



OREGON COLLEGE *of* ORIENTAL MEDICINE

**DAOM**  
**Clinical Studies Handbook**  
**2023-2024**

**Doctor of Acupuncture and Oriental Medicine**  
**Degree Program**

**ocom.edu**

*The science of medicine, the art of healing®*

# OCOM Clinical Studies Handbook 2023-2024

## DAOM Program

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Please read this handbook carefully. The information in this handbook is essential for the well-being and safety of students, staff, and patients in the clinics of **Oregon College of Oriental Medicine (OCOM)**. All OCOM Doctor of Acupuncture and Oriental Medicine (DAOM) students and clinic supervisors will be held responsible for the information contained herein.

This document represents the consensus of the clinical faculty and administrators of Oregon College of Oriental Medicine and undergoes review and revision of its contents on a regular basis. As such, this handbook is not to be regarded as a contract. When changes are made, OCOM will make every effort to communicate those changes with reasonable notice to interested parties. The college's DAOM students and clinic supervisors will be held responsible for understanding and complying with all policies and procedures, the information contained in this catalog, and in other publications that the college may distribute from time to time.

NOTES:

- *Unless otherwise specified, references to “the clinic” or “OCOM Clinic” shall mean treatment, practices, or procedures at either of OCOM’s clinic facilities, and includes supervised treatment at off-campus locations.*
- *While regulatory language still uses the term “Oriental medicine,” OCOM has been transitioning toward the use of “Chinese medicine,” where appropriate, when referencing acupuncture and other medical practices of Asian origins.*

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OCOM Clinical Studies Handbook for the DAOM Program – 2023-2024

# 1. DAOM Clinical Internship

## *Description of DAOM Clinical Training*

Clinical training in the DAOM program is characterized by broader and more in-depth clinical experience than occurs at the master's and professional doctorate degree level. The focus in the clinical training is the treatment of complex and chronic conditions. The design of the DAOM Clinical Internship reflects this. On-campus clinical practice has been designed as a collaborative, group learning experience. Because all DAOM students are experienced practitioners, the clinical practice component emphasizes in-depth peer and supervisor discussion of patients rather than a fast-paced, high volume clinical environment.

Students work in small and large groups to enhance peer learning. Students work together in small teams in the interview, diagnosis, and treatment planning, and take turns providing treatment including placement of needles, recommending herbal formulas, and providing patient education regarding qigong, nutrition, etc. Supervisors oversee the student groups, and facilitate the discussion and input with each group, including assistance with advanced diagnostic and acupuncture techniques as well as herbal formulas. The Chair of Chinese Medicine may serve as a supervisor or is available for additional consultation. The Chair of DAOM Clinic is also available for consultation.

On the DAOM clinic day, students see new and returning patients with an emphasis on assessing progress, modifying treatment approaches, incorporating other care as appropriate, gauging success, and completion of care. The last 15 minutes of both the morning and afternoon clinic shifts are devoted to case discussion and reflection. Case discussion also occurs in group discussion at the end of the clinic day.

Between modules, returning patients can be seen by interns in the OCOM intern clinic under the supervision of OCOM faculty or by OCOM faculty. When patients return to the DAOM clinic, DAOM students are expected to assess patient progress as reported on patient medical charts during the preceding month, and to modify the treatment plan as necessary.

## *DAOM Clinical Internship Learning Objectives*

The learning objectives for the DAOM Clinical Internship courses are closely linked to the didactic portions of the DAOM program and reflect its integrated approach.

Upon completion of the course, students will demonstrate the ability to:

1. Maintain appropriate professional demeanor at all times in the clinic, at a level consistent with postgraduate clinical work, as indicated by self, peer, and supervisor assessments
2. Participate actively, and at an appropriately high level, in discussions about clinical cases in classroom settings and in meetings with peers and supervisors, as indicated by self, peer, and supervisor assessments
3. Apply advanced skills and knowledge in core clinical areas, including:
  - a. Diagnosing disorders pertaining to the topics taught in the specialty modules, within the scope of acupuncture and Chinese medicine practice
  - b. Demonstrating, via the process of diagnosis and treatment, advanced critical thinking skills
  - c. Applying a range of advanced Chinese medicine treatment modalities taught in the DAOM program to the patients treated, potentially including classical acupuncture techniques, scalp needling, auricular needling, modern acupuncture techniques, moxibustion, electrical stimulation, tuina, herbal medicine, nutrient therapy, and lifestyle recommendations
  - d. Planning case management strategies, and making appropriate referrals for patients with chronic, complex disorders
  - e. Performing appropriate physical assessments on patients, integrating both Chinese palpation techniques and Western orthopedic and neurological examination, as appropriate
4. Integrate Chinese medicine and Western biomedical approaches to patient care, as indicated by self, peer, and supervisor assessments
5. Maintain high quality clinical charts, consistent with postgraduate-level clinical work, and show low levels

- of charting errors, as indicated by supervisor assessments
- 6. Manage complex and chronic cases successfully over time, as indicated by self, peer, and supervisor assessments
- 7. Apply advanced skills and knowledge in specialty areas (specifically, women’s health and the aging adult), including diagnosis, treatment planning, and delivery of care

## 2. Legal Issues

DAOM students must conform to and follow all legal requirements established by the Oregon Medical Board (see Scope of Practice below), practice within the limits of our professional liability insurance, and conform to OCOM confidentiality standards. These issues are presented here, but are covered more in-depth in the OCOM Clinic Policies and Procedures Handbook and the OCOM Patient Privacy Policies Handbook.

Students must observe State of Oregon scope of practice laws and applicable federal laws. Furthermore, their ability to participate in direct patient care at a specific site and their specific role at each site is instructed by the site acupuncturist. Inappropriate conduct at any site, including the OCOM clinics, may result in shift removal at the discretion of the supervisor.

### 2.1 Scope of Practice

OCOM’s DAOM Clinical Internship follows the rules and regulations established by the Oregon Medical Board regarding acupuncture clinic training. A booklet on state acupuncture laws, “Acupuncture and Oriental Medicine State Laws and Regulations,” published by the National Acupuncture Foundation, is kept on reserve in the OCOM Library.

All clinical students and faculty members must practice acupuncture and Chinese medicine according to the scope of practice outlined by the “Oregon Medical Board Acupuncture Administrative Rules” Chapter 847 regulating the practice of acupuncture (Division 070, definitions 847-070-0005 through 847-070-0055). In part, the scope of practice is defined as follows:

1. “Acupuncture” means an Oriental health care practice used to promote health and to treat neurological, organic or functional disorders by the stimulation of specific points on the surface of the body by the insertion of needles. “Acupuncture” includes the treatment method of moxibustion, as well as the use of electrical, thermal, mechanical or magnetic devices, with or without needles, to stimulate acupuncture points and acupuncture meridians and to induce acupuncture anesthesia or analgesia.
  - a. The practice of acupuncture also includes the following modalities as authorized by the Board of Medical Examiners for the State of Oregon: traditional and modern Oriental Medical and acupuncture techniques of diagnosis and evaluation; Oriental massage, exercise and related therapeutic methods; and the use of Oriental pharmacopoeia, vitamins, minerals, and dietary advice.
2. “Licensed Acupuncturist” means an individual authorized by the Board to practice acupuncture pursuant to ORS Chapter 677.
3. “Board” means the Board of Medical Examiners for the State of Oregon.
4. “Committee” means the Acupuncture Committee.
5. “Physician” means an individual licensed to practice medicine pursuant to ORS Chapter 677.
6. “Clinical training” means supervised clinical training which consists of diagnosis and actual patient treatment which includes insertion of acupuncture needles.

***NOTE: It is a felony to practice acupuncture without a license in the state of Oregon. DAOM clinical students at OCOM can only insert needles under the direct supervision and presence of an OMB-approved supervisor (regardless of the student’s own license). Inserting needles in people or animals outside of the clinic constitutes grounds for expulsion and legal prosecution. Moreover, OCOM assumes that if the practice is not specifically outlined in the Oregon scope of practice, clinical faculty and students should not practice it.***

## 2.2 Professional Liability Insurance

All clinical students and clinical instructors (clinic supervisors and herbal medicinal supervisors) are covered by OCOM's professional liability insurance. This coverage is extended to all clinical activities in OCOM's clinics and at recognized off-campus treatment sites. OCOM professional liability insurance does not cover practice outside of OCOM clinic sites such as private practice and other off-campus sites.

Coverage by the policy assumes that all activities are legal and within the scope of practice of an acupuncturist or a licensed massage therapist (according to which is appropriate). Again, clinic supervisors (both on and off campus) are licensed acupuncturists and responsible for all diagnosis and treatment decisions. Clinical students must defer to these licensed professionals for all clinical decisions or risk expulsion from the program.

## 2.3 Legal Responsibility of Clinic Supervisors in Patient Care

Clinic supervisors assume primary responsibility for patient care in the clinic under the scope of practice for acupuncturists outlined above. Clinical students are practicing under the supervision of their supervisor under the auspices of the college. Patients seen by the clinical students are under the direct care of clinic supervisors. Quality patient care should follow from this general rule. DAOM students may only make suggestions to patients regarding a diagnosis or treatment with prior approval from their supervisor. DAOM students must discuss their diagnosis and treatment plan in private with their supervisor before speaking with the patient.

The supervisor must approve all treatments, including acupuncture, herbal treatments, massage, and patient recommendations. DAOM students are practicing under the auspices of the college under the supervision of clinical faculty regardless of their own licensure. All treatments must have proper chart recording and take place in the treatment room with supervision. This also applies to treating student peers during a module.

All treatments must be recorded in each patient's chart. It is also important that clinical students never contradict a supervisor in the presence of a patient. Instead, they should talk to the supervisor about their questions or reservations outside the treatment room.

***At no time may a student intern commence patient treatment without the approval of their assigned supervisor. Incidents of such behavior may result in immediate removal from the clinic until the student intern is brought before the Dean of Postgraduate Studies, Associate Dean of Clinical Education, and Chair of DAOM Clinic. Further incidents may result in expulsion from the program for practicing acupuncture without a license.***

**Moreover, leaving a patient unattended by exiting the floor or building during treatment constitutes a failure to uphold acceptable standards of care.** Students may not leave the clinic floor during a shift without the prior approval of the shift supervisor and are expected to remain in the building at all times. Incidents of leaving the clinic floor or building may result in immediate suspension or dismissal from internship.

Clinical supervisors have five primary areas of responsibility:

1. Assuring the provision of high-quality patient care
2. Providing clinical education
3. Measuring clinical competence
4. Supporting the functioning of a professional community-service clinic
5. Assuring that all legal and safety guidelines are followed

The following tasks must be performed by supervisors for all treatments during the entire year of internship:

1. Evaluating the patient's progress to date.
2. Confirming all diagnostic indicators: the pulse, the results of tongue observation, the results of general observation, and the information received from channel and body palpation.
3. Discussing and approving the diagnosis.
4. Discussing and approving the treatment principles and treatment plan.
5. Signing all charts after thorough review.

## *2.4 Patient Privacy and Confidentiality*

As part of compliance, OCOM students are required to attend annual privacy policy trainings. Students must remain respectful of all patients' confidentiality, including staff, faculty, and students who are treated in the clinic. Students should not discuss information regarding a patient in the waiting area, other clinic public areas, or outside the clinic. Patient names must always be deleted from all conversations, forms, and documents when presenting the patient's case outside of the clinic (including in Case Presentations and other case discussions). All patient charts must remain in the clinic (clinic conference room, patient treatment room, Clinic Theater room, or file room). Patient files and/or EHR (electronic health record) devices such as iPads must not be placed in student mailboxes or lockers.

OCOM's clinics have specific patient confidentiality requirements. Staff (including clinic supervisors, interns and observers) and visitors in patient treatment and consultation areas must conform to these policies, which are designed to insure the privacy of our patients. All students will sign a confidentiality agreement at the start of their clinical training. Students may not begin their Clinical Internship until they have signed this form.

All Clinical Studies students are responsible for understanding the OCOM Clinic Policies and Procedures Handbook, and attending the OCOM Patient Privacy Training course. For more information regarding patient confidentiality, consult the OCOM Patient Privacy Training Manual. HIPAA violations are a serious matter and may result in sanctions, up to and including expulsion from the program.

## *2.5 Americans with Disabilities Act (ADA) Services*

Oregon College of Oriental Medicine will provide reasonable accommodations for students with known disabilities in accordance with the definitions provided by the Americans with Disabilities Act, Section 504. Individuals with disabilities must formally request an accommodation under the ADA for OCOM to provide reasonable accommodations. Students shall make their request to the Disability Access Services and Tutoring Programs Coordinator who will verify the disability and collaborate with the student in identifying reasonable accommodations and ways to implement these accommodations. Consult the DAOM Student Handbook for more information.

# **3. Safety in the Clinic**

For the safety of other students, clinical staff, and patients, it is vitally important that each student becomes familiar with the potential health risks of clinical medicine as well as the proper protocols intended to lessen those risks. Of particular concern are the infectious diseases to which all health care providers may be exposed in any clinical setting — most significantly for acupuncturists: hepatitis and HIV. All providers (students and faculty) must complete annual OSHA and HIPAA Trainings and are responsible for the material in the OCOM Clinic Policies and Procedures Handbook for vital information regarding safe practices in OCOM and its associated clinics. Read the OCOM Clinic Policies and Procedures Handbook for information regarding safe practices in the clinic.

## *3.1 Needlesticks and Injuries*

Records of needlestick accidents or injuries must be recorded using an "Incident Report" form with the Associate Dean of Clinical Education or the Chair of DAOM Clinic. This is required by occupational safety and health laws, regardless of whether or not the victim chooses to receive care for the needlestick accident or injury. In addition, any indication of adverse needle reactions (including fainting, dizziness, shortness of breath) must be reported immediately and an "Incident Report" completed.

Further information pertaining to needlestick incidents are included in the OCOM Clinic Policies and Procedures Handbook.



## 3.2 Inclement Weather, Snow Policy, and Other Emergencies

The DAOM Program administration, in consultation with the OCOM President, will make decisions regarding the closure of the DAOM clinic due to inclement weather or other emergencies. Students will be contacted via email.

### **Fire and Evacuation Procedures**

OCOM will hold one fire evacuation drill annually. Any fire alarm that is not part of the annual system test must be treated as real and clinic staff and students should follow standard building evacuation protocols.

OCOM Clinic (4th Floor): Maps of emergency evacuation routes are posted throughout the campus. All signs show illustrated primary escape routes. All staff, faculty, and students should be familiar with routes so they may safely direct individuals from the building in case of a fire or other emergency. Evacuees must make their way to the nearest stairwell and proceed to the nearest exterior exit once they reach the ground floor. Elevators are not to be used for emergency evacuation purposes. Clinic staff, faculty, and students will direct all ambulatory patients and visitors to the nearest designated escape route. They will also transport all non-ambulatory patients to the nearest landing inside the stairwell where they will wait for evacuation assistance from local emergency response personnel. See OCOM's Emergency Action Plan for more details about fire and evacuation procedures.

## 3.3 Student Health

Clinical students are encouraged to have individual health insurance to take care of themselves in case of a medical emergency. Clinical students are also encouraged to become vaccinated for hepatitis B as a precautionary measure to protect themselves from this bloodborne pathogen. If students wish to become vaccinated for hepatitis B and do not have health insurance, the Multnomah County Community Immunization Unit (503-988-3406) has information on where reduced rate vaccines may be obtained.

## 4. DAOM Charting Requirements

According to the Oregon Medical Board (OMB), effective charting is clear and concise without neglecting any information pertinent to follow up treatments. The medical information should be worded in such a way that all who read the chart can easily understand what happened. In this way continuity of care is insured for the patient, no matter who treats the patient.

The practitioner, when charting, according to the OMB, must provide an "adequate medical record." An "adequate medical record" means legible medical records containing the following information:

1. Sufficient information to identify the patient
2. Information to support the diagnosis
3. Information to justify the treatment
4. Accurate documentation of the results of treatment
5. Advice and cautionary warnings provided to the patient
6. Sufficient information for another practitioner to assume continuity of the patient's care at any point in the course of treatment

The information in the chart should be clear, concise, professional, and objective. Practitioners should avoid making personal judgments and suppositions about what is going on with a patient.

OCOM uses Unified Practice as its electronic health record (EHR) system, and students will chart all patient encounters electronically.

### **Depression and other mental health disorders**

Acupuncturists (and massage therapists) cannot make diagnoses about depression and other mental disorders. For example, if the patient reports feeling depressed, please chart in parentheses: "the patient reports feeling depressed." This indicates to the reader that this is the patient's self-description, not the provider's diagnosis.



# 5. Herbal Medicinary Information

## 5.1 Available Herbs

The OCOM Herbal Medicinary dispenses a variety of herbal products in various forms. Each treatment room has a chart that outlines for patients the characteristics for each type. Products include:

- Bulk Substances – These are dried plant, animal, and mineral substances for use in decoction, poultices, washes, and pill making.
- Concentrated Granules – These are medicinal substances that are in granular form (convenient for patients).
- Chinese Patent Medicines – These include a wide variety of prepared herbal formulas in pill, patch, liquid concentrate, capsule, and liniment forms (also convenient for patients).
- Seven Forests Products – These are primarily modifications of important classical Chinese formulas. The dispensary offers a majority of the Seven Forests line of Chinese herbal products.
- Herbal tinctures – These are herbal formulas in an alcohol base.

Any herbs recommended to a patient must be entered into the chart with the appropriate name of the herbs and substances and the proper dosage.

## 5.2 Dispensing Guidelines

DAOM students must adhere to the following guidelines:

1. With all herbal substances, it is important to chart the following instructions as well as to give the patient explicit directions on administration, including:
  - a. the date the particular substance was given
  - b. the dosage
  - c. the method of administration
2. All herbs dispensed by DAOM students, including patent medicines, must be approved by their supervisor.

## 5.3 Filling Bulk Herb, Granule Formulas, and Patent Prescription

DAOM students will fill out an online herb or formula submission via Endao. The request should be submitted at least 15 minutes prior to the end of the patient's appointment. If a bulk formula is prescribed, clear cooking directions for the herbs and proper dosage information should be given in the online request. When the patient picks up the herbs at the OCOM Herbal Medicinary, medicinary staff will go over the instructions with the patient.

## 5.4 Access to the OCOM Herbal Medicinary

Only students currently enrolled at Oregon College of Oriental Medicine may gain access to the OCOM Herbal Medicinary. Only students who have been trained in the procedures of the herbal medicinary may fill herbal formulas. Off-campus access to the herbal medicinary is now available to OCOM alumni and practitioners via the college's online medicinary store. To set up a separate "private practitioner" account, contact OCOM's Director of Medicinary Operations and Herbal Practicum Education.

## **6. OCOM Clinic Information**

### *6.1 General Services*

The OCOM Clinic front desk provides an essential role for patient management. Patient Services Team members at the front desk provide the following services:

- Opening and closing the clinic
- Scheduling patient appointments
- Collecting fees from patients
- Maintaining patient records
- Answering patient and public inquiries
- Supplying clinic forms and supplies
- Handling medical records requests

Because the front desk area is often busy, students — when approaching the front desk in need of information or assistance — should be considerate about the immediate needs of patients in the waiting area. Whenever possible, requests should be made in writing to enhance communication. DAOM students are not permitted behind the front desk.

### *6.2 Patient Education Materials*

Often practitioners want their patients to have a more complete understanding of acupuncture and Chinese medicine or information about their chief complaint. Interns may suggest books, research articles, or websites after speaking to their supervisor, receiving the supervisors' approval, and charting what information is given to the patient in the chart. Students should not make recommendations of any sort (treatment, referral, dietary, or lifestyle) to a patient without prior authorization from a supervisor.

### *6.3 File Room*

The file room is adjacent to the campus clinic's front desk and contains all charts, iPads for EHR charting, staff mailboxes and many clinic forms. The file room is locked to ensure patient privacy. Patient files and iPads may not be removed from the clinic. No portion of a patient file may be copied by students. Requests for file copies for Case Studies are to be made through the Clinic operations personnel only.

### *6.4 Photocopier*

The copy machines are to be used by the clinic administration, supervisors, and front desk staff for clinic related copying. There are photocopy machines in the OCOM Library that may be used for personal purposes. To ensure patient privacy, interns may request copies of up to three pages of a chart for Case Studies through clinic operations personnel only. Students should allow 72 hours for the copies to be delivered.

### *6.5 Conference Room*

At all times, only OCOM students, OCOM staff and faculty, and the DAOM patient being seen are allowed in the clinic conference room.

### *6.6 Pre- and Post-Shift Meetings*

Clinic shifts officially begin 15 minutes before patients are scheduled to be seen. During these first 15 minutes, supervisors meet with students to discuss any relevant business, to discuss patient cases, and to anticipate any special concerns for that clinical shift. Arriving late for pre-shift meetings will result in a reduction of shift hours.

Post-shift meetings are used as an opportunity to reflect upon the interns' experiences treating patients. Meetings will be facilitated by the shift supervisor and are conducted during the last 15 minutes of each shift. Failure to attend pre- and post-shift meetings will result in a deduction of the time from the shift hours.

## *6.7 Front Desk, Conference Room, and Storage Room Supplies*

Supplies such as cotton, gauze, cleaning supplies, hypoallergenic rubber gloves, and alcohol can be found in the clinic Storage Rooms. Supervisors should be informed if any supplies need to be restocked; interns are responsible for restocking conference room supplies. Extra sharps containers are also found in the Storage Room. The following clinic supplies are found at the clinic front desks, in conference rooms, or in the clinic storage rooms:

- Salt
- Aluminum foil
- Stethoscopes – ear pieces and bell are to be cleaned with Cavi-Wipes after every use
- Blood pressure cuffs
- First aid kit
- Masks
- Hypoallergenic gloves
- Povidone Iodine (for immune-compromised patients)
- Tongue depressors
- Emesis trays/kidney basins
- Oscope – ear speculum to be cleaned with Cavi-Wipes after every use (front desk only)
- Scanning Thermometer – to be cleaned with Cavi-Wipes after every use (front desk only)

## *6.8 Student Lockers*

DAOM students have lockers on the third floor. All clinic supplies and other personal items should be stored in these lockers.

## *6.9 Treatment Room Setup*

Students should not remove items from treatment rooms unless they have received permission from their supervisor or the Chair of DAOM Clinic to do so. If a student does obtain said permission, any items removed should be returned as soon as they are finished with them. DAOM interns should always check and properly stock their treatment room prior to their shift.

Every room is supplied with a stainless steel instrument stand, which is to be used exclusively for the clean field. Packets of needles, cotton balls, and gauze should be placed on paper towels that cover the trays and are changed between patients. Trays should be cleaned before and after shifts with Cavi-Wipes; cups, moxa supplies, gua sha tools, and gloves for bleeding should remain on the treatment room counter on paper towels. It is the intern's responsibility to ensure that the patient does not use the tray to place personal belongings.

The treatment beds should be thoroughly cleaned with Cavi-Wipes before and at the end of each shift and between each patient. Gloves must be worn when cleaning to observe universal precautions.

The treatment room should always be left clean after the patient leaves to have it ready for the next patient. The floor and the crease/fold in the treatment table should be cautiously checked for needles. In the event that a room has not been cleaned by the previous team, the room should be cleaned and the Chair of DAOM Clinic notified.

Sharps containers are mounted on the wall in every room in the OCOM Clinic. Interns are encouraged to replace the sharps containers as necessary. Replacement containers are found in the supply closets of the respective clinics. Full, used sharps containers are to be placed in the large, black plastic biohazard waste container found in the storage closet of the clinics.

## 6.10 Patient Supplies

The following supplies are available for interns to use with patients as needed:

- Wheelchair
- Weight scale
- Height chart
- Feminine sanitary products (in the supply rooms)
- Crackers (behind the front desk)

## 6.11 Storage Rooms

There are three storage rooms on the clinic floor. The front desk has the keys should you need them. Supplies such as cotton, gauze, cleaning supplies, hypoallergenic rubber gloves, tissue, feminine sanitary products, and alcohol can be found in the main storage room next to the east stairs. Clean linens are located in the storage room across from Treatment Room 408. Dirty linens are kept in the storage room across from Treatment Room 412. Let the clinic front desk know about any supplies that need to be restocked.

## 6.12 Clinic Schedule

Supervisors and DAOM students are expected to arrive 15 minutes before the clinic shift begins to secure rooms and assure that they are clean and supplied, and to set up for the day (the clinic must be fully operational before the first patient arrives for treatment).

### **Before DAOM students leave at the end of the clinic day:**

All windows must be closed, all fans and heat must be shut off, and all floors must be checked for stray needles.

The following is a list of specific jobs that need to be completed at the end of each day:

- **In the Conference Room:** clear all of the tables, return all reference books to their shelves, straighten chairs, and dispose of trash.
- **In the Treatment Rooms:** clean the tables and counters with Cavi-Wipes, take dirty linen to the storage room, turn off fans, heat, and lamps, see that the windows are closed, check for stray needles, unplug all electronic devices, and turn off the lights.
- **Under no circumstances should the intern leave the clinic if their patient is still in the treatment room.**

DAOM students must honor the commitment to their clinic schedule. DAOM students should not arrive late, leave early, or call at the last minute to cancel. Patients depend on our students as their medical practitioners.

## 6.13 Clinic Fees and Payment

OCOM Clinic fees: See the clinic front desk for a current list of advertised patient fees.

Patients and OCOM students are responsible for payment for all services at the time of the visit. The college will provide a superbill that patients may use to obtain insurance reimbursement.

Patients must give 24 hours' notice if they need to cancel an appointment, or they will be charged in full for the visit. This policy is posted in the clinic.

# 7. DAOM Student Clinic Policies

## 7.1 Professionalism

Clinical training requires students to interface with the public, their peers, staff, and clinical supervisors, often under fast-paced circumstances. Professional conduct is not only a requirement in all clinical settings at OCOM, but an essential skill to master for future practice success. The concept of professionalism spans many areas, from ethical behavior and treating patients with the right balance of objectivity and compassion, to dressing appropriately and maintaining clean treatment rooms, to a positive, mature attitude in all personal dealings.

*As a DAOM clinical student, you have qualified for the privilege to learn under the supervision and license of skilled professionals. It is important to remember that this is a privilege. We expect students to receive new information and correction with an open mind and a humble heart. You may not always agree with your supervisor, but bear in mind that you are practicing under their license. As such, the supervisor always has the final say when it comes to patient care.*

### OCOM's Definition of Professionalism

We expect all members of our community to exhibit professional behavior at all times. Ongoing collective attention to the task of maintaining a high standard of professionalism will ensure that OCOM's leading role as a center of excellence in acupuncture and Chinese medical education will continue into the future.

Four primary domains define the scope of professionalism at OCOM. These domains are:

1. High Ethical Standards
2. Appropriate Demeanor and Styles of Interpersonal Interaction
3. Appropriate Levels of Engagement
4. Appropriate Deportment and Appearance

Each domain is described in detail in the *DAOM Student Handbook*. All OCOM students will receive a copy of their program's handbook and are responsible for its content.

### Professionalism and Ethical Standards in Patient Care

While literally all professions attach great significance to ethics and integrity, the health care fields pay particularly close attention to these matters for various reasons. OCOM has identified the following distinct elements of ethical behavior in patient care, which we expect all members of our learning community to attend to at all times.

#### Patient Confidentiality

In any clinical setting, patient confidentiality concerns invariably arise. OCOM is committed to maintaining patient confidentiality, in keeping with the guidelines set out in the Health Information Portability and Accountability Act (HIPAA) of 1996, and any other federal, state, and local regulations that apply. Any member of the OCOM community who has regular contact with patients or their medical records must bear these confidentiality-related concerns in mind at all times and act accordingly. Patient **personal health information (PHI)** is protected, and confidentiality should be maintained at all times. Patient PHI should never be shared by email or on any social media site. Any HIPAA violation is a serious matter and may result in sanctions, up to and including expulsion from the program.

All OCOM students are required to attend an annual Patient Privacy training. For more information regarding patient confidentiality, consult the Patient Privacy Policies Handbook.

#### Patient Safety

Although the evidence suggests that traditional healing practices such as acupuncture are in general very safe, patient safety issues remain important considerations in our work. Any member of the OCOM community who has regular contact with patients, or who works with needles or other devices, or with Chinese herbs, must attend closely and at all times to safety-related concerns, including clean needle technique (CNT) and the appropriate disposal of medical waste. See the OCOM Clinic Policies and Procedures Handbook for more details.

## **Accuracy and Completeness in Medical Record Keeping**

Accurate and complete medical record keeping represents a vital element of documenting the patient care process in a health care setting. As such, medical records are important legal documents. Ethical integrity in patient care requires that OCOM interns, supervisors, and all staff working in clinical settings always carefully attend to the accuracy and completeness of the medical records they are responsible for at all times.

## **Legal “Scope of Practice” Limitations**

Maintaining a constant awareness of scope of practice limitations is another important component of ethical patient care — particularly in “alternative” medical settings such as OCOM’s clinics. It is never ethical or appropriate to treat patients using modalities, recommendations, or practices that fall outside the defined legal scope of practice for the profession. Students, faculty, and staff at OCOM should always keep in mind these limitations, and act accordingly. Details on the scope of practice in the state of Oregon are provided in section 2.1.

## **Compliance with Other Applicable Laws, Rules, and Regulations**

In addition to core scope of practice concerns, laws and rules often establish various legally binding requirements that interns and practitioners must be aware of, and which must guide their actions as they do their work. Professional standards of ethical practice require a knowledge of these restrictions and definitions, and a willingness to abide by them at all times when caring for patients.

## **Maintenance of Appropriate Patient-Practitioner Relationships**

As is true for all health care professions, the maintenance of appropriate boundaries with patients is essential for the integrity of the treatment process, and represents another important element of ethical patient care. It is seldom if ever appropriate for practitioners to treat close friends or family members. Practitioners should not have any non-platonic or sexual relationships with patients. Patient-practitioner boundaries must be clearly established and maintained at all times when working in the treatment room.

## **7.2 Attendance**

DAOM students must be at the clinic on the scheduled day and time. If a student must be late, they are required to call the front desk (503-445-0951) to inform them. Absence or tardiness will be excused in the event of illness, accident, death in the family, natural disaster, or unforeseeable child care issues, but may need to be made up at some other time. Professional courtesy requires that students let teachers and administrators know in advance if they are unable to attend a DAOM class or clinic session, and we expect all DAOM students to adhere to this policy at all times.

### **Online Notification of Absence**

Students should complete the online Notification of Absence form to provide DAOM administration with advance notification if they must be absent for any portion of any required doctoral teaching module(s) — including clinic time. If a student becomes sick during a module, or is forced to miss any teaching or clinic time because of any other unexpected, unavoidable conflicts (e.g., family emergencies) that arise during teaching modules, they are to let a member of the doctoral administration know as early as possible on the day(s) in question, so that the administration will know why the student is absent from clinic on that day. If a student has multiple absences or late arrivals, doctoral administration will meet with the student to discuss the prevention of further absence.

Students should not leave the clinic during their shift without consulting with their supervisor and fellow group members.

### **Attendance documentation**

The DAOM program administration documents attendance at each module for every class and clinic session.



## 7.3 OCOM Clinic Dress Code

We serve a wide demographic in our clinics, and our goal is to be a welcoming space for all people in need of our services. OCOM's Clinic Dress Code Policy is designed with this goal in mind. While the clinical faculty and administration are sensitive to student concerns about self-expression, as professionals we must put the needs of our patients before our own.

DAOM students are encouraged to dress comfortably while still maintaining a neat and professional appearance, appropriate for their role at the college. While in the OCOM Clinic,

DAOM students should maintain commonly recognized professional standards of attire, grooming, personal hygiene, and wear scrubs and a white coat that is clean and pressed, and wear their name badge. An iron and ironing board are available in the DAOM classroom. The name badge (mandatory at every site) is ordered through the Office of the Registrar when students are enrolled in the DAOM program, and distributed to each student at the first DAOM module. The cost for the name badge is applied to each student's account.

Closed toe shoes are required in the OCOM Clinic — sandals or other open toe shoes are prohibited\*. An iron and ironing board are available in the DAOM classroom. DAOM students should adopt similar standards any time they are representing the college off-campus, as well.

Supervisors reserve the right to excuse a student from shift if they are inappropriately dressed.

*\*In certain instances, a student may need to wear a certain type of shoe that may otherwise be unacceptable. In these instances, the student should discuss the situation with the DAOM administration, asking for an exception to the rule.*

Also, the display of tattoos and body piercings should be moderate and not distract patients from their care. Examples of piercings that are discouraged in the OCOM clinics include the following:

- piercings of the nasal septum
- eyebrow piercings
- lip piercings
- cheek piercings
- glabella (between the eyebrow) piercings
- chin piercings

**The college reserves the right to require Clinical Studies students to cover any tattoos that may be deemed offensive (i.e. sexual, violent, or discriminatory imagery, language, or symbols; racial, ethnic, or religious slurs; profanity), and to remove any body piercings or change any article of clothing that may be deemed inappropriate.**

The college strives to maintain a healthy and comfortable environment for everyone that is conducive to health care, education, and productivity, and is free from unnecessary distractions and annoyances. Recognizing that some people have sensitivity or allergic reactions to various fragrance products, **OCOM has been designated a fragrance-free facility.** To ensure that OCOM is a fragrance-free facility, personal products with fragrances (colognes, lotions, deodorants, hair products, etc.) are prohibited. Clothes detergents and fabric softeners should also be fragrance-free. Other fragrant products, whether natural or artificially scented (e.g., candles, potpourri, room deodorizers) are also not permitted on OCOM's campus. With the exception of products used for instructional or therapeutic purposes, anyone required by medical necessity to use medicinal lotions or skin creams that contain odors perceptible to others may request a reasonable accommodation from the Director of Human Resources, the Dean of Postgraduate Studies, the Chair of DAOM Clinic, or the Director of Student and Alumni Affairs. Contact these administrators if you have a concern about scents or odors.

***During the COVID-19 emergency, OCOM requires the use of Personal Protective Equipment (PPE) including face masks and face shields for students and faculty working in the clinic. This requirement is necessary for the protection of our entire community and is mandated by the state of Oregon. As such, all students are expected to comply with this requirement. Failure to do so is a violation of OCOM's Professionalism Guidelines and may result in sanctions, including removal from the clinic.***



## 7.4 Treatment Equipment

DAOM students are required to bring their own treatment supplies and equipment, such as needles, moxa, cups, seven star needles, cutaneous and electronic stimulation instruments, ear seeds, etc. Generic supplies such as cotton balls, gowns, and table paper are supplied by the clinic.

## 7.5 Disciplinary Procedures

All OCOM students are expected to behave in ways that are appropriate in a college setting. In addition to the conduct requirements described in the DAOM Student Handbook, the following actions constitute conduct for which students specifically will be subject to disciplinary sanctions:

- Unexcused tardiness
- Unexcused absence
- Inappropriate attire (the student may be asked to leave the clinic to change or correct attire).
- Not following clean needle guidelines as described by the Clean Needle Course and Test
- Incorrect or unauthorized use of the autoclave (grounds for suspension/dismissal).
- Any level of gross negligence in patient care and management, including non-removal of needles, or bodily injury that results from negligence (grounds for suspension/dismissal).
- Not following established clinic protocols as stated in this handbook, especially regarding issues where public safety and/or college liability is involved (grounds for suspension/ dismissal).

Disciplinary policies and procedures are described in the DAOM Student Handbook.

## 7.6 Discriminatory Harassment, Sexual Misconduct, and Retaliation Policy

OCOM's clinics oppose practices that obstruct academic freedom or interfere with the right of all community members to a professional academic and working environment. Although sexual harassment is the most common form of harassment on any college campus, OCOM's policy is to maintain an environment free from any form of harassment, including harassment on the basis of a person's sex, sexual/gender orientation, marital status, race, color, religion, national origin, handicap, or veteran status. Sexual harassment violates the law and the policies of the college.

Harassment is any verbal or physical behavior that calls specific attention to a person's gender, race, or ethnicity; creates a hostile or adverse academic or work environment; treats students or groups of students differently because of sex, race, ethnic group, religion, or age.

Prohibited conduct may be verbal, visual, or physical in nature. Such harassment may include, but is not limited to:

- Verbal harassment or abuse, including repeated challenging of treatment protocols or decisions made by other interns
- Inappropriate use of stereotypes
- Physical assault
- Pressure for sexual activity
- Inappropriate remarks about clothing, body, or sexual activities
- Inappropriate or unwanted touching or patting
- Leering at or ogling another's body
- Seeking sexual favors accompanied by implied or overt threats concerning one's job, grades, letter of recommendation, etc.
- Retaliation because of the rejection of sexual overtures
- Granting advantages in return for sexual favors

Retaliation against any employee or student for making a complaint about harassment is also prohibited. Community members are faculty, administrators, staff, and students. Community members are responsible for

their own conduct; they must attempt to ensure that others performing college duties under their direction are not involved in harassment. Failure to carry out responsibilities in this area may expose individual community members to discipline up to and including termination or dismissal and personal legal liability.

A student who feels they are a victim of harassment may approach the offender directly, describe, as objectively as possible, the offensive behavior, and ask the offender to discontinue the behavior. Students may also wish to report offensive behavior to clinic staff, faculty, or administration.

In some cases, students may not feel comfortable or safe confronting the offender or may feel the problem has not been resolved after speaking to the offender. In such cases, students should share their concerns with the President. Such conversations are confidential and no action will be taken without the consent of the student.

Upon request, the President will approach the offender with the complaint and act as a mediator between the complainant and the offender, protecting the confidentiality of both parties as long as the proceedings remain informal.

If there is no satisfactory resolution of the problem, the student may make a formal complaint. All formal complaints of harassment will be investigated promptly and thoroughly and, if verified, appropriate disciplinary action will follow. A student wishing to make a formal complaint should address the complaint to the supervisor to whom the accused reports.

## **7.7 Research Integrity Policy**

1. Seeking and imparting knowledge are fundamental to OCOM's academic mission. It follows that researchers have the obligation to perform ethical and high quality research and to communicate results to the profession and to the public.
2. All research must adhere to sound principles of scientific design and be conducted in a manner that will ensure the accuracy of data and permit valid conclusions. Research studies should examine specific questions or test specific hypotheses in study designs that have a high probability of reaching definitive conclusions. All research conducted at OCOM must be approved by the OCOM IRB.
3. The rights and safety of research subjects are of paramount importance.
4. Topics of research must be consistent with the interests of OCOM, collaborating institutions, the health professions, and society-at-large.
5. OCOM students should be taught the principles of ethical and methodologically sound research and should be carefully supervised by faculty mentors in the conduct of research.
6. Research studies must be managed efficiently so that maximal value is obtained from the expenditure of public or private funds.
7. Additional information on the ethical conduct of research can be found in the Belmont Report and in the U.S. Department of Health and Human Services (HHS) regulations for Protection of Human Research Subjects (45 CFR 46, as amended), Protecting Human Research Participants. <http://www.hhs.gov/ohrp/archive/documents/19790418.pdf> <http://www.hhs.gov/ohrp/humansubjects/guidance/45cfr46.html>

### **Related Policies and Publications**

This Research Integrity policy is to be read and considered in conjunction with other related college policies, including but not limited to OCOM policies on:

1. Academic Freedom;
2. Intellectual Property, Conflict of Interest, and Conflict of Commitment;
3. OCOM Copyright Fair Use;
4. Information Technology Use and Data Management;
5. Grant Funding and Administration; and
6. Any other OCOM policies as applicable

## Forms

Forms pertaining to patient care are part of the Unified Practice EHR system currently being used on iPads. Additional hard copy forms are stocked in the filing cabinet in the clinic conference room as well as in the file room. Should any of these supplies run low, inform the clinic front desk. Avoid using master templates; these are for reprinting/photocopying only.

Arbitration form – for explanation of patient grievance procedures; patient signatures are required on this form to commence with care (a read-and-sign form on Unified Practice)

End of Visit Summary – to outline the patient treatment plan

Medication/Supplements – for a complete list of current medication and supplements (the red dot with a white cross on Unified Practice)

Health History Form – All patients must fill out a Health History form before beginning treatment (Filled out electronically on Unified Practice)

Informed Consent and Patient Privacy Practices form (includes an acknowledgment of the receipt of OCOM's privacy practices and financial policies), applicable to all treatment in OCOM's clinics and includes information concerning potential risks or side effects. The Patient Privacy Policies portion of the form is an outline of OCOM's basic privacy practices. All clinic patients must sign this form prior to treatment. (a read-and-sign form in Unified Practice)

Medical Records Release (two separate forms) – To be used if requesting medical records from a patient's provider or sending information to a provider

Incident Report – These forms can be found in the filing cabinet in the clinic conference room, and also in the Needlestick Packets. This form is used to report injuries, unusual incidents with patients involving students, staff, or faculty, and unusual incidents in the clinic in general. When in doubt, complete the form and return it to the Associate Dean of Clinical Education.

PCP Notification Letter – For pregnant patients that are under OCOM clinical care, this letter is sent to the patient's OB/GYN letting them know that we are treating the patient. Similarly, patients with cancer or epilepsy in their health history must be currently under the care of a PCP or specialist and provide a letter to that end.

Acknowledgement of Patient Confidentiality Requirements form – Signed by all OCOM clinical students before working with patients

## 8. Clinic Evaluation of DAOM Students

The evaluation process for the Clinical Internship is both formative and summative, meaning that students receive evaluation feedback during the course, as well as at its completion. Students will receive regular ongoing informal feedback on their performance during the clinical practice hours from supervisors and peer partners. Successful completion of each clinical internship course requires that students receive a satisfactory rating from clinical faculty in each clinical evaluation.

In Clinical Internship, students will receive formative evaluation from core DAOM faculty that will be referenced in the summative evaluations. Formative assessment of intern performance will occur after students' first and third semesters. These assessments will include multiple perspectives, including information from individual interns themselves (self assessment) and core DAOM faculty (faculty assessment). Following formal analysis of self and core faculty evaluations, compiled feedback will be provided directly by the core faculty to each intern, indicating areas of strength and suggestions for improvement.

Final summative assessments by clinical faculty of student performance will take place directly after students' second and fourth semesters. These assessments will pay particular attention to any areas of improvement suggested in the formative evaluations.

## 9. Use of Clinic Conference Room Computers

OCOM Clinic houses computers in its clinic conference rooms to support students and faculty in clinical work, study, and teaching. These computers offer access to the faculty webpage, Populi, and Endao They also offer access to the Internet, thus to National Library of Medicine’s MEDLINE database, and other valuable online resources. Word processing, spreadsheet, database, and presentation programs are available for student use as well.

Computer support is offered by the Office of Information Systems and Technology. Contact the office by emailing [helpdesk@ocom.edu](mailto:helpdesk@ocom.edu) (for support issues) or by phone at 503-253-3443 x127.

All clinic computer users are expected to adhere to the college’s IT policies and the policy below. Users who violate the policy may be subject to disciplinary action.

### **Do not move the computers**

The clinic computers should stay connected to the power source and data line at all times. Do not move the computers from their designated areas or turn them off — they are to be kept “on” at all times.

### **Prohibited uses**

OCOM Clinic computers may not be used to solicit for commercial ventures, religious or political causes, outside organizations, nor are they to be used to create, display or print any message or information that is offensive to others and is based on race, gender, sexual orientation, age, disability, national origin, religious, or political beliefs. In addition, using these workstations to play games or participate in chat rooms is not allowed. The user of the clinic computer also needs to be aware of copyrighted materials on the Internet and may be liable for copyright infringement if the use of such materials is in excess of “fair use.”

### **Research or schoolwork takes precedence**

Clinical work for patients takes precedence over use such as personal email. Be aware of the clinical needs of your fellow students and clinical faculty and relinquish the computer quickly, appropriately, and courteously.

### **No outside/unauthorized software**

Installing or downloading outside software on the clinic computers, including any program from the Internet, is prohibited. This prevents virus contamination to the computers.

### **No changes to configurations**

No changes may be made to the configurations of the clinic computers as these changes may cause difficulty in later use. If you encounter any problem in using any of the computers, contact [helpdesk@ocom.edu](mailto:helpdesk@ocom.edu) or call 503-253-3443 x127.

### **Caution with unknown email attachments**

Computer viruses are commonly sent via email attachments. Because this danger exists, do not open any attachment if you do not know the contents of the attachment. If you have any questions about the safety of an email attachment, contact [helpdesk@ocom.edu](mailto:helpdesk@ocom.edu) or call x127.

### **Save documents to a personal USB jump drive**

If you need to save a document, bring your own USB jump/flash/thumb drive to save your work. Do not save to internal hard drives. This keeps your material safe and leaves the college’s hard drives uncluttered. Be aware that files saved to college hard drives will be deleted.

### **Do not plug personal notebooks into ethernet jacks**

As is true throughout the OCOM campus, students are prohibited from plugging their personal notebooks into OCOM ethernet jacks in the conference room or elsewhere on campus.

### **Printing**

Use of the clinic conference room printer is restricted to documents required by patients.