1. PURPOSE:

The purpose of this protocol is to establish a practice for Physical Therapists, Pharmacists, and Registered Nurses within the <<>> to utilize limited auricular acupuncture services in a variety of inpatient and outpatient care settings as a non-pharmacological treatment for acute and chronic pain.

1. SCOPE:

Limited auricular acupuncture is used to increase access to an abbreviated acupuncture technique for patients with an established diagnosis of either acute or chronic pain or in conjunction with a medical provider’s order.

1. RESPONSIBILITIES:
2. Program Coordinator: will coordinate ongoing professional peer evaluation audits for a total of 10% (up to 30 peer reviewed audits) of all encounters for abbreviated acupuncture within the last year.
3. Provider:
4. Will demonstrate completion of the required four-hour abbreviated acupuncture training module in addition to ongoing training as identified.
5. Will complete required onboarding in addition to initial and annual clinical competency assessment.
6. Will consult with the patient’s medical provider as clinically appropriate. Consultation with the referring provider and primary care provider is always initiated if there are any concerns or questions about the appropriateness of the modality.
7. Leadership
8. The Medical Executive Committee will review and approve the use of this protocol.
9. The Director of Nursing will review and approve the use of this protocol.
10. Equipment and Supplies

The below equipment and supplies will be available in facility stock prior to engaging in this service line.

* Alcohol Prep Pads
* ASP Gold Needles
* Non-sterile gloves
* Documentation Template

1. Safety Considerations
2. Treatment with abbreviated acupuncture can cause lightheadedness, euphoria, and vasovagal symptoms. Observe patient as recommended during this procedure.
3. Contraindicated if patient is pregnant, had an aversion to needles, or has had an episode of vasovagal response to needles.
4. Observe appropriate hand hygiene during the procedure.
5. Procedure

The provider will:

1. Select patient for abbreviated auricular acupuncture treatment based on an existing medical diagnosis of acute or chronic pain or based upon a medical provider’s medical order.
2. Screen patient for contraindication to treatment: patient is pregnant, had an aversion to needles, or has had an episode of vasovagal response to needles.
3. Conduct and document patient education.
4. Obtain verbal patient consent for the treatment.
5. Wash hands and clean patient ears with an alcohol wipe.
6. Place patient in seated position.
7. Insert the 1st needle in the Cingulate Gyrus point. Verbally assess patient for lightheadedness, vasovagal symptoms, euphoria, and pain level. Walk the patient. Assess pain level and document any change.
8. Insert the 2nd needle in the opposite ear at the corresponding Cingulate Gyrus point. Assess for lightheadedness, vasovagal symptoms, euphoria and pain level. Walk the patient. Assess pain level and document any change.
9. Insert the 3rd needle in the Thalamus point. Assess for lightheadedness, vasovagal symptoms, euphoria and pain level. Walk the patient. Assess pain level and document any change.
10. Insert the 4th needle in the opposite ear, at the corresponding Thalamus point. Assess for lightheadedness, vasovagal symptoms, euphoria and pain level. Walk the patient. Assess pain level and document any change.
11. Insert the 5th needle in the Omega-2 point. Assess for lightheadedness, vasovagal symptoms, euphoria and pain level. Walk the patient. Assess pain level and document any change.
12. Insert the 6th needle in the opposite ear, at the corresponding Omega-2 point. Assess for lightheadedness, vasovagal symptoms, euphoria and pain level. Walk the patient. Assess pain level and document any change.
13. Insert the 7th needle at Point Zero. Assess for lightheadedness, vasovagal symptoms, euphoria and pain level. Walk the patient. Assess pain level and document any change.
14. Insert 8th needle in the opposite ear at the corresponding Point Zero. Assess for lightheadedness, vasovagal symptoms, euphoria and pain level. Walk the patient. Assess pain level and document any change.
15. Insert the 9th needle in the Shen Men point. Assess for lightheadedness, vasovagal symptoms, euphoria and pain level. Walk the patient. Assess pain level and document any change.
16. Insert the 10th needle in the opposite ear at the corresponding Shen Men Point. Assess for lightheadedness, vasovagal symptoms, euphoria and pain level. Walk the patient. Assess pain level and document any change.
17. Observe for 10 minutes post treatment for side effects. If lightheaded lie patient flat on examination table until symptoms resolve. Seek medical provider advice if symptoms do not subside.
18. Remind patient of small possibility of drowsiness, lightheadedness or euphoria that may occur up to 30 minutes after the treatment.
19. Review home care instructions.
20. Document encounter in EHR using the ‘Abbreviated Auricular Acupuncture’ note template.
21. Ensure follow up appointments are scheduled. If needed, these should be at two to three week intervals.
22. REFERENCES: