

EIGHTH EDITION

# MEDICAL ASSISTING

Administrative & Clinical Competencies



**Michelle Blesi**



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# MEDICAL ASSISTING

**Administrative & Clinical Competencies**



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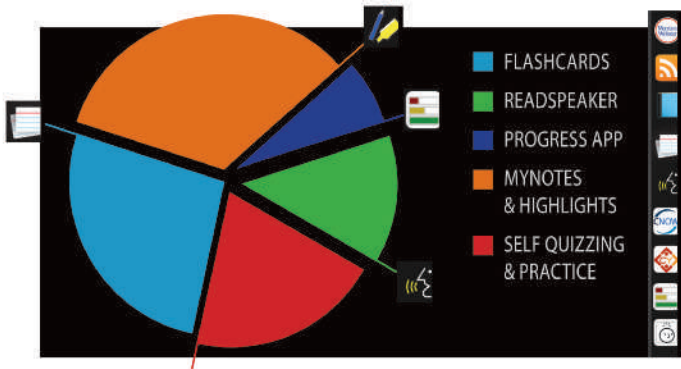
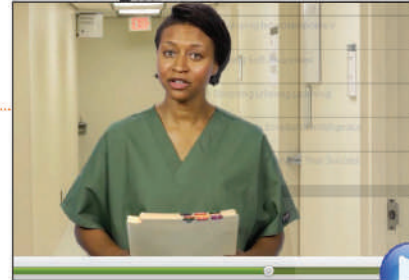
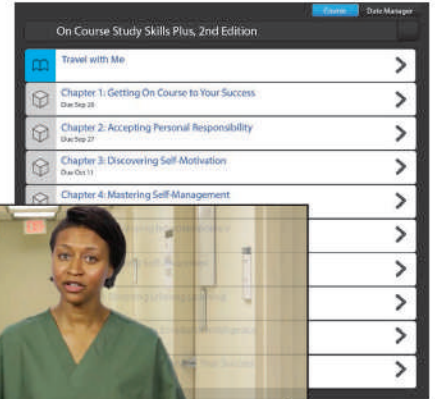
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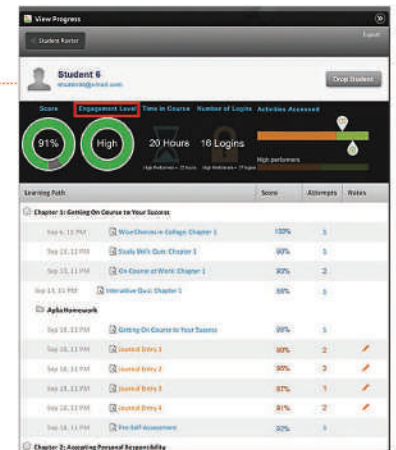


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EIGHTH EDITION

# MEDICAL ASSISTING

Administrative & Clinical Competencies



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# PREFACE

*Medical Assisting: Administrative and Clinical Competencies, Eighth Edition* is a proven, competency-based learning system with a 30-year history of success. It is written in an interesting, easy-to-understand format and covers the knowledge, skills, behaviors, and values necessary to prepare you to become a thriving, multiskilled medical assistant. It can be used in a variety of settings:

- For a structured classroom setting, with the expertise of a qualified instructor
- For individualized instruction of learning in programs of diversified training because much of the content and format are appropriate for self-study
- For on-the-job training in a provider's office, where the learning package serves as a supplement to employee instruction and as a resource manual
- For review by medical assistants who wish to prepare for the certification exam

Information is presented in five major sections: foundational knowledge, anatomy and physiology, front office tasks, back office tasks, and preparing for employment. These sections are further divided into 19 units with 59 chapters.

## How the Text Is Organized

The entire learning system—which includes a variety of print and digital components for all learner types—is designed to be an interactive guide as you embark on a career in medical assisting. The eighth edition has been revised and updated to make it even more accessible, logical, and innovative for today's dynamic health care environment:

- *Chapters and Content:* Major reorganization of units and chapters to streamline material; new chapters on The Physical Exam (Chapter 38), Specialty Exams and Other Procedures (Chapter 39), Emergencies in the Medical Office and Community (Chapter 54), and Managing the Office (Chapter 59)
- *New Feature Elements:* Expanded and updated Clinical Pearls, Examples, Patient Education Boxes, and Study Tools
- *Skills and Procedures:* 40 new procedures
- *Today's Topics and Trends:* Some of the new topics include the Affordable Care Act, updated diseases and disorders, electronic health records, emergency preparedness in the community, ICD-10, and laboratory procedures. (A complete list of new topics follows in the next section.)

- *Procedure Layout:* Easily identify affective (behavior) curriculum standards through special icons; also includes procedure steps with side-by-side rationales, detailed instructions, and documentation examples
- *Chapter Objectives and Summaries:* Objectives are presented in categories of Knowledge Base, Skills, and Behavior; summaries are in bulleted formatting
- *Curriculum Correlations:* To meet the latest curriculum standards for medical assisting programmatic accreditation, mapping tools are included in text Procedures, Workbook Competency Checklists, and the Instructor's Manual.

## New Topics in the Eighth Edition

### Unit 1

- American Association of Medical Assistants (AAMA) Occupational Analysis
- American medical technologists, various tasks of the medical assistant
- Patient navigator
- Credentialing requirements
- Principles of self-boundaries
- Complementary and alternative medicine (CAM)

### Unit 2

- New placement of law and ethics chapters to come earlier in the text
- Liability, professional, and personal injury insurance
- New Procedure: Perform Compliance Reporting Based on Public Health Statutes
- New Procedure: Report an Illegal Activity in the Health Care Setting Following Proper Protocol
- Scope of practice and standards of care for medical assistants
- New Procedure: Locate a State's Legal Scope of Practice for Medical Assistants
- Health Insurance Portability and Accountability Act (HIPAA)
- New Procedure: Apply HIPAA Rules to Release of Patient Information
- Genetic Information Act of 2008 (GINA)
- Americans with Disabilities Act Amendments Act (ADAAA)
- Conflicts of interest compliance reporting
- New Procedure: Develop a Plan for Separation of Personal and Professional Ethics
- New Procedure: Demonstrate an Appropriate Response to Ethical Issues

**Unit 3**

- New placement of professional communication chapters to come earlier in the text
- Theories of Maslow, Erikson, and Kübler-Ross developmental stages of life
- Support for terminally ill patients
- Cultural, social, and ethnic diversity
- Coaching a patient as it relates to health maintenance, disease prevention, compliance with treatment plan, community resources, and adaptations relevant to individual patient needs
- New Procedure: Coach Patients Appropriately Considering Cultural Diversity, Developmental Life Stages, and Communication Barriers
- New Procedure: Coach Patients Regarding Health Maintenance, Disease Prevention, and Treatment Plans
- Assertive, aggressive, and passive behaviors
- Hereditary, cultural, and environmental influences on behavior

**Unit 4**

- New placement of medical terminology chapters to complement the anatomy and physiology chapters

**Unit 5**

- New placement of anatomy and physiology chapters to come earlier in the text
- Photos and illustrations updated throughout
- Many diseases and disorders added and treatments updated.

**Unit 6**

- New Procedure: Demonstrate Professional Telephone Techniques
- New Procedure: Document Telephone Messages Accurately
- New Procedure: Develop a Current List of Community Resources Related to Patients' Health Care Needs
- New Procedure: Facilitate Referrals to Community Resources in the Role of a Patient Navigator
- Coaching a patient as it relates to community resources
- Professionalism through written and verbal communications
- New Procedure: Compose Professional Correspondence Utilizing Electronic Technology
- Applications of electronic technology in professional communication
- New Procedure: Open the Office and Evaluate the Work Environment to Identify Unsafe Working Conditions

- New Procedure: Close the Office and Evaluate the Work Environment to Identify Unsafe Working Conditions
- Electronic medical records (EMR) and a practice management system

**Unit 7**

- New Procedure: Manage the Appointment Schedule Using Established Priorities
- New Procedure: Schedule a Patient Procedure
- New Procedure: Apply HIPAA Rules in Regard to Patient Privacy and Release of Information
- New Procedure: Create and Organize a Patient's Medical Record
- Health Information Technology for Economic and Clinical Health (HITECH) Act
- Meaningful use as it applies to EMR

**Unit 8**

- Private, federal, and state payers
- Patient financial obligations for services
- Patient-centered medical home
- ICD-10-CM
- Upcoding and downcoding
- New Procedure: Utilize Medical Necessity Guidelines

**Unit 9**

- New Procedure: Perform Accounts Receivable Procedures to Patient Accounts, Including Posting Charges, Payments, and Adjustments
- New Procedure: Inform a Patient of Financial Obligations for Services Rendered
- New Procedure: Process Insurance Claims
- New Procedure: Post Nonsufficient Funds (NSF) Checks and Collection Agency Payments Utilizing EMR and Practice Management Systems

**Unit 10**

- Security features contained in a check
- Types of payments: cash, check, credit card, and debit card

**Unit 11**

- New Procedure: Participate in a Mock Exposure Event with Documentation of Specific Steps
- Self-examination, disease management, and health promotion
- Centers for Disease Control (CDC) regulations
- Adaptations with patients with special needs
- Documentation guidelines

**Unit 12**

- New Procedure: Perform Audiometry Screening
- Various stages of pregnancy
- Tests and procedures performed during various pregnancy stages

**Unit 13**

- Safety data sheets (SDS)
- New Procedure: Complete an Incident Exposure Report Related to an Error in Patient Care
- New Procedure: Comply with Safety Signs, Symbols, and Labels
- New Procedure: Demonstrate Proper Use of Eye-wash Equipment
- Compliance reporting of unsafe activities, errors in patient care, and incident reports
- Safety signs, symbols, and labels
- Safety techniques that can be used in responding to accidental exposure
- Disposal of biological chemical materials
- Fire safety issues
- Medical office emergencies
- Centers for Disease Control (CDC) regulations
- CLIA-waived tests associated with common diseases
- Pinworm collection
- Ova and parasite specimens
- Microbiology
- Blood collection tubes

**Unit 14**

- Expansion on electrical impulses of the heart
- Digital computer-based electrocardiographs
- Pacemaker arrhythmias
- Stress tests
- Positron emission tomography (PET) scan
- Dosimeters
- Patient instructions for various radiographic exams

**Unit 15**

- New Procedure: Prepare a Sterile Field
- Tray setup for common surgical procedures
- Vasovagal syncope
- Cryosurgery
- Types of suture material

**Unit 16**

- Basic math computations
- Convert among measurement systems
- New Procedure: Calculate Proper Dosages of Medication for Administration
- Monitoring intravenous injections

**Unit 17**

- New Procedure: Perform First Aid Procedures for Syncope (Fainting Episode)
- New Procedure: Perform First Aid Procedures for Bleeding
- New Procedure: Perform First Aid Procedures for Seizures
- New Procedure: Perform First Aid Procedures for Shock
- Fundamental principles for evacuation of a health care setting
- New Procedure: Produce Up-to-Date Documentation of Provider/Professional Level CPR
- Critical elements of an emergency plan for response to a natural disaster or other emergency
- New Procedure: Perform First Aid Procedures for Fractures

**Unit 18**

- New Procedure: Instruct a Patient According to Special Dietary Needs
- ChooseMyPlate
- Dietary supplements
- Special dietary needs

**Unit 19**

- Fundamental writing skills
- Professional correspondence utilizing electronic technology
- Social media
- New Chapter Location: Managing the Office (Chapter 59)
- New Procedure: Conduct a Staff Meeting
- Leadership and management styles
- Conflict management
- Sexual harassment and the hostile work environment

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## About the Authors

Michelle Blesi is a Certified Medical Assistant with 14 years of industry experience, who worked in the family practice area for 10 years, emphasizing clinical and laboratory skills. She then changed her focus to leadership, working as a lead in the Nursing/Lab department and as a Clinical Manager. She has a diploma in Medical Assisting and is certified through the AAMA. She also has a bachelor's degree in psychology and a master's degree in community psychology, and completed the TES (Teacher Education Series) courses in spring 2005 at the University of Minnesota. Coursework included Introduction to Vocational Teaching, Course Development, Instructional Methods, Philosophy, and Student Training and Assessment. A Program Director and Unlimited Full Time Faculty member in the Medical Assistant Department at Century College since 2001, Michelle enjoys bringing her career experience into the classroom and making a difference in students' lives. In addition to being Program Director, she teaches both Clinical and Laboratory courses, a Medical Assistant Refresher Course through CECT, and Administrative Procedures for Medical Assistants, both traditional and online. Additionally, she is the practicum coordinator and oversees the clinical externships for the program. In addition to being the lead author for both the seventh and eighth editions of *Medical Assisting: Administrative and Clinical Competencies*, Michelle has contributed to many other Cengage projects including being the SME for the *Critical Thinking Challenge 3.0*, completing multiple reviewer projects and test bank completions. Amongst Michelle's accomplishments:

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Virginia Ferrari brings more than 25 years of administrative skills and hands-on application in practice management to her writing. In addition, she is a lead author of Cengage Learning's *The Paperless Medical Office: Using Harris CareTracker*, a contributing author for both the seventh and eighth editions of *Medical Assisting: Administrative and Clinical Competencies*, and the second edition of *Clinical Medical Assisting: A Professional, Field Smart Approach to the Workplace*. Virginia has been an adjunct faculty member at Solano Community College in the Career/Technical Education division, where she taught medical front office programs, including records management, medical coding, and small business courses. Prior to joining Solano Community College, she served as the manager of extended services for one of the fastest-growing physicians networks in the San Francisco Bay Area. In addition to overseeing the training, conversion, and implementation of electronic medical records, she served on the Best Practice Committee, Customer Satisfaction Committee, Pilot Project for Risk Adjust Coding, and Team Up for Health, a national collaborative for Diabetes Self-Management Education. Virginia holds dual undergraduate degrees in sociology and family and consumer studies, a master's degree in health administration, and certification from the National Healthcareer Association as a Certified Electronic Health Record Specialist (CEHRS).

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**–Cengage Authors: Michelle Blesi  
and Virginia Ferrari**

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but we made it through. Your confidence in me means everything. A special shout-out to my grandbaby Zaiden; when things get stressful, you brighten my day.

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**–Cengage Author: Michelle Blesi**

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**–Cengage Author: Virginia Ferrari**

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# SECTION 1

## Medical Assisting Foundations





# Unit 1

## HEALTH CARE ROLES AND RESPONSIBILITIES

### Chapter 1: The Medical Assistant

### Chapter 2: The Health Care Team and the Medical Environment, Past and Present

The health care industry is one of the oldest and most respected professions in the world. The field of medicine has been around for thousands of years, dating as far back as 3000 BC. Some scientists even suspect that medicinal properties were used far before the first documented findings.

Medical pioneers paved the way for today's engineers to create innovative technology and medications that cure and treat some of the most complex of diseases. Because of these innovations, our quality of life is much better, and the average life span has increased by several years.

The evolution and specialization of medicine has encouraged many health care specialties and subspecialties to emerge, even creating several tiers of practitioners to work in each area. Medical assisting not only continues to be one of the fastest-growing health care occupations today but is also among the most versatile careers.

Chapter 1 explores the skills and responsibilities of the medical assistant, examines behaviors necessary to be successful in the health care industry, and discusses various credentialing opportunities.

Chapter 2 looks at medical historians, who set the wheels in motion for the technology and pharmaceuticals we have today. It also discusses the providers, midlevel practitioners, and allied health professionals that comprise the health care team and investigates the various types of medical establishments in which these professionals work.

### CERTIFICATION CONNECTION

	Ch. 1	Ch. 2
<b>CMA (AAMA)</b>		
Professional Behavior	X	
Performing as a Team Member	X	X
Medical Assistant Scope of Practice	X	
Confidentiality	X	
Ethical Standards	X	
Health Care Rights and Responsibilities	X	X
<b>RMA (AMT)</b>		
Patient relations	X	
Interpersonal relations	X	X
Oral and written communication	X	
Medical law		X
Licensure, certification, and registration	X	X
Principles of medical ethics and ethical conduct	X	
Alternative therapies		X
<b>CMAS (AMT)</b>		
Professionalism	X	
Confidentiality	X	

# CHAPTER 1

## The Medical Assistant

### Objectives

In this chapter, you will learn the following:

#### **KB** Knowledge Base

1. Spell and define, using the glossary, all the Words to Know in this chapter.
2. Describe the role of the medical assistant.
3. List seven questions individuals should ask themselves before becoming a medical assistant.
4. List the general responsibilities and skills of the medical assistant.
5. Define patient navigator.
6. Describe the role of the medical assistant as a patient navigator.
7. Intervene on behalf of the patient regarding issues/concerns that may arise, for example, insurance policy information, medical bills, physician/provider orders, and so on.
8. Compare and contrast provider and medical assistant roles in terms of standard of care.
9. Define the principles of self-boundaries.
10. List the types of establishments in which medical assistants work.
11. Describe the current employment outlook for the medical assistant.
12. Describe behaviors that are necessary when working in a professional capacity.
13. Describe the ideal appearance of a medical assistant and factors that influence appearance.
14. List four basic goals of time management.
15. Describe items or situations that take priority when working in an administrative or clinical capacity.
16. List and describe professional organizations that certify or credential medical assistants.
17. Describe the medical assisting credentialing requirements and the process to obtain the credential and comprehend the importance of credentialing.

#### **S** Skills

1. Demonstrate professional behavior.

#### **B** Behavior

1. Demonstrate active listening skills.
2. Demonstrate empathy.
3. Demonstrate sensitivity to the message being delivered.
4. Demonstrate awareness of how an individual's appearance affects anticipated responses.
5. Demonstrate dependability, punctuality, and a positive work ethic.
6. Exhibit a positive attitude and a sense of responsibility.
7. Maintain confidentiality at all times.
8. Adapt to change.
9. Be courteous.
10. Demonstrate the principles of self-boundaries.

## Words to Know

accreditation	Certified Clinical Medical Assistant (CCMA)	innate	patient-centered medical home (PCMH)
Accrediting Bureau of Health Education Schools (ABHES)	Certified Medical Administrative Assistant (CMAA)	knowledge base	provider
administrative skills	Certified Medical Assistant, CMA (AAMA)	multi-provider clinic	Registered Medical Assistant, RMA (AMT)
advocate	clinical skills	National Center for Competency Testing (NCCT)	scope of practice
American Academy of Professional Coders (AAPC)	Commission on Accreditation of Allied Health Education Programs (CAAHEP)	National Certified Medical Assistant (NCMA)	scribe
American Association of Medical Assistants (AAMA)	confidential	National Certified Medical Office Assistant (NCMOA)	skills
American Medical Technologists (AMT)	empathetic	National Healthcareer Association (NHA)	solo practice
appearance	general skills	partnership	tactful
behaviors	generalist		team player
			time management
			urgent care center

## The Role of the Medical Assistant

The field of medical assisting is one of the most versatile allied health occupations in today's health care environment. A medical assistant will perform routine administrative and clinical tasks in a variety of offices and clinics of physicians, nurse practitioners, and other health care providers such as podiatrists and chiropractors. They are also employed in general medical and surgical hospitals including private and state facilities. The duties assumed by the medical assistant will vary according to the location, specialty, and type of practice or setting. The **medical assistant** is also a liaison between the doctor and the patient and is of vital importance to the success of the medical practice.

To become a successful medical assistant, you must acquire a specific **knowledge base** (theory) and **skills** (procedures) while also demonstrating specific **behaviors** (professional characteristics or attitudes). You will see these three bolded terms in the Objectives section at the beginnings of most of these chapters.

### Is Medical Assisting Right for You?

How do you know whether medical assisting is right for you? According to the **American Association of Medical Assistants (AAMA)**—a professional organization for medical assistants—if you can answer yes to the following questions, medical assisting is probably for you:

- Are you looking for a meaningful job?
- Do you like helping others (Figure 1–1)?
- Do you have an interest in health and medicine?
- Are you a “people person”?
- Are you good at multitasking—switching tasks throughout the workday?
- Do you like variety in your job?



**Figure 1–1:** The medical assistant assists the patient with a gown.

- Would you like to enter a career in an expanding field?
- The following sections describe some of the specific responsibilities of medical assistants.

### Knowledge, Skills, and Responsibilities of the Medical Assistant

As health care progresses, so do the knowledge, skills, and responsibilities of the medical assistant. The field of medical assisting is continuously evolving. In an effort to keep up with the changes, the AAMA routinely completes an occupational analysis, which identifies critical responsibilities performed by CMAs (AAMA). The most updated version of the analysis can be found on the AAMA website by accessing [www.aama-ntl.org](http://www.aama-ntl.org). The analysis is

used as a marketing tool and resource for CMA (AAMA) educators as well as CMAs working in the field. Although this analysis is performed specifically for members of the AAMA, the skills listed are applicable to all medical assistants across the spectrum. The data provided from this document is used for multiple purposes such as assisting the Continuing Education Board (CEB) and the Medical Assisting Education Review Board (MAERB) in updating their documents. Additionally it guides the Certifying Board (CB) in the development of the content outline of the CMA (AAMA) Certification/Recertification Exam, which is divided into three content areas. The areas are identified as general, administrative, and clinical. Mastery of the skills that fall under those categories prepares medical assisting students to be integral members of today's health care team. The American Medical Technologists website also supplies a document of various tasks that medical assistants perform that are considered by the AMT to be representative of the medical assisting job role. This document can be accessed at [www.americanmedtech.org](http://www.americanmedtech.org).

## General

Medical assistants must have wonderful communication skills and the ability to think critically and analyze information. The **general skills** of the medical assistant are necessary regardless of whether you are working in a clinical or administrative capacity and are included in the areas of psychology, communication, professionalism, medical law/regulatory guidelines, medical ethics, risk management, quality assurance and safety, and medical terminology. Some of the skills are highlighted and expanded on below:

- **Communication:** The medical assistant should take on the role of a communication liaison when working with patients. Being able to relate therapeutic and adaptive responses to diverse populations is critical. These skills are necessary to promote important exchanges of information between the **provider** (physician, nurse practitioner, or physician assistant) and the patient. Good interpersonal skills also promote positive interaction with coworkers, supervisors, and external associates that conduct business with the practice.
- **Medical law/regulatory guidelines and medical ethics:** These are concepts concerned with legal, ethical, and moral conduct in the execution of medical assisting duties. Understanding of the various laws and regulatory guidelines will help prevent unnecessary litigation and keep the medical assistant practicing within his or her scope of practice.
- **Professionalism:** Professional behavior such as displaying tact, diplomacy, courtesy, respect, and dignity are the utmost important skills of a medical assistant.

## PATIENT EDUCATION

Today's medical assistants are becoming more active in patient education by taking on the role of a health coach (Figure 1–2). Topics frequently covered with patients include disease prevention, health maintenance, and medication management. To be at the top of your game, always check with the provider before conducting these sessions to determine essential goals for the session. Start each session by allowing the patient or patient's family members to identify their goals as well for the session. Researching this information prior to the session enhances the learning process and aids in overall patient compliance.

Demonstrating responsibility in all aspects of the job and promoting integrity and honesty are also an integral part of this career. As a medical assistant you must display a professional image and be able to respond to criticism by reflecting on the feedback and creating a change for the betterment of you.

## Administrative

Performing **administrative skills** helps manage the business affairs of the practice and includes categories such as medical reception, patient navigator/advocate, medical business practices, establishing patient medical records, scheduling appointments and practice finances. Some of the skills listed under these categories are:

- Medical record preparation
- Demographic data review
- Providing resource information
- Office supply inventory
- Equipment maintenance
- Accounts receivable/payable, payment receipts; manage petty cash, CPT/ICD-CM coding, and insurance claims



**Figure 1–2:** The medical assistant acts as a health coach as she reviews important information within the patient brochure.

## Clinical

Performing **clinical skills**, which vary by state laws, is an extension of the provider's role of assessment, examination, diagnosis, and treatment. These are divided into several areas, which include anatomy and physiology, infection control, patient intake and documentation of care, patient preparation and assisting the provider, nutrition, collecting and processing specimens, diagnostic testing, pharmacology, and emergency management/basic first aid. Some skills from this category include:

- Application of principles of aseptic technique and infection control
- Performance of vital signs
- Performance of sterilization and minor surgery procedures
- Collection and processing of specimens
- Performance of lab tests (Figure 1–3)
- Performance of electrocardiograms (ECGs or EKGs)
- Administration of medications
- Performance of phlebotomy procedures
- Performance of patient screenings
- Preparation of patients for examinations, procedures, and treatments
- Response to emergencies

Many medical assistants work as **generalists**, meaning that they perform both clinical and administrative duties in addition to general responsibilities. Some medical assistants specialize in administrative procedures, whereas others prefer working in clinical positions exclusively.

### Clinical Pearl

The evolving role of the medical assistant has some practices utilizing them in the role of patient **advocate** or patient navigator. Under the provider's supervision, the patient advocate/navigator may conduct a preplanning visit with the patient prior to the office visit to assist with the visit agenda, obtain a basic history including medication use, and perform any needed tests that are due. During the visit with the provider, the advocate/navigator may document the provider's remarks or findings in the medical record, fill out documents, order laboratory tests and radiograph studies. Assisting with referrals, queuing electronic prescriptions for the provider to approve and send to the pharmacy, and assisting with procedures are also quite common. Upon completion of the visit, the advocate/navigator may seek to ensure that patients understand what took place during the visit and engage the patient in managing his or her health care to enhance the patient's experience with the visit. These role changes have been put in place to increase the quality and effectiveness of patient care.



**Figure 1–3:** In this figure, the medical assistant is performing one of the many lab tests medical assistants routinely perform.

## Boundaries of Medical Assistants

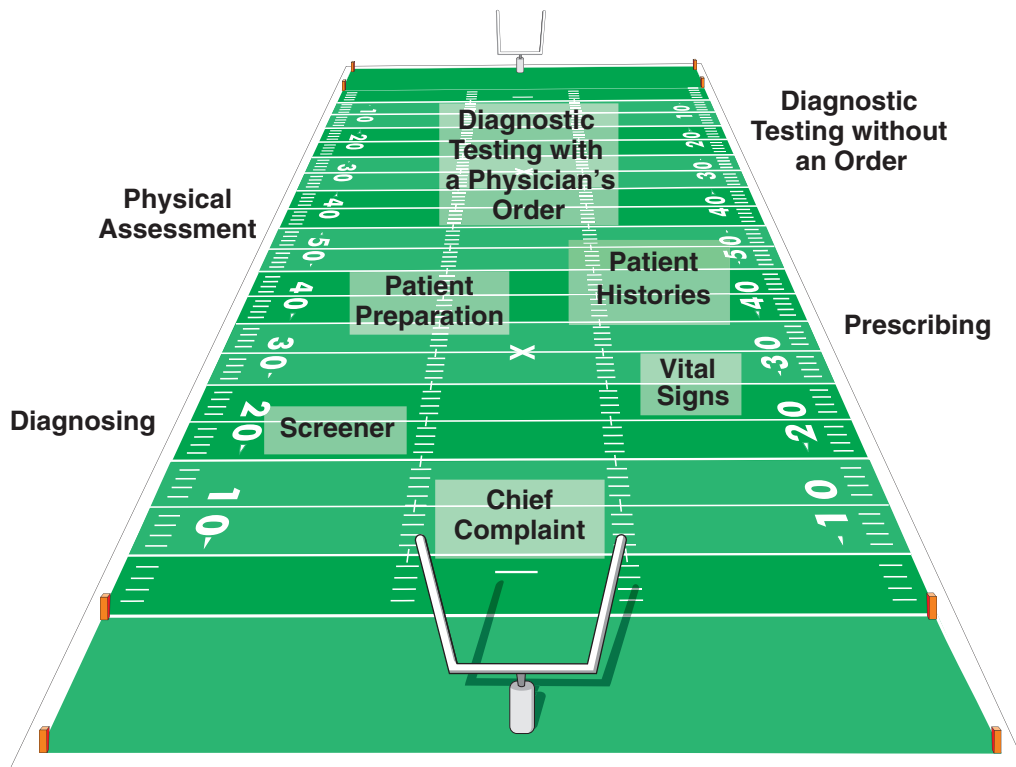
Medical assistants must know the principles of self-boundaries, or **scope of practice**, of the profession (Figure 1–4). In general, medical assistants cannot examine, diagnose, or prescribe treatment, but can perform duties mentioned earlier in the chapter. Each state has its own medical practice act that may dictate responsibilities such as what types of medications medical assistants can administer and whether additional credentialing is required to take radiographs. Be sure and check with your individual state guidelines if questions arise. Chapter 3 expands on the medical assistant's scope of practice.

## Medical Assistant Work Environment

Medical assistants work in a variety of settings, although the majority of them work in ambulatory care environments. Some of the types of practices in which medical assistants work include doctor offices, specialty practices, urgent care centers, clinics, hospitals, labs, insurance companies, billing companies, and government agencies. The actual business of practicing medicine in these organizations can be conducted in several ways.

### Solo Practices

Some providers prefer to have a **solo practice**, also called a sole proprietorship, meaning that the individual provider alone makes all decisions regarding the practice. Being employed as a medical assistant in this type of office may require you to have both administrative and clinical skills, which are essential for the smooth operation of that practice, especially if you are the only employee. This type of businesses is rare today because of the expenses involved in running a business.



**Figure 1–4:** This football field illustrates boundary lines for what a medical assistant can do. The out-of-bound markers illustrate what the medical assistant cannot do.

## Partnerships

In a **partnership**, two or more providers have a legal agreement to share in the total business operation of the practice. In this case, usually two or more medical assistants (or other members of the health care team) are employed to care for patients and conduct business.

## Multi-Provider Clinics

**Multi-provider clinics** are group practices, which consist of three or more providers who share a facility for the purpose of practicing medicine. In this type of practice, the providers share expenses, income, equipment, records, and personnel. Many times, these practices are owned by hospitals, management groups, or insurance companies. Usually, several professionals make up the health care team in this setting. Medical assistants, lab technicians, radiology technicians, nurses, physician assistants, and the physician work together in providing health care.

## Urgent Care Centers

**Urgent care centers** are ambulatory care centers that take care of patients with acute illness or injury and those with minor emergencies. These centers originated in the 1970s and have grown in popularity over the past couple of decades. Urgent care facilities are usually open seven days a week and are especially busy during times

when other clinics and offices are closed. Patients are normally seen in the order of arrival except in emergencies. Many of these centers are started by emergency room physicians and are equipped with radiographic equipment, lab equipment, splinting supplies, and emergency equipment. Medical assistants with a limited X-ray license are often desirable because of their versatility.

## Hospitals

Medical assistants may serve a variety of roles within the hospital setting depending on individual state laws that govern their scope of practice. A medical assistant may be employed as a monitor tech on a hospital wing to watch EKG tracings for telemetry units where they must be certified in CPR and first aid; additionally they may work in emergency departments in much the same manner but also working directly with the patients for transport, glucose screening, rooming, and other such duties. They may serve as phlebotomists, unit clerks, and/or work in hospital-based practices such as wound clinics and satellite medical practices.

## Patient-Centered Medical Home (PCMH)

The **Patient-Centered Medical Home (PCMH)** practice is responsible for providing for all of a patient's health care needs or appropriately arranging care with other qualified



professionals. This includes the provision of preventive services, treatment of acute and chronic illness, and assistance with end-of-life issues. It is a model of practice in which a team of health professionals, coordinated by a personal provider, works collaboratively to provide high levels of care, access and communication, care coordination and integration, and care quality and safety.

The PCMH is more of a partnership between the PCMH team and patient. The provider oversees all of the patient's care and focuses on the patient's total health rather than on a specific condition. Electronic medical records are a big part of the PCMH model, and patients have continuous access to their records in this model. Early findings have shown that patients thrive in this model, which helps reduce health care expenses. Medical assistants are very good for this model due to their flexibility and affordability, in addition to their ability to **scribe** to electronic health records (EHR) and medication administration records (MAR), which is due to the training they receive through higher education programs. For more information about this model, visit the website of the American College of Physicians (ACP) and Patient-Centered Primary Care Collaborative groups at [www.emmisolutions.com/medicalhome](http://www.emmisolutions.com/medicalhome).

### Job Outlook for Medical Assistants

The job outlook for medical assistants looks very promising. This is due to the versatility of medical assistants as well as to our aging population. The following excerpt is from the United States Department of Labor, Bureau of Labor Statistics:

*Employment of medical assistants is projected to grow 29 percent from 2012 to 2022, much faster than the average for all occupations. The growth of the aging baby-boom population will continue to spur demand for preventive medical services, which are often provided by physicians. As their practices expand, physicians will hire more assistants to perform routine administrative and clinical duties, allowing the physicians to see more patients.*

The increasing prevalence of certain conditions, such as obesity and diabetes, also will increase demand for health care services and medical assistants. Increasing use of medical assistants to allow providers to care for more patients will further stimulate job growth.

Refer to <http://www.bls.gov> for more information on medical assistants and job growth.

### Demonstrating Professionalism

Being a part of the health care team requires the medical assistant to demonstrate professionalism and professional behavior on an array of levels. Evolving into a

professional is not something that just happens; it is a process that develops throughout one's career. As discussed earlier, professional behaviors such as displaying tact, diplomacy, courtesy, respect, and dignity, as well as demonstrating responsibility in all aspects of the job and promoting integrity and honesty, are also an integral part of this career. One of the most important traits of a medical professional is selflessness—an unselfish concern for the welfare of others. As a health care professional, you should display professionalism not only to patients but also to supervisors, coworkers, vendors, and outside business associates. The following section describes desirable characteristics and behaviors of a professional medical assistant.

### Personal Appearance

The patients and visitors coming into a medical office obtain the first impression of the practice from the medical assistant who greets them. A neat, professional person has a good psychological effect on everyone. Your **appearance** says volumes about you. Neat, well-groomed professionals look self-confident, display pride in themselves, and give an impression of being capable of performing whatever duties need to be done (Figure 1–5). Not only does the patient feel that you are



**Figure 1–5:** Medical assistants should always look very professional. Uniforms should always be crisp and clean.