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| Cervical Region      | - Tension                    | - Palpation: Ashi points, deep crease on back of neck, spider veins                  | 1. **Semispinalis Capitis**  
A: Extend vertebral column and head  
O: TP of C4-T5  
I: Btwn superior and inferior nuchal lines of the occiput  
2. **Semispinalis Cervicis**  
A: Extend head and cervical spine to opposite side; Rotate head and cervical spine to opposite side  
O: TP of T1-T6  
I: SP of C2-C5  
3. **Splenius Capitis**  
A: Rotate head and neck to same side; Laterally flex head and neck; Extend head and neck  
O: Inferior one-half of ligamentum nuchae and SP of C7-T4  
I: Mastoid process and lateral portion of superior nuchal line  
4. **Splenius Cervicis**  
A: Rotate head and neck to same side; Laterally flex head and neck; Extend head and neck  
O: SP of T3-T6  
I: TP of C1-C3  
5. **Levator Scapula**  
A: Elevate scapula; Downwardly rotate scapula, Laterally flex head and neck to same side; Extend head and neck  
O: TP of C1-C4  
I: Medial border of scapula, btwn superior angle and superior portion of spine of scapula | 1. **Semispinalis Capitis**  
UB10 Tianzhu – perpendicular 0.5-1 cun  
2. **Semispinalis Cervicis** – Huatuojiaji C3-C7 – perpendicular 1-1.5 cun  
3. **Splenius Capitis** – Bailoa – inserted at nape of neck underneath trapezius; perpendicular 1-1.5 cun toward C7  
5. **Levator Scapula** – Dijia – halfway btwn mastoid process and nape of neck; perpendicular (parallel to the floor) 1 cun | - SI3 Houxi + UB62  
- Shemai – pain along spine, esp. upon extension  
- LU7 Lieque + SI7  
- Zhizheng – problems with rotating neck side to side  
- GB41 Zulinqi – occipital tension  
- GB8 Shuaigu – ipsilateral GB21 area tension  
- GB40 Qiuixu – ipsilateral GB20 area pain  
- GB31 Fengshi – scalene tension  
- LI4 Hegu – pain of face  
- C2-T1 Iaaji – palpate for tenderness, stiffness, subluxation  
- **Gluteus Maximus** + **Piriformis** motor points  
- general neck tension | - Neck stretch in the shower – under hot water stretch neck with hands  
- Scalene and Levator Stretch  
- seated or supine, tuck hand under sacrum and lat. flex neck with other hand; repeat with chin turned to opposite shoulder; perform bilateral  
- Under hot water stretch neck with hands |
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| Scapular Stabilizers | - **Visual:** Postural imbalances, ergonomics of work and home, hx of exercise routine  
- **Palpation:** Compare left and right sides, tightness or tenderness of thoracic Jiaji and UB channel points, spider veins
- **Kibler Test:** Pt. stands with arms at sides – measure distance btwn spine and inferior angle of scapula and compare sides; Pt. moves hands to their hips and compare sides; Pt. moves hands to a ‘T’ position and compare movement of scapula on both sides | **1. Rhomboid Minor**  
A: Adduct scapula; Elevate scapula; Downwardly rotate scapula  
O: SP of C7 and T1  
I: Upper portion of medial border of scapula, across from spine of scapula  
**2. Rhomboid Major**  
A: Adduct scapula; Elevate scapula; Downwardly rotate scapula  
O: SP of T2-T5  
I: Medial border of scapula btwn spine of scapula and inferior angle  
**3. Trapezius – Upper Fibres**  
A: Extend head and neck; Laterally flex head and neck to same side; Rotate head and neck to opposite side; Elevate scapula; Upwardly rotate scapula  
O: EOP, medial portion of superior nuchal line of occiput, ligamentum nuchae, and SP of C7-T12  
I: Lateral one-third of clavicle, acromion, and spine of scapula  
**4. Trapezius – Middle Fibres**  
A: Adduct scapula; Stabilize scapula  
O: EOP, medial portion of superior nuchal line of occiput, ligamentum nuchae, and SP of C7-T12  
I: Lat. one-third of clavicle, acromion, and spine of scapula  
**5. Trapezius - Lower Fibres**  
A: Depress scapula; Upwardly rotate scapula  
O: EOP, medial portion of superior nuchal line of occiput, ligamentum nuchae, and SP of C7-T12  
I: Lateral one-third of clavicle, acromion, and spine of scapula  
**6. Levator Scapula**  
A: Elevate scapula; Downwardly rotate scapula, Laterally flex head and neck to same side; Extend head and neck  
O: TP of C1-C4  
I: Medial border of scapula, btwn superior angle and superior portion of spine of scapula | **1. Rhomboid Minor –**  
Midway btwn UB12  
Fengmen and UB41 Fufen – level with the lower border of T2; Oblique lateral 0.5-1 cun  
**2. Rhomboid Major –**  
Midway btwn UB14  
Jueyinshu and UB 43  
Gaohuangshu – level with the lower border of T4; Oblique lateral 0.5-1 cun  
**3. Trapezius – Upper Fibres –**  
GB21 Jianjing – lateral threading 0.5 cun, pinching trapezius angled from POST to ANT or ANT to POST (depending on position of pt.) 0.5 cun  
**4. Trapezius – Middle Fibres –**  
Midway btwn UB13  
Feishu and UB42 Pohu – level with the lower border of T3; Oblique lateral 0.5-1 cun  
**5. Trapezius- Lower Fibres**  
– Midway btwn UB15 Xinshi and UB 44 Shentang – level with the lower border of T5; Oblique lateral 0.5-1 cun  
**6. Levator Scapula (Attachment) –**  
Near SI14  
Jianwaishu at the superior medial border of scapula – inferior lateral towards superior medial border of scapula 1 cun | - **Eagle Pose** – Cross and lift elbows while keeping shoulders away from ears, pointing and pressing thumb forward; Or, coil the arms and press the palms together, lifting the elbows away from the body  
- **Strengthening – All Stabilizers:** Row, Decline Row, Straight-Arm Pushups; **Serratus:** On all fours, balance on one hand while doing ROM with the other arm forward, side, and back; **Lower Trapezius:** Press arms on wall in a ‘V’ shape while moving up and down the wall, or, lying prone with hands behind head, lifting elbows up and down; **Middle Trapezius:** Lying prone with elbows at shoulder height, arms outstretched at 90 degrees, lifting arms and head off floor |
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| **Rotator Cuff - Posterior** | - Supraspinatus Tendonitis | - **ROM:** Observe Pt. abducting their arm; watch for stiffness, pain, or muscle recruitment | 1. **Infraspinatus**  
- **A:** Laterally rotate G/H joint; Adduct G/H joint; Stabilize head of humerus in glenoid cavity  
- **O:** Infraspinous fossa of scapula  
- **I:** Greater tubercle of the humerus  
   | 1. **Infraspinatus**  
- **A:** Laterally rotate G/H joint; Adduct G/H joint; Stabilize head of humerus in glenoid cavity  
- **O:** Infraspinous fossa of scapula  
- **I:** Greater tubercle of the humerus  
   | 1. **Infraspinatus** – SI11 Tianzhong: 1 cun superior lateral to SI11 Tianzhong; 1-1.5 cun inferior medial to SI11 Tianzhong – oblique along fibres towards SI11 Tianzhong 1 cun  
2. **Supraspinatus**  
- **A:** Adduct G/H joint; Stabilize head of humerus in glenoid cavity  
- **O:** Supraspinous fossa of scapula  
- **I:** Greater tubercle of the humerus  
   | 2. **Supraspinatus** – SI12 Bingfeng – perpendicular 1-1.5 cun: L116 Lugo – oblique slightly under AC joint just proximal from L116 Lugo  
3. **Teres Minor**  
- **A:** Lateral rotation G/H joint; Adduct G/H joint; Stabilize head of humerus in glenoid cavity  
- **O:** Upper two-thirds of lateral border of scapula  
- **I:** Greater tubercle of the humerus  
   | 3. **Teres Minor** – Jian Hou midway between SI9 jianzhen and SI10 Naoshu – parallel to floor or oblique medial with fibres 1-1.5 cun  
4. **Teres Major**  
- **A:** Extend G/H joint; Adduct G/H joint; Medially rotate G/H joint  
- **O:** Inferior angle and lower one-third of lateral border of scapula  
- **I:** Crest of lesser tubercle of humerus  
   | 4. **Teres Major** – jiantongdian 1 cun medial and superior from SI9 jianzhen near lat. border of scapula – parallel to floor 1-1.5 cun  
| - **Shoulder Impingement** | - Meridian Palpation: Check distally along SI channel, as well as locally around rotator cuff  
- **Manual Muscle Testing (MMT):** Resist Pt. movement and sense muscle firing, strength/weakness, pain, and muscle recruitment; Pt supine; for **Teres Minor**, Pt. has arm at side, flexing forearm with a fist pointing upwards – Pt. attempts abduction of forearm with resistance; for **Infraspinatus**, Pt. externally rotates G/H joint, resting arm and elbow on table with forearm flexed – Pt. attempts continued external rotation with resistance; for **Subscapularis**, Pt. in same position as **Infraspinatus** test but instead internally rotates G/H joint with resistance making sure to keep arm and elbow flat on table; for **Supraspinatus**, Pt. has arm adducted to side, lying flat on table, with open palm prone – Pt. raises arm slightly and resists abduction, making sure to keep the arm straight  
| - Overhead towel stretch – gripping a towel, arms in the air, move towel in all the directions and over and behind head  
- Strengthen External Rotators – Cable pull or side-lying external rotation with a small weight or even a can of soup - internal to external rotation with the arm resting against the torso, the forearm flexed, and the hand and weight pointing upwards  

**Combos**  
- SI6 Yang Lao – Xi-Cleft point for acute pain (blood stasis) of shoulder (deep insertion)  
- SI3 Houxi – external rotation problems of shoulder  
- C5-T5 Jiaji – palpate for tenderness, stiffness, subluxation  
- GB8 Shauigui – ipsilateral GB21 pain and tension  
- Gluteus Maximus motor point – ipsilateral GB21 pain  
- UB53 Baohuang + UB 54 Zhibian – Taiyang mirror points
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<td>Rotator Cuff - Anterior</td>
<td>- Shoulder Impingement</td>
<td>- Meridian Palpation: The Large Intestine and San Jiao meridians travel over the anterior rotator cuff region; the Stomach meridian covers the pectoralis muscles&lt;br&gt;- ROM: Painful Arc – Observe Pt. moving their arm in all directions; watch for stiffness, pain, or muscle recruitment; notice restriction of movement of head from side-to-side indicating fascial constriction between the neck and anterior shoulder girdle/pecs&lt;br&gt;- Empty Can Test: Pt. pronates their elbow with weighted resistance (holding small weight, can of soup); Positive differentiates pain caused by the supraspinatus (pain between LI15 + SJ14) OR the infraspinatus/teres minor (pain between SI9 + ST10)&lt;br&gt;- Lift-Off Sign: Difficulty placing the hand and/or lifting the hand off the lower back indicates tension in the anterior rotator cuff muscles OR an injury of the subscapularis (pain with resisted lift-off the lower back indicates a tear in the subscapularis)&lt;br&gt;- Pec Minor Muscle Shortness: Observe the difference in height between the sides at the acromio-clavicular (AC) joint or LI16 Jigu; Notice restriction of movement of head side-to-side or fascial constriction between the neck and anterior shoulder girdle/pec area&lt;br&gt;- Speed's Test: Pt's elbow extended and supinated, shoulder flexed forward 45 degrees; Apply resisted pressure at wrist while Pt. contracts biceps (Pain at the bicipital groove indicates bicipital tendonitis more so than other types of anterior shoulder injuries)</td>
<td>1. Pectoralis Major&lt;br&gt;A: Adduct G/H joint; Medially rotate G/H joint; Assist to elevate the thorax during forced inhalation (with arm fixed); Flex G/H joint; Horizontally abduct G/H joint; Extend G/H joint&lt;br&gt;O: Medial half of clavicle, sternum and cartilage of first through sixth ribs&lt;br&gt;I: Crest of greater tubercle of humerus</td>
<td>1. Pectoralis Major – 1 point each in the 1st, 2nd, or 3rd intercostal spaces, on the ST channel, 4 cun lateral – transverse or transverse lateral 0.5-1 cun</td>
<td>- ST38 Tiaokou – ipsilateral joint pain (move shoulder joint in ROM with needle inserted and frequently stimulated)&lt;br&gt;- SI6 Yangliao – Xi-Cleft point for acute pain (blood stasis) of the shoulder (deep insertion)&lt;br&gt;- LU7 Lieque – for flexion and extension problems of the shoulder&lt;br&gt;- ST31 Biguan – Yangming mirror point</td>
<td>- Doorframe or Corner Stretch – With both forearms pressed in a door frame, lean forward gently to stretch the front of the shoulders; Walk fingers up doorframe and repeat stretch; Walk fingers down doorframe so that the hands are below the shoulders and stretch again&lt;br&gt;- To lengthen the pec and biceps – Press a hand on the wall behind the shoulder while rotating the torso away from the wall, turning the thumb down; Hold each stretch for five breathes&lt;br&gt;- Towel Stretch – Place injured arm on lower back, holding the towel with healthy arm by the head; Pull the towel upwards to stretch internal rotators</td>
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<td>Arms and Wrist</td>
<td>Carpal Tunnel Syndrome</td>
<td>- Determine source of possible nerve impingement: Numbness, weakness, or tingling may be caused by a local joint or muscle impinging a nerve; Also consider vertebral involvement according to dermatome pattern of parasthesia (usually C6-C8)</td>
<td>1. Extensors: A: Extend the wrist and fingers</td>
<td>1. Extensors – (Acute) Carpi Radialis 3 points btxn Li10 Shousanli and Li8 Xialian – perp. 0.5-1.5 cun; (Chronic) Sanchi 3 in a group lateral to Li11 Quchi – perp. 0.5-1.5 cun, close to the lateral epicondyle</td>
<td>- PC7 Daling – for Carpal Tunnel Syndrome + PC3 Quze – He-Sea point, PC4 Ximen Xi-Cleft point, or PC5 Lianshi – Jing-River point</td>
<td>- Swan Stretch for Tennis Elbow – Flex the elbow and wrist, holding the wrist with the opposite hand to provide resistance; Slowly extend the elbow, maintaining slight contraction through the extensors of the forearm; Turn thumb toward ground to further stretch extensors</td>
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<td>Tennis Elbow</td>
<td>- Pronator Teres Syndrome Test: Pt. uses a weight or resists a downward force, while supinating and extending elbow; Tingling within the median nerve distribution of forearm or hand (2nd-4th digits) indicates Pronator Teres Syndrome and differentiates btxn Carpal Tunnel Syndrome</td>
<td>- Tinel’s Sign: Tap the ulnar nerve (at SI8 Xiaohai) to assess nerve impingement at the elbow; Tingling is a positive sign</td>
<td>2. Supinator: A: Supinate the forearm; O: Lateral epicondyle of humerus, radial collateral ligament, annular ligament, and supinator crest of the ulna; I: Anterior, lateral surface of proximal one-third of radial shaft</td>
<td>- ST36 Zusanli, GB 34 Yanglingquan, or KD10 Yingu, LV 8 Ququan – mirrored point for elbow pain</td>
<td>- Wrist Brace for Carpal Tunnel Syndrome – Hard brace worn at night prevents prolonged wrist flexion, which decreases circulation</td>
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<td>Golfer’s Elbow</td>
<td>- Theaner Eminence Test (&quot;O-Ring&quot; Test): Pt. forms an &quot;O&quot; with their thumb and 5th digit while practitioner attempts to pull the fingers apart as Pt resists; the Pt then squeezes the ulna and radius bones together on the affected arm and the O-Ring test is repeated; If strength increases significantly on the second testing, it reveals that the Pronator Quadratus is involved in the pathology</td>
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<td>3. Pronator Teres: A: Pronate the forearm; Assist to flex the elbow; O: Common flexor tendon from medial epicondyle of humerus and coronoide process of the ulna; I: Middle of lateral surface of the radius</td>
<td>- ST41 Jiexi – mirrored point of the carpal tunnel on the ipsilateral ankle</td>
<td>- Teres Major – eases pain along the Large Intestine channel, such as LAT epicondylitis</td>
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<td>Supinator Syndrome</td>
<td>- Phalen’s Test: Pt. presses palms together and holds for at least one minute; Flip hands so that dorsal surfaces press together and hold again; If reproduction of carpal tunnel symptoms occur, the syndrome is confirmed over Pronator Teres Syndrome</td>
<td>4. Pronator Quadratus: A: Pronate the forearm; O: Medial, anterior surface of distal ulna; I: Lateral, anterior surface of distal radius</td>
<td>4. Pronator Quadratus: - The distal tip of an equilateral triangle drawn from HT3 Shaohai to PC3 Quze (flexor side) – perp. 0.5-1.5 cun</td>
<td>- C6-T1 Jiaji – palpate for tenderness, stiffness, subluxation</td>
<td>- Pectoralis Minor – helps correct forward slouching shoulder</td>
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<td>- Theaner Eminence Test (&quot;O-Ring&quot; Test): Pt. forms an &quot;O&quot; with their thumb and 5th digit while practitioner attempts to pull the fingers apart as Pt resists; the Pt then squeezes the ulna and radius bones together on the affected arm and the O-Ring test is repeated; If strength increases significantly on the second testing, it reveals that the Pronator Quadratus is involved in the pathology</td>
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