



State of Arizona Acupuncture Board of Examiners

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REGULAR MEETING

November 5, 2012

OPEN SESSION MINUTES (Teleconference Meeting)

Members of the Arizona Acupuncture Board of Examiners met at 1:00 p.m. on Monday, November 5, 2012, at 1400 West Washington, Conference Room B-1, Phoenix, Arizona.

Board Members Present:

Ross Adelman, Consumer Member, Chairman (via telephone)

Toni Bernalley, L.AC., Secretary (via telephone)

Maureen Bronson, Consumer Member

Christopher M. Clair, Consumer Member (via telephone) joined the meeting at 1:12 p.m.

Dianne Darcy, L.AC., Professional Member (via telephone)

Robert L. Gear, NMD, DC, Professional Member (via telephone)

Patricia E. Martin, L.AC., Professional Member (via telephone)

Alan H. Scott, DO, Professional Member (via telephone) joined the meeting at 1:06 p.m.

Board Members Absent:

Woohyung Cho, L.AC., Professional Member

Administrative Staff:

Pete Gonzalez, Executive Director

Attorney General Representative:

Montgomery Lee, Assistant Attorney General (via telephone)

Call to Order

Chairman Adelman called the meeting to order at 1:03 p.m.

The following order of business was then considered:

Declaration of Conflicts of Interest

No declarations were submitted by the Board Members.

Applications for Licensure (without self-disclosures)

The Board reviewed the license applicant chart and Board Member Bernalley moved for the approval of the applicants for licensure listed below with Board Member Martin providing a second. The motion carried by unanimous vote: 6-0.

Byung Woo Kim
Kimberly M. Mathis

Adelman	Bernalley	Bronson	Cho	Clair	Darcy	Gear	Martin	Scott	Vote
X	X	X			X	X	X		Aye
									Nay
									Recused
									Abstained
			X	X				X	Absent

Future Meeting Dates

December 3, 2012 (Monday)

Call to the Public

Rik Ehmann, L.AC. provided the following statement to the Board.

I feel that physical therapists should not be allowed to practice acupuncture without training as an acupuncturist that is the equivalent of that received by an L.Ac. My reasons for this are that the PTs are not trained in diagnostic and assessment techniques which are necessary to safely treat patients using acupuncture.

Acupuncture is defined as inserting a needle to obtain a therapeutic response.
Dry needling is inserting a needle to obtain a therapeutic response.
Ergo dry needling is acupuncture.

Inserting a needle in the body is the equivalent of performing minor surgery. Surgery requires, at a minimum, a clean environment. Anyone inserting needles in the human body should be required to take and pass a class on clean needle technique.

After listening to the speakers at the PT Stakeholders meeting, I came to realize that PTs have superb training resulting in an exemplary knowledge, second only to orthopedic

surgeons, regarding the actions and interactions of muscles, nerves, tendons, and bones. The speakers were justifiably proud of their knowledge and skills. There was considerable weight given to the lack of adverse events. These events were limited to actual physical accidents on the body. The data on adverse events did not include such things as exacerbating an existing illness or miscarriages. Such incidences were not included because PTs have no idea that such events could be precipitated by the innocent, mechanical insertion of a needle to release a muscle.

There was also numerous mention of the efficacy of dry needling. Of course it's effective: acupuncture is one of the most effective medical modalities available. Welcome to the magic of Asian Medicine. I applaud your enthusiasm and excitement. I felt the same way when I discovered the powers of acupuncture. The problem is that acupuncture is in fact a major modality of an integrated medical practice, not just a mechanical insertion of a needle into a trigger point to release a muscle, and that insertion triggers actions far beyond the muscle release.

I also heard numerous denials concerning the study of Asian medicine, the use of Asian Medicine diagnostic techniques; and the practice of Asian Medicine. The first two may be true. I am fairly certain most PTs have not studied Asian Medicine and do not use our diagnostic techniques. The latter claim of not practicing Asian Medicine is patently false. The act of sticking a needle in the body is acupuncture, which is one of the major modalities of Asian Medicine, so of course they are practicing Asian Medicine, they just don't know what they are doing. The problem is that because they have chosen not to study Asian Medicine, they have no idea of the cascade of events they create when they needle a point.

The action of releasing a muscle and dispersing the pain held in an injured muscle is the tip of the iceberg. It is literally the tip of the iceberg; it is the first and most obvious action of needling the point and often less than 5% of the possible available results.

There are over 350 acupuncture points in the human body. Most of these points have multiple actions, indications and contra-indications. There are points that are concurrent acupuncture, motor points, trigger points, labor induction points, potential pneumothorax points, have a multitude of actions, and are included in multiple acupuncture protocols. An example of one of these points is GB21.

The following is a list of the actions, indications and contraindications for this point:

Precautions: No Needling During Pregnancy, No Needle in Patients with a History of Heart Disease.

Cautions: perpendicular insertion carries a risk of inducing a pneumotorax

Point Associations:

Intersection Point of the GB, TH, ST & Yang Wei Meridians

Actions & Effects:

Descends the LR and GB Channels. Useful in reducing anger and calming agitation.

Local point for occipital headache, tight trapezius muscles and/or neck/shoulder pain.

Phlegm related issues of the head and neck - embolic stroke, neck lumps, swollen lymph nodes, tumors.

Phlegm related issues of the breast and chest - mastitis, breast abscess, asthma, dyspnea.

Strongly influence Qi downward - useful for rebellious Qi, cough, dyspnea, and Leg Qi ascending to attack the Heart.

Contraindicated in Pregnancy, patients with heart conditions.

Useful for difficult labor, retained placenta.

Gao Wu felt that balancing GB 21's strong descending action with ST 36's strong centering action is important.

Tong Ren/Tam Healing System: Release the neck and shoulders and descend energy.

In listening to the PTs, I was impressed by their expertise in the physical therapy arena. Given their justifiable pride in their knowledge, skills and abilities, I am at a loss to understand why they think it is reasonable to blithely insert needles in a patient with no knowledge of the full spectrum of potential consequences. It seems to me that by doing so they violate the basic healer's principle of "do no harm".

If they wish to continue using acupuncture in their practices, they should either "PT up" like John Rhodes L.Ac., PT did and get the education necessary to protect their patients from avoidable adverse events such as miscarriages and death, or partner with an acupuncturist. Trust me it's cheaper to hire an acupuncturist. Adding an acupuncturist to your health care team would provide the added advantage of improving the level of care for their patients. They would leave your office with reduced pain, in a calmer state of mind, and with their overall body systems operating at a higher level of health.

Jessica Jordan, L.AC. asked that information regarding the AZSOMA survey on the herb proposal be made available to all. Ms. Jordan shared her thoughts and concerns on what she heard at the stakeholder meeting held by the Arizona State Board of Physical Therapy. Lastly, Ms. Jordan requested the date of the next stakeholder meeting on dry needling.

Discussion of Items to be place on a future meeting agenda

- AZSOMA Sunrise application
- Dry Needling efforts with the Arizona State Board of Physical Therapy to include appointment of board members to joint committee
- Strategic Plan
- Legislative Agenda

Adjournment

Board Member Bronson moved for adjournment and Board Member Martin provided a second. The motion carried by unanimous vote: 8-0. The Board adjourned at 1:19 p.m.

Adelman	Bennalley	Bronson	Cho	Clair	Darcy	Gear	Martin	Scott	Vote
X	X	X		X	X	X	X	X	
									Nay
									Recused
									Abstained
			X						Absent

Respectfully Submitted,

A handwritten signature in cursive script that reads "Pete Gonzalez".

Pete Gonzalez
Executive Director

Approved by the Board: December 3, 2012