The Three Basic Components of a Pulse: Shape, Jump, and Level
by Jimmy Wei-Yen Chang, L.Ac.

If a picture is worth a thousand words, then regarding pulse diagnosis, it may be said, “A touch is worth a thousand pictures.”

Pulse diagnosis is perhaps the least understood diagnostic constituent of Chinese Medicine partly due to the difficulty in disseminating its intricacies, as well as the fact that access to reliable clinical information regarding pulse diagnosis is almost non-existent...until now.

Jimmy Wei-Yen Chang is one of the very few, if not the only pulse master, who knows and is willing to spread the invaluable knowledge of effectively utilizing pulse taking to its full diagnostic potential. Through his book, Pulsynergy, and his Pulsynergy Made Easy seminar series, Master Chang simplifies the art of pulse taking.

One of the fundamental understandings of Master Chang’s pulse taking theory is that a pulse consists of three basic components – shape, jump, and level. The shape of a pulse describes its structural topography; the jump of a pulse describes its pulsation aspect; and the level of a pulse describes the depth in which the pulse is felt.

Shape


Convex-shaped pulses are pulses that bulge upward and/or outward. The lengths of these pulses vary from 0.1-2.0 cm. Convex-shaped pulses are usually indicative of pathology in the vessels (stagnation) of the organs, or growth or mass reflected by the position of the pulse. Examples of convex-shaped pulses include bird’s beak (aka pen tip), short, turtle, rainbow, and bump.

Straight-wiry pulses, as the name indicates, are pulses that are straight, with no curvature, and wiry, indicating the tension or tightness of the pulse. The diameter of these pulses can be from less than 0.1 mm (hairline thin) to about 0.5 cm. The thin, straight pulses are taut, with the tautness of the pulses dependent on their diameters – the thinner the pulse, the more taut the pulse. They are usually indicative of constriction in the part of the body reflected by the position of the pulse. Thin, straight pulses include roof and guitar string (aka steel wire).

The thick, straight pulses may or may not be taut, and are usually indicative of excess heat or inflammation; such pulses are taiyang pulse, big pulse, and brachial pulse.
The next category of pulse shapes is concave-shaped pulses. Concave-shaped pulses dip and curve downward. The curves on the sides of these pulses can be felt, almost as if the vessel walls are thinner so that when it is pressed, it sinks down. Since concave-shaped pulses curve downward, these pulses are mostly found on the deep level.

Shapeless pulse is the last category of pulse shapes. The arterial borders and cylindrical shape of these pulses cannot be felt; it feels like there is no distinct pulse with a distinguishable border. It feels almost like wiggling jello. The diagnosis of shapeless pulses is blood stasis, damp accumulation, or high cholesterol. Examples of shapeless pulses include scattered pulse, dispersing pulse, and greasy pulse.

It is important to remember that “convex-shaped”, “straight-wiry”, “concave-shaped”, and “shapeless” pulses describe only the shape aspect of pulses; the jump (i.e., forceful or weak / fast or slow) and level (superficial or deep) of these pulses must also be determined in order to create a complete pulse picture and reach a diagnosis.

**Jump**
The jump of a pulse refers to the pulsation aspects of a pulse and the force of the pulse pressing up against your fingers. There are four attributes of jump: 1) Velocity, 2) Strength, 3) Resistance, and 4) Amplitude. The velocity of a pulse describes the rate of the pulse, whether the pulse is fast (>80 beats per minute) or slow (<60 beats per minute). Strength describes the rebound of a pulse against your fingers. When a pulse is forceful, the pulse has a strong rebound and does not disappear upon pressure; whereas a weak pulse disappears upon pressure and has little or no rebound. The resistance of a pulse describes the flow of a pulse, whether it flows smoothly and consistently, or feels tight and obstructed. The last attribute of jump is amplitude, which describes the magnitude at which the blood vessel expands.

As with shapes of pulses, it is important to remember that the “jump” of a pulse describes only one aspect of pulses; in order to create a complete pulse picture and to reach a diagnosis, the shape and level of these pulses must also be determined.

**Level**
“Level” refers to the depth at which the pulse can be felt. Normally, the cun is most superficial (right below the skin), guan is mid level, and chi is the deepest. Evaluating the relative level of the three positions gives an idea of which organ is out of balance. In general, a floating (aka superficial) pulse indicates dryness while a deep (aka sunken) pulse indicates damp; however, as mentioned above, in order to create a complete pulse picture and reach a diagnosis, the level of a pulse must be combined with its shape and jump.

**Conclusion**
A complete pulse picture can be broken down to its three basic components – shape, jump, and level. Knowing and understanding the descriptions and indications of these different shapes, jumps, and levels of pulses are the fundamental pieces needed to paint a complete pulse picture.

**About the Author**
Master Jimmy Wei-Yen Chang has over 25 years of concentrated clinical experience applying his expertise in differential diagnosis and herbal prescription. The author of a pulse diagnosis manual, Pulsynergy, Master Chang currently pursues his specialties in private practice in Hacienda Heights, California, and is widely recognized for his skills in correlating expert pulse taking and herbal prescription.

To learn more about pulses and herbs, Jimmy Chang is speaking on the following topics for Lotus Institute. All classes are approved for 8 CEUs/PDAs by the CA and IL Acupuncture Boards and NCCAOM; pending approval for FL and TX Acupuncture Boards.
Classes by the Author

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- 1/24/10 LotusWEBINAR Rebroadcast (Register before 1/20/10 and Watch if FREE!)

**Pulsynergy Made Easy Part II**
- 2/14/10 LotusWEBINAR Rebroadcast

**Pulsynergy Made Easy Part III**
- 3/21/10 LotusWEBINAR Rebroadcast

**Pulsynergy Made Easy Part IV**
- 9/12/10 LotusSEMINAR @ Denver, CO and Live-streaming LotusWEBINAR

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**Case Studies: Live Discussion on Pulse Diagnosis and Herbal Prescriptions**
- 10/17/10 LotusSEMINAR @ Los Angeles, CA and Live-streaming LotusWEBINAR

**Hands-On Pulse Taking Workshop (30 people max)**
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- 11/21/10 LotusSEMINAR @ Rowland Heights, CA

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