



Registered TCM Practitioner Program (R.TCM.P)

Registered Acupuncturist Program (R.Ac.)

2015 – 2016

Syllabus & Student Handbook

## WELCOME LETTER

Dear R.Ac. Student,

Welcome to the Ontario School of Osteopathy & Alternative Medicine (OSO) and the coming academic year. We look forward to an exciting and rewarding journey together as we explore the great subject that is Registered Acupuncturist Program.

There is a special synergy of passion and exploration at the Ontario School of Osteopathy. This energy exists because faculty members hold a great love for this healing art. The palpable excitement they have will be passed on to students.

The education you receive in Acupuncture Program will be of the highest standards. Equally important, the nurturance of you, as a **R.Ac. student**, will be supported and encouraged to grow as well. Our professional faculty and employees are committed to challenging every student within an encouraging and collaborative environment.

Traditional Chinese Medicine and Acupuncture has become regulated in Ontario since April 2013 under the governing body of College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario (CTCMPAO). Our new integrated program has been modified to follow all the Entry-Level Occupational Competencies of this College. We are confident that our program will train high standard practitioners who provide the best quality of treatment for prospect patients, as well as prepare the students for the Board Exams of CTCMPAO with a high passing rate.

This student handbook is designed to assist all of us in understanding college policies, Procedures and what is expected of each of us within the community. I ask that you read your handbook and use it as a resource throughout the year.

In anticipation of a wonderful year, the OSO faculty and employees thank you for your faith in us. We all look forward to the year ahead with enthusiasm, excitement and confidence.

Respectfully,

Milad Haydarian & Faculty

Welcome to the Ontario School of Osteopathy and Alternative Medicine Master of Registered Acupuncturist program (R.Ac.).

### **Program Admission:**

By the application deadline, applicants for admission to R.Ac. program must be graduate of an Ontario high school (or equivalent). They must be 19 year old or above and all applicants must be able to communicate either in English or French.

### **Non program students**

The flexibility of our program allows all interested healthcare practitioners to attend only the modules they are interested in and can directly integrate the new knowledge into their practice (As long as they have completed the prerequisite for that module and If their scope of practice allows this). A certificate of attendance and completion is awarded for each module. At any time, a non program student may apply to opt into the program. All previously taken and completed modules will be credited toward the program. All other admission requirements are required.

### **R.Ac. Program Schedule**

This program is comprised of 3 year curriculum including 16 modules. The modules are completed in approximately 2000 hour including the theory classes, practical classes and the student clinic. Classes are available in both campuses of the school in Markham and Mississauga.

### **Ontario School of Osteopathy Core Values**

The Values of OSO are:

#### **Respect for the Individual**

We recognize and honor the uniqueness, diversity and learning style of each individual. We respect and value the common experiences that bring us together.

#### **Commitment to TCM and Acupuncture Educational Leadership**

OSO is committed to becoming a national leader in TCM and Acupuncture education. Good leadership liberates the mind from prejudice and opens the door for a lifelong journey of learning. It establishes academic excellence and provides a nurturing environment where students feel free to fully develop. Our teachers' energy and enthusiasm kindles a love of learning that is transformative for their students.

#### **Community Builders**

We prepare students to be life-long contributing members of their communities. Our collaborative environment fosters constructive conflict resolution and cultural sensitivity. Students learn to relate to the natural world and develop a connection with all life.

### **Open Mindedness and Self-Awareness**

We encourage students to develop self-awareness, to remove obstacles to their learning and to care for themselves. Our goal is to guide this self-observation in a non-judgmental manner. This gentle approach and freedom from bias leads students to become true healers.

### **Dedication to Success**

We are dedicated to the success of our programs and community. At the heart of this dedication is the success of our students.

## **OSO Academic Philosophy:**

### **Excellence in TCM and Acupuncture Education and R.TCM.P and R.Ac. Student Success**

OSO is dedicated to excellence in TCM and Acupuncture education, so that its students are prepared for successful careers in service to both the community and the profession. Central to the OSO philosophy is the firm belief that by example and excellence in teaching, supplemented by the opportunity for extensive practical experience, the college can develop professionals who are technically competent, compassionate, humanistic and responsive to the needs of others. Inherent in this philosophy is the College's recognition of its commitment to the student, the profession and the community.

### **Lifelong TCM and Acupuncture Student Learning Environment**

OSO strives to create a foundation for lifelong learning and diversity of learning opportunities. Students are especially encouraged to focus on the three core values of the OSO Curriculum: Humanism, Research and Community. Through humanism, a high priority is placed on initiative, valuing autonomy and freeing everyone to do their best and most creative work. Self-awareness and self-care are supported and nurtured.

Through community, a learning environment of reciprocal care and shared responsibility is created where each person's welfare and dignity is respected and supported. Students are encouraged to develop the ability to work as part of their communities, both locally, nationally and globally.

Through research, OSO depends on a deep and abiding understanding that inquiry, investigation, and discovery are at the heart of the College's experience. The College nurtures its students' love of inquiry and develops their ability to critically assess problems. Students are encouraged to learn to think both analytically and synthetically to find solutions to problems. This creates an environment that fosters and encourages freedom from prejudice.

### **Highly Competent TCM and Acupuncture Faculty**

OSO supports a diverse faculty. They are highly competent critical thinkers, on their own merit. Faculty are well trained, supported by the administration and model lifelong learning and self-reflections for their students.

They assist students by challenging their assumptions and holding up mirrors that allow them to see themselves. The OSO Faculty participates in faculty-driven governance for the institution.

### **Sustainable Academic Culture**

OSO places a high value on its academic community and culture by fostering the development of an osteopathic learning organization. This sustains students through their educational journey. The culture is based on facilitation, growth and mutual support. It embodies the accumulated wisdom of the community, including beliefs, assumptions and patterns and gives the College transformative powers to continuously improve itself

### **STUDENT EVALUATION**

Evaluation is ongoing and takes the form of written tests, written clinical problems, performance of selected practical techniques and oral presentations of several assignments.

### **SCORES**

The student must have a score of 70% on the written evaluations and 70% on oral evaluations for each module. Failure to achieve these percentages, each student will be given one opportunity to rewrite the exams.

**Students must obtain a grade of 70%.**

### **Grading Policies**

OSO maintains high standards of scholarship and at the same time recognizes its responsibility to provide each student the best opportunity to complete the program successfully. At the beginning of each course, the faculty is required to define clearly for the members of that class the objectives of the course and the standards and methods by which student achievement will be measured. At the end of each module, each student's performance is reported to the Registrar, using the following grading system:

H (HONORS) 90-100%  
Superior Performance:

P (PASS) 80-89%  
Satisfactory performance

MP (MINIMAL PASS) 70-79%  
Marginal Performance

F (FAILURE) <69%  
Unsatisfactory Performance

I (INCOMPLETE)  
Course requirements not yet completed

W (WITHDRAWAL)  
Student withdrew from course

### **GRADE APPEAL**

If a student believes that a final grade is unfair, he/she may seek an appeal for a grade change. The burden of proof is on the student. Grades are awarded and changed only by the faculty member or through the appeals process. The student must first appeal to the faculty member, presenting evidence of unfair evaluation. This must occur within the first 30 days after the grade issuance.

### **Remediation**

Any failing course grade must be remediated. A fee will be assessed for this remediation. Remediated courses are graded using the standard OSO grading system. Any “F” grade in a nonclinical course must be remediated within four weeks of the release of the course grade. Any “F” grade in a clinical course must be remediated within four weeks of the release of the course grade. The criteria and requirements for remediation are determined by the course faculty in consultation with the Department Chair. Remediation may include any or all of the following: Full re-examination, Partial re-examination, oral examination, or practice examination.

### **GRADUATION, DESIGNATION**

Following successful completion of all modules, the student is presented with a **Diploma of Traditional Chinese Medicine (or Diploma of Acupuncture)**. The list of completed modules and transcripts are prepared by OSO to be presented to CTCMPAO before students are applying for the Ontario Acupuncture board exams (**Pan-Canadian Written and Clinical Case-Study Examinations for TCM Practitioners and Acupuncturists**)

### **Leave of Absence**

Students may apply for a leave of absence for up to six months. This entitles them to rejoin the next class at the point that they left off in their studies, provided that there is room in the class. If the student does not return by the last day allowed, they will be dropped from the program. The Program Director must be advised of a student’s intention to return to OSO at least one month before the beginning of the academic term in which she/he plans to register. A leave of absence normally will be granted to any student who is in good standing and who has satisfied all financial obligations to OSO. In the case of a medical leave of absence, which may be granted to a student, appropriate documentation is required from the attending physician. The physician must indicate the necessity of granting the leave and subsequently,

the student's fitness for returning to the program. If a student on leave does not return within six months, she/he will be required to submit a new application for admission. The student will need to satisfy admission requirements in effect at the time of reapplication.

## **List of Module:**

### **R.Ac. Program**

#### **Year 1 (7 Modules along with all Mandatory Clinical Practice Hours)**

**AC141 - Fundamentals of Traditional Chinese Medicine**

**AC142 - Acupuncture Techniques I**

**AC143 - Ethics**

**AC144 - Human Anatomy**

**AC145 - Physiology**

**AC146 - Pathology**

**AC147 - Clinical Practice**

#### **Year 2 (5 Modules along with all Mandatory Clinical Practice Hours)**

**AC214 - Oriental Medicine Diagnosis and Treatment I**

**AC215 - Fundamentals of Biomedicine (Western Diagnosis and Pharmacology)**

**AC216 - Acupuncture Techniques II**

**AC217 - Jurisprudence & Safety**

**AC218 - Clinical Practice II**

#### **Year 3 (4 Modules along with all Mandatory Clinical Practice Hours)**

**AC321 - Oriental Medicine Diagnosis and Treatment II**

**AC322 - Acupuncture Techniques III**

**AC333 - Practice Management**

**AC334 - Clinical Practice III**

### **Modules Details:**

#### **AC 333 - Practice Management**

##### **- Maintain patient records:**

- a. Ensure complete and accurate records.
- b. Ensure security and integrity of records.

##### **- Utilize effective business strategies:**

- a. Ensure sound financial management.
- b. Employ ethical business practices.
- c. Establish office procedures and supervise staff accordingly.

## **AC141 - Traditional Chinese Medicine Foundations**

### **1. Apply fundamental knowledge of the following Traditional Chinese Medicine principles in diagnosis and treatment:**

- a. *yin yang*
- b. *wu xing* (five elements)
- c. *zang xiang* (organ theories)
- d. *jing-luo & shu xue* (channels, collaterals and acupuncture points)
- e. *qi, xue, jin ye, jing & shen* (*qi*, blood, body fluid, essence, spirit)
- f. *ti zhi* (constitution)
- g. *bing yin* (etiology)
- h. *bing ji* (pathogenesis)
- i. *yu fang* (prevention)
- j. *zhi ze* (principles of treatment)
- k. *yang sheng* (health preservation)

### **2. Apply fundamentals of acupuncture in diagnosis and treatment:**

- A. Characterize the following points:
  - a. *jing xue* (points of the 14 channels)
  - b. *jing wai qi xue* (extra points)
- B. Apply knowledge of the following special groupings of points, in treatment planning:
  - i , *wu shu xue* (five transporting points)
  - ii , *yuan xue* (source points)
  - iii , *luo xue* (connecting points)
  - iv , *xi xue* (cleft points)
  - v , *bei shu xue* (back *shu* points)
  - vi , *mu xue* (front/*mu* points)
  - vii , *xia he xue* (lower sea points)
  - viii , *ba mai jiao hui xue* (eight confluent points)
  - ix , *ba hui xue* (eight meeting [influential] points)
  - x , *zi mu xue* (mother/child points)
  - xi , *jiao hui xue* (channel crossing points)
  - xii , *a shi xue* (*ah shi* points)
  - xiii , ear and scalp acupuncture
- C. Select points for assessment
- D. Select points or areas for therapy
- E. Select stimulation techniques
- F. Apply knowledge of precautions and contraindications for application of stimulation techniques.
- G. Apply knowledge of:
  - i , *tui na/an mo* (acupressure)
  - ii , *qi gong/tai ji*
  - iii , *gua sha*

## **AC215 - Fundamentals of Biomedicine**

### **- Apply basic biomedical concepts to TCM practice:**

- a. human anatomical structures
- b. biochemical processes



- c. control mechanisms
- d. infectious diseases and infection control
- e. dysfunctions and common diseases

**- Relate biomedical diagnostic and treatment approaches to TCM practice:**

- a. diagnosis and treatment methods
- b. pharmacology

**- Integrate TCM and biomedical concepts:**

- a. Relate biomedical information concerning patient's condition and treatment to TCM state of health.
- b. Communicate TCM diagnostic and treatment information for use by other health-care workers, and to third parties.

**AC214 (Year 2) & AC321 (Year 3) - Diagnostics and Treatment**

**- Establish priorities for assessment and treatment planning:**

- a. Identify chief complaint.
- b. Initiate assessment based upon chief complaint.
- c. Recognize conditions that require urgent medical treatment and direct patient appropriately.
- d. Modify assessment strategy based upon emerging information.
- e. Initiate collaboration, consultation or referral as appropriate.

**- Assess patient:**

- a. Collect information using *wang zhen* (TCM diagnostic inspection method).
- b. Collect information using *wen zhen* (TCM diagnostic inquiry method).
- c. Collect information using *wen zhen* (TCM diagnostic auscultation and olfaction methods).
- d. Collect information using *qie zhen* (TCM diagnostic palpation method).
- e. Measure vital signs.
- f. Conduct relevant non-invasive physical examination.

**- Analyze assessment information:**

- a. Organize and interpret the collected information using the following TCM syndrome differentiation methods:

- i. *ba gang bian zheng* (eight principles differentiation)
- ii. *zang-fu bian zheng* (organ theory differentiation)
- iii. *wu xing bian zheng* (five elements differentiation)
- iv. *san jiao bian zheng* (triple warmer differentiation)
- v. *wei qi ying xue bian zheng* (four levels differentiation)
- vi. *liu jing bian zheng* (six stages differentiation)
- vii. *qi xue jin ye bian zheng* (qi, blood, body fluid differentiation)
- viii. *bing yin bian zheng* (pathogenic factors differentiation)
- ix. *jing luo bian zheng* (meridian differentiation)

- b. Incorporate information obtained from biomedical diagnostic data and medical and health history.

- c. Make TCM diagnosis.

- **Establish treatment plan based on diagnosis:**
  - a. Determine treatment goals and strategies.
  - b. Take into account precautions and contraindications.
  - c. Adapt treatment according to patient characteristics and needs.
  - d. Select appropriate points, point combinations and/or treatment areas.
  - e. Select appropriate course of acupuncture treatment and therapeutic modalities.
  
- **Provide acupuncture treatment:**
  - a. Adapt clinical setting to enhance comfort and safety.
  - b. Position patient for treatment.
  - c. Locate selected points on patient.
  - d. Apply treatment techniques.
  - e. Monitor and respond to patient condition during treatment.
  
- **Monitor effectiveness of treatment plan and modify where necessary:**
  - a. Evaluate effectiveness of treatment plan on an ongoing basis.
  - b. Modify treatment plan to enhance effectiveness.
  
- **Educate and counsel patient:**
  - a. Explain etiology and pathogenesis of condition.
  - b. Explain TCM concepts as they apply to patient condition.
  - c. Inform patient of possible side effects and reaction to treatment.
  - d. Advise patient on *yu fang* and *yang sheng* (prevention and health preservation).
  - e. Counsel patient on compliance with treatment recommendations.

### **AC142 (Year 1) & AC216 (Year 2) & AC322 (Year 3) - Acupuncture Techniques**

- **Perform needling:**
  - a. Perform filiform needling.
  - b. Perform dermal (plum blossom, seven star) needling.
  - c. Perform intradermal tack needling.
  - d. Perform three edge needling.
  
- **Perform moxibustion:**
- **Perform direct moxibustion:**
  - a. Perform direct moxibustion.
  - b. Perform indirect moxibustion.
  - c. Perform needle warming moxibustion.
  
- **Perform treatment utilizing supplementary devices.**
  - a. Perform stimulation using heat lamps.
  - b. Perform stimulation using electro-acupuncture devices.
  
- **Perform cupping.**
- **Perform *tui na*.**

## **AC217 – Safety**

### **- Evaluate patient risk profile:**

- a. Determine risk profile relative to acupuncture treatment.

### **- Provide a safe working environment:**

- a. Maintain current knowledge of communicable diseases and infection control techniques.
- b. Apply universal precautions for infection control.
- c. Ensure effective supervision of staff and/or students.
- d. Inspect facilities on a regular basis for electrical hazards, fire risk and physical hazards that may cause accidents, and take action to minimize.
- e. Establish procedures and route for emergency evacuation of facilities.
- f. Establish procedures to maximize protection of self, staff and patients in the event of abusive or violent behaviour.

### **- Manage risks to patients:**

- a. Include safety precautions in herbal treatment plan.
- b. Manage adverse reactions and accidents resulting from treatment.
- c. Respond appropriately to medical emergencies.
- d. Manage blood-to-blood contact and provide direction for post exposure follow-up.
- e. Clean spills of blood and other body fluids.
- f. Control and extinguish small fires.

### **- Ensure that equipment is safe and functional:**

- a. Select equipment that enhances patient safety.
- b. Maintain equipment in good working order.
- c. Clean and equipment regularly, and disinfect as appropriate.

## **List of TCM Illnesses**

| <b>Internal Medicine (Nei Ke)</b> |                                   |
|-----------------------------------|-----------------------------------|
| 1                                 | abdominal mass (ji ju)            |
| 2                                 | abdominal pain (fu tong)          |
| 3                                 | atrophy-flaccidity (wei zheng)    |
| 4                                 | bleeding disorders (xue zheng)    |
| 5                                 | chest impediment (xiong bi)       |
| 6                                 | common cold (gan mao)             |
| 7                                 | constipation (bian bi)            |
| 8                                 | consumptive disease (xu lao)      |
| 9                                 | consumptive thirst (xiao ke)      |
| 10                                | convulsive syndromes (jing zheng) |
| 11                                | cough (ke shou)                   |
| 12                                | depression (yu zheng)             |
| 13                                | diarrhea (xie xie)                |

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| 14 | drum distension (gu zhang)                         |
| 15 | dysentery (li ji)                                  |
| 16 | dysphagia occlusion syndrome (ye ge)               |
| 17 | dyspnea (chuan zheng)                              |
| 18 | edema (shui zhong)                                 |
| 19 | epigastric pain (wei tong)                         |
| 20 | epilepsy (xian zheng)                              |
| 21 | fainting (jue zheng)                               |
| 22 | goitre (ying bing)                                 |
| 23 | headache (tou tong)                                |
| 24 | hiccupping and belching (e ni)                     |
| 25 | hypochondrial pain (xie tong)                      |
| 26 | impediment syndrome (bi zheng)                     |
| 27 | impotence (yang wei)                               |
| 28 | insomnia (bu mei)                                  |
| 29 | internal damage fever (nei shang fa re)            |
| 30 | ischuria (long bi)                                 |
| 31 | jaundice (huang dan)                               |
| 32 | lumbago (yao tong)                                 |
| 33 | lung distention (fei zhang)                        |
| 34 | malaria (nue ji)                                   |
| 35 | mania (dian kuang)                                 |
| 36 | palpitation (xin ji)                               |
| 37 | pulmonary abscess (fei yong)                       |
| 38 | pulmonary tuberculosis (fei lao)                   |
| 39 | seminal emission (yi jing)                         |
| 40 | spontaneous sweats, night sweats (zi han, dao han) |
| 41 | stranguria (lin zheng)                             |
| 42 | tinnitus and deafness (er ming er long)            |
| 43 | vertigo (xuan yun)                                 |
| 44 | vomiting (ou tu)                                   |
| 45 | watery phlegm/sputum (tan yin)                     |
| 46 | wheezing syndrome (xiao zheng)                     |
| 47 | wind stroke (zhong feng)                           |

## External Medicine (Wai Ke)

|    |                            |
|----|----------------------------|
| 48 | acne (fen ci)              |
| 49 | acute mastitis (ru yong)   |
| 50 | alopecia areata (you feng) |
| 51 | anal fissure (gang lie)    |
| 52 | bedsore (ru chuang)        |
| 53 | boil (ding chuang)         |

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| 54 | breast cancer (ru yan)                                 |
| 55 | breast lump (ru pi)                                    |
| 56 | carbuncle (yong)                                       |
| 57 | contact dermatitis (jie chu xing pi yan)               |
| 58 | digital gangrene (tuo ju)                              |
| 59 | drug rash (yao wu xing pi yan)                         |
| 60 | eczema (shi chuang)                                    |
| 61 | erysipelas (dan du)                                    |
| 62 | furuncle (jie)   |
| 63 | goitre (ying)  |
| 64 | hemorrhoid (zhi)                                       |
| 65 | herpes zoster (she chuan chuang)                       |
| 66 | phlegmon (fa)  |
| 67 | prostatic hyperplasia (qian lie xian zeng sheng zheng) |
| 68 | prostatitis (qian lie xian yan)                        |
| 69 | scrofula (luo li)                                      |
| 70 | sebaceous cyst (zhi liu)                               |
| 71 | shank ulcer (lian chuang)                              |
| 72 | tinea (xian)   |
| 73 | urticaria (yin zhen)                                   |
| 74 | varicose veins (jin liu)                               |
| 75 | warts (you)  |

## Obstetrics and Gynecology (Fu Ke)

|    |   |
|----|---|
| 76 | abdominal masses (zheng jia)  |
| 77 | amenorrhea (bi jing)  |
| 78 | bleeding during pregnancy, unstable pregnancy (tai lou, tai dong bu an) |
| 79 | dysmenorrhea (tong jing)  |
| 80 | infertility (bu yun)  |
| 81 | insufficient breastmilk (que ru)  |
| 82 | intermenstrual bleeding (jing jian qi chu xue)                          |
| 83 | irregular menstruation (yue jing bu tiao)                               |
| 84 | leukorrhagia (dai xia)  |
| 85 | lochiorrhoea (chan hou e lu bu jue)                                     |
| 86 | menstrual breast aching (jing xing ru fang zhang tong)                  |
| 87 | menstrual edema (jing xing fu zhong)                                    |
| 88 | menstrual headache (jing xing tou tong)                                 |

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| 89  | menstrual hematemesis and epistaxis (jing xing tu niu)     |
| 90  | menstrual mental disorder (jing xing qing zhi yi chang)    |
| 91  | menstrual oral ulcer (jing xing kou mei)                   |
| 92  | metrorrhagia and metrostaxis (beng lou)                    |
| 93  | miscarriage (zhui tai, xiao chan, hua tai)                 |
| 94  | morning sickness (ren chen e zu)                           |
| 95  | perimenopausal syndrome (jue jing qian hou zhu zheng)      |
| 96  | postpartum abdominal pain (chan hou fu tong)               |
| 97  | postpartum convulsion (chan hou jing zheng)                |
| 98  | postpartum dizziness (chan hou xue yun)                    |
| 99  | postpartum fever (chan hou fa re)                          |
| 100 | postpartum retention of urine (chan hou pai niao yi chang) |
| 101 | uterine prolapse (yin ting)                                |

## Pediatrics (Er Ke)

|     |  |
|-----|--|
| 102 | anorexia (yan shi)                                 |
| 103 | asthma (xiao chuan)                                |
| 104 | chang dao chong zheng (intestinal parasitic worms) |
| 105 | chickenpox (shui dou)                              |
| 106 | common cold (gan mao)                              |
| 107 | convulsions (jing feng)                            |
| 108 | cough (ke shou)                                    |
| 109 | diarrhea (xie xie)                                 |
| 110 | enuresis (yi niao)                                 |
| 111 | epilepsy (xian zheng)                              |
| 112 | erysipelas (chi you dan)                           |
| 113 | fetal jaundice (tai huang)                         |
| 114 | food retention (ji zhi)                            |
| 115 | malnutrition (gan zheng)                           |
| 116 | measles (ma zhen)                                  |
| 117 | mumps (zha sai)                                    |
| 118 | pneumonia (fei yan ke sou)                         |
| 119 | purpura (zi dian)                                  |
| 120 | retardation and flaccidity (wu chi wu ruan)        |
| 121 | rubella (feng sha)                                 |

|     |                                      |
|-----|--------------------------------------|
| 122 | scarlatina (dan sha)                 |
| 123 | sweating (han zheng)                 |
| 124 | thrush (e kou chuang)                |
| 125 | whooping cough (dun ke)              |
| 126 | infantile edema (xiao er shui zhong) |

## Orthopedics and Traumatology (Gu Shang Ke)

|     |   |
|-----|---|
| 127 | Achilles tendon injury (gen jian sun shang)                                 |
| 128 | acute lumbar muscle sprain (yao bu niu cuo shang)                           |
| 129 | bone fracture (gu zhe)  |
| 130 | calcaneodynia (gen tong zheng)  |
| 131 | carpal tunnel syndrome (wan guan zong he zheng)                             |
| 132 | cervical spondylosis (jing zhui bing)                                       |
| 133 | frozen shoulder (jian guan jie zhou wei yan)                                |
| 134 | ganglionic cyst (jian qiao nang zhong)                                      |
| 135 | joint dislocation (tuo wei)   |
| 136 | knee joint collateral ligament injury (xi guan jie ce fu ren dai sun shang) |
| 137 | lumbar muscle strain (yao bu lao sun)                                       |
| 138 | meniscal injury (ban yue ban sun shang)                                     |
| 139 | prolapse of lumbar intervertebral disc (yao zhui jian pan tu chu zheng)     |
| 140 | piriformis syndrome (li zhuang ji zong he zhang)                            |
| 141 | sprained ankle (huai guan jie niu cuo shang)                                |
| 142 | strained neck (luo zhen)  |
| 143 | tennis elbow (hong gu wai shang ke yan)                                     |