

Chapter 246-803 WAC
ACUPUNCTURE AND EASTERN MEDICINE PRACTITIONER

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WAC

ACUPUNCTURE AND EASTERN MEDICINE PRACTITIONERS

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246-803-330 Plan for consultation, emergency transfer and referral. [Statutory Authority: Chapter 18.06 RCW and 2010 c 286. WSR 11-17-105, § 246-803-330, filed 8/22/11, effective 9/22/11.] Repealed by WSR 16-01-158, filed 12/21/15, effective 1/21/16. Statutory Authority: RCW 18.06.160 and 2015 c 60.

246-803-510 Application for approval of alternative training. [Statutory Authority: Chapter 18.06 RCW and 2010 c 286. WSR 11-17-105, § 246-803-510, filed 8/22/11, effective 9/22/11.] Repealed by WSR 21-09-008, filed 4/8/21, effective 5/9/21. Statutory Authority: RCW 18.06.160, chapter 18.06 RCW, 2019 c 308, 2020 c 229 and 2020 c 76.

ACUPUNCTURE AND EASTERN MEDICINE PRACTITIONERS

WAC 246-803-010 Definitions. The definitions in this section apply throughout this chapter unless the context clearly requires otherwise:

(1) "Accredited school, college or program" means:

(a) Accredited or has candidacy status as a United States postsecondary school, college or program; or

(b) Accredited by or has candidacy status with the Accreditation Commission for Acupuncture and Oriental Medicine (ACAOM).

(2) "Acupuncture needles" means solid filiform instruments intended to pierce the skin in the practice of acupuncture. Acupuncture needles used on a patient must be sterile and disposable, and may only be used once.

(3) "Acupuncturist or acupuncture and Eastern medicine practitioner" is a person licensed under chapter 18.06 RCW.

(4) "Acupuncturist or acupuncture and Eastern medicine program" means training in acupuncture or Eastern medicine offered by an academic institution that satisfies the education requirements set out in WAC 246-803-210, 246-803-220, and 246-803-230. A program is an established area of study offered on a continuing basis. An acupuncture or acupuncture and Eastern medicine program may be referred to as a program in acupuncture, acupuncture and Eastern medicine, or Eastern medicine.

(5) "Acupuncture or acupuncture and Eastern medicine school" means an accredited academic institution which has the sole purpose of offering training in acupuncture or acupuncture and Eastern medicine that satisfies the education requirements set out in WAC 246-803-210, 246-803-220, and 246-803-230.

(6) "Approved school" means a school, college or program approved by the secretary of the department of health that meets the requirements of WAC 246-803-500.

(7) "Credit" means 10 classroom contact hours on the quarter system or 15 classroom contact hours on the semester or trimester system.

(8) "Department" means the department of health.

(9) "Hypodermic needle" means a device intended to inject fluids into, or withdraw fluids from, parts of the body below the surface of the skin.

(10) "Primary health care provider" means an individual licensed under:

(a) Chapter 18.36A RCW, Naturopathy;

(b) Chapter 18.57 RCW, Osteopathy—Osteopathic medicine and surgery;

(c) Chapter 18.71 RCW, Physicians;

(d) Chapter 18.71A RCW, Physician assistants; or

(e) RCW 18.79.050, "Advanced registered nursing practice" defined—Exceptions.

[Statutory Authority: RCW 18.06.160, 18.06.230, chapter 18.06 RCW, 2021 c 87, and 2020 c 80. WSR 22-12-018, § 246-803-010, filed 5/23/22, effective 7/1/22. Statutory Authority: RCW 18.06.160, chapter 18.06 RCW, 2019 c 308, 2020 c 229 and 2020 c 76. WSR 21-09-008, § 246-803-010, filed 4/8/21, effective 5/9/21. Statutory Authority: RCW 18.06.160. WSR 20-03-112, § 246-803-010, filed 1/15/20, effective 2/15/20. Statutory Authority: Chapter 18.06 RCW and 2010 c 286. WSR 11-17-105, § 246-803-010, filed 8/22/11, effective 9/22/11.]

WAC 246-803-020 Advertising. (1) A person licensed under this chapter may use the title acupuncturist (Ac), licensed acupuncturist (L.Ac.), acupuncture and Eastern medicine practitioner (AEMP), EAMP, or any derivative thereof in all forms of advertising, professional literature and billing.

(2) An acupuncturist or acupuncture and Eastern medicine practitioner may not use the title "doctor," "Dr.," or "Ph.D." on any advertising or other printed material unless the nature of the degree is clearly stated.

(3) An acupuncturist or acupuncture and Eastern medicine practitioner may not represent that they hold a degree from an acupuncture or acupuncture and Eastern medicine school other than that degree which has been awarded to them.

(4) An acupuncturist or acupuncture and Eastern medicine practitioner shall not engage in false, deceptive, or misleading advertising including, but not limited to, the following:

(a) Advertising that misrepresents the potential of acupuncture or Eastern medicine; and

(b) Advertising of any service, technique, or procedure that is outside the scope of practice for an acupuncturist or acupuncture and Eastern medicine practitioner.

[Statutory Authority: RCW 18.06.160, 18.06.230, chapter 18.06 RCW, 2021 c 87, and 2020 c 80. WSR 22-12-018, § 246-803-020, filed 5/23/22, effective 7/1/22. Statutory Authority: RCW 18.06.160, chapter 18.06 RCW, 2019 c 308, 2020 c 229 and 2020 c 76. WSR 21-09-008, § 246-803-020, filed 4/8/21, effective 5/9/21. Statutory Authority: Chapter 18.06 RCW and 2010 c 286. WSR 11-17-105, § 246-803-020, filed 8/22/11, effective 9/22/11.]

WAC 246-803-030 Acupuncture and Eastern medicine. Acupuncture and Eastern medicine is a health care service using acupuncture or Eastern medicine diagnosis and treatment to promote health and treat organic or functional disorders, which includes a variety of traditional and modern acupuncture and Eastern medicine therapeutic treatments, such as the practice of acupuncture techniques and herbal medicine to maintain and promote wellness, prevent, manage, and reduce pain, and treat substance use disorder. Acupuncture and Eastern medicine includes the following:

(1) The use of presterilized, disposable needles, such as filiform needles, and other acupuncture needles, syringes, or lancets to directly and indirectly stimulate meridians and acupuncture points including ashi points, motor points, trigger points, and other nonspecific points throughout the body;

(2) The use of electrical, mechanical, or magnetic devices to stimulate meridians and acupuncture points including ashi points, trigger points, and other nonspecific points throughout the body;

(3) Intramuscular needling and dry needling of trigger points and other nonspecific points throughout the body in accordance with acupuncture and Eastern medicine training;

(4) All points and protocols for ear acupuncture including auricular acupuncture, national acupuncture detoxification association protocol, battlefield acupuncture, and the Nogier system;

(5) The use of contact needling and noninsertion tools such as teishin, enshin, or zanshin;

(6) Moxibustion;

(7) Acupressure;

(8) Cupping;

(9) Dermal friction technique;

(10) Infrared;

(11) Sonopuncture;

(12) Laserpuncture;

(13) Point injection therapy:

(a) Means the subcutaneous, intramuscular and intradermal injection of substances consistent with the practice of acupuncture or Eastern medicine to stimulate meridians, acupuncture points, ashi points, motor points, trigger points, and other nonspecific points throughout the body. Substances are limited to:

(i) Saline;

(ii) Sterile water;

(iii) Herbs specifically manufactured for injection by means of hypodermic needles;

(iv) Minerals specifically manufactured for injection by means of hypodermic needles;

(v) Vitamins in liquid form specifically manufactured for injection by means of hypodermic needles; and

(vi) Homeopathic and nutritional substances specifically manufactured for injection by means of hypodermic needles.

(b) Also includes injection of local anesthetics, such as lidocaine and procaine, for reduction of pain during point injection therapy, consistent with the practice of acupuncture and Eastern medicine and training requirements as defined in WAC 246-803-040.

(c) Used by an acupuncturist or acupuncture and Eastern medicine practitioner who has met the training and education requirements in RCW 18.06.230, may administer oxygen and epinephrine for potential emergency purposes, such as an allergic or adverse reaction, for patient care and safety.

(d) For the purposes of this subsection, includes trigger points as a subset of acupuncture points and ashi points as recognized in the current practice of acupuncture or Eastern medicine.

(e) Does not include injection of controlled substances contained in Schedules I through V of the Uniform Controlled Substances Act, chapter 69.50 RCW or steroids as defined in RCW 69.41.300.

(14) Dietary advice and health education based on acupuncture or Eastern medical theory, including the recommendation and sale of herbs, vitamins, minerals, and dietary and nutritional supplements.

(a) Health education is educational information directed to the patient that attempts to improve, maintain, promote and safeguard the health care of the patient. Health education consists of educating the patient on how the mind, body and spirit connect in context of imbalances, emotional patterns and tendencies as defined by and treated in acupuncture or Eastern medicine.

(b) Health education does not include mental health counseling;

(15) Breathing, relaxation, and Eastern exercise techniques;

(16) Qi gong;

(17) Eastern massage, manual techniques having originated in East Asia involving the manipulation of the soft tissues of the body for therapeutic purposes.

(a) Eastern massage consists of:

(i) Applying fixed or movable pressure;

(ii) Passive, resistive, and assisted stretching of fascial and connective tissue;

(iii) Holding or causing movement of the body; or

(iv) Tapping, compressions or friction.

(b) Eastern massage may be performed with the use of tools common to the practice and aids of superficial heat, cold, water, lubricants, salts, minerals, liniments, poultices, and herbs.

(c) Eastern massage does not include attempts to adjust or manipulate any articulations of the body or spine or mobilization of these articulations by the use of a thrusting force.

(18) Tui na, a method of Eastern bodywork, characterized by the kneading, pressing, rolling, shaking, and stretching of the body and does not include spinal manipulation;

(19) Superficial heat and cold therapies.

[Statutory Authority: RCW 18.06.160, 18.06.230, chapter 18.06 RCW, 2021 c 87, and 2020 c 80. WSR 22-12-018, § 246-803-030, filed 5/23/22, effective 7/1/22. Statutory Authority: RCW 18.06.160, chapter 18.06 RCW, 2019 c 308, 2020 c 229 and 2020 c 76. WSR 21-09-008, § 246-803-030, filed 4/8/21, effective 5/9/21. Statutory Authority: RCW 18.06.160. WSR 20-03-112, § 246-803-030, filed 1/15/20, effective 2/15/20. Statutory Authority: RCW 18.06.230, 18.06.160, and 18.06.010. WSR 17-15-006, § 246-803-030, filed 7/5/17, effective 7/5/17. Statutory Authority: Chapter 18.06 RCW and 2010 c 286. WSR 11-17-105, § 246-803-030, filed 8/22/11, effective 9/22/11.]

WAC 246-803-040 Education and training for point injection therapy. Acupuncturist or acupuncture and Eastern medicine practitioners employing point injection therapy shall use only those substances and techniques for which they have received training.

(1) The education and training for point injection therapy must:

(a) Consist of a minimum total of 24 hours in the topics required in this section:

(i) Sixteen hours must be in-person; eight hours of which must be hands-on clinical practical experience; and

(ii) The remaining eight hours may be obtained through live interactive webinar or in-person.

(b) Be administered by an instructor that meets the requirements of subsection (3) of this section.

(2) A curriculum for a point injection therapy training program must include all of the following:

(a) Review of physical examination, contraindications and universal precautions, and differential diagnosis;

(b) Compounding and administration of the substances authorized for point injection therapy under WAC 246-803-030, including aseptic technique, recordkeeping and storage of substances authorized for use in point injection therapy;

(c) Use of local anesthetics, such as lidocaine and procaine, for reduction of pain during point injection therapy, consistent with the practice of acupuncture and Eastern medicine;

(d) Emergency procedures to include the use of oxygen and epinephrine for potential emergency purposes, such as an allergic or adverse reaction, for patient care and safety; and

(e) Point injection therapy techniques and contraindication within the acupuncture or Eastern medicine scope of practice relative to the authorized substances listed in WAC 246-803-030 (13)(a)(i) through (vi).

(3) An instructor for point injection therapy must have:

(a) A health care credential in good standing with a scope of practice that includes point injection therapy; and

(b) At least five years of experience in a health care practice that includes point injection therapy.

(4) In addition to the requirements of subsections (1) and (2) of this section, an acupuncturist or acupuncture and Eastern medicine practitioners using point injection therapy must complete a minimum of two hours of training specifically in the use of intramuscular epinephrine, local anesthetics and oxygen.

(a) The training may be taken separately from the training in point injection therapy.

(b) The minimum of two hours of training count towards meeting the requirement for 24 hours of training as required in subsection (1)(a) of this section.

(c) An acupuncturist or acupuncture and Eastern medicine practitioner who holds an active credential with a scope of practice that includes the authority to prescribe, dispense or administer epinephrine, local anesthetics, or oxygen does not need to meet the requirements of (a) of this subsection.

(5) To qualify under this section, the training program shall provide each successful student with a:

(a) Certificate of successful completion of the program; and

(b) Course syllabus outlining the schedule and curriculum of the program.

(6) The requirements of subsections (1) through (5) of this section do not apply to an acupuncturist or acupuncture and Eastern medicine practitioner who has provided point injection therapy prior to June 9, 2016. An acupuncturist or acupuncture and Eastern medicine practitioners using point injection therapy prior to June 9, 2016, must have completed training and education in point injection therapy.

(7) Prior to administering local anesthetic, epinephrine, or oxygen in providing point injection therapy services, an acupuncturist or acupuncture and Eastern medicine practitioner must satisfy the education and training requirements under this section.

(8) Any acupuncturist or acupuncture and Eastern medicine practitioner performing point injection therapy must be able to demonstrate, upon request of the department, successful completion of education and training in point injection therapy.

[Statutory Authority: RCW 18.06.160 and 18.06.230. WSR 24-24-029, s 246-803-040, filed 11/22/24, effective 12/23/24. Statutory Authority: RCW 18.06.160, 18.06.230, chapter 18.06 RCW, 2021 c 87, and 2020 c 80. WSR 22-12-018, § 246-803-040, filed 5/23/22, effective 7/1/22. Statutory Authority: RCW 18.06.160, chapter 18.06 RCW, 2019 c 308, 2020 c 229 and 2020 c 76. WSR 21-09-008, § 246-803-040, filed 4/8/21, effective 5/9/21. Statutory Authority: RCW 18.06.230, 18.06.160, and 18.06.010. WSR 17-15-006, § 246-803-040, filed 7/5/17, effective 7/5/17.]

LICENSURE—APPLICATION AND ELIGIBILITY REQUIREMENTS

WAC 246-803-100 Application requirements for applicants from approved schools, colleges or programs. An applicant for an acupuncturist or acupuncture and Eastern medicine practitioner license who has graduated from an approved school, college or program must submit to the department:

(1) A completed application.

(2) The application fee required under WAC 246-803-990.

(3) Verification of academic or educational study and clinical training at a school, college or program approved by the secretary. The school, college or program verification must include one of the following:

(a) Original copy of school transcript evidencing completion of a program in acupuncture or Eastern medicine that includes the required basic sciences sent directly from the school, college or program. If all the required basic sciences were not included as a part of the curriculum, then the applicant must also provide official transcripts from where the basic sciences were obtained;

(b) A notarized affidavit or statement signed by an officer of the school, college, or program certifying the applicant's satisfactory completion of the training and designating the subjects and hours; or

(c) If the school no longer exists, a copy of the transcript and a sworn affidavit stating the school no longer exists.

(4) Verification of clinical training as required in WAC 246-803-230.

(5) Verification of successful completion of the examinations as required in WAC 246-803-240.

(6) Verification of all acupuncture, acupuncture and Eastern medicine practitioner or health care licenses held, submitted directly from the licensing agency. The certification shall include the license number, issue date, expiration date and whether the acupuncturist or acupuncture and Eastern medicine practitioner has been the subject of final or pending disciplinary action.

(7) Verification of current cardiopulmonary resuscitation (CPR) certification. The training in CPR shall consist of a minimum of one quarter credit or equivalent. Red Cross certification or documentation of equivalent training may be substituted for the one quarter credit.

(8) Any additional documents requested by the secretary.

[Statutory Authority: RCW 18.06.160, chapter 18.06 RCW, 2019 c 308, 2020 c 229 and 2020 c 76. WSR 21-09-008, § 246-803-100, filed 4/8/21, effective 5/9/21. Statutory Authority: RCW 18.06.160 and 2015 c 60. WSR 16-01-158, § 246-803-100, filed 12/21/15, effective 1/21/16. Statutory Authority: Chapter 18.06 RCW and 2010 c 286. WSR 11-17-105, § 246-803-100, filed 8/22/11, effective 9/22/11.]

WAC 246-803-110 Application requirements for applicants from accredited schools, colleges or programs. An applicant for an acupuncturist or acupuncture and Eastern medicine practitioner license who has graduated from an accredited school, college or program must submit to the department:

(1) A completed application.

(2) The application fee required under WAC 246-803-990.

(3) Verification of academic or educational study and clinical training at a school, college or program accredited by the Accreditation Commission for Acupuncture and Oriental Medicine (ACAOM). The school, college or program verification must include one of the following:

(a) Original copy of school transcript evidencing completion of a program in acupuncture or Eastern medicine that includes the required basic sciences sent directly from the school, college or program. If all of the required basic sciences were not included as a part of the

curriculum, then the applicant must also provide official transcripts from where the basic sciences were obtained; or

(b) A notarized affidavit or statement signed by an officer of the school, college or program certifying the applicant's satisfactory completion of the training and designating the subjects and hours; or

(c) If the school no longer exists, a copy of the transcript and a sworn affidavit stating the school no longer exists.

(4) Verification of clinical training as required in WAC 246-803-230.

(5) Verification of successful completion of the examinations as required in WAC 246-803-240.

(6) Verification of all acupuncture, acupuncture or Eastern medicine practitioner or health care licenses held, submitted directly from the licensing agency. The certification shall include the license number, issue date, expiration date and whether the acupuncturist or acupuncture and Eastern medicine practitioner has been the subject of final or pending disciplinary action.

(7) Verification of current cardiopulmonary resuscitation (CPR) certification. The training in CPR shall consist of a minimum of one quarter credit or equivalent. Red Cross certification or documentation of equivalent training may be substituted for the one quarter credit.

(8) Any additional documents requested by the secretary.

[Statutory Authority: RCW 18.06.160, chapter 18.06 RCW, 2019 c 308, 2020 c 229 and 2020 c 76. WSR 21-09-008, § 246-803-110, filed 4/8/21, effective 5/9/21. Statutory Authority: RCW 18.06.160 and 2015 c 60. WSR 16-01-158, § 246-803-110, filed 12/21/15, effective 1/21/16. Statutory Authority: Chapter 18.06 RCW and 2010 c 286. WSR 11-17-105, § 246-803-110, filed 8/22/11, effective 9/22/11.]

WAC 246-803-130 Application requirements for applicants from foreign schools. (1) An applicant for an acupuncturist or acupuncture and Eastern medicine practitioner license who has graduated from a foreign acupuncture or Eastern medicine practitioner program not accredited, or approved by the secretary must:

(a) Have at least a bachelor's or master's degree in Eastern medicine or acupuncture from an institution of higher learning which is approved by the foreign country's ministry of education/health, or other governmental entity;

(b) Have graduated from a program of Eastern medicine or acupuncture education with requirements substantially equal to those required of graduates of secretary-approved programs; and

(c) Demonstrate fluency in reading, speaking, and understanding the English language by taking the examinations required in WAC 246-803-240 (2)(a) through (c) in English or by passage of the test of English as a foreign language in WAC 246-803-240(3).

(2) An applicant for an acupuncturist or acupuncture and Eastern medicine practitioner license must submit to the department:

(a) A completed application.

(b) The application fee required under WAC 246-803-990.

(c) Original copy of school transcripts from the Eastern medicine or acupuncture program showing degree and degree date.

(d) A credentialing evaluation report from the International Consultants of Delaware (ICD).

(e) Verification of clinical training as required in WAC 246-803-230.

(f) Verification of successful completion of the examinations as required in WAC 246-803-240.

(g) Verification of all acupuncturist, acupuncture and Eastern medicine practitioner or health care licenses held, submitted directly from the licensing agency. The verification shall include the license number, issue date, expiration date and whether the acupuncturist or acupuncture and Eastern medicine practitioner has been the subject of final or pending disciplinary action.

(h) Verification of current cardiopulmonary resuscitation (CPR) certification. The training in CPR shall consist of a minimum of one quarter credit or equivalent. Red Cross certification or documentation of equivalent training may be substituted for the one quarter credit.

(i) Any additional documents requested by the secretary.

(3) The department recognizes the ICD for credential evaluations. The applicant shall request that the ICD send their evaluation directly to the department. To obtain a credentialing evaluation report, the applicant shall submit to the ICD:

(a) Transcripts;

(b) Appropriate fees; and

(c) Other requested documentation.

[Statutory Authority: RCW 18.06.160, chapter 18.06 RCW, 2019 c 308, 2020 c 229 and 2020 c 76. WSR 21-09-008, § 246-803-130, filed 4/8/21, effective 5/9/21. Statutory Authority: RCW 18.06.160. WSR 20-03-112, § 246-803-130, filed 1/15/20, effective 2/15/20. Statutory Authority: RCW 18.06.160 and 2015 c 60. WSR 16-01-158, § 246-803-130, filed 12/21/15, effective 1/21/16. Statutory Authority: Chapter 18.06 RCW and 2010 c 286. WSR 11-17-105, § 246-803-130, filed 8/22/11, effective 9/22/11.]

EDUCATION, TRAINING AND EXAMINATION—REQUIREMENTS

WAC 246-803-200 Training for acupuncture and Eastern medicine practitioners. To become an acupuncturist or acupuncture and Eastern medicine practitioner, an applicant must have training in:

(1) Basic sciences as described in WAC 246-803-210;

(2) Acupuncture and Eastern medicine sciences as described in WAC 246-803-220; and

(3) Clinical training as described in WAC 246-803-230.

[Statutory Authority: RCW 18.06.160, chapter 18.06 RCW, 2019 c 308, 2020 c 229 and 2020 c 76. WSR 21-09-008, § 246-803-200, filed 4/8/21, effective 5/9/21. Statutory Authority: Chapter 18.06 RCW and 2010 c 286. WSR 11-17-105, § 246-803-200, filed 8/22/11, effective 9/22/11.]

WAC 246-803-210 Basic sciences. To become an acupuncturist or acupuncture and Eastern medicine practitioner, an applicant must have training in basic sciences that must consist of a minimum of forty-five quarter credits or thirty semester or trimester credits. These credits shall consist of the following:

(1) Anatomy;

(2) Physiology;

(3) Microbiology;

- (4) Biochemistry;
- (5) Pathology;
- (6) Survey of western clinical sciences; and
- (7) Hygiene.

[Statutory Authority: RCW 18.06.160, chapter 18.06 RCW, 2019 c 308, 2020 c 229 and 2020 c 76. WSR 21-09-008, § 246-803-210, filed 4/8/21, effective 5/9/21. Statutory Authority: Chapter 18.06 RCW and 2010 c 286. WSR 11-17-105, § 246-803-210, filed 8/22/11, effective 9/22/11.]

WAC 246-803-220 Acupuncture and Eastern medicine sciences. To become an acupuncturist or acupuncture and Eastern medicine practitioner, an applicant must have training in acupuncture or Eastern medicine sciences consisting of a minimum of seventy-five quarter credits or fifty semester or trimester credits. These credits must include, but not be limited to, the following subjects of acupuncture/Eastern medicine:

- (1) Fundamental principles;
- (2) Diagnosis;
- (3) Pathology;
- (4) Therapeutics;
- (5) Meridians/vessels and points; and
- (6) Techniques, including electro-acupuncture.

[Statutory Authority: RCW 18.06.160, chapter 18.06 RCW, 2019 c 308, 2020 c 229 and 2020 c 76. WSR 21-09-008, § 246-803-220, filed 4/8/21, effective 5/9/21. Statutory Authority: Chapter 18.06 RCW and 2010 c 286. WSR 11-17-105, § 246-803-220, filed 8/22/11, effective 9/22/11.]

WAC 246-803-230 Clinical training. To become an acupuncturist or acupuncture and Eastern medicine practitioner, an applicant must complete a minimum of five hundred hours of supervised clinical training in acupuncture or Eastern medicine including no more than one hundred hours of observation which includes case presentation and discussion. At least four hundred hours must be patient treatment.

(1) Qualified instructors must observe and provide guidance to the student as appropriate. Instructors must be qualified to provide instruction in their areas of specialization in acupuncture or Eastern medicine as demonstrated by possession of the following:

(a) Broad and comprehensive training in acupuncture or Eastern medicine; and

(b) Two years of relevant current work experience or teaching experience in acupuncture or Eastern medicine.

(2) Qualified instructors must be available within the clinical facility to provide consultation and assistance to the student for patient treatments. Prior to initiation of each treatment, instructors must have knowledge of and approve the diagnosis and treatment plan.

(3) "Patient treatment" includes:

(a) Conducting a patient intake interview concerning the patient's past and present medical history;

(b) Performing acupuncture or Eastern medicine examination and diagnosis;

(c) Discussion between the instructor and the student concerning the proposed diagnosis and treatment plan;

(d) Applying acupuncture or Eastern medicine treatment principles and techniques; and

(e) Charting of patient conditions, evaluative discussions and findings, and concluding remarks.

[Statutory Authority:RCW 18.06.160, chapter 18.06 RCW, 2019 c 308, 2020 c 229 and 2020 c 76. WSR 21-09-008, § 246-803-230, filed 4/8/21, effective 5/9/21. Statutory Authority: Chapter 18.06 RCW and 2010 c 286. WSR 11-17-105, § 246-803-230, filed 8/22/11, effective 9/22/11.]

WAC 246-803-240 Examinations. (1) The examinations administered by the National Certification Commission for Acupuncture and Oriental Medicine (NCCAOM) are the official examinations for licensure as an acupuncturist or acupuncture and Eastern medicine practitioner.

(2) An applicant for licensure as an acupuncturist or acupuncture and Eastern medicine practitioner must pass the following examinations:

- (a) Foundations of Oriental medicine examination;
- (b) Acupuncture with point location examination;
- (c) Biomedicine examination; and
- (d) Council of Colleges of Acupuncture and Oriental Medicine (CCAOM) clean needle technique course.

(3) If the applicant takes the examinations listed in subsection (2) of this section in a language other than English, they must also take and pass the internet-based test of English as a foreign language (ibTOEFL) examination with an overall score of not less than 89. This is done by obtaining scores on the ibTOEFL of at least:

- (a) Twenty-four on the writing section;
- (b) Twenty-six on the speaking section;
- (c) Twenty-one on the reading section; and
- (d) Eighteen on the listening comprehension section.

[Statutory Authority: RCW 18.06.160, 18.06.230, chapter 18.06 RCW, 2021 c 87, and 2020 c 80. WSR 22-12-018, § 246-803-240, filed 5/23/22, effective 7/1/22. Statutory Authority: RCW 18.06.160, chapter 18.06 RCW, 2019 c 308, 2020 c 229 and 2020 c 76. WSR 21-09-008, § 246-803-240, filed 4/8/21, effective 5/9/21. Statutory Authority: Chapter 18.06 RCW and 2010 c 286. WSR 11-17-105, § 246-803-240, filed 8/22/11, effective 9/22/11.]

WAC 246-803-250 Documents in foreign language. All documents submitted to the department in a foreign language must be accompanied by an accurate translation in English. Each translated document must bear the affidavit of the translator certifying that the translator is competent in both the language of the document and the English language and that the translation is a true and complete translation of the foreign language original. Translation of any document relative to a person's application is at the expense of the applicant.

[Statutory Authority: Chapter 18.06 RCW and 2010 c 286. WSR 11-17-105, § 246-803-250, filed 8/22/11, effective 9/22/11.]

PRACTICE STANDARDS

WAC 246-803-300 Patient notification of qualifications and scope of practice. Acupuncturists or acupuncture and Eastern medicine practitioners in the state of Washington shall provide to each patient prior to or at the time of the initial patient visit the qualifications and scope of practice form. The form must include:

(1) The acupuncturist's or acupuncture and Eastern medicine practitioner's education. The degree obtained and the dates and locations of the didactic and clinical training.

(2) License information, including state license number and date of licensure.

(3) A statement that the practice of acupuncture or acupuncture and Eastern medicine in the state of Washington includes the following:

(a) Acupuncture and Eastern medicine means a health care service utilizing acupuncture and Eastern medicine therapeutic treatments, such as the practice of acupuncture techniques and herbal medicine to maintain and promote wellness, prevent, manage, and reduce pain, and treat substance use disorder;

(b) Use of presterilized, disposable needles, such as filiform needles, and other acupuncture needles, syringes, or lancets to directly and indirectly stimulate meridians and acupuncture points including ashi points, motor points, trigger points, and other nonspecific points throughout the body;

(c) Use of electrical, mechanical, or magnetic devices to stimulate meridians and acupuncture points including ashi points, motor points, trigger points, and other nonspecific points throughout the body;

(d) Intramuscular needling and dry needling of trigger points and other nonspecific points throughout the body in accordance with acupuncture and Eastern medicine training;

(e) All points and protocols for ear acupuncture including auricular acupuncture, national acupuncture detoxification association protocol, battlefield acupuncture, and the Nogier system;

(f) Use of contact needling and noninsertion tools such as teishin, enshin, or zanshin;

(g) Moxibustion;

(h) Acupressure;

(i) Cupping;

(j) Dermal friction technique;

(k) Infrared;

(l) Sonopuncture;

(m) Laserpuncture;

(n) For the purposes of this section, point injection therapy is defined as meaning the subcutaneous, intramuscular and intradermal injection of substances consistent with the practice of acupuncture or Eastern medicine to stimulate meridians, acupuncture points, ashi points, motor points, trigger points, and other nonspecific points throughout the body.

(i) Point injection therapy includes trigger points as a subset of acupuncture points and ashi points as recognized in the current practice of acupuncture and Eastern medicine.

(ii) Point injection therapy does not include injection of controlled substances contained in Scheduled I through V of the Uniform Controlled Substance Act, chapter 69.50 RCW or steroids as defined in RCW 69.41.300.

(iii) Substances that may be injected are limited to:

(A) Saline;

(B) Sterile water;

(C) Herbs specifically manufactured for injection by means of hypodermic needles;

(D) Minerals specifically manufactured for injection by means of hypodermic needles;

(E) Vitamins in liquid form specifically manufactured for injection by means of hypodermic needles;

(F) Homeopathic and nutritional substances specifically manufactured for injection by means of hypodermic needles;

(G) Local anesthetics, such as lidocaine and procaine, for reduction of pain during point injection therapy, consistent with the practice of acupuncture and Eastern medicine; and

(H) Oxygen and epinephrine for potential emergency purposes, such as an allergic or adverse reaction, for patient care and safety, and may only be administered by an acupuncturist or acupuncture and Eastern medicine practitioner using point injection therapy who has met the training and education requirements established pursuant to RCW 18.06.230.

(o) Dietary advice and health education based on acupuncture or Eastern medical theory, including the recommendation and sale of herbs, vitamins, minerals, and dietary and nutritional supplements;

(p) Breathing, relaxation, and Eastern exercise techniques;

(q) Qi gong;

(r) Eastern massage and Tui na (which is a method of Eastern bodywork); and

(s) Superficial heat and cold therapies.

(4) A statement that side effects of the treatments listed in subsection (3) of this section may include, but are not limited to, the following:

(a) Pain following treatment;

(b) Minor bruising;

(c) Infection;

(d) Needle sickness; and

(e) Broken needle.

(5) A statement that patients must inform the acupuncturist or acupuncture and Eastern medicine practitioner if they have a severe bleeding disorder or pacemaker prior to any treatment.

[Statutory Authority: RCW 18.06.160, 18.06.230, chapter 18.06 RCW, 2021 c 87, and 2020 c 80. WSR 22-12-018, § 246-803-300, filed 5/23/22, effective 7/1/22. Statutory Authority: RCW 18.06.160, chapter 18.06 RCW, 2019 c 308, 2020 c 229 and 2020 c 76. WSR 21-09-008, § 246-803-300, filed 4/8/21, effective 5/9/21. Statutory Authority: RCW 18.06.160. WSR 20-03-112, § 246-803-300, filed 1/15/20, effective 2/15/20. Statutory Authority: Chapter 18.06 RCW and 2010 c 286. WSR 11-17-105, § 246-803-300, filed 8/22/11, effective 9/22/11.]

WAC 246-803-305 Patient record content. (1) A licensed acupuncturist or acupuncture and Eastern medicine practitioner shall:

(a) Make a complete, legible, and accurate record of each patient to whom an acupuncture or Eastern medicine treatment is given. The acupuncturist or acupuncture and Eastern medicine practitioner shall ensure that a patient record is in English and includes:

- (i) Name of the patient;
- (ii) Patient history;
- (iii) Dates of treatment;
- (iv) Treatment given; and
- (v) Progress made during treatment.

(b) Maintain a patient record for six years after the last treatment of the patient.

(c) Maintain a patient record for at least six years after the patient reaches eighteen years of age.

(2) A licensed acupuncturist or acupuncture and Eastern medicine practitioner shall comply with chapter 70.02 RCW and the Health Insurance Portability and Accountability Act, 45 C.F.R. destruction and privacy regulations.

(3) For the purposes of this section "patient records" means all records maintained by a practitioner that includes all information related to the patient.

[Statutory Authority: RCW 18.06.160, chapter 18.06 RCW, 2019 c 308, 2020 c 229 and 2020 c 76. WSR 21-09-008, § 246-803-305, filed 4/8/21, effective 5/9/21. Statutory Authority: RCW 18.06.160. WSR 20-03-112, § 246-803-305, filed 1/15/20, effective 2/15/20.]

WAC 246-803-308 Patient abandonment. (1) An acupuncturist or acupuncture and Eastern medicine practitioner may accept or reject a patient, but shall respond to any reasonable request for services in the interest of public health and welfare.

(2) The attending acupuncturist or acupuncture and Eastern medicine practitioner, without reasonable cause, shall not neglect, ignore, abandon, or refuse to treat a patient. If the acupuncturist or acupuncture and Eastern medicine practitioner chooses to withdraw responsibility for a patient of record, the acupuncturist or acupuncture and Eastern medicine practitioner shall:

(a) Advise the patient in writing that treatment is being terminated and that another acupuncturist or acupuncture and Eastern medicine practitioner should be sought for future care; and

(b) Advise the patient that the acupuncturist or acupuncture and Eastern medicine practitioner shall remain reasonably available for up to fifteen calendar days from the date of such notice to address clinical concerns related to the care provided.

[Statutory Authority: RCW 18.06.160, chapter 18.06 RCW, 2019 c 308, 2020 c 229 and 2020 c 76. WSR 21-09-008, § 246-803-308, filed 4/8/21, effective 5/9/21. Statutory Authority: RCW 18.06.160. WSR 20-03-112, § 246-803-308, filed 1/15/20, effective 2/15/20.]

WAC 246-803-310 Referral to primary health care provider. (1) When an acupuncturist or acupuncture and Eastern medicine practitioner sees a patient with a potentially serious disorder, the acupuncturist or acupuncture and Eastern medicine practitioner shall immediately request a consultation or written diagnosis from a primary health care provider.

(2) Potentially serious disorders include, but are not limited to:

- (a) Cardiac conditions including uncontrolled hypertension;
- (b) Acute abdominal symptoms;
- (c) Acute undiagnosed neurological changes;
- (d) Unexplained weight loss or gain in excess of fifteen percent body weight within a three-month period;
- (e) Suspected fracture or dislocation;
- (f) Suspected systemic infection;
- (g) Any serious undiagnosed hemorrhagic disorder; and
- (h) Acute respiratory distress without previous history or diagnosis.

(3) In the event a patient with a potentially serious disorder refuses to authorize such consultation or provide a recent diagnosis from a primary health care provider, acupuncture or Eastern medicine treatments, may only continue after the patient signs a written waiver acknowledging the risks associated with the failure to pursue treatment from a primary health care provider.

(4) The written waiver must include:

(a) A statement acknowledging that failure by the patient to pursue treatment from a primary health care provider may involve risks that such a condition can worsen without further warning and even become life threatening;

(b) An explanation of an acupuncturist's or acupuncture and Eastern medicine practitioner's scope of practice, to include the services and techniques acupuncturists or acupuncture and Eastern medicine practitioners are authorized to provide; and

(c) A statement that the services and techniques that an acupuncturist or acupuncture and Eastern medicine practitioner is authorized to provide will not resolve the patient's underlying potentially serious disorder.

[Statutory Authority: RCW 18.06.160, chapter 18.06 RCW, 2019 c 308, 2020 c 229 and 2020 c 76. WSR 21-09-008, § 246-803-310, filed 4/8/21, effective 5/9/21. Statutory Authority: Chapter 18.06 RCW and 2010 c 286. WSR 11-17-105, § 246-803-310, filed 8/22/11, effective 9/22/11.]

WAC 246-803-320 Instrument sterilization procedure. (1) An acupuncturist or acupuncture and Eastern medicine practitioner shall use sterile instruments and follow proper instrument sterilization procedures and the keeping of accurate records of sterilization cycles and equipment service maintenance as described in the manufacturer's instruction manual and the 7th edition of *"Best Practices for Acupuncture Needle Safety and Related Procedures"* published by the Council of Colleges of Acupuncture and Oriental Medicine revised May 2017. This shall not apply to needles, which may not be reused or sterilized for a subsequent use on more than one patient under any circumstances.

(2) "Sterilization" means to kill all microbial life, including bacterial spores, for instruments which enter tissues. Sterilization is accomplished by subjecting clean items to steam pressure (autoclaving), ultraviolet-C, or to dry heat.

[Statutory Authority: RCW 18.06.160, chapter 18.06 RCW, 2019 c 308, 2020 c 229 and 2020 c 76. WSR 21-09-008, § 246-803-320, filed 4/8/21, effective 5/9/21. Statutory Authority: RCW 18.06.160. WSR 20-03-112, § 246-803-320, filed 1/15/20, effective 2/15/20.]

WAC 246-803-325 Preparing and maintaining a clean field. (1) A clean field is the area that has been prepared to contain the equipment necessary for acupuncture in such a way as to reduce the possible contamination of sterile needles and other clean or sterile equipment.

(2) An acupuncturist or acupuncture and Eastern medicine practitioner must prepare and maintain a clean field for each patient.

[Statutory Authority: RCW 18.06.160, chapter 18.06 RCW, 2019 c 308, 2020 c 229 and 2020 c 76. WSR 21-09-008, § 246-803-325, filed 4/8/21, effective 5/9/21. Statutory Authority: RCW 18.06.160. WSR 20-03-112, § 246-803-325, filed 1/15/20, effective 2/15/20.]

WAC 246-803-340 Mandatory reporting. All individuals credentialed under this chapter must comply with the mandatory reporting rules in chapter 246-16 WAC.

[Statutory Authority: Chapter 18.06 RCW and 2010 c 286. WSR 11-17-105, § 246-803-340, filed 8/22/11, effective 9/22/11.]

LICENSE STATUS

WAC 246-803-400 Inactive status. (1) An acupuncturist or acupuncture and Eastern medicine practitioner may obtain an inactive license by meeting the requirements of WAC 246-12-090.

(2) An inactive license must be renewed every year on the acupuncturist's or acupuncture and Eastern medicine practitioner's birthday according to WAC 246-12-100 and 246-803-990.

(3) If a license is inactive for three years or less, to return to active status an acupuncturist or acupuncture and Eastern medicine practitioner must meet the requirements of WAC 246-12-110 and 246-803-990.

(4) If a license is inactive for more than three years and the acupuncturist or acupuncture and Eastern medicine practitioner has been actively practicing in another state of the United States or its major territories, to return to active status the acupuncturist or acupuncture and Eastern medicine practitioner must:

(a) Provide certification of an active acupuncturist or acupuncture and Eastern medicine practitioner license, submitted directly from another licensing entity. The certification shall include the license number, issue date, expiration date and whether the acupuncturist or acupuncture and Eastern medicine practitioner has been the subject of final or pending disciplinary action;

(b) Provide verification of current active practice in another state of the United States or its major territories for the last three years; and

(c) Meet the requirements of WAC 246-12-110 and 246-803-990.

(5) If a license is inactive for more than three years, and the acupuncturist or acupuncture and Eastern medicine practitioner has not been actively practicing in another state of the United States or its major territories, to return to active status the acupuncturist or acupuncture and Eastern medicine practitioner must provide:

(a) A written request to change licensure status;

(b) Meet the requirements of WAC 246-12-110 and 246-803-990;

(c) Proof of successful completion of the examinations as required in WAC 246-803-240 (2) (a), (b), and (c) within the past year; and

(d) Written certification of all acupuncturist, acupuncture and Eastern medicine practitioner or health care licenses held, submitted directly from the licensing agency. The certification shall include the license number, issue date, expiration date and whether the acupuncturist or acupuncture and Eastern medicine practitioner has been the subject of final or pending disciplinary action.

[Statutory Authority: RCW 18.06.160, chapter 18.06 RCW, 2019 c 308, 2020 c 229 and 2020 c 76. WSR 21-09-008, § 246-803-400, filed 4/8/21, effective 5/9/21. Statutory Authority: Chapter 18.06 RCW and 2010 c 286. WSR 11-17-105, § 246-803-400, filed 8/22/11, effective 9/22/11.]

WAC 246-803-410 Expired license. An acupuncturist or acupuncture and Eastern medicine practitioner with an expired license may return his or her license to an active license. During the time the license is expired, an acupuncturist or acupuncture and Eastern medicine practitioner cannot practice in Washington state.

(1) If an acupuncturist's or acupuncture and Eastern medicine practitioner's license has expired for one year or less, the acupuncturist or acupuncture and Eastern medicine practitioner may return to active status by meeting the requirements of WAC 246-12-040 (3) (a) (i) through (v) and 246-803-990.

(2) If an acupuncturist's or acupuncture and Eastern medicine practitioner's license has expired for more than one year but less than three, the acupuncturist or acupuncture and Eastern medicine practitioner may return to active status by meeting the requirements of WAC 246-12-040 (3) (b) (i) through (ix) and 246-803-990.

(3) If an acupuncturist's or acupuncture and Eastern medicine practitioner's license has expired for three years or more at the time of application and they have been engaged in practice in another state or United States jurisdiction, the acupuncturist or acupuncture and Eastern medicine practitioner may return to active status by submitting proof to the department of:

(a) Verification of active practice from any other state or United States jurisdiction. For this purpose "active practice" means a minimum of five hundred sixty hours of practice in the preceding twenty-four months; and

(b) Having met the requirements of WAC 246-12-040 (3) (c) (i) through (xi) and 246-803-990.

(4) If an acupuncturist's or acupuncture and Eastern medicine practitioner's license has expired for three years or more at the time of application and they have not been engaged in practice in another state or United States jurisdiction, the acupuncturist or acupuncture and Eastern medicine practitioner may return to active status by submitting proof to the department of:

(a) Having met the requirements of subsection (2) of this section; and

(b) In addition to these requirements, the practitioner has the choice of:

(i) Completion of extended course work preapproved by the department; or

(ii) Successfully retaking and passing the examinations as required in WAC 246-803-240.

[Statutory Authority: RCW 18.06.160, chapter 18.06 RCW, 2019 c 308, 2020 c 229 and 2020 c 76. WSR 21-09-008, § 246-803-410, filed 4/8/21, effective 5/9/21. Statutory Authority: RCW 18.06.160. WSR 20-03-112, § 246-803-410, filed 1/15/20, effective 2/15/20.]

WAC 246-803-420 Continuing education requirements. The goal of continuing education is to encourage the lifetime development of the licensed acupuncturist or acupuncture and Eastern medicine practitioner, and enhance the professional skills and judgment needed to protect the health and safety of all patients.

(1) A licensed acupuncturist or acupuncture and Eastern medicine practitioner shall complete a minimum of twenty hours of continuing education every two years.

(a) The two-year continuing education reporting period for an acupuncturist or acupuncture and Eastern medicine practitioner licensed in Washington before April 30, 2021, begins May 1, 2021, and verification of completion of continuing education hours will be due on the acupuncturist's or acupuncture and Eastern medicine practitioner's annual license renewal date in 2023, and every two years thereafter. The two-year continuing education reporting period for an acupuncturist or acupuncture and Eastern medicine practitioner initially licensed in Washington on or after May 1, 2021, begins upon date of licensure.

(b) A licensed acupuncturist or acupuncture and Eastern medicine practitioner shall attest to the completion of twenty hours of continuing education every two years as a part of their license renewal requirement.

(c) The department of health (department) may randomly audit up to twenty-five percent of licensed acupuncturists or acupuncture and Eastern medicine practitioners every two years for compliance after the license is renewed as allowed by chapter 246-12 WAC, Part 7.

(d) A licensed acupuncturist or acupuncture and Eastern medicine practitioner shall comply with the requirements of chapter 246-12 WAC, Part 7.

(e) The department will not authorize or approve specific continuing education courses.

(2) A licensed acupuncturist or acupuncture and Eastern medicine practitioner may alternatively meet the requirement of twenty hours of continuing education every two years if they hold a current diplomate status from the National Certification Commission for Acupuncture and Oriental Medicine (NCCAOM). The required documentation is proof of diplomate status during the two-year period.

(3) A licensed acupuncturist or acupuncture and Eastern medicine practitioner shall maintain a current cardiopulmonary resuscitation (CPR) and basic first aid certification. A licensed acupuncturist or acupuncture and Eastern medicine practitioner may count the actual hours earned per renewal cycle for this requirement.

(4) Continuing education must contribute to the professional knowledge and development of the licensed acupuncturist or acupuncture and Eastern medicine practitioner or enhance services provided to patients or public health and safety. Continuing education must be completed in one or more of the following categories:

(a) Educational courses as listed in RCW 18.06.050 relating to the practice of health care, western clinical sciences, acupuncture, or acupuncture and Eastern medicine;

- (b) Emergency management or disaster preparedness;
- (c) Infection control and federal/state safety standards;
- (d) Ethics;
- (e) Patient care related education including patient communication, risk management, methods of health delivery, cultural diversity, and suicide prevention education;
- (f) Washington state acupuncture and Eastern medicine law;
- (g) Patient communication;
- (h) Practice management and billing practices. A licensed acupuncturist or acupuncture and Eastern medicine practitioner may not count more than ten hours every two years in this category.

(5) Continuing education in subject categories identified in subsection (4) of this section may be completed using any of the following activities or methods:

(a) Attendance at local, state, national, or international education courses, live interactive webinars, postdoctoral education, and study clubs. A study club is defined as two or more practitioners meeting to discuss topics relative to their health care practice;

(b) Self-study by various means, relevant to acupuncture or acupuncture and Eastern medicine, without an instructor physically present.

(i) Self-study can be continuing education provided online or through the mail provided by a continuing education provider.

(A) A licensee must have documentation of course completion; or

(B) Provide a two-page synopsis of what was learned written by the licensed acupuncturist or acupuncture and Eastern medicine practitioner is required. Two hours of continuing education for each synopsis will be granted. A licensed acupuncturist or acupuncture and Eastern medicine practitioner may earn up to a maximum of six hours every two years for this activity.

(ii) Self-study can be reading a book that contributes to the professional knowledge and development of the licensed acupuncturist or acupuncture and Eastern medicine practitioner, or enhance services provided to patients. A two-page synopsis of what was learned written by the licensed acupuncturist or acupuncture and Eastern medicine practitioner is required. Two hours of continuing education for each book and synopsis will be granted. A licensed acupuncturist or acupuncture and Eastern medicine practitioner may earn up to a maximum of six hours every two years for this activity.

(c) Teaching, presenting, or lecturing in a course, only if the presentation or lecture is created or authored by the acupuncturist or acupuncture and Eastern medicine practitioner claiming the continuing education hours, may earn up to a maximum of ten hours every two years;

(d) Panelist at a conference or seminar for health care providers. Up to a maximum of two hours may be applied per topic in the two-year period;

(e) Primary author of published multimedia material including, but not limited to: CD, audio, or video. Up to a maximum of five hours may be applied per publication in the two-year period;

(f) Participating member of a clinical research study team. Up to a maximum of ten hours may be applied in the two-year period;

(g) Direct clinical supervision of acupuncturist or acupuncture and Eastern medicine students in a school verified externship, internship, or preceptorship, may earn up to a maximum of ten hours every two years;

(h) Acupuncturist or acupuncture and Eastern medicine licensure examinations or serving on an acupuncturist or acupuncture and Eastern medicine professional board, committee or association may earn up to a maximum of ten hours every two years;

(i) Publishing a paper in a peer review journal up to a maximum of five hours the year the paper is published; and

(j) Provision of clinical acupuncturist or acupuncture and Eastern medicine patient care services in a documented volunteer capacity, may earn up to a maximum of ten hours every two years.

(6) The department may not accept any claim of credit for a continuing education course that does not meet the requirements of subsection (4) or (5) of this section.

(7) Proof of continuing education is a certificate of completion, letter, or other documentation verifying or confirming attendance or completion of continuing education hours. Documentation must be from the organization that provided the activity, except in subsection (5)(b)(i) and (ii), and (c) of this section, and must contain at least the following:

(a) Date of attendance or completion;

(b) Name of licensed acupuncturist or acupuncture and Eastern medicine practitioner;

(c) Hours earned; and

(d) Course title or subject.

(8) Upon showing good cause by the licensed acupuncturist or acupuncture and Eastern medicine practitioner in writing, the department may waive the acupuncturist or acupuncture and Eastern medicine practitioner from any, all, or part of the continuing education requirements in this chapter or may grant additional time for the acupuncturist or acupuncture and Eastern medicine practitioner to complete the requirements. Good cause includes, but is not limited to:

(a) Illness;

(b) Medical necessity or family emergency;

(c) Hardship to practice; or

(d) Other extenuating circumstances.

[Statutory Authority: RCW 18.06.160, chapter 18.06 RCW, 2019 c 308, 2020 c 229 and 2020 c 76. WSR 21-09-008, § 246-803-420, filed 4/8/21, effective 5/9/21.]

WAC 246-803-425 Health equity continuing education training requirements. (1) A licensed acupuncturist or acupuncture and Eastern medicine practitioner, must complete two hours of health equity continuing education training every four years as described in WAC 246-12-800 through 246-12-830.

(2) The two hours of health equity continuing education a licensed acupuncturist or acupuncture and Eastern medicine practitioner completes counts toward meeting the applicable continuing education requirements under WAC 246-803-420.

[Statutory Authority: RCW 18.06.160, 43.70.040, 43.70.613, and 18.130.040. WSR 23-17-085, § 246-803-425, filed 8/15/23, effective 9/15/23.]

WAC 246-803-430 Suicide prevention education. Effective June 11, 2020, a licensed acupuncturist or acupuncture and Eastern medicine

practitioner must complete a department-approved one-time training that is at least six hours in length for suicide assessment that includes assessment, treatment, and management.

(1) This training must be completed by the end of the first full continuing education reporting period after August 1, 2021, or during the first full continuing education reporting period after initial licensure, whichever is later.

(2) Training approved by the department for this requirement must be on the department's model list as authorized in chapter 246-12 WAC, Part 14.

(3) Training completed between June 11, 2020, and August 1, 2021, that meets the requirements of this section, is accepted as meeting the one-time training requirement of this section.

(4) The hours spent completing the training in suicide assessment under this section count toward meeting applicable continuing education requirements for acupuncturist or acupuncture and Eastern medicine practitioner license renewal.

[Statutory Authority: RCW 18.06.160, chapter 18.06 RCW, 2019 c 308, 2020 c 229 and 2020 c 76. WSR 21-09-008, § 246-803-430, filed 4/8/21, effective 5/9/21.]

ACUPUNCTURE AND EASTERN MEDICINE PROGRAM APPROVAL

WAC 246-803-500 Application for approval of a nonaccredited school, college or program. (1) Clinical and didactic training of a school, college or program may be approved separately.

(2) The department may consider for approval didactic training which meet the requirements outlined in WAC 246-803-210 and 246-803-220. Clinical training must meet the requirements outlined in WAC 246-803-230.

(3) Application for approval of a school, college or program is made by the authorized representative of the school, college or program.

(4) The authorized representative may request approval of the school, college or program as of the date of the application or retroactively to a specified date.

(5) The application for approval of a school, college or program shall include documentation required by the department pertaining to:

- (a) Educational administration;
- (b) Qualifications of instructors;
- (c) Didactic and/or clinical facilities; and
- (d) Content of offered training.

(6) An application fee as required under WAC 246-803-990 must accompany the completed application.

(7) The department will evaluate the application and, if necessary, conduct a site inspection of the school, college or program prior to approval by the department.

(8) After completing the evaluation of the application, the department may grant or deny approval, or grant approval conditioned upon appropriate modification to the application.

(9) If the department denies an application or grants conditional approval, the authorized representative of the applicant school, college or program may request a review within ninety days of the depart-

ment's adverse action. After ninety days the contesting party may only obtain review by submitting a new application.

(10) The authorized representative shall notify the department of significant changes with respect to educational administration, instructor qualifications, facilities, or content of training.

(11) The department may inspect an approved school, college or program at reasonable intervals for compliance. Approval may be withdrawn if the department finds failure to comply with the requirements of law, administrative rules, or representations in the application.

(12) The authorized representative must immediately correct deficiencies which resulted in withdrawal of the department's approval.

[Statutory Authority: Chapter 18.06 RCW and 2010 c 286. WSR 11-17-105, § 246-803-500, filed 8/22/11, effective 9/22/11.]

FEES

WAC 246-803-990 Acupuncturist or acupuncture and Eastern medicine practitioner fees and renewal cycle. (1) Licenses must be renewed every year on the practitioner's birthday as provided in chapter 246-12 WAC.

(2) The following nonrefundable fees will be charged:

Title of Fee	Fee
License application	\$60.00
License renewal	60.00
Inactive license renewal	50.00
Late renewal penalty	50.00
Expired license reissuance	50.00
Expired inactive license reissuance	50.00
Duplicate license	15.00
Certification of license	25.00
Acupuncture or Eastern medicine training program application	500.00
UW library access fee	9.00

[Statutory Authority: RCW 43.70.110, 43.70.250, and 43.70.280. WSR 23-07-057, § 246-803-990, filed 3/9/23, effective 6/1/23. Statutory Authority: RCW 18.06.160, chapter 18.06 RCW, 2019 c 308, 2020 c 229 and 2020 c 76. WSR 21-09-008, § 246-803-990, filed 4/8/21, effective 5/9/21. Statutory Authority: Chapter 18.06 RCW and 2010 c 286. WSR 11-17-105, § 246-803-990, filed 8/22/11, effective 9/22/11.]