

MEDICAL ASSISTING PROGRAM

STUDENT POLICY MANUAL

WALLACE COMMUNITY COLLEGE

DOTHAN, ALABAMA

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MEDICAL ASSISTING

The Medical Assisting Program Faculty supports the mission, statement of purpose, and goals of Wallace Community College which are as follows:

STATEMENT OF MISSION

George C. Wallace Community College, a comprehensive community college, seeks to provide accessible quality educational opportunities, promote economic growth, and enhance the quality of life of its constituents.

STATEMENT OF VISION

George C. Wallace Community College will be a leading community college, nationally recognized for excellence and innovation in education and student success. The College will be the primary choice of citizens preparing for the job market, seeking an associate or advanced degree, and/or pursuing career advancement or personal development. College partnerships with area schools, business and industry, and governmental agencies will contribute to an educational system that enhances economic development and quality of life in the region.

STATEMENT OF VALUES

George C. Wallace Community College respects the diversity of its student body and recognizes the worth and potential of each student. Therefore, the College affirms the following values:

- **Commitment to Students**
Belief in providing quality, accessible instruction, resources, and support services to enhance the growth and development of students.
- **Commitment to Faculty and Staff**
Belief in the importance of providing a work and learning environment characterized by integrity, clear communications, open exchange of ideas, involvement in decision making, and respect for all individuals.
- **Commitment to Community**
Belief in enhancing the economic vitality and quality of life for all citizens of the community.
- **Commitment to Diversity**
Belief in acknowledging and respecting the diversity of the community.
- **Commitment to Excellence**
Belief in the pursuit of excellence in all College programs and services.

STRATEGIC INITIATIVES AND RELATED GOALS

Strategic Initiative I: To demonstrate the College's commitment to quality teaching and learning through increased student success and continuous improvement in instructional programs

Effective teaching and learning are essential for a successful community college. The establishment of learning outcomes for educational programs is important both for ensuring consistency regardless of the mode of instructional delivery and for evaluating the effectiveness of programs. Continuous improvement of educational programs depends on analyzing results from instruction and using these results for quality enhancement. Appropriate class sizes and faculty advising loads must be maintained in order for faculty to give attention to the individual needs of students and monitor their progress in achieving learning outcomes. For faculty,

professional development based on the needs they identify is essential in responding to the diversity of students and changes in technology.

The following are goals related to this strategic initiative:

- Goal A: Increase the success of students in college transfer programs, in career and technical programs, and in health professions programs
- Goal B: Increase the retention and success of students in transitional classes in English, mathematics, and reading
- Goal C: Increase student attainment of learning outcomes in all programs and in general education with emphasis on “gateway” courses in English, mathematics, and science
- Goal D: Maintain an adequate faculty-to-student ratio that ensures class sizes and advising loads that enable sufficient attention to individual student learning needs
- Goal E: Provide systematic professional development opportunities for faculty and professional staff based on identified faculty and staff needs and ensure use of evaluation and feedback for improvement

Strategic Initiative II: To enhance access to educational opportunities through alternative instructional delivery and achieve a larger and more diverse student enrollment

Providing access to educational opportunities is at the heart of the mission of community colleges. Although traditional college-age students may comprise the majority of enrollment, alternate modes of instructional delivery may provide access to a more diverse student population. Changing population demographics also may require services for students who are not native speakers of English. Closer relationships with high schools in the region and the provisions of programs and information to acquaint high school students and counselors with the full range of educational opportunities at Wallace Community College will be important. Cooperative programs that enable students to earn collegiate credit while in high school may prove valuable in recruitment and retention.

The following are goals related to this strategic initiative:

- Goal A: Increase enrollment of graduates from area high schools by at least 3% each year
- Goal B: Increase enrollment of non-traditional students by at least 5% each year
- Goal C: Improve recruitment, admissions, and enrollment services for students for whom English is a second language
- Goal D: Expand the number of courses and increase the semester credit hours produced through distance learning (electronic delivery)
- Goal E: Increase the course offerings and semester credit hours produced through evening, weekend, or off-site classes
- Goal F: Enhance opportunities with area high schools for college credit through articulation, dual enrollment, tech prep, bridge programs, advanced placement, and similar arrangements

Strategic Initiative III: To provide educational programs, services, and workforce development that are responsive to the changing economic, demographic, and cultural needs of the region

WCC is a comprehensive community college whose educational programs are well-aligned with the employment and educational needs of the region. Health care, transportation, and retail sales continue to be major components of the economy in the region and demographic trends suggest these will continue to be critical to the region's economy. Workforce development continues to grow in its service to business and industry in the area and its visibility has enhanced the image of the College throughout the region. Data on educational attainment in the region suggest that adult education programs designed to enable students to earn General Equivalency Diplomas will be a continuing need as will transitional programs to prepare students for college-level degree and certificate programs. Attention to these needs will continue to be an important part of the college mission.

The following are goals related to this strategic initiative:

- Goal A: Plan for new educational programs based on the changing population, health care needs, and growing service sector of the regional economy
- Goal B: Implement a multi-year schedule of instructional program review to assess program viability and/or need for program continuation or change
- Goal C: Utilize program advisory committees for all educational programs and ensure that these committees are used regularly to enhance program quality, effectiveness, and visibility
- Goal D: Expand educational opportunities for area citizens through non-credit short courses, continuing education activities, and attendance at cultural events on campus
- Goal E: Expand the scope and increase participation in workforce development activities in service to business and industry in the region
- Goal F: Provide adult education services that respond to the needs of the region

Strategic Initiative IV: To improve services in support of student success and enhance the collegiate experience through greater student engagement

Student services are crucial in attracting and retaining students. Many students form their first impressions of the College through their contact with the admissions office. A student-friendly, service-oriented approach is essential in all phases of the continuum of services from the recruitment, admission, and enrollment of students, to the support services vital to retention and student success, and through career planning and placement. Student services also enrich the collegiate experience through participation in clubs, special events, and leadership and service opportunities in the College and the community. Adequate student security and convenience to student lounges and food service is needed, particularly for students with lengthy commutes who are on campus for extended times.

The following are goals related to this strategic initiative:

- Goal A: Review and improve the orientation, advising, and registration process for new students including planning and participation by college student leaders
- Goal B: Improve the effectiveness and efficiency of student services operations through the incorporation of technology wherever possible with emphasis on student registration, financial aid, and student records
- Goal C: Establish student success centers to provide tutorial assistance available

- Goal D: to all students with emphasis on writing, mathematics, and study skills
Provide career planning and placement services to aid students in career choices and in the transition to employment
- Goal E: Improve campus security and student access and convenience to campus services
- Goal F: Increase student participation and leadership opportunities in student organizations and initiate innovative Service-Learning programs
Provide a program of cultural events on campus that incorporates student participation and promotes student attendance
- Goal G:

Strategic Initiative V: To enhance communication, cooperation, and collaboration among divisions and across campuses to achieve greater synergy within the College

Communication is an ongoing concern at colleges with multiple campuses. Administrative offices for some programs and services may be located on different campuses. Inquiries, decisions, and feedback may be delayed. Information-sharing may be enhanced through the use of electronic updates and newsletters. Faculty and staff collaboration is essential in improving communication and cooperation across campuses and programs. Incorporating technology whenever possible may also increase responsiveness and efficiency.

The following are goals related to this strategic initiative:

- Goal A: Review and streamline administrative processes and procedures incorporating technology whenever possible
- Goal B: Implement information-sharing sessions among faculty, student services, and administrative staff to improve understanding and communication among programs, services, and operations
- Goal C: Provide regular updates to the campus community through a weekly electronic newsletter
- Goal D: Encourage faculty and staff collaboration in technological development and applications and innovative strategies for the improvement of instruction services to students
- Goal E: Initiate strategies to increase recognition and incentives for outstanding teaching by faculty and for outstanding performance by professional staff
-

Strategic Initiative VI: To provide administrative support and adequate resources to ensure the quality of programs, services, and operations while maintaining a safe and secure campus learning environment

Significant progress has been made in improving campus facilities and support for the instructional programs and student support. Enhancing the technology infrastructure will be crucial in supporting the College's goals for quality instruction and for outreach to students through online courses and must be a priority. The ability of programs and services to keep pace with changes in the workplace will be a continuing challenge with decreased state funding. Consolidating the College's accomplishments over the past few years and accommodating the need for growth in productive programs and services will require careful consideration of priorities and wise stewardship of resources.

The following are goals related to this strategic initiative:

- Goal A: Improve the technology infrastructure essential to support the instructional programs, student services, and administrative operations of the College and continue to update and implement the technology plan
- Goal B: Ensure that the College budget is based on sound educational planning consistent with institutional priorities and wise stewardship of resources
- Goal C: Provide for capital improvements for additional classrooms and laboratories and for student services facilities to accommodate program expansion and student enrollment
- Goal D: Continue implementation of campus master plan to improve safety, security, and appearance of college campuses
- Goal E: Increase financial support for the College through the foundation and through external contracts and grants
- Goal F: Ensure compliance with all health and safety regulations in laboratories and shops, enhance electronic surveillance on campus, and improve access to relevant criminal justice data/and information

Strategic Initiative VII: To increase community awareness and support for the College and its programs and services

Greater community awareness of the College and its connections to economic development and services to the region will be important in gaining greater support and enhancing resources for the institution. Marketing of the College and its competitive advantages in terms of its cost, convenience, and comprehensive array of programs should involve faculty and students. Active participation of the administration, faculty, and staff in community and regional planning as well as their presentation of programs to the schools and community organizations will be instrumental in enhancing the image of the College.

The following are goals related to this strategic initiative:

- Goal A: Review and revise the College's marketing plan ensuring participation from key constituency groups including faculty, staff, students, board members, and community leaders and incorporating multiple media sources
- Goal B: Increase the visibility of workforce development in service to business and industry in the area by expanding on-campus community and industry support programs (e.g., hosting youth summits, regional task force meetings, Southeast Alabama Council on Economic Development sessions) and presentations to students by business and industry leaders
- Goal C: Continue active participation in the Region 10 Workforce Council and provide relevant data and statistics about the College for inclusion in the annual *Regional State of the Workforce* which is posted online and provided to all industries seeking relocation
- Goal D: Increase community support through additional cooperative and collaborative agreements with business, industry, agencies, and organizations within the College's service area
- Goal E: Enhance the College Web site through appointment of a webmaster, redesign of the Web site, and incorporation of linkages with other appropriate Web sites (e.g., schools, hospitals, chambers of commerce)
- Goal F: Reorganize the WCC Speakers Bureau to provide programs for area schools, community organizations, and business and industry and

- encourage faculty participation in local civic, service, and charity organizations
- Goal G: Increase financial support for the College through private gifts and business and community support

In addition, the Program has a two-fold purpose: (1) ensuring students opportunities to acquire the knowledge and skills necessary for the practice of medical assisting, and (2) preparing students to successfully write the American Association of Medical Assistants Certifying Board examination in order to become a certified medical assistant.

The program objectives are in accord with the Standards and Guidelines of the Commission on Accreditation of Allied Health Education Programs (CAAHEP) upon recommendation of the Curriculum Review Board (CRB) of the American Association of Medical Assistants. The graduate medical assistant is expected to possess the following competencies which have been adopted by the American Association of Medical Assistants.

CODE OF ETHICS

The Code of Ethics of AAMA shall set forth principles of ethical and moral conduct as they relate to the medical profession and the particular practice of medical assisting.

Members of AAMA dedicated to the conscientious pursuit of their profession, and thus desiring the merit of the high regard of the entire medical profession and the respect of the general public which they serve, do pledge themselves to strive always to:

- A. Render service with full respect for the dignity of humanity.
- B. Respect confidential information obtained through employment unless legally authorized or required by responsible performance of duty to divulge such information.
- C. Uphold the honor and high principles of the profession and accept its disciplines.
- D. Seek to continually improve the knowledge and skills of medical assistants for the benefit of patients and professional colleagues.
- E. Participate in additional service activities aimed toward improving the health and well-being of the community.

CREED

I believe in the principles and purposes of the profession and medical assisting.

I endeavor to be more effective.

I protect the confidence entrusted to me.

I am dedicated to the care and well-being of all people.

I am loyal to my employer.

I am true to the ethics of my profession.

I am strengthened by Compassion, Courage, and Faith.

RULES AND REGULATIONS

I. ADMISSION REQUIREMENTS

Each applicant must meet the following criteria:

- A. Be a high school graduate or possess a GED certificate.
- B. Meet College requirements for admission.
All first-time students are assessed in the areas of English, mathematics, and reading through administration of the ACT/ASSET or COMPASS and placed at the appropriate level as indicated by the assessment results. Students who are placed in developmental English, reading, and/or math by the placement exam score will be required to achieve a satisfactory grade in each developmental course taken in order to progress in the Medical Assisting program.
- C. Medical Assisting, transcription, and phlebotomy students are required to complete a physical exam prior to admission into the program. The purpose of the physical exam is for evaluation of the student's ability to perform the essential functions of the Medical Assisting program. This record is current for one year only. Any student remaining in the program for more than one (1) year must have this record updated and on file in the student's personal folder. Wallace Community College complies with the Americans with Disabilities Act, 1990 and requests for reasonable accommodations will be considered.

Students meeting the above requirements are admitted in chronological order by date of completion of admission requirements.

II. ATTENDANCE AND ABSENCES

- A. Students are expected to attend all scheduled classes. The following regulations are to be followed concerning absences:
 - 1. Instructors are to maintain daily attendance records.
 - 2. A student is absent when the roll is checked, or if he or she leaves before the class is officially dismissed.
 - 3. Students are not to be counted absent until their registration is completed. However, it is the responsibility of the student to make up any missed assignments.
 - 4. Students are expected to attend all scheduled class meetings and laboratory sessions for their courses. The grades of students who miss scheduled exams, unscheduled quizzes, deadlines for turning in assigned projects, or scheduled group projects may be negatively impacted by their absence. Faculty

members will make penalties for absences clear to students in their course syllabi or additional handouts.

Students who do not wish to continue attending a class or classes are urged to initiate the withdrawal process. It is the student's responsibility to withdraw from the College. However, at the midpoint of each term, faculty members will identify students who have apparently ceased attendance but have not completed the withdrawal process. Those students in courses that meet at least twice per week will be reported if they have missed more than five consecutive class meetings before the midpoint of the term. Those students in courses that meet once per week will be reported if they have missed more than three consecutive class meetings before the midpoint. Those students will be removed from the course as an unofficial withdrawal and assigned a grade of W. Such students may petition the faculty member for reentry to the course and will be returned to the course roll only with the approval of the faculty member. Additionally, students will be responsible for repaying any portion of unearned financial aid that results from their withdrawal.

Likewise, those students who cease to attend classes after the midpoint of the term but do not initiate the withdrawal process will also be negatively impacted by these actions. These students will be considered to have unofficially withdrawn from the College and will receive failing grades for all assignments missed. If students have not completed the withdrawal process by the established withdrawal deadline, they will receive a failing grade for the courses. Faculty members will assign a grade of WF to such students when they submit final course grades.

These students will also be responsible for repayment of any unearned financial aid as a result of their failure to attend. If a student receives a grade of WF, he/she will have an opportunity to petition the instructor's decision only if it is the result of instructor error. Otherwise, the grade of WF is final.

5. All students are expected to take scheduled examinations. If a scheduled exam is missed due to an unexcused absence, the student will receive a zero. Make-up examinations due to an excused absence will be given the day the student returns from the excused absence or at the convenience of the instructor. Make-up exams may not be the same as the scheduled exam. If the student misses the scheduled make-up exam, he/she must have an excuse for the date of the make-up or receive a zero.
6. The following absences are excused:
 - a. Personal illness as documented by doctor's excuse
 - b. Serious illness or death in the immediate family as documented by doctor's excuse or obituary
 - c. Jury duty or court summons of the student as documented by a letter and/or subpoena
 - d. Official College business.
 - e. Military Obligations: Documentation of the excused absence(s) is subject to verification by the College

7. If a student must be absent from the practicum area he/she will notify the medical office and instructor at least one (1) hour prior to the scheduled time. If the instructor is not notified, an unexcused absence from practicum will be given for that day.
8. If it becomes necessary to leave the medical office during working hours, advance permission is to be obtained from the instructor or practicum supervisor. Students who leave their practicum premises for personal reasons are required to obtain permission from the instructor or practicum supervisor. Under no circumstances may students visit personnel in the same or other offices when on duty.

III. LIABILITY INSURANCE

- A. All MA, transcription, and phlebotomy students are required to have professional liability (malpractice) insurance.
- B. The insurance is available through the College and must be in effect prior to performing any skills and practicum.

IV. SUBSTANCE ABUSE CONTROL POLICY FOR STUDENTS IN THE HEALTH SCIENCES

- A. Policy Purpose
 1. Wallace Community College is a public educational institution of the State of Alabama and, as such, shall not allow on its premises, or at any activity it sponsors, the possession, use, or distribution of any alcoholic beverage or any illicit drug by any student or employee.
 2. As stipulated by agencies with which Wallace Community College contracts for clinical experiences, health program students and faculty must abide by agency policies, including the substance abuse control policy and any subsequent revisions to the policy.
- B. Standards of Conduct and Enforcement Thereof
 1. Any incident relating to alcohol or drug use by students should be reported to the Coordinator of Health Sciences.
 2. In the event of confirmation of such prohibited possession, use, or distribution by a student, Wallace Community College shall, within the scope of applicable federal and state due process requirements, take such administrative or disciplinary action as is appropriate. For a student, the disciplinary action may include, but is not limited to, program dismissal, college suspension or expulsion.

3. If any student shall engage in any behavior prohibited by this policy, which is also a violation of Federal, State, or local law or ordinance, that student shall be subject to referral to law enforcement officials for arrest and prosecution

C. General Guidelines

1. Policies governing substance abuse include pre-clinical drug screening, random drug screening, and reasonable cause drug screening, should the student exhibit behaviors indicative of substance abuse during their participation in courses and/or activities offered by Wallace Community College.
2. Laboratory Requirements
 - a. Drug screening will be conducted according to the guidelines established in the Mandatory Guidelines for Federal Workplace Drug Testing Programs.
 - b. Laboratories certified by the Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services (HHS), will be used to perform confirmatory drug testing analysis.
3. Persons to be Tested
 - a. Any student admitted to a health science program at Wallace Community College will be required to abide by this substance abuse control policy.
 - b. Any faculty member, whether full or adjunct, responsible for clinical supervision of students enrolled in a health science program at Wallace Community College will be required to abide by this policy.

D. Student Guidelines

1. Pre-clinical Screening
 - a. Students granted initial admission to any health science program at Wallace Community College will be provided information regarding and will be expected to adhere to the substance abuse control policy of Wallace Community College.
 - b. Students transferring into a health science program, readmitting to a health science program, and/or enrolling in individual courses containing a clinical component will be provided information regarding and will be expected to adhere to the substance abuse control policy of Wallace Community College.
 - c. A signed consent to drug screening will be maintained on file for each health science student. Screening will be scheduled and conducted according to established guidelines at a cost agreed upon by laboratory facility and College representatives. Costs related to admission and random drug testing will be the responsibility of the student.
 - d. Students scheduled for random screening will be individually notified and required to report for testing at a designated location by a designated time.
 - e. Students failing to complete drug screening as required will be prohibited from participation in and completion of the clinical and/or laboratory component of required courses.
 - f. In accordance with policies found in the Wallace Community College Catalog/Student Handbook, students who are unable to complete course requirements due to positive drug screens will be allowed to withdraw from applicable courses.
 - g. Readmission to health science programs will follow guidelines established by each health program.

2. Reasonable-Suspicion Screening
 - a. While participating in clinical experiences and/or College activities, students may be required to submit to reasonable suspicion testing. Reasonable suspicion is defined as follows:

Observable phenomena, such as direct observation of drug use and/or the physical symptoms or manifestations of being under the influence of a drug; abnormal conduct or erratic behavior while in class or on the clinical unit; deterioration in performance; a report of drug use provided by reliable and credible sources which has been independently corroborated; evidence of tampering with a drug test; information that the individual has caused or contributed to an incident in a clinical agency; evidence of involvement in the use, possession, sale, solicitation, or transfer of drugs while on the premises of the College or a clinical agency.

- b. Costs incurred for reasonable-suspicion screening will be the responsibility of the student involved.
3. Positive Screens
 - a. No student drug-screening sample will be reported as positive before a Certified Medical Review Officer has reviewed results.
 - b. Upon receipt of a positive drug screen notification, the College designee will counsel the student as to course/program eligibility status and treatment options.
 - c. Wallace Community College encourages students to seek professional help for a drug related problem. Follow-up treatment will be at the discretion of the student and all expenses incurred will be the responsibility of the student.
 - d. With exception of legal actions that require access to test results, all records will be secured in locked files with access limited only to stated College officials and his/her designees.
4. Readmission
 - a. Students withdrawing from a health science program due to a positive drug screen will be considered for readmission in accordance with standard guidelines stipulated by the applicable program and will have the same rights and responsibilities as those available to other students.
 - b. Prior to making application for readmission, students dismissed or withdrawing from a health science program related to a positive drug screen must submit verification of completion of a substance abuse treatment program to the appropriate College designee.
 - c. Students readmitted to a health science program following violation of policies aimed at substance abuse prevention for Wallace Community College will be required to submit to an unannounced drug screen at their own expense prior to finalization of the process.
 - d. Students readmitted to a health science program may repeat courses as guided by program policies and offerings.
 - e. Following readmission, a second positive drug screen will result in program dismissal and terminate all eligibility for readmission.

V. CONDUCT

- A. Students should observe the highest of moral, professional and social standards. Specifically, there should be no breach of confidentiality, needless complaining, loud talking, boisterous laughter, unprofessional appearance or conduct.
- B. As a vital part of the professional team and the total medical environment, each employee and student is expected to exercise tact, kindness, courtesy, and consideration to fellow employees, patients, and friends. The medical office's reputation and the community's confidence in it are established and maintained by the collective effort of all employees and students. Therefore, personal conduct both on and off the job should be of the highest quality.
- C. Students shall abide by AAMA Disciplinary Standards (page 11) and Code of Student Conduct as outlined in Wallace Community College Student Handbook and with accompanying disciplinary sanctions. Any student violating the Code of Student Conduct (including cheating, smoking in prohibited areas, or falsifying records, etc.) will be reported to the Director of Student Activities. Any student not adhering to the AAMA Disciplinary Standards will be terminated permanently from the Medical Assisting program.

VI. CONFIDENTIAL INFORMATION

- A. Students will, in the course of work, be exposed to information regarding patients, physicians and others. All such information must be considered as confidential and not to be discussed with anyone except in the line of duty.
- B. A patient's condition may not be discussed with the patient, employee, students, or other persons who are not directly concerned with care of the patient. Only the physician, director or supervisor of medical services, or the administration is authorized to discuss the condition of the patient with others.

VII. FIRE/DISASTER DRILLS

Procedures for fire drills and disaster drills are posted in the classrooms.

VIII. FOOD SERVICES

Food is available on campus at the cafeteria in the student center.

IX. PARKING

Free parking is available on campus. All vehicles must be registered and parked in the area designated for student parking. Parking decals must be obtained at the switchboard in the administration building.

X. SCHOOL TRIPS

Periodically seminars, conventions, field trips, etc. are scheduled as learning experiences. All students are encouraged to participate. Students unable to participate may be given an assignment as designated by the instructor.

XI. GRADING SCALE

A = 90-100
B = 80-89
C = 70-79
D = 60-69
F = BELOW 60

1. Each student must achieve 70 in each course in order to progress in the program. All students must complete the program within three (calendar) years.
2. Withdrawals are allowed according to College policy. If a student withdraws before one week prior to final exams, a W will be recorded on the transcript. No withdrawals allowed after that date.
3. Students who accumulate a combined total of three failures and/or withdrawals will not be allowed to continue in the program.
4. W will be recorded as withdrawal. F and D will be recorded as failures.
5. In order to graduate, the student must achieve a grade of 70 or above in each course in the Medical Assisting Curriculum, (MAT and CIS prefixes) and a cumulative GPA of 2.0 or higher in all courses.

XII. READMISSION/TRANSFER POLICY

- ❖ Readmitted/transfer students must fulfill all current requirements for admission to the program.
 - ❖ Students who have been enrolled in other programs must have a cumulative GPA of 2.0 or higher and are evaluated individually to determine appropriate placement. Validation exams may be required.
 - ❖ Syllabi, course outlines, textbooks and catalogs from the former institution must be submitted to the Medical Assisting program for review.
- A. Readmission after failure:
A student who has failed to achieve a final grade of 70 or above in any one course of the Medical Assisting program may repeat that course only once more and continue in the program at full-time status upon space available provided the combined total of three withdrawals and/or failures have not been accumulated. If the three have been accumulated, the student may not enroll at any time in the future unless the Discipline Chairman determines there were mitigating circumstances impacting the failure(s).
- B. Readmission after withdrawals:
A student may accumulate a combined total of three withdrawals and/or failures. Readmission will not be allowed after any further withdrawals.
- C. Readmission after not enrolling for one or more semesters:
1. Students not enrolled for one semester may register for classes on a space available basis.

2. Students not enrolled for two semesters may register for classes after successfully challenging all skill classes previously completed. Challenging includes retaking the final exam and scoring a 70 or above plus successfully performing all required skill evaluations according to the course syllabus.
 3. Students not enrolled for three semesters or more must retake all skill classes and pharmacology.
- D. Priority of registration:
Due to limited class size, readmission into each course will be considered on a first come first serve basis in the following order:
1. Students who are completing the final semester of the program.
 2. Students who have completed 32 or more semester hours.
 3. Students who have completed 1-32 semester hours.
 4. New and transfer students entering the program.

XIII. TELEPHONE

- A. Personal calls must not be made on school or medical office telephones. Public telephones are located throughout the school campus for use during break and meal periods.
- B. Please instruct family and friends not to call while in class or in practicum. In case of an emergency, the call should be made to the Dean of Students Office who will contact the student immediately.
- C. Beepers and portable telephones must be kept turned off during class. Persistence of keeping a beeper or portable telephone on during class will constitute a dismissal from class and will be assigned as an unexcused absence. No beepers or telephones are to be worn during clinical experience. Wearing a beeper or telephone will be considered inappropriate dress for the clinical area with an unexcused absence.

XIV. UNIFORMS

- A. The following dress code will be enforced for all students in the Medical Assisting Program during practicum and skill evaluations:
 1. Students must wear a clean, all white uniform or lab jacket/coat with a pen in pocket.
 2. * Students must have their name tag on the front of the uniform or lab jacket/coat.
 3. No jeans, tank tops, short, miniskirts, tight spandex pants, or see through garments will be allowed.
 4. Appropriate neutral undergarments and hose or socks must be worn with the uniforms.
 5. Make-up should be sedate and only pale shades of nail polish will be acceptable.

6. No high heels, sandals, or fabric shoes will be acceptable.
7. The student is expected to follow good personal hygiene.
8. No artificial nails.
9. Hair is to be worn in a neat, clean style, away from the face and should not extend below shoulders, or more than one inch above the crown of the head.
10. No green, pink, purple, or unnatural hair colors will be accepted. No head garments will be accepted.
11. Wedding bands and a watch with a second hand are the only allowable jewelry.
12. No visible body piercing will be acceptable except single or double-pierced earrings.
13. No visible tattoos will be acceptable. THERE WILL BE NO EXCEPTIONS TO THE DRESS CODE!!! Attire will be evaluated during scheduled evaluations on campus and at the practicum site. Ten (10) points will be deducted from each evaluation for failure to comply with established rules, and the student will be counseled. Repeated counseling may result in termination from practicum.

* It is the student's responsibility to place the order and purchase a name tag from Source One Apparel in Circle West Shopping Center, 3142 Ross Clark Circle, Dothan, AL 36303, 334-793-5258, or Sandra Jean Uniform Shop, 2493 Montgomery Highway, Dothan, AL 36301, 334-792-4553.

B. EXAMPLES OF INAPPROPRIATE BEHAVIOR

1. Chewing gum, eating, etc., in clinical area.
2. Loud talking, laughing, "horse playing" in hallways or elevators.
3. Being disrespectful to the client, instructor, other students, and/or employees of institution.
4. Dishonesty (lying, stealing, charting care not provided).
5. Use of profanity or lewd comments anywhere in institution.
6. Disagreeing loudly in public.
7. Inappropriate physical contact (shoving, rough handling of client).
8. Breach of confidentiality.
9. Failure to follow instructions.

XVI. PRACTICUM AND GRADUATION

- A. A practicum of 225 hours (MAT 229, MAT 239, or MAT 242) is required for graduation from the AAS-Medical Assisting Program and/or the phlebotomy and medical transcription short certificate programs. Courses involving skills must be taken in the program at the College. Application must be made by mid-semester of the semester immediately proceeding the practicum semester. Applications are in the Medical Assisting Program office.
1. The following are required prior to MAT 229 enrollment:
“C” average or better in MAT 111, MAT 125, MAT 200, MAT 211, MAT 215, MAT 216, and MAT 222 or MAT 223. Plus successful completion of 30 additional credit hours of the required Medical Assisting courses and a 2.0 or higher cumulative GPA, current CPR certification, current physical exam, liability insurance coverage, and demonstration of safety in all skills considered potentially physically harmful to the patient.
 2. The following are required prior to MAT 239 enrollment:
“C” average or better in MAT 101, 102, 128, 125, and 215, plus successful completion of an acceptable computer course or instructor permission and a 2.0 or higher cumulative GPA prior to practicum. Liability insurance, physical exam, and CPR certification (American Red Cross CPR for the Professional Rescuer or American Heart for the Healthcare Provider) must be current prior to beginning MAT 239.
 3. The following courses are required prior to MAT 242 enrollment:
“C” average or better in MAT 101, 102, 103, 130, “B” average in MAT 222 to take practicum concurrently with MAT 223. Otherwise, MAT 223 must be taken and then the practicum will be taken the following semester. The MMRV panel and the 2-step TB skin test and physical exam must be complete prior to beginning MAT 242. Liability insurance will be needed.
- B. Students understand they are not promised jobs and will not be paid for their Practicum. It is also the student’s responsibility to apply for graduation with the enrollment services office by mid-semester of the semester immediately preceding the semester of graduation. Students may complete the program any semester; however, the graduation ceremony is only held at the end of the spring semester. Therefore, anyone graduating and participating in the ceremony must apply by mid-semester of the fall semester.

XVII. CERTIFICATION EXAM

Students completing the Medical Assistant program may apply to AAMA to sit for the Certified Medical Assistant Examination. Applications are available from the Program Director.

Completing and mailing the application with the required fee is student’s responsibilities. Application may be denied for failing to comply with the Disciplinary Standards and Procedure of the AAMA as outlined on the following page. Any student failing to comply with AAMA Disciplinary Standards will be permanently terminated from the Medical Assisting program.

XVIII. STUDENT GRIEVANCES

Any student affected by a policy of this program wishing to challenge or be an exception of the policy, must follow the College grievance procedure found in the Student Handbook section of the College Catalog.

Disciplinary Standards and Procedures

I. Grounds for denial of eligibility for the Certified Medical Assistant (CMA) credential, or for discipline of Certified Medical Assistants (CMAs)

- A. Obtaining or attempting to obtain Certification, or Recertification of the CMA credential, by fraud or deception.
- B. Knowingly assisting another to obtain or attempt to obtain Certification or Recertification by fraud or deception.
- C. Misstatement of material fact or failure to make a statement of material fact in application for Certification or Recertification.
- D. Falsifying information required for admission to the Certification Examination, impersonating another examinee, or falsifying education or credentials.
- E. Copying answers, permitting another to copy answers, or providing or receiving unauthorized advice about examination content during the Certification Examination.
- F. Unauthorized possession or distribution of examination materials, including copying and reproducing examination questions and problems.
- G. Found guilty of a felony, or pleaded guilty to a felony. However the Certifying Board may grant a waiver based upon mitigating circumstances, which may include, but need not be limited to (Effective March 2, 2000):
 - 1. The age at which the crime was committed;
 - 2. The circumstances surrounding the crime;
 - 3. The nature of the crime committed;
 - 4. The length of time since the conviction;
 - 5. The individual's criminal history since the conviction;
 - 6. The individual's current employment references;
 - 7. The individual's character references;
 - 8. Other evidence demonstrating the ability of the individual to perform the professional responsibilities competently, and evidence that the individual does not pose a threat to the health or safety of patients.
- H. Violation of any laws relating to medical assisting practices.
- I. The possession, use, or distribution of controlled substances or drugs in any way other than for legitimate or therapeutic purposes, or the addiction to or diversion of controlled substances or drugs (including alcohol), the violation of any drug law, or prescribing controlled substances for oneself.
- J. Violation of any policies, procedures, and regulations of the American Association of Medical Assistants Certifying Board, including regulations governing the use of the CMA credential.
- K. Violation of the American Association of Medical Assistants' (AAMA's) Code of Ethics.
- L. Failure to cooperate reasonably with investigation of a disciplinary matter.

II. Procedures for adjudicating alleged violations of Standards

- A. The Certified Medical Assistant (CMA) or applicant for the CMA credential shall be informed in writing of the basis for denial of eligibility for the CMA credential, or for discipline of the Certified Medical Assistant.
- B. The CMA or applicant shall be given the opportunity to submit written evidence regarding the alleged violations.
- C. The CMA or applicant shall be given the opportunity to request a hearing before the Certifying Board.
- D. The CMA or applicant shall be given the opportunity to appeal the decision of the Certifying Board to an Appeals Panel established by the Certifying Board.

III. Possible sanctions

- A. Denial of eligibility for the Certification Examination
- B. Scores invalidated, scores withheld, or scores recalled
- C. Probation
- D. Reprimand
- E. Temporary revocation of the Certified Medical Assistant (CMA) credential
- F. Permanent revocation of the CMA credential

OSHA HEPATITIS B VACCINATION PROTECTION

WHAT IS HBV?

Hepatitis B virus (HBV) is a potentially life-threatening blood-borne pathogen. Centers for Disease Control estimates there are approximately 280,000 HBV infections each year in the U.S.

Approximately 8,700 health care workers each year contract hepatitis B, and about 200 will die as a result. In addition, some who contact HBV will become carriers, passing the disease on to others. Carriers also face a significantly higher risk for other liver ailments which can be fatal, including cirrhosis of the liver and primary liver cancer.

HBV infection is transmitted through exposure to blood and other infectious body fluids and tissues. Anyone with occupational exposure to blood is at risk of contracting the infection.

Employers must provide engineering controls; workers must use work practices and protective clothing and equipment to prevent exposure to potential infectious materials. However, the best defense against hepatitis B is vaccination.

WHO NEEDS VACCINATION?

The new OSHA standard covering bloodborne pathogens requires employers to offer the three-injection vaccination series free to all employees who are exposed to blood or other potentially infectious materials as part of their job duties. This includes health care workers, emergency responders, morticians, first-aid personnel, law enforcement officers, correctional facilities staff, launderers, as well as others.

The vaccination must be offered within 10 days of initial assignment to a job where exposure to blood or other potentially infectious materials can be "reasonably anticipated." The requirements for vaccinations of those already on the job take effect July 6, 1992.

WHAT DOES VACCINATION INVOLVE?

The hepatitis B vaccination is a noninfectious, yeast-based vaccine given in three injections in the arm. It is prepared from recombinant yeast cultures, rather than human blood or plasma. Thus, there is no risk of contamination from other bloodborne pathogens nor is there any chance of developing HBV from the vaccine.

The second injection should be given one month after the first and the third injection six months after the initial dose.

More than 90 percent of those vaccinated will develop immunity to the hepatitis B virus. To ensure immunity, it is important for individuals to receive all three injections. At this point it is unclear how long the immunity lasts, so booster shots may be required at some point in the future.

The vaccine causes no harm to those who are already immune or to those who may be HBV carriers. Although employees may opt to have their blood tested for antibodies to determine need for the vaccine, employers may not make such screening a condition of receiving vaccination nor are employers required to provide prescreening.

Each employee should receive counseling from a health care professional when vaccination is offered. This discussion will help an employee determine whether inoculation is necessary.

WHAT IF I DECLINE VACCINATION?

Workers who decide to decline vaccination must complete a declination form. Employers must keep these forms on file so that they know the vaccination status of everyone who is exposed to blood. At any time after a worker initially declines to receive the vaccine, he or she may opt to take it.

WHAT IF I AM EXPOSED BUT HAVE NOT YET BEEN VACCINATED?

If a worker experiences an exposure incident, such as a needle-stick or a blood splash in the eye, he or she must receive confidential medical evaluation from a licensed health care professional with appropriate follow-up. To the extent possible by law, the employer is to determine the source individual for HBV as well as human immunodeficiency virus (HIV) infectivity. The worker's blood will also be screened if he or she agrees.

The health care professional is to follow the guidelines of the U.S. Public Health Service in providing treatment. This would include hepatitis B vaccination. The health care professional must give a written opinion on whether or not vaccination is recommended and whether the employee received it. Only this information is reported to the employer. Employee medical records must remain confidential. HIV or HBV status must NOT be reported to the employer.

This is one of a series of fact sheets which discuss various requirements of the Occupational Safety and Health Administration's standard covering exposure to bloodborne pathogens. Single copies of fact sheets are available from OSHA Publications, Room N3101, 200 Constitution Ave. N.W., Washington, D.C. 20210 and from OSHA regional offices.

**Wallace Community College
Drug Screen Policy Agreement**

In preparation for participation in clinical/laboratory activities of health science programs or other programs/activities requiring drug screening as outlined in the Wallace Community College Substance Abuse Control Policy, I hereby consent to submit to a urinalysis and/or other tests as shall be determined by Wallace Community College for the purpose of determining substance use. I agree that specimens for the tests will be collected in accordance with guidelines established in the Mandatory Guidelines for Federal Workplace Drug Testing Programs and as described in the Wallace Community College Substance Abuse Control Policy Guidelines.

I further agree to, and hereby authorize, the release of the results of said tests to the appropriate designee of Wallace Community College. All positive results will be reviewed by said College designee and followed by a confidential contact with me. I understand that positive results indicating the current use of drugs and/or alcohol shall prohibit me from participating in clinical/laboratory activities of health science programs or other activities requiring that I be drug free. I further understand that clinical/laboratory components of courses within health programs are required curriculum components and that an inability to attend said components may prevent or delay my program completion. I also understand that while participating in clinical activities within outside health care agencies, I will be subject to the same rules as the health care employees in said facilities.

I agree to hold harmless Wallace Community College and its designee(s) and Prime Care and its Medical Review Officer from any liability arising in whole or in part from the collection of specimens, testing, and use of the results from said test in connection with excluding me from participation in clinical/laboratory activities.

I have carefully read the foregoing and fully understand its contents. I acknowledge that my signing of this consent and release form is a voluntary act on my part and that I have not been coerced by anyone to sign this document. A copy of this signed and dated document will constitute my consent for Prime Care to perform the drug screen and to release the results to Wallace Community College.

Student Signature

Student Name (printed)

Date

Wallace Community College – Medical Assisting

STUDENT INFORMATION / CHECKLIST

Before beginning any **program** course, you must submit proof of the following items. NO exceptions can or will be made regarding submission of documentation by a medical professional. Turn in your health record documentation by the announced deadline. **Attach this form to the front of your health records.**

ITEM	DOCUMENTATION REQUIRED	<input checked="" type="checkbox"/>
Essential Functions / Physician's Statement	The <i>Essential Functions / Physician's Statement Form</i> must be signed by the student and signed by a physician, physician's assistant, or a nurse practitioner . Attach completed form.	
Health Record Form	The <i>Health Record Form</i> must be completed and signed by a physician, physician's assistant, or a nurse practitioner . Attach completed form.	
Tetanus Vaccine	Documentation of tetanus vaccination within the last ten (10) years. Attach medical documentation.	
PPD or Tuberculosis (TB Skin Test)	Documentation of a two-step TB skin test, consisting of one test followed by a second test 7-21 days later. The results cannot be more than four (4) weeks apart. TB skin tests are good for a period of one (1) year from the administration date. An annual one-step TB skin test will be required thereafter. Attach medical documentation. OR Students who have tested positive for TB in the past or who are unable to receive the TB skin test must submit documentation of a clear chest x-ray. Completion of an annual <i>Tuberculosis Questionnaire</i> will also be required. Attach medical documentation.	
MMRV Titers	Documentation of titer results for MMRV – Measles (Rubeola), Mumps, Rubella, and Varicella (Chicken Pox). If results are non-immune (negative), the student is instructed to seek the advice of a medical provider for recommended follow-up and must sign a <i>Measles, Mumps, Rubella, Varicella Release / Waiver Form</i> . Attach lab data report.	
Hepatitis B Titer	Documentation of titer results for Hepatitis B. Results must be within the past twenty (20) years. If results are non-immune (negative), the student is instructed to seek the advice of a medical provider for recommended follow-up and must sign a <i>Hepatitis B Vaccination Release / Waiver Form</i> . Attach lab data report.	
CPR	Documentation of current CPR certification by the American Heart Association Basic Life Support (BLS) for Health Care Providers, or American Red Cross CPR for Professional Rescuer. Attach a copy of card / certificate.	
Release Form	Read and sign the <i>Clinical Related Documents Release of Information Form</i> . Attach completed form.	

If you have previous record of a tetanus vaccination, a TB Skin Test / Chest X-ray, MMRV lab

ESSENTIAL FUNCTIONS
Wallace Community College

Medical Assisting and Phlebotomy

The following essential functions as identified by this program are necessary for participation in this program at Wallace Community College:

1. Must be able to maintain normal balance.
2. Must be able to lift at least 40 pounds.
3. Must be able to hear high and low frequency sounds produced by the body and environment. (Example: heart sounds, telephone, and transcribing)
4. Must be able to visibly detect changes in or around the clinical site.
5. Must have tactile sense to distinguish contrasting structures and vibrations. (Example: palpate pulse, intercostal spaces, veins, and keyboards)
6. Must be able to smell body and environment odors. (Example: electrical equipment burning or infected wounds)
7. Must be able to coordinate eye and hand movements. (Example: releasing a blood pressure cuff valve while observing the blood pressure gauge, focusing microscopes, and word processing)
8. Must be able to coordinate fine and gross motor movements with hands. (Example: able to give injections, perform phlebotomy, and word processing)
9. Must be able to see different color spectrums. (Example: bright red drainage of opposed to serous drainage, distinguish positive and negative urinalysis reactions, and proofreading documents)
10. Must be able to comprehend readings, speak and write the English language legibly. (Example: writing notes in patient's charts, taking telephone messages, giving messages to physicians)
11. Must be able to send familiar message(s) to the receiver and interpret the feedback appropriately. (Example: receiving telephone orders from a physician or obtaining a history from a patient)
12. Must be able to correctly perform simple mathematical computations. (Example: administering drugs, bookkeeping, and formatting documents)
13. Must be able to demonstrate a mentally healthy attitude which is age appropriate and congruent with the local and cultural norms.
14. Must be able to operate devices with gauges, dials, and/or a CRT component.
15. Must be able to participate in all aspects of cardiopulmonary resuscitation.
16. Must be able to move quickly throughout the clinical site.

No recommendation is made or implied with regard to the level of reading or writing required for this program. This is an academic matter which will be discussed with the student after administration of the College placement / Compass® test and a conference with a counselor or advisor. The instructor reserves the right to amend and augment this listing if, in his/her judgment, the safety of the student or of others in the instructional setting is in jeopardy.

Every effort is made to create a learning environment similar to the actual workplace. However, Wallace Community College cannot predict the essential functions as identified by various employers. The skills identified on this essential functions form are those which the instructor/program feel are necessary for participation in the program. No representation regarding industry standard is implied.

ESSENTIAL FUNCTIONS
Wallace Community College

Transcription

The following essential functions as identified by this department are necessary for participation in this program at Wallace Community College:

1. Must be able to lift at least 10 pounds.
2. Must be able to hear high and low frequency sounds. (Example: telephone and transcribing)
3. Must be able to visibly detect errors in printed documents
4. Must be able to coordinate eye and hand movements.
5. Must be able to coordinate fine and gross motor movements with hands. (Example: able to key data)
6. Must be able to comprehend readings and write legibly when documenting notes on patients' records.
7. Must be able to send familiar message(s) to the receiver and interpret the feedback appropriately. (Example: Receiving telephone orders from the physician/or supervisor clarifying information)
8. Must be able to correctly perform simple mathematical computations for proper document format.
9. Must be able to demonstrate a mentally healthy attitude which is age-appropriate and congruent with the local and cultural norms.
10. Must be able to input/output data using the computer CRT.

No recommendation is made or implied with regard to the level of reading or writing required for this program. This is an academic matter which will be discussed with the student after administration of the College placement / compass test and a conference with a counselor or advisor. The instructor reserves the right to amend and augment this listing if, in his/her judgment, the safety of the student or of others in the instructional setting is in jeopardy.

Every effort is made to create a learning environment similar to the actual workplace. However, Wallace Community College cannot predict the essential functions as identified by various employers. The skills identified on this essential functions form are those which the instructor/program feel are necessary for participation in the program. No representation regarding industry standard is implied.

Similarly, any reasonable accommodations made for you are determined by Wallace Community College Dothan for student participation in this program of study. Business/industry standards may vary.

**AAS DEGREE
MEDICAL ASSISTING CHECKLIST
GRADUATION REQUIREMENTS**

NAME: _____ SSN: _____

PERMANENT ADDRESS/PHONE: _____

DATE ENTERED: _____ DATE OF GRADUATION: _____

DATE EMPLOYED: _____ EMPLOYER: _____

BIO 103	_____ 4	MAT 101 Medical Terminology	_____ 3
CIS 146	_____ 3	MAT 102 Medical Assisting Theory I	_____ 3
ENG 101	_____ 3	MAT 103 Medical Assisting Theory II	_____ 3
Humanities	_____ 3	MAT 111 Clinical Procedures I	_____ 3
MTH 116	_____ 3	MAT 120 Administrative Procedures I	_____ 3
PSY 200	_____ 3	MAT 121 Administrative Procedures II	_____ 3
SPH 106	_____ 3	MAT 122 Interpersonal Relations	_____ 3
ORI 101	_____ 1	MAT 125 Laboratory Procedures I	_____ 3
ORI 104	_____ 1	MAT 128 Medical Law & Ethics	_____ 3
		MAT 130 Medical Office Communication	_____ 3
		MAT 200 Management of Office Emergencies	_____ 2
Combined WD & Failure		MAT 211 Clinical Procedures II	_____ 3
(Max. of 3)		MAT 215 Laboratory Procedures II	_____ 3
_____		MAT 216 Medical Pharmacology	_____ 4
_____		MAT 220 Medical Office Insurance	_____ 3
_____		MAT 222 Medical Transcription I	
		or	
		MAT 223 Medical Transcription II	_____ 2
		MAT 227 Special topics in Medical Assisting	_____ 1
		MAT 228 Medical Assistant Review Course	_____ 1
		MAT 229 Medical Assistant Practicum	_____ 3
		Total Credit Hours	76
		MAT 222 or 223 Advanced Medical Transcription	_____ 2
		MAT 239 Phlebotomy Practicum	_____ 3
		MAT 242 Transcription Practicum	_____ 3

MEDICAL ASSISTING ASSOCIATE IN APPLIED SCIENCE

Students completing this course will have an associate science degree (AAS) in Medical Assisting. Graduates are eligible to apply for the Certified Medical Assistant (CMA) examination.

This is a suggested schedule for students interested in completing the Medical Assisting program. Certain MAT prefix courses have prerequisites to complete, please consult the Wallace College Catalog.

Sem	Dept/Course #	Course Title	Theory	Lab	Credit Hours
1 st	* MAT 102	Medical Assisting Theory I	3	--	3
	MAT 101	Medical Terminology	3	--	3
	MAT 111	Clinical Procedures I	2	3	3
	ENG 101	English Composition I	3	--	3
	CIS 146	Microcomputer Applications	<u>3</u>	<u>--</u>	<u>3</u>
		Total	14	3	15
2 nd	* MAT 103	Medical Assisting Theory II	3	--	3
	* MAT 120	Administrative Procedures I	2	3	3
	MAT 125	Laboratory Procedures I	2	3	3
	MAT 130	Medical Office Communication	3	--	3
	**MAT 122	Interpersonal Relationships	<u>3</u>	<u>--</u>	<u>3</u>
		Total	13	6	15
3 rd	MAT 211	Clinical Procedures II	2	3	3
	MAT 128	Medical Law and Ethics	3	--	3
	MTH 116	Mathematical Applications	3	--	3
	MAT 222	Medical Transcription I or			
	MAT 223	Medical Transcription II	1	3	2
	(choice)	Humanities/Fine Arts Elective	3	--	3
		Total	12	6	14
4 th	**MAT 216	Medical Pharmacology	3	3	4
	MAT 215	Laboratory Procedures II	2	3	3
	* MAT 121	Administrative Procedures II	2	3	3
	**MAT 200	Management of Office Emergencies	2	--	2
	**MAT 220	Medical Office Insurance	2	3	3
	MAT 227	Special Topics in Medical Assisting	<u>1</u>	<u>--</u>	<u>1</u>
		Total	12	12	16
5 th	PSY 200	General Psychology	3	--	3
	MAT 228	Medical Assistant Review Course	1	--	1
	MAT 229	Medical Assistant Practicum	--	15	3
	BIO 103	Principles of Biology	3	3	4
	SPH 106	Oral Communications	<u>3</u>	<u>--</u>	<u>3</u>
		Total	10	18	14

Note: ORI 101-Orientation to College is a prerequisite to this degree for those who enter as first-time college students.

ORI 104-WorkKeys Assessment and Advisement is a prerequisite to the degree.

* These courses rotate every other semester.

** These courses are not offered summer semesters.

MEDICAL TRANSCRIPTION SHORT CERTIFICATE

This is a suggested course of study to complete the short certificate in medical transcription. Certain MAT prefix courses have prerequisites to complete, please consult the Wallace College Catalog.

Sem	Dept/Course #	Course Title	Theory	Lab	Credit Hours
1 st	MAT 102	Medical Assisting Theory I	3	--	3
	MAT 101	Medical Terminology	3	--	3
	MAT 130	Medical Office Communication	<u>3</u>	<u>--</u>	<u>3</u>
		Total	9	--	9
2 nd	MAT 103	Medical Assisting Theory II	3	--	3
	MAT 122	Interpersonal Relationships or			
	MAT 128	Medical Law & Ethics	3	--	3
	MAT 222	Medical Transcription I	1	3	2
	MAT 227	Special Topics in Medical Assisting	<u>1</u>	<u>--</u>	<u>1</u>
		Total	8	3	9
3 rd	MAT 223	Medical Transcription II	1	3	2
	MAT 242	Transcription Practicum	<u>15</u>	<u>3</u>	
		Total	1	18	5

PHLEBOTOMY SHORT CERTIFICATE

Graduates are eligible to apply for the Phlebotomy Technician (ASCP) certification examination.

This is a suggested course of study to complete the certification program. Certain MAT courses have prerequisites; please consult the Wallace College Catalog.

Sem	Dept/Course #	Course Title	Theory	Lab	Credit Hours
1 st	MAT 102	Medical Assisting Theory I	3	--	3
	MAT 101	Medical Terminology	3	--	3
	MAT 122	Interpersonal Relationships	3	--	3
	MAT 125	Laboratory Procedures I	<u>2</u>	<u>3</u>	<u>3</u>
		Total	11	3	12
2 nd	MAT 128	Medical Law and Ethics	3	--	3
	MAT 215	Laboratory Procedures II	2	3	3
	CIS 146	Microcomputer Applications	<u>3</u>	<u>--</u>	<u>3</u>
		Total	8	3	9
3 rd	MAT 239	Phlebotomy Practicum	--	<u>15</u>	<u>3</u>
		Total		15	3

Appendix B

Core Curriculum for Medical Assistants Medical Assisting Education Review Board (MAERB) 2008 Curriculum Plan

Foundations for Clinical Practice

Medical assistants graduating from programs accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) will demonstrate critical thinking based on knowledge of academic subject matter required for competence in the profession. They will incorporate the cognitive knowledge in performance of the psychomotor and affective domains in their practice as medical assistants in providing patient care.

I.C Cognitive (Knowledge Base)	I. P Psychomotor (Skills)	I. A Affective (Behavior)
I Anatomy & Physiology <ol style="list-style-type: none"> Describe structural organization of the human body Identify body systems Describe body planes, directional terms, quadrants, and cavities List major organs in each body system Describe the normal function of each body system Identify common pathology related to each body system Analyze pathology as it relates to the interaction of body systems Discuss implications for disease and disability when homeostasis is not maintained Describe implications for treatment related to pathology Compare body structure and function of the human body across the life span Identify the classifications of medications, including desired effects, side effects and adverse reactions Describe the relationship between anatomy and physiology of all body systems and medications used for treatment in each 	I. Anatomy & Physiology <ol style="list-style-type: none"> Obtain vital signs Perform venipuncture Perform capillary puncture Perform pulmonary function testing Perform electrocardiography Perform patient screening using established protocols Select proper sites for administering parenteral medication Administer oral medications Administer parenteral (excluding IV) medications Assist physician with patient care Perform quality control measures Perform CLIA waived hematology testing Perform CLIA waived chemistry testing Perform CLIA waived urinalysis Perform CLIA waived immunology testing Screen test results 	I. Anatomy & Physiology <ol style="list-style-type: none"> Apply critical thinking skills in performing patient assessment and care Use language/verbal skills that enable patients' understanding Demonstrate respect for diversity in approaching patients and families

II.C Cognitive (Knowledge Base)	II. P Psychomotor (Skills)	II. A Affective (Behavior)
II. Applied Mathematics <ol style="list-style-type: none"> 1. Demonstrate knowledge of basic math computations 2. Apply mathematical computations to solve equations 3. Identify measurement systems 4. Define basic units of measurement in metric, apothecary and household systems 5. Convert among measurement systems 6. Identify both abbreviations and symbols used in calculating medication dosages 7. Analyze charts, graphs and/or tables in the interpretation of healthcare results 	II. Applied Mathematics <ol style="list-style-type: none"> 1. Prepare proper dosages of medication for administration 2. Maintain laboratory test results using flow sheets 3. Maintain growth charts 	II. Applied Mathematics <ol style="list-style-type: none"> 1. Verify ordered doses/dosages prior to administration 2. Distinguish between normal and abnormal test results
III.C Cognitive (Knowledge Base)	III. P Psychomotor (Skills)	III. A Affective (Behavior)
III. Applied Microbiology/Infection Control <ol style="list-style-type: none"> 1. Describe the infection cycle, including the infectious agent, reservoir, susceptible host, means of transmission, portals of entry, and portals of exit 2. Define asepsis 3. Discuss infection control procedures. 4. Identify personal safety precautions as established by the Occupational Safety and Health Administration (OSHA) 5. List major types of infectious agents 6. Compare different methods of controlling the growth of microorganisms 7. Match types and uses of personal protective equipment (PPE) 8. Differentiate between medical and surgical asepsis used in ambulatory care settings, identifying when each is appropriate 9. Discuss quality control issues related to handling microbiological specimens 10. Identify disease processes that are indications for CLIA waived tests 11. Describe Standard Precautions, including: <ol style="list-style-type: none"> a. Transmission based precautions b. Purpose c. Activities regulated 12. Discuss the application of Standard Precautions with regard to: 	III. Applied Microbiology/Infection Control <ol style="list-style-type: none"> 1. Participate in training on Standard Precautions 2. Practice Standard Precautions. 3. Select appropriate barrier/personal protective equipment (PPE) for potentially infectious situations 4. Perform handwashing 5. Prepare items for autoclaving 6. Perform sterilization procedures 7. Obtain specimens for microbiological testing 8. Perform CLIA waived microbiology testing 	III. Applied Microbiology/Infection Control <ol style="list-style-type: none"> 1. Display sensitivity to patient rights and feelings in collecting specimens 2. Explain the rationale for performance of a procedure to the patient 3. Show awareness of patients' concerns regarding their perceptions related to the procedure being performed

<ul style="list-style-type: none"> a. All body fluids, secretions and excretions b. Blood c. Non intact skin d. Mucous membranes <p>13. Identify the role of the Center for Disease Control (CDC) regulations in healthcare settings.</p>		
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Applied Communications

Medical assistants graduating from programs accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) will demonstrate critical thinking based on knowledge of academic subject matter required for competence in the profession. They will incorporate cognitive knowledge in performance of psychomotor and affective domains in their practice as medical assistants in communicating effectively, both orally and in writing.

IV.C Cognitive (Knowledge Base)	IV. P Psychomotor (Skills)	IV. A Affective (Behavior)
<p>IV. Concepts of Effective Communication</p> <ol style="list-style-type: none"> 1. Identify styles and types of verbal communication 2. Identify nonverbal communication 3. Recognize communication barriers 4. Identify techniques for overcoming communication barriers 5. Recognize the elements of oral communication using a sender-receiver process 6. Differentiate between subjective and objective information 7. Identify resources and adaptations that are required based on individual needs, i.e., culture and environment, developmental life stage, language, and physical threats to communication 8. Recognize elements of fundamental writing skills 9. Discuss applications of electronic technology in effective communication 10. Diagram medical terms, labeling the word parts 11. Define both medical terms and abbreviations related to all body systems 12. Organize technical information and summaries 13. Identify the role of self boundaries in the health care environment 14. Recognize the role of patient advocacy in the practice of medical assisting 15. Discuss the role of assertiveness in effective professional communication 16. Differentiate between adaptive and non-adaptive coping mechanisms 	<p>IV. Concepts of Effective Communication</p> <ol style="list-style-type: none"> 1. Use reflection, restatement and clarification techniques to obtain a patient history 2. Report relevant information to others succinctly and accurately 3. Use medical terminology, pronouncing medical terms correctly, to communicate information, patient history, data and observations 4. Explain general office policies 5. Instruct patients according to their needs to promote health maintenance and disease prevention 6. Prepare a patient for procedures and/or treatments 7. Demonstrate telephone techniques 8. Document patient care 9. Document patient education 10. Compose professional/business letters 11. Respond to nonverbal communication 12. Develop and maintain a current list of community resources related to patients' healthcare needs 13. Advocate on behalf of patients 	<p>IV. Concepts of Effective Communication</p> <ol style="list-style-type: none"> 1. Demonstrate empathy in communicating with patients, family and staff 2. Apply active listening skills 3. Use appropriate body language and other nonverbal skills in communicating with patients, family and staff 4. Demonstrate awareness of the territorial boundaries of the person with whom communicating 5. Demonstrate sensitivity appropriate to the message being delivered 6. Demonstrate awareness of how an individual's personal appearance affects anticipated responses 7. Demonstrate recognition of the patient's level of understanding in communications 8. Analyze communications in providing appropriate responses/ feedback 9. Recognize and protect personal boundaries in communicating with others 10. Demonstrate respect for individual diversity, incorporating awareness of one's own biases in areas including gender, race, religion, age and economic status

Medical Business Practices

Medical assistants graduating from programs accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) will demonstrate critical thinking based on knowledge of academic subject matter required for competence in the profession. They will incorporate cognitive knowledge in performance of psychomotor and affective domains in their practice as medical assistants in the performance of medical business practices.

V.C Cognitive (Knowledge Base)	V. P Psychomotor (Skills)	V. A Affective (Behavior)
V. Administrative Functions <ol style="list-style-type: none"> 1. Discuss pros and cons of various types of appointment management systems 2. Describe scheduling guidelines 3. Recognize office policies and protocols for handling appointments 4. Identify critical information required for scheduling patient admissions and/or procedures 5. Identify systems for organizing medical records 6. Describe various types of content maintained in a patient's medical record 7. Discuss pros and cons of various filing methods 8. Identify both equipment and supplies needed for filing medical records 9. Describe indexing rules 10. Discuss filing procedures 11. Discuss principles of using Electronic Medical Record (EMR) 12. Identify types of records common to the healthcare setting 13. Identify time management principles 14. Discuss the importance of routine maintenance of office equipment 	V. Administrative Functions <ol style="list-style-type: none"> 1. Manage appointment schedule, using established priorities 2. Schedule patient admissions and/or procedures 3. Organize a patient's medical record. 4. File medical records 5. Execute data management using electronic healthcare records such as the EMR 6. Use office hardware and software to maintain office systems 7. Use internet to access information related to the medical office 8. Maintain organization by filing 9. Perform routine maintenance of office equipment with documentation 10. Perform an office inventory 	V. Administrative Functions <ol style="list-style-type: none"> 1. Consider staff needs and limitations in establishment of a filing system 2. Implement time management principles to maintain effective office function
VI.C Cognitive (Knowledge Base)	VI. P Psychomotor (Skills)	VI. A Affective (Behavior)
VI. Basic Practice Finances <ol style="list-style-type: none"> 1. Explain basic bookkeeping computations. 2. Differentiate between bookkeeping and accounting 3. Describe banking procedures 4. Discuss precautions for accepting checks. 5. Compare types of endorsement 6. Differentiate between accounts payable and accounts receivable 	VI. Basic Practice Finances <ol style="list-style-type: none"> 1. Prepare a bank deposit 2. Perform accounts receivable procedures, including: <ol style="list-style-type: none"> a. Post entries on a daysheet b. Perform billing procedures c. Perform collection procedures d. Post adjustments 	VI. Basic Practice Finances <ol style="list-style-type: none"> 1. Demonstrate sensitivity and professionalism in handling accounts receivable activities with clients

<ul style="list-style-type: none"> 7. Compare manual and computerized bookkeeping systems used in ambulatory healthcare 8. Describe common periodic financial reports 9. Explain both billing and payment options. 10. Identify procedure for preparing patient accounts 11. Discuss procedures for collecting outstanding accounts 12. Describe the impact of both the Fair Debt Collection Act and the Federal Truth in Lending Act of 1968 as they apply to collections 13. Discuss types of adjustments that may be made to a patient's account 	<ul style="list-style-type: none"> f. Process refunds g. Post non-sufficient fund (NSF) checks. h. Post collection agency payments. 3. Utilize computerized office billing systems 	
VII.C Cognitive (Knowledge Base)	VII. P Psychomotor (Skills)	VII. A Affective (Behavior)
VII. Managed Care/Insurance <ul style="list-style-type: none"> 1. Identify types of insurance plans 2. Identify models of managed care 3. Discuss workers' compensation as it applies to patients 4. Describe procedures for implementing both managed care and insurance plans 5. Discuss utilization review principles. 6. Discuss referral process for patients in a managed care program 7. Describe how guidelines are used in processing an insurance claim 8. Compare processes for filing insurance claims both manually and electronically 9. Describe guidelines for third-party claims 10. Discuss types of physician fee schedules 11. Describe the concept of RBRVS 12. Define Diagnosis-Related Groups (DRGs) 	VII. Managed Care/Insurance <ul style="list-style-type: none"> 1. Apply both managed care policies and procedures 2. Apply third party guidelines 3. Complete insurance claim forms 4. Obtain precertification, including documentation 5. Obtain preauthorization, including documentation 6. Verify eligibility for managed care services 	VII. Managed Care/Insurance <ul style="list-style-type: none"> 1. Demonstrate assertive communication with managed care and/or insurance providers 2. Demonstrate sensitivity in communicating with both providers and patients 3. Communicate in language the patient can understand regarding managed care and insurance plans
VIII.C Cognitive (Knowledge Base)	VIII. P Psychomotor (Skills)	VIII. A Affective (Behavior)
VIII. Procedural and Diagnostic Coding <ul style="list-style-type: none"> 1. Describe how to use the most current procedural coding system 2. Define upcoding and why it should be avoided 3. Describe how to use the most current diagnostic coding classification system 4. Describe how to use the most current HCPCS coding 	VIII. Procedural and Diagnostic Coding <ul style="list-style-type: none"> 1. Perform procedural coding 2. Perform diagnostic coding 	VIII. Procedural and Diagnostic Coding <ul style="list-style-type: none"> 1. Work with physician to achieve the maximum reimbursement

Medical Law and Ethics

Medical assistants graduating from programs accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) will demonstrate critical thinking based on knowledge of academic subject matter required for competence in the profession. They will incorporate cognitive knowledge in performance of psychomotor and affective domains in their practice as medical assistants in providing patient care in accordance with regulations, policies, laws and patient rights.

IX.C Cognitive (Knowledge Base)	IX. P Psychomotor (Skills)	IX. A Affective (Behavior)
<p>IX. Legal Implications</p> <ol style="list-style-type: none"> 1. Discuss legal scope of practice for medical assistants 2. Explore issue of confidentiality as it applies to the medical assistant. 3. Describe the implications of HIPAA for the medical assistant in various medical settings 4. Summarize the Patient Bill of Rights 5. Discuss licensure and certification as it applies to healthcare providers 6. Describe liability, professional, personal injury, and third party insurance 7. Compare and contrast physician and medical assistant roles in terms of standard of care 8. Compare criminal and civil law as it applies to the practicing medical assistant. 9. Provide an example of tort law as it would apply to a medical assistant 10. Explain how the following impact the medical assistant's practice and give examples <ol style="list-style-type: none"> a. Negligence b. Malpractice c. Statute of Limitations d. Good Samaritan Act(s) e. Uniform Anatomical Gift Act f. Living will/Advanced directives g. Medical durable power of attorney 11. Identify how the Americans with Disabilities Act (ADA) applies to the medical assisting profession 12. List and discuss legal and illegal interview questions 13. Discuss all levels of governmental legislation and regulation as they apply to medical 	<p>IX. Legal Implications</p> <ol style="list-style-type: none"> 1 Respond to issues of confidentiality 2 Perform within scope of practice 3 Apply HIPAA rules in regard to privacy/release of information 4 Practice within the standard of care for a medical assistant 5. Incorporate the Patient's Bill of Rights into personal practice and medical office policies and procedures 6 Complete an incident report 7 Document accurately in the patient record 8 Apply local, state and federal health care legislation and regulation appropriate to the medical assisting practice setting 	<p>IX. Legal Implications</p> <ol style="list-style-type: none"> 1. Demonstrate sensitivity to patient rights 2. Demonstrate awareness of the consequences of not working within the legal scope of practice 3. Recognize the importance of local, state and federal legislation and regulations in the practice setting

assisting practice, including FDA and DEA regulations 14. Describe the process to follow if an error is made in patient care		
X.C Cognitive (Knowledge Base)	X. P Psychomotor (Skills)	X. A Affective (Behavior)
X. Ethical Considerations <ol style="list-style-type: none"> 1. Differentiate between legal, ethical, and moral issues affecting healthcare 2. Compare personal, professional and organizational ethics 3. Discuss the role of cultural, social and ethnic diversity in ethical performance of medical assisting practice 4. Identify where to report illegal and/or unsafe activities and behaviors that affect health, safety and welfare of others. 5. Identify the effect personal ethics may have on professional performance 	X. Ethical Considerations <ol style="list-style-type: none"> 1. Report illegal and/or unsafe activities behaviors that affect health, safety and welfare of others to proper authorities 2. Develop a plan for separation of personal and professional ethics 	X. Ethical Considerations <ol style="list-style-type: none"> 1. Apply ethical behaviors, including honesty/integrity in performance of medical assisting practice 2. Examine the impact personal ethics and morals may have on the individual's practice 3. Demonstrate awareness of diversity in providing patient care

Safety and Emergency Practices

Medical assistants graduating from programs accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) will demonstrate critical thinking based on knowledge of academic subject matter required for competence in the profession. They will incorporate cognitive knowledge in performance of psychomotor and affective domains in their practice as medical assistants, applying quality control measures in following health and safety policies and procedures to prevent illness and injury.

X.C Cognitive (Knowledge Base)	X. P Psychomotor (Skills)	X. A Affective (Behavior)
<p>XI. Protective Practices</p> <ol style="list-style-type: none"> Describe personal protective equipment Identify safety techniques that can be used to prevent accidents and maintain a safe work environment Describe the importance of Materials Safety Data Sheets (MSDS) in a healthcare setting Identify safety signs, symbols and labels State principles and steps of professional/provider CPR Describe basic principles of first aid Describe fundamental principles for evacuation of a healthcare setting Discuss fire safety issues in a healthcare environment Discuss requirements for responding to hazardous material disposal Identify principles of body mechanics and ergonomics. Discuss critical elements of an emergency plan for response to a natural disaster or other emergency Identify emergency preparedness plans in your community Discuss potential role(s) of the medical assistant in emergency preparedness 	<p>XI. Protective Practices</p> <ol style="list-style-type: none"> Comply with safety signs, symbols and labels. Evaluate the work environment to identify safe vs. unsafe working conditions. Develop a personal (patient and employee) safety plan. Develop an environmental safety plan. Demonstrate proper use of the following equipment: <ol style="list-style-type: none"> Eyewash Fire extinguishers Sharps disposal containers Participate in a mock environmental exposure event with documentation of steps taken. Explain an evacuation plan for a physician's office Demonstrate methods of fire prevention in the healthcare setting Maintain provider/professional level CPR certification. Perform first aid procedures Use proper body mechanics Maintain a current list of community resources for emergency preparedness 	<p>XI. Protective Practices</p> <ol style="list-style-type: none"> Recognize the effects of stress on all persons involved in emergency situations Demonstrate self awareness in responding to emergency situations