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**NATIONAL STANDARD OF THE
PEOPLE'S REPUBLIC OF CHINA**

GB/T 21709.7-2008

**Standardized manipulations of acupuncture and moxibustion -
Part 7: Skin needling**

针灸技术操作规范 第7部分：皮肤针

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Foreword

GB/T 21709 "acupuncture practices" is divided into 21 parts.

- Part 1. moxibustion;
- Part 2. scalp;
- Part 3. Ear;
- Part 4. Needle;
- Part 5. Cupping;
- Part 6. Point Injection;
- Part 7. cutaneous needle;
- Part 8. intradermal needle;
- Part 9. acupoint application;
- Part 10. catgut embedding;
- Part 11. EA;
- Part 12. Fire needle;
- Part 13. Mount needle; ?

1 Scope

China's national standardised manipulation for skin needling. It is Part 7 of GB/T 21709 and specifies the terms and definitions, the procedures and requirements, the methods of operation, the precautions and the contraindications. The skin needle is a head of several short needles mounted on a handle - the plum blossom needle with five, the seven-star with

seven - which is tapped repeatedly and rapidly onto the skin along a line or over an area rather than inserted at a point. Nothing penetrates more than a fraction of a millimetre. The stimulus is therefore an area of many very shallow punctures rather than a single deep one, and the technique is used along channels, over segmental areas and on regions where deep needling is unsuitable, including on children. Three things govern it and they are what the standard fixes. The first is the force of the tap, which is graded - light, moderate and heavy - and which determines whether the skin merely reddens or bleeds; the intended response is stated for each application, since drawing blood is deliberate in some uses and a fault in others. The second is the condition of the needle head: the points must be even in length and free of hooks and burrs, because an uneven or damaged head tears the skin instead of puncturing it, and this is the commonest cause of injury with the technique. The third is hygiene, because a device that strikes the skin repeatedly and may draw blood cannot be shared, and the standard specifies the handling accordingly. Issued on 23 April 2008 and in force since 1 July 2008.

This section GB/T 21709 specifies the terms and definitions skin needle procedures and requirements, methods of operation, precautions and contraindications. This section applies to the skin needle technical operations.

2 Normative references

The following documents contain provisions which, through

GB/T 21709 in this part of reference in terms of this section. For dated reference documents Member, all subsequent amendments (not including errata content) or revisions do not apply to this section, however, encouraged to reach under this section Parties to research agreement to use the latest versions of these documents. For undated reference documents, the latest versions apply to this section.

GB/T 21709.5 acupuncture practices - Part 5. Cupping

3 Terms and Definitions

The following terms and definitions apply GB/T 21709 in this section.

3.1 Supported by a number of short stainless steel needle into a bundle, or even mounted on the disc such as a lotus-shaped needle, the needle is fixed at one end of the handle from the needle.

4.1 Preoperative preparation facilities

4.1.1 Needle selection Depending on the condition and operation of the site needs and choose different types of skin needle. Should choose the needle body is smooth, no rust, sharp tip, no Barb needle handle solid, no loose skin needle.

4.1.2 treatments site selection You should select the appropriate position depending on the condition.

4.1.3 Position of the patient selection Patients should choose a comfortable, easy to doctors who treat orthostatic operation.

4.1.4 Environmental Requirements It should pay attention to environmental hygiene, to avoid contamination.

4.1.5 Disinfection

4.1.5.1 needle disinfection Autoclaving method should be selected. Disposable needles should choose skin.

4.1.5.2 parts disinfection With 75% ethanol or 0.5% povidone-iodine swab in applying surgical site. Strong stimulation site suitably 0.5% povidone-iodine swab.

4.1.5.3 surgeon disinfection Doctor hands clean with soap and water, then 75% alcohol cotton ball wipe.