Acupuncture & Oriental Medicine: Now a Mainstream Career Choice

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(Editor’s Note: The Council of Colleges of Acupuncture and Oriental Medicine recently became a member of the NAAHP Advisory Council. Information on the professions and links to additional information are available on the NAAHP website)

Introduction

Although the history of acupuncture and Oriental medicine (AOM) extends over a period of 3,000 years, its practice in the U.S before the 1970s was first confined within Asian communities associated with work on the transcontinental railroad in the 1840s. A resurgence of interest occurred in the 1970s following the publication of an article by columnist James Reston in the New York Times newspaper. Reston extolled the benefits he received from acupuncture anesthesia for an appendectomy in China when President Nixon made his historic visit to that country in 1971. Today the AOM profession boasts numerous national organizations, over 50 colleges and programs offering the highest level of training in the field, some 20,000-25,000 practitioners, significant research interest by the conventional Western medical community, and the increasing integration of AOM practitioners into conventional medical settings.

The media has widely touted AOM as providing relief to the public, notably to celebrities such as Oprah Winfrey, Dr. Mehmet Oz, Jennifer Aniston, Matt Damon, Celine Dion, and various athletes, such as Steve Young, Jerry Rice, Michelle Wie, Shaquille O’Neil, and many Olympic competitors. The reasons for a patient choosing AOM as a viable healthcare modality are also precisely those that make it an ideal career for individuals seeking to provide primary care to the public: AOM is virtually free of the side effects that accompany many modern medical procedures. Moreover, as a relatively inexpensive form of treatment, it is especially appropriate for reducing healthcare costs.

The success of acupuncture today is due to its efficacy, remarkable safety record, cost-effectiveness, and significant public demand.

For AOM practitioners educated in the U.S., the most comprehensive training available is that provided at an institution that has been accredited by the national accrediting agency for the profession, which is the Accreditation Commission for Acupuncture and Oriental Medicine (ACAOM). For a comparison of the levels of education undertaken by various other healthcare professionals specifically in acupuncture, see www.ccaom.org/trainingstandards.asp. Comprehensively-trained AOM practitioners are able to address a wide variety of disorders, as well as specialize in preventative medicine and wellness.
What is Acupuncture and Oriental Medicine?

**Therapeutic Philosophy.** AOM is an ancient and empirical system of medicine based on the concept of qi (pronounced “chee”), which is usually translated as bio-electric energy, and which travels along designated meridian pathways in the body. AOM treatments identify a pattern of energetic imbalance or blockage within a patient and redress that disharmony in a variety of ways. Any or all of the following methods may be used in AOM practice: acupuncture needling, cupping, acupressure, exercises such as tai ji quan and qi gong, as well as Chinese herbal preparations and nutritional recommendations. AOM is a medicine that considers the whole person and tailors specific treatment for each person’s patterns of disharmony. Patients are viewed from a holistic perspective, taking into account their physical, mental, and emotional health. Thus, practitioners spend time developing a collaborative relationship with their patients, assisting them in maintaining their health and promoting a consciousness of wellness.

**Efficacy.** In 1997, the National Institutes of Health issued a Consensus Statement recognizing the efficacy of acupuncture in adult postoperative and chemotherapy-induced nausea and vomiting and in postoperative dental pain. The statement noted additional conditions in which acupuncture may be useful as an adjunct treatment, an acceptable alternative, or included in a comprehensive management program. These conditions include addiction, stroke rehabilitation, headache, menstrual cramps, tennis elbow, fibromyalgia, myofascial pain, osteoarthritis, low back pain, carpal tunnel syndrome, and asthma. The statement viewed further research as likely to uncover additional areas where acupuncture interventions will be useful. The World Health Organization (WHO) also cites over 43 conditions where acupuncture is effective. A non-comprehensive list of conditions for which the WHO finds acupuncture treatment appropriate includes the following:

1. Pain management, including musculoskeletal pain, rheumatological or oncological pain, headache/migraine, and pain palliation at end of life;
2. Neurogenic pain, including neuropathy associated with diabetes mellitus, chemotherapy, and the neuropathy associated with antiretroviral therapy;
3. Women’s health, including dysmenorrhea, premenstrual syndrome, amenorrhea, infertility, and pain associated with endometriosis;
4. Nausea and vomiting associated with pregnancy, chemotherapy-induced nausea, and postoperative nausea;
5. The symptoms associated with viral disorders, including HIV, hepatitis, and herpes;
6. Neurological disorders, including Bell’s palsy, cerebral vascular accident, and multiple sclerosis;
7. Colds, flu and infections;
8. Dermatological complaints, such as dermatitis and psoriasis;
9. Gastrointestinal complaints, including gastralgia, inflammatory bowel disease, irritable bowel syndrome, and gastroesophageal reflux disease;
10. Respiratory complaints, including asthma, shortness of breath, and cough;
11. Urogenital complaints, including dysurea, cystitis, and impotence;
12. Anxiety, depression and other emotional disorders;
13. Chemical dependency and other addictions;
14. Fatigue secondary to chronic illness, medical treatment, or surgery.

**Career Opportunities in AOM**

The future of AOM is bright with great opportunity for graduates in this field. The general public and allopathic medical practitioners are increasingly more aware that there is a dimension of health care that lies beyond the physical nature of a person and that successful well-being if not actual healing includes application of holistic perspectives and related therapies. AOM also addresses the energetic causes of disease and imbalance, using natural holistic means and safe and effective therapies to bring about healing. This awareness is also reflected in the increasing prevalence of integrated health care settings in which AOM practitioners are making an important contribution. With continuing research interest in AOM, coupled with consistent favorable patient outcomes, this ancient form of treatment is well-suited for persons who seek a career in a health profession that embodies a holistic ideal and for patients who seek a safe and effective means of care.

An AOM practitioner can create a financially supportive career that is rewarding and fulfilling, with a flexible work schedule that allows for a balanced life style. The practice settings in which AOM practitioners can work include an independent private practice, a multidisciplinary clinic with other health care professionals, or a hospital. Other career options include teaching, translating, publishing, research, or working with an herb or acupuncture supply company. AOM practitioners also work in the following settings: cruise
line ships; spas and fitness clubs or resorts; substance abuse treatment facilities; hospice, elder care, nursing, and long-term care facilities; oncology centers; community acupuncture clinics, military/veterans facilities, sports teams, and corporate wellness programs.

There are approximately 25,000 AOM licensees throughout the United States. A recent estimate, based on employment listings, reports an annual income range of $30,000-$60,000 and notes that gross annual income can be as much as $105,000. *Chronicle Guidance Brief* 249 (2008) [Acupuncturists]. A Job Task Analysis survey in 2008 of Diplomates nationally certified by NCCAOM indicates that average gross income a year is less than $60,000 for 70.1% of the survey respondents, with twenty-one percent (21.2%) reporting that they earn between $60,000 and $120,000 and 8.7% earning over $121,000 per year. See www.nccaom.org. Variables affecting income may include the nature of the acupuncturist’s practice, geographic location, and personal factors such as the ability of the practitioner to relate well to patients, professional demeanor, and marketing savvy, allowing some acupuncturists to make as much as $200,000 annually. California, New York, Florida, have the most AOM practitioners, but a significant number of practitioners exist in other states.

**AOM Colleges**

**Number/Location of Colleges/Enrollment.** There are currently 52 AOM colleges in the Council of Colleges of Acupuncture and Oriental Medicine (CCAOM), which since 1982 has been the national membership association for ACAOM-approved programs in the U.S. These colleges are located in 21 states, with some institutions having branch campuses in the same or other states. The mission of CCAOM is to advance AOM by promoting educational excellence in the field. Membership eligibility in CCAOM requires a college to have obtained either accreditation or candidacy status with ACAOM, the U.S. Department of Education-recognized national accrediting agency for the profession. A map showing the location and contact information for all CCAOM member colleges may be viewed at www.ccaom.org. The most recent data from ACAOM indicates that for the year 2009, some 8,100 students were enrolled in AOM programs in the U.S.

**Admission Requirements.** ACAOM’s minimum requirements for admission into an AOM college include satisfactory completion of at least two (2) academic years (60 semester credits/90 quarter credits) of education at the baccalaureate level that is appropriate preparation for graduate level work, or the equivalent (e.g., certification in a medical profession requiring at least the equivalent training of a registered nurse or a physician assistant), from an institution accredited by an agency recognized by the U.S. Department of Education. Many AOM colleges exceed this minimum standard and require a Bachelor’s Degree for admission. Prospective students should inquire directly about admissions requirements with an AOM program of interest and may also refer to the full text of Standard 6 in ACAOM’s *Accreditation Handbook* at www.acaom.org/handbook.htm, which contains additional standards concerning assessment of prior learning, transfer credit, advanced standing, and English language competence.

**Program Length & Degree Designations.** In the U.S., ACAOM-approved AOM colleges offer the highest level of training in this medicine. The length of training at most AOM colleges is approximately three (3) to four (4) years for acupuncture and four (4) years for Oriental medicine programs, with the study of the latter including both acupuncture and Chinese herbal medicine.

Currently the Master’s Degree, available in either Acupuncture or in Oriental Medicine, is the entry-level standard for professional AOM practice in the U.S. There is also post-graduate clinical training through the Doctorate of Acupuncture and Oriental Medicine Degree (DAOM) and the Doctorate of Acupuncture Degree (DAc). This training is available at colleges that ACAOM has approved to offer these degrees, with a minimum of 1200 hours required at the doctoral level. Institutions offering doctoral degrees provide students with an opportunity for specialization within the AOM field. A list of ACAOM-approved colleges that offer a doctoral degree in this field may be viewed at www.acaom.org/acddt_cndtcls.htm.

In addition, ACAOM is currently developing accreditation standards for a first professional, entry-level doctoral degree program, independent of Master’s level educational requirements.

**Admissions Process.** While each AOM college specifies its own admissions procedure, AOM colleges generally focus more broadly beyond just admitting academically well-qualified students. Equally or more important is finding individuals who possess the capacity for open-mindedness and compassionate care-giving based on the recognition that the relation-
ship between a patient and the health care provider is crucial to the healing process. Thus, most AOM colleges use a holistic admissions process, giving greater weight to the complete picture that a student presents, rather than looking at GPA or MCAT scores alone.

**Selecting a College.** Prospective students may access the websites of AOM colleges from the CCAOM website (www.ccaom.org), obtain catalogues from colleges of interest, and compare programs at various institutions. It is highly recommended that prospective students personally visit a college to talk to administrators, faculty, current students, and graduates to gain insight into the unique emphasis and general atmosphere of a program. For example, there is significant diversity among AOM schools in the U.S., with representation for the traditional and classical Chinese traditions, Japanese traditions, Five Element traditions including Worsley practice, Korean traditions, and Vietnamese traditions.

**National Standards of Education and Certification.** ACAOM is the only national organization recognized by the U.S. Department of Education for the accreditation of AOM schools and programs in the U.S. It is important for students to attend an AOM college that is accredited or which has accreditation candidacy status with ACAOM, which represents the highest level of AOM institutional or programmatic quality assurance available in the U.S. today. Graduation from an ACAOM candidate or accredited school is a pre-requisite for taking the national certification exams in this field offered by the National Certification Commission for Acupuncture and Oriental Medicine (www.nccaom.org). A list of ACAOM’s candidate and accredited schools may be viewed at www.acaom.org/accstd_EndtDschls.htm.

**Clinical Internships.** AOM colleges offer students opportunities to participate in off-site clinics in communities where the colleges are located. Practitioners of AOM in the U.S. are actively involved in bringing services to a broad cross-section of the American public and in multidisciplinary clinical settings that reflect the growing trend toward integrated healthcare delivery involving allopathic medical, AOM, and other providers of complementary and alternative medicine (CAM). There are over 100 off-site healthcare clinics in local communities throughout the U.S. in which the Council’s member colleges participate, thus reflecting the AOM profession’s commitment to public service to diverse patient populations, as well as the extent of public acceptance of and need for acupuncture services. The types of integrated community settings where the Council’s member colleges are active include all the settings where AOM practitioners work.

**State Licensure**

Beginning with the enactment of the first acupuncture practice acts in the U.S. in 1973, states have responded to public demand for acupuncture services by adopting statutes and regulations for the profession. Today some 44 states and the District of Columbia have enacted practice act legislation for the AOM profession and legislative efforts to obtain practice rights are underway in the remaining states.

**Scope of Practice.** The scope of practice for AOM varies among the states. State practice acts often define acupuncture as the stimulation of certain points on or near the surface of the human body by the insertion of needles to prevent or modify the perception of pain, to normalize physiological functions, or to treat certain diseases or dysfunctions of the body. Some state statutes reference the energetic aspect of acupuncture, its usefulness in controlling and regulating the flow and balance of qi in the body, and its ability to normalize energetic physiological function. Acupuncture may also be defined in the statutes by reference to traditional or modern Chinese or Oriental medical concepts or to modern techniques of diagnostic evaluation.

Depending on the state law, AOM practitioners may be authorized to employ a wide variety of AOM therapies such as needling, moxibustion, cupping, electroacupuncture, Oriental or therapeutic bodywork, therapeutic exercise and meditation, acupressure, dietary recommendations, herbal therapy, injection and laser therapy, ion cord devices, magnets, qi gong, and massage. Within applicable limitations specified by the law, the treatment of animals, the ordering of western diagnostic tests, and the use of homeopathy may also be within the scope of practice for AOM in some states.

**Administrative Structure.** Licensure is the most common form of state authorization to practice AOM. In most states, practitioners have independent status. In a few states, practitioners may be subject to some supervision or prior referral by an allopathic physician. The most common designation for a comprehensively trained AOM practitioner is “Licensed Acupuncturist (L.Ac.),” with some states conferring
the licensing title of “Doctor of Oriental Medicine” or “Acupuncture Physician.” Although the nature of the administrative body that oversees the practice of AOM in the states is not uniform, the most common structures are those of an independent board of acupuncture composed of professional acupuncturists, or an acupuncture advisory body under the oversight of a state medical board.

**Additional Information**

Health professions advisors and students seeking further information about career options in AOM may view CCAOM as an informational resource. The Council’s website (www.ccaom.org) has specific information for both advisors and students, and general information about the AOM profession in the U.S.

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**Remarks from the NAAHP Liaison to CCAOM**

_Janet Snoyer, Cornell University_

David Sale, the Executive Director of CCAOM invited me to its semi-annual meeting in Albuquerque, NM this past April. He asked me to give a brief presentation about NAAHP and health advising. Most of CCAOM’s member institutions are represented at its biannual meetings by officers at independent AOM (Acupuncture and Oriental Medicine) colleges. I was fortunate to sit in on informational sessions where I learned of this profession’s aspirations for the role of AOM in America’s health care reform movement. AOM serves a critical role in integrated medical care.

In my presentation I focused on three areas. First, I described typical profiles of health advisors and their role in undergraduate career orientation. Second, I presented comments gathered from Cornell alumni currently in medical school that depicted their wide-ranging views of AOM as a profession and medical modality. Third, I presented ideas on how effective outreach and student recruitment works at the undergraduate level.

I learned much of interest from students at my own university. AOM is intrinsically fascinating to undergraduates, even though many have had no personal exposure to the field. However, at the same time startling misinformation about the field abounds. Students claimed that acupuncture is a new medical technique, that it is “new age”, or that is has no scientific credibility.

The role of liaison in this field is to facilitate CCAOM’s outreach to undergraduates and to help spread reliable information to health advisors about this career choice. I have learned and seen that many students for whom allopathic medicine will not be ultimately a good match will find AOM to be everything they have yearned for in healthcare provision. I recommend that all health advisors pay a visit to the AOM school near them.

In only a few months of being in the liaison role, it has been deeply rewarding to serve this deserving and vital organization on behalf of NAAHP and our students.