

**TOOLKIT:
LICENSED NURSES,
MEDICAL ASSISTANTS
AND DELEGATION:
SAFE AND EFFECTIVE
TEAMWORK**



New Hampshire MA Task Force, September 2011

Table of Contents

Introduction & Recent Historical Perspective	1
The Task Force Approach	3
Supervision & Delegation	4
Clinical Practice Advisory & Position Statement Overview	7
Sample Resources:	13
○ Job Descriptions	
○ Skills Competency Checklists	
○ Self Assessment Tools	

Introduction & Recent Historical Perspective

This toolkit was developed by a New Hampshire task force representing the following roles and entities:

- Licensed nurses (RN and APRN; this would also include the LPN role although not represented on the task force)
- Medical assistant
- New Hampshire Board of Nursing
- New Hampshire Nurses' Association

The MA Task Force was established in response to numerous calls, letters and messages to both the NH Board of Nursing and New Hampshire Nurses' Association over a period of several years requesting clarification of the role of the licensed nurse in relation to medical assistant practice. The Board of Nursing and NHNA led an "Evening of Discussion" in June 2009 for licensed nurses, medical assistants and other interested parties to convene and discuss questions and concerns. The topics raised included but were not limited to:

- Scope of practice – what can an MA do?
- Competency – how do I know what an MA is *competent* to do, without standardized educational expectations?
- Supervision – who is responsible?
- Can an MA have the same job description as a licensed nurse?
- How do we report an MA who is incompetent or demonstrates serious behavior issues?

Subsequent to this event the task force met numerous times and developed the Clinical Practice Advisory and Position Statement that serves as the foundation for this toolkit. The document reflects significant deliberation and consideration for the integral yet distinct roles of the licensed nurse and medical assistant in the practice setting. The task force communicated with members and partnered with leaders of the MA

community in New Hampshire, and would like to express regard for the experience, education and sense of responsibility to practice safely and competently demonstrated by the great majority of individuals in this role. However, *as is the case with any category of healthcare worker*, issues of practice within scope, competency and inappropriate behavior will arise.

The fact that there is no regulatory or licensing process for medical assistants in nearly all states including New Hampshire presents a challenge when attempting to address topics such as scope of practice and reporting mechanisms for issues related to competence and behavior. The lack of a minimum standard of education for individuals in this role may add to the challenge, and those who have not been through a formal education program may receive inaccurate information regarding scope of practice from employers or others.

Although licensed physicians have overall responsibility for supervising the work of medical assistants, the workflow and staffing structures in many settings may result in situations where a licensed nurse is formally or informally expected to delegate to and supervise individuals in this role. Further, in the absence of clear expectations licensed nurses have expressed concern regarding potential liability for actions performed by medical assistants when the two roles are concurrently on duty.

Resources in this area are limited and some gray areas remain. The goal of the Task Force in developing this toolkit was to provide licensed nurses in New Hampshire with information, tools and resources to support safe and effective teamwork in settings that employ both licensed nurses and medical assistants.

Licensee Delegation to MAs: The Task Force Approach

Questions frequently arise regarding medical assistant scope of practice and why individuals in this role are not regulated or licensed in most states. The work of the task force was guided by recognition that:

1. It was not within our purview to define a scope of practice for another healthcare role that wasn't licensed by the BON, and;
2. This is a much larger issue...since the MA role is *not* licensed or regulated there *is* no clear, consistent legal scope of practice.

Licensees have requested, among other things, lists of tasks and functions that MAs should be permitted to perform. Although it was clearly not within the purview of the task force to do that directly, the team addressed this from the perspective of what a licensed nurse *may or may not delegate* to someone in the MA role.

Different levels of preparation and registration or certification exist among individuals in the medical assistant role. It's important to be mindful that medical assistant education may range from on-the-job training to a two year associate degree program, and individuals in this role may hold various registration or certification credentials obtained through numerous paths ranging from submission of an application and processing fee to completion of a written exam. Registration or certification may be required by an individual employer but are not required to function in the role of a medical assistant and should not be confused with licensure.

The task force also acknowledged throughout its work that regardless of educational background or credentials there are many skilled, knowledgeable medical assistants working in settings throughout the state, primarily in ambulatory areas such as physician practices. However circumstances surrounding that role – the lack of standardized minimal education and licensure – have resulted in challenges and confusion..

Research led the task force to many resources and documents. Members investigated what work had been done nationally (very little.) Communication took place with two of the organizations that offer MA credentials – the AAMA – American Association of Medical Assistants which offers certification – and the AMT – American Medical Technologists, which offers registration. Members reviewed competency lists from several sources along with role descriptions, and ultimately utilized as the framework for its discussions the comprehensive competencies established by a national accrediting body for graduates of a two year program. Each competency was analyzed and a determination made as to whether that task could be delegated by a licensed nurse to an unlicensed person based on the delegation rules. The Clinical Practice Advisory and Position Statement are based on that analysis.

What is the role of the licensee with regard to supervision and delegation to the medical assistant?

Before I discuss the role of the Licensee with regard to the supervision and delegation to the Medical Assistant, I would like to comment on the process of delegation in your clinical environment.

It is clear that the role/relationship between licensed nurses and a medical assistant within the same practice is that of delegation. Having stated that it is important to remember that expectations and or assumptions as stated by policies within the clinical practice setting may not clearly define this supervision role in terms of the delegation requirements outlined in the Nurse Practice Act, section NUR 404. Often times the policies include language that simply states “supervises medical assistants.”

Licensed nurses who work with medical assistants should have written job descriptions that articulate this relationship as well as the types of tasks that the nurse is able to delegate based on NUR 404. Additionally there should be a list of documented competencies for the medical assistants whom they will be supervising.

Once these policies and competencies are in place, than all members of the patient care team, including Doctors, office managers, medical assistants, need to be made aware of them and their operational implications.

Delegation to the medical assistant comes into effect when the licensed nurse has accepted the role of supervising the medical assistant. If the licensed nurse does not feel that she/he can safely supervise/delegate to the medical assistant than they need to communicate this. Remember that RSA 326-B:29 II states: *No person may coerce an RN or LPN into compromising client safety by requiring the nurse to delegate a nursing activity or task when the nurse determines that it is in appropriate to do so.*

If the licensed nurse agrees to supervise the medical assistant, than she/he must do so following the delegation requirements outlined in NUR 404. Remember:

Limitations on the Delegation of Nursing related activities.

(a) No delegation shall be made of any task of client care that is not within the competency of the delegating licensee.

(b) A RN or LPN shall not delegate any task of client care for which the delegatee does not have competency.

(c) A delegation of a task of client care involving the administration of medication shall specify:

(1) The medication to be administered;

**(2) The dosage, route and time of the medication to be administered;
and**

(3) The client to whom the medication is to be administered.

In closing I would like to give an example of an appropriate delegation to a medical assistant.

You are a licensed nurse working in a small, independent office setting. It has been the practice that when the physician is present the medical assistant performs telephone triage, including disposition of the patient.

You have been asked to assume the supervision of the medical assistant in the absence of the physician. As you have worked with this medical assistant and are aware of her competencies for certain tasks you accept the responsibility. You meet with her at the beginning of the shift and outline her work responsibilities for the day. When it comes to the issue of telephone triage you inform her that she is only to perform phone screening, which involves systematic collection of demographic data and documentation of a symptom list. She then is to report to you the outcome of the phone screening.

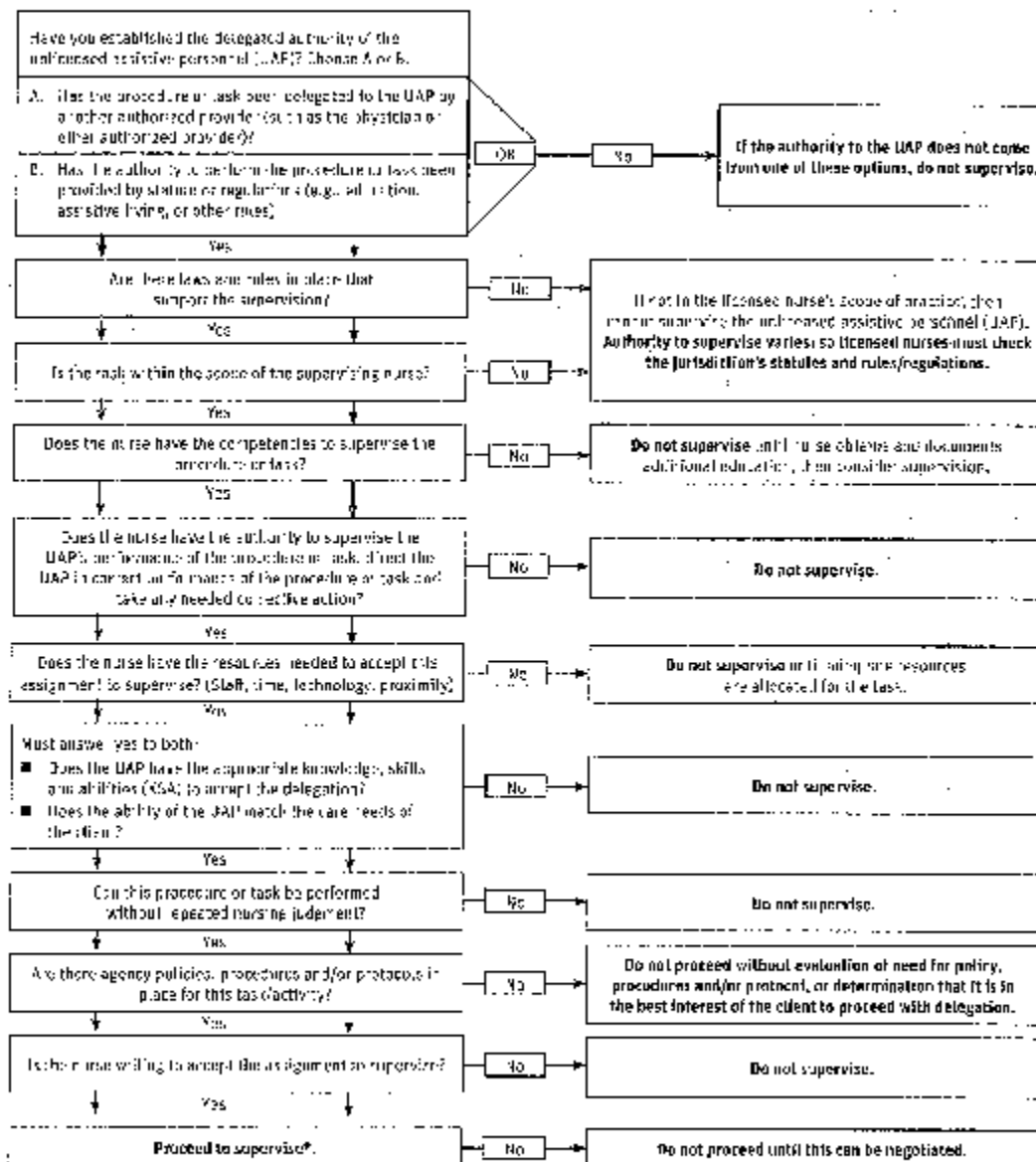
In the above example the circle of delegation was clear:

- the nurse accepted the responsibility of the medical assistant, based on prior knowledge of her competencies
- the nurse met with the medical assistant at the beginning of the shift and outlined the expectations for the tasks to be performed
- the nurse was clear with regard to the expectations surrounding telephone triage
- the nurse followed up with the medical assistant following the telephone triage

Delegation cannot occur in a vacuum. There must be communication, setting of expectations, and follow up on the part of the delegating licensee.

(Double click the image below to open a clean copy)

Decision Tree – Accepting Assignment to Supervise Unlicensed Assistive Personnel



16

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Clinical Advisory and Position Statement Overview

Overview

In response to questions raised at the 'Evening of Discussion' the MA Task Force developed a Clinical Advisory and Position Statement to guide licensed nurses in the supervision of and delegation to the medical assistant.

Task Force Process

The Task Force reviewed the following content areas before crafting the document:

1. Known practice issues of concern-from communications to the BON/NHNA on specific topics (such as anticoagulation management, triage, assisting with procedures, etc.)
2. Medical assistant professional organizations' statements on 'scope of practice'
3. Reviewed the NH Board of Medicine Position Paper on the 'Supervision of Medical Assistants' adopted on February 3, 2010. Important points from this paper included
<http://www.nh.gov/medicine/documents/medicalassistantsarticle.doc>
4. Educational preparation variation for medical assistants
5. Practice expectations within organizations (Policies and job descriptions from local healthcare organizations, hiring qualifications)
6. Orientation and Educational competencies for medical assistants by locale
7. Delegation issues for licensed nurses including the Administrative Rules NUR404

Important Points in the Clinical Advisory and Position Statement

1. Delegation-nurses must know the competencies of the MA to perform the delegated task, which should be documented and accessible in the practice setting.
2. The nurse can delegate any basic clinical activities if known competencies/skills but may vary widely in different practice settings

- Competencies Assessment-There are many ways to establish competencies within the workplace so the nurse should be familiar with them and know where the documentation exists before delegation can be done to a medical assistant. Here are recommended competency assessments:

Foundational Competency Evaluation Methods

- Job Description-knowledge of the foundational requirements for hiring into the MA role (e.g. graduation from an accredited MA Program, BLS authorization, previous experience, certification, etc.)
- Orientation-return demonstration of skills needed to perform in the MA role are evaluated and documented within an appropriate timeframe (suggested within 90 days). This is kept on file as a reference.
- Performance Evaluations-regular (at least annual) performance evaluations are done and also kept on file. Action plans are established for any area that may be deficient until successful attainment can be documented.
- New Skills/Techniques-these should have a knowledge and skill competency documented so the medical assistant understands the didactic and the psychomotor components for the new skill.
- Continuing Education-there should be an expectation for continuing education to maintain /advance knowledge and skill levels with documentation of successful completion

Additional Competency Evaluation Methods

- Other-the nurse can determine competencies **in addition** to the documented methods just outlined, using techniques including:
 - Accurate verbalization of a process indicating sufficient knowledge and abilities
 - Observed return skill demonstrations

3. The delegatory/supervisory role of the licensed nurse needs to be clearly communicated to all members of the healthcare team
 - The nurse should not become the assumed supervisor of the medical assistant in the absence of a manager and/or physician in the office. It should be clear in the job description of any supervisory role and the reporting structure.
4. Exceptions to Delegations Outlined in the Position Paper
 - Medication Administration-
 - Controlled substance administration
 - Med calculations should be double-checked with the licensed nurse
 - IV Medications
 - IV Insertion
 - IV Therapy-Peripheral or Central Line
 - Suture removal if other than a simple incision/superficial laceration
 - Telephone Triage involving assessment and disposition (telephone screening /data collection and symptom documentation is fine to delegate)
 - ** Modified the 2001 Emergency Nurses Association definition of triage and the NUR404.06 (b) 2&3 regarding the patient stability and changing nursing needs considered when delegating.

Clinical Practice Advisory

New Hampshire Nurses Association

Position Statement

New Hampshire Nurses' Association

Relative to the Role of the Licensee with regard to supervision and delegation to the Medical Assistant

Introduction: The NH Board of Nursing recognizes that licensed nurses partner with healthcare providers in many diverse roles in order to meet the needs of the patients across the continuum of settings.

In contrast to nurses, Medical Assistants (MAs) do not hold license to practice and are therefore not regulated by the state of NH or any other entity.

As an integral role in the office practice setting the Medical Assistant (MA) presents a unique challenge to the licensed nurse. While many MAs have received structured formal education, the role is unregulated and therefore open to individuals with widely varying backgrounds and education.

The following parameters established by the NH Board of Nursing are intended to guide the licensed nurse in his/her supervision of and delegation to the MA.

Accountability and Responsibility: Prior to any act of delegation to an MA, the licensed nurse following the Administrative Rules of NUR 404, must determine the competency of the MA to perform the delegated task.

With the exceptions listed below, the licensed nurse can delegate any basic clinical activities in which the MA has demonstrated competency and skills.

Formal structured education, with recognized certification, is a preferred element in the determination of competency of the MA. In the absence of documented competencies for tasks and screenings, sample competencies are attached. (Appendix 1)

Licensees are advised to ensure documentation of appropriate competencies is accessible in the practice setting. The licensee needs to ensure that expectations and assumptions regarding his/her supervisory/delegatory role are clearly communicated to all members of the health care team.

Delegation of tasks and screenings appropriated for delegation to the MA may vary widely depending on the practice setting. Therefore this document addresses those tasks and screenings by exception as follows:

Medication Administration; Medication administration, with the exception of narcotics, may be delegated provided that:

- The competency requirement of NUR 404 has been met and documented
- Evidence of formal structured pharmacology education is preferred but not required
- Any non unit dose medication requiring calculation must be double checked with the licensee prior to

administration

IV medication administration may not be delegated

Narcotic administration may not be delegated

Suture Removal: Suture removal may only be delegated when:

- Suture removal is from a simple incision or superficial laceration

IV therapy:

Licensees may not delegate any element of IV insertion or IV therapy including but not limited to central venous access

Triage/Phone screening:

The NH BON accepts the revised following modified 2001 Emergency Nurses Association Position Statement defining telephone triage:

Triage is commonly defined as the sorting of patients and prioritizing of care based on the degree of urgency and complexity of patient conditions. Telephone triage is the practice of performing a verbal interview and making a telephonic assessment with regard to the health status of the caller. As the caller may not accurately describe symptoms, and/or may not accurately perceive or communicate the urgency of the situation or condition prompting the call, nurses who perform these functions must have specific educational preparation, as the consequences of inadequate triage can be devastating.

Nur 404..06 (b) 2&3 states that:

In exercising such discretion in delegation as is permitted by Nur 404, a licensee intending to delegate a task of client care shall take into account:

- (2). Whether the client is stable; and**
- (3) Whether the client's nursing needs are currently changing**

Therefore, telephone triage, which involves assessment and disposition, may not be delegated by a licensee to an MA. The function that may be delegated is phone screening, which involves systematic collection of demographic data and documentation of a symptom list.

SAMPLE JOB DESCRIPTION

TITLE: Medical Assistant I

PRIMARY PURPOSE

Assists providers in the administration of patient care in assigned clinical areas. Assists with patient examinations, procedures, diagnostic studies, treatment, and dressing changes. Performs general administrative duties in accordance with JCAHO, CLIA, NCQA and government standards, as well as company policies and procedures.

DUTIES AND RESPONSIBILITIES

Under the direct supervision of the Office Manager and the clinical guidance of the Clinical Manager, and within established policies and procedures, the incumbent performs the following functions:

Essential Functions:

1. Reviews charts prior to patients' scheduled appointment to assure that all requested lab work and diagnostic procedures have been completed and that reports have been returned and are accessible to the provider.
2. Reviews charts for current medications, treatments, height, weight and problem list.
3. Obtains and records patient vital signs, temperature, pulse, height, weight and blood pressure and reason for visit.
4. Directs patients to examination rooms; assists in preparing patients for examination; assists patients in undressing, dressing and getting on and off of the examination table. Notifies provider of patient's arrival and readiness for their examination.
5. Assists providers with patient examinations and procedures, including (but not limited to) surgical procedures, GYN exams, diagnostic studies, and treatments. Operates and monitors functioning of equipment; hands instruments to the provider; assists with suctioning and holds patients; comforts patients.
6. Recognizes emergency situations, seeks assistance and intervenes appropriately. Monitors patient during and following procedures; looks for reactions and other visible complications; reacts to emergency situations; notifies the appropriate person in the event of a medical emergency.
7. Applies and removes dressings under the direction of the provider.
8. Conducts hearing, vision, breathing and EKG testing; records results in chart using calculations to determine medication dosage.
9. Administers medications orally, rectally and by injection.
10. Performs venipuncture, collects urine specimens, checks urine. Handles all specimens using Universal Precautions.
11. Completes laboratory forms. Processes laboratory samples and ships to reference labs.
12. Interacts with patients regarding clinical complaints for effective and immediate response and resolution. Refers to Practice Manager as appropriate.

13. Participates in quality assurance activities and all training seminars (OSHA and others).
14. Assists in orientation of new employees in the absence of an RN or LPN, shares pertinent information and teaches others to perform tasks.
15. Interacts and communicates professionally with co-workers.
16. Takes messages and assists providers with return phone calls to patients and pharmacies.
17. Calls in prescriptions with physician approval using the guidelines.
18. Schedules and carries out appointments for patients requiring blood pressure checks, throat cultures, individualized teaching, as prescribed by the provider.
19. Secures patient signature on consent forms for immunizations and invasive procedures.
20. Screens providers' calls and utilizes assessment skills to evaluate patient's chief complaint; determines urgency of the problem; consults with provider regarding treatment and advises patient accordingly.
21. Acts as liaison between providers and other departments, agencies and pharmaceutical representatives.
22. Identifies patient and family needs and communicates with provider
23. Maintains patient confidentiality at all times.
24. Sets up instrument trays for procedures, including sterile procedures.
25. Cleans, wraps and sterilizes instruments after procedures as appropriate to the specific procedure. Takes wrapped instruments to sterile processing, as appropriate within the practice.
26. Assists with admission of patients to the hospital, as needed.
27. Orders all medical supplies, places service calls for and performs maintenance on all medical equipment.
28. Coordinates information with external laboratory and drug representatives.
29. Maintains quality control for all medications.
30. Keeps nursing area and exam rooms stocked, clean and orderly.
31. Maintains stock of health information pamphlets; provides pamphlets to patients. Directs patients to proper sources of information.
32. Documents care actions and patient responses.
33. Organizes and prioritizes care with some assistance
34. Utilizes appropriate resources to guide practice.

35. Cross trains as Patient Service Representative as needed.

Secondary Functions

1. Participates in appropriate role in disasters, fire drills, fires and other emergency situations.
2. Exercises care in the operation and use of equipment and reference materials. Performs routine cleaning and preventative maintenance to ensure continued functioning of equipment. Maintains work areas in a clean, safe and organized manner.
3. Performs similar or related duties as requested or directed.

KNOWLEDGE, SKILLS AND ABILITIES

Individuals must possess the knowledge, skills and abilities listed or be able to explain and demonstrate that the individual can perform the essential functions of the job, with or without reasonable accommodation, using some other combination of skills and abilities and possess the necessary physical requirements with or without the aid of mechanical devices to safely perform the essential functions of the job.

1. Ability to deliver patient care in a manner that is appropriate to the patient's age, physical ability and intellectual development. Must be able to demonstrate proficiency in assessing treatment and responses and adapting care to meet the needs of the population served; pediatric practices: pediatric and adolescent patients, family practices: pediatric, adolescent, adult and geriatric patients, internal medicine practices: adult and geriatric patients.
2. Physical requirements include ability to bend body downward and forward by bending spine at the waist; bend legs at knee to come to rest on knee or knees; bend the body downward and forward by bending leg and spine; extend hand(s) and arm(s) in any direction; stand for sustained periods of time; move about on foot to accomplish tasks; use upper extremities to exert force in order to thrust forward, downward, or outward; use upper extremities to exert force in order to draw, drag, haul or tug objects in a sustained motion; raise objects from a lower to a higher position or move objects horizontally from position-to-position; pick, pinch, type or otherwise working with fingers and palm; perceive attributes of objects, such as size, shape, temperature or texture by touching with skin, particularly that of fingertips.
3. Ability to express or exchange ideas by means of the spoken word and/or written word. Essential functions include activities in which incumbent must convey detailed or important spoken instruction to patients, physicians, families and other employees, accurately, loudly or quietly.
4. Ability to receive detailed information through oral communication and to make fine discriminations in sound.

5. Ability to exert up to 50 pounds of force occasionally and/or up to 20 pounds of force frequently and/or constantly to lift, carry, push, pull or otherwise move objects.
6. Ability to wear safety glasses, gloves, gowns, masks and other safety equipment as necessary.
7. Visual acuity sufficient for work which deals largely with visual inspection involving small anatomic or physiologic details as well as the whole patient and sufficient for preparing and analyzing data and figures, accounting, transcription, computer terminal operation, extensive reading and visual inspection involving small parts/devices.
8. Ability to endure periods of heavy workload and stress.
9. Ability to work with frequent interruptions and respond appropriately to unexpected situations.
10. Requires the ability to perform repetitive or routine duties working from detailed instructions and under standard procedures. Requires making minor decisions.
11. Ability to communicate effectively and establish a cooperative, collaborative working environment.
12. Ability to accept constructive feedback and initiate appropriate actions to correct situations.
13. Ability to maintain good communications; ability to establish and maintain positive working relationships with employees, physicians, patients, families and the public.
14. Working knowledge of ICD-9 and CPT coding and insurance procedures.
15. Ability to work in an environment where latex may be present.
16. If applicable, ability to advance basic computer skills as the health system adds new systems or performs upgrades to existing systems.
17. Direct caregivers and certain others, involved in working with critical patient care equipment, sterile pharmaceutical preparation or food preparation, may not wear artificial nails.

OSHA RATING: 1

WORK SCHEDULE: Generally Monday through Friday, days. Occasional requirements to work evenings or weekends depending on the schedule of the practice to which the employee is assigned. Float to other Physician offices as needed.

QUALIFICATIONS:

Education: High School diploma or GED required. Graduate of an accredited Medical Assistant program preferred.

Experience: One year related work experience in a medical office preferred. LNA experience with 1-2 years work experience in medical office preferred. Related experience required.

Licensure/Certification: Must possess BLS authorization upon employment in position and maintain during employment.

SAMPLE JOB DESCRIPTION

JOB TITLE: Medical Assistant I (non-certified or non-registered Medical Assistant)

JOB CODE:

PAY GRADE:

OSHA LEVEL: I

DEPARTMENT: Various

REPORTS TO: Department Team Leader and/or Department Manager

SUMMARY:

Under general supervision from the Department Team Leader and/or Department Manager and direct clinical supervision of a medical provider, the Medical Assistant performs a variety of administrative and clinical tasks that promote optimum patient care and satisfaction while enhancing provider and department effectiveness.

RESPONSIBILITIES:

- *1. Manage the flow of patients and paperwork through the department by preparing the patient's electronic or paper medical record for his/her visit, completing health forms, researching and calling in prescription renewals per provider's written instructions, notifying patients of normal test results following provider review and sign off, greeting/discharging and assisting patients, and providing pre/post visit instructions per department/provider guidelines.

- *2. Prepare exam/treatment room, conduct brief interview per department/provider guidelines, obtain and document vital signs, perform and document basic screening /diagnostic measures and collect and process specimens according to department guidelines.

- *3. Assist and chaperone providers during examinations, procedures and treatments.

- *4. Perform and document clinical procedures per organization and department standards and guidelines.

- *5. Maintain the cleanliness and general appearance of work, examination, and treatment areas; clean, disinfect, sterilize, and maintain equipment and instruments following universal precautions, infection control, and hazardous waste removal practices.

- *6. Stock exam/treatment rooms, order equipment and supplies according to organization and department guidelines, and

maintain adequate quantities to meet departmental demands;
dispose of contaminated supplies and materials in the prescribed
manner.

- *7. Assist with answering telephones, taking messages, scheduling appointments, tests or procedures, arranging referrals, and performing other administrative duties to meet the needs of patients, co-workers and the department.
- *8. Perform skills and procedures outlined within organizational practice parameters for MA after documented demonstration of competency, as defined by organizational or departmental standards.
- *9. Recognize limitations and seek advice and direction from other appropriate clinical staff.
- *10. Demonstrate technical and interpersonal skills necessary to complete job responsibilities.
- *11. Acquire new knowledge and skills to remain current in practice.
- *12. Comply with the Standards of Performance and the general policies and procedures of the organization.
- 13. Willingly perform other duties as required or assigned.

*Essential function

MINIMUM EDUCATION AND EXPERIENCE:

Graduate of an accredited Medical Assistant Program, AAMA certified or eligible to sit for the AAMA National Certification Exam.

or

Graduate of a Medical Assistant Program, AMT registered or eligible to sit for the AMT National Registration Exam.

Previous experience in office or out patient ambulatory care setting strongly preferred. Strong communication, organizational and interpersonal skills. Demonstrated ability to work well as a member of a team. Computer skills strongly preferred. Must be willing and able to participate in evening, weekend, and holiday coverage according to needs of the department.

Current CPR certification required.

PSYCHOLOGICAL CONSIDERATIONS:

Flexibility and tolerance to handle multiple demands and priorities.

SUMMARY OF PHYSICAL DEMANDS:

Daily demands may vary dependent on specific duties performed. Up to 75% to 100% of a day may be spent standing/ambulating. Up to 30% to 40% of day may be spent working in a repetitive motion activity including use of computer and keyboard to access and input information.

Must be able to effectively communicate in person and over the telephone. Visual and auditory skills essential to perform patient assessment duties. Fine motor control may be important to perform injections or other procedures. May bend, stoop, or reach to retrieve materials or supplies, push or pull up to 60 pounds, and assist in lifting patients. Must be able to respond to emergency situations. Some travel may be necessary to attend meetings or training.

SAMPLE JOB DESCRIPTION

TITLE: Medical Assistant II

PRIMARY PURPOSE

Assists providers in the administration of patient care in assigned clinical areas. Assists with patient examinations, procedures, diagnostic studies, treatment, and dressing changes.

Performs general administrative duties in accordance with JCAHO, CLIA, NCQA and government standards, as well as company policies and procedures.

DUTIES AND RESPONSIBILITIES

Under the direct supervision of the Office Manager and the clinical guidance of the Clinical Manager, and within established policies and procedures, the incumbent performs the following functions:

Essential Functions:

1. Performs all essential functions of Medical Assistant I Job Description
2. Performs all office procedures with minimal assistance. Documents comprehensive patient information, care actions and patient responses with accuracy. Promotes organized care and office workflow. Utilizes and maintains office equipment safely and appropriately. Promotes efficient workflow in office. Uses and maintains appropriate resources to guide practice. Evaluates equipment and manages resources appropriately
3. Implements advanced care interventions and procedures safely for increasingly complex patients under the guidance of a licensed practical nurse, registered nurse or provider. Effectively prioritizes tasks to promote quality and safe patient care. Provides advanced comfort interventions using competent care actions and assessment tools. Performs direct and indirect provider support as assigned with minimal guidance. Participates in decisions for patient care
4. Provides quality patient/family-learning experiences based on identified needs or projected needs as directed by the provider.
5. Acts as a resource person for safety care competencies and educational offerings. Uses knowledge and skills to manage varied patient situations. Mentors colleagues to use EMR functions more efficiently. Contributes to the overall work assignments equitably. Coordinates care with other disciplines. Acts as a preceptor and mentor to new clinical staff. Utilizes efficient and effective communication methods to share clinical care with care providers across disciplines or immediate work setting. Documents with evidence of advanced clinical and technical competence
6. Shares clinical expertise with colleagues. Implements patient satisfaction improvement processes. Demonstrates care and concern for patients and families. Establishes trust and respect for patients and families. Promotes care and concern for colleagues. Promotes confidentiality in all patient-related matters. Anticipates patient/family needs. Recognizes individual differences and incorporates into the plan of care. Utilizes the roles and responsibilities of all the intra-office team members efficiently and effectively. Promotes positive relationships among coworkers. Promotes cooperative teamwork within the entire practice network. Contributes to a positive work environment. Promotes team communication. Manages resource needs. Utilizes resources appropriately and efficiently
7. Exceeds minimal continuing education per requirements
8. Maintains certification as a medical assistant or has demonstrated advanced knowledge/skills in the specialty for at least two years

9. Participates in some quality management initiatives. Contributes positively to the overall patient satisfaction scores. Maintains, documents and evaluates quality control testing. Provides feedback to management with recommendations for changes. Seeks methods to improve communication with patients/family members

Secondary Functions

1. Participates in appropriate role in disasters, fire drills, fires and other emergency situations. Participates in emergency situations and intervenes with clinical competence. Complies with and promotes safety and emergency procedures
2. Exercises care in the operation and use of equipment and reference materials. Performs routine cleaning and preventative maintenance to ensure continued functioning of equipment. Maintains work areas in a clean, safe and organized manner.
3. Performs similar or related duties as requested or directed.
4. Cross trains as Patient Service Representative as needed.

KNOWLEDGE, SKILLS AND ABILITIES

Individuals must possess the knowledge, skills and abilities listed or be able to explain and demonstrate that the individual can perform the essential functions of the job, with or without reasonable accommodation, using some other combination of skills and abilities and possess the necessary physical requirements with or without the aid of mechanical devices to safely perform the essential functions of the job.

1. Ability to deliver patient care in a manner that is appropriate to the patient's age, physical ability and intellectual development. Must be able to demonstrate proficiency in assessing treatment and responses and adapting care to meet the needs of the population served; pediatric practices: pediatric and adolescent patients, family practices: pediatric, adolescent, adult and geriatric patients, internal medicine practices: adult and geriatric patients.
2. Physical requirements include ability to bend body downward and forward by bending spine at the waist; bend legs at knee to come to rest on knee or knees; bend the body downward and forward by bending leg and spine; extend hand(s) and arm(s) in any direction; stand for sustained periods of time; move about on foot to accomplish tasks; use upper extremities to exert force in order to thrust forward, downward, or outward; use upper extremities to exert force in order to draw, drag, haul or tug objects in a sustained motion; raise objects from a lower to a higher position or move objects horizontally from position-to-position; pick, pinch, type or otherwise working with fingers and palm; perceive attributes of objects, such as size, shape, temperature or texture by touching with skin, particularly that of fingertips.
3. Knowledge of advanced EMR features to document care.

4. Knowledge of other EMR applications competently.
5. Ability to express or exchange ideas by means of the spoken word and/or written word. Essential functions include activities in which incumbent must convey detailed or important spoken instruction to patients, physicians, families and other employees, accurately, loudly or quietly.
6. Ability to receive detailed information through oral communication and to make fine discriminations in sound.
7. Ability to exert up to 50 pounds of force occasionally and/or up to 20 pounds of force frequently and/or constantly to lift, carry, push, pull or otherwise move objects.
8. Ability to wear safety glasses, gloves, gowns, masks and other safety equipment as necessary.
9. Visual acuity sufficient for work which deals largely with visual inspection involving small anatomic or physiologic details as well as the whole patient and sufficient for preparing and analyzing data and figures, accounting, transcription, computer terminal operation, extensive reading and visual inspection involving small parts/devices.
10. Ability to endure periods of heavy workload and stress.
11. Ability to work with frequent interruptions and respond appropriately to unexpected situations.
12. Requires the ability to perform repetitive or routine duties working from detailed instructions and under standard procedures. Requires making minor decisions.
13. Ability to communicate effectively and establish a cooperative, collaborative working environment.
14. Ability to accept constructive feedback and initiate appropriate actions to correct situations.
15. Ability to maintain good communications; ability to establish and maintain positive working relationships with employees, physicians, patients, families and the public.
16. Ability to work in an environment where latex may be present.

17. If applicable, ability to advance basic computer skills as the health system adds new systems or performs upgrades to existing systems.

18. Direct caregivers and certain others, involved in working with critical patient care equipment, sterile pharmaceutical preparation or food preparation, may not wear artificial nails.

OSHA RATING: 1

WORK SCHEDULE: Generally Monday through Friday, days. Occasional requirements to work evenings or weekends depending on the schedule of the practice to which the employee is assigned. Float to other Physician offices as needed.

QUALIFICATIONS:

High School diploma or GED required. Graduate of an accredited Medical Assistant program preferred.

Minimum of 24 month's work experience as a Medical Assistant or 12 months of employment in physician practice network as a Medical Assistant. Demonstrates clinical expertise consistent with behaviors as outlined for a Medical Assistant II.

Certification (AAMT) or Registration (AMT) preferred. Must possess BLS authorization upon employment in position and maintain during employment.

SAMPLE JOB DESCRIPTION

JOB TITLE: Medical Assistant II (Certified or Registered Medical Assistant)

JOB CODE:

PAY GRADE:

OSHA LEVEL: I

DEPARTMENT: Various

REPORTS TO: Department Team Leader and/or Department Manager

SUMMARY:

Under general supervision from the Department Team Leader and/or Department Manager and direct clinical supervision of a medical provider, the Certified Medical Assistant (CMA) and Registered Medical Assistant (RMA) performs a variety of administrative and clinical tasks that promote optimum patient care and satisfaction while enhancing provider and department effectiveness.

RESPONSIBILITIES

- *1. Manage the flow of patients and paperwork through the department by preparing the patient's electronic or paper medical record for his/her visit, completing health forms, researching and calling in prescription renewals per provider's written instructions, notifying patients of normal test results following provider review and sign off, greeting/discharging and assisting patients, and providing pre/post visit instructions per department/provider guidelines.
- *2. Prepare exam/treatment room, conduct brief interview per department/provider guidelines, obtain and document vital signs, perform and document basic screening /diagnostic measures and collect and process specimens according to department guidelines.
- *3. Assist and chaperone providers during examinations, procedures and treatments.
- *4. Perform and document clinical procedures per organization and department standards and guidelines.
- *5. Maintain the cleanliness and general appearance of work, examination, and treatment areas; clean, disinfect, sterilize, and maintain equipment and instruments following universal precautions, infection control, and hazardous waste removal practices.
- *6. Stock exam/treatment rooms, order equipment and supplies according to organization and department guidelines, and maintain adequate quantities to meet departmental demands; dispose of contaminated supplies and materials in the prescribed manner.
- *7. Assist with answering telephones, taking messages, scheduling appointments, tests or procedures, arranging referrals, and performing other administrative duties to meet the needs of patients, co-workers and the department.
- *8. Perform skills and procedures outlined within organizational practice parameters for CMA/RMA after documented demonstration of competency, as defined by organizational or departmental standards.

- *9. Prepares and administers immunizations and medications per provider's written order upon successful completion of Medication Administration course and demonstrated competency. CMA/RMA may not administer blood products or controlled substances.
- *10. Recognize limitations and seek advice and direction from other appropriate clinical staff.
- *11. Demonstrate technical and interpersonal skills necessary to complete job responsibilities.
- *12. Acquire new knowledge and skills to remain current in practice.
- *13. Comply with the Standards of Performance and the general policies and procedures of the organization.
- 14. Willingly perform other duties as required or assigned.

*Essential function

MINIMUM EDUCATION AND EXPERIENCE:

Certified Medical Assistant or Registered Medical Assistant with current CPR certification. Accepted credentials from the American Association of Medical Assistants (AAMA) or the American Medical Technologist (AMT). One year of previous experience in office or out patient ambulatory care setting strongly preferred. Strong communication, organizational and interpersonal skills. Demonstrated ability to work well as a member of a team. Computer skills strongly preferred. Must be willing and able to participate in evening, weekend, and holiday coverage according to needs of the department.

PSYCHOLOGICAL CONSIDERATIONS:

Flexibility and tolerance to handle multiple demands and priorities.

SUMMARY OF PHYSICAL DEMANDS:

Daily demands may vary dependent on specific duties performed. Up to 75% to 100% of a day may be spent standing/ambulating. Up to 30% to 40% of day may be spent working in a repetitive motion activity including use of computer and keyboard to access and input information. Must be able to effectively communicate in person and over the telephone. Visual and auditory skills essential to perform patient assessment duties. Fine motor control may be important to perform injections or other procedures. May bend, stoop, or reach to retrieve materials or supplies, push or pull up to 60 pounds, and assist in lifting patients. Must be able to respond to emergency situations. Some travel may be necessary to attend meetings or training.

Sample Orientation Checklist

Medical Assistant I

Primary Care/Pedi

Name: _____ Dept: _____

Send completed checklist to Human Resources by: _____

Preceptor Name: _____

Manager Name: _____

Date orientation completed: _____

Divisional Orientation	Signature
Human Resources: Payroll/Benefits Time Sheets Dress Code Workplace Violence Division Organizational Structure Divisional Provider Staff Community/Resources	Verified by: _____ Date: _____
Employee Assistance Program	Verified by: _____ Date: _____
Facility Safety: Fire and Evacuation Plan Electrical Safety MSDS Bomb threat	Verified by: _____ Date: _____

Emergency Response Policy/Procedure AED OSHA Orientation Process	Verified by: _____ Date: _____
Department Role Performance Criteria	Preceptor's signature and date when completed
Management of patient flow within the dept.	Verified by: _____ Date: _____
Identification of patients with special needs and collaborates with coworkers to ensure proper assistance is available	Verified by: _____ Date: _____
Set up of exam room prior to patient arrival with appropriate equipment and supplies	Verified by: _____ Date: _____
Greeting and escorting patient/family to the appropriate room	Verified by: _____ Date: _____
Conducting brief interview to determine reason for visit\to obtain information\ Provider guidelines and prepare the patient for exam/procedure	Verified by: _____ Date: _____
Providing patient with any general pre/post procedure instructions per printed guidelines	Verified by: _____ Date: _____
Assisting and/or chaperoning Provider during exam or procedure	Verified by: _____ Date: _____
Assisting patient to dress and exit exam room after exam or procedure	Verified by: _____ Date: _____
Providing escort or wheelchair assistance as needed	Verified by: _____

	Date: _____
Performing the following duties per organizational/dept. guidelines: prepare patient chart, complete health forms, call in routine referrals and process paperwork, schedule appointments, tests or procedures, collect survey data, assist appointment secretaries with phone coverage and message taking	Verified by: _____ Date: _____
Stocking treatment and exam rooms; organizing supplies and equipment to facilitate Provider efficiency and multiple room use	Verified by: _____ Date: _____
Cleaning, maintaining, sterilizing and autoclaving instruments and equipment	Verified by: _____ Date: _____
Ensuring proper disposal of contaminated material	Verified by: _____ Date: _____
Infection control procedures and use of aseptic technique per organizational policy	Verified by: _____ Date: _____
Attends and participates in departmental/organizational meetings and committees	Verified by: _____ Date: _____
Demonstrates effective interpersonal and communication skills	Verified by: _____ Date: _____
Maintains positive and effective work relationships with provider, peers, manager and patients: actively participate in problem solving and conflict resolution	Verified by: _____ Date: _____
Plan and organize work in a way that ensure efficiency in use of materials and staffing resources in a cost effective manner	Verified by: _____ Date: _____
Assumes responsibility for reading posted or circulated information to stay current on departmental/organizational changes and initiatives	Verified by: _____ Date: _____

Arrive to department at assigned start time, maintains satisfactory attendance, flexible with staffing needs.	Verified by: _____ Date: _____
Provide a clean, safe environment for patients, colleagues and public following organizational, OSHA requirements	Verified by: _____ Date: _____
Insurance 101/Pre-cert/Referral	Verified by: _____ Date: _____
Centricity	Verified by: _____ Date: _____
Documentation	Verified by: _____ Date: _____
Work List Process	Verified by: _____ Date: _____
Booking guidelines	Verified by: _____ Date: _____
Emergency Protocols Hot Phone	Verified by: _____ Date: _____
Prescription refills	Verified by: _____ Date: _____
Lab/Radiology Process	Verified by: _____ Date: _____
Blue slips	Verified by: _____ Date: _____
Encounter forms	Verified by: _____ Date: _____

Patient visit work sheet	Verified by: _____ Date: _____
Waivers	Verified by: _____ Date: _____
Vital signs	Verified by: _____ Date: _____
EKGs	Verified by: _____ Date: _____
Audiometry testing	Verified by: _____ Date: _____
Spirometry testing	Verified by: _____ Date: _____
CLIA	Verified by: _____ Date: _____

Employee Signature: _____

Preceptor Signature: _____

Manager Signature: _____

*All clinical competencies per current edition of Keir, Wise, Krebs’
“Medical Assisting – Administrative and Clinical Competencies”

Sample Orientation Checklist

Medical Assistant II

Primary Care/Pedi

Name: _____ Dept: _____

Send completed checklist to Human Resources by: _____

Preceptor Name: _____

Manager Name: _____

Date orientation completed: _____

Divisional Orientation	Signature
Human Resources: Payroll/Benefits Time Sheets Dress Code Workplace Violence Division Organizational Structure Divisional Provider Staff Community/Resources	Verified by: _____ Date: _____
Employee Assistance Program	Verified by: _____ Date: _____
Facility Safety: Fire and Evacuation Plan Electrical Safety	Verified by: _____ Date: _____

MSDS Bomb threat	
Emergency Response Policy/Procedure AED OSHA Orientation Process	Verified by: _____ Date: _____
Department Role Performance Criteria	Preceptor's signature and date when completed
Management of patient flow within the dept.	Verified by: _____ Date: _____
Identification of patients with special needs and collaborates with coworkers to ensure proper assistance is available	Verified by: _____ Date: _____
Set up of exam room prior to patient arrival with appropriate equipment and supplies	Verified by: _____ Date: _____
Greeting and escorting patient/family to the appropriate room	Verified by: _____ Date: _____
Conducting brief interview to determine reason for visit\to obtain information\ Provider guidelines and prepare the patient for exam/procedure	Verified by: _____ Date: _____
Providing patient with any general pre/post procedure instructions per printed guidelines	Verified by: _____ Date: _____
Assisting and/or chaperoning Provider during exam or procedure	Verified by: _____ Date: _____
Assisting patient to dress and exit exam room after exam or procedure	Verified by: _____

	Date: _____
Providing escort or wheelchair assistance as needed	Verified by: _____ Date: _____
Performing the following duties per organizational/dept. guidelines: prepare patient chart, complete health forms, call in routine referrals and process paperwork, schedule appointments, tests or procedures, collect survey data, assist appointment secretaries with phone coverage and message taking	Verified by: _____ Date: _____
Stocking treatment and exam rooms; organizing supplies and equipment to facilitate Provider efficiency and multiple room use	Verified by: _____ Date: _____
Cleaning, maintaining, sterilizing and autoclaving instruments and equipment	Verified by: _____ Date: _____
Ensuring proper disposal of contaminated material	Verified by: _____ Date: _____
Infection control procedures and use of aseptic technique per organizational policy	Verified by: _____ Date: _____
Attends and participates in departmental/organizational meetings and committees	Verified by: _____ Date: _____
Demonstrates effective interpersonal and communication skills	Verified by: _____ Date: _____
Maintains positive and effective work relationships with provider, peers, manager and patients: actively participate in problem solving and conflict resolution	Verified by: _____ Date: _____
Plan and organize work in a way that ensure efficiency in use of materials and staffing resources in a cost effective manner	Verified by: _____ Date: _____

Assumes responsibility for reading posted or circulated information to stay current on departmental/organizational changes and initiatives	Verified by: _____ Date: _____
Arrive to department at assigned start time, maintains satisfactory attendance, flexible with staffing needs.	Verified by: _____ Date: _____
Provide a clean, safe environment for patients, colleagues and public following organizational, OSHA requirements	Verified by: _____ Date: _____
Insurance 101/Pre-cert/Referral	Verified by: _____ Date: _____
Centricity	Verified by: _____ Date: _____
Documentation	Verified by: _____ Date: _____
Work List Process	Verified by: _____ Date: _____
Booking guidelines	Verified by: _____ Date: _____
Emergency Protocols Hot Phone	Verified by: _____ Date: _____
Prescription refills	Verified by: _____ Date: _____
Lab/Radiology Process	Verified by: _____ Date: _____
Blue slips	Verified by: _____ Date: _____

Encounter forms	Verified by: _____ Date: _____
Patient visit work sheet	Verified by: _____ Date: _____
Waivers	Verified by: _____ Date: _____
EKGs	Verified by: _____ Date: _____
Immunizations: Adults Pediatric	Verified by: _____ Date: _____
Vital signs	Verified by: _____ Date: _____
Specimen collections	Verified by: _____ Date: _____
General Medication Administration: Topical	Verified by: _____ Date: _____
Dressings	Verified by: _____ Date: _____
Immunization Exam	Verified by: _____ Date: _____
Respiratory Assessment and support O2 Nebulizer tx SATs Spirometry	Verified by: _____ Date: _____

RSV Collections/Pertussis	Verified by: _____ Date: _____
Staple Removal	Verified by: _____ Date: _____
Splinting	Verified by: _____ Date: _____
Crutch Walking	Verified by: _____ Date: _____
Hearing and Visual Testing/DOT requirements	Verified by: _____ Date: _____
Waivers	Verified by: _____ Date: _____
CLIA	Verified by: _____ Date: _____
Pharmacology Exam	Verified by: _____ Date: _____

Employee Signature: _____

Preceptor Signature: _____

Manager Signature: _____

*All clinical competencies per current edition of Keir, Wise, Krebs’
“Medical Assisting – Administrative and Clinical Competencies”

Self-Assessment Tool

Medical Assistant

Name: _____

Dept.: _____

Skill	Excellent	Good	Fair	Poor	None	Comments
Physical Assessment: vital signs, height, weight, pulse oximetry						
Medical Terminology and appropriate medical abbreviations						
Computer skills: key board, mouse, Word, Internet						
Sterile Technique: Opening sterile packages, donning sterile gloves, maintaining a sterile field, dressing change						
Use of autoclave, cleaning of surgical instruments, wrapping of instruments						
Suture removal						
Doing an EKGs						
O2 therapy: O2 tank, nasal cannula, mask, non-rebreather mask, spirometry						
Hearing/vision tests						
Topical medications (if certified)						
Injections: IM, SQ, SC, IMT(If certified)						
Immunizations (if certified)						
Specimen handling						

Skin preparation						
Crutch walking/splinting(if certified)						

Please rate your level of skill in each category. Indicate any area in which you feel a refresher is needed. If there is a skill you perform in your job not listed, please indicate it.

Return completed form to your department Manager by:

Please rate from 1 – 5 (5 being the best) way you learn. Please list barriers to your learning process, ie; ability to read, language, hearing impairment, etc...so we can best meet your needs.

Lecture ____ Video ____ Observation ____ Hands On ____ Reading ____

Self-Assessment Tool

Medical Assistant

OB/GYN

Name: _____

Dept.: _____

Please rate your level of skill in each category. Indicate any area in which you feel a refresher is needed. If there is a skill you perform in your job not listed, please indicate it.

Skill	Excellent	Good	Fair	Poor	None	Comments
Physical Assessment: vital signs, height, weight, pulse oximetry						
Medical Terminology and appropriate medical abbreviations						
Computer skills: key board, mouse, Word, Internet						
Sterile Technique: Opening sterile packages, donning sterile gloves, maintaining a sterile field, dressing change						
Suture removal						
LEEP procedure set up						
Colposcopy set up						
PAP smear set up						
Endo Biopsy set up						
Non-stress test						
Circumcision prep/set up						
Vulvular Biopsy procedure set up						

Obtaining and handling cultures						
Pessaries: setup/care of						
Suture Removal						
CPR certification						

Return completed form to your department Manager by:

Please rate from 1 – 5 (5 being the best) way you learn. Please list barriers to your learning process, ie; ability to read, language, hearing impairment, etc...so we can best meet your needs.

Lecture _____ Video _____ Observation _____ Hands On _____ Reading _____

Self-Assessment Tool

Medical Assistant Allergy Dept.

Name: _____

Dept.: _____

Skill	Excellent	Good	Fair	Poor	None	Comments
Physical Assessment: vital signs, height, weight, pulse oximetry						
Medical Terminology and appropriate medical abbreviations						
Computer skills: key board, mouse, Word, Internet						
Sterile Technique: Opening sterile packages, donning sterile gloves, maintaining a sterile field, dressing change						
Inhalars						
Spacers for inhalars						
Nasal Sprays						
Peak flow meters						
Pulmonary function tests						
Nebulizer treatment						
Injections: IM, SQ, SC						
Medication administration/pharmacology						
Testing: Scratch, ID, Antibiotic, Prick, Venom,						

Anesthetic						
IMT injections						
Specimen handling						
Environmental Control Education						

Please rate your level of skill in each category. Indicate any area in which you feel a refresher is needed. If there is a skill you perform in your job not listed, please indicate it.

Return completed form to your department Manager by:

Please rate from 1 – 5 (5 being the best) way you learn. Please list barriers to your learning process, ie; ability to read, language, hearing impairment, etc...so we can best meet your needs.

Lecture _____ Video _____ Observation _____ Hands On _____ Reading _____

SAMPLE MEDICAL ASSISTANT SKILLS COMPETENCY CHECKLIST

Topic	Content	Reviewed	Demonstrated	Proficient	Comments
Staff	Staff /Provider Introductions				
Preceptor Assigned	Preceptor Introductions				Name of Primary Preceptor:
Training	Training Schedule Reviewed and Provided				
Clinical Safety	Perform Vaccine/Medication Refrigerator and Freezer Temperature Documentation				
	Perform Lab Refrigerator Temperature Documentation				
	Perform Nurse Call Bell Testing and Document on Appropriate Log				
	Locate Blood/Bodily Fluid PPE Kits and Demonstrate Use				
	Locate Liquid Nitrogen PPE and Demonstrate Use				
	Locate Emergency Kit and Review Contents				
	Locate Blood/Bodily Fluids Spill Kits and Demonstrate Use				
	Review Spill Kit (Formalin) Location and Use				
EMR	View DAR/Check-In/Check-Out Screens				
	EMR Schedule Screen/Status				
	Update Health Maintenance				
	Enter Reason for visit				
	Review and/or Update Allergies				
	Enter Vital signs				
	Review and/or Update Medication List				
	<i>Staff Messages:</i>				
	Results				
	Result Notes				
	Telephone Encounters				
	Letters				
	<i>Manage In Basket Functions;</i>				
	Telephone Encounters				
	Refill Encounters				

Topic	Content	Date Reviewed	Demonstrated	Proficient	Comments
	Addendums				
	CC Charts				
EMR	Perform Abstraction				
	Access and Demonstrate Use of Questionnaires				
	Document Multiple Vital Signs				
	<i>Demonstrate Other Computer Skills:</i>				
	Copy and Paste				
	Spell Check				
Clinical	Perform Room Disinfection				
	Perform Room Set-Up/ Supply Stocking				
	Demonstrate Rooming Criteria				
	Perform and Document Orthostatic BP's				
	<i>Immunization Administration:</i>				
	Administer SC Adult (16 y/o and older)				
	Administer SC Pediatric (under 16 y/o)				
	Administer IM Adult (16 y/o and older)				
	Administer IM Pediatric (under 16 y/o)				
	Document Immunizations				
	<i>Medication Administration :</i>				
	Administer SC Adult (16 y/o and older)				
	Administer SC Pediatric (under 16 y/o)				
	Administer IM Adult (16 y/o and older)				
	Administer IM Pediatric (under 16 y/o)				
	Document Medications				
	<i>Perform and Document the Following Nurse Visits:</i>				
	PPD Plant				
	PPD Read				
	BP Check				
	Wt Check				
	Suture Removal				
	Immunization Administration				
	Ear Wash				
Topic	Content	Date Reviewed	Demonstrated	Proficient	Comments

	<i>Perform and Document the Following:</i>				
	Phlebotomy				
	<i>Perform Back Office Patient Testing and Document Results and QC's:</i>				
	Urinalysis				
	Urine Pregnancy				
	Rapid Strep				
	Rapid Flu				
	Rapid RSV				
	Finger Stick Blood Sugar				
	DCA 2000 HgbA1c				
	PT/INR				
	Cholestech				
Medical Equipment	<i>Demonstrate Use of the Following:</i>				
	Adult Scale				
	Infant Scale				
	Wheelchair Scale				
	Nebulizer				
	Peak Flows				
	Hearing Test with Audiometer				
	Hearing Test with Audx				
	Hearing Test with MicroTymp				
	EKG Setup and Use				
	Spirometer				
	Other Practice Specific Equipment				Name of Equipment:
Laboratory Specimens	<i>Perform the Collection of the Following Specimens:</i>				
	Wound				
	Throat				
	Nasopharyngeal				
	Clean Catch Collection				
	Pathology Specimens				
Topic	Content	Date Reviewed	Demonstrated	Proficient	Comments

	Assist with Documentation of UP/Consents				
	Pap Smear Set - Up/Assist				
	Lesion Removal				
	Colposcopy				
	I&D				
	Other				Name of Procedure(s):
	Demonstrate Post Procedure Clean-Up				
	<i>Demonstrate the Following for Instrument Prep/Transportation to Sterile Prep Dept.:</i>				
	PPE (Location and Use)				
	Procedure for Cleaning				
	Procedure for Transfer				
	<i>Demonstrate the Following for On-Site Sterilization of Instruments:</i>				
	PPE (Location and Use)				
	Procedure for Cleaning/ Wrapping/Packaging				
	Spore Testing/Documentation of Results				
	Cleaning of Autoclave				
	Trouble Shooting				
Clinical Nurse Educator Review @ 30 Days	<i>Clinical Nurse Educator Will:</i>				
	Ensure Completion of Employee Dept./Practice Check-List				
	Discuss and Review NPSG and Quality				
	UP				
	Pain				
	Falls				
	Quality Measures				
	Diabetes Collaborative				
	Meaningful Use				
Topic		Date Reviewed	Demonstrated	Proficient	Comments

Clinical Nurse Educator Review @ 90 Days	Ensure That Orientee is able to describe and/or demonstrate role in Code Blue Situations				
	Review Sample Policy				
	Review Refill Guidelines				
	Review Interpreter Services Available and Access				
	Dicuss Professional Development (CAP)				
	Review Survey Monkey Clinical Orientation Evaluation Tool and Provide Link				
	Completion of Healthstream Modules				
	Completion of PPD Education Module				
	<i>Review the Following Resources:</i>				
	Policies and Procedures				
	Infection Control				
	Classes				
	Safety Page				
	Quiz Central/Healthstream				
	Look-Alike-Sound-Alike (LASA) List				
	Anticoagulation Page				
	Up-To-Date				
	Lexicomp				
Comments:					
Preceptor Signature: _____					
Orientee Signature: _____					
Office Manager Signature: _____					

