Typical History and Physical Examination of an Acupuncture Patient

In an acupuncture evaluation, the initial encounter with the patient is similar to that of a conventional allopathic medical interview and examination. The patient is encouraged to speak candidly and thoroughly about the presenting problems and their background. In addition to a conventional assessment and differential diagnosis, the practitioner explores the characteristics and behaviors of the problems in an effort to link them with the gross or subtle spheres of influence of one or several of the internal organs. In the case of musculoskeletal pain problems, the location of the pain is identified neuroanatomically and according to the acupuncture channel in whose territory it lies. The goal of the interview is to identify the organs and energy circulation divisions involved in the patient's disorder, whether the association be with the subtle symptoms linked to the traditional sphere of influence of the organs, with the trajectory of a meridian through a painful region, with a dense organ lesion, or with a combination of these factors.

The patient's past medical history, childhood illnesses, family history, and review of systems are elicited during the interview, and all information is tagged with the organ or meridian under whose supervision it falls. During this period the acupuncturist poses questions of particular importance: possible cyclicity in the appearance of the symptoms, seasonal exacerbations, general seasonal preferences or dislikes, positive or negative flavor affinities and color affinities, response of symptoms to external climatic environments, and the lesion's response to pressure, movement, heat, or cold.

A standard physical examination appropriate for the patient and the problem is undertaken, with several additional acupuncture inspections included. The musculoskeletal evaluation includes identification of painful muscle knots and trigger points as well as subcutaneous nodules and bands overlying contracted muscles. Specific reflex points on the front and back of the trunk (mu points and shu points) correspond to the organs associated with them. If any mu or shu points are sensitive to palpation during the physical examination, those findings also are recorded.

In acupuncture, several diagnostic somatotopic systems that microcosmically reflect the internal organs are routinely used to evaluate the balance of relative strengths and weaknesses within the organs. Those most commonly employed are the reflex systems of the tongue, the radial pulse, and the external ear, inspections of which are undertaken as part of the routine physical evaluation.

The tongue reflects the basic condition and underlying problem of the patient at the time of examination by way of its color, body, coating, and surface irregularities. Changes in tongue qualities are easily noted from week to week and often day to day. The tongue serves as an indicator of change in the patients as they evolve through illness and respond to medical interventions.

The diagnostic microsystem of the radial pulse provides another means of evaluating the patient's overall condition, and of comparing the relative strengths of energetic activity in the organs and their meridians. The pulse changes from minute to minute and therefore can be used to verify whether an input has had its intended effect before one continues or concludes the treatment. The pulses also serve as a subjective measurement from visit to visit, revealing the stability of the changes made through the acupuncture treatments.

Evaluation of the external ear confirms findings from the physical exam or other reflex systems, and may indicate new directions for exploration during the interview and examination. The diagnostic examination includes visual inspection, palpation with a probe, or scanning with a battery-powered electrical resistance detector. The external ear also can be used as a treatment system in isolation or as an adjunct to body acupuncture.
points. For more information on acupuncture visit our site at www.DoctorGendron.com.