



Appendix

**This appendix was part of the submitted manuscript and has been peer reviewed.
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Appendix to: Cohen MM, Smit DV, Andrianopoulos N, et al. Acupuncture for analgesia in the emergency department: a multicentre, randomised, equivalence and non-inferiority trial. *Med J Aust* 2017; 206: 494-499. doi: 10.5694/mja16.00771.

A. Acupuncture point selection protocol¹

	Local points	Distal points	Other	Stimulation	Needle choice and retention time
All three conditions	LI4 and LV3				Hwato 0.22 × 13 mm Hwato 0.25 × 30 mm Hwato 0.25 × 40 mm Seirin 0.25 × 30 mm 20–30 min retention
Lower back pain: central type	Huatoujiaji, DU3 and DU4, BL 29, BL30, BL31 and BL32	GB 30, BL40, BL54, BL 58, BL62, and KI 3	<ul style="list-style-type: none"> Other points: Ashi points as suitable 	<ul style="list-style-type: none"> Local and Ashi points should be stimulated gently till Deqi is achieved or in the case of a trigger point where a twitch response is elicited. 	
Lower back pain: lateral type	BL23, BL25, BL52, BL54 and Yaoyan	GB 30, BL40, BL54, BL 58, BL62, and KI 3	<ul style="list-style-type: none"> Other points: Ashi points as suitable 	<ul style="list-style-type: none"> Distal points stimulated more strongly and using a reduction technique 	
Ankle sprain	Local points should be selected from: <ul style="list-style-type: none"> ST41, GB40, BL60, BL 62, BL 63; or 64 KI2, KI3, KI6, SP4, SP5 	Distal points SP6, SP9, GB34, ST36 (use with caution on patients with low blood pressure) and HT7 on the opposite wrist to the injury	<ul style="list-style-type: none"> Other points: Ashi points as suitable 	<ul style="list-style-type: none"> Local and Ashi points should have no or very little stimulation Distal points are to be stimulated more strongly using a reduction technique 	
Migraine	<ul style="list-style-type: none"> Minimal local point selection (1-2 points) from Taiyang, ST8, GB8, DU23, BL10, BL 11, GB2 and GB14 according to pain location If significant retro-orbital pain: BL2 	-Distal points use LV3, LV 2, GB34, LI4, SJ5, ST 36, ST44, BL60, GB41, SP6	<ul style="list-style-type: none"> Nausea/vomiting add, GV18, PC6 or ST40 Other points: Ashi points as suitable 	<ul style="list-style-type: none"> Local points should be no/minimal stimulation Distal points should use a reduction technique 	

1. Cohen M, Parker S, Taylor D, et al. Acupuncture as analgesia for low back pain, ankle sprain and migraine in emergency departments: study protocol for a randomized controlled trial. *Trials* 2011; 12: 241.

B. Protocol for relief of pain by pharmacotherapy

	Ankle sprain	Lower back pain	Migraine
First line therapy options			
Diazepam (5 mg)		x	
Hartmann's solution (5% dextrose, 0.9% NaCl)	x	x	x
Metoclopramide (10–20 mg iv) or prochlorperazine (12.5 mg im) (if nausea and vomiting are significant)			x
Paracetamol (1 g)	x	x	x
Paracetamol (500 mg) with codeine (30 mg)	x	x	x
Tramadol (50–100 mg)	x	x	x
Dextropropoxyphene (32.5 mg) and paracetamol (325 mg)	x	x	x
Ibuprofen (400 mg), diclofenac (50 mg) or indomethacin (100 mg) as needed	x	x	x
Second line therapy options (after one hour)			
Morphine (2.5 mg iv, boluses)	x	x	x
Chlorpromazine (25 mg in 1000 mL normal saline iv)			x

iv = intravenous; im =intramuscular.