

1 [Resolution supporting the medical practice of acupuncture and Oriental Medicine Study  
2 programs.]

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4 **Resolution supporting the medical practice of acupuncture and the National Oriental**  
5 **Medicine Accreditation Agency and the creation of Doctor of Oriental Medicine Study**  
6 **programs in the California State university System and University of California medical**  
7 **System.**

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9 WHEREAS, Californians may seek the services directly from an acupuncturist and are  
10 defined in the California Acupuncture Act as a Primary Care Profession; and,

11 WHEREAS, The California Office of Administrative Law<sup>1</sup> formally approved a set of  
12 medical treatment guidelines (§ 9792.20. Medical Treatment Utilization Schedule) for  
13 California’s Worker’s Compensation system, that direct acupuncturists; and,

14 WHEREAS, The legislature also recognizes acupuncture as a comprehensive healing  
15 system and sees the act as “a framework for the practice of the art and science of oriental  
16 medicine through acupuncture.” ; and,

17 WHEREAS, Consistent with recent legislation that raised the minimum number of  
18 curricular hours for approved programs from 2348 to 3000 for all students entering such  
19 programs on or after January 1, 2005 (AB 1943 (Chu, 2002)); and,

20 WHEREAS, the National Oriental Medicine Accreditation Agency (NOMAA) a 501(c) 3  
21 non-profit organization) has developed and established programmatic criteria for the first  
22 Professional Doctor of Oriental Medicine (O.M.D.) Degree in the U.S; and,

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24 <sup>1</sup>The Office of Administrative Law (OAL) ensures that agency regulations are clear, necessary, legally valid, and available to the public. OAL  
25 is responsible for reviewing administrative regulations proposed by over 200 state agencies for compliance with the standards set forth in  
California’s Administrative Procedure Act (APA), for transmitting these regulations to the Secretary of State and for publishing regulations in  
the California Code of Regulations.

1           WHEREAS, the National Oriental Medicine Accreditation Agency NOMAA’s curriculum  
2 is compliant with the requirements of the National Institutes of Health (NIH,) the Academy of  
3 Science, the Institute of Medicine, and standards are in congruence with the NIH Consensus  
4 Report concerning both education and research; and,

5           WHEREAS, the development of Evidence- Based guidelines by researchers from  
6 NOMAA and CAOMA have been accepted by the National Guidelines Clearinghouse and  
7 modeled after the newly approved Medical Treatment Utilization Schedule; and,

8           WHEREAS, The NOMAA program offers peer reviewed and authenticated evidence  
9 and physiologically based training that relies on modern translations of the ancient texts,  
10 consistent with the historic foundations and present understanding of Chinese/oriental  
11 medicine; including the *Huangdi Neijing* (ca. 600 - 300 BCE) including both the *Lingshu* and  
12 *Suwen* volumes; and,

13           WHEREAS, NOMAA established the first national standard for entry into the  
14 profession that exceeds all state mandated educational requirements, and addresses future  
15 educational needs of the profession; and,

16           WHEREAS, NOMAA’s curriculum standards are the only oriental medicine degree  
17 program that complies with the requirements of the California Acupuncture Board and the  
18 recommendations of the National Institutes of Health (NIH) Consensus Report and the  
19 Academy of Science Institute of Medicine 2005 report on alternative Medicine concerning  
20 both education and research; and,

21           WHEREAS, A letter sent by the Chinese Minister of Health praised the efforts of  
22 NOMAA in the field of Chinese/Asian medicine. The letter was mailed November 15, 2006 to  
23 U.S. Congressman Ed Royce, (R) 40<sup>th</sup> District of California (Orange County); and,

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1           WHEREAS, NOMAA's staff was invited to Beijing for a meeting with the Chinese  
2 Minister of Health, and his staff after meeting at a related conference in Toronto, Canada,  
3 September, 2006; and,

4           WHEREAS, Populations throughout the U.S, and more specifically within California,  
5 multicultural medical needs are being met by the increased use of Oriental medicine  
6 treatments and procedures; and,

7           WHEREAS, At the same time the use of this medicine is growing, many within the  
8 Asian culture are denied their cultural medicine because it is not fully integrated with our U.S.  
9 System; and,

10          WHEREAS, Medicine that works is not western medicine, nor eastern, nor integrated,  
11 nor complimentary, if it works it is simply medicine and needs to be readily available for all  
12 patients to use; and,

13          WHEREAS, NOMAA has the support of U.S. Congressman Adam A Schiff (D, CA –  
14 29<sup>th</sup> District and U.S. Congressman Edward R. Royce (R, CA 40<sup>th</sup> District). Both  
15 Congressmen Schiff and Royce are also members of the Congressional International  
16 Relations Committee; and,

17          WHEREAS, NOMAA has the support of the Asian Pacific Islander Caucus, and in  
18 particular: California State Senator Leland Yee, District 8, California Assembly members  
19 Fiona Ma, Majority Whip, (D, 12<sup>th</sup> District) Mike Eng, (D, 49<sup>th</sup> District), District,) and Board of  
20 Equalization Judy Chu (former Assemblywoman D, 49<sup>th</sup> District); now, therefore, be it

21          RESOLVED, That the Board of Supervisors hereby supports the National Oriental  
22 Medicine Accreditation Agency in its efforts to promote a Doctor of Oriental Medicine study  
23 program (O.M.D.), which is physiologically based; and, be it

24          FURTHER RESOLVED, That the Board of Supervisors hereby supports the  
25 establishment of a Doctor of Oriental Medicine study program (O.M.D.) within the California

1 State University System and the University of California Medical System, particularly at the  
2 California State University, San Francisco. In turn, such an action would bring research  
3 grants to California; and be it finally

4 RESOLVED, That local, state and federal funding be sought to establish and sustain  
5 such research in the City and County of San Francisco.

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