

STARFLEET MEDICAL  
TRAINING RECORD: SPECIALITY TRAINING  
TRADITIONAL MEDICINE



Name:

SCC:

Subjects Required:

Date Completed:

**STARFLEET ACADEMY**  
**INSTITUTE OF MEDICAL ARTS (IOMA)**

**College of Traditional Medicine**

TMED 101a Herbal Medicine Part 1	<input type="text"/>
TMED 104a Acupuncture & Acupressure Part 1	<input type="text"/>
TMED 109 Reiki	<input type="text"/>
TMED 110a Aromatherapy Part 1	<input type="text"/>
TMED 111a Naturopathic & Homeopathic Medicine Part 1	<input type="text"/>
TMED 113a Cupping Part 1	<input type="text"/>
TMED 112a Magnet Therapy Part 1	<input type="text"/>
TMED 115a Fasting Part 1	<input type="text"/>
TMED 116a Hypnotherapy Part 1	<input type="text"/>
TMED 118a Reflexology Part 1	<input type="text"/>

Completed Training Records and evidence of completion of subjects (certificates or screenshots) should be emailed to:  
[sfmedical.training@gmail.com](mailto:sfmedical.training@gmail.com)

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For use by SFMedical Staff only

Date received:

Date processed: