

## **STANDARD OPERATING PROCEDURES FOR INPATIENT ACUPUNCTURE AND TRADITIONAL MALAY MASSAGE (TMM) SERVICES IN THE MINISTRY OF HEALTH MALAYSIA HOSPITALS**

### **1. INTRODUCTION**

Traditional and Complementary Medicine (T&CM) is an important component of the national healthcare system, co-existing with modern medicine to enhance the health and quality of life of all Malaysians. The Ministry of Health Malaysia (MOH) has taken initiatives to offer T&CM services at selected MOH hospitals, including traditional Malay massage, acupuncture, and herbal therapy as adjunct treatment for cancer. The provision of these services is guided by relevant T&CM Practice Guidelines.

While T&CM services in MOH hospitals are mainly offered in outpatient settings, there has been increasing demand in the recent years for such services, especially acupuncture and TMM services to be offered in the ward for inpatients. Therefore, this document is developed to guide the provision of inpatient acupuncture or TMM services in MOH hospitals with T&CM Units.

### **2. OBJECTIVES**

- 2.1. To standardise the inpatient workflow for acupuncture and TMM services in MOH hospitals with T&CM Units;
- 2.2. To establish a clear communication pathway between the primary medical team and the T&CM Unit for coordinating inpatient acupuncture or TMM services; and
- 2.3. To guide the provision of safe and quality services to inpatients.

### **3. GUIDING PRINCIPLE**

- 3.1. This document supplements existing practice guidelines for providing inpatient acupuncture and TMM services in MOH hospitals with T&CM Units.
- 3.2. All inpatients must be assessed by a Registered Medical Practitioner (RMP) from the primary medical team before being offered acupuncture or TMM services.
- 3.3. The suitability of an inpatient to receive acupuncture or TMM services shall be jointly determined by the RMP from the primary medical team and the Head of the T&CM Unit, in consultation with the acupuncture and TMM practitioner from T&CM Unit, where necessary.
- 3.4. Inpatient acupuncture or TMM services can be provided either in the T&CM Unit or in the ward. The location will be mutually agreed upon by the Head of the T&CM Unit and the RMP from the primary medical team, based on the patient's condition and suitability.

- 3.5. Moxibustion shall not be administered when acupuncture services are provided in a ward setting.
- 3.6. Patients who are more suitable for outpatient acupuncture or TMM services shall be scheduled accordingly to receive acupuncture or TMM services in the T&CM Unit upon discharge.

#### **4. CARE EXTENSION FOR INPATIENT ACUPUNCTURE OR TMM SERVICES**

- 4.1. Inpatient acupuncture or TMM services shall be provided only to clinically stable patients who meet the selection criteria and specified indications in the T&CM Practice Guideline for Acupuncture and Malay Massage.
- 4.2. Care extension for inpatient acupuncture or TMM services must be initiated by the RMP from the primary medical team. The case shall be discussed between the RMP from the primary medical team and Head of T&CM Unit. The T&CM practitioner will be consulted to determine the patient's suitability for acupuncture or TMM services, where necessary.
- 4.3. Patients with listed contraindications in the T&CM Practice Guideline for Acupuncture and Malay Massage and the Care Extension Form shall not be accepted for the services.
- 4.4. The RMP from the primary medical team is responsible to fill up the *Care Extension to T&CM Services Form*. All relevant clinical information and documentation must be provided to the T&CM Unit. This includes the patient's diagnosis, pertinent medical history, reason for care extension for acupuncture or TMM services, and any relevant investigation results (if applicable).
- 4.5. Patients accepted for inpatient acupuncture or TMM services shall be screened and assessed by the T&CM Unit within 24 hours. The initial treatment or care plan should be initiated within three (3) working days after receiving the care extension, excluding weekends and public holidays. This assessment may be conducted either in the T&CM Unit or in the ward, depending on the patient's condition.

#### **5. PATIENT CONSENT AND DIGNITY**

- 5.1. All patients receiving acupuncture or TMM services must provide written informed consent prior to the initiation of treatment. Patients must be fully informed of and understand the potential benefits and risks associated with the proposed treatment. In cases where the patient is unable to provide written consent due to physical or medical conditions, consent may be obtained from a legal guardian or next-of-kin acting on the patient's behalf.
- 5.2. When examination or treatment involves body parts that may affect patient's modesty, the presence of a chaperone is required to ensure patient dignity and comfort.

## **6. SERVICE PROVISION**

- 6.1. During each inpatient acupuncture and TMM session, the T&CM practitioner shall assess the patient for the following:
  - a) Any new or arising health issues, such as contraindications, complications, adverse events, or side effects; and
  - b) The effectiveness of the acupuncture and TMM treatment.
- 6.2. The T&CM Unit shall schedule and provide acupuncture and TMM treatment sessions in accordance to the treatment regime planned for the patient.
- 6.3. If any health issues, contraindications, complications, or adverse effects are identified before, during, or after acupuncture or TMM treatment and the patient is deemed unsuitable for further T&CM intervention, the T&CM practitioner shall document the findings in the *Post T&CM Services Evaluation Form*, inform the patient, and report the findings to the RMP from the primary medical team.

## **7. DELIVERY OF INPATIENT ACUPUNCTURE OR TMM SERVICES IN THE WARD**

- 7.1. When acupuncture or TMM services are to be delivered in the ward, the T&CM team shall ensure that the ward environment is appropriate for the services. This includes verifying that all necessary items and equipment required for acupuncture or TMM services are available during the treatment session.
- 7.2. Patients receiving acupuncture and TMM treatment in the ward shall be monitored by the T&CM team throughout the session.
- 7.3. In the event of a medical emergency during the administration of acupuncture or TMM services, the primary medical team shall attend to and manage the patient. The T&CM team is responsible for immediately notifying the primary medical team in such cases.

## **8. DELIVERY OF INPATIENT ACUPUNCTURE OR TMM SERVICES AT THE T&CM UNIT**

- 8.1. When acupuncture or TMM services are to be administered at the T&CM Unit, the patient must be escorted by ward staff to and from the T&CM Unit. The provision of acupuncture or TMM services at the T&CM Unit shall follow the existing work processes.
- 8.2. Patients with unstable vital signs, or those who are on intravenous drips, undergoing blood transfusion, or receiving oxygen supplementation, shall not be accepted for treatment at the T&CM Unit.

## 9. DISCHARGE PLAN

- 9.1. If the acupuncture or TMM treatment regime is not completed at the time of the patient's discharge from the ward, a follow-up outpatient appointment at the T&CM Unit shall be arranged. This appointment must be clearly recorded in the patient's medical record and communicated to the patient by the T&CM Unit staff.
- 9.2. Upon completion of the prescribed acupuncture or TMM treatment regime, either as an inpatient or outpatient, the patient shall be discharged from the T&CM Unit. A completed *Post T&CM Services Evaluation Form* shall be submitted to the RMP from the primary medical team for further evaluation, including the decision on whether the patient should continue with acupuncture or TMM services or be referred for other treatments or procedures in the hospital.

## 10. DOCUMENTATION AND MEDICAL RECORD

- 10.1. All T&CM assessments and interventions provided to the patient must be clearly documented in the patient's medical record. This includes copies of all relevant forms, whether completed by the RMP or the T&CM team.
- 10.2. The management of medical records in the T&CM Unit shall be conducted in accordance to the Standard Operating Procedures for the T&CM Unit in MOH Hospitals.

## 11. DETAILED WORKFLOW FOR INPATIENT ACUPUNCTURE AND TMM SERVICES

| No.             | Processes   | Action to be taken by                                   |
|-----------------|---|---|
| <b>New Case</b> |   |   |
| 1.              | The T&CM Unit receives care extension for inpatient acupuncture or TMM services from a RMP from the primary medical team. The case is jointly discussed to determine the patient's suitability for acupuncture or TMM services, as well as whether the treatment should be provided on an inpatient or outpatient basis and whether it should take place in the T&CM Unit or the ward.<br><br>(Care extension from the RMP to the T&CM Unit may be made via phone call, during ward rounds, or through a Multidisciplinary Team (MDT) meeting involving the relevant department or unit.) | RMP from the primary medical team and Head of T&CM Unit |
| 2.              | If the patient is deemed suitable for acupuncture or TMM services, the <b>Care Extension to T&amp;CM Services Form</b> shall be completed by the RMP from the primary medical team and submitted to T&CM Unit.  | RMP from the primary medical team                       |

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|     |  |                            |
|-----|--|----------------------------|
| 3.  | If the patient is deemed suitable to receive acupuncture and TMM services as an outpatient, an appointment date shall be provided by the T&CM Unit upon the patient's discharge from the ward. The process of scheduling outpatient appointments shall follow the work process outlined in the "Two-Way Communication Mechanism Between T&CM Practitioners and RMP in MOH Hospitals".  | T&CM Unit<br>(RMP/ SN/ MA) |
| 4.  | If the patient is to receive acupuncture or TMM services as an inpatient, the patient shall be screened in the ward within 24 hours for vital signs, indications and contraindications using the <b>T&amp;CM Services Screening Form</b> as prescribed in the T&CM Practice Guideline for Acupuncture and Malay Massage.   | T&CM Unit<br>(RMP/ SN/ MA) |
| 5.  | After the screening,<br><ul style="list-style-type: none"> <li>i. if the patient is deemed not suitable to receive acupuncture or TMM services, the T&amp;CM team shall document the findings in the <b>T&amp;CM Services Screening Form</b> as prescribed in the T&amp;CM Practice Guideline for Acupuncture and Malay Massage. The patient shall be advised accordingly, and the RMP from the primary medical team shall be informed.</li> <li>ii. if the patient is deemed suitable to receive acupuncture or TMM services as an inpatient, the T&amp;CM team shall schedule an appointment for the initiation of treatment within 3 working days.</li> </ul> | T&CM Unit<br>(RMP/ SN/ MA) |
| 6.  | The patient shall undergo an initial assessment by the T&CM practitioner to evaluate the suitability to receive acupuncture or TMM services and to identify any absolute contraindications. The T&CM practitioner shall complete the <b>T&amp;CM Clerking Form</b> as prescribed in the T&CM Practice Guideline for Acupuncture and Malay Massage.   | T&CM<br>Practitioner       |
| 7.  | If patient is found not suitable to receive acupuncture or TMM services, the T&CM practitioner shall document the findings in the <b>T&amp;CM Clerking Form</b> , inform the RMP/ SN/ MA of the T&CM Unit, advise the patient accordingly, and report back to the RMP from the primary medical team by completing the <b>Post T&amp;CM Services Evaluation Form</b> .  | T&CM<br>Practitioner       |
| 8.  | If the patient is deemed suitable to receive acupuncture or TMM services, the T&CM practitioner shall obtain the patient's informed consent by completing the <b>Consent Form for Treatment</b> as prescribed in the T&CM Practice Guideline for Acupuncture and Malay Massage.  | T&CM<br>Practitioner       |
| 9.  | After obtaining written consent, the T&CM practitioner shall initiate acupuncture or TMM treatment, in accordance to the prescribed treatment regime and complete the <b>T&amp;CM Clerking Form</b> .  | T&CM<br>Practitioner       |
| 10. | If the patient is deemed suitable to continue receiving acupuncture or TMM services, the next appointment date shall be scheduled in accordance to the prescribed treatment regime.  | T&CM<br>Practitioner       |

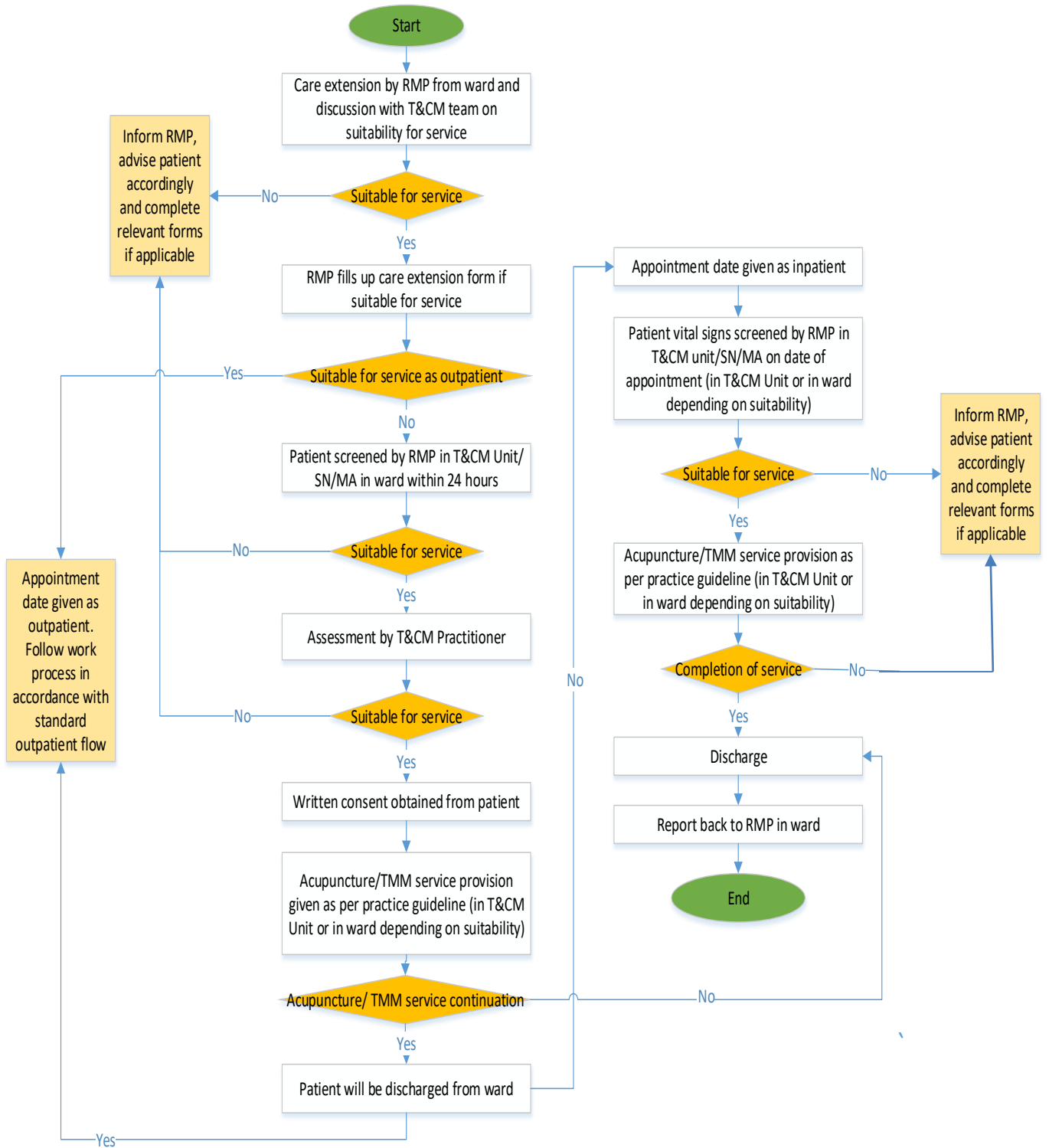
|                       |   |                         |
|-----------------------|---|-------------------------|
| 11.                   | If the patient is not suitable to continue receiving acupuncture or TMM services (e.g., refusal of further treatment, unfavourable response, or other clinical concerns), the patient shall be discharged from acupuncture or TMM services. The T&CM practitioner shall inform the RMP/ SN/ MA of the T&CM Unit, and advise the patient accordingly. The T&CM practitioner shall report back to the RMP from the primary medical team by completing the <b>Post T&amp;CM Services Evaluation Form</b> . | T&CM Practitioner       |
| <b>Follow Up Case</b> |   |                         |
| 12.                   | The patient shall be screened for vital signs using the <b>T&amp;CM Continuation Sheet</b> as prescribed in the T&CM Practice Guideline for Acupuncture and Malay Massage.  | T&CM Unit (RMP/ SN/ MA) |
| 13.                   | If the patient is not suitable to receive acupuncture or TMM services, the T&CM team shall document the findings in the <b>T&amp;CM Continuation Sheet</b> and advise the patient accordingly. A follow-up appointment date may be scheduled if appropriate.  | T&CM Unit (RMP/ SN/ MA) |
| 14.                   | If the patient is suitable to receive acupuncture or TMM services, the T&CM practitioner shall proceed with the treatment and complete the <b>T&amp;CM Continuation Sheet</b> accordingly.  | T&CM Practitioner       |
| 15.                   | If the acupuncture or TMM treatment regime is not yet completed at the time of the patient's discharge from the ward, a follow-up outpatient appointment at the T&CM Unit shall be arranged. The T&CM practitioner shall determine whether acupuncture or TMM treatment should be continued or discontinued.  | T&CM Practitioner       |
| 16.                   | Upon completion of the prescribed treatment regime, the patient shall be discharged from acupuncture or TMM services. A completed <b>Post T&amp;CM Services Evaluation Form</b> shall be provided to the RMP from the primary medical team for further evaluation, including whether the patient should continue acupuncture or TMM services or receive other treatments or procedures in the hospital.   | T&CM Practitioner       |

MA: Medical Assistant; RMP: Registered Medical Practitioner; SN: Staff Nurse; T&CM: Traditional and Complementary Medicine

Notes:

1. The original copies of all prescribed forms mentioned above shall be filed in the inpatient medical record (for patients who received inpatient acupuncture or TMM services), while duplicate copies shall be retained in the patient's medical record at the T&CM Unit. All T&CM assessments and interventions must be clearly documented in the patient's medical record, both in the ward and in the T&CM Unit.
2. Acupuncture or TMM services may be provided either in the T&CM Unit or in the ward, depending on the patient's condition and overall suitability

## FLOW CHART FOR INPATIENT ACUPUNCTURE AND TMM SERVICES



## **ACKNOWLEDGMENT**

This document was developed by the T&CM Division, MOH with inputs from the T&CM Units of MOH hospitals. It will be updated periodically to reflect the latest developments.

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