

Nursing Skills Assessment Rubric: Auricular Acupressure
(Revised September 2024, Sir Run Run Shaw Hospital, Zhejiang University School of Medicine)

I. Preparation of Equipment

1. Treatment tray	2. 75%Alcohol cotton pads	3. Vaccaria seeds (Wang Bu Liu Xing Zi) on tape	4. Auricular acupoint probe
5. Auricular acupoint model	6. Waste cup	7. Hand sanitizer (EDA)	8. Tweezers or hemostatic forceps (if necessary)
9. Medical adhesive tape (if necessary)			

II. Operational Procedure (★ denotes critical steps)

Assessment Category	Operational Standards	Score	Deduction Criteria
Professional Demeanor	Neat attire, appropriate hairstyle conforming to hospital regulations.	1	Improper attire: -0.5 points Improper hairstyle: -0.5 points
Nurse Preparation	Wash hands, wear a surgical mask.	1	Did not wash hands or incorrect method: -0.5 pts Did not wear mask or incorrect wearing: -0.5 pts
Pre-procedure Assessment	1. Assess the patient's allergy history to alcohol, adhesive tape, etc. 2. Observe the patient's complexion, tongue coating, tongue body, and the local skin condition of the auricle; take the pulse. 3. Assess the willingness and compliance of the patient and family members regarding auricular acupressure.	10	No allergy assessment: -2 pts (Missing one item: -1 pt) No observation of complexion/tongue: -3 pts (Missing one item: -1 pt) No observation of auricular skin: -2 pts Did not take pulse: -1 pt Did not assess willingness/compliance: -2 pts
Pre-procedure Preparation	Check the TCM treatment order in the medical record to understand the reasons, objectives, and specific acupoints for the therapy. Record the acupoints if necessary.	4	Did not check TCM treatment order: -2 pts Did not check or memorize acupoints: -2 pts
Execution of Procedure	Bring the equipment to the bedside, introduce oneself.	1	No self-introduction: -1 pt
	Verify patient identity, check medical (or nursing) orders.	4	Did not verify identity: -2 pts Did not check orders: -2 pts
	Explain the procedure to the patient and family members, including the reason and purpose of the auricular acupressure.	6	Unreasonable explanation of reasons: -2 pts Explanation of purpose does not match the order, or no explanation provided: -4 pts
	Inquire about urine/bowel movements, position the patient comfortably, expose the auricle.	2	Did not ask about urine/bowel: -0.5 pts Did not assist into comfortable position: -0.5 pts Did not expose auricle: -1 pt
	Disinfect the auricle with 75%	2	Inadequate disinfection: -1 pt

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	alcohol. Order of disinfection: top to bottom, inside to outside, front to back, wait to dry.		Incorrect order of disinfection: -1 pt
	The operator pulls the auricle backward and upward with the left thumb and index finger, and uses the probe with the right hand to search for sensitive points (soreness, numbness, distension, pain) from top to bottom within the selected area. These are the auricular acupoints.	8	★ Inaccurate acupoints: -2 pts per point, up to -8 pts (Considered as failure).
	Use tweezers, hemostatic forceps, or the probe to grab the edge of the tape containing the Vaccaria seed, affix it precisely onto the sensitive acupoint, and press it gently.	9	Incorrect method of picking up the seed: -2 pts Seed tape misplaced/shifted from acupoint: -3 pts Did not press the tape after applying: -2 pts Wasted seeds during the process: -2 pts
	Ask the patient if they feel local soreness, numbness, distension, pain, heat, or radiating sensation along the meridians (indicating <i>Deqi</i>). Check if the tape is firmly secured. Acupoint Stimulation: Place thumb and index finger on the front and back of the auricle respectively, apply vertical pressure several times. The operator applies repeated pressure with moderate force (within patient tolerance) to stimulate the acupoint for 30s per point, 3-5 times a day. Effective stimulation is crucial. The operator must simultaneously educate the patient and family on this pressing method to enhance efficacy.	15	Did not assess <i>Deqi</i> sensation: -3 pts Did not check if tape is firmly secured: -2 pts Inappropriate pressing force (too heavy/light): -2 pts Incorrect pressing time: -2 pts Incorrect pressing frequency: -2 pts Did not teach pressing method: -4 pts (Inadequate method teaching: -2 pts; incorrect time teaching: -2 pts; incorrect frequency teaching: -2 pts).
Patient Education	Educate patient and family on precautions: 1. If allergies to tape/seeds occur (e.g., itching, skin breakdown), inpatients must notify staff immediately; outpatients should remove tape and visit hospital if necessary. 2. Keep the tape dry to prevent detachment. If it falls off, notify staff or return to clinic for replacement. 3. If severe pain occurs at the site, notify staff (inpatients) or remove before sleep and apply only during the day (outpatients).	6	Missing one item: -2 pts
Post-procedure Cleanup	Tidy up equipment, dispose of medical waste correctly, wash hands.	3	Incorrect waste sorting: -1 pt Waste left on bed or in tray: -1 pt Did not wash hands after cleanup: -1 pt

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	Wipe the acupoint probe, tweezers, or forceps twice with 75% alcohol.	2	Did not wipe instruments: -2 pts
Post-procedure Observation	The seeds should be left in place for 2-3 days. Treatment can be alternated between the two ears.	4	Incorrect retention time instructed: -2 pts Did not assess for pain during retention: -2 pts
	Observe for discomfort, pain, or displacement of the Vaccaria seeds during the retention period.	2	Did not observe for seed displacement: -2 pts
Observation and Removal	Remove tape and seeds, verify the number of seeds removed. Wipe the auricle with a 75% alcohol pad to remove residual adhesive. Observe the local skin condition.	6	Seeds remaining on ear or did not verify count: -2 pts Did not wipe or inadequate wiping: -2 pts Did not observe local skin: -2 pts
Documentation	Record the purpose, TCM syndrome type, applied acupoints, local skin condition, patient's subjective complaints, and education provided.	5	Missing one item: -1 pt
Risk Management	Verbally state common risks (allergy, local skin infection, seed accidentally entering the ear canal) and their causes.	6	Failed to state risk of allergy: -2 pts Failed to state risk of infection: -2 pts Failed to state risk of seed entering ear: -2 pts
Overall Performance	Demonstrate humanistic care throughout the procedure.	1	Did not show humanistic care: -1 pt
	The procedure is performed proficiently and smoothly.	2	Not proficient or exceeded time limit (> 10 minutes): -2 pts
Total		100	

III. Risk Warning and Management of Adverse Events

1. Allergic Reactions

Risk Assessment: The primary risks are allergic reactions and local skin infections.

(1) Causes:

- ① The skin at the application site is thin and tender;
- ② The application duration is too long;
- ③ The adhesive tape is applied too tightly;
- ④ Allergy to the adhesive tape itself.

(2) Clinical Manifestations: Erythema (redness), papules, blisters, and pruritus (itching) on the skin.

(3) Prevention and Treatment:

- ① Assess the patient's constitution and local auricular skin before application;
- ② Apply tape with appropriate pressure; optimal retention time should be < 72 hours;
- ③ If an allergic reaction occurs, stop the therapy immediately, report to the physician, and assist with medical treatment.

2. Infection

(1) Causes: Skin breakdown secondary to allergic reactions, leading to infection.

(2) Clinical Manifestations: Redness, erosion, and localized skin pain.

(3) Prevention and Treatment:

- ① Stop the application immediately and report to the physician;
- ② Clean and disinfect the skin prior to application;
- ③ Protect the broken skin and administer prescribed medications.

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3. Displacement of Vaccaria Seeds into the Ear Canal

(1) Causes:

- ① The adhesive tape gets wet;
- ② Incomplete cleaning of the ear prior to application;
- ③ Contamination of the tape leading to reduced adhesiveness.

(2) Clinical Manifestations: A decrease in the number of attached seeds, accompanied by ear discomfort or pain.

(3) Prevention and Treatment:

- ① Ensure the area remains waterproof to prevent detachment. Monitor the patient's response, verify the number of seeds, and promptly investigate/treat if seeds are missing;
- ② Due to sweating in summer, do not apply too many seeds or leave them on for too long. It is recommended to change them every 2 days to prevent the tape from becoming damp;
- ③ Thoroughly clean the auricular skin and wait until it is completely dry before applying the tape.