

Traditional, Complementary and Alternative Medicine Scope of Practice

HEALTH REGULATION DEPARTMENT

DUBAI HEALTH AUTHORITY

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1. Introduction

Dubai Health Authority (DHA) is responsible for regulating Traditional, Complementary and Alternative Medicine (TCAM) practice in the Emirate of Dubai, United Arab Emirates. Scope of Practice (SOP) refers to the activities that TCAM personnel are educated, authorized and competent to perform as well as their decision making capacity. Such activities are established through the legislated definition of licensed TCAM practice, complemented by standards, limits, conditions and education and influenced by setting, environment and health needs of the population, and the evolving situation in health care practice.

Traditional, Complementary and Alternative Medicine (TCAM) practice include the following practice – in which SOP in outlines in this guidelines:

- 1.1. Ayurveda
- 1.2. Chiropractic Medicine
- 1.3. Homeopathy
- 1.4. Naturopathic Medicine
- 1.5. Osteopathic Medicine
- 1.6. Therapeutic Massage
- 1.7. Traditional Chinese Medicine
- 1.8. Unani Medicine

The Scope of Practice for the licensed TCAM practitioner is endorsed by Health Regulation Department (HRD) and should be read in conjunction with DHA Code of Conduct and Ethics.

HRD upholds that no TCAM practitioner should be directed or compelled to undertake any practice that falls short of DHA standards or code of conduct requirements

2. General Scope of Practice for TCAM Practitioners

- 2.1. Health Authority Dubai (DHA) permits Traditional, Complementary and Alternative Medicine (TCAM) practitioners to act as a portal of entry and provide health care services limited to their area of training and expertise.
- 2.2. TCAM practitioners need to recognize that they are holding themselves out to practice within a system of law and medicine which will review the standard of care that has been taken in relation to a patient.
- 2.3. TCAM practitioners shall comply at all times with the requirements of Code of Practice for TCAM practitioners. Any TCAM practitioner who fails to meet the

- requirements of the code of practice shall be held in breach of the code of ethics and shall be subjected to disciplinary measures on the grounds of professional misconduct.
- 2.4. TCAM practitioners should ensure that their practice and procedures are well defined and transparent, they are operated in a way that is fair and hygienic and that all efforts to ensure standards of good medical practice are involved.
 - 2.5. TCAM practitioners should be aware of extend and limits of their specialty. They should essentially know which conditions they will be unable to treat successfully, and be able to identify and refer patients to medically qualified physicians and specialists when necessary. A patient showing signs and symptoms of an underlying pathological condition should be advised to seek a medical diagnosis.
 - 2.6. The practitioner should assist the patients in weighing the possible benefits and risks of other types of treatment, helping them to consider conventional diagnostic procedures; routine screening tests etc, acknowledging the usefulness of such procedures at appropriate times, even for those who may wish to avoid conventional treatment.
 - 2.7. The TCAM practitioners may make a medical diagnosis and/or diagnosis according to the science and philosophy of their field of training/ specialty. However when discovering dysfunctions, they can also make mention of any believed disorder and advice the patient to see the medical doctor for further advice and/or treatment outside the scope of his practice.
 - 2.8. Render assistance to patients in emergency situations, to the greatest extent permitted by training and circumstances.
 - 2.9. TCAM Practitioners can only prescribe pharmaceutical medicines and products as per their own specialty. They can also prescribe 'over the counter' products that are registered with the Ministry of Health.
 - 2.10. When a remedy is prescribed, it is not enough to say that the remedy is traditional and considered not harmful. It is the duty of the practitioner to ensure that the remedy is in fact, not harmful or potentially harmful.
 - 2.11. The patient has the right to know and the practitioner is obliged to offer, the name or names of the prescribed remedy or remedies unless the patient agrees otherwise. Clear instructions must be made for each prescription made. They should not use secret remedies.
 - 2.12. The Practitioner should not alter a medical doctor's prescription to the patient. When a patient's health improves as a result of complementary treatment, the practitioner should not reduce the dosage or stop their prescribed medication. He should be aware that the responsibility for adjusting or withdrawing prescribed medication lies with the patient and the prescriber of that medication.
 - 2.13. The TCAM practitioners are not allowed to treat patients with acute or critical conditions who need immediate emergency medical care. They should not perform any surgical procedure or any inoculation or injections as well as blood withdrawal

from patients (Except for cupping and ozone therapies under special permissions). They are also forbidden from practicing midwifery.

- 2.14. Claims, whether explicit or implied, orally or in writing implying cure of any named disease must be avoided.
- 2.15. The TCAM practitioners are not allowed to treat communicable diseases.
- 2.16. TCAM practitioners can offer hope to patients, both by attempting to influence the underlying disease and, often more importantly, by addressing emotional states, energy levels, coping styles, and other aspects that contribute to quality of life. This is particularly important for patients with chronic diseases and no prospect of cure from conventional medicine.
- 2.17. TCAM practitioners must always balance their claims carefully while treating patients. They should consider the realistic chances of improvement and foresee the dangers of creating false hope and further disappointment.
- 2.18. TCAM Practitioners are not allowed to sell or dispense any prescribed or advised products or preparations from his own practice clinic unless he is permitted by the Dubai Health Authority to do so ("dispensing practitioners.")
- 2.19. TCAM practitioner should only use the professional title granted to him by the DHA Medical licensing committee.
- 2.20. The TCAM practitioner will not draw up or sign any certificates or documents that should be statutorily filled up and signed by a registered medical doctor.
- 2.21. TCAM practitioners should be aware of those diseases which are notifiable under the law and should take appropriate actions in this regard.
- 2.22. TCAM practitioners must avoid recording on film, video or through digital techniques, any material or imagery concerning a patient which might be regarded as explicit, indecent or pornographic. They may use film, tape recording or digital imagery of material concerning a patient only with the patient's clear, informed, written consent to the precise use of the material.
- 2.23. TCAM practitioner must act in the patient's best interest when making referrals and when providing or arranging treatment or care. You must not ask or accept any inducement, gift or hospitality which may effect or be seen to affect the way you prescribe for, treat or refer patients.
- 2.24. TCAM practitioners intending to undertake research must be familiar with and abide by current research ethics requirements, research governance and statutory obligations regarding research.
- 2.25. Patients who complain about the care or treatment they have received have the right to expect a prompt and appropriate response. You have the professional responsibility to ensure that they have clear information about how and where to express any concern they may have.

3. Ayurveda Scope of Practice

- 3.1. “Ayurveda” is a system of primary health care that originated in India at least several thousand years ago for the prevention, diagnosis, and treatment of human health conditions and disease; the promotion and/or restoration of health; and the support and stimulation of a patient’s inherent self-healing processes through patient education and the use of Ayurveda therapies and therapeutic substances.
- 3.2. The central principal of Ayurvedic medicine is that health is present when the three fundamental doshas called Vata, Pitta and Kapha are in a balance. Vata is the air principle and is linked to the function of the nervous system Pitta is the fire principle and is linked to digestion, and metabolism via the venous system. Kapha is the water principle and is related to mucous, lubrication and the carrier of nutrients via the arterial system. Patients are commonly of a predominant dosha or constitution, but all doshas have the basic elements within them. Ayurvedic therapies include herbs, nutrition, panchakarma cleansing, massage, and therapeutic Yoga.
- 3.3. The Practice of Ayurveda shall not include surgical procedures or use of prescription medications. The Practice of Ayurveda may include, activities that involve:
 - 3.4.1. Physical examination and request laboratory examinations consistent with Ayurveda education and training, for diagnostic purposes, including, but not limited to, clinical laboratory tests, and physiological functional testing.
 - 3.4.2. Request diagnostic imaging studies consistent with their Ayurveda training.
- 3.4. A Licensed Ayurveda Professional may administer, order, and prescribe or perform the following:
 - 3.4.1. Therapeutic yoga exercises, pranayama exercises, and meditation.
 - 3.4.2. Dietary and nutritional counselling and education regarding physical, emotional and spiritual balance as it relates or Ayurveda.
 - 3.4.3. The prescription of Ayurvedic herbal medicines (single or in combination as tinctures, granules or raw herbs) as long as it is consistent with TCAM facility guidelines.
 - 3.4.4. Musculoskeletal manipulation and massage consistent with Ayurveda training.
- 3.5. The Practice of Ayurveda does not include assistance rendered in emergency situations by the Licensee.

4. General Requirements for all Licensed Ayurveda Professionals

- 4.1. Patient safety and Evidence-Based Care in the Practice of Ayurveda shall be ensured by the licensed professional rendering the services.
- 4.2. Licensed Ayurveda Professionals shall not be permitted to expand the scope of their Professional Practice where they do not have the requisite training or experience to pursue such therapeutic approaches.

- 4.3. A Licensee who holds a Ayurveda License must adhere to the following principles and comply with the following obligations in their practice of Ayurveda:
 - 3.4.1. The Licensee shall have general competence in patient oriented skills, integrating examination and diagnosis with sensitivity to patient needs and culture. They must be knowledgeable in the basic scientific approach to common illnesses and the serious or life threatening common diseases and refer when appropriate.
 - 3.4.2. The decision to employ Ayurveda and its effectiveness in a given case are governed by knowledge of the individual patient in accordance with Ayurveda principles, and with careful observance of the following specific procedures:
 - 4.3.2.1. Individualization of the medical history and physical examination of the patient must be obtained.
 - 4.3.2.2. Employment of diagnostic procedures, supported by laboratory studies, when appropriate as outlined above.
 - 4.3.2.3. Evaluation of the sensitivity of patient to medical treatment and the probable reaction and response of the patient to administration of the treatment chosen.
- 4.4. The Licensed Ayurveda Professionals is obligated to refer to a general medical physician or specialists when there is any doubt about the patient's diagnosis or response to therapy. A referral must not be withheld or discouraged when the patient asks for a second opinion.
- 4.5. The Licensed Ayurveda Professionals bears the responsibility of maintaining a comprehensive record about their patient, including pursuit of diagnostic tests and consultations in a timely fashion and collaborating with other medical professionals.
- 4.6. In addition to satisfying the above requirements a Licensed Ayurveda Professionals:
 - 4.6.1. Must fulfil the Continuous Professional Development (CPD) requirements for licensure, the standards of Professional Practice and behavior expected of all Licensees.
 - 4.6.2. May administer care in the office or the patient's home.

5. Chiropractic Medicine Scope of Practice

- 5.1. 'Chiropractic medicine' is a system of primary health care concerned with the diagnosis, treatment and prevention of disorders of the neuro-musculoskeletal system and the effects of these disorders on general health. There is an emphasis on manual techniques, including joint adjustment and/or manipulation, with a particular focus on the subluxation. The relationship between structure, especially the spine and musculoskeletal system, and function, especially as coordinated by the nervous system, is central to chiropractic and its approach to the restoration and preservation of health.
- 5.2. The Practice of Chiropractic Medicine shall not include surgical procedures or the treatment of infectious diseases.
- 5.3. The Practice of Chiropractic Medicine may include, activities that involve:
 - 5.3.1. Physical examination and ordering laboratory examinations consistent with Chiropractic education and training, for diagnostic purposes, including, but not limited to, clinical laboratory tests, and physiological functional tests.
 - 5.3.2. Treatment designed to prevent or correct neurological, skeletal, or soft tissue dysfunction by employing snail and other articular adjustments and manipulations.
- 5.4. All diagnostic tests not consistent with naturopathic medical education and training must be referred for performance and interpretation to an appropriately licensed health care professional.
- 5.5. Hot or cold hydrotherapy, Chiropractic Manipulation, trigger point therapy, electro-therapy, and therapeutic exercise.
- 5.6. Nutritional counseling, extracts of food, nutraceuticals, vitamins, amino acids, minerals, enzymes, botanicals and their extracts, botanical medicines, dietary supplements and nonprescription drugs.
- 5.7. Devices including therapeutic devices and durable medical equipment within the scope of training.
- 5.8. Health education and health counseling.
- 5.9. Radiological testing must be performed by licensed Radiologist.
- 5.10. The Practice of Chiropractic Medicine does not include assistance rendered in emergency situations by the Licensee.

6. General Requirements for all Licensed Chiropractors

- 6.1. Patient safety and Evidence-Based Care in the Practice of Chiropractic Medicine shall be ensured by the licensed professional rendering the services.

- 6.2. Licensed Chiropractors shall not be permitted to expand the scope of their Professional Practice where they do not have the requisite training or experience to pursue such therapeutic approaches.
- 6.3. A Licensee who holds a Chiropractic License must adhere to the following principles and comply with the following obligations in his Practice of Chiropractic Medicine. These are in addition to such other requirements as are established under these Rules and the General Licensing Rules and pursuant to conditions that the DHA health regulation may attach to such Licensee's License:
 - 6.3.1. The Licensee shall have general competence in patient oriented skills, integrating examination and diagnosis with sensitivity to patient needs and culture. They must be knowledgeable in the basic scientific approach to common illnesses and the serious or life threatening common diseases and refer when appropriate.
 - 6.3.2. The decision to employ Chiropractic and its effectiveness in a given case are governed by knowledge of the individual patient in accordance with Chiropractic Principles, and with careful observance of the following specific procedures:
 - 6.3.2.1. Individualization of the medical history and physical examination of the patient must be obtained.
 - 6.3.2.2. Employment of diagnostic procedures when appropriate as outlined above.
 - 6.3.2.3. Evaluate the sensitivity of patient to medical treatment and their potential reaction and response to administration of Chiropractic treatment with a focus on potential reactions to Chiropractic manipulation.
 - 6.3.2.4. The Licensed Chiropractor is obligated to refer to a general medical physician or specialists when there is any doubt about the patient's diagnosis or response to therapy. A referral must not be withheld or discouraged when the patient asks for a second opinion.
 - 6.3.3. The Licensed Chiropractor bears the responsibility of maintaining a comprehensive record about their patient, including pursuit of diagnostic tests and consultations in a timely fashion and collaborating with other medical professionals.
- 6.4. In addition to satisfying the above requirements of a licensed Chiropractor:
 - 6.3.1. Must fulfil the Continuous Professional Development requirements for licensure, the standards of Professional Practice and behavior expected of all Licensees.
 - 6.3.2. May administer care in the office or the patient's home.

7. Homeopathy Scope of Practice

- 7.1. “Homeopathy” A therapy based on the theory of treating likes with likes, which basic principles are: law of similarity, direction of cure, principle of single remedy, the theory of minimum diluted dose and the therapy of chronic diseases. Homeopathic remedies use highly diluted substances that if given in higher doses to a healthy person would produce the symptoms that the dilutions are being given to treat. In assessing the patient homeopaths often take into account a range of physical, emotional, and life style factors which contribute to the diagnosis. Rather than fighting the disease directly, medicines are intended to stimulate the body to fight the disease.
- 7.2. The Practice of Homeopathy shall include activities that involve:
 - 7.2.1. Engaging in the examination, diagnosis or treatment of a symptoms or human disease.
 - 7.2.2. Offering or attempting to prescribe or order any homeopathic medicine for the use of any other person, except as otherwise authorized by law.
- 7.3. The Practice of Homeopathy does not include assistance rendered in emergency situations by the Licensee.

8. General Requirements for all Licensed Homeopath

- 8.1. Patient Safety and Evidence-Based Care in the Practice of Homeopathy shall be ensured by the licensed professional rendering the services.
- 8.2. Licensed Homeopaths shall not be permitted to expand the scope of their Professional Practice where they do not have the requisite training or experience to pursue such therapeutic approaches.
- 8.3. Licensed Homeopaths who also have an active physician license may use sterile homeopathic medicinal products for injections.
- 8.4. Licensed Homeopaths must adhere to the following principles and comply with the following obligations in his Practice of Homeopathy. These are in addition to such other requirements as are established under these Rules and the General Licensing Rules and pursuant to conditions that the DHA health regulation may attach to such Licensee’s License:
 - 8.4.1. The Licensee shall have general competence in patient oriented skills, integrating examination and diagnosis with sensitivity to patient needs and culture. They must be knowledgeable in the basic scientific approach to common illnesses and the serious or life threatening common diseases and refer when appropriate.
- 8.5. The decision to employ Homeopathy and its effectiveness in a given case are governed by knowledge of the individual patient in accordance with Homeopathic Principles, and with careful observance of the following specific procedures:

- 8.5.1. Individualization of the total symptom complex of the patient must be obtained by a detailed history when appropriate.
- 8.5.2. Employment of diagnostic procedures, supported by laboratory studies, when appropriate.
- 8.5.3. Evaluation of the sensitivity of patient to medical treatment and the probable reaction and response of the patient to administration of homeopathic medicinal products.
- 8.5.4. Administration of one or more single or complex homeopathic medicinal product when possible, in the dose that will evoke the desired response in the patient.
- 8.5.5. The Licensed Homeopaths must remember that they are treating a patient who has a disorder rather than just prescribing for a disease entity.
- 8.6. The Licensed Homeopath is obligated to refer to a general practitioner or specialists when there is any doubt about the patient's diagnosis or response to therapy. A referral must not be withheld or discouraged when the patient asks for a second opinion.
- 8.7. Licensed Homeopath bears the responsibility of maintaining a comprehensive record about their patient, including pursuit of diagnostic tests and consultations in a timely fashion and collaborating with other medical professionals.
- 8.8. In addition to satisfying the above requirements of a Licensed Homeopath:
 - 8.8.1. Must fulfil the Continuous Professional Development requirements for licensure, the standards of Professional Practice and behavior expected of all Licensees.
 - 8.8.2. May administer care in the office or the patient's home.

9. Naturopathic Medicine Scope of Practice

- 9.1. 'Naturopathic medicine' is a system of primary health care for the prevention, diagnosis, and treatment of human health conditions and disease; the promotion or restoration of health; and the support and stimulation of a patient's inherent self-healing processes through patient education and the use of naturopathic therapies and therapeutic substances. The Practice of Naturopathic Medicine shall not include surgical procedures, use of prescription medications, and the treatment of infectious diseases.
- 9.2. The Practice of Naturopathic Medicine may include activities that involve:
 - 9.2.1. Physical and laboratory examinations consistent with naturopathic education and training, for diagnostic purposes, including, but not limited to, clinical laboratory tests, and physiological functional testing.
 - 9.2.2. Ordering diagnostic imaging studies consistent with naturopathic training. All diagnostic tests not consistent with naturopathic medical education and training must be referred for performance and interpretation to an appropriately licensed health care professional.

- 9.3. A Licensed Naturopath may administer, order, and prescribe or perform the following:
- 9.3.1. Recommendation of food, extracts of food, nutraceuticals, vitamins, amino acids, minerals, enzymes, botanicals and their extracts, botanical medicines, Naturopathic medicines, dietary supplements and nonprescription drugs.
 - 9.3.2. Hot or cold hydrotherapy; naturopathic physical medicine; electromagnetic energy; colon hydrotherapy; and therapeutic exercise.
 - 9.3.3. Devices, including, but not limited to, therapeutic devices and durable medical equipment within the scope of training.
 - 9.3.4. Health education and health counseling.
 - 9.3.5. Musculoskeletal manipulation consistent with naturopathic education and training.
- 9.4. The Practice of Naturopathic Medicine does not include assistance rendered in emergency situations by the Licensee.

10. General Requirements for all Licensed Naturopaths

- 10.1. Patient Safety and Evidence-Based Care in the Practice of Naturopathic Medicine shall be ensured by the licensed professional rendering the services.
- 10.2. Licensed Naturopaths shall not be permitted to expand the scope of their Professional Practice where they do not have the requisite training or experience to pursue such therapeutic approaches.
- 10.3. A Licensee who holds a Naturopathic License must adhere to the following principles and comply with the following obligations in his Practice of Naturopathic Medicine. These are in addition to such other requirements as are established under these Rules and the General Licensing Rules and pursuant to conditions that the DHA health regulation may attach to such Licensee's License:
- 10.3.1. The Licensee shall have general competence in patient oriented skills, integrating examination and diagnosis with sensitivity to patient needs and culture. They must be knowledgeable in the basic scientific approach to common illnesses and the serious or life threatening common diseases and refer when appropriate.
 - 10.3.2. The decision to employ Naturopathy and its effectiveness in a given case are governed by knowledge of the individual patient in accordance with Naturopathic Principles, and with careful observance of the following specific procedures:
 - 12.4.2.1. Individualization of the medical history and physical examination of the patient must be obtained.
 - 12.4.2.2. Employment of diagnostic procedures, supported by laboratory studies, when appropriate as outlined above.

12.4.2.3. Evaluation of the sensitivity of patient to medical treatment and the probable reaction and response of the patient to administration of naturopathic treatment.

- 10.4. The Licensed Naturopath is obligated to refer to a general medical physician or specialists when there is any doubt about the patient's diagnosis or response to therapy. A referral must not be withheld or discouraged when the patient asks for a second opinion.
- 10.5. The Licensed Naturopath bears the responsibility of maintaining a comprehensive record about their patient, including pursuit of diagnostic tests and consultations in a timely fashion and collaborating with other medical professionals.
- 10.6. In addition to satisfying the above requirements, a Licensed Naturopath:
 - 10.6.1. Must fulfil the Continuous Professional Development requirements for licensure, the standards of Professional Practice and behavior expected of all Licensees.
 - 10.6.2. May administer care in the office or the patient's home.

11. Osteopathic Medicine Scope of Practice

- 11.1. 'Osteopathic medicine' is a system of primary health care based on a holistic approach to diagnose and treat musculoskeletal disturbances that affect other bodily parts and cause many disorders that can be corrected by various manipulative techniques known as Osteopathic Manipulative Medicine (OMM). OMM includes - Cranial osteopathy, Functional adjustments, balanced ligamentous tension adjustments, Muscle energy adjustments, and other specific adjustment techniques to enhance the body's healing ability. Osteopathic treatment is used for the prevention, diagnosis, and treatment of human health conditions and disease; the promotion or restoration of health; and the support and stimulation of a patient's inherent self-healing processes through patient education and the use of Osteopathic therapies.
- 11.2. The Practice of Osteopathic Medicine shall not include surgical procedures or the treatment of infectious diseases.
- 11.3. The Practice of Osteopathic Medicine may include, activities that involve:
 - 11.3.1. Physical and laboratory examinations consistent with Osteopathic education and training, for diagnostic purposes, including, but not limited to, clinical laboratory tests, and physiological functional testing.
 - 11.3.2. All diagnostic tests not consistent with naturopathic medical education and training must be referred for performance and interpretation to an appropriately licensed health care professional.
 - 11.3.3. Hot or cold hydrotherapy; Osteopathic Manipulative Medicine (OMM); Cranial Osteopathy; electro-therapy; and therapeutic exercise.

- 11.3.4. Recommendation of food, extracts of food, nutraceuticals, vitamins, amino acids, minerals, enzymes, botanicals and their extracts, botanical medicines, dietary supplements and nonprescription drugs.
- 11.3.5. Devices including therapeutic devices and durable medical equipment within the scope of training.
- 11.3.6. Health education and health counseling.
- 11.4. The Practice of Osteopathic Medicine does not include assistance rendered in emergency situations by the Licensee.

12. General Requirements for all Licensed Osteopaths

- 12.1. Patient Safety and Evidence-Based Care in the Practice of Osteopathic Medicine shall be ensured by the licensed professional rendering the services.
- 12.2. Licensed Osteopaths shall not be permitted to expand the scope of their Professional Practice where they do not have the requisite training or experience to pursue such therapeutic approaches.
- 12.3. The provisions of this Section are not to be construed to supplant or replace the privileging requirements and processes that the DHA health regulation requires Licensed Healthcare facility to develop and maintain as they relate to Licensed Osteopaths holding Licenses under these Rules.
- 12.4. A Licensee who holds an Osteopathic License must adhere to the following principles and comply with the following obligations in his Practice of Osteopathic Medicine. These are in addition to such other requirements as are established under these Rules and the General Licensing Rules and pursuant to conditions that the DHA health regulation may attach to such Licensee's License:
 - 12.4.1. The Licensee shall have general competence in patient oriented skills, integrating examination and diagnosis with sensitivity to patient needs and culture. They must be knowledgeable in the basic scientific approach to common illnesses and the serious or life threatening common diseases and refer when appropriate.
 - 12.4.2. The decision to employ Osteopathy and its effectiveness in a given case are governed by knowledge of the individual patient in accordance with Osteopathic Principles, and with careful observance of the following specific procedures:
 - 12.4.2.1. Individualization of the medical history and physical examination of the patient must be obtained.
 - 12.4.2.2. Employment of diagnostic procedures, supported by laboratory studies when appropriate as outlined above.

- 12.4.2.3. Evaluation of the sensitivity of patient to medical treatment and the probable reaction and response of the patient to administration of Osteopathic treatment.
- 12.5. The Licensed Osteopath is obligated to refer to a general medical physician or specialists when there is any doubt about the patient's diagnosis or response to therapy. A referral must not be withheld or discouraged when the patient asks for a second opinion.
- 12.6. The Licensed Osteopath bears the responsibility of maintaining a comprehensive record about their patient, including pursuit of diagnostic tests and consultations in a timely fashion and collaborating with other medical professionals.
- 12.7. In addition to satisfying the above requirements, a Licensed Osteopath:
- 12.7.1. Must fulfil the Contentious Education requirements for licensure, the standards of Professional Practice and behavior expected of all Licensees.
- 12.7.2. May administer care in the office or the patient's home.

13. Therapeutic Massage Scope of Practice

- 13.1. "Therapeutic Massage" is a non-medication therapy. It is system of bodywork that includes application of soft tissue manipulation techniques to the body generally intended to reduce the stress, fatigue, and pain while improving circulation. Massage therapists work through the mobilization of the soft tissue including skin, muscles, tendons, ligaments, and connective tissue.
- 13.2. The following are considered as Therapeutic Massage:
- 13.2.1. Ayurvedic Massage Therapy - An Ayurvedic massage is one part of the traditional detoxification and rejuvenation program of India called panchakarma, in which the entire body is vigorously massaged with large amounts of warm oil and herbs to remove toxins from the system.
- 13.2.2. Traditional Chinese Medicine Massage (Tui na) - Tui na techniques range from those that are light and soothing to those that are strong and invigorating. Tui na facilitates healing by regulating the circulation of blood and qi (vital energy), combines the names of two of the hand techniques, **Tui** meaning to push and **na** meaning to lift and squeeze, which are used to represent the system.
- 13.2.3. Lymphatic Massage - Lymph Drainage Therapy (LDT) palpates the lymphatic flow to identify the rhythm, direction, and quality of the lymphatic flow. It may be used as an adjunctive therapy in patients post-operatively.
- 13.3. There are many variations of General Massage that account for several different techniques , include:

- 13.3.1. Acupressure - acupressure use the same Acupuncture points, but acupuncture employs needles, while acupressure uses the gentle, but firm pressure of hands and feet.
- 13.3.2. Aromatherapy - The use of essential oils (extracted from herbs, flowers, resin, woods, and roots) in body and skin care treatments.
- 13.3.3. Bowen technique - light-touch body consists of gentle rolling movements over muscle bellies and tendons to stimulate the body's own healing mechanisms.
- 13.3.4. Deep tissue massage - Massage techniques that utilize deep-tissue/deep-muscle massage administered to affect the sub-layer of musculature and fascia. The muscles must be relaxed in order to effectively perform deep-tissue massage, otherwise tight surface muscles prevent the practitioner from reaching deeper musculature. It is generally integrated with other massage techniques.
- 13.3.5. Feldenkrais Method - this method uses hands-on manipulation to guide new movement patterns. Awareness through movement classes are group sessions in which the teacher verbally guides students through repatterning and retraining the central nervous system through the musculoskeletal skeletal system.
- 13.3.6. Reflexology - Reflexology is the application of appropriate pressure to the leg and feet, usually on specific points, to bring about physiological and psychological changes throughout the body.
- 13.3.7. Rolfing - Rolfing utilizes physical manipulation and works with the fascia, muscles, and joints to bring head, shoulders, thorax, pelvis, and legs into vertical alignment. It allows more efficient use of the muscles with less expended energy by lifting the head and chest and lengthening the body's trunk.
- 13.3.8. Shiatsu - Similar to acupressure, Shiatsu uses a finger-pressure technique on traditional acupuncture points.
- 13.3.9. Sports massage - Sports massage is designed to enhance athletic performance and recovery.
- 13.3.10. Swedish massage - Swedish massage is a vigorous system of massage designed to energize the body by stimulating circulation. Five basic strokes, all flowing toward the heart, are used to manipulate the soft tissues of the body.
- 13.3.11. Therapeutic Touch - Practitioners, primarily nurses using light touch, are trained to feel or sense energy imbalances in the client and use light touch to stimulate healing.
- 13.3.12. Traditional Thai Massage - Thai massage involves peripheral stimulation and is practiced on a firm mat on the floor instead of on a table. Except for the feet, the client remains fully clothed, and the weight of the practitioner is used therapeutically in the massage.

- 13.4. Massage therapists may include adjunctive therapies such as hydrotherapy, mild abrasives, or topical preparations not classified as prescription drugs, mechanical devices and tools that mimic or enhance manual actions, and instructed self care.
- 13.5. Massage therapy may be provided in response to a physician's prescription or in conjunction with other therapeutic modalities.
- 13.6. The Practice of Massage does not include assistance rendered in emergency situations by the Licensee.

14. General Requirements for all Licensed Massage Therapists (M.T.)

- 14.1. Patient safety and Evidence-Based Care in the Practice of Massage shall be ensured by the licensed professional rendering the services.
- 14.2. Licensed Massage Therapists shall not be permitted to expand the scope of their Professional Practice where they do not have the requisite training or experience to pursue such therapeutic approaches.
- 14.3. A Licensee who holds a Massage License (M.T.) must adhere to the following principles and comply with the following obligations in their practice of Massage. These are in addition to such other requirements as are established under these Rules and the General Licensing Rules and pursuant to conditions that the DHA health regulation may attach to such Licensee's License:
 - 14.3.1. The Licensee shall have general competence in patient oriented skills, integrating examination and diagnosis with sensitivity to patient needs and culture. They must be knowledgeable in the basic scientific approach to common illnesses and the serious or life threatening common diseases and refer when appropriate.
 - 14.3.2. The decision to employ Massage and its effectiveness in a given case are governed by knowledge of the individual patient in accordance with Massage principles.
 - 14.3.3. Individualization of the medical history and physical examination of the patient must be obtained.
 - 14.3.4. Evaluation of the sensitivity of patient to medical treatment and the probable reaction and response of the patient to administration of the treatment chosen.
 - 14.3.5. The Licensed Massage Therapists (M.T.) is obligated to refer to a general medical physician or specialists when there is any doubt about the patient's diagnosis or response to therapy. A referral must not be withheld or discouraged when the patient asks for a second opinion.
- 14.4. The Licensed Massage Therapists (M.T.) bears the responsibility of maintaining a comprehensive record about their patient including collaborating with other medical professionals.

- 14.5. In addition to satisfying the above requirements, a Licensed Massage Therapists must fulfil the Continuous Professional Development requirements for licensure, the standards of Professional Practice and behavior expected of all Licensees.

15. Traditional Chinese Medicine Scope of Practice

- 15.1. “Traditional Chinese Medicine” is a system of primary health care for the prevention, diagnosis, and treatment of human health conditions and disease; the promotion or restoration of health; and the support and stimulation of a patient’s inherent self-healing processes through patient education and the use of Traditional Chinese Medicine therapies and therapeutic substances.
- 15.2. The Practice of Traditional Chinese Medicine shall not include surgical procedures or use of prescription medications.
- 15.3. The Practice of Traditional Chinese Medicine may include, activities that involve:
- 15.3.1. Physical examination and request laboratory examinations consistent with Traditional Chinese Medicine education and training, for diagnostic purposes, including, but not limited to, clinical laboratory tests, and physiological functional testing.
- 15.3.2. Request diagnostic imaging studies consistent with their Traditional Chinese Medicine training.
- 15.4. All diagnostic tests not consistent with naturopathic medical education and training must be referred for performance and interpretation to an appropriately licensed healthcare professional.
- 15.5. A Licensed Traditional Chinese Medicine Professional may administer, order, and prescribe or perform the following:
- 15.5.1. The stimulation of points, areas of the body or substances in the body using qi, needles with or without electrical stimulation (using clean needle technique), moxibustion, heat and cold, color, light, lasers, or suction (cupping).
- 15.5.2. Cupping can be done “dry” or “wet”; if the cupping is done wet, sterile technique must be followed.
- 15.5.3. Therapeutic exercises, qi exercises, breathing techniques, and meditation.
- 15.5.4. Dietary and nutritional counselling and education regarding physical, emotional and spiritual balance as it relates or Traditional Chinese Medicine.
- 15.5.5. The prescription of Chinese herbal medicines (single or in combination as patent medicines, tinctures, granules or raw herbs) as long as it is consistent with Facility Regulation.
- 15.5.6. Musculoskeletal manipulation consistent with Traditional Chinese Medicine training (Tui Na).

- 15.6. 'Medical Acupuncture refers to licensed medical doctors practicing acupuncture only They may only practice acupuncture utilizing the stimulation of points using needles , moxibustion, heat and cold, color, light, or lasers.
- 15.7. The Practice of Traditional Chinese Medicine does not include assistance rendered in emergency situations by the Licensee.

16. General Requirements Licensed Traditional Chinese Medicine Professionals

- 16.1. Patient safety and Evidence-Based Care in the Practice of Traditional Chinese Medicine or Medical Acupuncture shall be ensured by the licensed professional rendering the services.
- 16.2. Licensed Traditional Chinese Medicine Professionals shall not be permitted to expand the scope of their Professional Practice where they do not have the requisite training or experience to pursue such therapeutic approaches.
- 16.3. The Licensee shall have general competence in patient oriented skills, integrating examination and diagnosis with sensitivity to patient needs and culture. They must be knowledgeable in the basic scientific approach to common illnesses and the serious or life threatening common diseases and refer when appropriate.
- 16.4. The decision to employ Traditional Chinese Medicine or Medical Acupuncture and its effectiveness in a given case are governed by knowledge of the individual patient in accordance with Traditional Chinese Medicine or Medical Acupuncture principles, and with careful observance of the following specific procedures:
 - 16.5.1. Individualization of the medical history and physical examination of the patient must be obtained.
 - 16.5.2. Employment of diagnostic procedures, supported by laboratory studies, when appropriate as outlined in above.
 - 16.5.3. Evaluation of the sensitivity of patient to medical treatment and the probable reaction and response of the patient to administration of the treatment chosen.
- 16.5. The Licensed Traditional Chinese Medicine Professionals is obligated to refer to a general medical physician or specialists when there is any doubt about the patient's diagnosis or response to therapy. A referral must not be withheld or discouraged when the patient asks for a second opinion.
- 16.6. The Licensed Traditional Chinese Medicine Professionals bears the responsibility of maintaining a comprehensive record about their patient, including pursuit of diagnostic tests and consultations in a timely fashion and collaborating with other medical professionals.
- 16.7. In addition to satisfying the above requirements, a Licensed Traditional Chinese Medicine Professionals must fulfil the Continuous Professional Development requirements for licensure, the standards of Professional Practice and behavior expected of all licensees.

17. Unani Medicine Scope of Practice

- 17.1. ‘Unani medicine’ is a healthcare system based on the Greece/Arabic philosophy which consists of four bodily humours: blood, phlegm, yellow bile, and black bile. It encompasses a range of practices, including diet and nutritional therapy, herbal medicine, life style, stress management, cupping, body detoxification (diaphoresis, diuresis, purging, emesis) and exercise.
- 17.2. The Practice of Unani Medicine may include activities that involve:
- 17.2.1. Physical examination and ordering laboratory examinations consistent with Unani education and training for diagnostic purposes.
- 17.2.2. Treatment designed to prevent or correct constitutional dysfunction by employing Unani medications and above mentioned therapeutic techniques including cupping.
- 17.2.3. Cupping can be done “dry” or “wet” if the cupping is done wet, sterile technique must be followed.
- 17.2.4. All diagnostic tests not consistent with naturopathic medical education and training must be referred for performance and interpretation to an appropriately licensed health care professional.
- 17.2.5. Hot or cold hydrotherapy and therapeutic exercise.
- 17.2.6. Devices including therapeutic devices and durable medical equipment within the Unani Practitioner’s scope of training.
- 17.2.7. Health education and lifestyle counseling.
- 17.3. The Practice of Unani Medicine does not include assistance rendered in emergency situations by the Licensee.

18. General Requirements for all Licensed Unani Practitioners

- 18.1. Patient Safety and Evidence-Based Care in the Practice of Unani Medicine shall be ensured by the licensed professional rendering the services.
- 18.2. Licensed Unani Practitioners shall not be permitted to expand the scope of their Professional Practice where they do not have the requisite training or experience to pursue such therapeutic approaches.
- 18.3. A Licensee who holds a Unani License must adhere to the following principles and comply with the following obligations in his Practice of Unani Medicine. The Licensee shall have general competence in patient oriented skills, integrating examination and diagnosis with sensitivity to patient needs and culture. They must be knowledgeable in the basic scientific approach to common illnesses and the serious or life threatening common diseases and refer when appropriate.

- 18.4. The decision to employ Unani and its effectiveness in a given case are governed by knowledge of the individual patient in accordance with Unani Principles and with careful observance of the following specific procedures:
- 18.4.1. Individualization of the medical history and physical examination of the patient must be obtained.
- 18.4.2. Employment of diagnostic procedures when appropriate as outlined in above
- 18.4.3. Evaluate the sensitivity of patient to medical treatment and their potential reaction and response to administration of Unani treatment with a focus on potential reactions to Unani manipulation.
- 18.5. The licensed Unani Practitioner is obligated to refer to a general medical physician or specialists when there is any doubt about the patient's diagnosis or response to therapy. A referral must not be withheld or discouraged when the patient asks for a second opinion.
- 18.6. The licensed Unani Practitioner bears the responsibility of maintaining a comprehensive record about their patient, including pursuit of diagnostic tests and consultations in a timely fashion and collaborating with other medical professionals.
- 18.7. In addition to satisfying the above requirements, a licensed Unani Practitioner:
- 18.4.4. Must fulfil the Continuous Professional Development requirements for licensure, the standards of Professional Practice and behavior expected of all Licensees.
- 18.4.5. May administer care in the office or the patient's home.

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