

TRADITIONAL CHINESE MEDICINE PRACTITIONERS BOARD

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Singapore Acupuncturists Registration Examination (SARE)

新加坡针灸师注册资格考试

Examination Syllabus and Information for Candidates 考试大纲 及 应试须知

2023

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INTRODUCTION

The Singapore Acupuncturists Registration Examination (SARE) is opened to Singapore registered western medical practitioners who have completed acupuncture training courses approved by the Traditional Chinese Medicine Practitioners Board in Singapore.

Candidates taking SARE are expected to have basic knowledge of traditional Chinese medicine fundamentals, traditional Chinese medicine diagnostics and knowledge and techniques of acupuncture and moxibustion.

SARE comprises a written Case Analysis and Channel Route paper, 2 multiple-choice written papers (one on TCM Basic Theories and TCM Diagnostics and one on Acupuncture and Moxibustion) and a clinical assessment (a face-to-face appraisal on acupuncture/manipulation techniques, moxibustion, cupping and clinical acupuncture).

BASIC THEORIES OF TRADITIONAL CHINESE MEDICINE

Unit 1 Basic Concepts of Traditional Chinese Medicine (TCM)

- 1 Concept of Holism
- 2 Syndrome Differentiation and Treatment

Unit 2 The Yin-Yang Theory

- 1 Implication of Yin-Yang and the categorization of things according to the nature of Yin Yang
- 2 Interaction between Yin and Yang
- 3 Applications of the Yin-Yang Theory in TCM

Unit 3 The Five Element Theory

- 1 The implication of five elements and the categorization of the things according to the theory of the five elements
- 2 Interactions among the five elements
- 3 Application of the Five Elements Theory in TCM

Unit 4 The Five Zang- Viscera

- 1 Basic concepts and physiological functions of the five *Zang* viscera (i.e., the heart, the lung, the spleen, the liver and the kidney)
- 2 Relationships among the five Zang- viscera
 - a) Relationship between the heart and the lung
 - b) Relationship between the heart and the spleen
 - c) Relationship between the heart and the liver
 - d) Relationship between the heart and the kidney
 - e) Relationship between the lung and the spleen
 - f) Relationship between the lung and the liver
 - g) Relationship between the lung and the kidney
 - h) Relationship between the liver and the spleen
 - i) Relationship between the liver and the kidney
 - j) Relationship between the spleen and the kidney
- 3 Relationships between the five Zang- viscera and the body, the sensory organs and the orifices

Unit 5 The Six Fu- Organs

- 1 Concept and physiological functions of six *Fu* Organs, i.e., the gallbladder, the stomach, the small intestine, the large intestine, the bladder and the triple energizer)
- 2 Relationships among six Fu- Organs
- 3 Relationships among the five Zang- viscera and six Fu- Organs
 - a) Relationship between the heart and the small intestine
 - b) Relationship between the lung and the large intestine
 - c) Relationship between the spleen and the stomach
 - d) Relationship between the liver and the gallbladder
 - e) Relationship between the kidney and the bladder

Unit 6 The Extraordinary Fu- Organs

1 The characteristics and physiological functions of the extraordinary *Fu*-organs (including brain and uterus)

Unit 7 Qi, Blood and Body Fluid

- 1 Basic concept, production, physiological functions, and moving styles of Qi
- 2 Classification of qi and its production, distribution and functional characteristics
- 3 Basic concept, production, physiological functions, and circulation of Blood
- 4 Basic concept, production, physiological functions, transportation and metabolism of Body Fluid
- 5 The relationships among Qi, Blood and Body Fluid

Unit 8 Channels and Collaterals

- 1 The content of the theory of channels and collaterals
 - a) The twelve regular channels
 (The names, running course, interconnection, Flow Order, Distribution, and External-Internal Relationships of the twelve regular channels)
 - b) The eight extraordinary channels
 - c) The twelve divergent channels, the fifteen divergent collaterals, the twelve muscle (tendons) regions, the twelve cutaneous (skin) regions,
- 2 The basic functions of the channels and collaterals
- 3 The clinical application of the theory of channels and collaterals

Unit 9 Etiology of Disease

- 1 Six Climatic Pathogens
- 2 The Seven Emotions
- 3 Improper Diet
- 4 Maladjustment of Work and Leisure
- 5 Diseases caused by Phlegm and Stagnant Fluid, and Blood Stasis

Unit 10 Pathogenesis

- 1 Mechanism of occurrence of diseases
 - a) Occurrence of disease and the relationship between pathogens and the healthy qi (antipathogenic factor)
 - b) Constitution and the disease
- 2 Mechanism of pathological changes
 - a) Predomination and decline of pathogenic factor and healthy qi
 - b) Imbalance between yin and yang
 - c) Disorder of qi, blood and body fluid

Unit 11 Prevention and Therapeutic Principles

- 1 Principles of prevention
- 2 Therapeutic principles

DIAGNOSTICS OF TRADITIONAL CHINESE MEDICINE

Unit 1 Inspections

- 1 Inspection of the whole body
 - a) Inspection of spirit
 - b) Inspection of complexion
 - c) Inspection of body
 - d) Inspection of postures
- 2 Inspection of local regions
 - a) Inspection of head and hair
 - b) Inspection of five sense organs
 - c) Inspection of neck
 - d) Inspection of skin
 - e) Inspection of infantile index finger veins
 - f) Inspection of excreta
- 3 Inspection of tongue

Unit 2 Auscultation and Olfaction

- 1 Listening to sound
 - a) Speech
 - b) Respiration
 - c) Cough
 - d) Hiccup and belching
- 2 Olfaction
 - a) Smelling body odour

Unit 3 History Taking

- 1 Inquiry of general information
- 2 Inquiry of chief complaint and history of present illness
- 3 Inquiry of present symptoms
- 4 Inquiry of anamnesis
- 5 Inquiry of family history

Unit 4 Pulse Taking

- 1 Region and method of taking pulse
- 2 Normal pulse
- 3 Morbid pulses

Floating pulse, deep (sunken) pulse, slow pulse, rapid pulse/ fast pulse, swift pulse, weak pulse, slippery pulse, soggy pulse, unsmooth (rough/uneven) pulse, full pulse, thready pulse (thin pulse), soft pulse, feeble pulse, taut (wiry) pulse, tense (tight) pulse, knotted pulse, intermittent pulse.

Unit 5 Palpation

- 1 Methods of palpation
- 2 Palpation of the abdomen and chest
- 3 Palpation of all four limbs
- 4 Palpation of acupoints

Unit 6 Syndrome Differentiation with Eight Principles

- 1 Exterior and Interior Syndrome Differentiation
- 2 Cold and Heat Syndrome Differentiation
- 3 Deficiency and Excess Syndrome Differentiation
- 4 Yin and Yang Syndrome Differentiation
- 5 Relationship among the Eight-Principle Syndrome Differentiation

Unit 7 Syndrome Differentiation of Qi, Blood and Body Fluid

- 1 Qi Diseases Syndrome Differentiation
- 2 Blood Diseases Syndrome Differentiation
- 3 Simultaneous Disorder of Qi and Blood Syndrome Differentiation
- 4 Body Fluid Disorder Syndrome Differentiation

Unit 8 Syndrome Differentiation of Viscera

- 1 Syndrome differentiation of heart disease
- 2 Syndrome differentiation of lung disease
- 3 Syndrome differentiation of spleen disease
- 4 Syndrome differentiation of liver disease
- 5 Syndrome differentiation of kidney disease
- 6 Syndrome differentiation of stomach disease
- 7 Syndrome differentiation of gallbladder disease
- 8 Syndrome differentiation of small intestine disease
- 9 Syndrome differentiation of large intestine disease
- 10 Syndrome differentiation of bladder disease
- 11 Syndrome differentiation of various viscera disease

ACUPUNCTURE AND MOXIBUSTION

Unit 1 Composition of the Channels System

- 1 The twelve regular channels
- 2 The eight extraordinary channels
- 3 The fifteen divergent collaterals
- 4 The twelve divergent channels
- 5 The twelve muscle (tendons) regions
- 6 The twelve cutaneous (skin) regions

Unit 2 Physiological Functions and Clinical Applications of Channels

- 1 Physiological functions of channels
- 2 Clinical application of channels

Unit 3 Acupoints

- 1 The essential concepts of acupoints
- 2 Classification of acupoints
- 3 Nomenclature of acupoints
- 4 Properties of acupoints
- 5 Concept and Classification of Specific Acupoints
 - a) Five- Shu acupoints
 - b) Yuan- Source and Luo- Connecting acupoints
 - c) Back- Shu and Front- Mu acupoints
 - d) Eight Influential acupoints
 - e) Xi- Cleft acupoints
 - f) Lower He- Sea acupoints
 - g) Eight Convergent acupoints and Crossing acupoints
- 6 Methods of locating acupoints

Unit 4 Twelve Regular Channels, Conception Vessel and Governor Vessel

- 1 General description
 - a) Flow distributions of each channel
 - b) Disease treatment outline of each channel
- 2 Location and main disease treatment of commonly used acupoints

Lung Channel of Hand-Taiyin 手太阴肺经

Zhongfu (LU 1) 中府 Kongzui (LU 6) 孔最 Taiyuan (LU 9) 太渊 Shaoshang (LU 11) 少商 Chize (LU 5) 尺泽 Lieque (LU 7) 列缺 Yuji (LU 10) 鱼际

Large Intestine Channel of Hand-Yangming 手阳明大肠经

Shangyang (LI 1) 商阳
Hegu (LI 4) 合谷
Pianli (LI 6) 偏历
Quchi (LI 11) 曲池
Jianyu (LI 15) 肩髃
Yingxiang (LI 20) 迎香
Sanjian (LI 3) 三间
Yangxi (LI 5) 阳溪
Shousanli (LI 10) 手三里
Binao (LI 14) 臂臑
Futu (LI 18) 扶突

Stomach Channel of Foot-Yangming 足阳明胃经

Chengqi (ST 1) 承泣 Sibai (ST 2) 四白 Dicang (ST 4) 地仓 Jiache (ST 6) 颊车 Touwei (ST 8) 头维 Xiaguan (ST 7) 下关 Liangmen (ST 21) 梁门 Tianshu (ST 25) 天枢 Guilai (ST 29) 归来 Futu (ST 32) 伏兔 Liangqiu (ST 34) 梁丘 Zusanli (ST 36) 足三里 Shangjuxu (ST 37) 上巨虚 Xiajuxu (ST 39) 下巨虚 Fenglong (ST 40) 丰隆 Jiexi (ST 41) 解溪 Neiting (ST 44) 内庭 Lidui (ST 45) 历兑

Spleen Channel of Foot-Taiyin 足太阴脾经

Yinbai (SP 1) 隐白Taibai (SP 3) 太白Gongsun (SP 4) 公孙Sanyinjiao (SP 6) 三阴交Diji (SP 8) 地机Yinlingquan (SP 9) 阴陵泉Xuehai (SP 10) 血海Daheng (SP 15) 大横Dabao (SP 21) 大包

Heart Channel of Hand-Shaoyin 手少阴心经

Jiquan (HT 1) 极泉Shaohai (HT 3) 少海Tongli (HT 5) 通里Yinxi (HT 6) 阴郄Shenmen (HT 7) 神门Shaochong (HT 9) 少冲

Small Intestine Channel of Hand Taiyang 手太阳小肠经

Shaoze (SI 1) 少泽 Houxi (SI 3) 后溪 Wangu (SI 4) 腕骨 Zhizheng (SI 7) 支正 Tianzong (SI 11) 天宗 Quanliao (SI 18) 颧髎 Tinggong (SI 19) 听宫

Bladder Channel of Foot-Taiyang 足太阳膀胱经

Jingming (BL 1) 睛明 Zanzhu (BL 2) 攢竹
Tianzhu (BL 10) 天柱 Fengmen (BL 12) 风门
Feishu (BL 13) 肺俞 Xinshu (BL 15) 心俞
Geshu (BL 17) 膈俞 Ganshu (BL 18) 肝俞
Danshu (BL 19) 胆俞 Pishu (BL 20) 脾俞
Weishu (BL 21) 胃俞 Shenshu (BL 23) 肾俞

Dachangshu (BL 25) 大肠俞 Pangguangshu (BL 28) 膀胱俞

Ciliao (BL 32) 次髎 Weiyang (BL 39) 委阳 Weizhong (BL 40) 委中 Gaohuang (BL 43) 膏肓 Zhishi (BL 52) 志室 Zhibian (BL 54) 秩边 Chengshan (BL 57) 承山 Feiyang (BL 58) 飞扬 Kunlun (BL 60) 昆仑 Shenmai (BL 62) 申脉 Shugu (BL 65) 東骨 Zhiyin (BL 67) 至阴

Kidney Channel of Foot-Shaoyin 足少阴肾经

Yongquan (KI 1) 涌泉 Rangu (KI 2) 然谷

Taixi (KI 3) 太溪 Zhaohai (KI 6) 照海 Shufu (KI 27) 俞府

Dazhong (KI 4) 大钟 Fuliu (KI 7) 复溜

Pericardium Channel of Hand-Jueyin 手厥阴心包经

Tianchi (PC 1) 天池 Quze (PC 3) 曲泽 Jianshi (PC 5) 间使 Neiguan (PC 6) 内关 Daling (PC 7) 大陵 Laogong (PC 8) 劳宫

Zhongchong (PC 9) 中冲

Triple Energizer Channel of Hand-Shaoyang 手少阳三焦经

Guanchong (TE 1) 关冲 Zhongzhu (TE 3) 中渚 Waiguan (TE 5) 外关 Yangchi (TE 4) 阳池 Zhigou (TE 6) 支沟 Jianliao (TE 14) 肩髎 Yifeng (TE 17) 翳风 Ermen (TE 21) 耳门

Sizhukong (TE 23) 丝竹空

Gallbladder Channel of Foot-Shaoyang 足少阳胆经

Tongziliao (GB 1) 瞳子髎 Tinghui (GB 2) 听会 Yangbai (GB 14) 阳白 Toulinqi (GB 15) 头临泣 Fengchi (GB 20) 风池 Jianjing (GB 21) 肩井 Riyue (GB 24) 日月 Daimai (GB 26) 带脉 Huantiao (GB 30) 环跳 Fengshi (GB 31) 风市 Yanglingquan (GB 34) 阳陵泉 Guangming (GB 37) 光明 Xuanzhong (GB 39) 悬钟 Qiuxu (GB 40) 丘墟

Zulinqi (GB 41) 足临泣 Zuqiaoyin (GB 44) 足窍阴

Liver Channel of Foot-Jueyin 足厥阴肝经

Dadun (LR 1) 大敦 Xingjian (LR 2) 行间 Taichong (LR 3) 太冲 Ququan (LR 8) 曲泉 Zhangmen (LR 13) 章门 Qimen (LR 14) 期门

Governor Vessel 督脉

Changqiang (GV 1) 长强

Mingmen (GV 4) 命门 Dazhui (GV 14) 大椎 Fengfu (GV 16) 风府 Shangxing (GV 23) 上星 Yaoyangguan (GV 3) 腰阳关 Zhiyang (GV 9) 至阳

Yamen (GV 15) 哑门 Baihui (GV 20) 百会

Suliao (GV 25) 素髎

Shuigou (GV 26) 水沟

Conception Vessel 任脉

Zhongji (CV 3) 中极 Qihai (CV 6) 气海 Xiawan (CV 10) 下脘 Danzhong (CV 17) 膻中 Lianquan (CV 23) 廉泉 Guanyuan (CV 4) 关元 Shenque (CV 8) 神阙 Zhongwan (CV 12) 中脘 Tiantu (CV 22) 天突 Chengjiang (CV 24) 承浆

Unit 5 Commonly used Extraordinary Points

Location and main disease treatment of the following Extra Points:

Sishengcong (EX-HN 1) 四神聪 Taiyang (EX-HN 5) 太阳 Jiaji (EX-B 2) 夹脊 Shixuan (EX-UE 11) 十宣 Dannang (EX-LE 6) 胆囊 Yintang (EX-HN 3) 印堂 Dingchuan (EX-B1) 定喘 Sifeng (EX-UE 10) 四缝 Neixiyan (EX-LE 4) 内膝眼 Lanwei (EX-LE 7) 阑尾

Unit 6 Acupuncture Needling Techniques

- 1 Preparations before acupuncture treatment
 - a) Preparation of instruments
 - b) Posture of the patient
 - c) Sterilization
- 2 Manipulation
 - a) Insertion
 - b) Angle and depth of insertion
 - c) Manipulation and arrival of qi
 - d) Reinforcing (Tonify) and reducing (Disperse) methods
 - e) Retention and withdrawal of the needle
- 3 Possible accidents, Preventions and Management
 - a) Fainting
 - b) Stuck needle
 - c) Bent needle
 - d) Broken needle
 - e) Haematoma
- 4 Precautions (Points to note) in acupuncture treatment

Unit 7 Moxibustion

- 1 Classification of moxibustion
- 2 Moxibustion with other materials
- 3 Precautions (Points to note)
- 4 Contraindications
- 5 Management after moxibustion

Unit 8 Cupping

- 1 Types of Cups
- 2 Types of Cup-sucking Methods
- 3 Therapeutic Cupping Methods
- 4 Effects & Indications for Cupping
- 5 Removal of Cups & Precaution (Points to note)
- 6 Contraindications

Unit 9 Acupuncture and Moxibustion Treatment

- 1 Principles of acupuncture and moxibustion
- 2 Acupuncture and moxibustion prescription

Unit 10 Disease of Internal Medicine

Diagnosis and treatment of the following common diseases:

Stroke

Dizziness (Vertigo)

Headache

Facial Pain

Facial Paralysis

Lumbago

Bi Syndrome

Wei-Syndrome (Flaccidity Syndrome)

Insomnia

Palpitation

Epilepsy

Common cold

Cough

Xiao Chuan Syndrome (Asthma)

Xiao Chu Vomiting

Epigastric pain

Diarrhoea

Constipation

Impotence

Spermatorrhoea

Urinary Retention

Unit 11 Disease of Gynaecology and Paediatrics

Diagnosis and treatment of the following common diseases:

Dysmenorrhoea Amenorrhoea Morning Sickness Insufficient lactation

Unit 12 External diseases and Disease of the Five Sense Organs

Diagnosis and treatment of the following common diseases:

Urticaria
Herpes zoster
Sprain and soft tissue Injury
(Cervical Spondylopathy, Elbow Strain, Periarthritis of Shoulder)
Tinnitus / Deafness
Nasosinusitis
Toothache

CLINICAL ASSESSMENTS ON ACUPUNCTURE TECHNIQUES

Basic TCM Clinical Techniques (Oral Appraisal, if applicable)

- 1 Ability in TCM clinical diagnosis
 - a) The four TCM diagnostic methods
 - b) Special examination
 - c) Pathogenesis
 - d) Diagnosis (syndrome differentiation) in TCM
- 2 Ability in syndrome differentiation
 - a) Syndrome differentiation based on TCM theories and four diagnostic methods
 - b) Correct principles of treatment
 - c) Correct selection of acupoints
 - d) Correct explanation on treatment prescribed
- 3 Medical Records
 - a) Medical records shall include particulars of patients and shall be clear, accurate and legible and shall be made at the time a consultation takes place.
 - b) All clinical details, investigation results, discussion on treatment options, informed consents and treatment by herbal medicines or TCM procedures and prescriptions (including acupoints prescribed and used in treatment) should be documented.

Clinical Syndrome Differentiation Ability and Manipulation Techniques

- 1 Clinical Application of acupoints
- 2 Clinical manipulation techniques:
 - a) Mastery of disinfection skills
 - b) Mastery of needling techniques
 - c) Mastery of acupuncture manipulation techniques
 - d) Mastery of moxibustion techniques
 - e) Mastery of cupping techniques
 - f) Mastery of prevention and management of accidents in acupuncture treatment
 - g) Mastery of precautions, indications and contraindications in acupuncture, moxibustion and cupping treatment

INFORMATION FOR CANDIDATES

1 Format of SARE

A: Written Papers (Part 1) B: Clinical Appraisal (Part 2)

2 Examination Duration:

A Written Papers (Part 1):

TCM Basic Theories and TCM Diagnostics 150 minutes
Acupuncture & Moxibustion 150 minutes
Case Analysis and Channel Route 120 minutes

*Candidates have to pass all written papers in order to take Clinical Appraisal

B Clinical Appraisal (Part 2): Acupuncture Oral Appraisal

20 minutes

3 Examination Schedule

Part 1

Case Analysis and Channel Route TCM Basic Theories and TCM Diagnostics Acupuncture & Moxibustion

Part 2

Acupuncture Oral Appraisal

4 Contents of SARE:

A Written Papers:

1. TCM Basic Theories and TCM Diagnostics

150 Multiple-Choice Questions (Type A and Type B) comprising:

- a) TCM Basic Theories
- b) TCM Diagnosis
- 2. Acupuncture and Moxibustion

150 Multiple Choice Questions (Type A and Type B) comprising:

- a) Channels and Acupoints
- b) Acupuncture Needling, Moxibustion and Cupping Techniques

3. Case Analysis and Channel Route

a) Case Analysis

2 questions

Candidates are required to write all information obtained from the 4 analytical skills, TCM diagnosis, syndrome differentiation, pathogenesis, principle of treatment, principle channels, acupoints prescriptions (main and supplementary), insertion and manipulation techniques, course of treatment (including needle retention time, treatment interval time and duration of treatment), prescription explanation, and TCM medical advice accordingly.

b) Channel Route Description

1 question

Candidates are required to describe the running route of one channel (anyone from the 12 regular channels, the governor vessel or the conception vessel, inclusive of their branches).

B Clinical Appraisals:

Acupuncture Oral Appraisals

- 1. Procedure
 - a) Candidate picks a question envelope at random.
 - b) Candidate has 20 minutes to review the questions and prepare the answers.
 - c) Upon entering the examination hall, candidate answers the questions as according to the picked questions (with demonstration if required) and questions from the examiners.

2. Contents

a) Acupoint Locating

Each question paper has 10 acupoints for locating. The candidate is required to verbally describe the location of each acupoint, verbally describe and demonstrate the method used to locate the required acupoint and locate it by pointing on the live model.

b) Manipulation Techniques

Each question paper has 5 questions, contents as follows:

 3 questions on acupuncture manipulation technique (including sterilization methods and techniques, choice of needles, insertion techniques, manipulation techniques), moxibustion techniques, cupping techniques and other issues of concern.

The candidate is required to describe the required manipulation techniques and demonstrate the required manipulation techniques on cushions provided and answer questions from the examiners.

ii. 2 questions on clinical acupuncture (including 1 question of applications of acupoints and 1 question of management of emergencies, or indications of acupuncture; moxibustion or cupping; or points to note or contraindications during the process of acupuncture, moxibustion or cupping).

The candidate is required to describe the type of management required in the question or to state the contra-indications required in the question.

3. Duration

20 minutes

(Acupoint locating to be tested first, followed by acupuncture manipulation techniques / clinical acupuncture)

5 SARE Syllabus

The following are the standard reference textbook series for SARE 2023:

Chinese-English Bilingual Textbooks for International Students of Chinese TCM Institutions

1 Fundamental Theory of Traditional Chinese Medicine

2nd Edition (2007)

Compiler-in-Chief: Chai Kefu Translator-in-Chief: Zhang Qingrong

2 Diagnostics of Traditional Chinese Medicine

2nd Edition (2007)

Compiler-in-Chief: Wang Tianfang Translator-in-Chief: Fang Tingyu

3 Acupuncture & Moxibustion

2nd Edition (2007)

Compiler-in-Chief: Shen Xueyong, Wang Hua

Translator-in-Chief: Zhao Baixiao

Publisher: People's Medical Publishing House

Sample questions for written papers

Multiple-choice questions (Type A and Type B)

A Type A Question

Explanation on Answering Type A Questions

Each question is provided with 5 answers A, B, C, D and E for selection. Select the most appropriate answer for each question and **shade** the circle bearing the selected alphabet on the Answer Sheet.

Example 1:

Which one of the follo	owing exogenous	pathogens is	characterized by	heaviness :	and turbidity?
WITHOUT OTHER OF LITE TOTAL	JWILLY CAUGGILLOUS	patriogeria ia	characterized by		aria tarbiaity

- A Cold
- B Dryness
- C Damp
- D Summer Heat
- E Fire (C)

Example 2:

Which of the following acupoints is the Yuan-Source acupoint?

- A Taixi (KI 3)
- B Shaofu (HT 8)
- C Neiting (ST 44)
- D Shugu (BL 65)
- E Houxi (SI 3) (A)

B Type B Question

Explanation on Answering Type B Questions

Two questions are provided with 5 answers A, B, C, D, and E for selection, with the questions placed below the answers. Select the correct answer for each question and **shade** the circle bearing the selected alphabet on the Answer Sheet. Each answer can be selected once or more than once, or not selected at all.

Example 3:

- A Wind-syndrome caused by hyperactivity of the liver-yang,
- B Occurrence of the wind-syndrome in case extreme heat.
- C Endogenous wind due to yin deficiency.
- D Endogenous wind due to blood deficiency.
- E Wind-cold of the common cold.
- (3a) The pathogenesis for neck rigidity and muscle spasm is: (B)
- (3b) The pathogenesis for tidal fever, night sweating and limbs squirm is: (C)

Example 4:

- A Fever.
- B Fullness in the epigastrium.
- C Diarrhoea due to pervasive flow of qi.
- D Cough and asthma due to pathogenic cold and heat.
- E Heaviness of the body and painful joints.
- (4a) The indications of the *Shu* Stream acupoint is: (E)
- (4b) The indications of the He- Sea acupoint is: (C)

Sample Question on Case Analysis

You are required to write all information obtained from the 4 analytical skills, TCM diagnosis, syndrome differentiation, pathogenesis, principle of treatment, principle channels, acupoints prescriptions (main and supplementary), insertion and manipulation techniques, course of treatment (including needle retention time, treatment interval time and duration of treatment), prescription explanation, and TCM medical advice accordingly.

Case 1

Patient:

Tan X X, Married, 34 years old, Manager. Non-smoker, social drinker, no drug allergy.

Chief Complaint:

Abrupt onset and severe pain in the left upper abdominal region for the past 2 days.

Present Medical History and Clinical Findings:

Had sudden onset of left upper abdominal pain, especially after meals. Recently had some family problem. Not able to sleep well with dreaminess. Guarding noted with distending pain and very frequent radiating to the hypochondriac region. Belching noted before and after meals and acid regurgitation especially after a full meal. Fullness symptom can be relieved with sighing. Currently easy agitated. Not seen by any western doctors yet and no previous related investigation done.

Past Medical History:

No past medical history.

Looking, hearing and smelling, asking, and palpation:

Slightly reddish tongue with thick white coating and wiry pulse. Guarding noted.

SARE 2023 Examination Syllabus

Model Answer

Asking	Main Complain	Abrupt onset and severe pain in the left upper abdominal region for the past 2 days.			
	Present Medical History and Clinical Findings	Sudden onset of left upper abdominal pain, especially after meals. Belching noted before and after meals and acid regurgitation especially after a full meal. Fullness symptom can be relieved with sighing. Recently had some family problem. Guarding noted with distending pain. Very frequent radiating to the hypochondriac region. Currently easy agitated. Not able to sleep well with dreaminess. Not seen by any western doctors yet and no previous related investigation done.			
	Past Medical History	No past medical history.			
Looking		Slightly reddish tongue with thick white coating.			
Hearing/Smelling		Nil			
Palpation		Wiry pulse. Guarding noted.			
Diagnosis	Name	Epigastric pain.			
	Syndrome differentiation	Attack of Stomach by Liver Qi Type.			
	Pathogenesis	 Emotional (anger) insults causes stagnation of liver qi resulting in disharmony between the liver and the stomach. Pensiveness causes injury to the spleen resulting in impairment in transportation and transformation function giving rise to epigastric pain. 			
Principle of treatn	nent	Regulate qi and stop pain.			
Principle channels		 Stomach channel. Conception Vessel. Pericardium channel. 			
Prescription	Acupoint	 Main: ST 36 Zusanli 足三里 CV 12 Zhongwan 中脘 PC 6 Neiguan 内关. Supplementary: LR 3 Taichong 太冲 			

Prescription	Insertion and Manipulation	 Insertion: Filiform needles 1 cun to 1.5 cun. Perpendicular insertion technique. Manipulation: Disperse
	Course of treatment	Retention of needles x 30 minutes. 2 sessions per week x 10 sessions.
Prescription Exp	lanation	 ST 36 Zusanli 足三里: He-Sea, Lower He-Sea acupoint of the ST channel where qi of the channel congregates, chosen to regulate qi and stop the pain. CV 12 Zhongwan 中脘: Channel acupoint of the CV, Front-Mu point of stomach and Fu-Influential acupoint, chosen to regulate qi and stop the pain. PC 6 Neiguan 内关. Luo-connecting acupoint of the PC channel and one of the Eight Convergent acupoints, chosen specifically to treat gastric pain. LR 3 Taichong 太冲. Shu-Stream and Yuan-Source acupoint of the LR channel where qi of the organ originates passes and stays, chosen to regular liver qi.
TCM medical Ad	vice	 Good diet habit, avoiding raw, cold and greasy, pungent and spicy food. Stay away from allergic sources Stop smoking and drinking. Suitable exercise.

Sample Question on Channel Route

You are required to describe the running route of the Large Intestine Channel of Hand Yangming, inclusive of its branch(es).

Describe the channel flow of the Large Intestine Channel of Hand Yangming.

Model Answer

There are 20 acupoints in the surface pathway of the large Intestine channel.

The surface pathway:

Begins at the tip of the index finger, then runs along radial side of the index finger, passes through the interspace between the first and second metacarpal bones, through the anatomical snuffbox, into the dorsal aspect of the forearm, leading to the lateral aspect of the elbow and the lateral aspect of the upper arm and reached the shoulder region. From this point, the channel moves behind the acromion towards the seventh cervical vertebra (GV 14 Dazhui 大椎).

The inner pathway:

From the seventh cervical vertebra (GV 14 Dazhui 大椎), the channel runs over and into the SC fossa and enters the ribs where it connects with the lung. After traversing the diaphragm, the channel reaches its organ, the large intestine.

The branch:

The surface pathway of the channel continues to ascend laterally from the SC fossa, past the neck to the corners of the mouth, crossing the philtrum and onto the opposite naso-labial groove (LI 20 Yingxiang 迎香).

Sample Questions for Acupuncture Oral Appraisal

1 Acupoints Locating

You are required to verbally describe the location of each acupoint, verbally describe and demonstrate the method used to locate the required acupoint and locate it by pointing on the body of the live model.

- (1) LU 1 Zhongfu 中府
- (2) LI 20 Yingxiang 迎香
- (3) GB37 Guangming 光明
- (4) CV 23 Lianquan 廉泉
- (5) GV 14 Dazhui 大椎
- (6) SI 3 Houxi 后溪
- (7) EX-B 2 Jiaji 夹脊
- (8) PC 5 Jianshi 间使
- (9) BL 40 Weizhong 委中
- (10) SP 6 Sanyinjiao 三阴交

2 Manipulation Techniques

Please answer and demonstrate the techniques to the questions below, and answer any relevant questions from the examiners:

- (1) Describe and demonstrate the needling technique for acupoint TE 6 Zhigou 支沟 (including sterilization methods and techniques, choice of needle, insertion technique and manipulation technique as required). Note: Candidate to demonstrate real life hand sterilization method recommended by WHO- refer to diagram below.
- (2) Describe and demonstrate the technique of moxibustion using ginger.
- (3) Describe and demonstrate the technique of retain cupping (inclusive of cup removal), and discuss the points to note when performing cupping treatment.

3 Clinical Acupuncture

- (1) What is the clinical application of the acupoints BL 57 Chengshan 承山 and ST 8 Touwei 头 维.
- (2) Describe the management of bent needle.

HOW TO HANDRUB?



Source: World Health Organization

Special Note:
Traditional Chinese Medicine Practitioners Board may make changes to the examination format and other arrangements if the COVID-19 pandemic worsens, and candidates will be notified separately.
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