Portuguese legal status on CAM

IMT memo

[Sep 2016]

Note: This document is a work in progress - every time a new step is taken, this memo will be updated. Please contact us for more details.
A. Introduction

IMT – Instituto de Medicina Tradicional is a private training institution offering training on CAM areas since 1997.

Our main goal is to assist, in every way we can, TM/CM development.

This document resumes the actual status of TM/CM law in Portugal and can be used by anyone. We only ask that you refer IMT.

B. Present status

On the 24th of July 2013 our national parliament approved a new law regarding CAM. This law provides a series of fundamental statements that give a legal umbrella for CAM.

In September 2013, Portuguese government published this law (nº 71/2013), a law that regulates a previous law on CAM (see point D - How did we get here) regarding the professional exercise of all activities that apply non-conventional therapies. In order for this law to be in full practice it needs some specific regulation that has been being published during 2014 and 2015.

Title: Law nº 71/2013 that regulates law nº45/2003, of August 22, regarding the professional exercise of all activities that apply non-conventional therapies

Subject: This law regulates access to those professions related with non-conventional therapies, its exercise in private or public sector, profit or non-profit oriented.

Scope: Applies to all those professionals that practice the following non-conventional therapies: Acupuncture; Herbal Medicine; Homeopathy; Traditional Chinese Medicine; Naturopathy; Osteopathy and Chiropractics.

Autonomy: Technical and deontological professional autonomy is recognized.

Characterization and functional content:

This law stated that for this subject in particular, the government produced specific regulation for each of the seven professions mentioned above (see point C – Specific regulation).

Access to the profession:

- The access is restricted to those who will have a bachelor degree in one of the seven non-conventional therapies to be obtained through a Bologna study
cycle compatible with specific requisites explained in specific regulation (see point C – Specific regulation);

• However, existing non-university level institutes (such as IMT, for example) will have a transitory system that will allow them to provide these cycles as well (still waiting for specific regulation but at this point there is a bill proposal to be commented by FNE-MTCA - National Federation of Schools of TM/CM);

• For this requisite was considered WHO guidelines on the matter for each profession, after the national agency that credits higher education degrees (A3ES) has been heard as well as a specific health department (DGS) under the Ministry of Health.

Professional License

• Only those who have a professional license can practice and only these can use the appropriate professional title;

• To ask for a professional license one has to present a bachelor with sciences degree. However this does not apply for all those professionals that are already working prior to the publication of this law. For these professionals will be applied a special transitory system (see point C – Specific regulation);

• All the specific rules, fees, etc., to apply for the professional license are explained is specific regulation (see point C – Specific regulation);

Professional registration: A specific health department (ACSS) will organize and keep updated a record of professionals, turning it into a public list online so that the public can have access to it.

Information:

• These professionals should keep a clear and detailed record of patients observations and therapeutic acts applied;

• They should provide their patients useful information regarding prognostic, treatment and its duration, so that the patient consent can be expressed through an adequate mean compatible with good-practices already in place;

• In order to prevent eventual drug interaction, the patient must provide his therapist, in writing, a list of every drug, conventional or natural, that he or she is taking at the moment of consultation;

• These professionals cannot make false claims about their actions being able to cure diseases, dysfunctions or malformations;

Professional insurance: Professionals are obliged to have civil responsibility insurance accordingly to some specifications to be presented in a specific regulation (see point C – Specific regulation). This specific regulation must state the minimum capital,
geographical coverage, duration, applicable exclusions, installments and conditions for return;

Clinics:
• The legislation already available for regular private clinics is to applied in the simplified version to be detailed in specific regulation (see point C – Specific regulation);
• The clinical director must be a non-conventional professional with a professional permit;
• At these clinics is forbidden to sell any products to the patients.

Control:
• Control is a responsibility of several governmental agencies, regarding several aspects like clinic licensing; public health; professional licensing; human use medicines; health products; homeopathic products; traditional medicines (herbal); medical devices used; patient complaints; quality control.

Fines and punitive measures:
• Fines can be applied if the requirements addressed in the prior paragraph aren’t met; Attempt and negligence is also fined;
• If the gravity of the infraction is considered to be high the professional permit can be suspended from three months to up to two years or even canceled as well as loss of instruments, or any other materials used in the infraction. Some of these sanctions can be made public.

Council on Non-Conventional Therapies

• This council should provide the Ministry of Health expert opinions on subjects such as professional practice, training and regulation matters. Its specific competences will be explained in specific regulation (see point C – Specific regulation);

• It should have a representative of the government agency that issues professional permits; two representatives of DGS; one representative of education ministry; one representative of work ministry; two representatives of each of the seven non-conventional therapies professionals nominated by the most representative professional associations; one representative of the medical board; one representative of the pharmaceutical board; two teachers nominated by teaching institutions and two representatives of consumer rights organizations.
Transitory dispositions:

- Those therapists that were already practicing by the time this law was published (September 2013) should present to the ministry of health the following documents: A document that demonstrates professional practice; a document that demonstrates social security enrolment; a CV with a school diploma and clinical training; other CPD diplomas; experience, etc.

- A health ministry department will evaluate these documents accordingly to criteria explained in specific regulation (see point C – Specific regulation) and will pronounce one of these decisions: attribution of professional permit; attribution of a temporary permit that will be valid for a period of time non superior to two times the period for complementary training; non-attribution of permit.

- Regarding training institutions such as IMT, they will have a time line of no longer then five years to adapt themselves in order to be able to provide bachelor degrees. This process will be explained in a specific regulation to be published.

- Regarding international recognition in these therapies is possible so any academic degree from other countries will be dealt accordingly to the already existing law on the matter for any other profession/discipline.

- For any of these topics, the Portuguese government may consult with specialists, nationals or internationals

C. Specific regulation

C.1. - Bill nº 181/2014 - Transitory professional licensing procedures:

Scope: This bill regulates the access to a professional licence for those therapists that were already working as such before the publication of law nº71 (September 2013) and that do not have a recognized higher education level degree on one of the seven regulated therapies. These professionals are to subdue a candidacy to ACSS (a Ministry of Health department).

Creation of a Working Group - WG for the CV assessment of Non-Conventional Therapies professionals:

- ACSS created a working group that will evaluate all candidates and issue a
position stating if the candidate should have a full licence, a provisional licence or neither.

**WG composition:**

- Nominated by ACSS
- At least one DGS member (another Ministry of Health Department) to evaluate CV’s
- This group can also have the collaboration of other individuals, specifically CAM representatives

**WG criteria for CV evaluation:**

- **Education**
  - 9 years - 1 point; 12 years - 2 points; Higher Education\(^1\) degree - 3 points; Masters or PhD\(^2\) - 4 points;
- **Professional experience**
  - Up to 3 years - 1 point; 3 to 6 years - 2 points; 6 to 9 years - 3 points; 10 or more years - 4 points;
- **Specific training in CAM**
  - Up to 1000 hours - 1 point; between 1000-1500 hours - 2 points; between 1500-2000 hours - 3 points; More than 2000 hours - 4 points;
- **CPD or complementary stages**
  - 50 to 100 hours - 1 point; 101 to 150 hours - 2 points; 151 to 200 hours - 3 points; more than 200 hours - 4 points;
- **Supplementary criteria**
  - 1 published paper on indexed publications - 1 point; three or more - 2 points

**Results:**

- If it sums up 14 points or higher the WG will recommend a full licence;
- If it sums up between 8 and 13 points, WG will recommend a provisional licence and determine the number of ECTS to be obtained, in which subjects, and in what timeframe, so that the full licence can be issued;
- If is sums up less then 8 points the WG will use other criteria to issue, or not, a provisional licence, such as exams (written/viva/practical), CV discussion, interview, amongst others. In this case a jury composed by CAM experts or

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\(^1\) Those that have a higher education degree in any health profession, as long at is recognized as such in Portugal, has an extra 2 points

\(^2\) Same as above
CAM institutions will be appointed

C.2. - Bill nº 182/2014 - Specific requisites for a Clinic:

Scope and definitions:

- This bill establishes the minimum requisites for a clinic of non-conventional therapies to operate, its requirements regarding management, human resources, technical facilities, etc.;
- These clinics should be referred to as Private Units of Non - Conventional Therapies

Licensing:

- To these clinics will be applied the same licensing criteria, with due adaptations, as to any other health clinic

Quality and safety:

- These clinics must abide the regulations on quality and safety issued by DGS (Ministry of Health)

Information to patients:

- Information such as clinic schedule; clinical director; emergency procedures; patients rights and duties and pricing, should be visible and available;

Patients Records:

- These clinics must keep their patients records during the period stated by the regular law on the matter.

Documents needed:

- These clinics must have several kinds of documents, such as tax number, identity cards, social security, plants, permits, contracts, etc.

Licensing requirements:

- Such as the applicant’s both personal and professional suitability, and if a company, its administrators/managers suitability. To determine such personal suitability one must not have been forbidden to practice; convicted, regardless of the crime that prevented him or her to practice; and in suspension of practice. This suitability is restored after the sentence or suspension has been
carried out;
- Assurance of technical quality of the treatments to be provided, as well as the equipment’s to be used.

Human resources:
- There is a transitory period of one year after the regulation regarding professional licensing is published for the clinical director to obtain his or hers licence.

Areas and surroundings:
- These clinics should abide all laws relating to construction and urbanism;
- Assure residual disposal.

General norms on construction, safety and privacy:
- Construction must abide with regulations for barriers and accessibility;
- Signing must be easily understood;
- Materials should allow proper sanitation;
- Assure areas for technical equipment, storage of hazardous materials, etc.;
- Common circulation areas should be at least 2.4m high;
- If in higher ground they should have an elevator or similar;
- Patient privacy and dignity must be secured;
- Emergency medical devices should be readily available and regularly tested.

Other norms and requisites:
- There are several other requisites regarding clinical areas dimensions, waiting areas, washing room areas; acclimatization; cleaning, disinfection and sterilization materials; clinical residues disposal procedures; amongst other, similar to any other clinic.

C.3. - Bill nº 182 A /2014 - Amounts due for licence issuing:
- 60€ for professional registration and licensing;
- 60€ for professional registration and provisional licensing;
- These amounts are due the moment the licence requirement is filed.

C.4. - Bill nº 182 B /2014 - Requirements to ask for a licence:
Professional Licensing:

- Its emission will be conditioned to those who present the proper high degree level diploma. Those that have high degree diplomas from other countries, should require their registration/recognition or equivalence accordingly to Portuguese general law on the matter;

Licence request:

- A form with personal identification; picture; criminal record; education certificate/diploma, grinding’s, dates, other relevant CPD for the profession;
- This request is made online in a platform that should have been made available until the end of 2014 (depending if the regulation process would be concluded by then, which it isn't);
- After the licence has been issued, its user must contract professional and civil responsibility insurance and inform ACSS of its number within 30 days;
- This licence can be revoked or suspended if some impediment or incompatibility should arise. It can also be suspended or cancelled as a sanction. In these cases it should be returned to ACSS.

Provisional Licence:

- This kind of licence is for those professionals that were already in practice, before the existing law was published and doesn’t have a higher education degree on any of these seven non-conventional therapies;
- This issuing is needed given that the candidate must complete his or hers training in order to get a full licence, but he or she can still practice in the meanwhile;
- This licence is valid through the period it states.

Provisional Licence request:

- A form with personal identification; picture; criminal record; description of his or hers professional training background, presented in European cv model, with all certifying documentation attached, such as:
  - The identification of the training institution that provided the training on the non-conventional therapy that is being applied to, it’s duration, date of conclusion; eventual stage, its place of practice, it’s duration and who was responsible for it;
  - CPD or other stages with full identifications, durations and dates;
  - Job description of his or hers experience within the area of choice;
- This request is made online in a platform that should have been made available
until the end of 2014 (depending if the regulation process would be concluded by then, which it isn't);

- After the licence has been issued, its user must contract professional and civil responsibility insurance and inform ACSS of its number within 30 days;
- This licence can be revoked or suspended if some impediment or incompatibility should arise. It can also be suspended or cancelled as a sanction. In these cases it should be returned to ACSS.

License suspension or cancelation:

- If the therapist doesn't satisfactorily concludes his or hers complementary training considered needed for a full licence within the time frame already settled, his or hers provisional licence is immediately revoked, and should be returned to ACSS; It can also be cancelled as an additional penalty accordingly to what is stated on the matter on law 71.

C.5. - Bill nº 200/2014 - Insurance:

- A civil responsibility insurance is mandatory with a minimum capital of 150.000€ per year;
- As for mandatory coverage, it must include compensation for direct damage, indirect, moral as well as legal defence, appeal and judicial costs;
- As for geographical coverage, it has to be national;
- As for temporal coverage, it should guaranty every claim filed within the period of the contract or up to 24 months after it ends, even if the damages were caused by actions or omissions of the professional given that they are not covered by other valid insurance.
- Exclusions are the ones that follows, independently of other specific exclusions that are adjusted to the professional activity itself:
  - Any damage due to an act for which the professional was not professionally competent to perform;
  - Any damage caused to someone who's responsibility is assured;
  - Any damage due to costs from criminal procedure, guarantees, fines, rates or any other charges from identical nature;
  - Any damage due to war, strike, lock-out, riots, civil commotions, burglary due to labour disturbances, sabotage, terrorism, acts of vandalism, civil or military insurrections, authorities that usurp authority and hijacking;
- Franchises are those specified on the contract, negotiated between the professional and the insurance company, which may include a franchise not enforceable to third injured parties or their heirs;
- The insurance company can sue the professional:
When the damage results of any infraction of laws/regulations regarding the professional practice;

- When the damage are due to intentional omissions by the insured or persons under his civil responsibility;

- When the damage is due to these later actions and were perpetrated under the influence of dementia, alcohol, drugs or other psychotropic substances;

- This contract is terminated if:
  - When the agreed date for voluntary cessation of one's professional activity;
  - When the professional is convicted and it determines one's professional activity cessation;
  - When his or hers licence to practice has been cancelled or terminated.

C.6. - Bill nº 207-A /2014 - Naturopathy functional content:

- Naturopathy is the therapeutic approach that studies properties and applications of natural elements in order to prevent sickness, maintain, promote and restore health, using naturopathic dietary counselling and lifestyle orientations, herbal therapy, homeopathy, hydrotherapy, geotherapy, manipulative techniques and similar methods.

- Naturopathy consists in a holistic, energetic and natural approach to the human being, through its own diagnostic methods, prescription and treatments, build upon specific theories and axioms;

- It uses physical agents and energetic methods, based on western and eastern philosophies, by which he or she diagnoses, treats and cares for its patients, using systems and practices based on bio-psycho physiological and hygiene treatments and care models, which aim to rebalance bodily organic functions and other abnormal situations, delivering at the same time the indispensable conditions to maintain and recover its balance, in total respect by the "natural laws" that regulate bodily functions and by "naturopathic laws" that regulate the therapeutic course of action and natural health care in order to reach self cure;

- Naturopathy can only be practiced under the professional title of "Naturopath". This title can only be used by those who have a professional licence issued by ACSS;

- A Naturopath must have:
  - Critical knowledge about naturopathy theory, practice and principles; demonstrating them through several approaches and selecting the necessary treatment plans to meet the patients individual needs;
  - Knowledge about principles and therapeutic strategies, as well as treatment plan management, applying energetic therapies, herbal
medicines, formulas, homeopathic remedies and nutrients under the form of food supplements, accordingly to existing laws;

- Deep knowledge on indications and contraindications of naturopathic treatments;
- Sufficient knowledge on the natural-holistic vision of the human being, so that he or she can recognize and interpret signs of dysfunction and therefore be able to apply the proper strategies and natural treatments;
- Sufficient knowledge on psychology and social determinants of health that enables him or her to contextualize the therapeutic decision and care;
- Deep knowledge of interpersonal communication that allows a proper collection of personal and familiar facts that are relevant for therapeutic porpoise; to maintain a good relationship with patients, colleagues and other persons of interest related with the profession; prevention and conflict solving;
- Deep knowledge of behavioural sciences in order to give proper and effective counselling about healthy lifestyle habits;
- Sufficient knowledge on physiology, pathology, physiopathology, observation and symptomatology in order to identify those cases when the patient needs other health professional care.

• A Naturopath must be able to:
  - Perform in his or hers practice in a way that promotes health and prevents disease, evaluating his or hers patients, performing the naturopathic health exam and using naturopathic diagnose techniques in order to evaluate one’s build and vitality and to differentiate those factors that determine systemic imbalance standards and its relation within the patients context accordingly with naturopathy theories;
  - Recognize situations where the patients complaints may indicate pathology or other problems that are beyond the naturopathic scope and therefore in need of other health professional;
  - Advise nutritional, dietary regimens and life style;
  - Investigate and evaluate, with the patient, the individual factors that can affect one’s health and well being;
  - Inform patients and general public to promote health and disease prevention;
  - Evaluate problems, gather and interpret data, grounding ones reasoning and decisions;
  - Minister herbal formulas or combinations and follow treatment evolution accordingly to herbal products regulations;
  - Identify and act in face of adverse reactions to naturopathic treatment;
  - Maintain ones health and establish a therapeutic relation with the patient;
  - Critically evaluate its naturopathy practice through self reflection, patients and colleagues feed-back, clinical case analysis and audits;
Critically evaluate scientific papers and to incorporate its findings in its clinical practice;
Maintain throughout his or hers professional life the necessary level of naturopathic competence by developing a CPD program, striving for a permanent update regarding any development on this field;
Compile case studies in Naturopathy and present them;
Supervise practitioners and trainees in Naturopathy.

- **A Naturopath must abide the following code of conduct:**
  - Assume an ethical conduct aiming a high level quality of naturopathic care;
  - Build a relation with the patients based on trust and information, being able to communicate in order to establish and maintain a sound therapeutic relation;
  - Not to harm or bring deliberate harm under any circumstances to the patient,
  - Refer the patient, whenever needed, to a better suitable health carer;
  - Not to raise false hope regarding treatment outcomes;
  - Not to treat anyone who’s clinical condition proves itself not be improved with naturopathic care;
  - Only apply useful and needed treatments to maintain or recover ones health;
  - Design a treatment plan that counts with the patient’s active and consented participation, stating the prognosis, outcomes, methods and therapeutic techniques to be used and regular progress evaluation;
  - Deliver high quality naturopathic care, always assuring patient safety;
  - Ensure confidentiality regarding patient health information as well as secrecy accordingly to legal norms;
  - Accept multiculturalism, respecting principles of non-discrimination based on ascendency, gender, ethnicity, language, place of origin, religion, political or ideological beliefs, education, economic status, social status and sexual orientation;
  - Making one self available for training in naturopathy, namely welcoming students and trainees;
  - Ensure opportunity, quality, rigor and humanization of naturopathic health care;
  - Ensure permanent filling and updated health information, registering every treatment applied;
  - Ensure professional development through CPD programs.

**C.7. - Bill nº 207-B/2014 - Osteopathy functional content:**

- Osteopathy is the therapeutic approach that has as an objective to differentially diagnose, treat and prevent neural-muscular-skeleton...
disturbances and other related alteration, using a variety of manual techniques and other similar ones, needed to a good osteopathic performance in order to improve physiological functions and/or homeostasis regulation that may be altered by somatic, neural-muscular-skeleton dysfunctions, as well as related vascular, lymphatic and neuronal elements.

• **Osteopathy:**
  o Uses a systemic approach to health care and is based on the concept that the human being is a dynamic functional unit, in which every part is interconnected and has inherent self-regulatory and self-healing mechanisms;
  o Respects the relation between different human health and sickness dimensions;
  o Emphasizes the human body structural and functional integrity and its intrinsic capacity for self-healing;
  o Pays special attention to the biomechanics of the neural-muscular-skeleton system and its relation with the body’s physiology;
  o Holds structural diagnosis, manipulative treatment and others, essential to a proper osteopathic intervention;

• Osteopathy can only be practiced under the professional title of "Osteopath". This title can only be used by those who have a professional licence issued by ACSS;

• **An Osteopath must have:**
  o Critical knowledge on osteopathic theory, practice and principles, by demonstrating them in actions throughout several approaches, selecting and applying those techniques as defined as osteopathic *leges artis* meeting patients needs,
  o Knowledge on basic sciences within the context of osteopathic theory and on the different function-structure models, including, at least, the role of vascular, neurological, lymphatic, biomechanical, biological and energetic factors in maintaining biochemical, cellular and anatomical functions, in health and in sickness;
  o Sufficient knowledge on physiology, pathology, physiopathology, observation and symptomatology in order to identify those cases when the patient needs other health professional care;
  o Sufficient knowledge of the human being in order to recognize and interpret signs of dysfunction so that one can develop adequate strategies and treatment;
  o Sufficient knowledge on psychology and social determinants of health that enables him or her to contextualize the therapeutic decision and care;
  o Deep knowledge of biomechanical principals in order to safely and effectively apply osteopathic techniques;
  o Deep knowledge on palpation and proprioception so that one can
differentiate normal from abnormal functioning of the different body systems and tissues and interpret those results;

- Deep knowledge on indications and contraindications of osteopathic treatment;
- Deep knowledge of behavioural sciences in order to give proper and effective counselling about healthy lifestyle habits;
- Deep knowledge of interpersonal communication that allows a proper collection of personal and familiar facts that are relevant for therapeutic porpoise; to maintain a good relationship with patients, colleagues and other persons of interest related with the profession; prevention and conflict solving;

**An Osteopath must be able to:**

- Perceive physiology and neural-muscular-skeleton system changes, namely through observation, palpation and movement amplitude;
- Use, in practice, the understanding of the relation of structure and function to optimize the body self-regulation and the necessary techniques to provide treatment to patients;
- Acquire a highly developed skill in osteopathic manipulative techniques;
- Inform patients and public aiming health promotion and disease prevention, namely throughout counselling about correct posture, physical exercise and dietary habits;
- Recognize situations in which the patients complaints could indicate pathologies or problems outside osteopathy scope that need another health professional;
- Recognize and intervene before adverse reactions to osteopathic treatment;
- Evaluate problems, gather and interpret data, grounding ones reasoning and decisions;
- Maintain ones health and establish a therapeutic relation with the patient;
- Help the patient to take measures to improve ones wellbeing and adopt healthy life-styles;
- Critically evaluate its osteopathy practice through self reflection, patients and colleagues feed-back, clinical case analysis and audits;
- Critically evaluate scientific papers and to incorporate its findings in its clinical practice;
- Maintain throughout his or hers professional life the necessary level of osteopathic competence by developing a CPD program, striving for a permanent update regarding any development on this field;
- Compile case studies in Osteopathy and present them;
- Supervise practitioners and trainees in Osteopathy.

**An Osteopath must abide the following code of conduct:**

- Assume an ethical conduct aiming a high level quality of osteopathic
Care;
- Build a relation with the patients based on trust and information, being able to communicate in order to establish and maintain a sound therapeutic relation;
- Not to harm or bring deliberate harm under any circumstances to the patient;
- Refer the patient, whenever needed, to a better suitable health carer;
- Not to raise false hope regarding treatment outcomes;
- Not to treat anyone who’s clinical condition proves itself not be improved with osteopathic care;
- Only apply useful and needed treatments to maintain or recover ones health;
- Design a treatment plan that counts with the patient’s active and consented participation, stating the prognosis, outcomes, methods and therapeutic techniques to be used and regular progress evaluation;
- Deliver high quality osteopathic care, always assuring patient safety;
- Accept multiculturalism, respecting principles of non-discrimination based on ascendency, gender, ethnicity, language, place of origin, religion, political or ideological beliefs, education, economic status, social status and sexual orientation;
- Making one self available for training in osteopathy, namely welcoming students and trainees;
- Ensure opportunity, quality, rigor and humanization of osteopathic health care;
- Ensure confidentiality regarding patient health information as well as secrecy accordingly to legal norms;
- Ensure permanent filling and updated health information, registering every treatment applied;
- Ensure professional development through CPD programs.

C.8. Bill nº 207-C/2014 - Homeopathy functional content:

- Homeopathy is the therapeutic approach that uses homeopathic remedies for prevention and treatment, obtained from substances called stocks or homeopathic prime materials, accordingly to a production process described within the European Pharmacopeia or, in its absence, within the pharmacopeia officially in use in any European union member state, which can contain various principals;
- The theoretic principals in which Homeopathy is based are, namely, law of similitude, principal of cure duration, principal of single remedy, theory of infinitesimal minimum dosage and chronic disease theory;
- Homeopathy treats diseases with remedies that, in a healthy person, would
To provoke similar symptoms to the disease;

- Instead of fighting directly the disease, homeopathic remedies stimulates the body to do it;
- Homeopathic remedies are based on the principle that potentially active molecule dilutions retain the original substance “memory”;
- With the fundamental concept that “similar cures the similar”, homeopathy uses an holistic approach to perform patient diagnosis and symptom treatment, including in its practice diet and healthy life style counselling, accordingly to homeopathic parameters;
- Homeopathic remedies have as a principal, the induction of vital functions reorganization, stimulating the body self-regulatory mechanism.
- Homeopathy can only be practiced under the professional title of "Homeopath". This title can only be used by those who have a professional licence issued by ACSS;

- **An Homeopath must have:**
  - Critical knowledge of the specific theoretical bases that underline homeopathic diagnosis and therapeutic intervention;
  - Critical knowledge of homeopathic theory, practice and principles, demonstrating them through several approaches and selecting homeopathic remedies that respond to patients needs;
  - Deep knowledge on indications and contraindications of homeopathic treatment;
  - Sufficient knowledge of the human being in order to recognize and interpret signs of dysfunction so that one can develop adequate strategies and treatment;
  - Sufficient knowledge on physiology, pathology, physiopathology, observation and symptomatology in order to identify those cases when the patient needs other health professional care;
  - Sufficient knowledge on psychology and social determinants of health that enables him or her to contextualize the therapeutic decision and care;
  - Deep knowledge of interpersonal communication that allows a proper collection of personal and familiar facts that are relevant for therapeutic porpoise; to maintain a good relationship with patients, colleagues and other persons of interest related with the profession; prevention and conflict solving;
  - Deep knowledge on behavioural sciences that allows an adequate and effective counselling about healthy life styles.

- **An Homeopath must be able to:**
  - Master homeopathic theories and practice, namely, homeopathic evaluation, disease prevention strategies, homeopathic treatment and homeopathic pharmacopeia;
  - Master homeopathic remedies characteristics, its indications and
contraindications;
  o Recognize situations in which the patient’s complaints could indicate pathologies or problems outside homeopathy scope that need another health professional;
  o Evaluate problems, gather and interpret data, grounding ones reasoning and decisions;
  o Critically evaluate scientific papers and to incorporate its findings in its clinical practice;
  o Investigate and evaluate, with the patient, individual factors that can affect his health and wellbeing;
  o Inform patients and general public aiming health promotion and disease prevention;
  o Select and prescribe the homeopathic remedy whose diluted substance produces a similar symptomatology as the patient’s;
  o Identify and intervene before adverse reactions to homeopathic treatment;
  o Maintain ones health and establish an adequate therapeutic relation with the patient;
  o Critically evaluate its homeopathy practice through self reflection, patients and colleagues feed-back, clinical case analysis and audits;
  o Maintain throughout his or hers professional life the necessary level of homeopathic competence by developing a CPD program, striving for a permanent update regarding any development on this field;
  o Compile case studies in Homeopathy and present them;
  o Supervise practitioners and trainees in Homeopathy.
• An Homeopath must abide the following code of conduct:
  o Assume an ethical conduct aiming a high level quality of homeopathic care;
  o Build a relation with the patients based on trust and information, being able to communicate in order to establish and maintain a sound therapeutic relation;
  o Not to harm or bring deliberate harm under any circumstances to the patient,
  o Refer the patient, whenever needed, to a better suitable health carer;
  o Not to raise false hope regarding treatment outcomes;
  o Not to treat anyone who’s clinical condition proves itself not be improved with homeopathic care;
  o Only apply useful and needed treatments to maintain or recover ones health;
  o Design a treatment plan that counts with the patient’s active and consented participation, stating the prognosis, outcomes, methods and therapeutic techniques to be used and regular progress evaluation;
  o Deliver high quality homeopathic care, always assuring patient safety;
  o Ensure opportunity, quality, rigor and humanization of homeopathic
health care;
- Ensure confidentiality regarding patient health information as well as secrecy accordingly to legal norms;
- Accept multiculturalism, respecting principles of non-discrimination based on ascendency, gender, ethnicity, language, place of origin, religion, political or ideological beliefs, education, economic status, social status and sexual orientation;
- Making oneself available for training in homeopathy, namely welcoming students and trainees;
- Ensure permanent filling and updated health information, registering every treatment applied;
- Ensure professional development through CPD programs

C.9. - Bill nº 207-D /2014 - Chiropractic functional content:

- Chiropractics is the therapeutic approach that is based on the neural-muscular-skeleton system disturbances diagnose, treatment and prevention, mainly subluxation (on chiropractic view), as well as on the effects of these disturbances in the individual general health condition;

- Chiropractics:
  - Uses the body inherent and recovery wise capabilities and is based on the relation between the vertebral structure and functioning of the nervous system as a relevant health factor;
  - Respects the relation between the different dimensions of the human being in health and sickness;
  - Sees subluxation as a lesion or dysfunction in which the alignment, movement integrity or function are altered, although articular surface contact are intact, essentially as a functional unit that can influence biomechanics and present neurological implications;
  - Gives great importance to manual techniques, with or without the use of instruments, including subluxation adjustment (in chiropractic’s view) and/or articulation manipulation;
  - Doesn’t resort to pharmaceutical drugs or surgery and values biopsychosocial factors when treating a patient;

- Chiropractic’s can only be practiced under the professional title of "Chiropractor". This title can only be used by those who have a professional licence issued by ACSS;

- A Chiropractor must have:
  - Critical knowledge on chiropractic’s theory, practice and principles, by demonstrating them in actions throughout several approaches, selecting and applying those techniques as defined as chiropractic leges artis meeting patients needs;
Knowledge on basic sciences within the context of chiropractic's;

- Sufficient knowledge to understand the biomechanical nature and normal and abnormal posture, as well as neural-muscular-skeleton system physiopathology and its relation with every other anatomical structures;

- Deep knowledge on indications and contraindications of chiropractic intervention;

- Deep knowledge on behavioural sciences that allows an adequate and effective counselling about healthy life styles.

- Sufficient knowledge on psychology and social determinants of health that enables him or her to contextualize the therapeutic decision and care;

- Sufficient knowledge on physiology, pathology, physiopathology, observation and symptomatology in order to identify those cases when the patient needs other health professional care;

- Deep knowledge of interpersonal communication that allows a proper collection of personal and familiar facts that are relevant for therapeutic porpoise; to maintain a good relationship with patients, colleagues and other persons of interest related with the profession; prevention and conflict solving;

• **A Chiropractor must be able to:**

  - Evaluate pathology related with the vertebral spine, nervous system and articulations so that he can provide adjustments to the vertebral spine structure or function alterations or dysfunctions;
  
  - Evaluate the vertebral spine and related structures and their relation with the nervous system;
  
  - Conduct the vertebral subluxation (in chiropractic view) diagnose and other changes on the neural-muscle-skeleton system, proceed with chiropractic exams and apply chiropractic methods and specific techniques;
  
  - Recognize situations in which the patients complaints could indicate pathologies or problems outside chiropractic's scope that need another health professional;
  
  - Acquire a highly developed skill on different manipulative techniques;
  
  - Apply specialized treatments that involve, whenever appropriate, chiropractic adjustment to reduce or correct subluxation (in chiropractic view);
  
  - Use manipulation, reactivation, rehabilitation, restoration and increase of physical recuperation and function;
  
  - Give advice on neural-muscular-skeleton disturbances, mechanical dysfunctions, rehabilitation, pain management, healthy life style and general well being;
  
  - Evaluate problems, gather and interpret data, grounding ones reasoning and decisions;
Maintain ones health and establish an adequate therapeutic relation with the patient;

Identify and intervene before adverse reactions to chiropractic treatment;

Assist the patient in taking measures to improve his well being and adopt healthier life styles;

Critically evaluate its chiropractic practice through self reflection, patients and colleagues feed-back, clinical case analysis and audits;

Critically evaluate scientific papers and to incorporate its findings in its clinical practice;

Maintain throughout his or hers professional life the necessary level of chiropractic competence by developing a CPD program, striving for a permanent update regarding any development on this field;

Provide information on health promotion methods and disease prevention;

Compile case studies in Chiropractics and present them;

Supervise practitioners and trainees in Chiropractics.

• **A Chiropractor must abide the following code of conduct:**

  o Assume an ethical conduct aiming a high level quality of chiropractics care;
  
  o Build a relation with the patients based on trust and information, being able to communicate in order to establish and maintain a sound therapeutic relation;
  
  o Not to harm or bring deliberate harm under any circumstances to the patient,
  
  o Refer the patient, whenever needed, to a better suitable health carer;
  
  o Not to raise false hope regarding treatment outcomes;
  
  o Not to treat anyone who’s clinical condition proves itself not be improved with chiropractics care;
  
  o Only apply useful and needed treatments to maintain or recover ones health;
  
  o Design a treatment plan that counts with the patient’s active and consented participation, stating the prognosis, outcomes, methods and therapeutic techniques to be used and regular progress evaluation;
  
  o Deliver high quality chiropractics care, always assuring patient safety;
  
  o Accept multiculturalism, respecting principles of non-discrimination based on ascendency, gender, ethnicity, language, place of origin, religion, political or ideological beliefs, education, economic status, social status and sexual orientation;
  
  o Making one self available for training in chiropractics, namely welcoming students and trainees;
  
  o Ensure opportunity, quality, rigor and humanization of homeopathic health care;
  
  o Ensure confidentiality regarding patient health information as well as
secrity accordingly to legal norms;
  o Ensure permanent filling and updated health information, registering every treatment applied;
  o Ensure professional development through CPD programs

C.10. - Bill nº 207-E /2014 – Herbal Medicine functional content:

• Herbal Medicine is the therapeutic approach that uses, as therapeutic ingredients, substances derived from plants. It includes health promotion, disease prevention, diagnose and treatment, covering dietetic counselling and life style orientation;

• Herbal Medicine is a therapy that:
  o With a holistic, energetic and natural conception of the human being that applies its own diagnose methods, prescription and treatments, based on specific theories and axioms;
  o Uses, as therapeutic ingredients, fresh or dry herbs, medicinal or food, substances from plants, namely essential oils and floral and their extracts and formulas that contain parts of herbs or combinations of herbs, for different forms of use, both internal and external, and also dietary and food supplements. Herbs or its formulas can be produced for immediate consumption or as a base for food supplements and vegetable products, subject to applicable law to this kind of supplements and products;

• Herbal Therapy can only be practiced under the professional title of "Herbal Therapist". This title can only be used by those who have a professional licence issued by ACSS;

• A Herbal Therapist must have:
  o Critical knowledge on specific theoretical bases that underlie his diagnose and his therapeutic intervention;
  o Deep knowledge on indications and contraindications of Herbal Medicine intervention;
  o Critical knowledge on Herbal Medicine theory, practice and principals, demonstrating them through several approaches, selecting natural agents, techniques and procedures or changing treatment plans in order to meet the patients needs;
  o Deep knowledge of interpersonal communication that allows a proper collection of personal and familiar facts that are relevant for therapeutic porpoe; to maintain a good relationship with patients, colleagues and other persons of interest related with the profession; prevention and conflict solving;
  o Sufficient knowledge on psychology and social determinants of health that enables him or her to contextualize the therapeutic decision and care;
Deep knowledge on behavioural sciences that allows an adequate and effective counselling about healthy life styles.

- Sufficient knowledge on physiology, pathology, physiopathology, observation and symptomatology in order to identify those cases when the patient needs other health professional care;

- A Herbal Therapist must be able to:
  - Perform in his or hers practice in a way that promotes health and prevents disease, evaluating his or hers patients, performing the health exam and using natural diagnose methods, such as interview, observation, evaluation of built and vitality, differentiation of factors that determine systemic imbalance standards and its relation within the patients context accordingly with herbal medicine theories;
  - Recognize situations in which the patients complaints could indicate pathologies or problems outside a herbalist scope that need another health professional;
  - Establish therapeutic strategies and principals and manage the treatment plan;
  - Apply medicinal plants, formulas, herbal products and food supplements; give consul on dietary and nutritional regimens, lifestyles, and follow treatment evolution, accordingly to existing law;
  - Identify and intervene before adverse reactions to herbal medicine treatment;
  - Investigate and evaluate, with the patient, individual factors that can affect his health and well being;
  - Inform patients and general public aiming health promotion and disease prevention;
  - Apply herbal medicine disease prevention methods, rehabilitation and therapeutic approaches; identify therapeutic properties of plants so that a proper prescription should be made;
  - Develop and implement treatment plans, prescribing herbal medicine products, providing nutritional, dietary and life styles counselling, accordingly to existing law;
  - Maintain ones health and establish an adequate therapeutic relation with the patient;
  - Critically evaluate its herbal medicine practice through self reflection, patients and colleagues feed-back, clinical case analysis and audits;
  - Critically evaluate scientific papers and to incorporate its findings in its clinical practice;
  - Base its activity in a holistic approach of health, focusing on the individual as a whole;
  - Know the human being so that one can recognize and interpret dysfunction signs and develop adequate strategies and treatments;
  - Maintain throughout his or hers professional life the necessary level of herbal medicine competence by developing a CPD program, striving for
a permanent update regarding any development on this field;
  o Provide information on health promotion methods and disease prevention;
  o Evaluate problems, gather and interpret data, grounding ones reasoning and decisions;
  o Compile case studies in Herbal Medicine and present them;
  o Supervise collaborators and trainees in Herbal Medicine.

• A Herbal Therapist must abide the following code of conduct:
  o Assume an ethical conduct aiming a high level quality of herbal medicine care;
  o Build a relation with the patients based on trust and information, being able to communicate in order to establish and maintain a sound therapeutic relation;
  o Not to harm or bring deliberate harm under any circumstances to the patient,
  o Refer the patient, whenever needed, to a better suitable health carer;
  o Not to raise false hope regarding treatment outcomes;
  o Not to treat anyone who’s clinical condition proves itself not be improved with herbal medicine care;
  o Only apply useful and needed treatments to maintain or recover ones health;
  o Design a treatment plan that counts with the patient’s active and consented participation, stating the prognosis, outcomes, methods and therapeutic techniques to be used and regular progress evaluation;
  o Deliver high quality herbal medicine care, always assuring patient safety;
  o Ensure confidentiality regarding patient health information as well as secrecy accordingly to legal norms;
  o Accept multiculturalism, respecting principles of non-discrimination based on ascendency, gender, ethnicity, language, place of origin, religion, political or ideological beliefs, education, economic status, social status and sexual orientation;
  o Making one self available for training in herbal medicine, namely welcoming students and trainees;
  o Ensure opportunity, quality, rigor and humanization of herbal medicine health care;
  o Ensure permanent filling and updated health information, registering every treatment applied;
  o Ensure professional development through CPD programs

C.11. - Bill nº 207-F /2014 – Acupuncture functional content:
- Acupuncture is the therapeutic approach that uses specific diagnose methods, prescription and treatments based on acupuncture axioms and theories, using the meridians network, acupuncture points and reflexology areas of the human body, to prevent and treat energetic, physical and psychic disharmonies;

- **Acupuncture:**
  - Is a therapy with an holistic, energetic and dialectic conception of the human being;
  - Is based on a specific philosophy and methodology based on traditional Chinese medicine;
  - Applies specific diagnose and therapeutic methods, based on traditional Chinese medicine theories to promote and recover health and prevent diseases;

- Acupuncture can only be practiced under the professional title of "Acupuncturist". This title can only be used by those who have a professional licence issued by ACSS;

- **An Acupuncturist must have:**
  - Critical knowledge on specific theoretical bases that underlie its diagnose and its therapeutic intervention, namely, yin and yang, five movements, qi, blood and organic liquids, eight diagnose principals, jing luo meridian system and its ramifications, general and zang fu syndromes, pathology, pathogenesis and energetic pathologies, the six levels, the four layers and the three burners;
  - Critical knowledge on meridian topography and acupuncture points;
  - Critical knowledge on selection principals, acupuncture points types and categories, their mapping and their manipulation technique;
  - Critical knowledge on indications and contraindications of acupuncture;
  - Deep knowledge on performing acupuncture auxiliary treatments and reflexology acupuncture microsystems;
  - Critical knowledge on acupuncture theory, practice and principals, demonstrating them in actions throughout several approaches, managing them, selecting them or changing treatment plans to meet patients needs;
  - Deep knowledge about acupuncture auxiliary treatment prescription, such as massage, digit puncture, energetic exercises, herbal medicine, dietary counselling and life style;
  - Deep knowledge on behavioural sciences that allows an adequate and effective counselling about healthy life styles.
  - Sufficient knowledge about the human being so that one can recognize and interpret dysfunction signs and develop adequate strategies and rehabilitation treatments;
  - Sufficient knowledge on physiopathology in order to identify those cases when the patient needs other health professional care;
  - Sufficient knowledge on psychology and social determinants of health;
that enables him or her to contextualize the therapeutic decision and care;

- Deep knowledge of interpersonal communication that allows a proper collection of personal and familiar facts that are relevant for therapeutic purpose; to maintain a good relationship with patients, colleagues and other persons of interest related with the profession; prevention and conflict solving;

• An Acupuncturist must be able to:

  - Perform based in knowledge obtained in the domain of acupuncture theories, mainly to be able to evaluate the patient, perform the diagnose, establish the therapeutic principals and strategies, perform and manage treatment and respect codes of ethics, deontology and safe practice;
  
  - Use specific diagnose processes applied to acupuncture such as interview, observation, audio-olfactory exam, palpation and symptom and syndrome differentiation;
  
  - Recognize situations in which the patients complaints could indicate pathologies or problems outside an acupuncturist scope that need another health professional;
  
  - Apply specific acupuncture methods, such as:
    - Needle insertion and manipulation, moxibustion, seven points hammer, suckers, electric puncture, laser puncture and other means, in meridians and acupuncture points;
    - Needle insertion and manipulation in reflexology zones;
    - Energetic digit puncture and manipulative massage techniques;
    - Energetic exercise prescription and counselling about healthy life styles;
  
  - Trace, implement and adapt therapeutic principals and treatment plans accordingly to a patients state;
  
  - Identify and intervene before adverse reactions to acupuncture treatment;
  
  - Develop and implement treatment plans using specific acupuncture techniques for prevention, disease treatment and body regulation;
  
  - Promote health through acupuncture methods and means;
  
  - Maintain throughout his or hers professional life the necessary level of acupuncture competence by developing a CPD program, striving for a permanent update regarding any development on this field;
  
  - Evaluate problems, gather and interpret data, grounding ones reasoning and decisions;
  
  - Critically evaluate scientific papers and to incorporate its findings in its clinical practice;
  
  - Maintain ones health and establish an adequate therapeutic relation with the patient;
  
  - Critically evaluate its acupuncture practice through self reflection,
patients and colleagues feedback, clinical case analysis and audits;
- Elaborate case studies in Acupuncture and present them;
- Supervise collaborators and trainees in Acupuncture.

• An Acupuncturist must abide the following code of conduct:
  - Assume an ethical conduct aiming a high level quality of acupuncture care;
  - Build a relation with the patients based on trust and information, being able to communicate in order to establish and maintain a sound therapeutic relation;
  - Not to harm or bring deliberate harm under any circumstances to the patient,
  - Refer the patient, whenever needed, to a better suitable health carer;
  - Design a treatment plan that counts with the patient’s active and consented participation, stating the prognosis, outcomes, methods and therapeutic techniques to be used and regular progress evaluation;
  - Deliver high quality acupuncture care, always assuring patient safety;
  - Ensure confidentiality regarding patient health information as well as secrecy accordingly to legal norms;
  - Accept multiculturalism, respecting principles of non-discrimination based on ascendency, gender, ethnicity, language, place of origin, religion, political or ideological beliefs, education, economic status, social status and sexual orientation;
  - Making one self available for training in acupuncture, namely welcoming students and trainees;
  - Not to treat anyone who’s clinical condition proves itself not be improved with acupuncture care;
  - Only apply useful and needed treatments to maintain or recover ones health;
  - Ensure opportunity, quality, rigor and humanization of acupuncture health care;
  - Ensure permanent filling and updated health information, registering every treatment applied;
  - Ensure professional development through CPD programs

C.12. - Bill nº 207-G /2014 – Traditional Chinese Medicine functional content:

- Traditional Chinese Medicine is the therapeutic approach that uses specific prevention methods, diagnose, prescription and treatments based on traditional Chinese medicine theories and its specific methods, namely, meridian and acupuncture points stimulation, using different therapeutic methods, prescription of herbal formulas, food counselling and exercises to promote and regain health;
• Traditional Chinese Medicine:
  o Has a holistic, energetic and dialectic conception of the human being;
  o Is based on specific traditional Chinese medicine axioms and theories;
  o Applies specific diagnose processes and own therapies based on traditional Chinese medicine theories;
  o Investigates, develops and implements treatment plans using acupuncture, herbal medicine, tuina massage, traditional Chinese medicine dietetics, chi kung and tai chi therapeutic exercises and others to improve and regulate function and treat energetic disharmonies such as they are understood by traditional Chinese medicine;

• Traditional Chinese Medicine can only be practiced under the professional title of "Traditional Chinese Medicine Specialist". This title can only be used by those who have a professional licence issued by ACSS;

• A Traditional Chinese Medicine Specialist must have:
  o Critical knowledge on specific theoretical bases that underlie its diagnose and its therapeutic intervention, namely, yin and yang, five movements, qi, xue and jin ye, eight diagnose principals, jing luo meridian system and its ramifications, general and zang f u syndromes, pathology, pathogenesis and energetic pathologies, the six levels, the four layers and the three burners;
  o Critical knowledge on methods and selection principals, acupuncture points categories and types, their mapping, manipulation technique or stimulation and its combination accordingly with the diagnose, treatment strategy and patient energetic condition within acupuncture or tuina massage;
  o Critical knowledge on selection and combination of therapeutic matter, herbal medicine and food and its prescription accordingly with the diagnose, treatment strategy and patient energetic condition;
  o Deep knowledge on performing acupuncture auxiliary treatments and reflexology acupuncture microsystems;
  o Deep knowledge of identification methods, selection, combination and prescription of therapeutic chi kung and tai chi exercises, accordingly to diagnose, treatment strategy and patient energetic condition;
  o Critical knowledge on indications and contraindications of traditional Chinese medicine treatments, namely acupuncture, herbal medicine, tuina massage, therapeutic chi kung and tai chi exercises;
  o Critical knowledge on traditional Chinese medicine theory, practice and principals, demonstrating them in actions throughout several approaches, managing them, selecting them or changing treatment plans to meet patients needs;
  o Deep knowledge on behavioural sciences and traditional Chinese medicine longevity and health art that allows an adequate and effective counselling about healthy life styles.
Sufficient knowledge about the human being so that one can recognize and interpret dysfunction signs and develop adequate strategies and rehabilitation treatments;

Sufficient knowledge on physiology, pathology, physiopathology, observation and symptomatology in order to identify those cases when the patient needs other health professional care;

Sufficient knowledge on psychology and social determinants of health that enables him or her to contextualize the therapeutic decision and care;

Deep knowledge of interpersonal communication that allows a proper collection of personal and familiar facts that are relevant for therapeutic porpoise; to maintain a good relationship with patients, colleagues and other persons of interest related with the profession; prevention and conflict solving;

- **A Traditional Chinese Medicine Specialist must be able to:**
  - Perform based in knowledge obtained in the domain of traditional Chinese medicine theories, namely to evaluate the patient, perform the diagnose, establish the therapeutic principals and strategies, perform and manage treatment and respect codes of ethics, deontology and safe practice;
  - Use specific diagnose processes such as interview, observation, audio-olfactory exam, palpation and symptom and syndrome differentiation;
  - Recognize situations in which the patients complaints could indicate pathologies or problems outside a traditional medicine specialist scope that need another health professional;
  - Apply specific acupuncture methods, such as:
    - Solid needle insertion and manipulation, moxibustion, seven points hammer, suckers, and other similar means, in meridians and acupuncture points;
    - Needle insertion and manipulation in reflexology zones;
    - Herbal medicine prescription (oral and topical);
    - Systemic or in reflexology zones energetic digit puncture and manipulative massage techniques;
    - Counselling and dietary prescription;
    - Counselling and therapeutic chi kung and tai chi energetic exercises prescription;
    - Practical orientation of therapeutic chi kung and tai chi energetic exercises;
  - Develop and implement treatment plans using specific traditional Chinese medicine therapies to prevent and treat disease and regulate the human body, accordingly to law in place;
  - Inform patients and general public aiming health promotion and disease prevention;
  - Promote health through traditional Chinese medicine methods and
means;
  o Maintain throughout his or hers professional life the necessary level of
traditional Chinese medicine competence by developing a CPD program,
striving for a permanent update regarding any development on this
field;
  o Evaluate problems, gather and interpret data, grounding ones reasoning
and decisions;
  o Critically evaluate scientific papers and to incorporate its findings in its
clinical practice;
  o Identify and intervene before adverse reactions to traditional Chinese
medicine treatments;
  o Maintain ones health and establish an adequate therapeutic relation
with the patient;
  o Critically evaluate its traditional Chinese medicine practice through self
reflection, patients and colleagues feed-back, clinical case analysis and
audits;
  o Elaborate case studies in traditional Chinese medicine and present
them;
  o Supervise collaborators and trainees in traditional Chinese medicine.

• **A Traditional Chinese Medicine Specialist must abide the following code of
  conduct:**
  o Assume an ethical conduct aiming a high level quality of traditional
Chinese medicine care;
  o Build a relation with the patients based on trust and information, being
able to communicate in order to establish and maintain a sound
therapeutic relation;
  o Not to harm or bring deliberate harm under any circumstances to the
patient,
  o Refer the patient, whenever needed, to a better suitable health carer;
  o Not to raise false hope regarding treatment outcomes;
  o Not to treat anyone who’s clinical condition proves itself not be
improved with traditional Chinese medicine care;
  o Only apply useful and needed treatments to maintain or recover ones
health;
  o Design a treatment plan that counts with the patient’s active and
consented participation, stating the prognosis, outcomes, methods and
therapeutic techniques to be used and regular progress evaluation;
  o Deliver high quality traditional Chinese medicine care, always assuring
patient safety;
  o Ensure opportunity, quality, rigor and humanization of traditional
Chinese medicine health care;
  o Ensure permanent filling and updated health information, registering
every treatment applied;
  o Ensure confidentiality regarding patient health information as well as
secrecy accordingly to legal norms;
- Accept multiculturalism, respecting principles of non-discrimination based on ascendency, gender, ethnicity, language, place of origin, religion, political or ideological beliefs, education, economic status, social status and sexual orientation;
- Making one self available for training in traditional Chinese medicine, namely welcoming students and trainees;
- Ensure professional development through CPD programs

C.13. - Bill nº 172-B /2015 – Herbal Therapy Degree Level:

- **Scope**
  - This bill regulates the general requisites for the Herbal Therapy study cycle that issues a Herbal Therapist Licensed Degree

- **Who provides the course**
  - This course can only be provided by Higher Degree schools such as polytechnic and universities

- **Competences provided**
  - This course provides those competences identified in Bill nº 207-E/2014 (see above)

- **Training components**
  - **Fundamental Sciences**
  - **Sciences and Clinical Techniques**
  - **Herbal Therapy Principles**
  - **Herbal Therapy Practice**

- **Training components for Fundamental Sciences**
  - **Anatomy**
  - **Molecular, cellular biology and immunology**
  - **General, analytical and organic chemistry**
  - **Physiology**
  - **Ecology, botanic and horticulture**
  - **Bio pharmacy, pharmacokinetics and pharmaceutical technology**
  - **Toxicology and herbal toxicology**
  - **Production and quality control**
  - **Psychology, personal, social and professional development**
  - **Education for health**
  - **Health promotion**
  - **Dietetics and nutrition**

- **Training components for sciences and clinical techniques**
  - **Physiopathology**
  - **Pathology**
  - **Epidemiology and public health**
  - **Imagery and clinical analysis**
  - **Pharmacology**
o Herbal therapy interview and patient clinical history
o Psychoneuroimmunology
o Safety and hygiene
o First aid and life support

• Training components for Herbal Therapy principles
  o Herbal therapy theories
  o Pharmacology and dispensary
  o Herbal therapy, health and non conventional therapies history
  o Western, Chinese and Ayurvedic herbal therapy
  o Aromatherapy, maritime herbal therapy and herbal cosmetics
  o Diagnose methods for herbal therapy that encompass training in:
    ▪ Clinical interview accordingly to the different theories in herbal therapy;
    ▪ Physical exam;
    ▪ Vitality and constitution evaluation;
    ▪ Differentiation of factors that determine systemic unbalance patterns and their relation within the patients context accordingly to the specific reasoning of the different herbal therapy theories
  o Practice of herbal therapy

• Training components for Herbal Therapy practice
  o Therapeutic methods in herbal therapy
  o Dietetics
  o External treatments
  o Nutritional, dietetic and life style advice
  o Ability to evaluate the patient
  o Ability to perform herbal therapy diagnose
  o Ability to establish the principles and therapeutic strategies to perform and manage the herbal therapy treatment plan
  o Ability to implement the combined herbal therapy treatment supporting it with natural diet, external treatments and life style habits accordingly with the principles and treatment plan
  o Ability to respect safe practice norms, ethics and deontology
  o This training component has to include an internship of 1000 hours under a supervision of a licensed herbal therapist;
  o For this internship, universities and polytechnics will have to celebrate partnerships with non conventional therapies clinics, legally established, in which are stated the conditions of this internship, functions, responsibilities and competences of everyone involved.

• Training in other domains
  o Communication sciences
  o Introduction to research in herbal therapy
  o Ethics and deontology
- Legislation
  - **Duration**
    - 8 curricular semesters
  - **Credits**
    - 240ECTS
    - Distributed like this:
      - Fundamental sciences – minimum of 45 ECTS
      - Sciences and Clinical Techniques – minimum of 45 ECTS
      - Herbal Therapy Principles – minimum of 90 ECTS
      - Herbal Therapy practice – minimum of 40 ECTS
  - **Enrolment conditions**
    - It is mandatory national access exams in Biology, Physics and Chemistry

C.14. - Bill nº 172-C /2015 – Acupuncture Degree Level:

- **Scope**
  - This bill regulates the general requisites for the Acupuncture study cycle that issues an Acupuncture Licensed Degree
- **Who provides the course**
  - This course can only be provided by Higher Degree schools such as polytechnic and universities
- **Competences provided**
  - This course provides those competences identified in Bill nº 207-F/2014 (see above)
- **Training components**
  - Fundamental Sciences
  - Sciences and Clinical Techniques
  - Acupuncture Principles
  - Acupuncture Practice
- **Training components for Fundamental Sciences**
  - Neurophysiology and functional anatomy
  - Molecular and cellular biology
  - Psychology, personal, social and professional development
  - Education for health
  - Health promotion
  - Dietetics and nutrition
- **Training components for sciences and clinical techniques**
  - Physiopathology
  - Pathology
  - Epidemiology and public health
  - Imagery and clinical analysis
  - Acupuncture interview and patient clinical history
  - Safety and hygiene
• First aid and life support

• Training components for Acupuncture principles
  o Fundamental theories of acupuncture, including training in yin and yang domains, five movements, qi, blood and organic liquids, eight diagnose principles, jing luo meridians and ramifications, general syndromes and zang fu syndromes, energetic pathology and ethiopathology, the six levels, the four layers and the three heaters;
  o Acupuncture diagnose methods, including training in interrogation domains – anamneses, observation, physical exam, audio-olfactory exam, tong exam, palpation, pulse exam, meridians and acupoints exam, reflexes areas exam, syndrome differentiation;
  o Acupuncture therapeutic methods, including training in threadlike needle insertion and manipulation, moxibustion use, seven points hammer, cupping, electro puncture, laser puncture and other means in meridians and acupoints, insertion and manipulation of needles and use of other means in reflexology areas, massage and energetic digitopuncture, energetic exercises;

• Training components for Acupuncture practice
  o Patient evaluation
  o Diagnose
  o Establishment of principles and strategic therapeutic approaches to implement and manage a treatment plan
  o To perform the treatment, using in an isolated fashion or combined the use of acupuncture, energetic massage digitopuncture and energetic exercises, accordingly to the principles and treatment plan;
  o Safe practice norms, ethics and deontology
  o This training component has to include an internship of 1000 hours under a supervision of a licensed acupuncturist
  o For this internship, universities and polytechnics will have to celebrate partnerships with non conventional therapies clinics, legally established, in which are stated the conditions of this internship, functions, responsibilities and competences of everyone involved.

• Training in other domains
  o Communication sciences
  o Introduction to research in acupuncture
  o Ethics and deontology
  o Legislation

• Duration
  o 8 curricular semesters

• Credits
  o 240ECTS
  o Distributed like this:
    ▪ Fundamental sciences – minimum of 45 ECTS
- Sciences and Clinical Techniques – minimum of 45 ECTS
- Acupuncture Principles – minimum of 90 ECTS
- Acupuncture practice – minimum of 40 ECTS

- Enrolment conditions
  - It is mandatory national access exams in Biology, Physics and Chemistry

C.15. - Bill nº 172-D /2015 – Chiropractics Degree Level:

- Scope
  - This bill regulates the general requisites for the Chiropractics study cycle that issues a Chiropractic Licensed Degree

- Who provides the course
  - This course can only be provided by Higher Degree schools such as polytechnic and universities

- Competences provided
  - This course provides those competences identified in Bill nº 207-D/2014 (see above)

- Training components
  - Fundamental Sciences
  - Sciences and Clinical Techniques
  - Chiropractic Principles
  - Chiropractic Practice

- Training components for Fundamental Sciences
  - Anatomy and embryology
  - Physiology
  - Biochemistry
  - Molecular and cellular biology
  - Microbiology
  - Immunology
  - Toxicology
  - Ergonomics
  - Exercise physiology, biomechanics and kinetics
  - Psychology, personal, social and professional development
  - Education for health
  - Health promotion
  - Dietetics and nutrition

- Training components for sciences and clinical techniques
  - Pathology
  - Chiropractics interview, patient clinical history and physical exam
  - Imagery and clinical pathology result evaluation
  - Introduction to Otorhinolaringology
  - Introduction to Orthopaedics
• Training components for Chiropractics principles
  o Functional neurology
  o Clinical biomechanics, including biomechanical evaluation and specific chiropractic evaluation;
  o History, principles and philosophy of chiropractic;
  o Ethics and legislation relevant for chiropractic professional exercise;
  o Chiropractics techniques;
  o Sports chiropractic;
  o Infant chiropractic;
  o Senior chiropractic.

• Training components for Chiropractic practice
  o Chiropractic diagnose and differential diagnose
  o Chiropractic treatment, including manual manipulative techniques with or without instruments, indications, counter indications and limitations of chiropractic care;
  o Patient training, including posture, spine care and healthy life style;
  o Pain management, neuro-muscle-skeletal system rehabilitation, diagnose and vertebral sub dislocation treatment competences
  o Competences to evaluate and interpret the scientific and chiropractic knowledge in a critical way
  o Problem solving thinking
  o Biomechanics understanding of normal and pathological posture, as well as neuro-muscle-skeletal physiopathology and its relation with other anatomical structures;
  o Good communication with the patient;
  o Patient documentation and clinical files;
  o This training component has to include an internship of 1000 hours under a supervision of a licensed chiropractor;
  o For this internship, universities and polytechnics will have to celebrate partnerships with non conventional therapies clinics, legally established, in which are stated the conditions of this internship, functions, responsibilities and competences of everyone involved.
• **Training in other domains**
  - Communication sciences
  - Introduction to research in chiropractics
  - Ethics and deontology
  - Legislation

• **Duration**
  - 8 curricular semesters

• **Credits**
  - 240ECTS
  - Distributed like this:
    - Fundamental sciences – minimum of 45 ECTS
    - Sciences and Clinical Techniques – minimum of 45 ECTS
    - Chiropractic Principles – minimum of 90 ECTS
    - Chiropractic practice – minimum of 40 ECTS

• **Enrolment conditions**
  - It is mandatory national access exams in Biology, Physics and Chemistry

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**C.16. - Bill nº 172-E /2015 – Osteopathy Degree Level:**

• **Scope**
  - This bill regulates the general requisites for the Osteopathy study cycle that issues a Osteopathy Licensed Degree

• **Who provides the course**
  - This course can only be provided by Higher Degree schools such as polytechnic and universities

• **Competences provided**
  - This course provides those competences identified in Bill nº 207-B/2014 (see above)

• **Training components**
  - Fundamental Sciences
  - Sciences and Clinical Techniques
  - Osteopathic Principles
  - Osteopathic Practice

• **Training components for Fundamental Sciences**
  - Anatomy, including neural anatomy and embryology
  - Molecular biology, biochemistry and cellular physiology
  - Physiology with special emphasis in the immunological, neuro-endocrin, nervous, circulatory and muscle-skeleton system network
  - Biomechanics and kinetics, exercise physiology
  - Ergonomics
  - Toxicology
  - Psychology, personal, social and professional development
  - Education for health
• Health promotion
• Dietetics and nutrition

• Training components for sciences and clinical techniques
  o Epidemiology and public health
  o Pathology of: Nervous system, muscle-skeleton, cardiovascular, respiratory, digestive, reproductive, genital and urinary, immunological, endocrine and otorhinolaringological and psychiatric system
  o Pathology
  o Imagery and clinical analysis
  o Psychoneuroimmunology
  o Dermatology
  o Gynaecology and obstetrics
  o Rheumatology
  o Pharmacology
  o Osteopathic interview and patient clinical history
  o Safety and hygiene
  o First aid and life support

• Training components for Osteopathic principles
  o Osteopathy theory
  o History of Osteopathy and non conventional therapies
  o Osteopathic models about inter relations of structure and function
  o Clinical biomechanics, kinetics and joint physiology
  o Osteopathy techniques and its action mechanism
  o Sports osteopathy therapy
  o Paediatrics osteopathy therapy
  o Senior osteopathy therapy
  o Urinary, gynaecological and obstetric osteopathy therapy
  o Visceral osteopathy therapy
  o Cranial osteopathy therapy

• Training components for Osteopathic practice
  o Osteopathic diagnose and differential diagnose
  o Osteopathic techniques, indications and counter indications
  o Patient history and exam
  o Research methodology and incorporation of relevant results in the promotion of good practices
  o Understanding of clinical pathology an imagery results
  o Reasoning towards problem solving
  o Communication and interaction with the patient
  o Patient documentation and clinical files;
  o This training component has to include an internship of 1000 hours under a supervision of a licensed osteopath;
  o For this internship, universities and polytechnics will have to celebrate partnerships with non conventional therapies clinics, legally established,
in which are stated the conditions of this internship, functions, responsibilities and competences of everyone involved.

- **Training in other domains**
  - Communication sciences
  - Introduction to research in osteopathy
  - Ethics and deontology
  - Legislation

- **Duration**
  - 8 curricular semesters

- **Credits**
  - 240 ECTS
  - Distributed like this:
    - Fundamental sciences – minimum of 45 ECTS
    - Sciences and Clinical Techniques – minimum of 45 ECTS
    - Osteopathic Principles – minimum of 90 ECTS
    - Osteopathic practice – minimum of 40 ECTS

- **Enrolment conditions**
  - It is mandatory national access exams in Biology, Physics and Chemistry

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C.17. - Bill nº 172-F /2015 – Naturopathy Degree Level:

- **Scope**
  - This bill regulates the general requisites for the Naturopathy study cycle that issues a Naturopathy Licensed Degree

- **Who provides the course**
  - This course can only be provided by Higher Degree schools such as polytechnic and universities

- **Competences provided**
  - This course provides those competences identified in Bill nº 207-A/2014 (see above)

- **Training components**
  - Fundamental Sciences
  - Sciences and Clinical Techniques
  - Naturopathic Principles
  - Naturopathic Practice

- **Training components for Fundamental Sciences**
  - Anatomy and physiology
  - Cellular biology and immunology
  - General, organic and analytical biochemistry
  - Toxicology
  - Botanic
  - Ecology and chronobiology
• Food biotechnology and bio engineering
• Psychology, personal, social and professional development
• Education for health
• Health promotion
• Dietetics and nutrition

• Training components for sciences and clinical techniques
  o Physiopathology
  o Epidemiology and public health
  o Imagery and clinical analysis
  o Pharmacology
  o Naturopathic interview and patient clinical history
  o Endocrinology and metabolism
  o Psychoneuroimmunology
  o Safety and hygiene
  o First aid and life support

• Training components for Naturopathic principles
  o Naturopathy theory
  o Pharmacognosia and dispensary
  o History of Naturopathy, health and non conventional therapies
  o Diagnose methods for naturopathy that includes training in:
    § Holistic and bioenergetics anamnesis
    § Patient interview according to naturopathy views
    § Physical exam
    § Vitality and constitution evaluation
    § Differentiation of factors that determine systemic unbalance patterns and their relation within the patients context accordingly to the specific reasoning of the different naturopathic theories
  o Naturopathy, that includes:
    § Use of different natural elements and naturopathic agents
    § Hygienic, anti aging therapy and longevity therapy
    § Energetic, therapies, acupuncture and electrotherapy
    § General homeopathy principles
    § General ayurvedic medicine principles
    § General osteopathy and chiropractic principles
    § General traditional Chinese medicine principles
    § General herbal therapy, aromatherapy and floral therapy principles
    § Integrated therapy
    § Auriculotherapy
    § Kinesiology
    § Oligotherapy
    § Bromathology and natural nutrition
Nutritional supplements and orthomolecular therapy
Iridology
Massage and reflexology
Nutritional and dietetic counselling and healthy lifestyle

Training components for Naturopathic practice
- Ability to evaluate the patient in a holistic and individual way
- Ability to perform a therapeutic diagnose and prognostic
- Ability to establish the principles and therapeutic strategies to perform and manage the naturopathic treatment plan
- Ability to perform the combined treatment with all naturopathic resources, namely, hygienic, natural diet, supplements, external treatments and healthy lifestyle
- Ability to respect safe practice, ethics and deontology
- This training component has to include an internship of 1000 hours under a supervision of a licensed Naturopath;
- For this internship, universities and polytechnics will have to celebrate partnerships with non-conventional therapies clinics, legally established, in which are stated the conditions of this internship, functions, responsibilities and competences of everyone involved.

Training in other domains
- Communication sciences
- Introduction to research in naturopathy
- Ethics and deontology
- Legislation

Duration
- 8 curricular semesters

Credits
- 240ECTS
- Distributed like this:
  - Fundamental sciences – minimum of 45 ECTS
  - Sciences and Clinical Techniques – minimum of 45 ECTS
  - Naturopathic Principles – minimum of 90 ECTS
  - Naturopathic practice – minimum of 40 ECTS

Enrolment conditions
- It is mandatory national access exams in Biology, Physics and Chemistry
D. How did we get here

1. In August 2003 the Portuguese Parliament passed a law regarding CAM therapies. This law set the main guidelines and was supposed to be fully regulated within 180 days.

Title: Framework for Non Conventional Therapies

Main goals and principles:
- This law defines the framework for those professionals who provide non-conventional therapies as defined by WHO – World Health Organization.
- Non-conventional therapies are those that have a different philosophical background than conventional medicine and apply specific diagnose procedures and therapies.
- This law concerns acupuncture, homeopathy, osteopathy, naturopathy, herbal therapy and chiropractics.
- Guiding principles of non-conventional therapies:
  - The individual right to choose its own therapy, based at an informed choice about safety, quality, effectiveness and possible risks.
  - Public health defence, respecting the individual right to health protection.
  - Users defence, which requires that non-conventional therapies be preformed with a high level of responsibility, diligence and competence, based upon professional qualification of those who practice it and his or hers respective certification.
  - User wellbeing defence, which includes working with other health professionals in a complementary fashion.
  - Promoting research so that high quality standards, efficiency and effectiveness can be achieved.

Qualifications and professional status:
- Technical and deontological autonomy regarding non-conventional therapies professional practice is hereby recognized.
- Non-conventional therapies professional practice permits will be issued and ruled by the Ministry of Health.
- The Ministry of Higher Education will be responsible for defining training and qualification requirements.
- A technical advisory commission is to be created and its goal is to study and propose the general parameters regarding the regulation of these non-conventional therapies and its attributions should be resumed as soon as the
accreditation and training process is implemented. This process should be concluded until the end of 2005.

- This commission should integrate representatives of the Ministries of Health and Higher Education, non-conventional therapies and if necessary experts of recognized merit.
- Non-conventional therapy practice is exclusive to those who have the proper legal qualifications and who are properly accredited.
- These professionals are obliged to maintain an individualized record of each patient provided it respects the existing laws on personal data.
- These professionals are expected to act responsibly and according to their competences and considering their autonomy regarding diagnosis approach assessment and decision making they are obliged to provide the necessary information, when needed, regarding prognostic and duration of treatment.
- Regarding the places where these therapies can be provided, they can only be under the supervision of certified professionals and accordingly to the Portuguese law on private health care units.
- Professional insurance is mandatory.

**Regarding patients:**

- Patients have a right to freely choose the therapy they wish.
- Professionals can only provide treatment with informed consent from their patients.
- The clinical information on each patient has to be confidential and can only be accessed if the patient specifically authorizes it or by court order.
- Patients can file complaints regarding malpractice.
- Regarding publicity, these professionals must follow Portuguese law on the matter (Decreto-lei n° 330/90)

**Supervision and Infractions:**

- Waits specific regulation.
- All those professionals who harm patients or provide treatment without informed consent will fall under Portuguese penal code, articles 150º, 156º and 157º, the same way as any other health professional.

**Final dispositions:**

- This law should have been regulated 180 days after it was published
- This law was approved by the Portuguese Parliament, Portuguese President and Portuguese Prime-Minister and was officially published in August 22nd, 2003.

2. In May 2004 the Portuguese Parliament approved the creation of a Technical Advisory Commission (TAC) on CAM.

**TAC Members:**
o One Ministry of Health representative
o One Ministry of Education representative
o One Ministry of Science and Higher Education representative
o One representative of each of the six non-conventional therapies
o Seven experts on health subjects

TAC Coordinator:
  o It was coordinated by a Ministry of Health representative, to whom was attributed a quality and competence vote in order to ask experts opinions.

TAC Competencies:
  o To study and propose the general parameters that will regulate non-conventional therapies professional practice.
  o To define the specific parameters of accreditation, training and certification of these professionals and equivalence assessment.
  o Each of the specialities must, as soon as their work is finished, submit a report and final proposal.
  o TAC attributions should be resumed as soon as the accreditation and training process is implemented. This process should be concluded until the end of 2005.


During this period the TAC members worked and made their proposals. Their reports were published by the Portuguese Government in order to allow a period for public debate. After this, it was expected that the regulation process would be concluded, as it should, until the end of 2005.

Since 2004 until 2011, the Portuguese government changed four times, and none of these governments concluded this process.

It was only on October 2011, that one of our political parties brought the theme back to the Parliament and was a unanimous vote – everyone said that the long awaited 45/2003 law had to be fully regulated. A short period after this, our actual Government requested the Ministry of Health a proposal to regulate the law.


A new draft-law (PL nº 111/XII (2ª) to regulate the one from 2003 was voted in the Portuguese Parliament and was approved. The next step was to create a special working group within the Parliament health commission to discuss this new law. Their goal was to discuss it in their specific details. For this they had meetings with several
stakeholders, including CAM professional bodies, schools like IMT, medical professional body, nursing, pharmaceutical and Ministry of Health DGS.

IMT felt the need to bring together all the major CAM training providers in Portugal and created FNE – MTCA (National Federation of CAM Schools). FNE made its own proposals, specifically making sure that the existing training institutions are to be recognized as such, making sure that they will still be involved in future training.

This working group finished their job and proposed some changes, including those proposed by FNE-MTCA, to PL n° 111/XII (2ª) and brought it to be voted in the Parliament late on the 25th of July.

The law was approved and was set to wait for specific regulation within 180 days after being officially published (September 2013).

5. Period between July 2013 and June 2015.

The general law (Law n° 71 on Non Conventional Therapies) was published in September 2013.

Between September 2013 and mid 2014 our government published several regulatory diplomas, accordingly to what was stated in law 71. There are still amiss two regulatory diplomas, one regarding the high degree diploma cycle and another regarding the transitory model for non-university level schools, such as IMT. This means that none of the other regulatory diplomas are being implemented yet.

Late 2014 some professional bodies, representing a small minority, filed an injunction in order to stop the regulatory process, claiming that they are in disagreement with two main aspects: the model used to issue practice licenses and the fact that there are seven different therapies. In their point of view, the model is unfair and they feel that there should be only one professional that could provide all non-conventional therapies as one, a “Naturologist”. This injunction is being analysed by the proper authorities but the general feeling is that it will be declined. In the meanwhile the majority of the other professional bodies, schools (such as IMT), general public, etc., came together, expressing their support (with a petition signed by several thousands of signatories’ http://peticaopublica.com/pview.aspx?pi=PT75419) to the on going regulation process, claiming that it should not stop, independently of specific aspects on the specific regulations that should be altered and improved. Stating that there is more to gain on going forward, then to stop the process, and put at risk everything that has already been secured.
Several stakeholders, like IMT, kept pressing the Portuguese Government and MP’s in order to see the regulation process completed, and in December 15 2014, two MP’s sent the Ministry of Health the following questions:

a) When will the remaining bills on the law nº 71 be published?  
b) What is being done to finish the remaining bills?  
c) Will CAM organizations and schools be heard in the process?

The Ministry of Health replied 3 of February 2015. The reply states that the Ministry of Higher Education said that the regulation about the Bologna study cycles and its requirements, that will provide access to become a therapist, is at its final stages. After this it will be sent for evaluation to several governmental bodies from both ministries and higher education officials. Not a word about CAM organizations and schools.

In June 5th, five bills came out regarding the study cycles of Acupuncture, Herbal Therapy, Chiropractics, Osteopathy and Naturopathy.

It is still missing the study cycle bills on Homeopathy and Traditional Chinese Medicine as well as the final bill regarding the non-university colleges.

6. **Period between June 2015 and September 2016.**

- We’re still waiting for the study cycle on Homeopathy and Traditional Chinese Medicine and the definite bill regarding the non-university colleges
- The novelty since the last update to this document:
  - Is that on 1st of October 2015 our governmental body that issues licences to work as an Acupuncturist, a Herbal Practitioner, a Naturopath, a Chiropractor and an Osteopath issued the first licences to 23 professionals, and many more since then. This means that the evaluation of cv’s is taking place.
  - The government accepted to discuss the 19.6 bill with the schools representatives (FNE-MTCA) - We are working on a statement regarding the draft bill now (final week of September 2016)
  - The VAT exemption bill has been voted favourably in the National Assembly

E. **Roadmap and what to expect in the near future**

1. Keep on thriving for TM/CM development, nowadays designated as T&CM - Traditional and Complementary medicine, by WHO - World Health
Organization. In September 2013, September 2014, June 2015, November 2016 and September 2016 we hosted three important meetings on TM/CM where these subjects were properly addressed. Amongst the speakers we had government representatives, specifically those who are directly involved in the regulation process at hand (http://www.imt.pt/jornadas2013/eng/index.php) and also (http://imt.pt/jornadas2014/) and (http://imt.pt/jornadas2015/) and (http://imt.pt/jornadasMTC2015/) we are preparing another one for next November 2016;

2. Given the fact that CAM regulation in Portugal is in fact happening, and that this process can have a real impact in other EU countries. Like a domino effect. We strongly believe that all EU stakeholders on TM/CM, regulatory or otherwise, should be more involved in this process. IMT is very active in this matter and open to any partnership or endeavour to raise TM/CM awareness. If you receive this memo and feel that your organization can contribute or has an interest on the matter, please contact us directly;

3. We expect that the regulation process in Portugal concludes itself during 2016, however, as you could read behind, the missing bills are yet to be finished by our Ministry of Higher Education, and until the last update to this document (October 2015) we (TM/CM schools and organizations) weren't officially consulted, as we should have been. But we persisted and in late July 2016 we were finally considered as a "person of interest" and contacted to give our views on the matter. IMT will keep pressing until this happens. The regulation process only came this far because the Ministry of Health called and heard TM/CM schools and organizations in the past, to develop the regulation of every bill that we have so far, which proved a wise strategy given that now it has the support of most.

For any additional information on this matter, please contact:

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