

Town Hall Meeting Minutes

Thursday, January 31, 2019 12:15-1:00pm

Intros:

The Mr. Tanaka introduced Board Members David Pacheo & Dan Kenner. He also introduced the New Director of Diversity and Inclusion, Katrina Hansen, and new Administrative Support Specialist, Stacy Waters.

Mr. Tanka discussed how there has been increasing interest from hospitals over the 17 year period he has been involved with the school (previously as board member, then as president).

- UCSF Children's hospital Oakland has approached us about pain treatment without drugs.
 - Nishanga & Thomas attended resident trainings
 - Residents want to do shadowing in clinic. So far James and Rebecca have been shadowed by residents
 - We might start treating doctors and other medical professionals
 - Assistance in ER
 - Joint research
- John Muir Hospital in Walnut Creek also interested in sending residents to shadow

What is your vision of acupuncture? How does it fit into your career plans?

Katrina knew during her admission interview that she wanted to work with the LGBT community.

Developed a specialty while she was a student.

Post graduation, she fulfilled this goal. Providing support/treatment to this community

- Hormone regulation
- Pre-post surgery
- Guest lecturer in AIMC classes (gynecology, counseling, etc)

What types of populations do you want to work with? Specializations?

- Pediatrics
- Animals – challenge is that veterinarians are very protective of their field. They have their own program. Graham has experience in this arena. Perhaps he can share his experience, conduct workshop, etc.
- Fertility – Barbara's specialization
- Veterans
 - Ken: There is an organization called Stand Down which offers services to vets who are homeless, have mental health issues, etc. They offer all kinds of services including acupuncture. A recent Stand Down was at Oracle.
- Japanese Acupuncture
- Facial/cosmetic acupuncture – we had microcurrent CEU at AIMC last year.
- Mental Health
- Athletes
- First Responders
 - Ken: Perhaps there is a way we can offer support when there is a local disaster (i.e. Sending team of students with supervisor to local areas).
 - Jordan: Acupuncturists without borders offer local/domestic support, not just international. They will be conducting a training at AIMC in June. There should be a student price.
- We should make an effort to maintain classical aspects of the medicine.

- Classical vs. traditional Chinese medicine
- There is a lunch group that meets. Exploring aspects such as Taoist understandings; 5 Element; etc.
- Emi has insight into the medicine before and after Mao
- Research & Clinical Trials
 - It would be beneficial to be known as a research center
 - Haro Ogawa, alum who has worked with SF Giants for 10 years, visited UCLA and was asked about any research or papers he has published. So it is important

What is Integrative Medicine?

We would like to strive to have Asian Medicine be the center/foundation

In western medicine, scientific proof is required. Our medicine based on Chi, which cannot be detected
How can we be more scientific?

There is a new wave of patient outcome based research

- Focus on patient outcome
- Research methods are changing

David: Protocols are being followed more and more – “for headaches, do this; for constipation, do that,” etc. Differential diagnosis being left out. Which is why we need to be knowledgeable in classic acupuncture

Ken: A lot of our patients do not come in with medical reports, labs, images, etc. It would be helpful if our students could request these from patients to better understand what the need

Emi: This is why chart notes are very important, especially if working with other professionals.

Glenn: ICD 11 will have TCM coding such as Chi deficiency

Is this more of a PR question, this cultural shift. Is this too much to put on this program to accomplish, define, and figure out?

Our understanding will influence how we discuss and talk about acupuncture, amongst ourselves and with patients. Shift in thinking. Instead of a last resort, Acupuncture can be a place you go *first*.

Emi: the use of the word “integrative” implies we are grounded in TCM, but incorporate Western Medicine. We already have and continue to do this. Perhaps the question is more about whether we want to, or should, shift the focus.

Ken: Hospitals in China integrate the 2 medicines very well. It is extremely fluid. There are viewed at the same level. Our issue is that we want to avoid being controlled by MD’s. We are afraid of losing our ability to treat people the way we see fit. How do we maintain a degree of autonomy and earn respect. Even though we are respected more and more, we are still looked down upon.

Emi: We technically need both licenses to do both, to truly be integrative. I vary my treatment focus depending on the person. For some patients, it’s strictly Western, for others it’s Eastern, and others it’s a combination. But it helps to thoroughly understand both.

End of session. Next session Tuesday 2/6/2019