



TEXAS STATE BOARD OF ACUPUNCTURE EXAMINERS

Application for Continuing Acupuncture Education (CAE) Course Approval

THIS APPLICATION IS FOR COURSES THAT ARE NOT APPROVED BY THE NCCAOM **DO NOT SUBMIT IF YOUR COURSE IS APPROVED BY THE NCCAOM**

As a prerequisite for acupuncturist license registration, licensees are required to complete continuing acupuncture education. Rule §184.17 Biennial Continuing Acupuncture Education (CAE) Requirements describes the type of CAE courses and the number of hours a licensee must complete in order to register or renew their license.

The content of the course, program, or activity must be related to the practice of acupuncture or oriental medicine and must be related to the knowledge and/or technical skills required to practice acupuncture or be related to direct and/or indirect patient care. To assist you in determining the eligibility of the course, program, or activity, shown below is the statutory definition of acupuncture (§205.001(2)(A) and (B) TEXAS OCCUPATIONS CODE ANNOTATED):

"Acupuncture" means:

(A) the nonsurgical, nonincisive insertion of an acupuncture needle and the application of moxibustion to specific areas of the human body as a primary mode of therapy to treat and mitigate a human condition, including evaluation and assessment of the condition; and

(B) the administration of thermal or electrical treatments or the recommendation of dietary guidelines, energy flow exercise, or dietary or herbal supplements in conjunction with the treatment described by Paragraph (A).

Procedure

An application can be reviewed and approved by the Director of Licensure but can escalate to the Executive Director or the Board. Course approval is valid for a maximum of three years and may be reconsidered at any time during the three years. Retroactive approval will not be granted. Applications must be processed and found to be in order at least 30-45 days prior to the next board meeting in the event review of the application has escalated to the Board.

A course is an organized presentation of information for the purpose of providing instruction or training in the practice of acupuncture. A program is an organized event made up of two or more courses. If you develop a program that includes only courses that have previously been approved, and the course approval is still in effect, there is no need to resubmit an application for approval of the courses in the new program format.

The following items must be submitted for **each** course:

- Application for CAE Course Approval, signed by the President, Chief Executive Officer, or Chief Operating Officer.
- Applications must be typewritten.
- Course Information Sheet.
- Course Schedule Sheet. Credit hours must be broken down hour by hour on the sheet.
- Course Instructor Information Sheet for each instructor of the course.
- A \$25 fee per course application. Make check payable to the TSBAE.

A sample of a completed Course Schedule Sheet and a Participant Evaluation Form are included at the end of this packet.

If you have any questions regarding continuing education requirements, please email us at registrations@tmb.state.tx.us.

Location Address:
1801 Congress Ave, Suite 9-200
Austin, Texas 78701

Mailing Address
P.O. Box 2029
Austin, Texas 78768-2029

Phone 512.305.7030
Licensure Fax 888.550.7516
www.tmb.state.tx.us

TEXAS STATE BOARD OF ACUPUNCTURE EXAMINERS

Application For Continuing Acupuncture Education Course Approval

Provider Name _____

Provider Address (Street, City, State, Zip) _____

Telephone Number _____

E-Mail Address _____

I, _____, hereby certify that:

- (1) The course is not approved by the NCAAOM;
- (2) the content of the course, program, or activity is related to the practice of acupuncture or oriental medicine and shall: (A) be related to the knowledge and/or technical skills required to practice acupuncture; or (B) be related to direct and/or indirect patient care.
- (3) the method of instruction or teaching is adequate to teach the content of the course, program or activity;
- (4) the credentials of the instructor(s) indicate competency and sufficient training, education and experience to teach the specific course, program, or activity;
- (5) the provider will maintain an accurate attendance/participation record on individuals completing the course, program, or activity;
- (6) each credit hour for the course, program, or activity is equal to no less than 50 minutes of actual instruction or training;
- (7) the course, program, or activity is taught by a knowledgeable health care provider or by a reputable school, state, or professional organization;
- (8) the provider will provide written evaluations to the board upon request.

I further certify that I am familiar with Board Rule 184.18 as they relate to approval of Continuing Education Courses.

Date _____

Signature _____

Printed Name _____

Title _____

President, Chief Executive Officer, or Chief Operating Officer.

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Course Information Sheet

Course Name: _____

Course Description: _____

1. Has this course been previously approved by the TSBAE in a format identical to this submission (circle one)?

Yes No If yes, when was the most recent approval granted? _____

2. Has this course been previously approved by another state board with a formal approval process (circle one)? Yes No If yes, attach documentation of the approval including approval date.

3. Method of Course Instruction (circle all that apply): Lecture Distance Learning

- For Distance Learning, describe the format of the course (circle all that apply):

Live/real-time lecture

Replay of live lecture

Reading only

- For Distance Learning Courses that are Reading only, how long does it take to complete the course?

4. Language(s) of instruction (language of instruction should be included in any advertisement of the course):

- _____

5. Total number of hours requested for this course, by continuing acupuncture education type:

General Acupuncture: _____

Business Practice or Office Administration: _____

Herbology: _____

Ethics and Safety: _____

Biomedicine: _____

1 credit hour equals no less than 50 minutes of instruction. Time taken for simultaneous translation cannot be included in the hours requested for approved CAE.

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Course Schedule Sheet

Course Name: _____

Instructor Name: _____

Must be typewritten. To ensure proper consideration, please indicate the start and end times, a detailed explanation of the topic(s) covered in that hour, the CAE type, and the course content type. Definitions of the CAE types are shown on the next page, as well as full content descriptions and examples of courses of each type. One credit hour is equal to 50 minutes of instruction. **Describe each credit hour (or portion of a credit hour) in a separate row. Make copies of page as needed.**

CAE Type Codes:

CAE Type Codes:

G = General Acupuncture

H = Herbology

E = Ethics and Safety

P = Business Practice or Office Administration

B = Biomedicine

Course Content Type Codes:

T= Theoretical

WM= Western Medicine

BP= Business Practice

PA = Practical Application

PC = Direct/Indirect Patient Care

O = Other (Explain how content relates to the practice of Acupuncture/Oriental Med)

Credit Hours	Detailed Explanation of Topic(s) to be Covered	CAE Type (circle one)	Course Content Type ¹ (circle all that apply)
		G P H E B	T PA WM PC BP O
		G P H E B	T PA WM PC BP O
		G P H E B	T PA WM PC BP O
		G P H E B	T PA WM PC BP O
		G P H E B	T PA WM PC BP O
		G P H E B	T PA WM PC BP O
		G P H E B	T PA WM PC BP O

Provider: _____

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Course Content Types

Theoretical (T)

Theoretical content related to the knowledge of acupuncture, oriental medicine or medical ethics.

Examples: Meridian Theory, Yin Yang, Zang Fu Organs, Five Elements, Eight Principles, Etiology, Body Fluids, Qi, Blood, Shen, Jing, Treatment Principles and Classics, Oriental Philosophy, Diagnosis, Case Studies, Medical Ethics, Risk Management.

Practical Application (PA)

The application of knowledge relating to the practice of acupuncture and oriental medicine.

Examples: Acupuncture Technique, Point Location, Drugless Substances, Nutrition, Exercise, Oriental Massage, Acupressure, Moxibustion, Breathing Techniques.

Western Medicine (WM)

Content related to Western Medicine.

Examples: Courses in first aid, emergency conditions, indications for referral, understanding of diagnostic testing analysis.

Direct and/or indirect patient care (PC)

Content related to direct and/or indirect patient care.

Examples: Sterilization and Preventive Practices, Patient Counseling, Patient Education.

Business Practice (BP)

Content related to business practice or medical ethics.

Examples: Acupuncture Law, Medical Ethics, Patient Management, Office Management, Risk Management.

Other (O)

Please provide a detailed explanation in the space provided of how the course is related to the practice of Acupuncture and/or Oriental medicine.

Content Not Related to the Practice of Acupuncture/Oriental Medicine

No credit will be allowed for these types of courses. Examples: Courses which focus upon the practitioner's self-improvement or self-therapy, personal growth, self-awareness etc.; liberal arts courses in music, art, philosophy, and others unrelated to acupuncture or oriental medicine; all other courses not related to the practice of Acupuncture and/or Oriental Medicine.

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Course Instructor Information Sheet

Course Name: _____

Instructor Name: _____

Instructor's State Licenses Held (include state of license, type of license and license number):

Instructor's Education (name and location of school, date of graduation, type of degree or major emphasis of study):

Summary of Instructor's Qualifications:

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Participant Evaluation Form

CAE Provider Name

Date(s) of Program or Course

Program/Course Title

Instructor Name

Participant's Name and License Number

Date of Evaluation

Did this course meet its stated objectives?

Yes

No

Did the instructor demonstrate adequate knowledge of the course subject?

Yes

No

Did the instructor utilize appropriate teaching methods?

Yes

No

Do you feel that you will be able to apply what you have learned today to your practice?

Yes

No

Would you recommend this course to other licensed acupuncturists?

Yes

No

Additional Comments:

If you have a complaint about this course, you may contact the Texas State Board of Acupuncture Examiners at the address shown below.

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Course Schedule Sheet

SAMPLE

Course Name: The Clinical Application of Natural Antiviral Medications used in Traditional and Modern Chinese Medicine for the Treatment of Viral Diseases and the Enhancement of Viral Immunity

Instructor Name: John Smith, L. Ac.

Must be typewritten. To ensure proper consideration, please indicate the start and end times, a detailed explanation of the topic(s) covered in that hour, the CAE type, and the course content type. Definitions of the CAE types are shown on the next page, as well as full content descriptions and examples of courses of each type. One credit hour is equal to 50 minutes of instruction. **Describe each credit hour (or portion of a credit hour) in a separate row. Make copies of page as needed.**

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Credit Hours	Detailed Explanation of Topic(s) to be Covered	CAE Type (circle one)	Course Content Type ¹ (Circle all that apply)
1	Introduction to the subject of viruses and their treatment with Chinese medicine. Review of clinical virology and Immunology.	G P <input checked="" type="checkbox"/> H E B	<input checked="" type="checkbox"/> PA WM PC BP O
1	Chinese medicine theory of infectious disease and therapeutic strategies for the treatment of viral illnesses.	G P <input checked="" type="checkbox"/> H E B	<input checked="" type="checkbox"/> PA WM PC BP O
1	Same as above.	G P <input checked="" type="checkbox"/> H E B	<input checked="" type="checkbox"/> PA WM PC BP O
1	Review of individual herbs, formulas, and intravenous and injectable herbal medications for the treatment of viral diseases.	G P <input checked="" type="checkbox"/> H E B	<input checked="" type="checkbox"/> PA WM PC BP O
1	Clinical application and modification of herbal formulas, and discussion on the usefulness of acupuncture for viral conditions.	G P <input checked="" type="checkbox"/> H E B	T PA WM PC BP O
1	Summary, and question and answer session.	G P <input checked="" type="checkbox"/> H E B	<input checked="" type="checkbox"/> PA WM PC BP O

Provider: Acupuncture Education Associates, Inc.

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