

A Retrospective Acupuncture Chart Review in a Primary Care Clinic
--within a Public Teaching Hospital

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Abstract

Objectives: (1) Assess the sociodemographic characteristics of patients seen in Highland Hospital K6 Adult Medicine Acupuncture Clinic. (2) Describe the implementation of paper chart documentation to Electronic Medical Records (EMR). (3) Demonstrate feasibility of integrating Acupuncture practice in a primary care hospital setting.

Design: A descriptive study, retrospective chart review.

Setting/Location: Alameda Health System Highland Hospital, a public teaching hospital.

Subjects: Patients were referred from all medical subspecialties between July 1, 2015 to June 30, 2016 to a 4-hour half-day clinic per week.

Intervention: Acupuncture treatments were given to patients for pain management. All treatments were 30 minutes in length.

Outcome Measures: Primary outcomes included sex, age, race, primary payer, ED visits and hospital visits. Secondary outcomes include a review of patient medications and Traditional Chinese Medicine (TCM) diagnoses, and successfully transitioned from paper charts to NextGen (EMR).

Results: 155 total patients were seen with a total of 442 treatment visits within a one-year period. Of the patients seen, 27.1% (N=42) male, 72.9% (N=113) female, average age was 57. The average number of visits per patient was 2.85. African-American ethnicity represented the largest population subset at 37.4% (N=58) ($p < 0.023$) follow by Asian 17.4% (27) and White 16.1% (25), while those individuals identified as Other ethnicity represented 29.0% (N=45). The three predominate chief complaints were lower extremity pain 54.2% (N=84), back pain 52.6% (N=81), and neck/shoulder pain 29% (N=45). There were no complications noted from Acupuncture treatments.

Conclusion: Very diverse populations of patients were receptive to receiving Acupuncture for treatment of pain in a public safety net primary care setting. Conditions most commonly treated were pain from musculoskeletal conditions. EMR implementation was completed within the study period. Patients, clinical staff and referral services expressed their appreciation for the availability of this service.

Biography

Byron has completed his Master of Science in Pain Research Educartion and Policy at Tufts Univeristy School of Medicine, currently a doctoral candidate in Doctor of Acupuncture and Oriental Medicnie with speciality in Neuromuscular Medicine and Pain Management at Five Bracnhes University and a TCM resident in the divison of Integrative Medicine in Alameda Health System at Highland Hosptial, Oakland, CA, an Univeristy of California San Francisco (UCSF) affliation.

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