

DOCTOR OF TRADITIONAL CHINESE MEDICINE EXAMINATION CANDIDATE HANDBOOK

高級中醫師考試考生手冊



The College of Traditional Chinese Medicine Practitioners
and Acupuncturists of British Columbia (CTCMA)
卑詩省中醫針灸管理局

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Introduction

This handbook includes the policies and procedures for the Competency Examination for Doctor of TCM. The regulatory body for Traditional Chinese Medicine (TCM) Practitioners and Acupuncturists in British Columbia is the College of Traditional Chinese Medicine Practitioners and Acupuncturists of British Columbia (CTCMA). CTCMA will be referred to as “the College” in this handbook. The College is responsible for governing TCM Practitioners and Acupuncturists in accordance with the *Health Professions Act*, RSBC 1996, c. 183 and the Traditional Chinese Medicine Practitioners and Acupuncturists Regulation of British Columbia.

Although accurate at the time of publication, changes may take place without prior notice. While the College will try to advise candidates of important changes, the College reserves the right to make changes in fees, examinations, policies and procedures at any time without advance notice.

The most recent version of this Handbook may be found on the College’s website at www.ctcma.bc.ca.

Purpose of the Examination

The College is mandated by the provincial government to protect the public’s right to safe, effective and ethical TCM services by regulating the practice of TCM.

The purpose of the Competency Examination for Doctor of TCM is to determine if a candidate have acquired the minimum entry-level competency for practice as a Dr. TCM. The public is thus protected when receiving treatment from registered professionals. The competency examination(s) must be written by all applicants.

The Examination is designed to assess knowledge, skills and abilities required for practice. A passing result on the examination indicates that the candidate has demonstrated a minimal standard of competence. A failure result indicates the candidate has not yet demonstrated the minimal standard of competence.

Contact Information

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About the Examination

The Competency Examination for Doctor of TCM consists of two parts. Part 1 is a written examination and Part 2 is a clinical examination. Candidates are required to pass the Written Examination before advancing to take the Clinical Examination. Upon passing the Written Examination, the candidate will be automatically scheduled for the next upcoming Clinical Examination. The written and clinical parts each provide different information about a candidate's knowledge and skills.

Part 1, the Written Examination, consists of multiple-choice items to assess the candidate's knowledge of basic concepts and the application of acquired knowledge to practical situations and problems.

Part 2, the Clinical Examination, consists of two case studies designed to simulate and reflect typical patient - Dr.TCM interaction.

Competencies to be assessed on the examination are specified in the Competency Profile 'Entry-Level Occupational Competencies, Performance Indicators and Assessment Blueprint for the Doctor of Traditional Chinese Medicine' (May 2015).

Technical Specifications

Part 1 Written Examination (Multiple-Choice)

The Written Examination is a computer-based examination which consists of 200 multiple-choice questions. Each question on the examination has undergone a stringent development and review process to ensure its validity. A small proportion of questions are being tested to evaluate their statistical properties and may not count towards your final score. Evaluating these questions' statistical properties allows for confirmation that newly developed questions are performing within acceptable statistical parameters. Following the statistical calibration and analysis of the questions, questions with performance statistics beyond a predetermined threshold are evaluated by subject matter experts and decisions are made as to their use as scored questions. All 200 questions are of equal value with 1 point for correct and 0 points for incorrect or missing responses. It is important to do your best on each question on the examination.

All multiple-choice items are comprised of a question followed by four (4) alternative options. Candidates must indicate the correct or best option for an item to receive a mark. The questions may be based on concepts, theories, clinical situations or diagrams. Examples of the different types of items and instructions for answering the items are provided in Appendix A.

You have up to **4 hours** to complete the Written Examination.

The following table provides the weighting (percentage) of the Written Examination:

PRACTICE AREA	PERCENT
Area 1 – Interpersonal Skills	
Area 2 – Professionalism	2% – 4%
Area 3 – Practice Management	
Area 4 – TCM Foundations	10% – 14%
Area 5 – Fundamentals of Biomedicine	17% – 21%
Area 6 – Diagnostics and Treatment	37% – 43%
Area 9 – Safety	2% – 4%
Area 10 – TCM Classics	10% – 14%
Area 11 – Advanced TCM Practice	9% – 13%



Part 2: Clinical Examination (Interview, Diagnosis & Treatment, Record Keeping)

The Clinical Examination consists of **two** case studies designed to assess the candidate's clinical skills including utilizing the four examinations, performing interviews to collect information; keeping patient records; problem solving; interpreting data; treatment planning; selecting herbal formulas and modifying it to fit patient's case; ensuring accuracy and clarity of the herbal prescription; explaining to patient how to prepare and take herbal formulas; outlining potential risks, precautions, and considerations for patients to know when taking herbal prescription; selecting acupuncture points; selecting other TCM treatment modalities such as moxibustion, Tui Na and cupping, and describing techniques or how and where such therapies are applied; justifying treatment choices, and demonstrating professional behavior and communication skills.

This type of examination is designed to assess the candidate's skills in situations simulated to reflect actual clinical practice. *In each case study*, the candidate will have 30 minutes to interview a standardized patient¹. After this time period is up, the candidate will have 40 minutes to fill out a written test sheet answering questions related to the case.

The candidate will be given general information about the patient. During the interview the candidate will collect information from the standardized patient as they would in a normal clinical setting while being observed by two examiners. In order to maintain consistency, the standardized patient will have cards containing a variety of information about their condition which will be shown to the candidate, when necessary, e.g., the appearance of the tongue, or results of a CBC lab test (complete blood count). During the interaction with the standardized patient, the candidate does not actually perform assessments (such as observation, auscultation, smelling, palpation) on the patient during the exam. Candidates should verbalize to the examiners and the patient that they would like to conduct these assessments in order to collect the findings from these assessments (if available) printed on the corresponding cards.

In each case study, the candidate will be required to make a TCM diagnosis (including TCM patterns) as well as the best choice for the western medical "impression" (what you think the Western Medical diagnosis would be, e.g. diabetes type II), and to provide a herbal prescription and an acupuncture / Tui Na prescription for treatment. The candidate will be tested on the etiology and pathology of the case, their treatment planning, and implementation of the treatment plan in the acupuncture / Tui Na prescription and in the herbal prescription. Candidates are required to give instructions and possible precautions for patient to follow the treatments and make suggestions for dietary changes, lifestyle changes and exercises.

During the Interview Section for each case study, the candidate will be scored by (at least) two examiners on their performances, including communication, professionalism, and skills demonstrated in collecting detailed information through the interview with the patient, TCM assessments and other assessment result reports. The candidate will be evaluated on their interview skills including interaction with the patient (e.g. in a professional manner) and their technical skills (e.g. did they proceed in a logical manner, collecting relevant information in details, effectively collecting information through TCM assessments and other assessment results). The standardized patient will complete a score sheet on the behavior and communication skills of the candidate. An example of the clinical cases is provided in Appendix B.

A typical clinical examination will spend *approximately* 3 hours altogether to attend the clinical examination session for the Interview Section and the Written Questions & Answers Section of TWO case studies.

¹ A standardized patient is a person who has been trained to realistically reproduce the history and the physical and emotional state of an actual patient. Standardized patients are trained to act in the same way with all the candidates.



The following table provides the weighting (percentage) of the Clinical Examination:

PRACTICE AREA	PERCENT
Area 1 – Interpersonal Skills Area 2 – Professionalism	10% – 20%
Area 3 – Practice Management	2% – 4%
Area 4 – TCM Foundations Area 5 – Fundamentals of Biomedicine Area 6 – Diagnostics and Treatment	62% – 82%
Area 8 – Herbal Dispensary Management	2% – 4%
Area 9 – Safety	3% – 5%
Area 10 – TCM Classics	1.5% – 3.5%

Languages

Candidates may choose to take the Written Examination in English, Traditional Chinese or Simplified Chinese and the Clinical Examination in English or Mandarin.

For candidates who choose “Mandarin” as the language of the Clinical Examination, the Interview Section of the Clinical Examination will be conducted in Mandarin, and the Clinical Examination documents (including general information, flash cards) will be written in Simplified Chinese. During the Written Questions and Answer Questions Section, candidates should write in Simplified or Traditional Chinese for their answers.

For candidates who choose “English” as the language of the Clinical Examination, the Interview Section of the Clinical Examination will be conducted in English, and the Clinical Examination documents (including general information, flash cards) will be written in English. During the Written Questions and Answer Questions Section, candidates should write in English for their answers.

Acupuncture Points

Acupuncture points selected for examination will be referred to by the Pinyin names and WHO standard nomenclature. For extra points, Reference Codes will also be used wherever possible.

Traditional Chinese Medicine Herbs

Traditional Chinese Medicine herbs will be referred to by Pinyin names and Latin names (in the English version).

Traditional Chinese Medicine Formulae

Traditional Chinese Medicine formulae will be referred to by Pinyin names and English names (in the English version).



Suggested References

The references (see Appendix C), although not exhaustive, may be helpful to the subject matter experts for the development of questions and to candidates in preparation for the registration examination. The subject matter experts and candidates are encouraged to consult other relevant and authoritative references for TCM Illnesses and Formulae. For convenience, the suggested references have been grouped into six categories.

1. TCM Foundations/Diagnosis
2. TCM Classics
3. Biomedicine
4. TCM Herbology
5. Acupuncture and Tuina
6. Communications, Professionalism and Ethics

Procedures

Examination Requirements

Title	Examinations required			Dr.TCM	TCM Education Requirements (Refer to Schedule E of the College Bylaws for details)
	Acupuncturists	TCM Herbalists	TCM Practitioners		
Dr.TCM	-	-	✓*	✓**	Graduation from a Dr.TCM training program with a minimum of 3,250 hrs including 1,050 hrs of practicum (at least 825 hrs must be in supervised practice) completed in a minimum of 5 academic years

* Candidates may take either TCM Practitioners Examination or both the Acupuncturists and TCM Herbalists to satisfy the examination requirements for the R.TCM.P. title.

** Applicants applying to write Dr.TCM examination must already be registered as R.TCM.P. or be eligible to apply for R.TCM.P. registration with CTCMA (holding valid exam results of PCE TCM Practitioners Examination or both PCE Acupuncturists & Herbalists Examinations and meeting other registration requirements).

Please refer to the section of Doctor of TCM Examination page on the College's website for details.

Examination Application

The complete examination application with all supporting documentation(s) must be received by the College no later than the application deadline. The candidate may complete the submission either by

- **Mailing** to CTCMA Office or
- by **Emailing** to info@ctcma.bc.ca via PDF format only.

If you choose to use mailing submission method:



- the **official transcript for credentials completed within Canada** must be sent to CTCMA in an envelope sealed by the issuing institution.
- the credential evaluation report for credentials completed outside Canada (with a copy of transcript attached) must be sent to CTCMA directly from the acceptable credential evaluation agency***.

If you choose to use electronic submission method:

- the **official transcript for credentials completed within Canada** must be sent to CTCMA in electronic transcript format directly from the issuing institution(s).
- the credential evaluation report for credentials completed outside Canada (with a copy of the transcript attached) must be sent to CTCMA in electronic format directly from the acceptable credential evaluation agency***.

*** the credential evaluation report must be issued by members of the Alliance of Credential Evaluation Services of Canada.

Please note that if any parts are not readable, the College may request further submission of documents by mail.

Your application status (including missing documentation) and confidential messages regarding your application can be found at the Registrant Portal (<https://portal.ctcma.bc.ca>).

Date and Location

Applicants are required to log in to the **Registrant Portal** (<https://portal.ctcma.bc.ca>) to update their mailing address and check the application status (including missing documentation) and other confidential messages including exam results from time to time. The College will not be able to retrieve the changed password, therefore please keep this information in a safe place.

The time, date and location at which each candidate takes the written and clinical examinations will be determined after the deadline for applications. The College will inform candidates of the time/location of their examination(s) through the Registrant Portal

Payment of Application and Examination Fees

The fees will be charged in three steps:

Step 1: Application Fee – A payment link will be emailed to you upon receipt of your application package; Please pay the application fee through the link by the application deadline. Your application will not be processed until after payment is received.

Step 2: Written Examination Fee – A payment link will be emailed to you upon approval of your examination application. Please pay the written examination fee through the link by the payment deadline indicated in the email. Approved candidates are not registered to participate in the examination until after payment is received.

Step 3: Clinical Examination Fee – A payment link will be emailed to you upon approval of your examination application and after you successfully pass the written examination. Please pay the clinical examination fee through the link by the payment deadline indicated in the email. Approved candidates are not registered to participate in the examination until after payment is received.



Examination Results

Examination results will be published on the Registrant Portal and a hard copy will be mailed to candidates' preferred mailing address. Results will not be given over the telephone or by fax.

The Dr.TCM Examination is comprised of a Written Examination component and a Clinical Examination component. The two parts of the examination are scored separately. The passing scores are determined by the Education and Examination Committee with the assistance of the College's psychometrician and a group of subject matter experts.

Examination results are valid for three (3) years/consecutive examinations (whichever is later) from the date of the examination.

Rescore

To have an examination rescored, a candidate must submit a written request to the Registrar within thirty (30) days of the date on the letter of notification of examination results. Please note that candidates have a responsibility to ensure that the College has candidates' current address on file.

Candidates will be required to pay a \$200 fee per part of the examination when requesting a rescore.

Candidates who fail the examination should be aware that their examination has been carefully scored according to psychometric best practices. The examination is considered valid and reliable. It should be noted that any additional re-scoring is unlikely to alter the scoring results.

All results and decisions made by the College on the re-scoring of an examination are **final**.

Refund

The application fee is **non-refundable**.

Withdrawal

Requests to withdraw from the examination must be made in writing (signed and dated) and must be received by the College before the withdrawal deadline to obtain a refund of the examination fee. Verbal withdrawals are not accepted.

Absent from Examination Due to Extraordinary Circumstances

The application fee is **non-refundable** and the examination fee, after the withdrawal deadline, is **non-refundable**. A candidate who is absent from the examination due to unforeseen circumstances (e.g, illness, death in the family) must submit a written notification (signed, dated, and enclosed with supporting documentation) to the College within fourteen (14) days of the examination date to apply for a refund.

Refund request may be submitted through any of the following methods:

- a) By fax to 604-357-1963
- b) By email to info@ctcma.bc.ca
- c) By mail to:

CTCMA
900-200 Granville Street
Vancouver, BC V6C 1S4



Retaking an Examination

A candidate who fails an examination may repeat the failed examination once within the next two consecutive sittings of the examination. If the candidate does not do so, a new application is required and will be evaluated according to the policies in place at that time.

Any candidate who fails an examination twice is not eligible to retake the examination unless the candidate completes a *50-hour upgrading program* pre-approved by the College. Any candidate who fails an examination three or more times is not eligible to repeat the examination unless the candidate completes a *50-hour upgrading program* preapproved by the College and submits a new application to write the examination which will be evaluated according to policies current at that time. Please refer to the Examination page on the College's website for the Upgrading Program Application Form.

Special Accommodations

If you have a disability / medical condition that could adversely affect your performance on the examination and may require some accommodation(s) in taking the examination, you should complete a Dr. TCM Examination Special Accommodation Candidate Form. This form is available on the College website or by contacting the College. **Accommodations cannot be provided for requests received after the deadline.**

Documentation of Disability / Medical Condition

Candidates are required to submit a formal medical diagnosis from a qualified health professional (e.g., physician, or psychologist registered with a professional regulatory body) that describes the disability / medical condition. A completed Dr. TCM Examination Special Accommodation - Verification Form with supporting documentation (for example, physician's report or letter, educational assessment, accommodation(s) provided by the institute of training) must be received with the application for consideration prior to the examination.

Candidates Request Guidelines

Candidates must seek approval from the College prior to the examination for medical needs that do not affect their ability to write the examination but require the candidate to bring special materials into the examination room (e.g., hearing aids, medication(s), asthma pumps).

1. The candidate must submit the Special Accommodation Candidate Form to the College by the Deadline for Special Accommodation Request as indicated in the Examination Application Form or on the College's website. The form is available on the College website or by contacting College.
2. The candidate is required to submit the Special Accommodation for Special Needs – Verification Form to the College by the Deadline for Special Accommodation Request as indicated in the Examination Application Form or on the College's website. This form must be completed by an appropriate professional to certify the disability / medical condition requires the requested test accommodation. This form is available on the College website or by contacting the College.



Taking the Examination

Written Examination

The written examination will be delivered via online proctoring. A Booking Instructions email will be sent to all approved candidates with information of the steps to book an online session and support information for Remote Proctoring from ProctorU.

Please keep the information email handy as you may need the information when having trouble booking online exam session, confirming setup preparedness, and/or experiencing technical difficulties on Exam Day.

Please make sure your computer and your examination environment meet the requirements for the online proctored examination session. Please note the information of permissible items near around working station or worn/carried by the candidates. Non-permissible items found in the proximity of the examination workspace or in the examination environment can result in disqualification of the candidate.

Candidates are required to meet these requirements to be allowed to write the examination. Candidates should make sure they “Test their Equipment” many days in advance of the examination in order to seek assistance and resolve any computer technical issues with the testing agency. Candidates should make sure they have “administrative” rights of their computer to install the required browser (or its parts) to be able to take the online examination.

Technical issues encountered during the exam, which are caused by a candidate not following all instructions for preparing and testing their computer system, may result in additional exam fees payable by the candidate for rebooking another exam session (if available).

NOTE: The booking time is in a 24-hour clock format. For example, if you wish to take the exam at 1 o'clock in the afternoon, you should choose “13:00” instead of “1:00”.

NOTE: NOT all times are available. Please select a time that is closest to when you can write.

NOTE: Please make sure the booked time **AND** the time zone of the local location where you will take the examination is accurate in the “Booking Confirmation” email and on the platform after booking, so that you will log into your account to register to take the examination at the correct time on Exam Day. If a candidate misses the examination session due to their own booking error (i.e., booked wrong time due to picking wrong time zone, morning / afternoon mix up), additional exam fees payable by the candidate for rebooking another exam session (if available) will be applied. If no other session is open to be booked, the candidate will **not** be refunded for the missed examination session.

Please note that your booked time is the scheduled time to connect on the platform to register to take the online proctored examination. Please ensure you have one piece of valid government-issued identification (as specified in the Booking Confirmation) for registration purpose. The information on the ID must meet the information registered to take the exam.

NOTE: Registration process can be swift or it may take a longer time for some candidates. However, registration time does not count towards your examination time and your examination timer does not start until you actually start writing the online examination. On Exam Day, it is recommended to CALL or use the LIVE CHAT for faster response time if you encounter any problems during the Registration process.

Washroom breaks are allowed, and the exam timer does NOT stop during the time. When a candidate returns from the washroom break, the proctor is required to spend time with the candidate to re-secure the exam environment. Please note that no time will be added for writing the exam due to taking a washroom break and/or time required to re-secure the exam environment.

A clear bottle with beverage is allowed in the workspace.



Please consult the “Special Accommodations” section for further information if a candidate would like to submit an application to request to be accommodated.

Candidates are not allowed to bring any notes, books or other reference materials into the examination environment. No electronic devices of any kind are permitted. No electronic or paper medical or technical dictionaries are permitted. Using any third-party translation software, applications, dictionaries, and other applications is NOT permitted during the exam. Candidates can use the “Notes” function on the platform or a whiteboard that meets the requirements. The whiteboard must be erased at the end of the examination session. (Details of permissible item specifications will be available in the Booking Confirmation email.)

At the end of the examination, candidate should either speak or use the chat function to contact the proctor that they are ready to “submit” the examination. Proctor will then guide the candidate to press the “Submit” button to finish the examination. The exam will immediately be submitted after confirming to “Submit Exam”. **After submitting, responses cannot be changed anymore.** Once the examination is completed and submitted, the online proctor will then guide the candidate to sign off the Remote Proctoring Connection.

In the event you have feedback regarding the content of the Written Examination, candidates have the opportunity to provide their feedback after taking the exam via a survey. Your proctors will not provide advice or assistance with any aspect of content in the exam. Any incidents reported will be investigated by the College after the exam day.

Candidates might also have the opportunity to provide feedback on their online proctored exam taking experience via a survey. For this survey, please only provide feedback on the online experience. The strictest security measures should be taken to protect the content of the examination before, during and after the examination.

Clinical Examination

In order to ensure that the Clinical Examinations are administered in a standardized manner, candidates are required to adhere to the following procedures upon arrival at the testing centre:

1. Prior to beginning any part of the examination, a candidate must register for the examination by presenting at least one piece of valid government-issued identification bearing the candidate's name, photograph and signature (e.g., passport, driver's license, etc.). Candidates are recommended to arrive at the testing centre 5–10 minute prior to the scheduled time to report to the Registration Desk to ensure adequate registration time is allotted. – More Pre-exam instructions will be sent to approved candidates when it is closer to the examination date..
2. Any candidate arriving after the scheduled time to report to the Registration Desk is not permitted to write the examination and will forfeit their examination fee.
3. Only the candidates, examiners, and examination invigilators will be allowed into the examination rooms. Candidates must not leave an examination room during the course of the examination without an examiner's permission.
4. Candidates requesting a washroom break during the examination will be escorted. Extra time to complete the examination will not be afforded to these candidates and the timer will not be paused.
5. Candidates must not convey information in any manner whatsoever to other candidates during and/or after the examination. Any questions or comments candidates may raise during the examinations must be directed to an examiner or examination invigilator.
6. In the event you have feedback regarding the content of the clinical examination or the procedure of the exam session, candidates have the opportunity to provide their feedback after taking the exam via a survey. Officials at the testing centre do not provide immediate feedback to candidates. Any incidents reported will be investigated by the College after the exam day.
7. Upon completing the clinical examinations, candidates must hand in their examination booklets, answer sheets, and all notes they made during the examination to an examiner or examination invigilator.
8. Candidates are not allowed to bring any notes, books or other reference materials into the examination rooms. No electronic devices of any kind are permitted. No electronic or paper medical or technical dictionaries are permitted.



9. No food or drinks (except clear water/juice bottle with no labels) are allowed in the examination room, unless Special Accommodations have been requested and approved. .
10. The strictest security measures should be taken to protect the content of the examination before, during and after the examination.

Confidentiality and Security of Test Materials

Security precautions eliminate unfair advantages among the candidates and avoid the high human/financial costs of replacing examination materials. That is why the strictest security measures are taken to protect the content of the examination before, during and after the examination.

All examination materials are protected by copyright. The College takes strict security measures to protect examination materials during all phases of development and administration including: development and review of material; reproduction, transportation and disposal of materials; and administration of material to candidates.

Code of Conduct

Candidates are subject to the Rules of Conduct as described below. Candidates who contravene the Rules of Conduct may be denied participation, may have results invalidated and/or may be denied registration. Each candidate, by the act of participating in a Dr.TCM Examination, agrees to the following Code of Conduct:

1. Candidates acknowledge that the examination and the items therein are the exclusive property of the College.
2. Candidates acknowledge that they CANNOT remove any part of the examination from the test site, nor can they give or receive assistance from another candidate during the examination.
3. Candidates acknowledge that their participation in any act of cheating, as described below, may be sufficient cause for the College to terminate their participation, invalidate the results of their examination, or take any other necessary action.
4. Cheating refers to any act or omission by a candidate that could affect the result of that candidate, another candidate, or a potential future candidate. These acts include:
 - a) non-eligible individuals posing as eligible candidates;
 - b) bringing study or reference materials to the test area;
 - c) giving or receiving assistance to or from another candidate during the examination;
 - d) removing or attempting to remove examination material by any means, electronic or otherwise, from the testing site;
 - e) receiving or giving information about the written component or the clinical component either BEFORE OR AFTER the examination. For example, releasing information about questions such as diagnosis, or tasks and activities involved in the examination. Note: this includes discussing examination items or other information about the examination with examiners or other candidates after the examinations.

Additional Information

Important Notice on Registration Requirements

Applicants for full registration must be authorized under the laws of Canada to work in Canada as per College Bylaws Section 48. This is not a requirement for examination applications but is mandatory for those who pass the examination and are ready to apply for registration.



Please consult the Registration Requirements for full details of applying to practise as a Dr.TCM in British Columbia, Canada. Applicants to the College for full registration must meet ALL the requirements in place at the time of application to be considered for granting registration.

Applicants are only eligible to apply for full registration when both written and clinical examination results are valid. Please refer to the Registration pages of the College website for full current details.

Limitations

The College cannot advise or provide detail on matters under the jurisdiction of other institutions or governments, such as:

- Federal and provincial statutes, regulations and policies governing TCM/Acupuncture registration;
- facilities available for general or specialized experience;
- training or employment opportunities;
- reciprocity between TCM regulation bodies within or outside Canada;
- the conditions imposed by the Government of Canada for immigration;
- scholarships or funding.

Limits of Liability

While the College takes reasonable steps to ensure the accuracy and completeness of information, resources and reports, the College is not responsible for damages in the event of errors or omissions. The College is not responsible for impacts of a personal, professional or financial nature. This includes such impacts as loss of income, loss of salary and/or expenses incurred by an employer, a contractor or a candidate. It is the responsibility of each candidate in registering for the examination to have read and understood the limits of liability. Further, it is the candidate's responsibility to advise those interested parties (e.g., employers) about the limits of liability. By participating in the examination, each candidate agrees that he or she shall take no action or other proceeding against the College or any of its officers, employees or agents for an act done in good faith or for any neglect or default relating to the Pan-Canadian Entry-Level Examinations.

Financial Assistance

The College does not offer financial assistance or information on possible sources of financial assistance. The College cannot waive or alter examination fees except as noted elsewhere in this Application Guide.

The College is a non-profit organization. The funds necessary for the administration of the Examinations come from the fees paid for the examination by the candidates who take the examination.

Research

The College conducts research using non-identifying examination data, and may also provide this data to external researchers. By signing the application form, candidates consent to the use of non-identifying data for research purposes.

Privacy Policy

The College is committed to collecting, using and disclosing the personal information of its examination candidates responsibly and only to the extent necessary to provide effective services. The College is also committed to being transparent about how personal information of candidates is handled.

By applying for the examination, candidates authorize the College to collect the personal information provided in the application form and to use that personal information for the purposes of processing the application for the



purposes of registration under the *Health Professions Act*, RSBC 1996, c. 183 and candidates consent to the disclosure of that personal information to Yardstick Software Inc (“Yardstick”) for the purposes of administrating the examination, processing the examination results and providing information regarding the examination results back to the College.



Appendix A – Sample Questions for the Written Examination

1. Which of the following symptoms **most likely** indicates that a high blood pressure patient is developing left-sided heart failure?

- A. palpitation and weight gain
- B. chest pain and ankle swelling
- C. constant coughing and shortness of breath
- D. wheezing when exhaling and chest tightness

(Answer C)

以下哪组症状**最有可能**显示高血压患者正在发展为左心衰竭?

- A. 心悸及体重增加
- B. 胸痛及脚踝肿胀
- C. 持续咳嗽及呼吸急促
- D. 呼气时喘息及胸闷

(答案 C)

2. A patient presents with a progressively worsening sore throat for 5 days. Other signs and symptoms include difficulty swallowing, a high fever, thirst, constipation and dark urine. Their tongue is red with a yellow coating, and their pulse is Rapid (Shuo) and Forceful (You Li). Which of the following herbal combination **best** treats this patient?

- A. Sheng Di Huang (*Radix Rehmanniae*), Xuan Shen (*Radix Scrophulari*), Mai Men Dong (*Radix Ophiopogonis*), Chuan Bei Mu (*Bulbus Fritillariae Cirrhosae*), Zhi Mu (*Rhizoma Anemarrhenae*), Bai Shao Yao (*Radix Paeoniae Alba*)
- B. Huang Qin (*Radix Scutellariae*), Lian Qiao (*Fructus Forsythiae*), Zhi Zi (*Fructus Gardeniae*), Niu Bang Zi (*Fructus Arctii*), Da Huang (*Radix et Rhizoma Rhei*), Gan Cao (*Radix Glycyrrhizae*)
- C. Ban Xia (*Rhizoma Pinelliae*), Hou Po (*Cortex Magnoliae Officinalis*), Fu Ling (*Poria*), Zi Su Ye (*Folium Perillae*), Sheng Jiang (*Rhizoma Zingiberis Recens*), She Gan (*Rhizoma Belamcandae*)
- D. Shi Gao (*Gypsum Fibrosum*), Zhi Mu (*Rhizoma Anemarrhenae*), Gan Cao (*Radix Glycyrrhizae*), Geng Mi (*Semen Oryzae*), Bo He (*Herba Menthae*), Chan Tui (*Periostracum Cicadae*)

(Answer: B)

一名患者出现进行性加重的咽喉疼痛 5 天。其他症状和体征包括吞咽困难、高烧、口渴、便秘及尿色深。舌红苔黄，脉洪数。以下哪组中药**最适合**治疗该患者?

- A. 生地黄、玄参、麦冬、川贝母、知母、白芍药
- B. 黄芩、连翘、栀子、牛蒡子、大黄、甘草
- C. 半夏、厚朴、茯苓、紫苏叶、生姜、射干
- D. 石膏、知母、甘草、梗米、薄荷、蝉蜕

(答案 B)

3. Which of the following group of Meridians connect at the side of the nose?

- A. one Yin Meridian and one Yang Meridian
- B. a pair of Exterior-Interior related Meridians
- C. a pair of Yin Meridians with the same name
- D. a pair of Yang Meridians with the same name

(Answer D)

下列哪组经脉在鼻旁衔接?

- A. 一阴一阳经
- B. 一对表里经
- C. 一对同名阴经
- D. 一对同名阳经

(答案 D)



Appendix B – Instructions to Candidate & Sample Case for the Clinical Examination

*Please note that the formats of the exam sheets used for the Interview Section and for the Written Questions and Answers Section of the Clinical Examination to provide the case information and to ask the questions for candidates to answer are not exactly the same as the information presented below. Candidates should use the example to know the ranges and depths of information for the case studies expected to obtain through the Interview Section, and the details of answers expected to provide about the case studies to demonstrate effective, ethical, safe, and professional TCM management of the care of the patients.

- Each candidate is required to complete TWO case studies.

-For each case, the candidate will be provided with general information about the patient at the start of the Interview Section when simulating interacting professionally with the standardized patient. He/she will then be required to investigate through interviewing the patient and determine how and what to assess the patient in order to collect information to make a TCM diagnosis, form a treatment plan, prescribe treatments, advise the patient and provide dietary and lifestyle and exercise recommendations.

Instructions to Candidate

For each case, the candidate is meeting a new patient consulting with the candidate for the very first time. Each case is composed of TWO SECTIONS.

Interview Section: (30 minutes)

1. The candidate will be provided with the general information of the standard patient.
2. The candidate will then be required to collect information using “Four Inspections”. The candidate performs an interview with the standard patient. The candidate should let the standardized patient and the examiners know the intention to perform observation, auscultation, olfaction, and palpation by verbalizing the assessment procedure(s) he/she wishes to do. The findings of these assessments will be shared with the candidate in the form of written cards. Candidates who wish to obtain other medical assessment findings /results (e.g., blood test, urine test results) should ask the standardized patient if such results are available from their medical practitioner(s) or other health practitioners.
3. The candidate takes notes of information provided verbally by the standardized patient in order to use the information to complete the Written Questions & Answer Section of the case study. Please note that information provided on written cards DO NOT NEED TO BE COPIED as they will be provided to the candidate during the Written Questions & Answers Section (Documentation, Diagnosis & Treatment) Section.

Written Questions & Answers (Documentation, Diagnosis & Treatment) Section: (40 minutes)

The candidate will use the notes taken from the Interview Section to complete the Written Questions & Answers (Documentation, Diagnosis & Treatment) Section. The information on “Four Inspections” will be provided in this section. Section B requires a written response under each heading, which together will form an initial patient record. Your writing must be legible; illegible writing will be disregarded.

1. A sample of a completed patient record can be found on the following pages. In this section, the candidate is required to document the patient’s visit and record the information on the examination sheet including: the patient’s chief complaints, present illness, past medical history, family history, demographic and occupational history, sexual history, observation, auscultation and olfaction, palpation, and other physical examinations obtained during Section A.
2. Under the “Diagnosis”, the candidate needs to clearly identify:
 - The primary TCM disease diagnosis and the pattern diagnoses
 - The impressions of Western Medical Condition(s)



3. Choose the appropriate treatment principles according to the TCM pattern diagnoses.
4. Write a Chinese herbal prescription (with all information required to be on a herbal prescription) and an acupuncture prescription. The herbal prescription is marked by its appropriateness to address the treatment principles. You are required to provide special instructions to the patient for decocting the prescribed herbal formula and for safe usage of the formula. The accuracy, clarity, completeness, and comprehensiveness of the information provided on the written herbal prescription are also marked. You are asked to justify the selection of the herbal formula and/or some herbs in the formula.
5. Provide the patient with written suggestions/instructions to assist in his/her treatment, recovery or prevention of the illness. Make sure to list *specific* examples of foods when making dietary recommendations. For example, rather than “eat warm foods”, you could write “include warm foods like ginger, cinnamon...” If you recommend exercise or stress management, offer *specific* types of recommended exercises or stress management offerings, e.g., walk leisurely for 20-30 minutes every evening, and/or take restorative-type yoga classes at least once per week.

Sample Case (English Version) – Patient “Karen Watson”

Document the specific case information (chief complaint, major case information, diagnosis, prescriptions, instructions, etc.) requested in the questions below in the format and details required for clinical record keeping. Answer the questions to provide rationale and explanation.

1. Chief Complaint(s) 主诉

The patient presents with irregular menstruation for the last three years.

2. Clinical Documentation of the Major and Significant Subjective and Objective Information Collected from Patient’s Interview and Assessments 从患者的面试和评估中收集的主要和重要主观和客观的医疗信息

Detailed progression of the Chief complaint and Signs & symptoms of Present Illness 主诉进展及现病史详细的症状和体征

Medical History / General Health Information 病史/一般健康信息

Examinations 检查

Detailed progression of the Chief complaint and Signs & symptoms of Present Illness

- She presents to the clinic with irregular menstruation that began about 3 years ago after taking part in a polar bear swim event
- She caught a cold with a fever and chills for about a week after the polar bear swim
- Her cold moved into her chest and lasted about 2 months
- Her menstrual cycles range from 19 – 60 days
- When her period comes the flow can be from 3 to 14 days
- Her flow is normal in consistency
- Menstrual blood has medium-sized dark clots
- She is irritable 1-2 days before her period
- She is depressed for 1-2 days after periods
- She has severe Low abdominal cramping during her periods on cycle day 1
- she takes Naproxen for the menstrual pain



- The cramping is soothed by applying a hot water bottle
- Her last period was 6 weeks ago
- She has a lot of thin white vaginal discharge
- Intercourse can be painful at times
- She has seen her GP and was referred to an OBGYN 3 years ago
- Her OBGYN recommended that she start taking the Birth control pill
- She decided not to take the Pill, but she tried a progesterone vaginal suppository 2 years ago
- She tried a progesterone vaginal suppository for 2 months but it did not regulate her periods

- Her thirst is normal
- She likes to drink hot liquids such as herbal tea or hot water with lemon
- She often feels cold
- Her feet feel cold when she goes to bed at night
- She prefers to be in a warm room

- Her appetite is low but she eats because she knows she needs to
- If she eats cold or raw foods, she gets abdominal cramps
- She has bloating after large meals
- Abdominal cramping and fullness often occur if she eats before bed
- Her abdominal cramps can be eased with a bowel movement but are not completely relieved
- She has a bowel movement every 1-2 days
- She occasionally has diarrhea
- Bowel movements have no unusual odour
- She sleeps well, about 8 hours a night unless she has abdominal cramps
- She does not have many dreams
- She does not have night sweats
- She usually gets up 1-2 times at night to urinate and is able to fall back to sleep
- Her urine is usually pale except in the morning it is yellow.
- She has no difficulty urinating
- Her energy is alright but it could be better
- Moods are a bit low in general
- She has dull pain in her low back
- She does not have a cough and her breathing is fine
- She does not get headaches

Medical History / General Health Information

- diagnosed with Hashimoto's in 2009 at the age of 29
- Thyroid hormones are stable on medication (Synthroid 125mcg/day)
- she has had 2 incidences of spontaneous profuse sweating during the day in the past 3 years, but otherwise sweating has been normal and is normal with activity
- Moderately low blood pressure since early 20s causes some postural dizziness
- at the age of 17, her tonsils had been removed
- Broke her right wrist in elementary school during recess

- When she was 19, she went on the birth control pill for a year and it gave her headaches
- She stopped taking the birth control pill when she was 20 and has not tried it again
- She tried the copper IUD when she was 26 and had it removed after one year
- She had heavy bleeding with her copper IUD
- She has no children
- She has never been pregnant

- She is allergic to tree pollens



- Father: Age 62, taking statins for high cholesterol
- Mother: Age 64, diagnosed with Chronic fatigue at the age of 34
- Sister: Age 36, Diagnosed with Hashimoto's at the age of 23
- Brother: Died in a motorcycle accident in his 20s

- Craves dark chocolate
- Eats oatmeal for breakfast
- She tends to eat warm foods such as soups, stews and steamed vegetables
- She eats a lot of vegetables, and a little bit of meat
- Generally, eats home-cooked meals
- Social Drinker (beer, wine & some hard liquor)
- Likes to do restorative yoga and infrared sauna
- Using the floatation tanks every week
- She is a non-smoker and does not do drugs
- She is 38 years old
- Married, no children
- She has a good relationship with her partner
- Has a degree in Education; She is working as a teacher in grade 5 and enjoys working with kids
- Her work can be stressful during report card season, otherwise work is fun
- Take Probiotics, digestive enzymes

Examinations

Vitality (mental state): Mood is low

Gait: Normal

Facial Complexion: Sallow

Physical appearance: 20lbs overweight

Hair: Fine

Skin : Normal

Nails : Weak

Eyes : Normal

Ears : Normal

Nose : Normal

Teeth : Prone to cavities

Gums : Pale

Tongue: pale purple and swollen, thin white coat, dark spots on sides

Voice: Quiet

Olfaction: Normal

Pulse: deep, slow, choppy

Low abdomen is cold to the touch

Temperature: 36.5°C

Pulse: 62 /min

Respiration: 15 /min

Blood pressure: 105/60mmHg

Height: 5'7"

Weight: 170lbs (77kg)

Laboratory Tests:

Ferritin 22ng/mL (>14ng/mL)

TSH 5.00mU/L (0.30mU/L – 5.50mU/L)

Glucose 85mg/dL (65mg/dL - 110mg/dL)

Potassium 4.2mEq/L (3.5mEq/L - 5.0mEq/L)

Creatinine 1mg/dL (0.8mg/dL – 1.3mg/dL)

ALT 25IU/L (<36IU/L)



AST 15IU/L (<36IU/L)

***This example includes ALL or MOST information available during the Interview Section of the case study through interacting with the standardized patient and from information provided in the flash cards.**

Please note that this section is marked by documenting accurate, major and significant clinical information collected (i.e., relevant positive or negative findings) in order to make a TCM diagnosis (including patterns), to prescribe treatments, and to provide care for the patient. The more major and significant information for the case study carries more marks. While a patient record should be comprehensive in documenting relevant information, it is not expected for candidates to record all the information collected in the time allowed for the Written Questions and Answer Section for each case study; hence minor information may not carry any marks. The documentation of the information should be recorded in a manner expected of an adequate clinical record for a first visit of a patient.

3. Diagnosis 诊断

TCM Disease Diagnosis (中医疾病诊断)

TCM Pattern Differentiation / Diagnosis (中医辨证分型/诊断)

Western Medicine Impression of the Chief Complaint (主诉西医临床印象)

TCM Disease Diagnosis 中医疾病诊断/中醫疾病診斷

Best Answer: Irregular Menstruation
(Other Answers: Painful Periods, Dysmenorrhea)

TCM Pattern Diagnosis 中医证候诊断/中醫証候診斷

Deficiency Cold in the Uterus/Chong and Ren/Lower Jiao with Blood Stasis

Western medicine impression of the Chief Complaint 西医临床印象/西醫臨床印象

Best Answer: Irregular Menstruation
(Other Answers: Dysmenorrhea, Depression)

4. Treatment Principle(s) 治疗原则

Warm and Tonify the Uterus and Channels
Invigorate Blood Circulation and Dispel Blood Stasis
Regulate menstruation
(Other Answers: stop pain, regulate menstrual cycle)



5. Herbal Prescription 中药处方

Please write a herbal prescription (raw-herb decoction only) for the patient with all required information so that this prescription can be accurately dispensed and safely used by the patient.

A typical herbal prescription to patients has 4-20 ingredients.

请为患者开出一付中药处方（只限中草药汤剂），并提供所有必要的信息，以便患者能够准确地获得并安全地使用该处方。中药处方一般有 4-20 味中药组成。

Practitioner's Name: XXX XXXXX (CTCMA #)

Practitioner's Address: XXX XXXXXXX, BC V0A 1A1

Practitioner's Telephone: (604) xxx-xxxx

Patient's Name: Last name: Watson First name: Karen

Prescription's Date: June xx, 2022

Herbal Prescription:

Example Formula: Ai Fu Nuan Gong Wan (Modified into a decoction)

Xiang Fu 9g

Ai Ye 9g

Dang Gui 9g

Huang Qi 6-9g

Wu Zhu Yu 4-6g

Chuan Xiong 6g

Bai Shao 6g

Shu Di Huang 9g or Sheng Di Huang 9g

Rou Gui 4-6g

Xu Duan 6g

Total 10 packages

Alternate Example: A customized herbal formula contains the following categories of herbs:

- Warm and Tonify Uterus and Channels: e.g., Ai Ye, Gui Zhi, You Gui, Xiao Hui Xiang
- Tonify and Move Blood: e.g., Dang Gui, Chi Shao, Chuan Xiong, Mo Yao, Wu Ling Zhi
- Harmonize herbs in the prescription: e.g., Gan Cao / Zhi Gan Cao, Sheng Jiang

6. Preparation Instructions for the Herbal Prescription 中药处方的配制说明

Please provide instructions to the patient for decocting the raw-herb prescription provided in Question 5.

请向患者提供考题 5 中作答的中草药汤剂的处方煎煮说明。

Place all the herbs in a pot, and cover with water (approximately 3.5 cups). Bring to a boil on high heat, and then reduce heat to medium and simmer for approximately 30 minutes. Strain one cup of liquid from the herbs to drink. Drink 1 cup, three times per day.



7. Precautions and Warnings for taking the Prescription

使用中药处方的注意事项和警告

Please provide instructions to the patient on how to use the raw-herb herbal prescription provided in Question 5 safely and effectively.

请向患者提供有关如何安全有效地使用考题 5 中作答的中草药汤剂的处方说明。

The formula should be taken at least 2 hours from intake of any other medications you are taking.

The formula should be taken 20-30 minutes before meals, 3 times per day.

If you notice upset stomach or nausea after taking the formula, you may take it after meals.

Contact practitioner if there is a change to your other medications.

Follow-up appointment should be in 10 days from today's date.

Caution to take during pregnancy.

Do not consume caffeinated drinks or alcohol while on this prescription.

Consult with practitioner further for herbal use if there is a change of western medications.

Consult with practitioner further if catching a cold.

Put out of reach of children.

May have more frequent bowel movements after intake.

8. Brief Explanation of the Prescription 处方的简要说明

Based on the raw-herb, herbal prescription provided in Question 5, please CHOOSE ONE question set (A or B or C) to answer:

基于考题5中作答的中草药汤剂之处方，请从以下问题中选择一个回答：

Question Set A: If the herbal prescription is derived from TCM Classic formulae, please name the Classic formulae. Explain briefly if modification(s) has/have been made to the Classic formula and why those modifications were made to address the patient's conditions.

问题A: 如果中药处方来源于中医经典方剂，请列出中医经典方剂。请简要说明是否对该经典方剂进行了加减，以及为什么要进行这些加减以解决患者的病症。

Question Set B: Do(es) any TCM Classic formula(e) address this patient's conditions? If so, please name one and explain briefly how the herbal prescription provided in Question 5 addresses the patient's conditions in comparison to the named formula.

问题B: 是否有某些中医经典方剂能解决该患者的病证? 如果是这样，请列举一个，并简要说明考题5中作答的中药处方与你给出的经典方剂相比，如何针对患者的病证。

Question Set C: If your herbal prescription is NOT derived from a TCM Classic formula, explain briefly the functions of *three* herbal combinations (e.g. herbal pairings) in your herbal prescription.

问题C: 如果您的中药处方不是源自某个中医经典方剂，请简要说明在您的中药处方中，三种中药配伍（如中药药对）的功用。

Mark **ONE** question to be answered:

选择一个要回答的问题：

Question Set A – 问题 A

Example: Wu Yao and Xiao Hui Xiang can be added to the main formula for regulating Qi and relieving lower abdominal Cramping.

Question Set B – 问题 B



Example: Wen Jing Tang also can be selected for this case. But Wen Jing Tang is stronger in removing Blood Stasis, and Ai Fu Nuan Gong Wan mainly focuses on Warming and Tonifying Uterus.

Question Set C – 问题 C

Example: Dang Gui and Chuan Xiong promote the circulation of Blood and regulate period
Gui Zhi and Wu Zhu Yu warm Meridians and expel Cold
Bai Shao and Gan Cao alleviate pain

****Only 1 Question Set to be answered.***

9. Acupuncture or Tuina Prescription 针灸或推拿处方

A typical acupuncture prescription consists of fewer than 20 acupuncture points.

针灸处方一般包括不超过 20 个针灸穴位。

ST 25 (Tian Shu)
ST 29 (Gui Lai)
SP 6 (San Yin Jiao)
SP 8 (Di Ji)
SP 10 (Xue Hai)
BL 17 (Ge Shu)
BL 20 (Pi Shu)
BL 24 (Qi Hai Shu)
BL 30 (Bai Huan Shu)
KI 8 (Jiao Xin)
LR 2 (Xing Jian)
LR 8 (Qu Quan)
CV 6 (Qi Hai)
CV 7 (Yin Jiao)

Moxa is appropriate to applied for points in the lower abdomen, low back, and ST 36.

Most points are suitable to use Tonifying manipulation method.

10. Suggestions on diet and lifestyle modification

关于调整饮食与生活方式的建议

Dietary suggestions:

Ideas such as: Avoid cold foods such as raw vegetables and fruit; Drink fresh ginger or cinnamon tea; Stay hydrated by drinking warm (not cold) water; Stop eating 2 hours before going to bed

Lifestyle suggestions:

Ideas such as: Exercise regularly (such as walking, yoga, Qi Gong, biking); Keep the abdomen covered when outside; don't swim in cold water

Other suggestions: Apply heat to the abdomen and low back each day for 20 minutes; Wear socks to bed at night to keep the feet warm; Soak feet in warm water or use a heating pad to warm them



Sample Case (Chinese Version) – Patient “Karen Watson” (卡伦沃森)

请在回答下列问题，按照病历记录的格式和需求填写详细案例信息（包括主诉，主要案例信息，诊断，处方，医嘱等）。并回答卷中问题就做出的诊断处方给出合理的解释。

1. Chief Complaint(s) 主诉

患者在过去三年里出现月经不调。

2. Clinical Documentation of the Major and Significant Subjective and Objective Information Collected from Patient’s Interview and Assessments 从患者的面试和评估中收集的主要和重要主观和客观的医疗信息

Detailed progression of the Chief complaint and Signs & symptoms of Present Illness 主诉进展及现病史详细的症状和体征

Medical History / General Health Information 病史/一般健康信息

Examinations 检查

主诉进展及现病史详细的症状和体征

- 大约 3 年前她参加冬泳后，开始出现月经不调
 - 冬泳后一周她患了感冒，出现寒战和发热
 - 她的感冒影响到下呼吸道并持续了约 2 个月
 - 她 - 月经周期为 19 - 60 天
 - 月经来潮时，经期持续 3 至 14 天
 - 她的经血量一直是正常的
 - 经血有中等大小的色暗血 -
 - 她在月经前 1 - 2 天易怒
 - 她在月经后 1 - 2 天抑郁
 - 在月经第 1 天，她有严重的下腹绞痛
 - 因此她服用萘普生 (Naproxen) 治疗月经疼痛
 - 痛经可被热水袋缓解
 - 她末次月经是 6 周前
 - 她有很多白带，质稀色白
 - 性交有时会疼痛
 - 她已经看过她的家庭医生，3 年前被转介去看妇产科医生
 - 妇产科医生建议她开始服用避孕药
 - 她决定不服用避孕药，但 2 年前她尝试了一种孕酮阴道栓剂
 - 她试用孕酮阴道栓剂 2 个月，但对调节月经没有帮助
-
- 口渴正常
 - 她喜热饮，如草药茶或柠檬热水
 - 她经常感觉发冷
 - 她晚上睡觉时感觉很冷
 - 她更喜欢呆在温暖的房间



- 她的胃口不好，但她吃东西是因为她知道自己需要
- 如果她吃冷的或生的食物，她会出现腹部痉挛
- 饱餐后她会腹胀
- 如果她在睡前吃东西，经常会出现腹部痉挛和胀满
- 排便可以减轻腹部绞痛，但不能完全缓解
- 每 1-2 天大便一次
- 她偶尔会出现腹泻
- 大便没有异常气味
- 除非她腹部疼痛，她睡眠良好，每晚约 8 小时
- 她没有多梦
- 她没有盗汗
- 她通常晚上起来 1-2 次小便并能够重新入睡
- 她的尿液通常色淡，除了早晨是黄色的。
- 她排尿没有困难
- 她的精力不错，但可能会更好
- 总体来讲情绪有点低落
- 她腰背隐隐作痛
- 她没有咳嗽，呼吸正常
- 她没有头痛

病史/一般健康信息

- 2009 年她 29 岁时被诊断为桥本氏病（Hashimoto's - 桥本氏甲状腺炎）
- 甲状腺激素水平在药物治疗下稳定（synthroid 125mcg/天）
- 在过去 3 年中，她有 2 次在白天大量出汗-自汗，但除此之外，汗出正常，并且活动时汗出也正常
- 20 岁出头时，血压偏低导致过一些体位性眩晕
- 在 17 岁时摘除扁桃体
- 在小学，她曾在课间休息时右手腕骨折

- 当她 19 岁时，她服用避孕药一年，这令她头疼
她在 20 岁时停止服用避孕药，并且不再尝试
- 她在 26 岁时尝试使用铜质宫内节育器，一年后取出。
- 铜质宫内节育器使她大量出血。
- 她没有孩子
她从未怀孕

- 她对树花粉过敏

- 父亲：62 岁，服用他汀类药物治疗高胆固醇
- 母亲：64 岁，34 岁时被诊断为慢性疲劳症
- 妹妹：36 岁，23 岁时被诊断患有桥本病
哥哥：20 多岁时死于摩托车事故

- 非常爱吃黑巧克力
- 早餐吃燕麦片
- 她倾向于吃温热的食物，如汤，炖菜和蒸蔬菜。
- 她吃大量蔬菜和少量肉
- 我经常吃家里做的饭。
- 社交时会饮酒（啤酒、葡萄酒和一些烈性酒）



- 喜欢做恢复性瑜伽 (restorative yoga) 和红外线桑拿 (infrared sauna)。
- 每周使用漂浮水箱 (floatation tanks) 疗法。
- 她不吸烟, 不吸毒
- 她 38 岁
- 已婚, 无子女
- 她与伴侣关系良好
- 拥有教育学位; 她是五年级的老师, 喜欢和孩子们在一起的工作
- 在签发成绩单的季节 (report card season), 她的工作压力很大, 除此之外工作很有趣
- 服益生菌、消化酶

检查

生命力 (精神思维活动): 情绪低落

步态: 正常

面色: 萎黄

形体外貌: 超重 20 磅

头发: 细、稀疏

皮肤: 正常

爪甲: 爪甲不荣

眼睛: 正常

耳朵: 正常

鼻子: 正常

牙齿: 容易蛀牙

牙龈: 色淡

舌: 舌淡, 色紫和舌胖大, 苔薄白, 舌两侧有黯黑点

听 (声音): 语声低微

闻 (气味): 正常

脉象: 沉, 迟, 涩

下腹触之发凉

体温: 36.5° C

脉搏: 62 次/分钟

呼吸: 15 次/分钟

血压: 105/60 毫米汞柱

身高: 5 英尺 7 英寸 (170 厘米)

体重: 170 磅 (77 公斤)

化验结果:

铁蛋白 (Ferritin): 22 ng/mL (>14 ng/mL)

促甲状腺激素 (TSH): 5.00 mU/L (0.30mU/L – 5.50mU/L)

葡萄糖 (Glucose): 85 mg/dL (-5 mg/dL - 110 mg/dL)

钾 (Potassium): 4.2 mEq/L (3–5 mEq/L - 5.0 mEq/L)

肌酐 (Creatinine): 1mg/dL (0.8mg/dL – 1.3 mg/dL)

谷丙转氨酶 (ALT): 25 IU/L (<36 IU/L)

谷草转氨酶 (AST): 15 IU/L (<36 IU/L)

***此答案模板中的所有或绝大部分信息均可在临床考试的病人问诊阶段, 通过与标准病人互动以及病人信息卡中提供的数据获得。**



请注意该部分评分依据为是否记录下收集到的准确、主要和重要的临床信息（即相关的阳性或阴性发现），用以做出中医诊断（辨证），处方治疗，为病人提供医疗帮助。记录下越多主要和重要的信息，得分越高。虽然病人记录应该全面的记录所有相关信息，但是考生的笔答时间有限，不可能记录所有收集的信息，因此次要信息可能不带有任何分数。此项考试的信息记录应符合对初诊病人的充分临床信息记录的要求。

3. Diagnosis 诊断

TCM Disease Diagnosis (中医疾病诊断)

TCM Pattern Differentiation / Diagnosis (中医辨证分型/诊断)

Western Medicine Impression of the Chief Complaint (主诉西医临床印象)

TCM Disease Diagnosis 中医疾病诊断/中醫疾病診斷

最佳答案: 月经不调
(其它答案: 经期疼痛, 痛经)

TCM Pattern Diagnosis 中医证候诊断/中醫証候診斷

子宫/冲任/下焦虚寒, 伴有血瘀

Western medicine impression of the Chief Complaint 西医临床印象/西醫臨床印象

月经不调
(其它答案: 痛经, 抑郁症)

4. Treatment Principle(s) 治疗原则

暖宫温经

活血祛瘀

调理月经

(其它答案: 止痛, 调节月经周期)

5. Herbal Prescription 中药处方

Please write a herbal prescription (raw-herb decoction only) for the patient with all required information so that this prescription can be accurately dispensed and safely used by the patient.
A typical herbal prescription to patients has 4-20 ingredients.

请为患者开出一付中药处方 (只限中草药汤剂)，并提供所有必要的信息，以便患者能够准确地获得并安全地使用该处方。
中药处方一般有 4-20 味中药组成。

Practitioner's Name: XXX XXXXX (CTCMA #)

Practitioner's Address: XXX XXXXXXX, BC V0A 1A1

Practitioner's Telephone: (604) xxx-xxxx

Patient's Name 病人姓名:

Last name 姓: Watson First name 名: Karen



Prescription's Date 处方日期: June xx, 2022

Herbal Prescription: 中药处方:

方剂: 艾附暖宫丸 (改成汤剂)

香附 9g

艾叶 9g

当归 9g

黄芪 6-9g

吴茱萸 4-6g

川芎 6g

白芍 6g

熟地黄 9g 或生地黄 9g

肉桂 4-6g

续断 6g

共十剂 (十付汤剂)

备选示例: 包含有以下类别中草药的任何处方:

- 温暖子宫和经络: 如艾叶、桂枝、肉桂、小茴香
- 补血活血: 如当归、赤芍、川芎、没药、五灵脂
- 调和诸药: 如甘草/炙甘草、生姜

6. Preparation Instructions for the Herbal Prescription 中药处方的配制说明

Please provide instructions to the patient for decocting the raw-herb prescription provided in Question 5.

请向患者提供考题 5 中作答的中草药汤剂的处方煎煮说明。

将所有中草药放入锅中, 放入水 (约 3.5 杯)。在高温下煮沸, 然后将热量减小至中等, 并煎煮约 30 分钟。从中草药中取出一杯液体饮用。每天喝三杯, 每天三次。

7. Precautions and Warnings for taking the Prescription

使用中药处方的注意事项和警告

Please provide instructions to the patient on how to use the raw-herb herbal prescription provided in Question 5 safely and effectively. 请向患者提供有关如何安全有效地使用 考题 5 中作答的中草药汤剂的处方 说明。

服用该方剂至少应在服用其他正在服用的药物之后 2 小时。

该方剂应在饭前 20-30 分钟服用, 每天服用 3 次。

如果您在服用方剂后发现胃部不适或恶心, 您可以在饭后服用。

如果您的其他药物有变化, 请联系执业医师。

请在本次诊疗后 10 日预约复诊。

怀孕期间应慎用此方。

服此中药期间忌饮咖啡或酒

如果服用的西药有变化, 请咨询执业医师。

如果患感冒, 请咨询执业医师。

放在儿童接触不到的地方。

服用此方剂后可能会有更频繁的排便。



8. Brief Explanation of the Prescription 处方的简要说明

Based on the raw-herb, herbal prescription provided in Question 5, please CHOOSE ONE question set (A or B or C) to answer:

基于考题5中作答的中草药汤剂之处方，请从以下问题中选择一个回答：

Question Set A: If the herbal prescription is derived from TCM Classic formula(e), please name the Classic formula(e). Explain briefly if modification(s) has/have been made to the Classic formula and why those modifications were made to address the patient's conditions.

问题A：如果中药处方来源于中医经典方剂，请列出中医经典方剂。请简要说明是否对该经典方剂进行了加减，以及为什么要进行这些加减以解决患者的病症。

Question Set B: Do(es) any TCM Classic formula(e) address this patient's conditions? If so, please name *one* and explain briefly how the herbal prescription provided in Question 5 addresses the patient's conditions in comparison to the named formula.

问题B：是否有某些中医经典方剂能解决该患者的病证？如果是这样，请列举一个，并简要说明考题5中作答的中药处方与你给出的经典方剂相比，如何针对患者的病证。

Question Set C: If your herbal prescription is NOT derived from a TCM Classic formula, explain briefly the functions of *three* herbal combinations (e.g. herbal pairings) in your herbal prescription.

问题C：如果您的中药处方不是源自某个中医经典方剂，请简要说明在您的中药处方中，三种中药配伍（如中药药对的功用。

Mark **ONE** question to be answered:

选择一个要回答的问题：

Question Set A – 问题 A

例如：乌药和小茴香可以加入主方以行气止痛。

Question Set B – 问题 B

例如：温经汤亦可以用于治疗该患者，但温经汤偏重于祛瘀而艾附暖宫丸更着重于温经暖宫。

Question Set C – 问题 C

例如：当归配川芎 活血调经
吴茱萸配桂枝 温经散寒
芍药配甘草 缓急止痛

***仅需回答 1 个问题**

9. Acupuncture or Tuina Prescription 针灸或推拿处方

A typical acupuncture prescription consists of fewer than 20 acupuncture points.

针灸处方一般包括不超过 20 个针灸穴位。

ST 25 (Tian Shu) 天枢

ST 29 (Gui Lai) 归来

SP 6 (San Yin Jiao) 三阴交

SP 8 (Di Ji) 地机

SP 10 (Xue Hai) 血海

BL 17 (Ge Shu) 膈俞



BL 20 (Pi Shu) 脾俞
BL 24 (Qi Hai Shu) 气海俞
BL 30 (Bai Huan Shu) 白环俞
KI 8 (Jiao Xin) 交信
LR 2 (Xing Jian) 行间
LR 8 (Qu Quan) 曲泉
CV 6 (Qi Hai) 气海
CV 7 (Yin Jiao) 阴交
艾灸适用于下腹部、下背部、足三里 (ST 36)
适用补虚手法

10. Suggestions on diet and lifestyle modification

关于调整饮食与生活方式的建议

饮食建议:

例如: 避免吃生冷的食物, 比如生的蔬菜和水果等; 喝新鲜的生姜或肉桂茶; 保持充足饮水, 喝温水 (而不是冷水); 睡前 2 小时停止进食。

生活方式建议:

例如: 经常锻炼 (如散步、瑜伽、气功、骑自行车); 外出时保持腹部温暖; 不要在太冷的水中游泳。
其他建议: 每天热疗腹部和腰背部, 持续 20 分钟; 晚上穿袜子睡觉, 保持脚部温暖; 将脚浸泡在温水中或使用加热垫加热。



Appendix C – Suggested Reference Books

TCM Foundations and Diagnosis

Foundations of Chinese Medicine (1987) by Giovanni Maciocia. Distributed by Churchill Livingstone, Robert Stevensen House, 1-7 Boxter Place, Leith Walk, Edinburgh, United Kingdom, EH1 3AF.
ISBN: 0-443-03980-1

Basic Theories of Traditional Chinese Medicine by Hui He Yin. Published by Shanghai Science and technique Press, 1984.
ISBN: 7-5323-0484-1

印會河主編, **中醫基礎理論**, 上海科技出版社, 1984.
ISBN: 7-5323-0484-1

Basic Theories of Traditional Chinese Medicine by Academy Press (Xue Yuan).
中醫基礎理論 (學苑出版社)

Diagnosis in Chinese Medicine – A Comprehensive Guide by Giovanni Maciocia, Published by Churchill Livingstone, 2004.
ISBN: 0-443-06448-2

Diagnostics of Traditional Chinese Medicine by Tie Tao Deng. Published by Shanghai Science and technique Press, 1984.
ISBN: 7-5323-0222-9

鄧鐵濤主編, **中醫診斷學**, 上海科技出版社, 1984
ISBN: 7-5323-0222-9

Diagnostics of Traditional Chinese Medicine by Academy Press (Xue Yuan) 1998.
ISBN 7-5077-1271-0

中醫診斷學 (學苑出版社)
ISBN 7-5077-1271-0

Clinical Handbook of Internal Medicine (Vol. 1 & 2) by Will MacLean & Jane Lyttleton. Published by University of Western Sydney, Australia.
ISBN: 1-875760-93-8 & 0-9579720-0-8

The Practice of Chinese Medicine by Giovanni Maciocia. Published by Churchill Livingstone.
ISBN: 0-443-043051

Traditional Chinese Internal Medicine by Bo Yu Zhang. Published by Shanghai Science and technique Press, 1984.
ISBN: 7-5323-0226-1

張伯臬主編, **中醫內科學**, 上海科技出版社, 1994.
ISBN: 7-5323-0226-1

Internal Medicine of TCM by Wang Yue et. Published by Publishing House of Shanghai University of TCM.
ISBN: 7-81010-660-0

Traditional Chinese Internal Medicine by Academy Press (Xue Yuan)

中醫內科學 (學苑出版社)

Obstetrics & Gynecology in Chinese Medicine by Giovanni Maciocia. Published by Butterworth-Heinemann.
ISBN: 0-939616-28

TCM Gynecology by Yuan Kai Luo. Published by Shanghai Science and technique Press, 1984.
ISBN: 7-5323-0493-0

羅元愷主編, **中醫婦產科學**, 上海科技出版社, 1994.
ISBN: 7-5323-0493-0



Gynecology of TCM by Tan Yong et. Published by Publishing House of Shanghai University of Traditional Chinese Medicine.
ISBN: 7-81010-657-0

Pediatrics of Traditional Chinese Medicine. Published by Publishing House of Shanghai University of Traditional Chinese Medicine.
ISBN: 7-81010-653-8

TCM Pediatrics by Yu Ren Jian. Published by Shanghai Science and technique Press, 1984.
ISBN: 7-5323-0487-6

江育仁主編, **中醫兒科學**, 上海科技出版社, 1994.
ISBN: 7-5323-0487-6

Traumatology & Orthopedics of Traditional Chinese Medicine by Xiang Cai Xu et. Published by Publishing House of Shanghai University of Traditional Chinese Medicine.
ISBN: 7-81010-656-2

TCM Traumatology by Ze Bo Cen. Published by Shanghai Science and technique Press, 1984.
ISBN: 7-5323-0313-6

岑澤波主編, **中醫傷科學**, 上海科技出版社, 1984
ISBN: 7-5323-0313-6

Surgery of Traditional Chinese Medicine by Xiang Cai Xu et. Published by Publishing House of Shanghai University of Traditional Chinese Medicine.
ISBN: 7-81010-656-2

TCM External Medicine by Bo Kang Gu. Published by Shanghai Science and technique Press, 1984.
ISBN: 7-5323-0490-6

顧伯康主編, **中醫外科學**, 上海科技出版社, 1984.
ISBN: 7-5323-0490-6

Ophthalmology & Otorhinolaryngology of Traditional Chinese Medicine. Published by Publishing House of Shanghai University of Traditional Chinese Medicine.
ISBN: 7-81010-655-4 & 7-81010-654-6

TCM Ophthalmology by Ping Zheng Liao. Published by Shanghai Science and technique Press, 1984.
ISBN: 7-5323-0492-2/R .131

廖品正主編, **中醫眼科學**, 上海科技出版社
ISBN: 7-5323-0492-2/R .131

TCM Otolaryngology by De Jiang Wang. Published by Shanghai Science and technique Press.
ISBN: 7-5323-0486-8/R .125K

王德監主編, **中醫耳鼻咽喉口腔科學**, 上海科技出版社, 1997.
ISBN: 7-5323-0486-8/R .125K

Life Cultivation & Rehabilitation of Traditional Chinese Medicine by Wang Xu Dong et. Published by Publishing House of Shanghai University of Traditional Chinese Medicine.
ISBN: 7-81010-649-X

TCM Preventative Medicine by Yu Chuan Wang. Published by Shanghai Science and technique Press.
ISBN: 7-5323-2706-X/R .816

王玉川主編, **中醫養生學**, 上海科技出版社
ISBN: 7-5323-2706-X/R .816

TCM Emergenology by Ji Xue Ren. Published by Shanghai Science and Technique Press, 1997.
ISBN: 7-5323-4435-5



任繼學主編, **中醫急診學**, 上海科技出版社, 1997.
ISBN: 7-5323-4435-5

TCM Classics

The Medical Classic of the Yellow Emperor translated by Ming Zhu. Published by Foreign Languages Press, 2001.
ISBN: 7-119-02664 X

Nei Jing Teaching Materials by Shi De Chen. Published by Shanghai Science and technique Press, 1994.
ISBN: 7-5323-0217-2

程士德主編, **內經講義**, 上海科技出版社, 1994.
ISBN: 7-7532-0217-2

Yellow Emperor's Canon Internal Medicine by Bing Wang. Published by China Science and Technology Press.
ISBN: 7-5046-2231-1

The Yellow Emperor's Classic of Internal Medicine by Ilza Veith. Published by University of California Press, Berkely, Los Angeles, California USA.
ISBN: 0-520-01296-8 (paperback), 0-520-02158-4 (hardcover)

On Cold Damage by Craig Mitchell. Published by Paradigm Publishing.
ISBN: 0-91211-57-7

Teaching Materials for Shang Han Lun by Pei Shen Li. Published by Shanghai Science and technique Press, 1994.
ISBN: 7-5323-0489-2/R .128

李培生主編, **傷寒論講義**, 上海科技出版社, 1994.
ISBN: 7-5323-0489-2/R .128

Treatise on Febrile Diseases Caused by Cold (Shang Han Lun) 傷寒論 by Zhong Jing Zhang.
Published by New World Press

Chinese-English Textbook Synopsis of Prescriptions of Golden Chamber by Ruan Jiyuan et. Published by Shanghai Science & Technology Publishing Co. Sept 2003.
ISBN: 7-5323-7032-1

Jin Gui Yao Lue by Ke Guang Li. Published by Shanghai Science and technique Press, 1994.
ISBN: 7-5323-0303-9/R .82K

李克光主編, **金匱要略**, 上海科技出版社
ISBN: 7-5323-0303-9/R .82K

Synopsis of Prescriptions of the Cold Chamber 金匱要略方論 by Zhong Jing Zhang.
Published by New World Press

Warm Disease Theory – Wen Bing Xue by Jian Min Wen & Carry Seifert. Published by Paradigm Publishing.
ISBN: 0-91211-61-5

Wen Bing Xue by Shu Jiang Men. Published by Shanghai Science and technique Press, 1984.
ISBN: 7-5323-0488-4/R.127

孟澍江主編, **溫病學**, 上海科技出版社, 1984.
ISBN: 7-5323-0488-4/R.127



Biomedicine

Anatomy & Development, Function, Clinical Correlations by William J. Larsen. Published by W.B. Saunders.
ISBN: 0721646468

Anatomy of Normal Body by Shu Hua Qu. Published by Shanghai Science and technique Press, 1984.
ISBN: 7-5323-0509-0

邱樹華主編, **正常人體解剖學**, 上海科技出版社, 1984.
ISBN: 7-5323-0509-0

Anatomic Physiology by Shu Hua Qu. Published by Shanghai Science and technique Press, 1984.
ISBN: 7-5323-0224-5

邱樹華主編, **解剖生理學**, 上海科技出版社, 1984.
ISBN: 7-5323-0224-5

Review for the MCCQUE (The Toronto Notes). Toronto Notes Medical Publishing Inc.
ISBN:0-9685928-4-8

Pathology for the Health – Related Professions (2nd Edition) by Ivan Damjanov. Published by W.B. Saunders Company, The Curtis Centre, Independence Square West, Philadelphia, Pennsylvania 19106 USA.
ISBN: 0-7216-8118-2

Medical Physiology, Updated Edition by Walter F. Boron. Published by W.B. Saunders Company.
ISBN: 141-6023283

Physiology by Guo Long Liu, Published by Shanghai Science and technique Press, 1984.
ISBN: 7-5323-0508-2

劉國隆主編, **生理學**, 上海科技出版社, 1984.
ISBN: 7-5323-0508-2

Pathology by Guo Long Liu, Published by Shanghai Science and technique Press, 1994.
ISBN: 7-5323-3707-3

魏民主編, **病理學**, 上海科技出版社, 1994.
ISBN: 7-5323-3707-3

Review for the MCCQUE (The Toronto Notes). Toronto Notes Medical Publishing Inc.
ISBN:0-9685928-4-8

Guide to Physical Examination and History Taking (5th Edition) by Barbara Bates, MD. Published by Blue Poppy Press, 1775 Linden Avenue, Boulder, Colorado, USA, 80304.
ISBN: 0-912111-13-5

Differential Diagnosis for Primary Practice by Jennifer R. Jamison. Published by Churchill Livingstone.
ISBN: 0-443-06264-1

Basic Knowledge of Diagnostics by Chuan Hui Ye. Published by Shanghai Science and technique Press, 1998.
ISBN: 7-5323-4103-8

葉傳蕙主編, **診斷學基礎**, 上海科技出版社, 1998.
ISBN: 7-5323-4103-8

Review for the MCCQUE (The Toronto Notes). Toronto Notes Medical Publishing Inc.
ISBN:0-9685928-4-8

Microbiology by T. Stuart Walker. Published by W.B. Saunders.
ISBN:0-721-64641-7

Microbiology by Yu Zhen Zhang, Published by Shanghai Science and technique Press, 1984.



ISBN: 7-5323-0482-5

章育正主編, **微生物學**, 上海科技出版社, 1984.
ISBN: 7-5323-0482-5

Review for the MCCQUE (The Toronto Notes). Toronto Notes Medical Publishing Inc.
ISBN:0-9685928-4-8

Pharmacology by George M. Brenner. Published by W.B. Saunders Company. The Curtis Centre, Independence Square West, Philadelphia, Pennsylvania 19106 USA.
ISBN: 0-7216-7757-6

Pharmacology by Qin Mao Wang, Published by Shanghai Science and technique Press, 1984.
ISBN: 7-5323-0227-1

王欽茂主編, **藥理學**, 上海科技出版社, 1984.
ISBN: 7-5323-0227-1

Review for the MCCQUE (The Toronto Notes). Toronto Notes Medical Publishing Inc.
ISBN:0-9685928-4-8

Biochemistry by Robert Roskoski. Published by W.B. Saunders Company.
ISBN: 0-7216-5174-7

Biochemistry by Wei Kang Zhao, Published by Shanghai Science and technique Press, 1998.
ISBN: 7-5323-0378-0

趙偉康主編, **生物化學**, 上海科技出版社, 1998.
ISBN: 7-5323-0378-0

Review for the MCCQUE (The Toronto Notes). Toronto Notes Medical Publishing Inc.
ISBN:0-9685928-4-8

Immunology for Medical Students (Updated Edition), by Roderick Nairn & Matthew Helbert. Published by Mosby Publishing Company.
ISBN: 0-323-03576-0

Basics of Immunology and Pathogenic Microbiology by Li Qin Yang, Published by Traditional Chinese Medicine and Materia Medica Press, 1998.
ISBN: 7-8015-6436-7

揚黎青主編, **免疫學基礎與病原生物學**, 中醫藥出版社,
ISBN: 7-8015-6436-7

Review for the MCCQUE (The Toronto Notes). Toronto Notes Medical Publishing Inc.
ISBN:0-9685928-4-8

Laboratory & Diagnostic Test Handbook by Marie S. Jaffe & Barbara F. McVan. Published by F.A. Davis Company 1915 Arch Street, Philadelphia, Pennsylvania 19103.
ISBN: 0-8036-0088-7

Experimental Diagnostics by Hong Li Wang, Published by Traditional Chinese Medicine and Materia Medica Press, 1998.
ISBN: 7-117-04078-5

王鴻利主編, **實驗診斷學**, 中醫藥出版社,
ISBN: 7-117-04078-5

Review for the MCCQUE (The Toronto Notes). Toronto Notes Medical Publishing Inc.
ISBN:0-9685928-4-8



Cecil Review of General Internal Medicine (8th Edition) by J. Allen D. Cooper, Jr., MD & Peter G. Pappas, MD. Published by W.B. Saunders Company.
ISBN: 1-4160-0023-2

Internal Medicine by Shi Cheng Wang, Published by Shanghai Science and technique Press, 1998.
ISBN: 7-5323-4247-6

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ISBN: 7-5323-4247-6

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ISBN: 90-5702-285-0

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ISBN: 0-8493-1665-0



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ISBN: 0-443-0711-9

The Medical Interview (4th Edition) by John L. Coulehan & Marian R. Block. Published by F.A. Davis Company.
ISBN: 0-8036-0771-7

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Patient Record Keeping

Safety Program Handbook: http://ctcma.bc.ca/media/1064/safety_program_handbook.pdf

Practice Standard: Clinical Record Keeping: <http://ctcma.bc.ca/media/1071/clinicalrecordkeeping.pdf>



Appendix D – List of Materia Medica and Formulae

There is no exhaustive list of Materia Medica and Formulae for Dr.TCM examination. Please use the books listed under Appendix C as references for examination preparation.