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東海道坂下  
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# *Towards Professionalization*

## *A Proposal for Discussion*

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The present proposal is aimed to brainstorming of Shiatsu Practitioners and teachers in Shiatsu Schools in Finland. Written exchange of opinions is suggested before a face-to-face discussion meeting which could define further steps toward drawing a roadmap for the professionalization of Shiatsu in the country.



**Towards Professionalization: a Proposal for Discussion**

Written and Compiled by Stergios Tsiormpatzis  
for the Finnish Shiatsu Association (SFry)

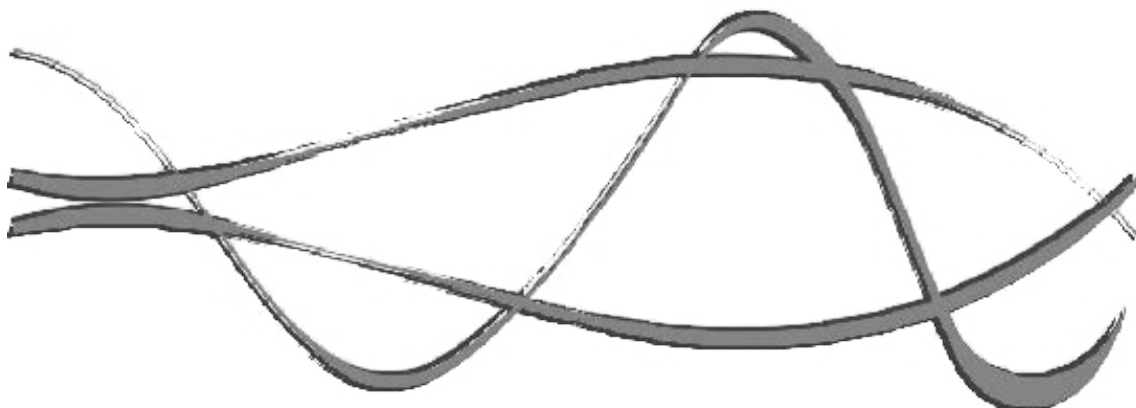
Helsinki, February 2016

[info@shiatsufinland.fi](mailto:info@shiatsufinland.fi)

<http://shiatsufinland.fi>

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## **Chapter 1. Towards Professionalization: A Proposal for Discussion by the Finnish Shiatsu Association (SFry)**



### **1.1 Introduction**

Shiatsu is a relatively modern method of Oriental Medicine originated in Japan and transformed during its transportation in the western world to a form of Complementary Medicine.

Shiatsu is present in Finland for several years, with various schools providing different styles and levels of education. The professionalization of Shiatsu in Finland is in its infancy. Currently a central Complementary-Alternative Medicine (CAM) federation, named Luonnonlääketieteen Keskusliitto (LKLry), covers the Shiatsu therapists who achieve its required training standards, as it does for all CAM practitioners whose method don't have a specific association in the country. Yet, recently a specific Shiatsu association created (Finnish Shiatsu Association - SFry) and aims to work towards the development of Shiatsu as a profession in the country.

### **1.2. Have Shiatsu the potential to get established as Profession?**

While currently Shiatsu in Finland does not satisfy professional standards, it is our belief that it is possible for Shiatsu to reach the required level of professionalization so that it gets recognized, in Finland also, as an independent profession that have a lot to contribute in healthcare.

But what are the characteristics that made us to conclude that currently the required professional standards are not satisfied? Or, rephrasing, what constitutes a profession? While there is no consensus on this, we could propose the following characteristics as minimum needed for a profession to get established as profession:

- unique characteristics which separate it from related professions (for example in our case massage, physiotherapy, osteopathy, chiropractic, naprapathy etc.)
- a robust system of voluntary self-regulation by a cohesive single professional body WITH OR WITHOUT statutory regulation with protection of its title by the state.

It is our position that Shiatsu can fulfil both requirements, even if the current situation is far behind this target. We believe that our aim to establish Shiatsu as an independent profession which could seriously contribute to the health and wellbeing of the people, as part of the movement towards Integrative and Patient-Centred Healthcare, is possible to achieved.

### **1.3. Why we should care about?**

"Well", someone might ask, "why should I bother with professionalization? I'm just fine with my practice and I don't need anything else!" While this might be true for the moment (and we have strong objections against this opinion), the truth is that if we, the Shiatsu practitioners, don't bother to establish Shiatsu as an independent profession with its own standards, someone else will do. In fact, we are really delayed in taking this initiative. The current period of reforms in the healthcare system of the country might soon bring unpredictable changes to the scene. While, as mentioned earlier, LKLry is an established professional body recognized by the state and includes Shiatsu in its repertoire as lacking a specific professional body and being unregulated. So, currently, someone looking for Shiatsu treatment, is not in place to really separate a practitioner who studied (and still do!) Shiatsu for years, from a practitioner of a related profession who complete just two weekends of Shiatsu studies and claims to practice Shiatsu. Furthermore, this way persons foreign to the theory and practice of Shiatsu can represent in a fault way our work to the wider public. And, for sure, our current condition, does not make easy for those involved in healthcare policy and provision to consider us as potential contributors in the healthcare system. But, if we recognize

ourselves as practitioners of Complementary Medicine, don't we consider us able to contribute? We believe that it is in our interest as Shiatsu practitioners to have a say in defining what Shiatsu is and what it can do for the public. Thus, we are interested for the professionalization of Shiatsu in Finland and we are aimed to work toward it.

#### **1.4. How to achieve professional status? Drawing a Roadmap**

We believe that an open discussion between the Shiatsu practitioners themselves, the Shiatsu schools and relevant associations should consist the first step towards professionalization. Experience from abroad and from other CAM professions should be considered also. Our initial proposal suggests for consideration the issues of:

##### *1.4.1. Basic Educational Standards*

Currently there is a wide variety in the training that different schools in the country provide to the future practitioners. Unfortunately, most of the courses does not provide the minimum required training level that could support our claim of constituting an independent profession with its own knowledge base. Our proposal is for a formation of a unified two-level minimum curriculum which respect the different style of each school and satisfy the content and length of training requirements of the European Shiatsu Federation (ESF) curriculum (level 1 - see [appendix 1](#)) and LKLry curriculum (level 2 - see [appendix 2](#)).

##### *1.4.2. Professional Register*

The Professional Register is a tool which provide to the public the information of who have been trained in a specific standard and is able to provide safe Shiatsu treatments, following a Code of Ethics and Conduct. Recognising the current status of the practitioners in the country and the developing nature of our profession, SFry introduce a new structure of its register, in order to provide more clear information and to promote the process of professionalization (see [Chapter 2](#)).

#### *1.4.3. Code of Ethics and Conduct*

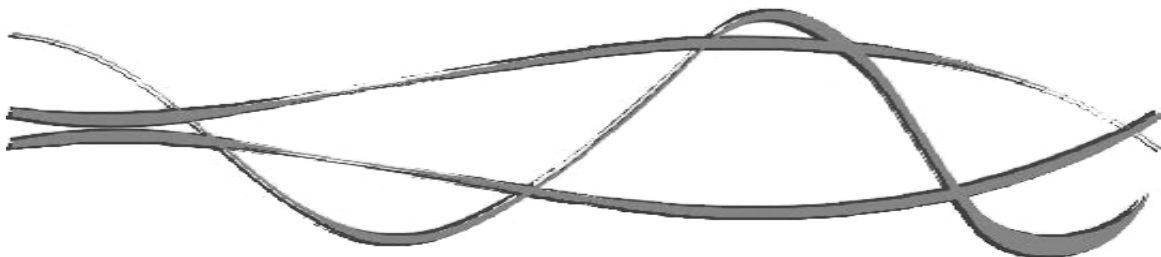
Code of Ethics is a document which outlines the ethical responsibilities in terms of ideals and behaviours that Shiatsu Practitioners have towards their patients. Its purpose is to inform the practitioners, the patients and the general public of the ethical ideals and expectations of Shiatsu profession and to serve as a tool for reflection and decision-making purposes. As a profession, we should be able to provide such a document to the public and we should be able to defend it ethically and practically.

#### *1.4.4. Safety, Insurance & Complain Process*

While we consider Shiatsu a safe treatment, we suggest that we should define the framework inside which Shiatsu is indeed safe. Each practitioner should receive the required training in order to practice inside this framework. Furthermore, it is suggested that Shiatsu professionals should be insured toward their patients and a regular complaint process should be defined in order to protect the patients (and the profession) from misconduct.

#### *1.4.5. Regulation & Self-Regulation*

The above discussed educational standards, practitioners register, code of ethics and conduct as well as the safety issues, constitute a minimum level of self-regulation which SFry would have the responsibility to maintain. Yet, a statutory regulation might occur in some time in the future. We believe that we should discuss and try to reach some level of consensus regarding our views towards statutory regulation, so that as a profession we are better prepared to claim and support our position in front of other stakeholders.





#### *1.4.6. Evidence-Base*

Since healthcare is constantly moving toward evidence based methods and evidence is demanded from the policy makers in order to consider a method as useful in healthcare, we believe that it is part of our duty as profession to follow other CAM professions and contribute in the development of the evidence base for Shiatsu. Our idea is that in co-operation with health researchers we can enable Shiatsu practitioners to exploit the evidence potential of their practice. As SFry we are already working towards this aim.

#### *1.4.7. Integrative Practice*

The Consortium of Academic Health Centres for Integrative Medicine (CAHCIM) defines Integrative Medicine as: “the practice of medicine that reaffirms the importance of the relationship between practitioner and patient, focuses on the whole person, is informed by evidence, and makes use of all appropriate therapeutic approaches, healthcare professionals and disciplines to achieve optimal health and healing.” Considering this definition as compatible with Shiatsu and while the healthcare system in Finland is not currently Integrative Medicine friendly, we believe that as a profession we should contribute toward the transformation of the healthcare system in a more integrative model. Thus, it is suggested that we develop our understanding of Integrative Medicine models and together with other CAM professions we aim to achieve that change in our country also.



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## Chapter 2. New Practitioners Register Structure and Membership Categories

As part of the continuous efforts for the professionalization of Shiatsu in Finland, the Finnish Shiatsu Association (SFry) introduce a new structure for the Practitioners Register and new membership categories. The new structure of the Register will follow the structure of membership categories. The specific Training Standards of SFry for Practitioners and Certified Practitioners are currently under development.

**Support Members:** is open to individuals with an interest in Shiatsu, who do not have a professional training or practice. They are not included in the publicly available Practitioners Register.

**Student Members:** is open to all individuals who are studying Shiatsu. They are included in the publicly available Students Register.

**Graduate Members:** is open to individuals who have completed at least 100 contact hours of Shiatsu studies. It is a temporal category which will be canceled according to the progress in the professionalization process. Graduate members are included in the publicly available Practitioners Register.

**Practitioners - ESF Graduate Members:** is open to individuals who have completed at least the minimum hours required from the baseline curriculum of the European Shiatsu Federation (ESF), which is 450 contact hours of Shiatsu studies. It is subject to modification according to the progress in the professionalization process towards the fulfillment of all the required ESF criteria. Graduate members are included in the publicly available Practitioners Register.

**Certified Practitioners - LKLry Graduate Members:** is not yet open for registrations. The highest level of training will be demanded for this category, covering at least the minimum requirements of the training standards of LKLry. The individuals who will fulfill those standards must have been registered with SFry (as a student or graduate) for a minimum of 2 years and continued their professional development.

**Honorary Members:** will be given by the SFry to individuals who has made “distinctive contributions” to the development of Shiatsu in Finland. Honorary Members will not be included in the publicly available Practitioner’s Register but in a separate area.

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## **Appendix 1. European Shiatsu Federation (ESF) Baseline Curriculum / Syllabus**

One of the main objectives of the ESF is to promote the ongoing development of professional education and standards of practice. In order to do this the ESF aims to establish a European Guideline for the study of Shiatsu to create a quality assurance level of practitioner/therapist for the benefit of both those practising the art of shiatsu, and also the public who wish to benefit from skilled practitioners/therapists. It has to be remembered that one of the principles of shiatsu is to be holistic, which means every case should be supported in its individuality, and yet at the same time align itself as much as possible to working together for the good health of all – the common good. Thus, this is not an attempt to impose the idea that there is only one way to do shiatsu, it is more to establish a core of knowledge, which can support and strengthen all the different styles of shiatsu available and give them a minimal recognisable 'common root'.

A second aim of the Baseline Curriculum is to create a focused structure to help support and promote the establishment and activities of new National Professional Shiatsu Associations throughout Europe.

In certain countries there are legal requirements that go beyond the general requirements of an overall shiatsu body and these may mean exceptions have to be made within that particular country. It is also noted that all shiatsu organisations are independent and answerable to their members and therefore will have to take any proposals and pass them in a way appropriate to the National Association. Therefore, nothing can really be compulsory but hopefully all shiatsu organisations can be guided to accepting the European Baseline Curriculum / Syllabus, at least in principle, as a minimum requirement for developing and assessing a practitioner/therapist suitable for a public register. In addition, terminology may differ from country to country, however a trend towards standardisation of terms used will in the long run be helpful. Again sometimes definitions may come from outside organisations or government institutions and they may have to be obeyed for legal reasons in a particular country.

Why try and re-invent the wheel when there have been some detailed curriculums / syllabuses already created. Adjustments for local circumstances around core elements would be much easier and less time consuming, leaving teachers to get on with sharing their knowledge. For this reason, a few suggested guidelines that might help in developing various details of a Curriculum / Syllabus have been included at the end. If an Association would like even greater detailed advice they can contact the ESF and it will do its best to help with curriculum/syllabus development.

## Hours Guideline for ESF Baseline Curriculum / Syllabus

450 contact hours with teachers over a minimum period of 3 years is regarded as the minimum period to cover all aspects to a reasonable level and then after graduation Continuing Professional Development (CPD) is recommended. Over and above these 450 “contact” hours there will be home-study hours, practice treatments, client write-ups and so on. There should be a minimum of 350 contact hours with recognised shiatsu teachers and a minimum of 3 different shiatsu teachers teaching at least 24 hours is recommended.

This is only a guideline for a breakdown of a syllabus/curriculum of 450 hours, which is considered a minimum. Schools and teachers are recommended to look beyond the minimum. Some students with previous knowledge such as acupuncturists, who will have covered at least 150 hours of the syllabus may be allowed concessions, whilst others may need more time in a field they find challenging. However, acupuncturist would be advised to add Zen Theory to the other aspects of Oriental Medicine Theory they should already know.

<b>Min. Class Hours</b>	<b>Field</b>	<b>Topics</b>
20	Anatomy	Anatomical terms, bones, muscles with origins and insertions etc.
20	Physiology	Functions of body systems – skin, respiration, circulation, lymphatic, nervous, uro-genital, digestive, endocrine etc
20	Pathology	Diseases with signs and symptoms
140	Oriental Medicine Theory	Two out of three OM approaches need to be studied in this time: Zen Shiatsu Theory – 8 Principles and Zang Fu etc – 5 Elements Theory ( <i>Much theory is of course re-enforced during the practical sessions</i> )
230	Practical	4 treatment patterns - prone, supine, side and sitting, hands elbows knees etc., meridians and points, qualities of touch, sensitivity, ki connection, self-development posture etc.
20	Various	Client and clinic management, communication skills, examinations, etc.

## Compulsory Study Criteria

### I SHIATSU THEORY

1. Understanding of Qi/Ki
  - 1.1. Oriental cosmology; concept of Yin – Yang and further relationships
  - 1.2. Theory and effects of shiatsu
  - 1.3. Theory of tsubos and touch
  - 1.4. Two out of the following four aspects of Oriental Medicine (OM) Theory
    - 1.4.1. Five Element Theory with classical meridian systems
    - 1.4.2. Eight Principles and Zang Fu (Chinese organ system) with classical meridian systems
    - 1.4.3. Zen Shiatsu
    - 1.4.4. Namikoshi Shiatsu
2. Location of important tsubos and their principle therapeutic actions (See Guideline list below)
3. Point contra-indications under certain conditions
4. Manifestation of meridian energies; character and functioning of meridians in relation to the two aspects of OM theory studied
5. Holistic understanding of health; unity of body-mind spirit.
6. Principles of acupressure
7. Two case histories to show an understanding at depth of a particular approach of OM theory

## **II TREATMENT AND TECHNIQUES**

1. Treatment positions: prone, supine, side, sitting
2. Shiatsu pressure, leaning with palm, thumb, fingers, elbows, knees
3. Other techniques eg holding, rotating, vibrating, rubbing
4. Movement from and awareness of Hara
5. Energy flow from Hara to hands
6. Working from Hara / working with the whole body
7. Alignment and release of spine and joints
8. Mother-child hand principle
9. Joint rotations
10. Meridian stretching and stretching of limbs
11. Working with meridian flow according to the two shiatsu theory models studied
12. Tonification and sedation techniques

## **III SELF-DEVELOPMENT, SELF-EXPLORATION**

1. Exercises for enhancement of perception and harmonisation e.g. Do In, Qi Gong, Yoga, Pranayama
2. Meridian exercises
3. Ethical principles – code of professional conduct and ethics
4. Writing up treatment reports
5. Experience of shiatsu ie. treatments from professional practitioners
6. A mode of checking and registering development and changes



#### **IV CLIENT OBSERVATION AND ENERGETIC EVALUATION**

1. Principles of evaluation: Asking, Looking, Hearing & Smelling, Touching
2. Evaluation from meridians, hara and back zones etc used in the theory modes studied
3. Back Yu and Front Bo point
4. Evaluation during treatment e.g. through stretching, rotation or on meridians and points
5. Evaluation strategy
6. Clinical Practice (as near as possible to a real clinic situation in order to develop professional confidence)

#### **V WESTERN MEDICAL KNOWLEDGE**

1. General Anatomy of bones, muscles and joints
2. Physiology: Body systems from a Western view point
3. Pathology: symptoms of illness and syndromes
4. Contraindications for shiatsu 'prohibited points'

#### **VI OTHER ESSENTIAL ASPECTS**

1. Empathy development
2. Self-reflection
3. Perception

4. Personality development in the terms of the shiatsu-meeting
5. Listening and communication skills
6. Possibilities, limits and contra-indications of shiatsu
7. Principles of touch in general e.g. first contact etc
8. Ethics fundamentals
9. Incident awareness and handling difficult situations

## **Recommended Additional Study Criteria**

### **I SHIATSU THEORY**

1. Additional case histories – at least one for each OM theory mode studied

### **II TREATMENT TECHNIQUES**

1. Holistic and symptomatic shiatsu
2. Working with mental images e.g. imagining flow
3. Perceptual development e.g. tsubos: appropriate depth and length of time
4. Moxa
5. Acupressure
6. Basic dietetics
7. Ampuku

### **III SELF-DEVELOPMENT, SELF-EXPLORATION**

1. Meditation
2. Body alignment, movement and awareness training
3. Training in small groups, tutorials or similar format
4. Treatments done under supervision or in class
5. Treatments done on teachers
6. Treating in presence of class members
7. Self-development essay, including an analysis of one's own energetic patterns from an OM perspective
8. Counselling communication
9. Breathing practice / training
10. Case analysis in groups or alone

### **IV CLIENT EVALUATION AND DIAGNOSTICS**

1. Facial diagnostics
2. Case histories analysis of data gathered according to modes studied
3. Tongue diagnostics
4. Typology
5. Pulse diagnostics
6. Clinic Practice should be at least 50 hours, including time for analysis and discussions

## **V WESTERN MEDICAL KNOWLEDGE**

1. Comparison of western and oriental physiology and psychology
2. Hygiene
3. First Aid

### **Optional Extra Study Areas**

## **I SUPPLEMENTARY METHODS AND TECHNIQUES**

1. Chakra work
2. Jin Shin Do
3. Tansu and Watsu
4. Shin-Tai
5. Fascia work
6. Postural integration – Rolfing
7. Deep Shiatsu (Tiefes Shiatsu)
8. Antique points according to 5 Elements
9. Dietetics according to Macrobiotics
10. Dietetics according to 5 Elements
11. Cranio Sacral Therapy
12. Counselling communication “management”
13. Reiki
14. Seiki

## II OTHER ASPECTS TO CONSIDER

1. The legal situation regarding shiatsu in your own country
2. Differences according to legal situations in other countries
3. Insurance and complaints procedures
4. Continuing Professional Development
5. Assessment

### **Assessment Evaluation for ESF Baseline Curriculum**

This is divided into 3 general areas Compulsory, Recommended and Optional. The difference between Recommended and Optional is that the aim is for Recommended to become Compulsory in the future.

### **Compulsory Aspects of Assessments for ESF Baseline Curriculum**

1. Written and/or Oral Theory Examination of Oriental Medicine (OM) – minimum of 3 hours over three years testing all aspects of OM covered on the syllabus. The examination should be a combination of multiple choice and short answer format – not just multiple choice, or an interview/viva. The pass mark to be at least 65%. Suitable evidence of previous Oriental Medicine studies may be acceptable at the discretion of the ESF member.
2. Written and/or Oral Theory Examination of Western Medicine, Anatomy, Physiology and Pathology – minimum 2½ hours over three years testing all aspects of WM covered on the syllabus with a minimum of  $\frac{3}{4}$  an hour per section (Anatomy, Physiology and Pathology). The examination should be a combination of multiple

choice and short answer format – not only multiple choice, or an interview/viva. The pass mark to be at least 65%. Suitable evidence of previous Western Medicine studies may be acceptable at the discretion of the ESF member.

3. Practical Examination – minimum 40 minutes on unknown person(s) in the presence of experienced assessors / teachers. (The 40 minutes may be divided into two periods of 20 minutes on two different people)

4. Criteria for practical examination to include assessment of: skill, fluency and continuity, techniques and knowledge of a minimum of 3 of the 4 patterns and also meridians, professionalism, presentation, empathy, sensitivity, appropriateness of treatment, diagnostic ability, use of hara, grounding, centeredness, breath and connection to Ki.

5. Practical points location of a random selection of 10 points found reasonably quickly (verbal description of location optional) with a pass mark of 7 out of 10.

6. Presentation of at least 100 professional treatment records from the year immediately prior to registration.

7. Presentation of two case histories – of between 1,200 and 1,800 words - showing the ability to present a client's information over a period of a minimum of 6 treatments, assess their individual pattern of disharmony in depth and also supply suitable recommendations for the client to improve his/her own health.

8. Present evidence of receiving a minimum total of 3 treatments from qualified practitioners (not all from the same practitioner)

### **Compulsory Criteria required in order to apply to be entered on a National Register of Practitioners**

1. Present evidence of suitable indemnity insurance, if legally possible in the country
2. 450 hours of study

3. Letters of recommendation from two teachers
4. An Interview
5. Compliance with any statutory requirements additional to this programme

### **Recommended Aspects of Assessment for ESF Baseline Curriculum**

1. Written Theory Examination of Western Medicine, Anatomy, Physiology and Pathology to be at least 3 hours
2. Practical Examination – minimum 40 minutes on experienced assessors / teachers rather than somebody unknown to the candidate.
3. The assessor / teacher should be from a school not connected with the examinee's school.
4. The assessment should include a 20-minute viva interview to discuss case histories, graduate's shiatsu development and ethics.
5. An additional 100 professional treatment records. These should come in the year after graduation to show continued professional involvement with the advancement of shiatsu and not just be treatments from training records
6. Additional case histories are highly recommended and one of them could be in the form of a self-development style essay that includes a self-analysis in OM energetic terms.
7. Self-development essay / diary where a student has studied the changes in him/herself over the period of the shiatsu course and can give an analysis of his/her own energetic patterns from and OM perspective
8. Evidence of regular consistent movement /Ki development work in addition to the shiatsu studies where awareness of health is part of the programme rather than just keeping fit.

9. Present evidence of receiving a course of a minimum of 6 treatments from one qualified practitioner and further treatments from at least two other practitioners, to a total of 10 treatments.
10. A minimum of 500 contact hours of study

### **Optional Aspects of Assessment**

1. The percentage of attendance of a course depends on individual schools and over a period of 3 years there will almost always be some absenteeism but a minimum of 80% should be encouraged. However, the students would need to have done the minimum required (450 hours) for the local national society before being permitted to present him/herself for registration.
2. Movement or Ki awareness assessments (not to see who is the greatest athlete etc but to look at how energy is being used, how the practitioner uses and connects to his/her own body and so on)
3. Regular practical evaluation throughout training to include 10 treatments on teachers over the three years.

### **Some Guidelines that might help in developing various details of a Curriculum / Syllabus**

The following is a list of major points to consider when studying either 8 Principles or 5 Elements and even Zen theory. It is by no means a complete list, nor is every point compulsory. However, the beginnings and ends of meridians and also perhaps where they change direction, the front Bo points, back Yu points, as well as points with strong actions need to be considered and also those contra-indicated in certain conditions eg. pregnancy. In addition to location, the principle actions of some of the very important points should also be studied. Those printed in bold and underlined



may be regarded as perhaps more important but this is a subjective point of view and the list is a guide only.

Lu: 1, 5, 7, 9, 11

L.I.: 1, 4, 10, 11, 15, 16, 20

St: 1, 3, 9, 25, 30, 36, 40, 44, 45

Sp: 1, 3, 6, 9, 10, 15, 20, 21

He: 1, 3, 7, 9

S.I.: 1, 3, 9, 10, 11, 19

Bl: 1, 2, 10, 11, 13, 14, 15, 17, 18, 19, 20, 21, 22, 23,

25, 27, 28, 36 (50), 40 (54), 43 (38), 52 (47), 57, 60, 67

Per / HC: 1, 3, 6, 7, 8, 9

TH/TW: 1, 4, 5, 6, 10, 14, 23

GB: 1, 12, 14, 20, 21, 24, 25, 30, 34, 40, 44

Liv: 1, 3, 4, 5, 8, 13, 14

CV: 1, 3, 4, 5, 6, 8, 12, 14, 17, 24

GV: 1, 2, 4, 14, 16, 20, 28

Kid: 1, 3, 6, 7, 10, 27

Extra Point: Yin Tang

## **Anatomy Physiology and Pathology**

Below are some areas to consider including in a syllabus/curriculum

### 1. ANATOMY SYLLABUS

- a) Skeletal system: names, types and functions of bones
- b) Joints: types, functions and structures
- c) Connective tissue e.g. ligaments, tendons, fascia, cartilage, bone.
- d) Muscular system: types, location, origins and insertions, qualities and functions
- e) Landmarks used in point location

## 2. PHYSIOLOGY SYLLABUS

- a) Brief description of cells - Homeostasis and adaptation to the environment.
- b) Cardiovascular system
- c) Lymphatic system
- d) Respiratory system
- e) Digestive system
- f) Urinary system
- g) Nervous system
- h) Endocrine system
- l) Reproductive system
- j) Sensory organs

## 3. PATHOLOGY SYLLABUS

For pathological conditions, a short definition of each should be known, with knowledge of the main organ and / or systems involved and the main symptoms that arise. For example:

Hypothyroidism: is a subnormal activity of the thyroid gland. Adult onset symptoms are physical and mental slowing, undue sensitivity to cold, slowing of the pulse, weight gain and coarsening of the skin.

Ringworm: is a highly contagious fungal infection of the surface of the skin. The infection is ring-like and causes intense itching.

- a) Integumentary System
- b) Skeletal System
- c) Muscular System
- d) Blood disorders
- e) Cardiovascular System
- f) Respiratory System
- g) Gastrointestinal System
- h) Renal System
- l) Endocrine System
- j) Nervous System
- k) Ear and eye and nose
- l) Female Reproductive System
- m) Male Reproductive System
- n) Lymphatic and Immune System
- o) Miscellaneous

Also INDICATIONS and WARNINGS of serious problems that require urgent medical care.

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**Appendix 2. Finnish Natural Medicine Central Federation -  
Luonnonlääketieteen Keskusliitto (LKLry):  
Training Standards in the field of Natural Medicine**

The Natural Medicine Federation (LKLry) is the major CAM organization of Finland. Its members are CAM-related associations in Finland that satisfy its training and other standards. Its aim is to increase patient's safety and to increase the professional status of the Natural Medicine Practitioners. In order to achieve that aim it established a set of minimum training standards for the practitioners and it maintains a voluntary Practitioner Register of those who satisfy them. Here we provide a brief summary of those standards. For further details you can refer to the official website at <http://www.lkl.fi/koulutus> (only in Finnish).

In order for a practitioner to become part of the Register, it's necessary to provide evidence for studies of at least 35.5 ECTS or 960 hours (1 ECTS = 27 study hours).

Those should include:

18 ECTS (486 hours)	Therapy Related
3 ECTS (81 hours)	Therapist as Profession
14 ECTS (378 hours)	Basic Medicine
0.5 ECTS (16 hours)	First Aids

**Therapy Related - 18 ECTS**

11.8 ECTS (324 hours)	Professional Studies (of which at least 200 hours are contact hours)
4 ECTS (110 hours)	Treatment Practice
2 ECTS (60 hours)	Diploma Thesis

### **Therapist as Professional – 3 ECTS**

Here are included subjects related to history of medicine and of natural medicine, law and policies, therapeutic relationships, professionalism, entrepreneurship, marketing etc.

A minimum of 1 ECTS (27 hours) should cover the Basics of Nutrition and its relevance to health.

### **Basic Medicine – 14 ECTS**

5 ECTS (133 hours)	Anatomy and Physiology (of which at least 80 hours are contact hours)
7.5 ECTS (200 hours)	Pathology (of which at least 120 hours are contact hours)
1.5 ECTS (47 hours)	Public Health & Basic Nursing (of which at least 30 hours are contact hours)

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Helsinki, February 2016

[info@shiatsufinland.fi](mailto:info@shiatsufinland.fi)

<http://shiatsufinland.fi/>