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Introduction

This study guide is designed to help prepare candidates for the NCCAOM certification examinations. Passage of the NCCAOM certification examinations is one of the requirements to become a Diplomate of Chinese Herbology (NCCAOM) and demonstrates the core knowledge, skills and abilities expected for an entry level practitioner of Chinese Herbology. Academic program officials from the Accreditation Commission for Acupuncture and Oriental Medicine (ACAOM) accredited Oriental medicine programs will also benefit from reviewing the content in this guide. The NCCAOM® Examination Study Guide for Diplomate of Chinese Herbology has all the examination preparation materials and information published by the NCCAOM in one document.

Candidates for NCCAOM Certification in Chinese Herbology are applicants who have met all of the academic and/or training requirements for NCCAOM® Certification in Chinese Herbology. Candidates for NCCAOM certification have qualified by one of the established eligibility routes published in the NCCAOM® Certification Handbook. The latest edition of this handbook is available on the NCCAOM website at www.nccaom.org.

All candidates for certification have completed a minimum number of hours of academic course work to qualify to take each required examination (see chart below). Completion of these hours of course work qualifies the applicant to sit for the following Chinese Herbology Certification Examinations as a “pre-graduate.” Additional hours are required for final certification.

Pre-graduation Hour Requirements for Taking Examinations

<table>
<thead>
<tr>
<th>Certification Type</th>
<th>Minimum Didactic Hours</th>
<th>Minimum Clinical Hours</th>
<th>Total Hours Required</th>
</tr>
</thead>
</table>
| Acupuncture Certification  
  • Foundations of Oriental Medicine  
  • Biomedicine  
  • Acupuncture with Point Location | 1190 Hours | 410 Hours | 1600 hours |
| Oriental Medicine Certification  
  • Foundations of Oriental Medicine  
  • Biomedicine  
  • Acupuncture with Point Location  
  • Chinese Herbology | 2090 Hours | 410 hours | 2500 hours |

In addition to passing the above certification exams all candidates for NCCAOM Certification in Chinese Herbology must notify the academic institution to send the final graduation transcripts to the NCCAOM. More information can be found in the NCCAOM® Certification Handbook.
Examination Development

The NCCAOM examination study guides provide background information on the validation of the NCCAOM certification examinations. The Acupuncture, Chinese Herbology and Oriental Medicine certification programs are currently accredited by the National Commission for Certification Agencies (NCCA). The Chinese Herbology Certification Program carries the NCCA seal.

In order for the NCCAOM Certification in Chinese Herbology Program to remain accredited by NCCA, the NCCAOM must adhere to strict national standards for examination development. All certification exams for the NCCAOM Certification in Chinese Herbology Program must meet the examination content validity standards set forth by NCCA. The following contains information on validation of the examination content.

The NCCAOM contracts with Schroeder Measurement Technologies, Inc. (SMT) to develop all NCCAOM certification examinations. SMT is a psychometric consulting group that serves to provide all examination development validation studies and scoring for the NCCAOM examinations.

Examination Content Validation

The foundation of a valid, reliable, and legally defensible professional certification program is first the result of a well-constructed job analysis (JA) study. A JA establishes the link between test scores and competencies assessed by the examination and thus the inference that the scores achieved by candidates on the certification examinations are based on valid content. Therefore, all “pass” or “fail” decisions correlate to competency assessment (performance) as measured by the examination. The JA is a process by which tasks performed by NCCAOM certified practitioners and licensed acupuncturists are examined for importance (which considers criticality of the tasks performed and frequency by which the tasks are performed in practice). A minimum of every five years the NCCAOM conducts a JA, in order to update the examination content outlines. Content decisions for the examination content outlines are directly linked to the results of the most recent JA. During the 2013 Job Analysis (JA) study, NCCAOM subject-matter experts (NCCAOM Diplomates who have expertise and experience as an educator or practitioner) provided the list of competency statements for the NCCAOM Acupuncture with Point Location, Biomedicine, Foundations of Oriental Medicine, and Chinese Herbology content outlines. A survey instrument was developed by an NCCAOM appointed JA Taskforce. The survey instrument was provided to currently practicing NCCAOM Diplomates and licensed acupuncturists to inquire about the relative “importance” and “frequency” of performing their different job tasks. The survey results were reviewed and interpreted by the JA Taskforce members and the NCCAOM subject-matter experts (SMEs) and, as a result, new content outlines were developed for all NCCAOM certification exams. The 2017 examination content outlines contained in this study guide are based on the 2013 JA. Interpretation of the JA results was based on use of systematic decision criteria. The 2013 JA provides content
validity support and linkage to the examination items (i.e., questions on the examinations) for all NCCAOM certification exams for the Chinese Herbology Certification Program.

This NCCAOM® Examination Study Guide for Diplomate of Chinese Herbology provides all the content outlines for each examination required for NCCAOM Certification in Chinese Herbology. Each content outline lists the percent weightings for each section (i.e., domains) within the outline and gives a detailed list of competency statements for each domain and sub-domain. The listing of the competency statements is included to give the candidate more information about the competency expected for each domain.

**Item Writing**

The second step in developing a defensible examination program occurs after the content outlines (i.e., test blueprints) are constructed. After a test content outline is developed, examination items are written to match the content outline. Each item must be “linked” to a content area listed on a content outline and written based on the supporting competency statements.

Item writing events held across the country are conducted to assist the NCCAOM® Examination Development Committees (EDCs) in developing new items for the certification examinations. The EDCs, composed of a panel of SMEs, representing practitioners and educators from different regions of the United States and from various practice settings, convene for the purpose of writing, reviewing, and revising examination items to meet strict content guidelines and test construction standards. NCCAOM test development staff members and experienced SMEs train the item writers on how to write NCCAOM acceptable multiple-choice items. The goal of the training is to define appropriate item formats, train the SMEs on what is not an appropriate item (e.g., using “none or all of the above” as a distractor, making the key longer or shorter than the distractors, using negatively worded items), and how to review various item types, including the cognitive complexities associated with items.

**Item Review**

Once new items are written and edited for format, a panel of SMEs meets with a testing staff liaison to review and edit the new items. Once the items are approved by the SMEs, the testing staff enters the item(s) into the appropriate item bank and codes the items as determined by the SMEs according to the content outline specifications. The NCCAOM EDCs meets annually to review the current and new items. Additionally, each question is reviewed for performance statistics (i.e., a psychometric evaluation). When a candidate takes an examination, a small percentage of items are pretested to determine statistics for item difficulty. The statistical evaluation allows the SMEs to see when the correct answer is found by guessing (there are some very specific flags that help us) or if the answer has more than one (or no) correct answers. This is not to say that all exams are perfect, but the NCCAOM applies very strict standards so that every effort is made to avoid errors in the test item.
Examination Administration

All NCCAOM examinations for the Chinese Herbology Certification Program are given as a computer based administration. The table below provides the examination administration features for the 2017 Chinese Herbology Certification Program Examinations administered at Pearson VUE Professional Test Centers.

<table>
<thead>
<tr>
<th>Examinations</th>
<th>Number of Multiple-Choice Items</th>
<th>Allotted Time</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Adaptive Exams (offered year-round)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Foundations of Oriental Medicine</td>
<td>100</td>
<td>2.5 Hours</td>
</tr>
<tr>
<td><em>(last adaptive administration June 30, 2017)</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Biomedicine</td>
<td>100</td>
<td>2.5 Hours</td>
</tr>
<tr>
<td>Chinese Herbology</td>
<td>100</td>
<td>2.5 Hours</td>
</tr>
<tr>
<td><strong>Linear Exams</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>August 14-26, 2017</td>
<td></td>
<td></td>
</tr>
<tr>
<td>November 6-18, 2017</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Foundations of Oriental Medicine</td>
<td>130</td>
<td>3.25 Hours</td>
</tr>
</tbody>
</table>
2017 Expanded Content Outlines

Based on the JA conducted in February 2013, the content outlines for the Certification in Chinese Herbology are included below. The competency statements are designed to help guide the candidates in studying for each examination. All of the examinations administered in 2017 will be based on these content outlines. Each competency statement gives the candidate the level of competency expected for the particular content area listed on the outline. Please note that the Chinese Herbology Certification includes the content outlines for the following examinations: Foundations of Oriental Medicine, Biomedicine, and Chinese Herbology.

The Foundations of Oriental Medicine Expanded Content Outline
(Effective as of February 1, 2014)

Note to Candidate: This document serves as a guide to assist in examination preparation for candidates who have met NCCAOM® eligibility requirements. Below is the content outline for the Foundations of Oriental Medicine examination, along with the competency statements.

DOMAIN I: Clinical Examination Methods (10% of Total Exam)
Collect and recognize clinically significant signs and symptoms.

A. Looking (Wang)
   1. Spirit (Shen) appearance (including color)
      • Observe outward manifestation of Shen (Spirit) (e.g., complexion, expression, demeanor, and general behavior)
      • Identify and relate Shen (Spirit) to pattern/syndrome differentiation*
   2. Face, eyes, nose, ears, mouth, lips, teeth, and throat
      • Observe normal and abnormal conditions and changes of the face and complexion (including color, moisture, texture, and organ-indicative locations), eyes, nose, ear, mouth, lips, teeth and throat
      • Identify and relate facial features to pattern/syndrome differentiation*
      • Recognize pathological manifestations of the face, including color, moisture, texture, and organ-indicative locations
3. Tongue (body and coating)

- Observe normal and abnormal manifestations, patterns, conditions, and changes of the tongue and sub-lingual area
- Identify and relate features of the tongue to pattern/syndrome differentiation*
- Recognize pathological manifestations of the tongue and tongue coating, including color, size, moisture, texture, shape, position, movement, organ-indicative locations

4. Physical characteristics of the body

- Observe form, movement, and physical characteristics (e.g., head, hair, neck, back, chest, abdomen, extremities, nails)
- Identify and relate form, movement, and physical characteristics to pattern/syndrome differentiation*
- Recognize pathological significance of form, movement, and physical characteristics
- Observe conditions and changes of the skin
- Identify and relate conditions and changes of the skin to pattern/syndrome differentiation*
- Recognize pathological significance of conditions and changes of the skin
- Observe normal and abnormal excretions (e.g., phlegm, sputum, saliva, sweat, discharge, stool, urine)
- Identify and relate conditions and changes of excretions to pattern/syndrome differentiation*
- Recognize pathological significance of excretions

B. Listening and Smelling (Wen)

1. Sounds

- Listen to respiratory sounds
- Identify and relate respiratory sounds to pattern/syndrome differentiation*
- Recognize pathological significance of respiratory sounds
- Listen to tonal qualities, voice, and speech
- Identify and relate tonal qualities, voice, and speech to pattern/syndrome differentiation*
- Recognize pathological significance of tonal qualities, voice, and speech
• Listen to abdominal sounds
• Identify and relate abdominal sounds to pattern/syndrome differentiation*
• Recognize pathological significance of abdominal sounds

2. Odors
• Smell body odors
• Identify and relate body odors to pattern/syndrome differentiation*
• Recognize pathological significance of body odors
• Smell breath and mouth odors
• Identify and relate breath and mouth odors to pattern/syndrome differentiation*
• Recognize pathological significance of breath and mouth odors
• Smell excretions (e.g., sweat, urine, feces, leukorrhea, flatulence, wound exudates)
• Identify and relate excretions to pattern/syndrome differentiation*
• Recognize pathological significance of excretions

C. Asking (Wen)

1. Chief complaint
• Inquire about presenting complaint (onset, duration, location, nature, alleviation, aggravation)
• Inquire about the history and development of chief complaint
• Identify and relate chief complaint to pattern/syndrome differentiation*
• Identify appropriate additional questions based on examination findings and patients’ response to inquiries

2. Current health conditions
• Conduct a review of systems, including the “Ten Questions” (Shi Wen)
• Identify and relate current health conditions to pattern/syndrome differentiation*
• Identify appropriate additional questions based on examination findings and patients’ response to inquiries
3. Health history

- Inquire about personal health history, including previous symptoms, diagnoses, and treatments
- Inquire about familial history
- Identify and relate health history to pattern/syndrome differentiation*
- Identify appropriate additional questions based on examination findings and patients’ response to inquiries

D. Touching (Palpation) (Qie)

1. Radial pulses (including the 28 Qualities)

- Identify the location of radial pulses
- Identify qualities of radial pulses (including rate, depth, strength, and shape) as indicators of patterns of disharmony and of normal and abnormal states of organ and meridian function
- Identify and relate radial pulses to pattern/syndrome differentiation*

2. Abdomen

- Identify, through palpation, normal and abnormal conditions of the abdomen (e.g., temperature, texture, shape, and pain)
- Identify abdominal regions representing organs and meridians
- Identify and relate abdominal palpation findings to pattern/syndrome differentiation*

3. Meridians

- Identify, through palpation, findings along the meridians (e.g., nodules, tenderness, numbness, temperature, sensitivity)
- Identify and relate meridian palpation findings to pattern/syndrome differentiation*

4. Other body areas

- Identify, through palpation, pain, body sensations (e.g., numbness, tingling, sensitivity), temperature changes, and quality of tissue (e.g., edema, hardness/softness, tension/flaccidity)
- Identify and relate palpation findings to pattern/syndrome differentiation*
**Pattern/Syndrome Differentiation:**
- Eight Principles (Ba Geng)
- Organs (Zang Fu)
- Meridian/Channel (Jing Luo)
- Six Stages (Liu Jing)
- Four Levels (Wei, Qi, Ying, Xue)
- Five Elements (Wu Xing)
- Qi, Blood, Body Fluids (Qi, Xue, Jin Ye)
- Triple Burner (San Jiao)

**DOMAIN II: Assessment, Analysis, and Differential Diagnosis Based Upon Traditional Chinese Medicine (TCM) Theory (45% of Total Exam)**

Formulate a differential diagnosis (Bian Zheng).

A. Knowledge and Application of Fundamental Theory of TCM Physiology (Sheng Li), Etiology (Bing Yin), and Pathogenesis (Bing Ji)

1. Yin/Yang theory (e.g., Interior/Exterior, Cold/Heat, Deficient/Excess)
   - Describe Yin/Yang theory
   - Evaluate symptoms according to Yin/Yang theory
   - Identify pathologies according to Yin/Yang theory
   - Apply Yin/Yang theory to clinical assessment

2. Five Elements theory (Five Phases/Wu Xing)
   - Describe Five Elements theory
   - Evaluate symptoms according to Five Elements theory
   - Identify pathologies according to Five Elements theory
   - Apply Five Elements theory to clinical assessment
3. Organ theory (Zang Fu)
   - Describe Organ theory
   - Evaluate symptoms according to Organ theory
   - Identify pathologies according to Organ theory
   - Apply Organ theory to clinical assessment

4. Channel theory (Jing Luo) (including Regular channels, Extraordinary channels, Luo-connecting channels, divergent channels, muscle channels, and skin regions)
   - Describe Channel theory
   - Evaluate symptoms according to Channel theory
   - Identify pathologies according to Channel theory
   - Apply Channel theory to clinical assessment

5. Essential Substances theory [Qi, Blood (Xue), Fluids (Jin Ye), Essence (Jing), Spirit (Shen)]
   - Describe Qi, Blood (Xue), Body Fluids (Jin Ye), Essence (Jing), Spirit (Shen)
   - Evaluate symptoms according to Qi, Blood (Xue), Body Fluids (Jin Ye), Essence (Jing), Spirit (Shen)
   - Identify pathologies according to Qi, Blood (Xue), Body Fluids (Jin Ye), Essence (Jing), Spirit (Shen)
   - Apply Qi, Blood (Xue), Body Fluids (Jin Ye), Essence (Jing), Spirit (Shen) to clinical assessment

6. Causes of Disease: External (Six Excesses [Liu Yin]), Internal (Seven Emotions), and Miscellaneous (diet, excessive sexual activity, excessive physical work or lack of exercise, trauma, bites, parasites, Phlegm, Blood stasis)
   - Describe Causes of Disease
   - Evaluate symptoms according to Causes of Disease
   - Identify pathologies according to Causes of Disease
   - Apply Causes of Disease to clinical assessment
B. Formulation of a Differential Diagnosis Based upon Chief Complaint (Zhu Su), Prioritization of Major Symptoms (Zhu Zheng), Knowledge of TCM Diseases (Bian Bing), and Pattern Identification (Bian Zheng)

1. Eight Principles (Ba Gang) (i.e., Yin/Yang, Interior/Exterior, Cold/Heat, Deficient/Excess)
   - Describe Eight Principles differentiation
   - Assess and analyze signs and symptoms according to Eight Principles differentiation
   - Formulate a diagnosis based on the analysis of Eight Principles differentiation

2. Organ theory (Zang Fu)
   - Describe Organ pattern differentiation
   - Assess and analyze signs and symptoms according to Organ differentiation
   - Formulate a diagnosis based on the analysis of Organ differentiation

3. Channel theory (Jing Luo) (including Regular channels, Extraordinary channels, Luo-connecting channels, divergent channels, muscle channels, and skin regions)
   - Describe Channel theory
   - Assess and analyze signs and symptoms according to Channel theory
   - Formulate a diagnosis based on the analysis of Channel theory

4. Six Stages (Tai Yang, Yang Ming, Shao Yang, Tai Yin, Shao Yin, Jue Yin)
   - Describe the Six Stages differentiation
   - Assess and analyze signs and symptoms according to Six Stages differentiation
   - Formulate a diagnosis based on the analysis of Six Stages differentiation

5. Four Levels (Wei, Qi, Ying, Xue)
   - Describe the Four Levels differentiation
   - Assess and analyze signs and symptoms according to Four Levels differentiation
   - Formulate a diagnosis based on the analysis of Four Levels differentiation
6. Five Elements (Five Phases/Wu Xing)
   • Describe Five Elements differentiation
   • Assess and analyze signs and symptoms according to Five Elements differentiation
   • Formulate a diagnosis based on the analysis of Five Elements differentiation

7. Qi, Blood, Body Fluids (Qi, Xue, Jin Ye)
   • Describe Qi, Blood, Body Fluids differentiation
   • Assess and analyze signs and symptoms according to Qi, Blood, Body Fluids differentiation
   • Formulate a diagnosis based on the analysis of Qi, Blood, Body Fluids differentiation

8. Triple Burner (San Jiao)
   • Describe Triple Burner differentiation
   • Assess and analyze signs and symptoms according to Triple Burner differentiation
   • Formulate a diagnosis based on the analysis of Triple Burner differentiation

9. Six Excesses (Liu Yin)
   • Describe Six Excesses
   • Assess and analyze signs and symptoms according to Six Excesses
   • Formulate a diagnosis based on the analysis of Six Excesses

DOMAIN III: Treatment Principle (Zhi Ze) and Strategy (Zhi Fa) (45% of Total Exam)

Formulate treatment principle and strategy based upon differential diagnosis (Bian Zheng).

A. Treatment Principle Based upon Differential Diagnosis
   1. Eight Principles (Ba Gang)
   2. Organs (Zang Fu)
   3. Meridian/Channel (Jing Luo)
   4. Six Stages (Liu Jing)
   5. Four Levels (Wei, Qi, Ying, Xue)
   6. Five Elements (Wu Xing)
   7. Qi, Blood, Body Fluids (Qi, Xue, Jin Ye)
8. Triple Burner (San Jiao)

9. Causes of Disease: External (Six Excesses [Liu Yin]), Internal (Seven Emotions), and Miscellaneous (diet, excessive sexual activity, excessive physical work or lack of exercise, trauma, bites, parasites, Phlegm, Blood stasis)
  • Select appropriate treatment principle based on pattern/syndrome differential diagnosis

B. Treatment Strategy to Accomplish Treatment Principle
  • Select appropriate treatment strategy (e.g., disperse, tonify, cool, warm) to accomplish treatment principle
  • Prioritize treatment focus [e.g., Root and Branch (Biao Ben), acute/chronic, external/internal, Pathogenic Factors, constitutional, seasonal]
  • Adjust treatment principle and/or strategy based on patient’s response, disease progression, and lifestyle (e.g., substance use, smoking, exercise, diet)
The Biomedicine Expanded Content Outline

(Effective as of February 1, 2014)

Note to Candidate: This document serves as a guide to assist in examination preparation for candidates who have met NCCAOM eligibility requirements. Below is the content outline for the Biomedicine module, along with the competency statements.

Please note: In regards to Clean Needle Technique (CNT), the Biomedicine module focuses on universal precautions and emergency situations in comparison to the Acupuncture with Point Location module which focuses on actual needling and its emergencies (e.g., needle angle and depth).

DOMAIN I: Biomedical Model (90% of Total Exam)

A. Clinical Application of Biomedical Sciences (including anatomy, physiology, pathology, pathophysiology, etc.), Pharmacology, and Nutrients and Supplements (30%)

1. Biomedical sciences
   - Differentiate normal and abnormal structures and functions of the body systems from the conventional biomedical perspective
   - Recognize signs, symptoms, and morbidities associated with common medical conditions
   - Demonstrate knowledge of medical terminology

2. Pharmacology
   - Recognize functional classifications, mechanisms, side and adverse effects related to commonly used pharmaceuticals (Refer to Appendix A: Pharmaceuticals)
   - Recognize routes of administration (e.g., intravenous, oral, subcutaneous)
   - Demonstrate knowledge of the effects of the use of tobacco, alcohol, and other drugs of abuse
   - Recognize common, known pharmaceutical-supplement interactions
3. Nutrients and supplements

- Recognize major classifications, known actions, and potential adverse effects related to commonly used nutrients and supplements (Refer to Appendix B: Nutrients and Supplements)
- Recognize signs and symptoms associated with abnormal levels of commonly used nutrients and supplements

B. Patient History and Physical Examination (25%)

Understand clinically relevant information gathered through history taking and physical examination.

*Candidates are expected to understand all aspects of the physical examination process. They are not expected to be able to perform all aspects of the physical examination themselves.

1. Patient history*

- Conduct a medical interview to obtain patient history
- Organize information obtained during interview into appropriate sections of the patient history
- Distinguish the relevant findings obtained during history taking

*Patient History includes: chief complaint, history of present illness, allergies, past medical history, past surgical history, personal and social history, family history, current medications (prescription and non-prescription), herbs and supplements, review of systems

2. Physical examination

- Identify the components of the physical examination
- Recognize how each portion of the physical examination is performed
- Distinguish the relevant findings obtained from the physical examination
a. General systems examination (e.g., vital signs, pulmonary, cardiovascular, gastrointestinal, integumentary)
   - Understand relevant examination techniques such as observation, auscultation, and palpation as applied to each system
   - Recognize how each portion of the general systems examination is performed
   - Distinguish the relevant findings obtained from the general systems examination

b. Musculoskeletal examination
   - Understand relevant examination techniques including, but not limited to, range of motion, muscle strength testing, deep tendon reflexes, dermatomal testing, and special tests including orthopedic tests
   - Recognize how each portion of the musculoskeletal examination is performed
   - Distinguish the relevant findings obtained from the musculoskeletal examination

c. Neurological examination
   - Understand relevant examination techniques including, but not limited to, assessment of cognitive function, evaluation of cranial nerves, sensory and motor function, and reflexes
   - Recognize how each portion of the neurological examination is performed
   - Distinguish the relevant findings obtained from the neurological examination

3. Imaging, laboratory tests, and other medical studies
   a. Imaging
      - Understand commonly used medical imaging studies (e.g., x-ray, MRI, CT, PET, colonoscopy, cystoscopy, bronchoscopy)
      - Recognize the significance of information gathered from imaging studies
   b. Laboratory tests
      - Understand commonly used medical laboratory tests** (e.g., complete blood count, basic metabolic panel, urinalysis, liver panel, cardiac panel, thyroid panel, pregnancy test, and reproductive hormones)
      - **normal ranges will not be tested
      - Recognize the significance of information gathered from laboratory tests
c. Other medical studies
  
  - Understand other commonly used medical studies (e.g., EMG, EKG)
  - Recognize the significance of information gathered from these studies

C. Clinical Assessment Process (30%)

Interpret clinically significant information gathered during history taking and physical examination to recognize pathological conditions. (Refer to Appendix C: Medical Conditions)

  - Recognize abnormalities in the function of the body systems including, but not limited to, respiratory, cardiovascular, urogenital, reproductive, nervous, integumentary, musculoskeletal, and gastrointestinal systems
  - Distinguish between relevant and non-relevant findings
  - Recognize typical presentations of commonly encountered medical conditions
  - Recognize commonly encountered ominous signs including, but not limited to, medical red flags, mental health red flags, and signs of abuse and trauma

D. Clinical Decision-Making and Standard of Care (5%)

Analyze information to determine appropriate patient management.

  - Recognize medical conditions that may be treated without referral
  - Recognize medical conditions that require co-management
  - Recognize medical conditions that require a referral
  - Differentiate the most appropriate type of referral*** (emergent, urgent, or routine), i.e., the timeframe within which the patient should be seen
  - Recognize the conventional biomedical prognoses, management, and/or standard of care for common medical conditions (Refer to Appendix C: Medical Conditions)

***emergent (immediate) referral; urgent (24 - 48 hours) referral; routine (48 hours - 7 days) referral
DOMAIN II: Office Safety and Professional Responsibilities (10% of Total Exam)

Recognize and implement appropriate office safety standards and demonstrate knowledge of professional responsibilities.

A. Risk Management and Office Safety
   - Recognize situations that require special care or emergency management (e.g., burns, seizures, falls, anaphylaxis)
   - Implement emergency office protocols including contacting emergency services as appropriate

B. Infection Control
   - Identify commonly encountered communicable diseases (e.g., hepatitis, HIV, tuberculosis)
   - Identify modes of transmission (e.g., airborne, fecal-oral) and appropriate preventive measurements for common communicable diseases
   - Recognize the appropriate office management of commonly encountered communicable diseases and hazardous situations
   - Recognize and apply Universal Precautions

C. Federal Regulations
   - Demonstrate knowledge of applicable Occupational Safety and Health Administration (OSHA) and other federal health agencies’ requirements
   - Demonstrate knowledge of applicable Health Insurance Portability and Accountability Act (HIPAA) requirements

D. Reporting and Record-Keeping
   - Demonstrate knowledge of the required contents and maintenance of medical records
   - Demonstrate knowledge of mandated reportable conditions (e.g., elder and child abuse, infectious diseases, bioterrorism)
   - Demonstrate knowledge of the definition and purpose of ICD, CPT, E/M codes
   - Demonstrate knowledge of insurance types and requirements (e.g., general liability, malpractice insurance)
E. Ethics and Professionalism

- Demonstrate knowledge of NCCAOM® Code of Ethics and other ethical principles (e.g., informed consent, conflict of interest, negligence, boundary violations)
- Communicate effectively and professionally with patients, the public, and other healthcare providers
Appendix A: Pharmaceuticals
Appendix A is a list of commonly used pharmaceutical categories. The exam will focus on but may not be exclusively limited to the list below.

- allergy/sinus medications
- angina medications
- antiasthmatic medications
- antibacterial medications
- anticancer medications
- anticoagulant medications
- antidepressants
- antidiabetic medications
- antidiarrheal medications
- antifungal medications
- antihyperlipidemic medications
- antihypertension medications
- antinausea medications
- anti-Parkinson medications
- antiprotozoal medications
- antipsychotics
- antiseizure medications
- antiviral medications
- appetite control/weight management medications
- cardiac medications
- central nervous system (CNS) stimulants/attention deficit medications
- cough medications
- drugs of abuse
- gastrointestinal medications
- hormonal replacement therapy
- immune modulators
- mood stabilizer medications
- non-steroidal anti-inflammatory drugs (NSAIDs)
- opioids
- osteoporosis medications
- sedatives, anxiolytic and sleep medications
- sexual dysfunction medications
- smoking cessation medications
- steroids
- stool softeners/laxatives
- thyroid medications
- topical skin medications
Appendix B: Nutrients and Supplements
Appendix B is a list of commonly used nutrients and supplements. The exam will focus on but may not be exclusively limited to the list below.

- amino acids (e.g., L-glutamine, lysine, choline)
- antioxidants (e.g., coenzyme Q10, selenium)
- bone health (e.g., glucosamine sulfate, chondroitin sulfate)
- digestive support (e.g., enzymes, fiber, probiotics)
- hormones (e.g., melatonin, wild yam, DHEA)
- minerals (e.g., calcium, magnesium, potassium)
- mood support (e.g., St. John’s Wort, Sam E, 5 HTP)
- vitamins (e.g., A, B1-B12, C, D, E, K)
- Western herbs (e.g., saw palmetto, milk thistle)
Appendix C: Medical Conditions

The conditions (not system headings) listed below are categorized based on how frequently AOM practitioners reported seeing them in the clinical setting per the 2013 Job Analysis. This list is meant to serve as a study guide for the NCCAOM Biomedicine Examination Module to help prioritize focus of study. The exam will focus on but may not be exclusively limited to the conditions below.

The conditions marked with an asterisk (*) signify diseases commonly associated with red flag signs and/or symptoms. Candidates are strongly advised to familiarize themselves with these conditions and the red flag signs and symptoms associated with them.

**CATEGORY 1 Frequently Seen Conditions**

**Cardiovascular**
- *Arrhythmias (e.g., atrial fibrillation, premature ventricular contraction, tachycardia, bradycardia)*
- *Blood pressure disorders (hypertension and hypotension)*
- Atherosclerosis (e.g., coronary artery disease, peripheral vascular disease)

**Gastrointestinal conditions**
- Gastroesophageal reflux disease
- Gastritis
- Inflammatory bowel disease (e.g., Crohn’s disease, ulcerative colitis)
- Food sensitivity/allergies (e.g., celiac disease, lactose intolerance)
- Irritable bowel syndrome

**Endocrine and Metabolic conditions**
- Thyroid disorders (e.g., Hashimoto’s thyroiditis, Graves’ disease)
- Pancreatic disorders (e.g., diabetes)
- Obesity
- Hyperlipidemia

**Mental and Behavioral conditions**
- *Mood disorders (e.g., depression, bi-polar)*
- Anxiety
Musculoskeletal conditions
- Affecting upper extremities (e.g., frozen shoulder, bicipital tendinitis, carpal tunnel syndrome, epicondylitis)
- Affecting lower extremities (e.g., meniscal injuries, compartment syndrome, bursitis)
- Affecting the axial structures (e.g., whiplash, disc herniation, spinal stenosis, spondylolisthesis, TMJ)
- Osteoarthritis
- Osteoporosis

Neurological conditions
- *Stroke
- *Radiculopathies (e.g., nerve root, sciatica)
- Peripheral neuropathy
- Headache (e.g., cluster, tension, migraine, sinus, trauma)
- Sleep disorders (narcolepsy, sleep apnea, insomnia)

Pulmonary conditions
- Asthma
- Respiratory tract infections (e.g., sinusitis, viral infections, strep throat, bronchitis, pneumonia)
- Allergies
- *Pneumothorax

Reproductive conditions
- Menstrual
- Infertility (e.g., polycystic ovarian syndrome, endometriosis)
- Menopause

Miscellaneous
- Multi-system conditions (Lyme disease, chronic fatigue, fibromyalgia, temporal arteritis)
CATEGORY 2 Moderately Seen Conditions

Cardiovascular
- *Myocardial infarction
- *Angina pectoris
- *Heart failure
- *Deep vein thrombosis
- Raynaud’s disease
- *Aneurysms

Dermatological conditions
- Noncontagious skin conditions (cellulitis, shingles, acne, eczema, psoriasis, alopecia)

Gastrointestinal conditions
- Peptic ulcer (e.g., H. pylori, Campylobacter)
- *Diverticular disease (e.g., diverticulosis, diverticulitis)
- Hemorrhoids
- Gallbladder conditions (e.g., cholelithiasis, cholecystitis)

Hematological conditions
- Anemia
- Bleeding disorders

Infectious Disease
- Sexually transmitted infections
- Tuberculosis
- *Viral infections (e.g., infectious mononucleosis, influenza, meningitis, conjunctivitis)

Mental and Behavioral conditions
- Attention deficit disorder (ADD)/Attention deficit hyperactivity disorder (ADHD)
- Post-traumatic stress disorder (PTSD)

Neurological conditions
- *Transient ischemic attack (TIA)
- Parkinson’s disease
- *Vertigo
- Bell’s palsy
- Trigeminal neuralgia
- *Concussion and traumatic brain injury (TBI)

Pulmonary conditions
- Chronic obstructive pulmonary disease

Reproductive conditions
- Uterine (fibroids and bleeding)

Miscellaneous
- Autoimmune disorders [systemic lupus erythematosus (SLE), rheumatoid arthritis (RA)]
CATEGORY 3 Least Frequently Seen Conditions

Dermatological conditions
- *Contagious skin conditions (lice, fungal infections, scabies)
- *Skin cancers (e.g., basal cell, squamous cell, melanoma)
- Burns

Endocrine and Metabolic conditions
- Adrenal disorders (e.g., Cushing’s, Addison’s)

Gastrointestinal conditions
- *Appendicitis
- Hepatitis
- Cirrhosis
- *Pancreatitis

Hematological conditions
- Leukemia/lymphoma
- Hemochromatosis

Infectious Disease
- *Bacterial infections (e.g., staph, MRSA, impetigo, meningitis)
- Childhood infectious conditions (measles, mumps, rubella, pertussis)
- Parasitic infections
- Foodborne illness

Mental and Behavioral conditions
- Autism spectrum
- *Suicidality
- *Eating disorders (anorexia nervosa, bulimia nervosa)

Neurological conditions
- Multiple sclerosis (MS)
- Dementia (e.g., Alzheimer’s disease)
- Epilepsy

Oncology (lung, stomach, colon, pancreas, breast, prostate, uterine, bone, liver, cervical)

Ophthalmology/ENT

Reproductive conditions
- *Complications related to pregnancy
- Breast conditions (e.g., mass, mastitis)
- Male Infertility
- Erectile dysfunction (ED)
- Prostate conditions (benign prostatic hyperplasia, prostatitis)

Urinary/Renal conditions
- *Kidney Stones
- *Infections (UTI, cystitis, pyelonephritis)
- Incontinence
The Chinese Herbology Expanded Content Outline
(Effective as of February 1, 2014)

**Note to Candidate:** This document serves as a guide to assist in examination preparation for candidates who have met NCCAOM® eligibility requirements. Below is the content outline for the Chinese Herbology examination, along with the competency statements.

**DOMAIN I: Safety and Quality (10% of Total Exam)**

A. Herbs and Herbal Formulas
   1. Cautions and contraindications (e.g., condition-dependent, incompatibility)
      - Identify cautions and contraindications for herbs and herbal formulas (e.g., condition-dependent, incompatibility)
   2. Herb/drug interactions
      - Recognize potential herb/drug interactions
      - Describe strategies to avoid herb/drug interactions
   3. Toxicity
      - Identify potential toxicity of Chinese herbs and herbal formulas
      - Describe strategies to prevent toxicity of Chinese herbs and herbal formulas
   4. Potential adverse effects
      - Identify potential adverse effects of Chinese herbs and herbal formulas
      - Prevent and resolve the adverse effects of Chinese herbs and herbal formulas

B. Herbal Purchasing and Dispensing
   1. Identification of raw herbs by appearance, smell, and taste
      - Recognize the appearance of raw Chinese herbs
      - Identify the quality of raw Chinese herbs by appearance, smell, and taste
2. Identification of products containing endangered species, animal products, and potential allergens, (e.g., wheat, soy, sulfa)
   - Recognize Chinese herbs, herbal formulas and herbal products containing endangered species, animal products, and potential allergens (e.g., wheat, soy, sulfa)
   - Identify patient allergies to prevent potential allergic reactions to Chinese herbs, herbal formulas and herbal products
   - Apply substitutions for individual endangered species, animal products, and potential allergens (e.g., wheat, soy, sulfa) in Chinese herbs and herbal formulas

3. Recognition of potential contamination of stored herbs
   - Identify signs of contamination of stored Chinese herbs and herbal products
   - Identify substitutions for contaminated Chinese herbs and herbal products

4. Identification of product manufacturers in compliance with current Good Manufacturing Practice standards
   - Monitor Chinese herbs and herbal products for expiration dates
   - Assess the quality of Chinese herbs and herbal products according to current Good Manufacturing Practice (cGMP) standards

**DOMAIN II: Treatment Plan: Develop a Comprehensive Treatment Plan Using Principles of Chinese Herbology Based Upon Patient’s Presentation and Diagnosis**
(60% of Total Exam)

A. Recommend Chinese herbs for Individual Patients Based on Assessment
   1. Treatment strategies/methods of Chinese herbal medicine (e.g., purging, harmonizing, sweating)
      - Identify treatment strategies/methods of Chinese herbs and herbal formulas
      - Apply/prescribe Chinese herbs and herbal formulas based on the treatment strategies/methods of Chinese herbs and herbal formulas
2. Individual herbs
   a.) Functions and indications
      • Identify the functions and indications of individual Chinese herbs
      • Identify the functions and indications of processed forms of Chinese herbs [e.g.,
        honey-processed (mi zhi), vinegar-processed (cu zhi), dry-fried (chao)]
      • Apply/prescribe individual Chinese herbs for patients based on presenting signs
        and symptoms
   
   b.) Combinations of Chinese herbs (Dui Yao)
      • Identify the functions and indications of combinations of Chinese herbs
      • Apply/prescribe combinations of Chinese herbs for patients based on presenting
        signs and symptoms
   
   c.) Tastes, properties, direction, and channels entered
      • Identify characteristics (tastes, properties, directions, and channels entered) of
        Individual Chinese herbs
      • Apply/prescribe herbs for individual patients based on Chinese herb
        characteristics (tastes, properties, directions, and channels entered)

3. Chinese herbal formulas (Refer to Appendix of Chinese Herbal Formulas)
   a.) Functions and indications
      • Identify the functions and indications of Chinese herbal formulas
      • Apply/prescribe Chinese herbal formulas for individual patients based on
        presenting signs and symptoms
   
   b.) Ingredients
      • Identify the ingredients of Chinese herbal formulas
      • Apply/prescribe Chinese herbal formulas for individual patients
      • Identify potential substitutions for individual ingredients in Chinese herbal
        formulas
c.) Structure (e.g., chief (Jun); deputy (Chen); guiding herbs)
   - Identify and analyze the structure of Chinese herbal formulas [e.g., chief (Jun); deputy (Chen); guiding herbs]
   - Apply/prescribe Chinese herbs based on the theory of Chinese herbal formula structure

d.) Modifications
   - Modify Chinese herbal formulas based on a patient’s presenting signs, symptoms, and medical history

B. Formulate and Administer Herbal Recommendation
   1. Form of administration (e.g., decoction, granules, topical)
      - Differentiate between forms of administration of Chinese herbs
      - Apply/prescribe Chinese herbs, herbal formulas, and herbal products for individual patients based on forms of administration
      - Advise individual patients on the use of Chinese herbs, herbal formulas and herbal products based on forms of administration

   2. Preparation of herbs and herbal formulas
      - Demonstrate knowledge of preparation methods for individual Chinese herbs and herbal formulas
      - Advise individual patients on the preparation methods for individual Chinese herbs and herbal formulas

   3. Dosage of herbs and formulas
      - Demonstrate knowledge of common dosages of individual Chinese herbs and herbal formulas
      - Apply/prescribe appropriate dosages of Chinese herbs and herbal formulas based on a patient’s presenting signs, symptoms and medical history

C. Chinese Dietary Therapy
   - Identify the characteristics, actions, and indications of foods based on TCM principles
   - Advise individual patients on the use of foods and dietary therapy in accordance with TCM principles
DOMAIN III: Patient Management: Patient Education and Treatment Evaluation
(30% of Total Exam)

A. Patient Education
   • Advise individual patients of the benefits and expectations of Chinese herbal therapy
   • Advise individual patients of the potential side-effect(s) and risks of Chinese herbal therapy, including informed consent.

B. Treatment Evaluation and Modification
   • Recognize and anticipate Chinese herbal therapy clinical outcomes for individual patients
   • Assess effectiveness of Chinese herbal therapy in individual patients, based on presenting signs and symptoms
   • Modify treatment plans for individual patients based on effectiveness of Chinese herbal therapy
   • Assess the condition of individual patients for appropriate medical referral and intervention
Appendix of Formulas: Reference of Common Chinese Herbal Formulas

(Please Note: Additional formulas not listed in the Appendix may appear on the exam as distractors to the correct answer.)

- Ba Zhen Tang (Eight-Treasure Decoction)
- Ba Zheng San (Eight-Herb Powder for Rectification)
- Bai He Gu Jin Tang (Lily Bulb Decoction to Preserve the Metal)
- Bai Hu Tang (White Tiger Decoction)
- Bai Tou Weng Tang (Pulsatilla Decoction)
- Ban Xia Bai Zhu Tian Ma Tang (Pinellia, Atractylodis Macrocephalae, and Gastrodia Decoction)
- Ban Xia Hou Po Tang (Pinellia and Magnolia Bark Decoction)
- Ban Xia Xie Xin Tang (Pinellia Decoction to Drain the Epigastrium)
- Bao He Wan (Preserve Harmony Pill)
- Bei Mu Gua Lou San (Fritillaria and Trichosanthes Fruit Powder)
- Bei Xie Fen Qing Yin (Dioscorea Hypoglaucua Decoction to Separate the Clear)
- Bu Yang Huan Wu Tang (Tonify the Yang to Restore Five (Tenths) Decoction)
- Bu Zhong Yi Qi Tang (Tonify the Middle and Augment the Qi Decoction)
- Cang Er Zi San (Xanthium Powder)
- Chai Ge Jie Ji Tang (Bupleurum and Kudzu Decoction)
- Chai Hu Shu Gan San (Bupleurum Powder to Spread the Liver)
- Chuan Xiong Cha Tiao San (Ligusticum Chuanxiong Powder to be Taken with Green Tea)
- Da Bu Yin Wan (Great Tonify the Yin Pill)
- Da Chai Hu Tang (Major Bupleurum Decoction)
- Da Cheng Qi Tang (Major Order the Qi Decoction)
- Da Jian Zhong Tang (Major Construct the Middle Decoction)
- Dan Shen Yin (Salvia Drink)
- Dang Gui Bu Xue Tang (Tangkuei Decoction to Tonify the Blood)
- Dang Gui Liu Huang Tang (Tangkuei and Six-Yellow Decoction)
- Dao Chi San (Guide Out the Red Powder)
- Ding Chuan Tang (Arrest Wheezing Decoction)
• Ding Xiang Shi Di Tang (Clove and Persimmon Calyx Decoction)
• Du Huo Ji Sheng Tang (Angelica Pubescens and Sangjisheng Decoction)
• Du Qi Wan (Capital Qi Pill)
• Er Chen Tang (Two-Cured Decoction)
• Er Miao San (Two-Marvel Powder)
• Er Xian Tang (Two-Immortal Decoction)
• Er Zhi Wan (Two-Ultimate Pill)
• Fu Yuan Huo Xue Tang (Revive Health by Invigorating the Blood Decoction)
• Gan Cao Xie Xin Tang (Licorice Decoction to Drain the Epigastrium)
• Gan Mai Da Zao Tang (Licorice, Wheat, and Jujube Decoction)
• Ge Gen Huang Lian Huang Qin Tang (Kudzu, Coptis, and Scutellaria Decoction)
• Ge Gen Tang (Kudzu Decoction)
• Ge Xia Zhu Yu Tang (Drive Out Blood Stasis Below the Diaphragm Decoction)
• Gu Jing Wan (Stabilize the Menses Pill)
• Gui Pi Tang (Restore the Spleen Decoction)
• Gui Zhi Fu Ling Wan (Cinnamon Twig and Poria Pill)
• Gui Zhi Shao Yao Zhi Mu Tang (Cinnamon Twig, Peony, and Anemarrhena Decoction)
• Gui Zhi Tang (Cinnamon Twig Decoction)
• Huai Hua San (Sophora Japonica Flower Powder)
• Huang Lian E Jiao Tang (Coptis and Ass-Hide Gelatin Decoction)
• Huang Lian Jie Du Tang (Coptis Decoction to Relieve Toxicity)
• Huo Xiang Zheng Qi San (Agastache Powder to Rectify the Qi)
• Ji Chuan Jian (Benefit the River (Flow) Decoction)
• Jia Jian Wei Rui Tang (Modified Solomon’s Seal Decoction)
• Jiao Ai Tang (Ass-Hide Gelatin and Mugwort Decoction)
• Jin Gui Shen Qi Wan (Kidney Qi Pill from the Golden Cabinet)
• Jin Ling Zi San (Melia Toosendan Powder)
• Jin Suo Gu Jing Wan (Metal Lock Pill to Stabilize the Essence)
• Ju Pi Zhu Ru Tang (Tangerine Peel and Bamboo Shavings Decoction)
• Juan Bi Tang (Remove Painful Obstructions from *Awakening of the Mind in Medical Studies*)
• Li Zhong Wan (Regulate the Middle Pill)
• Liang Fu Wan (Galangal and Cyperus Pill)
• Liang Ge San (Cool the Diaphragm Powder)
• Ling Gui Zhu Gan Tang (Poria, Cinnamon Twig, Atractylodis Macrocephalae and Licorice Decoction)
• Ling Jiao Gou Teng Tang (Antelope Horn and Uncaria Decoction)
• Liu Wei Di Huang Wan (Six-Ingredient Pill with Rehmannia)
• Liu Yi San (Six-to-One Powder)
• Long Dan Xie Gan Tang (Gentiana Longdancao Decoction to Drain the Liver)
• Ma Huang Tang (Ephedra Decoction)
• Ma Xing Shi Gan Tang (Ephedra, Apricot Kernel, Gypsum and Licorice Decoction)
• Ma Zi Ren Wan (Hemp Seed Pill)
• Mai Men Dong Tang (Ophiopogonis Decoction)
• Mu Li San (Oyster Shell Powder)
• Nuan Gan Jian (Warm the Liver Decoction)
• Ping Wei San (Calm the Stomach Powder)
• Pu Ji Xiao Du Yin (Universal Benefit Decoction to Eliminate Toxin)
• Qi Ju Di Huang Wan (Lycium Fruit, Chrysanthemum and Rehmannia Pill)
• Qiang Huo Sheng Shi Tang (Notopterygium Decoction to Overcome Dampness)
• Qing Wei San (Clear the Stomach Powder)
• Qing Gu San (Cool the Bones Powder)
• Qing Hao Bie Jia Tang (Artemisia Annua and Soft-Shelled Turtle Shell Decoction)
• Qing Qi Hua Tan Wan (Clear the Qi and Transform Phlegm Pill)
• Qing Wen Bai Du San (Clear Epidemics and Overcome Toxicity Decoction)
• Qing Ying Tang (Clear the Nutritive Level Decoction)
• Qing Zao Jiu Fei Tang (Eliminate Dryness and Rescue the Lungs Decoction)
• Ren Shen Bai Du San (Ginseng Powder to Overcome Pathogenic Influences)
• Run Chang Wan (Moisten the Intestines Pill from Master Shen’s Book)
• San Zi Yang Qin Tang (Three-Seed Decoction to Nourish One’s Parents)
• Sang Ju Yin (Mulberry Leaf and Chrysanthemum Decoction)
• Sang Piao Xiao San (Mantis Egg-Case Powder)
• Sang Xing Tang (Mulberry Leaf and Apricot Kernel Decoction)
• Shao Fu Zhu Yu Tang (Drive Out Blood Stasis in the Lower Abdomen Decoction)
• Shao Yao Gan Cao Tang (Peony and Licorice Decoction)
• Shao Yao Tang (Peony Decoction)
• Shen Ling Bai Zhu San (Ginseng, Poria and Atractylodes Macrocephala Powder)
• Shen Tong Zhu Yu Tang (Drive Out Blood Stasis from a Painful Body Decoction)
• Sheng Hua Tang (Generation and Transformation Decoction)
• Sheng Jiang Xie Xin Tang (Fresh Ginger Decoction to Drain the Epigastrium)
• Sheng Ma Ge Gen Tang (Cimicifuga and Kudzu Decoction)
• Sheng Mai San (Generate the Pulse Powder)
• Shi Hui San (Ten Partially-Charred Substance Powder)
• Shi Pi Yin (Bolster the Spleen Decoction)
• Shi Quan Da Bu Tang (All Inclusive Great Tonifying Decoction)
• Shi Xiao San (Sudden Smile Powder)
• Shou Tai Wan (Fetus Longevity Pill)
• Si Jun Zi Tang (Four-Gentlemen Decoction)
• Si Ni San (Frigid Extremities Powder)
• Si Ni Tang (Frigid Extremities Decoction)
• Si Shen Wan (Four-Miracle Pill)
• Si Wu Tang (Four-Substance Decoction)
• Su Zi Jiang Qi Tang (Perilla Fruit Decoction for Directing Qi Downward)
• Suan Zao Ren Tang (Sour Jujube Decoction)
• Tai Shan Pan Shi San (Powder that Gives the Stability of Mount Tai)
• Tao He Cheng Qi Tang (Peach Pit Decoction to Order the Qi)
• Tian Ma Gou Teng Yin (Gastrodia and Uncaria Decoction)
• Tian Tai Wu Yao San (Top-quality Lindera Powder)
• Tian Wang Bu Xin Dan (Emperor of Heaven’s Special Pill to Tonify the Heart)
• Tiao Wei Cheng Qi Tang (Regulate the Stomach and Order the Qi Decoction)
• Tong Xie Yao Fang (Important Formula for Painful Diarrhea)
• Wan Dai Tang (End Discharge Decoction)
• Wei Jing Tang (Reed Decoction)
• Wen Dan Tang (Warm the Gallbladder Decoction)
• Wen Jing Tang (Warm the Menses Decoction)
• Wu Ling San (Five-Ingredient Powder with Poria)
• Wu Pi San (Five-Peel Powder)
• Wu Wei Xiao Du Yin (Five-Ingredient Decoction to Eliminate Toxin)
• Wu Zhu Yu Tang (Evodia Decoction)
• Xi Jiao Di Huang Tang (Rhinoceros Horn and Rehmannia Decoction)
• Xiang Ru San (Elsholtzia Powder)
• Xiang Su San (Cyperus and Perilla Leaf Powder)
• Xiao Chai Hu Tang (Minor Bupleurum Decoction)
• Xiao Cheng Qi Tang (Minor Order the Qi Decoction)
• Xiao Feng San (Eliminate Wind Powder from Orthodox Lineage)
• Xiao Huo Lou Dan (Minor Invigorate the Collaterals Special Pill)
• Xiao Ji Yin Zi (Cephalanoplos Decoction)
• Xiao Jian Zhong Tang (Minor Construct the Middle Decoction)
• Xiao Qing Long Tang (Minor Blue-Green Dragon Decoction)
• Xiao Yao San (Rambling Powder)
• Xie Bai San (Drain the White Powder)
• Xie Huang San (Drain the Yellow Powder)
• Xie Xin Tang (Drain the Epigastrium Decoction)
• Xing Su San (Apricot Kernel and Perilla Leaf Powder)
• Xuan Fu Dai Zhe Tang (Inula and Hematite Decoction)
• Xue Fu Zhu Yu Tang (Drive Out Stasis in the Mansion of Blood Decoction)
• Yang He Tang (Yang-Heartening Decoction)
• Yi Guan Jian (Linking Decoction)
• Yin Chen Hao Tang (Artemisia Yinchenhao Decoction)
• Yin Qiao San (Honeysuckle and Forsythia Powder)
• You Gui Wan (Restore the Right (Kidney) Pill)
• You Gui Yin (Restore the Right (Kidney) Decoction)
• Yu Nu Jian (Jade Woman Decoction)
• Yu Ping Feng San (Jade Windscreen Powder)
• Yue Ju Wan (Escape Restraint Pill)
• Zhen Gan Xi Feng Tang (Sedate the Liver and Extinguish Wind Decoction)
• Zhen Ren Yang Zang Tang (True Man’s Decoction to Nourish the Organs)
• Zhen Wu Tang (True Warrior Decoction)
• Zhi Bai Di Huang Wan (Anemarrhena, Phellodendron and Rehmannia Pill)
• Zhi Gan Cao Tang (Honey-Fried Licorice Decoction)
• Zhi Sou San (Stop Coughing Powder)
• Zhu Ling Tang (Polyporus Decoction)
• Zhu Ye Shi Gao Tang (Lophatherus and Gypsum Decoction)
• Zuo Gui Wan (Restore the Left (Kidney) Pill)
• Zuo Gui Yin (Restore the Left (Kidney) Decoction)
• Zuo Jin Wan (Left Metal Pill)
Bibliographies

In addition to the NCCAOM content outlines, the suggested bibliographies have been updated. Attached are the new bibliographies for the certification in Chinese Herbology examinations. These bibliographies are effective in 2017.

Foundations of Oriental Medicine Bibliography

The Content Outline is the primary resource for studying for this examination. The purpose of this Bibliography is only to provide the candidate with suggested resources to utilize in preparation for the examination. Candidates should feel free to consider other resources that cover the material in the Content Outline.

There is no single text recommended by NCCAOM. All NCCAOM modules and examinations reflect practice in the United States as determined by the most recent job analysis.

NCCAOM’s item writers and examination development committee members frequently use the following texts as resources; however, the sources used are not limited to the books listed here. The NCCAOM® does not endorse any third-party study/preparation guides.


Biomedicine Bibliography

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Chinese Herbology Bibliography

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Primary Sources


Secondary Sources


Websites
Convention on International Trade in Endangered Species of Wild Fauna and Flora (CITES)
https://cites.org/eng/disc/species.php

U. S. Food and Drug Administration [Current Good Manufacturing Practices (CGMP)]
Examination Nomenclature Cross-Reference

There are differences in the English language literature regarding pulses and other terminology in Oriental medicine. A cross-reference of terms that are frequently used in English language literature is provided below to assist you; however, this list is not intended to be all-inclusive. It is also provided in the form of a glossary in the English language version of Foundations of Oriental Medicine, Acupuncture, and Chinese Herbology modules/examinations. The official reference for the names of typical pulses is referenced in *The Web That Has No Weaver*.

1. **Theory**
   - Wu Xing = Five Phases = Five Elements
   - Sheng Cycle = interpromoting cycle = generation cycle
   - Ke Cycle = Ko Cycle = interacting cycle = control cycle
   - Qi = Chi = Ki = energy

2. **Physiology**
   - Qi = Chi = Ki = (vital) energy
   - Yuan Qi = primary Qi = original energy
   - Zong Qi = pectoral Qi
   - Ying Qi = nourishing energy
   - Wei Qi = protective (defensive) energy
   - Jing = essence
   - Shen = spirit
   - Xue = Blood
   - Jin Ye = Ching Ye = body fluids
   - Zang Fu = the organs = Yin and Yang organs
   - Zang = viscera = Yin organs
   - Fu = bowels = Yang organs

3. **Pathology and Diagnosis**
   - Xu = deficient = empty
   - Shi = Shih = excess = full
   - Sheng Cycle = Overacting = excessive action on the interacting (Ke) Cycle
   - Wu Cycle = Counteracting = insult cycle
   - Nei Yin = Endogenous = internal factors
   - Wai Yin = Exogenous = external factors
   - Wai Xie = External pathogenic factor = outside evil
   - She Tai = Tongue fur = moss or coating
   - She Ti = Tongue proper = tongue body
   - She Pang Da = Flabby tongue = swollen, or enlarged tongue

Pulse locations:
   - Cun (tsun) = inch = distal location
   - Guan (Kuan) = gate/bar = middle location
   - Chi (chih) = cubit or foot = proximal location
4. **Technique**

   - Bu = supplement = tonify
   - Xie = reduce = drain = sedate = disperse

5. **Channels and Points**

   - Channels = Meridians = Jing = usually Primary channels = Main (Principal, Regular) meridians
   - Muscle channels = tendino-muscular meridians = Jing Jin
   - Divergent meridians = distinct channels = Jing Pieh
   - Luo = connecting channels = Collaterals
   - Extra channels = Miscellaneous (Odd, Curious, Extraordinary, Ancestral) meridians or vessels:
     - Du Mai (Mo) = Governing Vessel or Meridian or Channel = GV
     - Ren Mai (Mo) = Conception Vessel = CV
     - Dai (Tai) Mai (Mo) = Belt (Girdle) Vessel
     - San Jiao = Triple Warmer = Triple burning Space
     - Cun = tsun = inch = A.C.I.
   - Yuan point = source point
   - Luo point = connecting or Junction point = Lo point
   - Xi point = Cleft or Accumulating point

5 Shu points = 5 Transporting, “Antique” or “Command” points of the Primary channels = Five Element Points:

   - Well = Jing = Ting
   - Spring = Ying = Yuong or Rong = Gushing
   - Stream = Shu or Yu = Transporting
   - River = Jing = King = Ching = Traversing
   - Sea = He = Ho = Uniting

   - Back-Shu points = Associated or Associated Effect points = A.E.P. = yu point = shu point
   - Front-Mu = Mo = Alarm point = Bo
   - Reinforcing point = (mother point) = tonification point
   - Reducing point = (son point) = sedation, dispersing or draining point
   - Confluent points = Master (and coupled) or Key or Opening points of the Eight Extra Channels
   - Coalescent points = points of intersection between two or more channels = Crossing or Intersection points
   - Influential points = Eight Meeting (or Assembling) points of Energy, Blood and certain organs and tissues
   - Remote points = distal points
   - Zi Wu Liu Zhu = Horary Cycle = 24 hour circulation of energy through the channels = midday/midnight cycle = organ clock

**Reference:**

Sample Questions

Sample Questions for Each Examination Module

The following questions represent different types and levels of questions that may appear on the exam. These questions do not necessarily represent the level of difficulty of the examination nor do they represent the percentage of questions regarding each area. This is merely a sample of the possible format and variety of questions to assist in preparation for the exams.

Foundation of Oriental Medicine

FOM-1
According to Five Element theory, which taste, color, and organ are associated with Metal?

(A) bitter, red, Lung
(B) pungent, white, Lung
(C) spicy, yellow, Spleen
(D) sweet, yellow, Spleen

FOM-2
A 29-year-old woman complains of hypochondriac pain and fullness for several months. She is also experiencing dry mouth and throat, depression, moodiness, scanty menstrual flow, and breast pain. She has a pale tongue and a thready, wiry pulse. What is the most appropriate diagnosis?

(A) Liver Fire insulting Lung
(B) Liver Qi stagnation transforming to Fire
(C) Liver Qi stagnation with Blood deficiency
(D) Liver Fire attacking Stomach

FOM-3
A patient complains of shortened menstruation with scanty, dull red, clear, thin menses. She has coldness in the lower abdomen. Her tongue is pale, tender, with white fur. Her pulse is deep and tight. Which of the following is the most appropriate treatment principle?

(A) activate the channel and clear Heat
(B) tonify Yang and move Blood
(C) tonify Yin and clear Heat
(D) warm the channel and expel Cold
Biomedicine

BIO-1
A 40-year-old woman with an enlarged thyroid gland is most likely deficient in which of the following?

(A) iodine
(B) iron
(C) magnesium
(D) zinc

BIO-2
A mother reports that her active eight-year-old son has been fussy, thirsty, and tired for the past 24 hours. She also states that he complains of a headache and constipation. His blood pressure is low with a rapid pulse. Which of the following would most likely be suspected?

(A) anxiety attack
(B) dehydration
(C) food poisoning
(D) hyperthyroidism

BIO-3
A lethargic, 53-year-old male patient fell and hit his head six hours before his appointment. He now presents with confusion, difficulty remembering the event, and has vomited twice since the fall. What is the best course of action for this patient at this time?

(A) treat him and recommend that he consult his physician
(B) treat him and retain him in the office for observation
(C) do not treat him, but refer him to a neurologist within 72 hours
(D) do not treat him, but refer him immediately to the emergency department
Chinese Herbology

CH-1
Fu Zi Li Zhong Wan (Prepared Aconite Pill to Regulate the Middle) is most indicated for which of the following?

(A) diarrhea with burning sensation and a slippery, rapid pulse
(B) constipation with abdominal pain and a flooding pulse
(C) constipation with hard stools and a thin, rapid pulse
(D) diarrhea with cold extremities and a faint pulse

CH-2
A 50-year-old female presents with a chief complaint of hot flashes. She feels warmer in the evening and while sleeping. Her tongue is bright red and peeled. Her pulse is rapid and thin. Which of the following formulas is most appropriate for this patient?

(A) Gui Pi Tang (Restore the Spleen Decoction)
(B) Liu Jun Zi Tang (Six-Gentlemen Decoction)
(C) Liu Wei Di Huang Wan (Six-Ingredient Pill with Rehmannia)
(D) Si Wu Tang (Four-Substance Decoction)

CH-3
A patient has been taking Yin Qiao San (Honeysuckle and Forsythia Powder) for a sore throat, swollen tonsils, fever, cough, and headache. The tongue is red and the pulse is rapid and floating. Now, the patient presents with sinus congestion, frontal headache and a thick, greenish nasal discharge. Which of the following is the most appropriate formula for the patient at this time?

(A) Cang Er Zi San (Xanthium Powder)
(B) Ding Chuan Tang (Arrest Wheezing Decoction)
(C) Sang Ju Yin (Mulberry Leaf and Chrysanthemum Decoction)
(D) Wen Dan Tang (Warm the Gallbladder Decoction)

Answers:
FOM-1 = B  BIO-1 = A  CH-1 = D
FOM-2 = C  BIO-2 = B  CH-2 = C
FOM-3 = D  BIO-3 = D  CH-3 = A
Frequently Asked Questions

Examination Administration Frequently Asked Questions and Answers (Q&A)

In an effort to assist our candidates and school representatives to better understand our examination processes, we have created a list of questions and answers that explain in detail our examination administration policies and procedures. NCCAOM has a high level of commitment to upholding the integrity, validity and fairness of the NCCAOM certifications as meaningful measure of entry level competency in order to protect the public. This commitment cannot be overstated; it is a requirement of our mission, which is to assure the safety and well-being of the public and to advance the professional practice of acupuncture and Oriental medicine by establishing and promoting national evidence-based standards of competence and credentialing.

**Question #1: When can I take the next examination as I do not see a schedule of exams on the website?**

**Answer:** NCCAOM provides year-round, adaptive testing for four of our English language certification exams, which means that “Approved to Test” candidates (those who have received an Authorization to Test (ATT) letter in the mail from NCCAOM) can register for the Foundations of Oriental Medicine (FOM), Biomedicine (BIO), Acupuncture with Point Location (ACPL), and Chinese Herbology (CH) NCCAOM examination(s) throughout the year, pending availability at their desired Pearson VUE Professional Test Center locations.

During the second half of 2017, the Foundations of Oriental Medicine exam will be offered in linear format for two (2), two-week administration periods during August 14-26 and November 6-18, 2017. The adaptive, year-round FOM exam will conclude after June 30, 2017 (view the 2017 Examination Administration Changes Section of the NCCAOM website).

For foreign language exam administrations, view Foreign Language certification exam administration and registration deadlines on the General Examination Information section of the NCCAOM website.

Candidates can register for all NCCAOM examination(s) by calling Pearson VUE directly or registering online (the ATT letter provides detailed registration information and instructions). Candidates can register for their exams according to their own schedule and at their own convenience within the four-year open application period. NCCAOM exams are administered at over 250 Pearson VUE Professional Test Centers around the world. When candidates register, they pay Pearson VUE directly for their exams using Visa, MasterCard or American Express credit cards.
Question #2: What does open registration mean and why is there no application submission or registration deadline announcement?

Answer: Open registration means that candidates will not have to wait for the NCCAOM adaptive exams in English for Foundations of Oriental Medicine (concludes after June 30, 2017), Biomedicine, Acupuncture with Point Location, and Chinese Herbology examinations to be announced [the exception: foreign language examinations and the Foundations of Oriental Medicine (linear) exam module]. Once candidates are approved to test, they can register and schedule their exam for any time that is available at a Pearson VUE Professional Test Center. This means that candidates can test and be finished with the examination cycles quicker and test at a time more convenient for them.

Please remember that candidates must still allow 6-8 weeks for the processing of their application before they are approved to test. It is also important to remember that candidates have four years from the date that NCCAOM receives their application to test and become certified.

Candidates who need to retake an examination must wait 45 calendar days from the previous recorded test. Candidates will not be allowed to re-schedule their previously failed examination prior to the 45-day waiting period for any reason. The 45-day waiting period allows for the candidate to receive their diagnostic report and review before the exam is repeated.

Question #3: Which exams are offered year-round?

Answer: The NCCAOM offers the following adaptive examinations in English throughout the year for 2017:

- Acupuncture with Point Location
- Biomedicine
- Chinese Herbology

The Foundations of Oriental Medicine (FOM) exam module will be offered in a computer-based fixed form (linear) format during two (2), two-week administration periods:

- August 14-26, 2017
- November 6-18, 2017

Question #4: What about those who want to take the exam(s) in Chinese or Korean?

Answer: The foreign language examination administration will be offered:

Chinese Exams:
- June 14-24, 2017
- September 25 – October 7, 2017

Korean* Exams:
- June 14-24, 2017
*Note: The Korean language examination modules that do not have sufficient number of candidates registered to take the exams over the two-week examination administration period will be canceled and the testers will be refunded by Pearson VUE to the credit card on file.

Each exam consists of 100 multiple-choice questions with a 2 ½ hour time limit. Expanded content outlines are available in Chinese or Korean on the Examination Preparation section of the NCCAOM website.

**Question #5: Are there plans to combine any other exams or make any changes with any of the exams?**

**Answer:** In the interest of getting more questions to increase the number of updated exam items to be used for scoring on the exams, the Foundations of Oriental Medicine (FOM) exam module will be administered in a computer-based, fixed form (linear) format for two (2), two-week administration periods consisting of 130 multiple-choice items with an allotted time of 3.25 hours.

<table>
<thead>
<tr>
<th>Foundations of Oriental Medicine Exam Module</th>
</tr>
</thead>
<tbody>
<tr>
<td>2017 Exam Dates</td>
</tr>
<tr>
<td>August 14-26, 2017</td>
</tr>
<tr>
<td>November 6-18, 2017</td>
</tr>
</tbody>
</table>

**Question #6: What does year-round testing mean for scoring? Does this mean that exam results will be received faster?**

**Answer:** Yes. Year-round testing made possible by adaptive testing (see Questions 7 and 8 for information about adaptive testing) will enable NCCAOM to provide candidates with immediate on screen “Preliminary Pass or Fail” status. This means that candidates will receive a preliminary pass/fail screen immediately after they submit their answers, while at the Pearson VUE Professional Test Center.

The official results will be mailed within 20-30 business days from completion of the examination. Candidates can request that their examination results be sent to the state licensing boards at a much quicker rate, which means that the time passed before receiving the state license will be greatly reduced.

Preliminary Pass or Fail status will not be provided for any linear exams (foreign languages and August and November 2017 Foundations of Oriental Medicine exams). The official results for the Foreign Language Exams and Foundations of Oriental Medicine (linear format) will be mailed approximately 45 business days after the last date of the examination administration period.
Question #7: What is the format of the examinations?

Answer: The adaptive Foundations of Oriental Medicine, Biomedicine, Acupuncture with Point Location, and Chinese Herbology examinations each have 100 multiple-choice questions with a 2 ½ hour time limit.

<table>
<thead>
<tr>
<th>Examinations</th>
<th>Number of Multiple-Choice Questions</th>
<th>Allotted Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foundations of Oriental Medicine</td>
<td>100</td>
<td>2.5 hours</td>
</tr>
<tr>
<td>(last administration June 30, 2017)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Biomedicine</td>
<td>100</td>
<td>2.5 hours</td>
</tr>
<tr>
<td>Acupuncture with Point Location</td>
<td>100</td>
<td>2.5 hours</td>
</tr>
<tr>
<td>Chinese Herbology</td>
<td>100</td>
<td>2.5 hours</td>
</tr>
</tbody>
</table>

In order for NCCAOM to be able to provide candidates with year-round testing and to provide an immediate preliminary pass/fail screen, we are offering candidates a form of testing called adaptive testing. What this means to the candidates is that each examination is different and is geared towards the ability of the candidate. If a question is answered correctly, the next question is slightly more difficult. If a question is answered incorrectly, the next question will be slightly easier. One feature that is required for this format is the inability to review exam questions once a question has been answered. As adaptive testing measures your content knowledge with each question, you will be unable to go back to a question once you have moved onto the next question. Adaptive testing has been used for certification testing in other healthcare areas for more than 20 years and offers one of the most reliable measures of competency.

During 2017, the Foundations of Oriental Medicine exam module will be offered in a computer-based fixed form (linear) format, to increase the number of updated exam items to be used for scoring on the exam. The exam content will not change only the administration of the exam. In the linear format, once all items have been answered, candidates can review and change answers within the remaining allotted time. Preliminary pass or fail status will not be provided after the completion of the exam at the test center. Official notification letters will be mailed 30-45 business days after the completion of the examination administration period.
### Linear Exam

<table>
<thead>
<tr>
<th>Examinations</th>
<th>Number of Multiple-Choice Questions</th>
<th>Allotted Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foundations of Oriental Medicine (August and November 2017)</td>
<td>130</td>
<td>3.25 hours</td>
</tr>
</tbody>
</table>

**Question #8: Can you explain adaptive testing in more detail and what this means to us as candidates?**

**Answer:** An internet search will help you to find many different descriptions of Computer Adaptive Testing (CAT). The easiest explanation we have is that it is a computerized test in which the computer selects the examination questions based on the individual candidate’s ability. Some have compared it to jumping a high bar – if you get over the bar, the next time the bar is higher, but if you miss, the bar is lowered. Of course, in this example, if the bar is too low you cannot pass the examination. Another analogy is to that of an interview. When someone is being interviewed, the interviewer will adjust the difficulty of the questions based on previous responses.

The objective of adaptive testing is to determine the candidate’s ability with the least amount of measurement error. It is not the number of correct or incorrect questions, but the overall score based on the difficulty of the questions, the overall examination, and the ability of the candidate. From the examinee’s perspective, the difficulty of the exam seems to tailor itself to their level of ability. In trying to determine the candidate’s ability, the exam will continue to get more and more difficult, which can provide uniformly precise scores for most test-takers.

**Question #9: What are the benefits of taking the CAT or adaptive format of the exam?**

**Answer:** There are many benefits that candidates will enjoy with adaptive, year-round testing as outlined above. These include no eligibility deadlines; application materials can be submitted at any time (allow 6-8 weeks for processing); candidates can schedule examinations at their convenience at over 250 Pearson VUE Professional Test Centers around the world; preliminary pass or fail status are available at the conclusion of the exam while at the test center, and official results can be sent, at the candidates’ request, to the state licensing boards much more quickly. The most obvious benefits are that of shorter examinations and lowest possible overall costs to candidates.

**Question #10: Is it true that the screen turns off after five minutes, from the time the computer is started by the proctor, if the first question is not answered?**

**Answer:** Yes. The first question is a legal agreement that says you will treat everything you read on the examination with the utmost and absolute confidentiality. If you do not agree to this agreement presented on screen within the allotted 5 minutes, you will be logged out of the test.
program. In addition, you will not be allowed to continue the test and your fees for that exam will not be refunded. If you agree, just press “I agree” to start the examination. To ensure you are prepared, read the full text of the Non-Disclosure Agreement and Full Terms of Use for the NCCAOM Exam below:

**Non-Disclosure Agreement and General Terms of Use for NCCAOM Exams**

“I have read and understand the Examination Instructions. I have agreed to abide by the NCCAOM® Grounds for Professional Discipline and acknowledge that if I am caught cheating on this examination, including the sharing of information after the examination is complete; I will be subject to review by the Professional Ethics and Disciplinary Committee of NCCAOM. If I am found to have violated the Grounds for Professional Discipline, I understand that my scores will be cancelled and I may not have the opportunity to test again.

Additionally, I understand that this exam is confidential and is protected by trade secret law. It is made available solely for the purpose of becoming certified by NCCAOM. I am expressly prohibited from disclosing, publishing, reproducing, or transmitting this exam, in whole or in part, in any form or by any means, verbal or written, electronic or mechanical, for any purpose.

I am the candidate whose name appears on the initial screen and as an affirmation to the Statement of Acknowledgement I signed when submitting my application. I acknowledge that I am prohibited from transmitting information about NCCAOM examination questions or content in any form to any person or entity. I also acknowledge that if I suspect a violation on the part of others, it is my responsibility to report these actions to the NCCAOM.”

**Question #11: How do I prepare for an exam?**

**Answer:** NCCAOM provides a comprehensive Study Guide for each certification program and Suggested Study Tips and Strategies for candidates preparing to take the NCCAOM exam(s). In addition, each content outline is offered separately for those who would like to go directly to the individual exam content outline.

**Question #12: Does the NCCAOM publish a list of formulas that will be tested in the Chinese Herbology examination?**

**Answer:** Yes. A list of herbal formulas is made available with the Chinese Herbology content outline on the NCCAOM website. A list of single herbs is not available.

**Question #13: Does the NCCAOM publish a list of the terminology for the channels and other terms?**

**Answer:** Yes. The NCCAOM currently provides a nomenclature list, which is a cross-reference of terms that are frequently used in the English language literature. This nomenclature list is available in each of the NCCAOM® Study Guides.
**Question #14:** I am not certain what is covered in the Foundations of Oriental Medicine Examination compared to the Acupuncture with Point Location Examination, is there something I can review?

**Answer:** Please refer to the NCCAOM® Study Guides or Content Outlines, which can be accessed through the NCCAOM website, [www.nccaom.org](http://www.nccaom.org) under the Examination Preparation section. Each exam module has an expanded and abbreviated content outline in English, Chinese, or Korean.

**Question #15:** Do all the questions have to be answered on the exam or can some answers be blank?

**Answer:** You must answer all the questions on the exam for your examination to be scored. Adaptive testing does not allow the tester to go back to a question once they have moved onto the next question. Linear format testing allows the tester to go back and review the test questions once all questions are completed.

**Question #16:** How many questions must be answered correctly to pass an examination?

**Answer:** There is NO predetermined correct number of questions that must be answered correctly in order for a candidate to pass. It is not the number of correct or incorrect questions, but the overall score based on the difficulty of the questions, the overall examination, and the ability of the candidate. For additional information, read General Considerations for Setting a Passing Standard, and Equating and Scaling: Assuring the Highest Level of Fairness for Examination Programs under the Examination Results tab and under the Exam Scoring Information section of the NCCAOM website.

**Question #17:** If I fail the exam, can I immediately sign up for the exam again?

**Answer:** No. Candidates who need to retake an NCCAOM examination must wait 45 calendar days from the previous recorded test. Candidates will not be allowed to reschedule their examination prior to the 45 day-waiting period for any reason.

NCCAOM recommends that you give yourself sufficient time to prepare for the retake of the examination that you failed. NCCAOM strongly encourages any candidate who fails an examination to seek additional study help. Speak with your school program director or faculty member, or research reputable test preparation services or publications that can assist you. The NCCAOM® Study Guides which contain the expanded content outlines are valuable resources available for your use and can be found on the NCCAOM website [www.nccaom.org](http://www.nccaom.org). Also, you are only allowed a total of five (5) opportunities to take an examination.
Question #18: I failed the exam and received my results report, what areas do I need to focus on for the next examination?

Answer: Using the results report, areas where the scaled score is below 70 units (not percentages) are the areas to focus your studies as well as take into consideration the content percentage of that section on the content outline. Please remember the scores are scaled scores, not percentages.

Question #19: I failed the exam and added all the content areas together and it was higher than 70. How is the exam scored?

Answer: The scores are scaled scores; they are not percentages. Thereby, by adding the total scores of each section and dividing by the total number is not how the scores are calculated. An explanation of the scoring procedure performed by our psychometric vendor is included on the website to help you understand the scoring procedure.

Please refer to the NCCAOM website under the Applicant Resources, Exam Preparation Center section, click on the Examination Results bar on the left, scroll to bottom of the Exam Scoring Information to the following document links for General Considerations for Setting a Passing Standard, and Equating and Scaling: Assuring the Highest Level of Fairness for Examination Programs.

Question #20: I failed the exam for the first time, how many candidates pass the exam during their first attempt?

Answer: Please refer to the pass rate comparison report for 2011-2016 below.

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<tr>
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</thead>
<tbody>
<tr>
<td>AC/APLA**</td>
<td>86.5</td>
<td>85.5</td>
<td>85.7</td>
<td>82.5</td>
<td>79.7</td>
<td>75.9</td>
</tr>
<tr>
<td>BIO</td>
<td>79.6</td>
<td>86.6</td>
<td>91.9</td>
<td>74.1</td>
<td>72.3</td>
<td>73.5</td>
</tr>
<tr>
<td>CH</td>
<td>81.2</td>
<td>78.2</td>
<td>79.8</td>
<td>80.0</td>
<td>80.2</td>
<td>78.0</td>
</tr>
<tr>
<td>FOM</td>
<td>92.8</td>
<td>92.7</td>
<td>91.8</td>
<td>83.8</td>
<td>78.1</td>
<td>78.0</td>
</tr>
</tbody>
</table>

** Acupuncture and Point Location were combined into one examination in 2008

Question #21: Is there a limit as to how many times an exam can be taken?

Answer: Yes. Candidates are only allowed a total of five (5) opportunities to take an examination. After the fifth unsuccessful attempt to pass an NCCAOM examination (all formats and/or languages inclusive), the candidate has no subsequent opportunities to test in the particular exam.
**Question #22: During my exam, I think one of the questions could have more than one correct answer, what is the procedure to have this question reviewed?**

**Answer:** At the test center, a candidate can file an incident report regarding exam content concerns with the test proctor while the item is still fresh in one's mind. Be sure to obtain a copy of the incident report number. The incident report will be forwarded onto NCCAOM’s testing staff upon request.

Also, please refer to the Examination Content Complaint section of the [NCCAOM® Certification Handbook](#). Candidates may submit concerns, believed errors in particular questions, or comments about specific aspects of the examination content, in writing to NCCAOM (examcontent@thenccaom.org) within 30 days of taking the examination. Please be as specific as possible when challenging a question(s) for the committee to review.

No content of a specific question will be discussed with candidates. **The NCCAOM never releases copies of examinations or individual examination questions.** It is important to refrain from discussing content of the examination questions with anyone other than the NCCAOM Testing Department otherwise there would be a violation of the non-disclosure agreement.

**Question #23: I passed an exam; can I find out what is my numeric score?**

**Answer:** For candidates that pass an examination, NCCAOM **does not** provide the total score of the exam nor a breakdown of the performance in each section since NCCAOM exams are designed to test entry level competence to practice, not to measure excellence.

A diagnostic report of each exam section is only provided for candidates that do not pass an examination, in order to assist them in focusing their studies.

**Question #24: I passed all the required exams, what are the next steps?**

**Answer:** Candidates who have fulfilled all requirements can expect to receive an email from NCCAOM confirming certification within 6-8 weeks. Feel free to contact the NCCAOM at info@thenccaom.org with questions regarding your certification status.

It is the candidate’s responsibility to submit a request to the NCCAOM for their results to be sent to any regulatory agencies.

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