

FINAL DRAFT Technical Specification

ISO/DTS 23961-3

Traditional Chinese medicine — Vocabulary for diagnostics —

Part 3: Abdomen

Document Preview

ISO/TC 249

Secretariat: SAC

Voting begins on: 2024-03-12

Voting terminates on: 2024-05-07

https://standards.iteh.ai/catalog/standards/iso/774199d3-9dff-49ab-8980-d88fbfc6661d/iso-dts-23961-3

RECIPIENTS OF THIS DRAFT ARE INVITED TO SUBMIT, WITH THEIR COMMENTS, NOTIFICATION OF ANY RELEVANT PATENT RIGHTS OF WHICH THEY ARE AWARE AND TO PROVIDE SUPPORTING DOCUMENTATION.

IN ADDITION TO THEIR EVALUATION AS BEING ACCEPTABLE FOR INDUSTRIAL, TECHNO-LOGICAL, COMMERCIAL AND USER PURPOSES, DRAFT INTERNATIONAL STANDARDS MAY ON OCCASION HAVE TO BE CONSIDERED IN THE LIGHT OF THEIR POTENTIAL TO BECOME STANDARDS TO WHICH REFERENCE MAY BE MADE IN NATIONAL REGULATIONS.

iTeh Standards (https://standards.iteh.ai) Document Preview

ISO/DTS 23961-3

https://standards.iteh.ai/catalog/standards/iso/774199d3-9dff-49ab-8980-d88fbfc6661d/iso-dts-23961-3



COPYRIGHT PROTECTED DOCUMENT

© ISO 2024

All rights reserved. Unless otherwise specified, or required in the context of its implementation, no part of this publication may be reproduced or utilized otherwise in any form or by any means, electronic or mechanical, including photocopying, or posting on the internet or an intranet, without prior written permission. Permission can be requested from either ISO at the address below or ISO's member body in the country of the requester.

ISO copyright office CP 401 • Ch. de Blandonnet 8 CH-1214 Vernier, Geneva Phone: +41 22 749 01 11 Email: copyright@iso.org

Website: <u>www.iso.org</u> Published in Switzerland

Con	tent	S	Page	
Forew	Forewordiv			
Intro	ductio	n	v	
1	Scop	e	1	
2	Norn	native references	1	
3	Terms and definitions		1	
	3.1	General	1	
	3.2	Body structures of abdomen	1	
	3.3	Representation of TCM abdominal clinical findings	3	
	3.4	Practical examples of terminology use	4	
Annex	x A (in	formative) List of equivalent terms in Chinese, Japanese and Korean	9	
Annex	k B (in	formative) Body structures of abdomen	12	
Bibliography			20	
Index			21	

iTeh Standards (https://standards.iteh.ai) Document Preview

ISO/DTS 23961-3

https://standards.iteh.ai/catalog/standards/iso/774199d3-9dff-49ab-8980-d88fbfc6661d/iso-dts-23961-3

Foreword

ISO (the International Organization for Standardization) is a worldwide federation of national standards bodies (ISO member bodies). The work of preparing International Standards is normally carried out through ISO technical committees. Each member body interested in a subject for which a technical committee has been established has the right to be represented on that committee. International organizations, governmental and non-governmental, in liaison with ISO, also take part in the work. ISO collaborates closely with the International Electrotechnical Commission (IEC) on all matters of electrotechnical standardization.

The procedures used to develop this document and those intended for its further maintenance are described in the ISO/IEC Directives, Part 1. In particular, the different approval criteria needed for the different types of ISO document should be noted. This document was drafted in accordance with the editorial rules of the ISO/IEC Directives, Part 2 (see www.iso.org/directives).

ISO draws attention to the possibility that the implementation of this document may involve the use of (a) patent(s). ISO takes no position concerning the evidence, validity or applicability of any claimed patent rights in respect thereof. As of the date of publication of this document, ISO had not received notice of (a) patent(s) which may be required to implement this document. However, implementers are cautioned that this may not represent the latest information, which may be obtained from the patent database available at www.iso.org/patents. ISO shall not be held responsible for identifying any or all such patent rights.

Any trade name used in this document is information given for the convenience of users and does not constitute an endorsement.

For an explanation of the voluntary nature of standards, the meaning of ISO specific terms and expressions related to conformity assessment, as well as information about ISO's adherence to the World Trade Organization (WTO) principles in the Technical Barriers to Trade (TBT), see www.iso.org/iso/foreword.html.

This document was prepared by Technical Committee ISO/TC 249, *Traditional Chinese medicine*.

In addition to text written in the official ISO languages (English, French, Russian), this document gives text in Chinese, Japanese and Korean. This text is published under the responsibility of the member body for China (SAC) and is given for information only. Only the text given in the official languages can be considered as ISO text.

A list of all parts in the ISO 23961 series can be found on the ISO website. 0-488 fb fc 6661 d/iso-dis-23961-3

Any feedback or questions on this document should be directed to the user's national standards body. A complete listing of these bodies can be found at www.iso.org/members.html.

Introduction

Abdominal diagnosis is one of the unique diagnostic methods in traditional Chinese medicine (TCM). International standards in the field of TCM are needed to facilitate international communication, medical activities, scientific research and regulations Furthermore, the standardization of terminology is very important for manufacturing products (e.g. education-related products and diagnostic products).

This document facilitates government regulation and policy. It also facilitates the international trade of abdominal diagnosis related products and services.

iTeh Standards (https://standards.iteh.ai) Document Preview

ISO/DTS 23961-3

https://standards.iteh.ai/catalog/standards/iso/774199d3-9dff-49ab-8980-d88fbfc6661d/iso-dts-23961-3

iTeh Standards (https://standards.iteh.ai) Document Preview

ISO/DTS 23961-3

https://standards.jteh.aj/catalog/standards/jso/774199d3-9dff-49ab-8980-d88fbfc6661d/jso-dts-23961-3

Traditional Chinese medicine — Vocabulary for diagnostics —

Part 3:

Abdomen

1 Scope

This document defines terms for abdominal diagnosis. The equivalent terms in Chinese characters (Pinyin), Japanese characters and Korean characters are given in Annex A.

2 Normative references

There are no normative references in this document.

3 Terms and definitions

ISO and IEC maintain terminology databases for use in standardization at the following addresses:

- ISO Online browsing platform: available at https://www.iso.org/obp
- IEC Electropedia: available at https://www.electropedia.org/

3.1 General

3.1.1

abdominal examination

method of physical investigation of the abdomen $\frac{74199d3-9dff-49ab-8980-d88fbfc6661d}{iso-dis-23961-3}$

Note 1 to entry: See <u>Table A.1</u>.

Note 2 to entry: Methods include palpation.

Note 3 to entry: See term 2.4.74 "abdominal examination" in Reference [1].

3.1.2

manifestation

symptom or identifiable result of a specific ailment or situation

Note 1 to entry: Manifestations can be either objective when observed by a physician, or subjective when perceived by the patient.

3.2 Body structures of abdomen

3.2.1

epigastric region

epigastrium

part of the *upper abdomen* (3.2.7) above stomach and below the diaphragm inside mammillary line

Note 1 to entry: See <u>Table A.1</u>.

Note 2 to entry: See Annex B: Figure B.1, key 3 and Figure B.2 key 3.

3.2.2

chest and hypochondrium

region along the costal arches

Note 1 to entry: See Table A.1.

Note 2 to entry: See Annex B: Figure B.1, key 4 and Figure B.2, key 4.

3.2.3

lateral upper abdomen

lower hypochondrium

region of the abdomen bound by the lower costal arch and the side of the chest

Note 1 to entry: See Table A.1.

Note 2 to entry: See Annex B: Figure B.1, key 5 and Figure B.2, key 5.

3.2.4

supra-umbilical region

region above the umbilicus

central region of the abdomen above the navel

Note 1 to entry: See <u>Table A.1</u>.

Note 2 to entry: See Annex B: Figure B.1, key 6 and Figure B.2, key 6.

3.2.5

left or right umbilical region

para-umbilicus region

region beside the umbilicus

central region of the abdomen left and/or right beside the navel

Note 1 to entry: See <u>Table A.1</u>.

Note 2 to entry: See Annex B: Figure B.1, key 7 and Figure B.2, key 7.

3.2.6

region below the umbilicus

central region of the abdomen below the navel

Note 1 to entry: See <u>Table A.1</u>.

Note 2 to entry: See Annex B: Figure B.1, key 8 and Figure B.2, key 8.

3.2.7

upper abdomen

abdominal region above the level of the navel

Note 1 to entry: See <u>Table A.1</u>.

Note 2 to entry: See Annex B: Figure B.1, key 9.

3.2.8

lower abdomen

abdominal region below the level of the navel

Note 1 to entry: See <u>Table A.1</u>.

Note 2 to entry: See <u>Annex B</u>: <u>Figure B.1</u>, key 10.

3.2.9

lateral lower abdomen

part of the lower abdominal region lateral to the mammillary line

Note 1 to entry: See Table A.1.

Note 2 to entry: See Annex B: Figure B.1, key 11.

Representation of TCM abdominal clinical findings 3.3

3.3.1

abdominal strength

quality of being tense in abdomen

Note 1 to entry: See <u>Table A.1</u>.

3.3.2

tenderness

pain as a result of pressure

Note 1 to entry: See <u>Table A.1</u>.

3.3.3

resistance

tension opposition to an active force opposite force to pressure

Note 1 to entry: See Table A.1.

Note 2 to entry: The term is used to describe resistance to pressure. nttps://standards.iteh.ai)

3.3.4

stuffiness

localized subjective feeling of *fullness* (3.3.5) and obstruction

Note 1 to entry: See <u>Table A.1</u>.

Note 2 to entry: See 2.3.152 "stuffiness" in Reference [1] and 09-319 "stuffiness" in Reference [2].

Note 3 to entry: The term is used to describe epigastric stuffiness.

3.3.5

fullness

subjective feeling of being filled to capacity

Note 1 to entry: See <u>Table A.1</u>.

Note 2 to entry: The term is used to describe *fullness* and discomfort in chest and hypochondrium (3.4.5).

3.3.6

pulsation

beating of artery

Note 1 to entry: See <u>Table A.1</u>.

Note 2 to entry: The term is used to describe pulsation of aorta.

3.3.7

tension

state of being stretched tight

Note 1 to entry: See <u>Table A.1</u>.

Note 2 to entry: The term is used to describe rectus *abdominal muscle tension* (3.4.15).

© ISO 2024 - All rights reserved

3.3.8

contracture

state of static muscle shortening sometimes with shorting of skin

Note 1 to entry: See <u>Table A.1</u>.

Note 2 to entry: The term is used to describe lower abdominal and inguinal muscle tension (3.3.7).

3.3.9

flaccid abdominal wall

restless peristalsis

state of thinness of the abdominal wall with decreased bowel movement

Note 1 to entry: See Table A.1.

Note 2 to entry: The term is used to describe *unstable peristalsis* (3.4.19) (observed through flaccid abdominal wall).

3.3.10

spastic abdominal wall

abdominal urgency

state of rigidity of the abdominal wall with abdominal pain

Note 1 to entry: See <u>Table A.1</u>.

Note 2 to entry: The term is used to describe abdominal wall *tension* (3.3.7).

3.4 Practical examples of terminology use

3.4.1

epigastric stuffiness

stuffiness in the epigastric region DS://S121101ardS.Itell.21

focal distension in *epigastric region* (3.2.1) reported by the patient

Note 1 to entry: See Table A.1.

Note 2 to entry: See <u>Annex B</u>: <u>Figure B.3</u> a).

Note 3 to entry: See term 09-335 "epigastric stuffiness" in Reference [2]. ab-8980-d88fbfc6661d/iso-dts-23961-3

Note 4 to entry: The term is used to describe subjective epigastric *stuffiness* (3.3.4).

Note 5 to entry: The first mention is in the *Shanghanlun* [3].

3.4.2

epigastric stuffiness and resistance

subjective feeling of *fullness* (3.3.5) and obstruction in *epigastric region* (3.2.1) reported by the patient and opposite force when abdomen is palpated

Note 1 to entry: See <u>Table A.1</u>.

Note 2 to entry: See Annex B: Figure B.3 b).

Note 3 to entry: See term 2.3.150 "stuffiness and rigidity below the heart" in Reference [1].

Note 4 to entry: The term is used to describe *epigastric stuffiness* (3.4.1) and *resistance* (3.3.3) to pressure.

Note 5 to entry: The first mention in the *Shanghanlun*[3].

3.4.3

obstructive sensation in epigastrium

rectus abdominal muscle tension ($\underline{3.4.15}$) under the costal arch associated with feeling of obstruction and discomfort in epigastric region ($\underline{3.2.1}$)

Note 1 to entry: See <u>Table A.1</u>.