Clinic Hours</u>

On the first day of the term you should start a Student Record of Treatment and Assist Form. As these Record of Treatment and Assist Forms are completed, they are to be turned into the Registrar. This is your major form of documentation for recording both your patient treatment numbers and calculating the number of new patient conditions treated. It is the intern's responsibility at the end of each clinic shift to see that your treatment numbers have been properly recorded. It is highly recommended that you make a copy of each Student Record and Treatment and Assist Form for yourself before turning in a copy to the Registrar.

Please note that students will not receive credit for shifts where they have not signed in and signed out on the attendance log. Given that patient treatments are expected to begin and end on time, students will not be given extra time credit if the last patient of the day causes the Interns to leave after the scheduled end of the clinic day. You will only receive credit for the allotted time of the clinic shift, nothing before or after that time frame. If you arrive late or leave early, you will not receive credit for that time missed.

6.5 <u>Time Management</u>

Show professional courtesy and establish good practice management policies by beginning and ending treatments at scheduled times. If you are having difficulty meeting time management goals, please work with your Supervisor to refine this skill. If your Patient arrives more than 15 minutes late for treatment, you have the option to refuse treatment or give a moderated treatment - work with your Supervisor to determine which course of action is best. If a treatment is started late, it should still end at the time it was originally scheduled to end.

6.6 Record Handling

Patient charts are legal documents and all information contained within them is confidential and cannot be shared or discussed outside the context of the clinic environment. Only Interns, their Supervisors and other students on the shift should have knowledge of the Patient's chart. Never discuss cases in public areas, use Patient names or identifying information when discussing cases,

share any details about the Patient's condition with Clinic Staff members or disclose that a Patient is visiting the clinic. Under no circumstances should Patient charts be removed from the area of the clinic consult area or treatment rooms, or be photocopied. Failure to return charts at the end of the clinic shift, removal of charts from the designated clinic areas or any breech of Patient confidentiality are serious violations and will result in disciplinary actions.

6.7 Patient Confidentiality

Interns should confine all discussion about a Patient's treatment to the consult area or treatment room. Please be discreet when discussing Patient issues: keep your voices down, and never discuss a case in the hallway or outside of the clinical / educational setting.

Never ask Patients about their conditions outside of the treatment room. If a Patient starts to volunteer information prior to reaching a treatment room, it is your responsibility to redirect or end the conversation until you have reached a private space.

In order to ensure Patient confidentiality and in compliance with HIPAA standards, **no information may be photocopied from the Patient files, including follow-up forms.** All identifying information (such as name, specific place of employment etc.) must be omitted when presenting cases outside the clinic for papers or classroom discussion. All notes for class work must be hand copied from the files. Under no circumstances are files to be removed from the clinic. Interns who need to work on files or cases may come in during clinic hours of operation and sign out a Patient record for use.

Do not speak openly about a fellow classmate's treatment at the clinic unless you have that person's expressed permission to reveal the confidential aspects of their health history to the group for learning purposes, only.

6.8 Patient Consideration

Greet your Patient by name using the appropriate title (ie; Mr, Ms. Dr etc...) in the waiting room and escort them to and from the treatment room. Do not allow Patients to wander unattended around the clinic or into unauthorized spaces, and at all times keep your voices low to avoid disturbing others.

Be professional in your dealings with Patients, and be thoughtful of their physical and emotional needs. The treatment room door should not be a 'revolving' one. Once in the room, try to stay in the room to avoid disrupting the Patient and the treating Interns. <u>Always</u> knock before entering a treatment room. Interns should decide before entering the treatment room who will carry out which aspects of the treatment. Only the Interns assigned to a Patient should be in the treatment room, unless otherwise approved by the Clinical Faculty. While with a Patient, there should not be side conversations occurring amongst members of the Intern team.

At all times you should respect your Patients' modesty. Always leave the room when your Patient is changing and allow them plenty of time, and always knock before entering the treatment room.

Absolutely no tips are accepted at the Eastern School of Acupuncture Intern Clinic.

6.9 Disciplinary Actions

Student conduct policies and academic policies, as outlined in the Eastern School of Acupuncture Student Handbook, apply to the Clinical Internship/Assistantship/Observership. If these policies have been adjusted for application to the Clinical Internship/Assistantship/Observership, they have been outlined in this Clinic Manual.

Prior to entering clinic, all clinical Interns have signed a 3^{rd} Year Enrollment Agreement, stating that they have read, are familiar with, and agree to abide by the guidelines in the Clinic Manual. In addition, Interns are required to be familiar with the Eastern School of Acupuncture Student Handbook.

Breaches of Clinical/Eastern School of Acupuncture protocol on the part of an Intern/Assistant/Observer may be responded to with either an Area of Concern Form or a Clinical Warning, depending upon the severity of the breach. The Clinic Dean or Clinical Faculty submits these disciplinary reports for inclusion in the student's file.

Incidents that may generate an Area of Concern Form include but are not limited to:

- Inappropriate attire
- Using foul or vulgar language in clinic
- Arriving late to clinic
- Leaving clinic early or for too long a time period
- Not attending case review
- Inappropriate interactions with Clinical Faculty/other Interns/Staff/Patients
- Incomplete record keeping
- Using perfume or scented products while working in the clinic
- Not wearing a name tag
- Leaving cups soaking overnight
- Failing to properly prepare a room for patient treatment
- Leaving a treatment room in disorder after use
- Failing to properly clean a room at the end of a scheduled shift
- Using an unassigned treatment room without authorization from the Clinical Staff
- Disruptive behavior
- Leaving a needle in a patient
- Burning a patient with moxa
- Leaving needles in the massage tables or on the floor
- In any way not following Universal Precautions or failure to practice Clean Needle Technique, OSHA, or HIPAA compliance laws.

The Clinic Dean will review Area of Concern forms and take appropriate action. This will become part of the student's file.

Incidents that may generate a Clinical Warning include but are not limited to:

- Being absent from clinic without informing the appropriate parties
- Rendering treatment without pre-approval from Clinical Faculty
- Changing treatment without approval of Clinical Faculty
- Giving advice outside the scope of acupuncture to patients
- Repeated failure to prepare cases
- Contact with patients/Clinical Faculty outside of the clinic, except as outlined in the Internship Handbook
- Failure to adhere to directives of Clinical Faculty or the Clinic Dean (insubordination)
- Being sent home from the clinic for any reason (including inappropriate attire)
- Disruptive or Unprofessional behavior (including, but not limited to):
 - o breech of patient confidentiality (including discussion of patient information outside of the clinic review room)
 - o falsifying any records pertaining to clinic operations (including misreporting the number of clinic hours fulfilled by a student intern);
 - o verbally lying about any clinical situation
 - o chronic lateness or absenteeism
 - o treating patients while under the influence of any substance which has impaired your thinking or faculties (i.e., illicit drugs, alcohol)
 - o treating patients when you are emotionally or psychologically disturbed
 - treating patients while they are under the influence of illicit drugs, inebriated, or are severely emotionally or psychologically disturbed (consult with Clinic Faculty, appropriateness of treatment will be determined on a case by case basis)
 - o failure to consult Clinic Faculty prior to administering any treatment (including giving an acupuncture treatment, or giving herbal, nutritional, exercise, or other advice, which was not pre-approved by the Faculty)
 - o refusal to comply with the clinic dress code
 - o photocopying or removing patient records from the clinic
 - o any mistreatment of a patient, fellow clinic intern, or clinic staff
 - o theft of patients' personal items, or clinic supplies
- Failure to fulfill academic requirements:
 - Incompetence knowledge or skills are not sufficient for the competence that is required during the student's clinical internship. In this case, student interns will be required to demonstrate required competencies under the observance of the Clinic Faculty. A written evaluation, which becomes part of the students' permanent records, will be provided to the student and school officials. The Clinic Faculty and the Clinic Dean will determine an instructional action plan for any student who receives a poor evaluation in an attempt to raise the student's competency to the required level. In the case of gross incompetence, there is obvious concern for the patients' and the student interns' safety, and therefore, a verbal warning is **not** required and immediate suspension from clinic will result. The student intern will not be re-admitted to work in the clinic until he/she is able to sufficiently demonstrate acceptable levels of competency. The Eastern School may, at its discretion, expel any

student for incompetence.

- Insufficient documentation of treatment administered (clinic forms must be completed thoroughly by students, and items contained on the forms that do not pertain to the patient should be marked N/A (for not-applicable), but should never be left blank)
- Failure to complete treatment documentation on the same day the treatment was carried out.
- Refusal to be the clinic team leader when it is his or her turn to do so (the team leader leads the patient to the treatment room, ensures the patient's file contains all the requested information and documents, leads the discussion of the patient's case history in the review room prior to entering the treatment room, asks any additional questions of the patient which have been determined necessary, and carries out the acupuncture examination (inspection of the tongue, palpation, including pulse) in order to determine appropriate treatment.

Depending upon the severity of the infraction, further action may be taken as a result of a Clinical Warning, including but not limited to a convening of the Disciplinary Committee (includes the Academic Dean, the Clinic Dean and Clinical Faculty), whose action may include suspension from the clinic or dismissal from the program.

Any updates in the Student Handbook policies supersede those excerpted in the appendix of this handbook.

7. Clinical Procedures:

7.1 Intern Arrival

Upon arrival, immediately sign in on the daily attendance sheet, change into your lab coat and begin setting up your treatment room if you will be performing acupuncture. Check the daily assignment schedule and pick up your charts from reception. In accordance with HIPAA requirements you must keep your file either in the clinic consult area or with you in the treatment room at all times. Under no circumstances are the files to be taken outside the student clinic or left in any area of the clinic other than the clinic consult space. Any misuse of files will result in a two-week suspension from clinic. Files are to be pulled and re-filed by the Clinic Receptionist or Clinic Faculty only.

7.2 Patient Treatment Logs

Interns must have their patient treatment log signed by the Clinical Faculty each time they work in clinic. The sheets must be signed on the day the Intern worked in clinic. Upon completion of a documentation sheet (after every 25 patients treated), the Intern MUST complete all required data at the top of the sheet. Please submit this form to the Registrar.

7.3 Working With A Treatment Partner

All clinic shifts that have more than four Interns will pair the Interns into teams. This is done to maintain the 4:1 Patient/Clinical Faculty ratio. Throughout a given shift, clinic partners remain together during the intake, assessment, diagnosis, and treatment of patients.

Herbal Interns will not provide acupuncture if they are partnered with an Acupuncture Intern.

Herbal Interns are expected to provide acupuncture to patients in the clinic when:

- They are partnered with another Herbal Intern
- They are assigned to a treatment room without a partner.

Please note: Clinical Faculty will consider all options with regard to scheduling to minimize the time Herbal Interns will be needling. Herbal interns will be asked to needle only when there are less than 4 Acupuncture Interns present on the shift.

7.4 Herbal Intern partnered with Herbal Intern:

Attention: Any and all licenses an Herbal Intern possesses will have no bearing in the ESATM student clinic and will not be considered during internship. Interns are not permitted to use any modality of treatment other than acupuncture and herbal medicine in the ESATM student clinic.

All Herbal Interns will receive approval prior to rendering of treatment from the Clinic Faculty for both the acupuncture portion of the treatment and the herb consult/prescribing of herbs.

One Herbal Intern will be deemed the Lead Intern that will complete both the acupuncture portion of the treatment and the herbal consult. The Assistant Herbal Intern will only assist in the Herbal consult. Although both of you are responsible for the safe and appropriate provision of acupuncture, when the Supervisor is in another room, it is the Lead Intern's responsibility to have the team implement the treatment protocol specified by the Clinic Faculty. The Assisting Intern must be present throughout the entire treatment and the case discussion. Interns may not leave clinic, arrive late or do other non- treatment related work (such as homework) while their Partner is treating a Patient. Both of you are responsible for maintaining the appropriate level of professional medical care at all times.

Clinic Partners should communicate with each other as to how they would like their Partner to interface with them and with the Patient while they are treating. For example, some Interns welcome their Partner's additional questioning of their Patient after an intake while still in the treatment room, while others prefer for the Partner to ask additional questions of the primary Intern only after leaving the treatment room.

Both Partners should check the pulse/tongue/vitals. During case discussion with the Clinical Faculty, the Assistant Intern participates by listening and gives input or asks questions after the Lead Intern is finished.

For safety reasons and in order to best track needle counts, ONLY ONE Intern is to insert, remove and count needles. Both Interns should not be inserting and pulling needles. The Intern who is pulling needles should be the Intern who inserted them and should initial in the space provided on the chart.

Lead Herbal Intern's Role with an Assistant Herbal Intern

- Let your patient know you have an assistant, and introduce them. Patients are informed when they sign up at the Eastern School of Acupuncture Intern Clinic that they can expect to have several students with them for their treatments.
- You should allow the Assistant Intern to feel pulses and look at tongues. Let them know the most comfortable way that this will work for you logistically.

• You should allow the Assistant Herbal Intern time for further questioning after you are finished with your assessment and examination.

7.5 Herbal Intern partnered with Acupuncture Intern

Herbal Interns who are partnered with an Acupuncture Intern will not perform needling or any other accepted modality of treatment. The Acupuncture Intern will perform any and all acupuncture, moxibustion, cupping, electrical stimulation, heat lamp, Plum Blossom massage, tui na, gua sha, and bleeding treatments.

Herbal Interns should respect the Acupuncture portion of the Patient's treatment and of the Acupuncture Intern's treating experience. Herbal Interns should:

- wait to question the Patient after the Acupuncture Intern has completed their exam
- conduct pulse and tongue examination after the Acupuncture Intern has completed their exam
- not be disruptive in any way to the Acupuncture treatment process

Clinic Faculty may instruct Herbal Interns to:

- be present with the Acupuncture Intern during initial patient contact and conduct the herbal consult immediately after the Acupuncture Intern completes their exam
- conduct the herbal consult at another time during their appointment time

7.6 Shift Overview

Interns should familiarize themselves with the patient schedule for the day, in order to be properly prepared when the Patient arrives. The room assignment will be printed at the top of the schedule; most Interns are assigned to the same room for the duration of the shift. Look over the schedule carefully as it will list your appointments for the day as well as the times of the appointment.

Crossed out names on your schedule could indicate that your patient may have cancelled, inquire with the Clinic Staff.

New patients will be indicated with an NP circled on the schedule. Interns who are specifically requested will have their initials printed in the bottom of the appointment.

- If you have an open appointment slot in your schedule for the day, **do not** assume that it will remain open. Check the daily schedule throughout your shift to view changes.
- After the first treatment with each Patient, you should discuss the Patient's prognosis with your Clinical Faculty in regards to how often you would like this Patient to be seen in your clinic rotation. You should then convey this information to your Patient and help them to book their next appointment if they will be using Herbs as treatment.

In the event that Patients receiving acupuncture treatment do not wish to engage in Herbal Medicine, the Herbal Intern will complete a "Hypothetical" formula for every Patient they are scheduled to see. Interns will obtain all Patient information necessary to formulate an appropriate diagnosis, herbal prescription and treatment plan, and will review and discuss this with Clinic Faculty. The Intern will then complete the 'Hypothetical Formula' form and place in the Patient chart.

Herbal Intern providing Acupuncture to the Patient:

- I. The Lead Herbal Intern has the responsibility of retrieving the Patient's chart. A Patient's chart should be reviewed by the <u>entire Intern Team</u> prior to the Patient's arrival. Special attention should be paid to any medical alerts noted in the chart. Please note: it is the responsibility of the Receptionist to remove charts from the file cabinet.
- II. The Clinical Staff does not notify Interns when their Patients arrive. It is the Intern's responsibility to check the waiting area when they are expecting patients. Ask for your Patient in the waiting room by announcing their FIRST name only loudly and clearly. Do not announce their full name as it is a violation of Patient privacy. Before escorting your Patient to your treatment room, inquire if they need to use the restroom. Each member of the Intern Team should introduce him/herself to the Patient prior to beginning the interview.
- III. If the Patient has been treated previously in clinic, the Lead Herbal Intern should ask the Patient how he/she felt after the last acupuncture treatment and/or herbal treatment, and should document the Patient's comments in the chart. If the Patient is being treated in the clinic for the first time, then the Lead Intern should document all pertinent information that arises from the answers to the Team's questions.
- IV. When the Lead Herbal Intern has completed their interview of the Patient (which includes looking at the tongue and taking the pulse), the Intern should leave the room and meet with the Clinical Faculty. The Lead should explain the case to Clinic Faculty and relay the team's findings (i.e., pulse and tongue diagnosis). You are required to arrive at your diagnosis, treatment principle and treatment selection as much as you can **prior to discussing them with your Clinical Faculty.** This allows you to identify specific questions you have about your case. It also allows your Clinical Faculty to evaluate your skill and to identify where they can best instruct you and help you to learn.
- V. After meeting with the Interns, the Clinical Faculty will examine the Patient directly while the Interns observe. After the Clinic Faculty's examination of the Patient, the Interns and the Clinic Faculty will leave the treatment room in order to discuss the diagnosis, herbal formula and treatment plan in the conference area.

- VI. The Interns will then re-enter the Patient's exam room to administer the treatment approved by the Clinical Faculty. Interns are never to begin treatment of a Patient (needle, moxa, recommendation of herbal formula, etc) until the Clinical Faculty has met with you and approved the treatment. Interns may never change a prior approved treatment/herb prescription without discussion with the Clinical Faculty.
- VII. If the Patient needs to undress for the treatment, they will be given a drape or gown and the treatment team will leave the room allowing the Patient to undress in private. The Patient should always be asked if they have any questions and whether they are comfortable before treatment is started.
- VIII. The Clinical Faculty will check the point location and needle insertion performed by all beginning Interns. Once this has been done, the Interns will leave the room to write up the chart. The Lead Herbal Intern will write in the Patient's chart, while other members of the Team make their own notes of the case. Front and back treatments should not be performed simultaneously.
- IX. The Lead Herbal Intern must document the time that the needles were inserted, and the number of needles used both in the chart and on the Needles In/Out sheet posted in the treatment room. The needles must be removed at the determined time, in order to provide the best treatment to the Patient and to stay on schedule. Patients should be checked frequently while needles are in place and their progress monitored via observation, questioning and ongoing diagnostic assessment such as radial pulse palpation.
- X. At the appropriate time, the needles are removed and disposed of directly into the sharps container and the needle count should be matched by the Lead Herbal Intern to the number documented in the Patient's chart. This count is then documented on the Needles In/Out sheet in the treatment room using the Patient's initials only. Only one Intern should be inserting, removing and counting needles.
- XI. Once all needles have been removed, the Patient should be asked to get dressed and instructed to proceed to the reception desk. It is important to let a Patient know that the treatment is done, because some Patients are unsure and will remain in the exam room waiting for someone to return.
- XII. If follow up treatment is needed, it should be suggested to the Patient when it would be best for him/her to return - one week, two weeks, etc. and you should meet your Patient at the desk to help them schedule their next appointment. The need for follow up should have been determined when the Team consulted with the Clinical Faculty. Adjustments may need to be made based on the patient's situational needs (i.e., financial and time availability). Follow up recommendations and or alterations to those recommendations should be noted in the Patient's chart. The file is then signed, in ink (blue or black only), by the Clinical Faculty and the Team. The Lead Herbal Intern then returns the Patient's chart to the front desk. Only signed charts, indicating completeness and readiness for filing will be accepted by front desk personnel.
- XIII. Do not leave the clinic without checking to make sure that all signatures are on your Patient's chart. Failure to do so creates an illegal document.

Herbal Intern NOT providing Acupuncture to the Patient:

- I. All questions and examination, i.e, tongue and pulse, should occur at a time that is not disruptive to the Patient's acupuncture experience.
- II. If the Patient has started an herbal formula the Intern should ask the Patient how he/she felt since starting their herbal prescription, and should document the Patient's comments in the chart. If the Patient is being treated in the clinic for the first time, then the Lead Intern should document all pertinent information that arises from the answers to the Team's questions.
- III. When the Intern has completed their interview of the Patient (which includes looking at the tongue and taking the pulse), the Intern should leave the room and meet with the Clinical Faculty. The Intern should explain the case to the Supervisor and relay their team's findings (i.e., pulse and tongue diagnosis). You are required to arrive at your diagnosis, treatment principle and treatment selection as much as you can **prior to discussing them with your Clinical Faculty.** This allows you to identify specific questions you have about your case. It also allows your Clinical Faculty to evaluate your skill and to identify where they can best instruct you and help you to learn.
- IV. After meeting with the Interns, the Clinical Faculty will examine the Patient directly while the Interns observe. After the Clinic Faculty's examination of the Patient, the Intern and the Clinic Faculty will leave the treatment room in order to discuss the diagnosis, herbal formula and treatment plan in the conference area.

V. The Interns will then re-enter the Patient's exam room to recommend the herbal prescription and treatment plan approved by the Clinical Faculty. Interns are never to recommend/prescribe or advise any Patient herbal formulas or dietary changes until the Clinical Faculty has met with you and approved the treatment. **Interns may never change a prior approved treatment without discussion with the Clinical Faculty.**

7.7 Start of Shift Intern Set-Up Protocol

Herbal Interns who are providing acupuncture are expected to have completed the following tasks prior to beginning of shift:

- a. Sign in on the daily attendance sheet.
- b. Change into their iron pressed and clean lab coat with name tag.
- c. Check their room for adequate supplies, obtain any additional supplies from front desk.
- d. Disinfect the treatment table and wooden cart top and lay table paper once each surface is dry. Hospital grade germicidal wipes have been provided for this task.
- e. Check the paper towel dispenser to make sure that it is full.
- f. make sure that there is a bottle of hand sanitizer (filled).
- g. In areas there is a sink, make sure that there is a soap dispenser (filled).
- h. Establish a sterile field on the paper covered wooden table top. Lay out supplies according to CNT guidelines.
- i. Organize the other shelves of the wooden cart
- j. Ensure that the movable shelf of the sharps container doesn't contain needles by pushing the side levers forward to dump shelf contents.

- k. Visually check the sharps container through the plastic window to make sure that the 3/4 full line has not been exceeded. If exceeded, the intern should request the keys from the receptionist to see if "contents settling" is possible or replacement is necessary.
- 1. Visually inspect the floor of the treatment room for needles, tabs or guide tubes.. If needles are found, fill out an incident report and put it in the Clinic Dean's mailbox. Incident report forms are available from the Receptionist. Use Universal precautions at all times.
- m. Check the regular garbage to make sure that the can is empty and trash bag lined.
- n. Check the biohazard garbage to make sure that the can is empty and red bag lined.
- o. Request a Clinic Faculty inspection of the room.

Herbal Interns who are not providing acupuncture are not primarily responsible for the protocols listed above, however, may assist in the process and are expected to do so if it is conducive to the overall flow of the shift.

7.8 Post-Individual Treatment Clean Up Protocol

ALL members of the Intern team should clean up the patient room and prepare it for the incoming patient. Clean up includes the following:

- I. Disinfect the treatment table and lay new table paper once the surface is dry. Hospital grade germicidal wipes have been provided for this task.
- II. Re-establish a sterile field on the paper covered wooden table top. Lay out supplies according to CNT guidelines.
- III. Organize the other shelves of the supply cart according to the guidelines published in the Clinic Policy manual.
- IV. Ensure that the movable shelf of the sharps container doesn't contain needles by pushing the side levers forward to dump shelf contents.
- V. Visually check the container through the plastic window to make sure that the 3/4 full line has not been exceeded. If exceeded, the intern should request the keys from the receptionist to see if "contents settling" is possible or replacement is necessary.
- VI. Visually inspect the floor of the room for needles, tabs or guide tubes. If needles are found, use Universal precautions at all times. If you know that you are missing a needle and cannot locate it, inform Clinical Faculty immediately.
- VII. Check the regular garbage to make sure that the can is not overflowing and does not need to be emptied.
- VIII. Return all equipment to its normal place in the treatment room.
- IX. Double check that the Needle In / Needle Out sheet is complete.
- X. The "new" Lead Intern should then go out to greet the next patient and introduce the patient care team.

7.9 End of Shift Intern Clean Up Protocol

In addition to all steps listed in Section 7.8:

- Visually inspect the floor of the room for needles, tabs or guide tubes. If needles are found, fill out an incident report and put it in the Clinic Dean's mailbox. Incident report forms are available from the Receptionist. Use Universal precautions at all times.
- Take out the garbage and put a new garbage bag in its place.
- Check the biohazard garbage to make sure that the can is empty and red bag lined.
- Return all equipment to its normal place in the treatment room.
- Wash all doorknobs.
- Unplug all electrical items.
- Double check that the Needle In / Needle Out sheet is complete.
- Double check the patient bathroom (paper towels, soap and toilet paper), waiting room area (cups for water, CD player and music, magazines) and reception area (garbage, library book case and patient file cabinet)

Clinical Faculty should now do a walkthrough of all the rooms to make sure that everything is in order.

8. Charting Guidelines:

Documentation in a patient's chart must be legible and statements you record must be clear in meaning and concise in nature. All information that is pertinent to the patient's case must be documented, be it positive or negative. **Always** document the patient's and the patient's family's concerns, patient non-compliance to recommendations that were made, and unusual circumstances that occurred during or after treatment, including bruising, moxa burns, dizziness, and fainting

8.1 Ink Color/Acceptable Correction Methods

All documentation in a patient's chart must be made in **BLACK** ink. A patient's medical record is a legal document. Notes may not be written in pencil and correction fluid or tape may not be used when errors are made. Errors may be crossed out by making **a single line** through the portion that needs to be changed, then initial and date the change. Documentation, made in a patient's file, may never be destroyed or replaced with a rewritten account.

8.2 <u>Completion of Charts</u>

All requested information on all charting forms must be completely filled in. If something does not apply to the patient's case, simply write N/A, for not applicable, but **never leave it blank**. You should not be writing information outside of the available spaces. If you need additional space to document treatment, obtain an "Additional Notes" form from the front desk.

8.3 <u>Required Forms</u>

All interns and staff must assure that the following forms are complete and filed in patient's chart prior to beginning treatment:

- I. <u>Consent to treatment form</u>: once completed does not need to be updated. Remains in patient file.
- II. <u>Health History Questionnaire</u>: Must be *updated every calendar year*. However, you should review this form every term and whenever a patient is new to you it has lots of great information.
- III. <u>Eastern School of Acupuncture Office Policies</u>: filled out the first time the patient comes to the clinic.
- IV. 24 hour cancellation policy agreement: Once signed it remains in the patient's file.
- V. Notification to continue medical care with your Primary Medical Doctor.

All of these forms, except the intake form, should be in the patient's chart when you receive it from the desk. Should you need copies of any of these forms, please ask the clinic receptionist.

Every subsequent visit by a patient to you is considered a **Follow up visit** and requires the appropriate documentation.

8.4 Documenting Adjunct Techniques

Techniques, other than needling, and herbal prescriptions that are used during a treatment must first be described to a patient and his/her approval must be obtained (informed consent). Document the description and the risks of the technique as you described them to the patient and note that the "patient agrees."

Document any recommendations made to the patient, including that he or she should be seen by a physician, and those regarding lifestyle (i.e., diet and exercise).

8.5 Documenting Phone and Outside Contact

Patients who are taking herbal prescriptions will be more likely to call the clinic with questions or concerns. It is the the duty of Clinic Reception to direct these calls and relay any messages with Patient contact information to the appropriate Clinic Faculty. Interns may speak with a Patient who is calling regarding their herbal treatment ONLY under the direct observance of the Clinic Faculty Supervisor and AFTER Clinic Faculty has approved what will be discussed. ALL correspondences must be documented properly in the Patient's chart.

Telephone conversations with patients or family members of the patient must also be documented, and **may only take place with the patient's written authorization** allowing you to speak with a family member. Include in your notes, the date and time of the conversation, if it was with someone other than the patient, note who you spoke with (father, aunt, etc.), the points that were discussed, recommendations that were made to the patient and sign the entry. If you are unsure of how to handle the situation, consult with the Clinic Supervisor. This may mean that

you have to ask the patient if he or she would mind if you get back to him/her after you consult with Clinic Faculty. The return call should be made the same day! At no time are you allowed to give a patient any way to contact you, other than through the Eastern School of Acupuncture Intern Clinic phone number. Interns should have no contact with patients outside of the clinic except in the case of a pre-existing relationship or a chance meeting.

8.6 Documenting No Shows and Cancellations

No shows and cancellations must be documented in the patients' charts and appointment book. Note the date that the patient did not appear for his/her appointment. Sign the entry and alert the front desk personnel. If the patient cancels an appointment, note the date you are making the entry at the beginning of the line, followed by "canceled appointment for <u>date</u>," and sign the entry. If the patient rescheduled, please include, "patient rescheduled to date."

8.7 Obtaining Authorization for Health Record Information

In compliance with HIPAA standards, all Eastern School of Acupuncture interns must obtain written permission from the patient before disclosing or obtaining any information about a patient medical or health record. Two forms are used for this purpose:

<u>Authorization for Disclosure of Health Record Information</u> is to be used when **patients are authorizing Eastern School of Acupuncture to release our records to either the patient or another provider.** This form is good for one term or the dates indicated on the form. It is not renewable, past date forms must be completed anew.

<u>Authorization to Obtain Information</u> is to be used when an Eastern School of Acupuncture Intern or Clinical Faculty **requests permission from the patient to obtain medical or health information from another provider**. Once signed this form is valid until the patient revokes the permission.

Both forms must be signed and dated by the patient and a witness and should be kept in the patients health record.

9. Patient Care, Rights and Responsibilities:

9.1 Patient Scheduling

To make an appointment, patients must call the Eastern School of Acupuncture Intern Clinic reception desk at 973-746-2848. Patients may not schedule more than three advance appointments, in order to allow other patients to have chance to schedule with that particular intern at that time.

At the first treatment, you should discuss the patient's prognosis with your Clinical Faculty, and communicate this information to your patient so that they can plan accordingly. You may have a patient who would benefit from a second weekly appointment. If you do not have any openings in your schedule, please refer them to your clinic partner or one of your classmates with an open slot. You should be trying to cultivate patients in clinic the same way you would in private practice. Encourage your patient to return to see you for treatment, walk them to the desk and help them schedule an appointment.

9.2 <u>Cancellation Policy</u>

Patients are required to give at least 24 hour notice if canceling their appointment. Missed appointments are documented on the patient's treatment Intake Form and put in their chart as if a visit had occurred. If a patient gives less than 24 hours notice or fails to show up for an appointment, and this occurs more than three times consecutively, the Intern has the right to refuse treatment. The Clinic Dean will make any final administrative decisions on a patient's access to treatments.

9.3 Late Policy

If a patient arrives more than 15 minutes late, the Intern reserves the right to refuse treatment. If treatment is given, it must be abbreviated and end at the time it was originally scheduled to end. If a patient arrives more than 30 minutes late, they will not be seen for that appointment and must schedule another. If a patient is chronically late, the Clinic Dean will make any final administrative decisions on a patient's access to treatments.

If a patient arrives more than 15 minutes late, the Intern reserves the right to refuse treatment. If treatment is given, it must be abbreviated and end at the time it was originally scheduled to end. If a patient arrives more than 30 minutes late, they will not be seen for that appointment and must schedule another. If a patient is chronically late, the Clinic Dean will make any final administrative decisions on a patient's access to treatments.

9.4 <u>Continuing to Treat Patients For More Than One Term</u>

All patients in the Eastern School of Acupuncture Intern Clinic are encouraged to continue receive care from the same Intern. You should be learning how to cultivate and maintain a patient base. If you are having trouble scheduling repeat visits with patients, this is something that can be addressed. Now if the time to work on these skills! If you feel the issue is not in your follow-up or treatment abilities but rather an issue with clinic scheduling, please contact the Clinic Dean to discuss possible solutions.

9.5 Patients Who May Be Inappropriate for Treatment

On a very rare occasion you may see a patient who you think is inappropriate for the Teaching Clinic. You should discuss the case with your Clinical Faculty and decide together if you think the patient should be cancelled or reassigned. Clinic Faculty may assign you to another treatment room.

If you conclude that the patient should be cancelled, your Clinical Faculty will discuss this with the Clinic Dean, who will make the final decision.

Reasons for a patient not being appropriate for the Eastern School of Acupuncture Intern Clinic include but are not limited to: inappropriate behavior, behaviors that are perceived to be sexual in nature, mental illness that interferes with your ability to render treatment, a condition that is not able to be addressed by acupuncture, refusal on the part of the patient to see a western medical provider if asked, the patient is not being honest and/or forthcoming about medications/substance abuse, the Patient appears to have taken a mood altering substance, any verbal or behavioral indications that are perceived as potentially dangerous or may compromise the safety of any persons in the Teaching Clinic.

9.6 Protocol for Patients Mentioning Suicide

Interns who encounter patients who mention suicide should get immediate assistance from the Clinical faculty.

National Suicide Hotlines:

National Hopeline Network: 1-800-784-2433

National Suicide Prevention Hotline: 1-800-273-8255

Local Resource:

Bloomfield Mental Health Resource Center: 973-680-4017

9.7 Drug Detoxification and Withdrawal

Eastern School of Acupuncture does not provide detox treatments in the teaching clinic. If a patient presents to the clinic with a main complaint of wanting detox from drugs or alcohol, the patient must be referred to an acupuncture detox clinics. This is a serious treatment and must be done in a more formal setting with the proper supports and resources.

9.8 Ethical Behavior

-The practitioner is responsible for maintaining appropriate boundaries at all times

-There should be no romantic or sexual contact between the practitioner and the patient as long as the professional relationship exists. The practitioner will not make verbal, manual or physical suggestions or inferences of a sexual nature.

-All patients should be informed that they have a choice as to the degree of undress they undertake during treatment, and patients should dress and undress in private.

-The practitioner will obtain verbal consent before undraping the breasts, genitals, abdomen or buttock area.

-The practitioner uses only the hands to palpate and only the hands and arms to perform massage. The practitioner uses only the knee or lateral aspect of the hip or leg for bracing - never the front of the pelvis.

-The practitioner will use appropriate clinical terminology when speaking about body parts or functions.

-The practitioner will not probe into the patient's sexual history beyond what is necessary for treatment, nor will the practitioner give value judgements on a patient's behavior even if asked.

9.9 Sexual Misconduct and Harassment

Palpation for diagnostic purposes or point location and therapeutic massage are important elements of diagnoses and treatment. However, it is important to obtain the patient's permission to touch, palpate or massage, especially near sexually sensitive or intimate areas. The following behaviors are considered sexual misconduct or harassment:

- · Unnecessary references to sexual acts or behavior
- Touching of one's own intimate areas in a sexually suggestive manner.

• Physical contact between a student or employee of The Eastern School and a patient that is sexually suggestive.

10. Clinic Supplies:

10.1 Intern Supplies

Each room will be stocked with a sufficient amount of needles for your shift. If you should upon your pre-shift room inspection or at some point during the shift find that you need additional needles, you can check them out from the reception desk. Bring the empty box to exchange for a new box. Please be sure you have enough supplies to avoid having to try and obtain more needles from what will be an active reception desk once the shift begins.

Other supplies that you may need such as the e-stim machine, tweezers or other items not already in your treatment room can be signed out from the reception desk using the Supply Sign-Out sheet. These items must be returned and signed back in by the end of the shift or you will incur a penalty. If you sign it out, you should sign it back in to be sure it gets there - do not rely on a fellow student. Whoever signs out an item will ultimately be responsible for that items return.

10.2 Ordering Clinic Supplies:

If you are having any issue with obtaining clinic supplies or feel the clinic is not well stocked, please contact the Clinic Dean and the Office Manager to remedy the situation.

10.3 Equipment Available for Use in Clinic

When you need equipment, you must sign it out and sign it back in. Do not keep equipment for an entire shift; these supplies are to be shared by all interns in the clinic.

All cups must be cleaned by the Intern who uses them after their use. Just as you will want to have clean cups available when you need them, your fellow Interns will want the same curtesy. Interns who leave cups unclean are subject to disciplinary action.

The following equipment is available for use by sign out from the Clinic Receptionist:

- Electrical Stimulation Units
- Fire cups
- Blood pressure cuffs
- · Stethoscopes
- · Thermometers
- Matches
- · Vaseline
- · Salt
- · Massage oil
- · Safety goggles
- · Seirin needle

10.4 Treatment Rooms and Supply Cart

All supplies and equipment in a treatment room are to stay in the room unless the item is broken. You will be assigned one treatment room for each day that you are scheduled in the clinic. Under no circumstances are you to change your room assignment or use an empty room without prior authorization from the Clinic staff.

Interns are responsible for stocking and restocking the following supplies: table paper, refilling empty dispensers (alcohol, cotton balls, swabs, paper towels), sharps container, gloves, soap, first aid supplies etc.

Each Intern is responsible for the room that they use. If there is a problem with how you find the room, report it to the Clinic Dean.

It is important that you leave your treatment room in order when your shift is over. Do not leave any of your equipment in the room or in the clinic.

At the end of your shift, you and your partner are responsible for turning off space heaters, heat lamps, closing and locking windows, turning off lights and fans, straightening the room, cleaning off the treatment cart, taking out all personal belongings and checking the floor and surfaces for stray needles.

All cups must be cleaned properly and put away. All furniture must be put in its proper place.

10.5. Herbal Supplies

I. Access to herbs:

Access to the Herb Cabinet is strictly limited to the Herb Dept. Head, OM Clinic Supervisors and reception as determined by the ESATM administration.

The Herb Cabinet will be kept locked at all times other than during the operating hours of the scheduled clinic shifts.

Photography, video, or any other visual or audio recording is strictly forbidden.

II. Ordering and Selling of herbs:

SELLING OF HERBAL SUBSTANCES IN ANY FORM THAT ARE NOT ORIGINALLY PART OF THE ESATM CLINIC INVENTORY IS STRICTLY FORBIDDEN

THERE IS NO RETURN OF HERBS for whatever reason as per the CLINIC POLICIES STATEMENT

All persons receiving herbs must be evaluated by the Clinical Supervisor: HERB FORMULAS AND/OR PATENTS ARE NOT FILLED FOR THOSE PERSONS WHO DO NOT HAVE PATIENT FILES AT THE ESATM CLINIC OR WHO DO NOT HAVE A 'REFILL' CHECKED ON THEIR FORMULA PRESCRIPTION

The ESATM student clinic will have an herbal stock ready and available for sale to the Patient. Once the Clinic Faculty and Intern decide upon an appropriate formula for the Patient, it will be secured from the cabinet by the Clinic Faculty. Instructions on dosing, frequency of intake and preparation will remain in the chart and a copy will be provided to the Patient. Any and all instructions will be reviewed with the Patient to ensure the Patient understands what they need to do. The Patient will then pay for their herbs at reception.

If the Patient's condition requires a customized formula that needs to be ordered via Crane Herbs or Kamwo's online pharmacy, the Intern will input all information necessary to complete the order under the Clinic Faculty's supervision. This will include the herbs being ordered and Patient information such as name, address, email address, age, credit card information, etc. The ESATM student clinic will have an account set up through the school and this is the ONLY account ordering should be done with. The Patient will have the choice of receiving the herbal formula at their home address or having it shipped to the ESATM student clinic where they will pick it up.

If a Patient chooses to have their order shipped to the ESATM student clinic, a call will be made to the Patient to notify them of the delivery by either the Intern or reception staff. The decision should be made by the Clinical Faculty Supervisor regarding who will make the call. Interns are not permitted to contact any Patient without Clinic Faculty approval.

Attention: Certain herb forms contain small amounts of alcohol. Interns must disclose this information to the Patient <u>prior</u> to the selling of the herbs to the Patient.

BREAKAGE: Should there be an accidental breakage of herbs the Clinical Supervisor is to write a Formula Prescription for out to ESATM/BREAKAGE with the Name and Price of the item/s that were broken and an explanation as to the occurrence. Any spills or broken glass is to be cleaned up and maintained immediately. Any injury or accidents are to be noted in an adverse event or incident report form as provided by the reception person and to be written and completed as close to the time of the incident as possible.

If medical attention is required then it should be sought immediately.

III. Handling of Herbal Substances

Gloves should be worn at all times when there is direct contact with herbal substances. Universal Precautions need to be followed.

11. Safety While Treating:

For additional information on safety and reducing the possibility of transmission of disease through acupuncture needles please refer to The National Acupuncture Foundation's Clean Needle Technique Manual for Acupuncturists. This guide is available in the Clinic intern room and is required reading prior to entering the clinic as an Intern as part of your Clean Needle Technique exam.

11.1 Universal Precautions

Observing Universal Precautions means that all needles are assumed to be potential sources of exposure to any known or unknown blood-borne pathogens such as HIV, Hepatitis B or Hepatitis C. Upon withdrawal, each needle should immediately be placed in a red sharps container. Needles should **NOT** be removed and placed into another container and then later placed into the sharps.

All clinical students should know that:

- It is prohibited to carry needles in cotton balls
- It is prohibited to place used or open packages of needles in pockets of a lab coat.

- All used needles must immediately be placed in a red sharps container. Do not place cotton balls, needle wrappers, gloves or other non-sharp items in sharps container.

- It is prohibited to reuse needles, even on the same patient. It is possible to spread infection from one part of the body to another. This may result in infection of the skin or general septicemia in the patient.

- Hands must be washed before and after every patient contact. Failure to hand wash is the most common cause of infection in clinical setting. It is recommended that hands be washed immediately before the acupuncture procedure, after contact with blood or bodily fluids or obvious environmental contaminants, at the end of treatment, and whenever they become contaminated during a treatment.

- All points must be cleaned with 70% isopropyl alcohol before inserting needles.

-If needles are detected on the floor they are to be picked up following established work safety protocols and placed in the nearest sharps container. If there is a needle spill, use gloves and forceps for picking up the spilled needles. The spill area should then be disinfected with a germicide since the HBV virus can survive on surfaces for more than one week at room

temperature. All materials used in the cleanup job should be discarded in double wrapping. The last step is hand washing.

- Do not overfill sharps containers. Once a container is 2/3 full it should be sealed and disposed of properly.

11.2 <u>Clean Needle Technique</u>

Basic principles

- always wash hands between patients, and before and after needling*

- always use sterile single-use needles and other instruments that may break the skin, such as seven-star hammers and lancets.

- always establish a clean field before performing acupuncture. - always immediately isolate used needles and other sharps.

*In the event it is impractical or impossible to wash hands with soap and water, an alcohol-based disinfectant may be substituted..

1. Needles

Needles must be removed from the sterile packaging in such a way as to avoid contamination. It is critical that the needle shaft be maintained in a sterile state prior to and during insertion. Nothing non-sterile must touch the shaft of the needle prior to insertion. The package should be opened and folded back in such a way that when the needle is removed, the shaft does not touch part of the packet that was touched by the fingers while opening the packet. Needles that are opened may be used later during that day, as long as their sterility has been maintained.

Needle insertion and manipulation must be performed without the practitioner's bare hands coming into contact with the shaft of the needle. If the shaft must be supported, a sterile gauze pad is used.

Needle guide tubes must not be used on more than one patient.

2. Setting Up

-disinfect all surfaces in the clean work area daily and whenever visibly contaminated or whenever a patient may have contaminated the surface, for example by sweating.

- wash hands thoroughly with soap and water. wash the entire surface of hands between the fingers, around and under the fingernails and up to above the wrist.

- Refrain from touching a contaminated area after washing.
- lay out a clean field without contaminating it.
- set out equipment and supplies without contamination.

- set out needles and other sterile equipment in center of clean field.

3. <u>Needle Insertion</u>

-if clothing obstructs area, roll up pant leg or move skirt. Re-clean hands. -clean site with alcohol swab, using an outward spiral or one-way wipe. -properly dispose of alcohol swab.

-allow alcohol to dry before inserting needle.

-avoid contaminating site after cleaning.

-It is acceptable clean technique to palpate the acupuncture point after cleaning the skin, as long as the hands are clean and have not been contaminated.

4. Manipulation of sterile needle

-maintain clean hands throughout procedure.

-remove needle from sterile area maintaining sterility of needle shaft. -if guide tube is used, put needle in handle first, keeping tube clean. - if needle shaft is supported, it is held with sterile gauze or cotton. -rotate needle without touching shaft or site with anything un-sterile.

5. Withdrawal of Needle and Closure of Hole

-withdraw needle without touching shaft or hole with hands.

-apple pressure to site with clean dry cotton swab, cotton ball or gauze. - immediately dispose of used cotton in waste bag.

-immediately dispose of needle in sharps container. Using the level on either side of the shelf/ledge, slowly tilt the shelf/ledge forward so that the needles drop safely into the sharps container. Please note that the hinged shelf/ledge has a small groove that will on occasion retain needles even after the shelf/ledge has been tilted forward. In order to make the needles caught in this grove fall, gently tap the outside of the shelf/ledge when the shelf/ledge is in the upright position.

Do not place removed needles into any other container but the sharps. It is NOT clean needle practice to remove the needles using a separate non-sharps container and then disposing of all of the dirty needles at once into the sharps.

Do Not place cotton balls or swabs into these containers. Any used non-sharp materials that are not blood-saturated should be placed in the wastebasket with the normal trash. If there is saturated non sharps materials, they should be placed in the biohazard bag

-wash hands after removing the needles and after cleaning up.

-only one Intern should be removing needles and keeping count for safety purposes.

11.3 Additional Needle Handling/Disposal Information

All needles are to be disposed of into the sharps container, even needles that were never inserted into the patient. Once a needle has been opened, sterility no longer exists and the needles must be disposed of.

The number of needles used on each patient should always be noted on the Needle In/Needle Out sheet posted on the wall of each treatment room. If then numbers do not match and a needle is missing, carefully scan the floor and use tweezers to pick it up and properly dispose of it in the sharps container. If the needle cannot be located, notify your supervisor immediately.

-When you notice that the biohazard container is 2/3 full, notify reception and they will replace with a new one.

11.4 Gloves and Handwashing

Wear impermeable disposable gloves and face protection for all procedures that may produce or may involve the handling of blood or body fluids, i.e. bloodletting, weepy rashes, poison ivy, etc. Change gloves and wash hands between patients or when glove integrity has been compromised (torn, punctured). Rubber gloves are required when cleaning up a spill. Gloves do not need to be worn during the insertion of acupuncture needles, except when the intent is to draw blood. According to CNT protocol, gloves and cotton balls are strongly recommended when removing needles. Latex and non-latex gloves are available.

Gloves should be worn with the direct handling of herbal substances.

Hand washing is the single most important means of preventing the spread of infections. Good hand washing technique involves the mechanical removal of dirt and microorganisms by sudsing, friction, and rinsing with running water. Follow the established guidelines outlined by CNT protocol.

Recommendations for hand washing include: between glove changes, immediately after touching any potentially infectious materials and before and after using the bathroom as well as before and after every treatment. Before and after any direct contact with herbal substances. Always wash your hands before leaving the clinic area and before and after eating/drinking. Wash your hands!

Eating, drinking, applying cosmetics, handling contact lenses, etc., are prohibited in areas where infectious materials are possibly present such as in the treatment rooms.

11.5 Prohibited Procedures

-Blistering Moxabustion

-Blood letting with a three-edged needle

-Pricking followed by cup application (bleeding cups)

-Bone setting techniques

-Any techniques that are not a part of the Eastern School curriculum

-Prescribing or selling of any herbs that are not part of the ESATM Herbal curriculum.

11.6 Conditions That Cannot Be Treated In Clinic

Please keep in mind that there are also certain conditions that cannot be legally treated in our clinic, such as cancer, epilepsy and obstetric conditions. While patients with these conditions can be treated, the condition itself cannot be the chief complaint and what is directly being treated. You must limit your treatment not to the diseases, but rather to the symptoms of these conditions.

Treating a pregnant patient can be the most difficult to determine in terms of what treatment is covered by the Base Acupuncture Malpractice Insurance and what is not. Additional coverage to treat obstetrics is available through the insurance carrier, depending on each state's laws regarding such practice. The Eastern School Clinic does NOT carry this additional coverage. This does not mean that once a woman becomes pregnant she cannot be treated with acupuncture. It does mean that the acupuncturist cannot treat or manage a pregnancy. As long as the woman's pregnancy is being managed by a medical doctor, an acupuncturist may continue to practice acupuncture on her. For example, if a pregnant woman who is under a medical doctor's care comes for acupuncture for morning sickness or back pain, you are allowed under the Malpractice Policy to treat her for those conditions. However, once a woman goes into labor you will no longer be covered by your Acupuncture Malpractice policy as that would be considered obstetrical care.

11.7 Accidental Needle Stick Protocol

Should a needle stick occur immediately notify your supervisor and the Clinic Dean. Information and incident forms are located in a binder on the bottom shelf of the clinic library cabinet and at the Clinic Receptionist desk. These are:

- Procedure to follow post needle stick
- · Incident Report
- · Source Patient Consent
- · List of places to go for treatment

11.8 Incidents in the Intern Clinic

An incident may involve any of the following: a slip and fall, a theft or crime, an injury related to treatment or a needle stick. If a needle stick or blood exposure is involved please refer to the protocol listed above. All incidents in any clinic should follow the same action protocol.

- · Immediately alert the Clinic Receptionist, the Clinical Supervisor and a member of the school's administration (Academic Dean, Clinic Dean, School Director) of the potential situation
- Offer medical attention, and submit all appropriate paper work to the Health and Safety Officer for the Eastern School of Acupuncture, the current Clinic Dean.
- · Individuals should fill out an Incident Report

11.9 Biohazards: Your Right to Know

The Occupational Health and Safety Administration (OSHA) require that workers handling chemicals and biohazard materials must be provided with information regarding the nature of that hazard. All Interns must complete the OSHA safety training and accompanying quiz before beginning clinic. During your clinic rotation(s), you will be handling chemicals and biohazard materials. Safety masks and utility gloves are located in the supply cabinet. When using bleach, all three pieces of protective clothing should be worn. Carefully read and follow the information provided in the Eastern School of Acupuncture Safety Training and Safety Manual. Other safety information can be found posted in the reception area bulletin board.

12. Emergencies:

12.1 Patient Emergency

If a patient presents with signs of a medical emergency, your supervisor should be notified immediately, and someone should be directed to call 911. If there are needles in the patient, they should be removed immediately, unless they are specifically intended to stabilize the patient.

12.2 Clinic Fire Safety

If fire or smoke is detected, pull the alarm on the nearest fire alarm box and call 911 and report the location and type of fire. The nearest pull stations on the Third Floor of the Madison Building are located outside the Ladies Room and next to the Elevator (located outside the main office). Communicate a fire to all persons in clinic and in school.

- Remove all needles from a patient. Remove all patients from the area from immediate danger
- Contain/Close doors of the fire room to isolate and contain the spread of smoke and flames.
- Evacuate Evacuation Map is attached.

12.3 Fire Outside Clinic Area

If the fire alarm is activated and the fire is not in the clinic, the following procedures will be followed:

- Close all doors
- Remove all needles from the patients. Prepare to take the patients out of treatment. Plan for an evacuation know which exits are available.
- When a fire alarm is activated, the Clinical Faculty will call the Director and advise of the situation.

12.4 Evacuation Procedures

- The nearest fire exit is the door to the right when you are facing the elevator. Instruct the patients, visitors, and interns to line up, and follow a designated person to a protected area or the evacuation area (Franklin Avenue), depending on the situation.
- The Clinical Faculty is responsible for seeing that all persons are evacuated from the clinic and also is responsible to do a head count at the evacuation area. Any person not accounted for will be reported to a fire official.
- If a patient comes with an oxygen cylinder, remove them to a safe location away from heat and explosion hazards. If a person is wheelchair bound, an intern with a working cell phone will be assigned to move this patient to a safe location on the third floor. The supervisor will provide the location and phone number to the fire department for evacuation.

12.5 Fire Extinguishers

When you report to clinic, note the location of each fire extinguisher in the treatment rooms. Become familiar with the proper use of the extinguishers. The extinguishers used at ESATM are All Purpose Dry Chemical Extinguishers/Type ABC. They are useful for all fires. How to use: Remove pin, aim and hold nozzle, then squeeze the trigger. Sweep the extinguisher from side to side, covering the area of the fire with the extinguishing agent.

12.6 Emergency Numbers

Bloomfield Ambulance and Police 24 hours	911 or (973) 680-4141
Poison Control Center	.800-764-7661
National Suicide Hotline	. 800-784-2433