



Balance

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College of Traditional Chinese Medicine Practitioners and Acupuncturists of British Columbia

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Balance and other publications circulated by CTCMA are the primary sources of information for our registrants in British Columbia. Registrants are responsible for reading these publications to ensure they are aware of latest information, current standards, policies and guidelines.

New Board Member

The Board is pleased to announce that the Ministry of Health has appointed Bar-Chya (BC) Lee as a new public member to the CTCMA Board.

LEE, Bar-Chya (BC)



BC Lee is a marketing professional specializing in business development, marketing communications, public & media relations and internal communications. He is experienced in all aspects of media and public relations projects with emphasis in planning and implementation. He is actively involved in various segments of the multi-ethnic communities and facilitates relationship amongst these communities.

Born in Macau, he was raised and completed graduate studies with a Masters Degree in Political Science in Taiwan. BC further completed another Masters Degree in public administration from New York University and started as a public relations professional and translator for various international firms. BC then moved to Vancouver in 1992 and was elected to City Council in 2005.

BC is fluent in English, Cantonese, Mandarin and Taiwanese. His masterful language skill and profound knowledge in cultural etiquettes enables him to bridge cultural gaps, create understanding and develop business and community relationships. BC is an active volunteer for a number of charity and community organizations. He supports the China-Canada Business Association, sat as a board member with the Dr. Sun Yat-sen Classical Chinese Garden and the Taiwan Chamber of Commerce in BC. BC also have a long history of service with the United Chinese Canadian Enrichment Social Society (SUCCESS) and the Sam Sullivan Disability Foundation. BC is currently the Vice President of Fireglo Strategic Marketing and Communications Inc. and Director of Asia-Pacific Initiatives of Raincity Strategies.

2011 AGM Announcement

The 2011 Annual General Meeting will be held on January 15, 2012 (Sunday) at the Radisson Hotel Vancouver Airport (8181 Cambie Road, Richmond, BC). The annual community dinner will be held in the evening. Detailed information will follow. Please mark January 15, 2012 on your calendar.

2011年年度大會

卑詩省中醫針灸管理局2011年年度大會將於2012年1月15日在列治文市的Radisson酒店舉行 (8181 Cambie Road, Richmond)

CTCMA or Professional Associations

“What does the College do for me in return for the annual fees I pay?”

Why is your role as a mandatory college registrant different from your role as an association member? Why won't the college do what you want it to do?

30 years ago professional associations lobbied the government to form a regulatory college for this health profession. The long process was driven by the volunteer energy of your colleagues. The associations promised the government that members would pay all costs of running a regulatory college in return for being granted the privilege of self-regulation.

Your association is a registered society – formed by members to protect the interests of the members and to provide member services. It operates under the Societies Act of BC, membership is optional, and as a member you have a strong voice in deciding the association's direction and activities.

Your college is set up by BC law to regulate the practice of TCM/Acupuncture. The college's mandate is to serve and protect the public by setting standards for registration and safe practice, monitoring registrants' practice and investigating complaints. The Health Professions Act of BC (S16) states what the college must do and how it must be done. The board's actions are limited by BC law. The college must act “at all times, (a) to serve and protect the public, and (b) to exercise its powers and discharge its responsibilities under all enactments in the public interest” (HPA S16.1).

The association and college have different purposes:

- the association protects the best interest of its members – and is accountable to the membership for the way in which it acts.
- the college protects the best interest of the general public – and is accountable to the government of BC for the way in which it carries out its duties.

Often the college and association have different views on one issue.

When you (a registrant) elect a colleague to the College Board, you are:

- electing a representative of your profession to carry out the duties outlined in the Health Professions Act.
- entrusting that elected person with the responsibility of ensuring all registrants practice in a safe and ethical manner so that patients will be safe.
- you are not electing someone to represent your interests.

The Seaton Commission Report (*Closer to Home: 1991: BC Royal Commission on Health Care and Health Costs*) explained this difference:

- *“The purpose of regulating members of a profession is to protect the public from preventable harm.”*
- *“The privilege of self-regulation is granted to a profession by the provincial legislature.”*
- *“It is a social contract between the profession and the public. It is the property of the public the profession claims to serve.”*

The following table summarizes the differences between an association and regulatory college.

CTCMA	Professional Association
Best interest of the public	Best interest of members
Code of ethics	Advocacy
Standards	Education
Entry level requirements	Lobbying
Continuing competency	Fellowship
Peer review	Economic interest
Complaint investigation	
all registrants must join	membership is optional

The benefits from belonging to a regulatory college include:

- as a registrant, you know all practitioners in BC have met the minimum entry standards set by the college and all must abide by the code of ethics. This raises the prestige and profile of the profession.
- as a registrant, you are held accountable to a “generally accepted standard of practice”. This standard is determined by comparing your practice to that of the majority of your peers.
- your college has the respect and standing necessary to establish relationships with other health regulatory colleges, again providing prestige and a high profile for all members of your profession.
- your services may be covered by government (MSP) and/or private health care insurance plans.

This profession has made great progress in 30 years. This is a reflection of the skill and dedication of our practitioners including:

- your commitment to practice in a safe and ethical manner, and
- your willingness to submit your practice to the review of your peers in order to protect patients.

TCM Acupuncture Day in BC - Sunday July 24, 2011

In April 2009 “TCM Acupuncture Day” was proclaimed by the cities of Burnaby, North Vancouver, Richmond, Surrey, Vancouver and Victoria.

Various events and celebrations are being scheduled for July 24, 2011.

For further information registrants may contact their TCM/A professional associations.

A list of associations is posted on the CTCMA website at: <http://www.ctcma.bc.ca/upload/List%20of%20TCM%20Associations%20in%20BC.pdf>

卑詩省中醫針灸管理局與專業協會

“我每年繳付年費給卑詩省中醫針灸管理局，請問管理局為我做了什麼？”

中醫從業人員依規定必須成為中醫針灸管理局的**註冊成員**，那麼這個身份與一般中醫師協會**會員**的身份有何不同？為什麼中醫針灸管理局不能立刻滿足成員的要求或期望？

三十年前，中醫界的協會向政府遊說，希望成立一個監管中醫業的自我管理單位。在這個漫長的遊說過程中，許多中醫業者奉獻出時間與精力。為了爭取成為自我監管的專業，當時中醫界各協會向政府承諾，未來管理局的一切營運支出會由成員負擔。

一般的**中醫協會**是民間登記組織，由會員自己組成，目的是維護會員的權益。這類協會的營運需合乎卑詩省民間組織法的規定，中醫從業人員可依據自己的意願決定是否參加，參加任何中醫協會的會員有權就該協會的方向與活動表達意見。

卑詩省中醫針灸管理局是依據卑詩省的法律而成立，負責監管本省的中醫針灸行業。管理局設立中醫的執業安全標準以及中醫業者成為註冊成員的標準，監管註冊成員的執業行為，並調查民眾的投訴，管理局的宗旨是保護一般大眾。卑詩省醫療專業法Health Professions Act of BC明文闡述中醫針灸管理局的權責與執行方法；管理局理事會的行為受到卑詩省相關法律的約制。如同醫療專業法所述(HPA S16.1)，卑詩省中醫針灸管理局必須1) 服務大眾，保護大眾；2) 依據法令，以維護大眾的利益為前提，執行管理局的權力，履行管理局的責任。

一般中醫協會與中醫針灸管理局的目的有所不同：

- 中醫協會維護會員的利益，所有行為只對會員負責。
- 中醫針灸管理局維護一般大眾的權益，管理局執行權責的方式對卑詩省政府負責。

通常管理局和中醫協會對同一個議題會有不同的觀點。

身為管理局註冊成員的您推選一名同業加入管理局的理事會時，這代表：

- 您是推選代表中醫界的同業來履行醫療專業法中闡明的職責
- 您賦予同業代表一定的責任，確保所有的管理局註冊執業人員都以安全道德的方式執業，以保障患者的安全。
- 您不是推選一名同業來代表您個人的利益

1991年卑詩省醫療保健與醫療成本皇家調查報告針對醫療協會與管理局的差別有明確的解釋：

- 「監管專業從業人員的目的是為了維護一般大眾的權益，預防民眾可能受到的傷害。」
- 「行業自我監管的權利必須有省府法令的依據」
- 「自我監管的權利形同專業行業與一般民眾間的社會合同；專業行業服務的對象是大眾，而服務的權利屬於大眾。」

以下列表簡述一般協會與管理局之間的差異

卑詩省中醫針灸管理局	中醫協會
以一般大眾的權益為前提	以會員的權益為前提
設定執業標準守則	以推廣宣傳為目的
標準	教育
行業准入要求	遊說
確保成員維繫持專業能力	同業團體關係
同行評估	經濟利益
調查投訴	
所有中醫執業人員必須加入	會員身份非強制性

成為管理局成員的好處：

身為中醫針灸管理局的註冊成員，您可以放心的是：所有卑詩省的中醫執業人員都符合管理局設定的行業准入最低標準，同時也必須遵守執業標準守則。如此的標準提高了中醫業的聲譽。

身為中醫針灸管理局的註冊成員，您必須達到廣為大眾接受的執業標準；這個標準是拿您的執業與多數同業的執業做比較。

卑詩省中醫針灸管理局獲得其他醫療行業監管單位的尊重與認可，才能與其他醫療管理局建立關係，這樣的地位再次提高了中醫針灸業的聲譽。

您的專業服務有可能獲得省政府醫療保險計畫或是民間私人醫療保險計畫的給付

三十年來中醫針灸業有了傲人的成長，這反映出從業人員的專業和付出，包括：

您承諾以安全道德的方式來執業；

您以保護患者為前提，願意讓同業檢視您的執業行為。

2011年7月24日星期日—卑詩省中醫針灸日

2009年4月，本拿比、北溫哥華、列治文、素里、溫哥華和維多利亞等城市宣布「中醫針灸日」，今年7月24日各地將有不同的活動慶祝中醫針灸日。

詳情請洽註冊成員所屬的各中醫針灸協會。

卑詩省中醫針灸管理局網站上列有中醫針灸協會名單：<http://www.ctcma.bc.ca/upload/List%20of%20TCM%20Associations%20in%20BC.pdf>

Changing Patient Records

Record keeping is recognized as an important component of professional standards. Patient records are legal documents and as such are subject to the laws of the country.

Patient records should only be amended if the original information was inaccurate, misleading or incomplete. If it is changed you must, include a note, signed and dated, to say that the incorrect information was altered. Make it clear that this is a new note, not an attempt to tamper with the original record.

Modifications to medical records must be made carefully. Health professionals should only make changes to ensure that the patient record is relevant and accurate. Health professionals expose themselves to allegations of fraud and unprofessional conduct if alterations are made with any other intention. Changes should be dated and signed or authenticated electronically. It is important to preserve the original entry, and then to write, sign and date any additions or changes.

For corrections that involve more than a word or phrase, append the original entry with a statement about where to find the correct information. Then, make a new entry (in chronological order) indicating that a correction is being made and giving the correct information. Date and sign or initial both entries.

A correction or addition to the patient record should never be back dated; it should always be clear when a correction or addition was made and who made it.

Patients may request changes or corrections to their records. If the health professional agrees, it should generally be in the form of an addendum to the record so the fact of the change is clear. If the health professional objects to the request, such objection must be recorded and become part of the patient's record.

更改病歷

記錄病歷是醫療專業標準的重要環節之一，病歷隸屬法律文件，受國家法律的規範。

只有在原始紀錄有錯誤、不完整或令人誤解的前提下才能更改病歷記錄。如果醫師有需要更改病歷，必須附上說明，解釋因原始記錄有誤因此加以更改，簽名並註明日期。總之，必須註明這是新加的紀錄，並不是有意塗改原始紀錄。

若需更改病歷紀錄，必須謹慎處理。醫療專業人員更改病歷的目的是確保病歷正確，而且只記錄相關的信息。如果執業醫師因其他的意圖更改病歷，那麼有可能遭受詐欺和違反專業行為守則的指控。所有的病歷更動都必須註明日期並親筆簽名，或是採用經過驗證的電子簽名。關鍵之處在於保留原始病歷，所有的更動或追加紀錄都必須附加在原始病歷上，然後簽名並註明日期。

如果所做的更動超過一個字或一句話，那麼必須在原始病歷附加一份聲明，註明正確信息所在之處，接著輸入一份新的紀錄（依日期先後排序）註明原始紀錄有待修正，並將正確的信息納入新紀錄。最後在舊紀錄和新紀錄附上簽名與日期。

Duties to Report under the Health Professions Act 32.2

It is the duty of health professionals to report incompetence or incapacity under the Health Professions Act (HPA). The CTCMA is regulated by the HPA and registrants have a duty to report. Registrants have a professional responsibility as outlined in the CTCMA Standards of Practice, an ethical responsibility according to the CTCMA Code of Ethics and a legal responsibility as established by the HPA.

There are three situations which the HPA imposes a duty to report another registrant.

- Dangerous Practice
- Sexual Misconduct
- Hospitalization for Certain Conditions

Registrants must believe on “reasonable and probable grounds” that a registrant has either “engaged in sexual misconduct” or “might constitute a danger to the public”.

An example is the case of a psychiatrist with a patient who was a CTCMA practitioner. The registrant was committed to the psychiatric ward of a local hospital. The psychiatrist notified the that his patient had been admitted due to a mental illness and that her illness would significantly impact her ability to practice her profession.

The regulatory body then took the following steps:

- The reporting medical doctor was requested to submit in writing that the Registrant posed a risk to the public.
- The Inquiry Committee commenced an investigation under 33(4) (e) of the HPA.
- The registrant was suspended from practice. The regulatory College informed the registrant in writing that her registration was suspended under section 35 of the HPA.
- The suspension remained in place until the attending medical doctor confirmed that the Registrant no longer constituted a danger to the public and that she was fit to practice.

All registrants of a College regulated under the HPA have a professional, ethical and legal responsibility to report any unsafe practice or professional misconduct of any other regulated health profession.

醫療專業法32.2條款所規定的舉發義務

根據本省醫療專業法規定，醫療從業人員有義務舉發任何能力不足或無法勝任的執業人員。

三種情形便有義務檢發相關執業人員：

1. 危險的執業行為
2. 性騷擾
3. 執業人員因某種病狀而住院

中醫針灸管理局的註冊成員必須根據”合理性及相當的可能性”來判斷某名執業同行是否對患者進行”性騷擾”或是”可能危及民眾安全”。所有中醫針灸管理局的註冊成員都受制於醫療專業法的規範，也因此專業上，在道德上，在法律上，都有責任針對任何其他同受規範的醫療專業人員不當的執業行為提出檢舉。

MSP Billing Alert

The Ministry of Health Services, Service Verification Group systematically looks for evidence of health care practitioners billing themselves or family members. Such billing is contrary to the Medicare Protection Act.

The Medical and Health Services Regulation, Medicare Protection Act states that services are not billable to MSP if they are provided by a health care practitioner to members of the health care practitioner's family. Family members include a spouse, son or daughter, step-son or step-daughter, parent, or step-parent, mother or father-in-law, grandparent, grandchild, brother or sister or a spouse of any of those listed above.

Since February 2010 there have been 55 CTCMA registrants identified as having billed themselves or their family members. From those 55, the Ministry of Health Services has recovered approximately \$27,000 for those billings. All CTCMA registrants who are found to be billing for themselves or their family members are sent a letter and the funds are recovered from the registrants.

As of May 1, 2011 registrants who bill for treatment to themselves or family members will be referred by the Ministry to the CTCMA. The position of the Ministry is that billing for family members of this magnitude indicates a potential ethical issue and that the regulatory College should be informed.

省政府醫療健保MSP申報警示

省政府衛生廳醫療服務核對組有系統地追蹤醫療執業人員是否以自己或家人的名義申報MSP費用，這樣的申報行為違反醫療健保保護法。

醫療健保保護法中明文規定，醫療執業人員提供給家人的醫療服務不得向MSP申報費用。所謂的家人包括：配偶、子女、繼子女、父母、繼父母、配偶之父母、祖父母、外祖父母、孫兒女、外孫兒女，以及前述任何一人的兄弟姊妹。

自2010年2月以來，已有55名卑詩省中醫針灸管理局的註冊成員遭檢發以自身或家人名義不當申報MSP，省衛生廳已從這些違規人士身上索回\$2萬7000元。凡是違規申報的管理局註冊成員都接獲信函，並將不當申報金額退還省府衛生廳。

自2011年5月起，凡是替自己或家人申報MSP治療費用的註冊成員，省衛生廳都將發函通知中醫針灸管理局。省衛生廳的立場是：替自己家人治療申報如此高額的費用，顯然表示註冊成員有可能違反專業道德守則，身為監管單位的卑詩省中醫針灸管理局必須知曉。

Inquiry and Discipline Report

The following summaries represent Inquiry Investigations and actions since last reported in the Spring 2011 issue of the Balance Newsletter. Tariff costs may be applied to CTCMA Registrants pursuant to Inquiry and Discipline activities. The tariffs are established under section 19(1)(v.1) of the Health Professions Act and the College bylaws. Cases requiring public notification are posted on the website www.ctcma.bc.ca with the publication number noted below.

Actions Pending Completion of Investigation

Professional Misconduct/Sexual Misconduct

Website Publication #4

On February 28, 2011, the Inquiry Committee determined it was necessary to take extraordinary action under s. 35(1)(b) of the Act by imposing conditions on the Registrant's practice pending the outcome of an investigation concerning allegations of inappropriate sexual touching of a female patient. The Inquiry Committee ordered, pending completion of its investigation, that at all times the Registrant may only continue to practice traditional Chinese medicine / Tuina under the supervision of an approved CTCMA Registrant in good standing.

Suspension During an Investigation of a Registrant's Conduct

Website Publication #5

The Inquiry Committee initiated an investigation in response to a complaint filed by a patient on September 7, 2010. The registrant was requested to produce clinical records. He produced copies of records in Chinese. The nature of the clinical records gave rise to further concerns.

The Inquiry Committee appointed an inspector to attend at the registrant's clinic to review a random selection of his clinical records. The inspector attended at the registrant's clinic on January 27, 2011 and March 31, 2011 but he refused to give her access to his records on both occasions.

The College then obtained a court order under s. 29 of the Act allowing the inspector to enter the business premises to seize the records. The inspector returned to the registrant's clinic and served a copy of the court order. The registrant refused to comply with the court order and would not provide access to his clinical records. When the police attended, the inspector was permitted access to the clinic. She observed equipment and supplies suggesting that the registrant was manufacturing herbal remedies.

In view of the Inquiry Committee's concerns regarding the registrant's clinical records and the evidence of manufacturing, and the registrant's refusal to cooperate with the investigation and the court order, the Inquiry Committee determined that precautionary action was necessary to protect the public pending completion of its investigation. Effective April 8, 2011 the Inquiry Committee suspended the registrant's registration under s. 35(1)(b) of the Act.

Actions Pending Completion of Investigation, continued

Professional Misconduct/Sexual Misconduct

Website Publication # 1

The registrant remains under suspension until the criminal proceedings are complete, at which time the Inquiry Committee will resume its investigation.

Professional Misconduct/Sexual Misconduct

Website Publication # 2

The registrant remains under suspension until the criminal proceedings are complete, at which time the Inquiry Committee will resume its investigation.

Unprofessional Conduct

Website publication # 3

The registrant remains under suspension until the Inquiry Committee completes its investigation.

Unauthorized Title Investigations

A number of investigations were conducted following reports of unauthorized use of title. Three registrants were found to be using unauthorized titles. The cases were resolved by way of consent orders under s. 36 of the *HPA* which contained undertakings to refrain from the unauthorized use of title and the imposition of tariff costs under s. 19(1)(v1) of the Act and College bylaws.

Discipline Committee

Discipline Hearings were held in January, 2011 and in March, 2011. The Discipline Committee has completed the Reasons for Decision on Verdict in both cases. Following issuance of the Decision for Penalty, Publication and Costs the reports will be posted on the website and published in the Fall 2011 newsletter.

Moving? 遷址?

Registrants must ensure their contact information is always current on the CTCMA register. Incorrect or out-of-date addresses can lead to missed mailings that may include important notices and documents. Address changes can be submitted by completing the form on our website at:

註冊成員的聯繫信息若有更動，必須隨時通知中醫針灸管理局。地址不正確或過時會導致管理局發出的通知與文件無法投遞，註冊成員若需更動地址，請至管理局網站填寫更新表格：

<http://www.ctcma.bc.ca/upload/Change%20Address%20etc%20form%20-%20Jan%202011.pdf>

The signed form can be returned by fax, email or postal service.

填寫好的地址更動表格可用傳真、電郵或郵寄方式送交管理局。

Non-Veterinarians and the Practice of Veterinary Medicine in British Columbia

The College has received enquiries regarding the legality of registrants treating animals with TCM and acupuncture. The Veterinarians Act of BC (the “Act”) prohibits the treatment of animals by individuals not registered with the College of Veterinarians of British Columbia (CVBC). Individuals who do so face possible legal action through the BC court system. A CTCMA registrant who contravenes the Act may face regulator action both by the College of Veterinarians and the CTCMA.

The CVBC is the statutory body created to serve the interests of the public and animals through the regulation and advancement of the veterinary profession in B.C. The CVBC's mandate is to create, promote and enforce a high standard of qualification, conduct and competence by practitioners of veterinary medicine.

Only an individual who is registered by the CVBC, may practice veterinary medicine in B.C. “Veterinary Medicine” means the art and science of veterinary medicine, dentistry and surgery, and includes:

1. the diagnosis and treatment of animals for the prevention, alleviation or correction of disease, injury, pain, defect, disorder, or other similar condition,
2. the provision of a service prescribed by regulation of the lieutenant governor in council, and
3. the provision of advice in respect of a matter referred to in paragraph (1) or (2).

Regarding the use of titles, the Veterinarians Act section 47 (2) states: A person who is not a registrant must not use:

1. the title “veterinarian”, “veterinarian surgeon” or “veterinarian practitioner”, or
2. any title, name, description or abbreviation of a name or title, or any equivalent of a name or title in another language, in any manner that reasonably suggests that the person
 - is a registrant, or
 - practises veterinary medicine

For more information or any questions you may have regarding the practice of Veterinary Medicine in British Columbia please visit the CVBC website at: www.cvbc.ca

非獸醫人士與卑詩省的獸醫專業

卑詩省獸醫法禁止任何非卑詩省獸醫管理局的註冊成員治療動物，後者如此的行為有可能面臨法律制裁。卑詩省中醫針灸管理局註冊成員如果違反卑詩省獸醫法，將面臨獸醫管理局和中醫針灸管理局雙重的制裁。

只有卑詩省獸醫管理局的註冊成員才能從事獸醫學，所謂的獸醫學是指動物醫學、動物牙醫學和動物手術，包括：

1. 針對動物進行診斷與治療，目的在預防、緩和或治療疾病、傷害、痛苦、缺陷、異常或類似症狀；
2. 在省府相關法令的規範下，提供獸醫服務；
3. 針對1)或2)相關事宜提供諮詢建議。

如果您對卑詩省獸醫專業有任何問題或需要更多信息，請參考卑詩省獸醫管理局網站：www.cvbc.ca

Information for Student Registrants

Training Program Review Update

- The Training Program Review (TPR) consists of two components: curriculum review and clinical review.
- Institutions that successfully complete the TPR will be listed under CTCMA Bylaws, Schedule H.
- Successful completion of TPR is one of PCTIA requirements for accreditation.

Effective March 31, 2012, students who complete training in British Columbia will only receive recognition for programs offered by PCTIA accredited training institutions.

Training Program Review documents are available at the CTCMA website at

http://www.ctcma.bc.ca/upload/TPR%20Package_Fillable_Revised%20Oct5%2C%202010_Legalsize.pdf

Reminder for students undertaking clinical training

- Current CTCMA student registration is mandatory for all students undertaking clinical training including clinical observation.
- CTCMA student tag must be visible during the clinical training.

Patient Record Workshops

The College held Patient Record Workshops on May 8, 2011 and June 19, 2011. In order to accommodate the large number of applicants a third workshop will be held on September 11, 2011. If you would like to register for the September workshop you can download the registration form on our website at www.ctcma.ba.ca/news.asp

病歷記錄研習會

中醫針灸管理局在今年5月8日和6月19日舉辦病歷記錄研習會，由於報名人數踴躍，管理局將在9月11日再度舉辦病歷記錄研習會。有興趣的成員，請在管理局網站下載報名表：www.ctcma.ba.ca/news.asp

CTCMA Audited Financial Statement 卑詩省中醫針灸管理局已經審計之財務報告

The Financial Statements to March 31, 2011 are posted and may be downloaded from the CTCMA website www.ctcma.bc.ca 中醫針灸管理局截至2011年3月31日的財務報告已放在管理局的網站上供下載：
www.ctcma.bc.ca

“Balance” is published by:

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For details and enrolment for study, please visit the following website to view a presentation on this topic by Dr. Terry Shao hua Tang: <http://citcmclinic.com/feilongmaifa.html>

Instructor *Dr. Brian La Forgia* will present an introductory seminar on Feilong Pulse Method (in English with Chinese translation) on **April 15th, 2011**, at **7:00-9:30pm**. For those interested in attending, please contact: **Summer Xia** Tel: 604-676-3634 Email: citcm360@yahoo.com.

飛龍脈法

飛龍脈法起源於中國傳統脈法，一直在孟河醫派里秘密流傳并完善和發展，至今有超過600年的歷史，美國著名心理醫生海默師承孟河醫派傳人沈鶴峰醫生學習27年，并用畢生的努力，創造了一套實用快捷的學習方法，能讓學習者在短時間內就能夠完全上手，直接運用到臨床中，實為脈診入門和提高的最佳捷徑。為現今不可多得的手把手傳授的脈法。

唐紹華醫師有關於飛龍脈法的專題介紹。如欲瞭解詳情，請查詢下列網址 <http://citcmclinic.com/feilongmaifa.html>

指導老師 *Dr. Brian La Forgia* 將於2011年4月15日晚上7:00-9:30做飛龍脈法的專題講座(中英文)。有意參加者請聯繫 **Summer Xia** Tel: 604-676-3634 Email: citcm360@yahoo.com

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'A Path to Unity' Why We Must Support and Belong to an Association in B.C.

My intention is to write this article with harmony.....

June 5, 2011

On Wednesday April 27th, 2011 I received a telephone call at my clinic from an individual wanting to know if I belonged to the Acupuncture Foundation of Canada. I asked her 'Why?' Her response was that her insurance provider 'Green Shield of Canada' would only accept Acupuncturists from that Organization. I was puzzled.

On April 28th, 2011 I called Green Shield, on behalf of QATCMA to get some answers. It turns out that the individual who called me read a pamphlet from the head office, located in Eastern Canada which states 'must be a member of Acupuncture Foundation of Canada'. However this rule applies (only) to provinces which are not regulated by the government.

This is confusing for Acupuncturists and our patients. The customer service representative at Green Shield Canada was very helpful and explained the process for accepting submission(s) of receipts from patients; if you are a Registered Acupuncturist in B.C. (or any other province that governs this profession) then Green Shield goes to that governing body to verify that indeed this R. Ac. has a licence. The other provinces not regulated must join the Acupuncture Foundation of Canada and take courses required by them to state they are qualified to perform acupuncture safely.

The Acupuncture Foundation of Canada doesn't only govern TCMs, they permit members from a multi-disciplinary level such as Physicians, Dentists, Physiotherapist, Chiropractors, Nurses, Occupational Therapists and Naturopaths.

Personally, I see this as a benefit to Green Shield as this would be a nightmare for them to chase everyone to verify who is qualified. I am concerned about our future: Creating a diluted form of acupuncture. I see the Acupuncture Foundation of Canada growing and becoming the controller if we don't unite and become a strong Association that backs its members through thick and thin. We must all come to the realization that CTCMA is in place to set standards of education and protect the public not lobby insurance companies or government. Associations have their own roles. For example, informing insurance providers about the amount of educational hours it takes for a TCM, (DTCM, R. Ac.) vs. other professions. Insurance providers want to hear 'safety', 'consent forms', and what we are doing to provide this as an Association. The more members we have in our Association translates to more clout to source out quality insurance coverage for our members, excellent medical & dental benefits and well organized internship programs for our students.

The time has come to support our Association, unite together and be strong for the future of Acupuncture/TCM.

Article sponsored by: **BC Qualified Acupuncturists and T.C.M. Practitioners Association (QATCMA)**, written by Rachele D. Wendt, R. Ac. Membership Dir.
website: www.qatcma.org email: qatcma@uniserve.com Tel: 604 278-6220 (application for membership will be sent via email or mail by request)

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