



**State of Arizona Acupuncture Board of Examiners**  
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**Substantive Policy Statement**

**Interpretation of A.R.S. § 32-3901(5)'s Definition of "Herbal Therapies"**

**September 28, 2022**

This Substantive Policy Statement is advisory only. A Substantive Policy Statement does not include internal procedural documents that only affect the internal procedures of the agency and does not impose additional requirements or penalties on the regulated parties or include confidential information or rules made in accordance with the Arizona Administrative Procedures Act. If you believe that this Substantive Policy Statement does impose additional requirements or penalties on regulated parties, you may petition the State of Arizona Acupuncture Board of Examiners (the "Board") under Arizona Revised Statutes ("A.R.S.") Section 41-1033 for a review of the statement. See A.R.S. § 41-1091.

A.R.S. § 32-3901(5) defines "Herbal therapies" as "prescribing, administering, injecting, compounding, and dispensing herbal medicines and plant, animal, mineral, and natural substances."

**Definitions**

The Board" will review and approve at their January meeting or upon motion of the Board a list of substances it interprets as "herbal medicines and plant, animal, mineral and natural substances" under A.R.S. § 32-3901(5). See Attachment 1

**Training Requirements**

A.R.S. § 32-3901(1)(b)(v) requires acupuncturists using and prescribing herbal therapies to do so only commensurate with the acupuncturist's education and training. The Board recognizes that many, but not all, acupuncture training programs, both American and foreign, include sufficient and extensive training in herbal therapies.

- I. This being the case, the Board approves any licensee to perform herbal therapies, not to include injections, who completed one of the following:
  - a. Taken and passed the National Certification Commission for Acupuncture and Oriental Medicine (NCCAOM) Chinese Herbology Examination;

- b. Completed sufficient education as part of their formal acupuncture training as determined by the Board after a review of official transcripts; or
- c. Other training as approved by the Board.

A Licensee is not required to receive Board approval prior to beginning practice of this modality. Education will be reviewed on a case by case basis as instigated by the Board, by the Executive Director or after receipt of complaint. See A.R.S. § 32-2903(A)(2); A.A.C. R4-8-602.

- II.** Licensees must receive Board approval prior to injecting herbal medicines or plant, animal, mineral, or natural substances. A licensee must have completed one of the following:
- A. Acupuncture Point Injection Therapy (APIT) training of at least sixty (60) hours;
  - B. APIT education as part of their formal acupuncture training as determined by the Board after a review of official transcripts; or
  - C. Other training as approved by the Board.

The Board will seek a statute and/or rule change to clarify the definition of “Herbal Therapies” and training requirements associated with it.

**Attachment: 1**

I. The Board Interprets “herbal medicines and plant, animal, mineral and natural substances” to include the following:

A. Non-injection substances approved for use as herbal therapies:

Individual herbs or herbal formulas found in traditional Materia Medica; (ex. the Bensky Materia Medica or Bensky Formulas & Strategies);

Custom compounds using individual herbs found in traditional Materia Medica (ex. the Bensky Materia Medica or Bensky Formulas & Strategies);

Traditional Chinese Herbal formulas including modern commercially available formulas;

Publicly available vitamins, minerals, and dietary supplements;

B. (APIT) substances approved for use as herbal therapies:

Licensees may utilize Topical Vapocoolants pre or post injection;

The Intradermal Intramuscular, and Subcutaneous Injection of: Homeopathics, Dextrose, Enzymes Except Urokinase, Hyaluronic Acid, Minerals, Sarapin, Sodium Chloride, Sterile Water, Vitamins, cyanocobalamin, Marcaine (Bupivacaine Hydrochloride) with or without Epinephrine, Lidocaine, Herbs, Methylcobalamin, Engystol, Inositol, Saline, and Vitamins including but not limited to Vitamin B-6, Vitamin B-12;

The Subcutaneous or Intramuscular Injection of Epinephrine, Medical Grade Oxygen, and Additives Necessary To Stabilize, Preserve Or Balance Ph Of Approved Substances;

Non-Epidural, Non Intrathecal Injection f: Alcohol, Amino Acids, Autologous Blood And Blood Products And Appropriate Anticoagulant, Live Cell Products, Ozone, Bee Venom, Beta Glucans, Caffeine, Collagenase, Dextrose, Dimethyl Sulfoxide, Gammaglobulin, Glucose, Glucosamine, Glycerin, Hyaluronidase, Methylsulfonylmethane, Phenol, Phosphatidylcholine, Procaine, Sodium Hyaluronate, Sodium Morrhuate and Therapeutic Serum.