

NCCAOM Case Studies Set 9

- 1. Nicola, age 39, is depressed. She has a very demanding business that she can't get out from under. She works almost 7 days a week and she is always stressed. She knows she needs a break She is not sure how to restructure her busy clinic so she can take one. Her main issue is a constant pain in her sides which has been there for the past 3 months. It's worse when she is stressed or on days when she is very depressed. Better other days but never really disappears. She feels chest constriction most days and she says she frequently sighs. Her abdomen is distended. Her pulse is Wiry, and her tongue is dark with a thin, white coat. You want to prescribe the formula Chai Hu Shu Gan San (Bupleurum Powder to Spread the Liver). How do you modify the formula for Nicola?
 - A. Add Yan Hu Suo, Chuan Lian Zi
 - B. Remove Xiang Fu and Chai Hu
 - C. Add Ban Xia and Cang Zhu
 - D. Add Mai Men Dong, remove Chen Pi
- 2. Ben's eyes are red and burning. He's been getting terrible headaches at the temples and has nose bleeds lately. He was playing tennis with a friend even though it was still winter and cold. He says he was overheated and took off his pullover. Since then, he's had terrible shoulder pain. It is severe and restricts his mobility. The area feels cold to the touch.

What is/are the root pattern(s)?

- A. Liver Fire
- B. Qi and Blood Stagnation
- C. Liver Fire and Excess Cold attacking the channels and collaterals
- D. Liver Fire and Qi and Blood Stagnation

What is/are the manifestation(s)?

- A. Liver Fire
- B. Red and burning eyes
- C. Red and burning eyes; Excess Cold attacking the channels and collaterals
- D. Red and burning eyes; Pain



What do you treat first?

- A. Treat the Excess Cold by moving Qi and Blood
- B. Treat the Liver Fire
- C. Treat both Liver Fire and Excess Cold
- D.Treat the red eyes and the pain
- 3. Nick, 35, comes in with chronic low back pain. He was also diagnosed with infertility. He jokes that it's probably from all the sex he had when he was younger. He is a recovering sex addict. In addition to low back pain, he also has hypochondrial distension and a bitter aftertaste. Pain comes and goes and is worse when he's under a lot of pressure. He says he's moody. Exercise usually helps him deal with work stress. Recently though, he's been exhausted, and he just wants to sleep.

What is/are the root pattern(s)?

- A. Kidney Yin Deficiency
- B. Liver Qi Stagnation
- C. Liver Qi Stagnation transforming Heat
- D. Spleen Qi and Kidney Yang Deficiency

What is/are the branch pattern(s)?

- A. Kidney Yin Deficiency
- B. Liver Qi Stagnation
- C. Liver Qi Stagnation transforming Heat
- D. Spleen Qi and Kidney Yang Deficiency
- 4. Two years ago, Geraldine was diagnosed with arthritis. It mostly affects her legs. She currently has pain in her knees. Her knees feel sore, heavy, and painful. She has limited extension and flexion. You treat here with ST36, SP5, UB23 and Ren4. What two points will you add to her prescription to improve her treatment outcome?
 - A. UB11, GB39
 - B. UB17, SP10
 - C. GB34
 - D. Ren3, SP6



- 5. Fredrick, age 5, was diagnosed with the mumps 3 days ago. He has a fever, chills, and unilateral erythema and swelling in the parotid region. Besides that, he's irritable, constipated, and has a dry mouth. You treat him with TB17, SJ5, LI11, LI4. He returns the next day with testicular swelling. Which two points will improve his treatment outcome?
 - A. LR3, LR8
 - B. LR2, LR5
 - C. Ren1, LR5
 - D. Ren6, Ren3
- 6. Your patient, 28, presents to the clinic with foul smelling vaginal discharge. The discharge is yellowish green in color. She reports that she does not experience any itching or burning sensations. However, she does experience pain when urinating. Additionally, she suffers from lower abdominal pain. Although she is sexually active, she is not currently involved in a relationship. Since the discharge began, she has been experiencing fever and pelvic pain. Her external genitalia are free of lesions. It has been three weeks since she last had a period. Next week is the due date for her next period. She reports that she is already spotting. How would you diagnose this case?
 - A. Pelvic Inflammatory disease
 - B. Bacterial vaginosis
 - C. Trichomoniasis
 - D. Candida vaginitis