

***Medical Assisting Administrative and Clinical
Competencies 9th edition Blesi Solutions Manual***

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Solution and Answer Guide

Blesi, Medical Assisting, 2022; 9780357502815; Chapter 01: The Medical Assistant, Health Care Team, and Medical Environment

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Content Type

Check Your Understanding (from End of Chapter questions)

1. To be successful as an MA, you must learn a specific:
 - a. knowledge base.
 - b. set of skills.
 - c. set of behaviors.
 - d. all of these

ANS: d

Analysis:

- a. *Incorrect. As an MA, you must learn a knowledge base, a set of skills, and a set of behaviors to be successful.*
 - b. *Incorrect. As an MA, you must learn a knowledge base, a set of skills, and a set of behaviors to be successful.*
 - c. *Incorrect. As an MA, you must learn a knowledge base, a set of skills, and a set of behaviors to be successful.*
 - d. **Correct.** *As an MA, you must learn all of these – a knowledge base, a set of skills, and a set of behaviors - to be successful.*
2. All of the following are clinical skills EXCEPT:
 - a. Filing patient records
 - b. Phlebotomy
 - c. Administering medications
 - d. Wrapping instruments

ANS: a

Analysis:

- a. **Correct.** *The filing of patient records is an administrative skill.*
 - b. *Incorrect. Phlebotomy is a clinical skill. The filing of patient records is an administrative skill.*
 - c. *Incorrect. Administering medications is a clinical skill. The filing of patient records is an administrative skill.*
 - d. *Incorrect. Wrapping instruments is a clinical skill. The filing of patient records is an administrative skill.*
3. A system where patients pay an added fee in exchange for more personalized care and better access to their providers for medical services is referred to as which type of service?
 - a. PCMH
 - b. ACO
 - c. boutique
 - d. managed care

ANS: c

Analysis:

- a. *Incorrect. PCMH is a patient-centered medical home. This is a model of care where doctors, hospitals, and healthcare providers work to provide high-quality care to their Medicare patients.*
 - b. *Incorrect. ACO is an accountable care organization. This is a model of care where doctors, hospitals, and healthcare providers work to provide high-quality care to their Medicare patients.*
 - c. **Correct.** *A boutique system is where patients pay an added fee in exchange for more personalized care and better access to their providers for medical services.*
 - d. *Incorrect. Managed care refers to care plans where the providers follow rules to keep care costs down.*
4. Employment opportunities for medical assistants are expected to do which of the following through 2028?
- a. grow
 - b. decline
 - c. stay consistent
 - d. be eliminated

ANS: a

Analysis:

- a. **Correct.** *Employment opportunities for medical assistants are expected to grow through 2028.*
 - b. *Incorrect. Employment opportunities for medical assistants are expected to grow through 2028.*
 - c. *Incorrect. Employment opportunities for medical assistants are expected to grow through 2028.*
 - d. *Incorrect. Employment opportunities for medical assistants are expected to grow through 2028.*
5. Which of the following organizations provides the RMA credential?
- a. AAMA
 - b. AMT
 - c. AAPC
 - d. NHA

ANS: b

Analysis:

- a. *Incorrect. The AAMA provides the CMA (AAMA) credential.*
- b. **Correct.** *The AMT provides the RMA credential. The AAMA provides the CMA (AAMA) credential.*

- c. *Incorrect. The AAPC provides certification to professional coders. The AAMA provides the CMA (AAMA) credential.*
 - d. *Incorrect. The NHA is an association for those working in healthcare. The AAMA provides the CMA (AAMA) credential.*
6. Which of the following defines the role of the patient advocate or navigator?
- a. drives the patient to appointments
 - b. assists the patient or acts on behalf of the patient
 - c. acts on behalf of the provider
 - d. keeps the patients' medical records

ANS: b

Analysis:

- a. *Incorrect. Driving the patient to their appointments is outside the role of the patient advocate or navigator. The patient advocate or navigator assists the patient or acts on behalf of the patient.*
 - b. **Correct.** *The patient advocate or navigator assists the patient or acts on behalf of the patient.*
 - c. *Incorrect. The patient advocate or navigator does not act on behalf of the provider. The patient advocate or navigator assists the patient or acts on behalf of the patient.*
 - d. *Incorrect. While keeping a copy of the patient's medical records may be part of the role of the advocate or navigator, their main role is to assist the patient or act on behalf of the patient. The patient advocate or navigator assists the patient or acts on behalf of the patient.*
7. Which of the following describes the role of an ACO?
- a. Provides health care with an emphasis on prevention.
 - b. A group of doctors, hospitals, and other health care providers, like the PCMH model who together coordinate high-quality care to their Medicare patients.
 - c. A system of health care that integrates the delivery and payment of health care for covered persons (patients, or subscribers) by contracting with selected providers for comprehensive health care services at a reduced cost.
 - d. Care centers that take care of patients with acute illness or injury and those with minor emergencies.

ANS: b

Analysis:

- a. *Incorrect. Many health care organizations provide care with an emphasis on prevention. An Accountable Care Organization (ACO) is a group of doctors, hospitals, and other health care providers, similar to the PCMH model. Together, these models coordinate to provide high-quality care to their Medicare patients.*
- b. **Correct.** *An Accountable Care Organization (ACO) is a group of doctors, hospitals, and other health care providers, similar to the PCMH model. Together, these models coordinate to provide high-quality care to their Medicare patients.*

- c. *Incorrect. A system where providers contract to reduce costs is an HMO. An Accountable Care Organization (ACO) is a group of doctors, hospitals, and other health care providers, similar to the PCMH model. Together, these models coordinate to provide high-quality care to their Medicare patients.*
 - d. *Incorrect. Care centers that take care of minor emergencies are acute care clinics. An Accountable Care Organization (ACO) is a group of doctors, hospitals, and other health care providers, similar to the PCMH model. Together, these models coordinate to provide high-quality care to their Medicare patients.*
8. What is the name of the physician specialist who looks after patients admitted to the hospital?
- a. physician partner
 - b. hospitalist
 - c. physiatrist
 - d. hospital physician

ANS: b

Analysis:

- a. *Incorrect. A physician partner refers to physicians who work together as partners in a clinic setting. A hospitalist is a physician specialist who looks after patients admitted to the hospital.*
 - b. **Correct.** *A hospitalist is a physician specialist who looks after patients admitted to the hospital.*
 - c. *Incorrect. A physiatrist is a physician that specializes in physical medicine and rehabilitation. A hospitalist is a physician specialist who looks after patients admitted to the hospital.*
 - e. *Incorrect. A hospital physician refers to a physician seeing patients in the hospital. This is not the same as a hospitalist who looks after patients once admitted to the hospital.*
9. Which of the health care professional uses radionuclides to diagnose and treat diseases?
- a. radiological technician
 - b. radiologist
 - c. ultrasound technician
 - d. nuclear medicine technologist

ANS: d

Analysis:

- a. *Incorrect. A radiological technician is a person that takes x-rays. A nuclear medicine technologist administers radiopharmaceuticals to patients and then scans the body with a special camera to observe how the pharmaceuticals concentrate in specific organs.*
- b. *Incorrect. A radiologist is a physician that reads and interprets x-rays. A nuclear medicine technologist administers radiopharmaceuticals to patients and then scans the body with a special camera to observe how the pharmaceuticals concentrate in specific organs.*

- c. *Incorrect. An ultrasound technician uses ultrasound to collect images from inside the body. A nuclear medicine technologist administers radiopharmaceuticals to patients and then scans the body with a special camera to observe how the pharmaceuticals concentrate in specific organs.*
 - d. **Correct.** *A nuclear medicine technologist administers radiopharmaceuticals to patients and then scans the body with a special camera to observe how the pharmaceuticals concentrate in specific organs.*
10. Which type of **Complementary Medicine** identifies three types of energies that are present in all things?
- a. ayurvedic medicine
 - b. biofeedback
 - c. acupuncture
 - d. homeopathy

ANS: a

Analysis:

- a. **Correct.** *Ayurvedic medicine identifies three types of energies that are present in all things.*
- b. *Incorrect. Biofeedback is a mind-body technique that involves the use of visual or auditory feedback to control certain bodily functions. Ayurvedic medicine identifies three types of energies that are present in all things.*
- c. *Incorrect. Acupuncture is the use of needles following Chinese medicine. Ayurvedic medicine identifies three types of energies that are present in all things.*
- d. *Incorrect. Homeopathy refers to natural, non-medicinal care. Ayurvedic medicine identifies three types of energies that are present in all things.*

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Instructor Manual: Blesi, Medical Assisting, 9e, ISBN 9780357502815; Chapter 1: The Medical Assistant, Health Care Team, and Medical Environment

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Purpose and Perspective of the Chapter

The purpose of this chapter is to explore the skills and responsibilities of the medical assistant; discuss various credentialing opportunities; discuss the providers, midlevel practitioners, and allied health professionals who comprise the health care team; and investigate the various types of medical establishments in which these professionals work.

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Cengage Supplements

The following product-level supplements provide additional information that may help you in preparing your course. They are available in the Instructor Resource Center.

- Transition Guide: Blesi 8th Edition Update to 9th Edition
- CAAHEP Competency Mapping
- ABHES Competency Mapping
- Educator's Guide
- Guide to Teaching Online
- Medical Assisting Exam Review Online (MAERO) 3.0 Instructor Guide
- Medical Office Simulation Software (MOSS) 3.0 Instructor Guide
- Instructor Guide to Creating and Managing CNOW Assignments in MindTap
- Comprehensive Cognero Instructor Guide

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ABHES Curriculum

The following curriculum requirements are addressed in this chapter:

- MA.A.1.1.a Describe the current employment outlook for the medical assistant
- MA.A.1.1.b Compare and contrast the allied health professions and understand their relation to medical assisting
- MA.A.1.1.c Describe and comprehend medical assisting credentialing requirements, the process to obtain the credential and the importance of credentialing
- MA.A.1.1.d List the general responsibilities and skills of the medical assistant
- MA.1.1.5.c Assist the patient in navigating issues and concerns that may arise (i.e., insurance policy information, medical bills, and physician/provider orders)

CAAHEP Core Curriculum

The following core curriculum requirements are addressed in this chapter:

- V.A.2 Demonstrate the principles of self-boundaries
- V.C.11 Define the principles of self-boundaries
- V.C.12 Define patient navigator
- V.C.13 Describe the role of the medical assistant as a patient navigator
- X.C.5 Discuss licensure and certification as they apply to health care providers
- VIII.C.4 Define a patient-centered medical home (PCMH)

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Chapter Objectives

The following objectives are addressed in this chapter:

- 1.01 Spell and define, using the glossary, all the Words to Know in this chapter.
- 1.02 Describe the role of the medical assistant.
- 1.03 List the general responsibilities and skills of the medical assistant.
- 1.04 Define patient navigator.
- 1.05 Describe the role of the medical assistant as a patient navigator.
- 1.06 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.
- 1.07 Partner with health care teams to attain optimal patient health outcomes.
- 1.08 Define the principles of self-boundaries.
- 1.09 Describe the current employment outlook for the medical assistant.
- 1.10 Summarize licensure, accreditation, certification, and registration.
- 1.11 Identify the various types of medical centers.
- 1.12 Describe alternatives to the traditional medical model.
- 1.13 Compare licensure and certification requirements of allied health professionals.

1.15 Explain how the medical assistant will work alongside various types of allied health professions.

1.16 Describe the role of government legislation and organizations in health care.

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Complete List of Chapter Activities and Assessments

For additional guidance refer to the Teaching Online Guide.

- Check Your Understanding
- MindTap: Concept Check 1.1
- MindTap: Concept Check 1.2
- MindTap: Learning Lab: Health Care Roles and Responsibilities
- MindTap: Video Quiz: Qualities of a Successful Medical Assistant
- MindTap: Quiz
- Student Workbook: Words to Know Challenge
- Student Workbook: Chapter Review
- Student Workbook: Chapter Application

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Key Terms

Accreditation. A process in which an educational institution or program establishes credibility or legitimacy by complying with predetermined standards.

Accrediting Bureau of Health Education Schools (ABHES). An accrediting body that provides programmatic accreditation for medical assisting and other health care programs.

Acupuncture. Involves the insertion of needles at various points in the body to treat disease or relieve pain.

Administrative skills. Skills that help to manage the business affairs of a medical practice and include two categories—administrative procedures and practice finances.

Advocate. One who assists the patient or acts on the patient's behalf.

American Academy of Professional Coders (AAPC). An organization that promotes professionalism and encourages and supports education, networking, and certification in the medical billing and coding areas.

American Association of Medical Assistants (AAMA). A professional organization for medical assistants that certifies medical assistants and provides continuing education.

Ayurvedic medicine. Traditional healing system of India that addresses mental and spiritual well-being and physical health. Ayurveda identifies three types of energies that are present in all things: vata, pitta, and kapha and believes that imbalances in any of these areas can cause disease.

Biofeedback. A method that enables a person, usually with the help of electronic equipment, to learn to control otherwise involuntary bodily functions.

Certified Clinical Medical Assistant (CCMA). Credential given by the National Healthcare Association (NHA) after eligible candidates pass the certification exam.

Certified Medical Administrative Assistant (CMAA). Credential given by the National Healthcareer Association (NHA) after eligible candidates pass the certification exam.

Certified Medical Assistant, CMA (AAMA). The credential given by the American Association of Medical Assistants (AAMA) to eligible candidates who pass the CMA (AAMA) examination.

Clinical skills. These are skills that are an extension of the provider's responsibilities and can be divided into fundamental practices, diagnostic procedures, and patient care.

Commission on Accreditation of Allied Health Education Programs (CAAHEP). An accrediting body that provides programmatic accreditation for medical assisting and other health care programs.

Complementary alternative medicine (CAM). Treatments used in addition to traditional care or therapies.

Doctor of osteopathic medicine (DO). A doctor licensed by the state to practice medicine. These practitioners place special emphasis on the body's musculoskeletal and nervous systems, preventive medicine, holistic patient care, and patient education.

Doctor of medicine (MD). An individual who has met all the requirements in the state to become licensed as a medical doctor.

Doctorate. Persons who hold doctoral degrees have attained advanced knowledge through higher education in disciplines such as nursing, mathematics, education, chemistry, philosophy, and so on and have the right to be addressed as doctor.

Epidemic. A disease affecting large numbers of individuals in a population.

General skills. The skills that are necessary regardless of whether one is working in a clinical or administrative capacity. They include legal functions, communication skills, the ability to deliver education and operational functions.

Hippocratic oath. An oath historically taken by new physicians, requiring them to swear to uphold specific ethical standards. It is considered a rite of passage for practitioners of medicine in many countries. A new modernized version is mostly used nowadays.

Homeopathy. A 200-year-old system of medicine based on the Law of Similars. This means that if a dose of a substance can cause a symptom, that same substance in minuscule amounts can cure the symptom.

Hospitalist. Works with patients admitted to the hospital. These individuals work in many different departments and reduce the load of hospital visits for the primary care provider and specialist.

Magnet therapy. A therapy that involves placing small magnets close to the skin in order to correct an imbalance.

Medical assistant. An integral member of the health care delivery team, qualified by education and experience to work in the administrative office, the examining room, and the physician office laboratory.

Medical biller. Creates a billing statement listing all charges the patient has incurred for services rendered and sends the bill to the patient, insurance company, or attorney.

Medical coder. Uses an alphanumeric coding system for all diagnoses and all procedures in a manner that results in the maximum reimbursement for the provider and in fewer fees billed to the patient.

Medical office manager. Supervises members of the medical office staff, coordinates schedules, performs human resource functions, and oversees the daily operations of the office.

Midlevel practitioner. A health care provider such as a nurse practitioner or physician's assistant. They are able to examine patients, order diagnostic tests, and prescribe certain types of medications. Activities for midlevel practitioners are usually directed and/or dictated by a supervising physician.

Multi-provider clinic. Group practice, which consists of three or more physicians who share a facility for the purpose of practicing medicine.

National Center for Competency Testing (NCCT). A national certifying organization that certifies medical assistants and other health care professionals after successful completion of a certification exam.

National Certified Medical Assistant (NCMA). The credential given by the National Center for Competency Testing to successful candidates who pass the NCMA exam.

National Healthcareer Association (NHA). NHA provides products and services to health care professionals, including continuing education, program development, career and networking services, and 10 certification exams for several allied health care area, including Certified Clinical Medical Assistant (CCMA) and Certified Medical Administrative Assistant (CMAA).

Naturopathy. A multidisciplinary approach to health care based on the belief that the body has power to heal itself. Treatment is based on assessment of the correct diet, rest, relaxation, exercise, fresh air, clean water, and sunlight the patient is receiving.

Nurse anesthetist. An RN that is certified to administer anesthesia.

Nurse midwife. A professional RN who has had extensive training and experience in labor and delivery.

Nurse practitioner (NP). A midlevel practitioner who is able to examine patients, order diagnostic tests, and prescribe certain types of medications. Usually supervised by a physician but may work independently in some states.

Partnership. Two or more physicians who have a legal agreement to share in the total business operation of the practice.

Patient-centered medical home (PCMH). A team-based model of care led by a personal physician who provides continuous and coordinated care throughout a patient's lifetime to maximize health outcomes.

Patient navigator. Explaining insurance policy information, financial information, taking complaints from patients and helping patients understand their medical rights.

Patient Protection and Affordable Care Act. Passed by Congress in 2010, signed into law by President Obama, the most sweeping piece of health care legislation in decades. Originally titled the Patient Protection and Affordable Care Act (PPACA; later shortened to ACA), and commonly known as Obamacare.

Phlebotomists. Health care workers who specialize in obtaining blood samples.

Physician assistants (PAs). Midlevel practitioners who are able to examine patients, order diagnostic tests, and prescribe certain types of medications. Usually supervised by a physician.

Placebo effect. Refers to the fact that some people respond favorably to a known ineffective treatment because they believe it is working.

Provider. (1) The person who oversees the patient's health care; often a physician, physician's assistant, or nurse practitioner (Ch 1); (2) an individual licensed to examine

Reciprocity. A physician who has been licensed in one state and wishes to move to another state may be granted a license by reciprocity if it is determined that the original licensure requirements are equal to or more stringent than the requirements of the new state.

Registered Medical Assistant, RMA (AMT). The credential the American Medical Technologists (AMT) issues to eligible candidates who successfully pass the RMA examination.

Revocation. Temporary or permanent suspension of a license.

Scope of practice. Principles of self-boundaries of the profession.

Scribe. A person who documents by hand or enters data into the EHR as a profession and helps providers keep track of records.

Solo practice. When an individual provider/physician makes all the decisions for the practice.

Tact. Having the ability to perceive a situation and know the right thing to say or do. Tact is especially difficult and important when dealing with ill people.

Urgent care center. Ambulatory care centers that take care of patients with acute illness or injury and those with minor emergencies. Used quite often when patients can't get in to see their own provider.

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What's New in This Chapter

The following elements are improvements in this chapter from the previous edition:

- The 8th edition chapters "Chapter 1: The Medical Assistant" and "Chapter 2: The Health Care Team and the Medical Environment, Past and Present" have been combined.
- Updated learning objectives
- Updated figures/images
- Added content about medical scribing
- The 8th edition Procedure 1–1 has been moved out of this chapter and into 9th edition Chapter 2: Professionalism.
- Reduced content about the history of medicine

Chapter Outline

I. THE ROLE OF THE MEDICAL ASSISTANT

- i. Most versatile allied health occupation in today's environment
- ii. An integral member of the health care delivery team
- iii. Liaison between doctor and the patient
- iv. To become a successful medical assistant, must acquire specific:
 - 1. Knowledge base (theory)
 - 2. Skills (procedures)
 - 3. Behaviors (professional characteristics or attitudes)

A. Is Medical Assisting Right for You? (Sample questions from the AAMA)

- i. Are you looking for a meaningful job?
- ii. Do you like helping others?
- iii. Do you have an interest in health and medicine?
- iv. Are you a people person?
- v. Are you good at multitasking?
- vi. Do you like variety in your job?
- vii. Would you like to enter a career in an expanding field?

B. Knowledge, Skills, and Responsibilities of the Medical Assistant

- i. As health care progresses, so do the knowledge, skills, and responsibilities of the medical assistant.
- ii. AAMA routinely completes an occupational analysis to identify critical responsibilities performed by medical assistants (most updated version can be found on their website).
- iii. There are three broad content areas: General, Administrative, and Clinical.

C. General Skills

- i. General skills of a medical assistant are necessary whether you are working in a clinical or administrative capacity.
- ii. They include areas of psychology, communication, professionalism, medical law/regulatory guidelines, medical ethics, risk management, quality assurance, and safety and medical terminology. Some skills are highlighted below:

D. Administrative Skills

- i. Helps manage the business affairs of the practice
 - 1. Medical reception
 - 2. Patient navigator/advocate
 - 3. Medical business practices
 - 4. Establishing patient medical records
 - 5. Scheduling appointments
 - 6. Practice finances
 - 7. Examples of skills in these categories include:
 - a. Medical record preparation
 - b. Demographic data review
 - c. Providing resource information
 - d. Office supply inventory
 - e. Equipment maintenance
 - f. Accounts receivable/payable, payment receipts
 - g. Manage petty cash
 - h. CPT/ICD-CM coding
 - i. Insurance claims

E. Clinical Skills (Vary by state laws)

- i. An extension of the provider's assessment, examination, diagnosis, and treatment
 - 1. Anatomy and physiology
 - 2. Infection control
 - 3. Patient intake and documentation of care
 - 4. Patient preparation and assisting the provider
 - 5. Nutrition
 - 6. Collecting and processing specimens
 - 7. Diagnostic testing
 - 8. Pharmacology
 - 9. Emergency management/basic first aid
 - 10. Examples of skill in these categories include:

- d. Collecting and processing specimens
- e. Performing lab tests
- f. Performing EKGs
- g. Administering medications
- h. Performing phlebotomy procedures
- i. Performing patient screenings
- j. Preparing patients for examinations, procedures, and treatments
- k. Responding to emergencies
- ii. Many medical assistants work as generalists, meaning they perform both clinical and administrative duties.

F. Boundaries of Medical Assistants: Refer to Scope of Practice (Figure 1–4).

II. MEDICAL ASSISTANT WORK ENVIRONMENT

- i. Medical assistants work in a variety of settings with the majority in ambulatory care settings.

A. Solo Practices

B. Partnerships

C. Multi-Provider Clinics

D. Urgent Care Centers

E. Care Operations

F. Accountable Care Organization (ACO)

G. Hospitals

H. Patient-Centered Medical Home (PCMH)

I. Job Outlook for Medical Assistants

- ii. According to U.S. Department of Labor, Bureau, and Statistics, medical assisting is expected to grow by 28 percent through the year 2028.

III. PROFESSIONAL ORGANIZATIONS FOR MEDICAL ASSISTANTS

- i. A variety of organizations, which include credentialing opportunities and continuing education opportunities, provide professional services for medical assistants.

A. Accreditation

- i. Accreditation is a process by which an educational institution or program establishes credibility or legitimacy by complying with predetermined standards.

- iii. Two organizations specifically accredit medical assistants:
 - 1. Commission on Accreditation of Allied Health Education Programs (CAAHEP)
 - 2. Accrediting Bureau of Health Education Schools (ABHES)

B. American Association of Medical Assistants

- i. Traces its roots to 1955
- ii. Has a monthly magazine called CMA Today
 - 1. Certification Examination
 - a. Offers the Certified Medical Assistant credential or CMA (AAMA)
 - b. Must have graduated from a medical assisting program accredited by CAAHEP or ABHES
 - c. Must take exam at an approved Prometric Testing Center
 - d. Each candidate has a 90-day window to take the exam.
 - e. All newly and recertifying CMA (AAMA) are considered current for 60 months following the end of the calendar month of their initial certification or recent recertification.
 - f. Certified medical assistants must earn 60 CEUs every five years: 10 administrative; 10 clinical; 10 general; 30 from any combination of categories.

C. American Medical Technologists

- i. Founded in 1939
- ii. Certification and membership society for several allied health professionals, including Medical assistants; Medical laboratory technologists and technicians; Phlebotomists; Medical lab assistants; Medical administrative specialists; Others publications include AMT Events and Journal of CE Topics and Issues
 - 1. Certification Examination
 - a. Awards the title of Registered Medical Assistant RMA (AMT)
 - b. Must have graduated from a program accredited by a recognized accrediting body if certifying via the educational route
 - c. Can take exam at any Pearson VUE Testing Center
 - d. Must recertify every three years by receiving the appropriate number of CEUs

D. National Center for Competency Testing

- i. National certification agency that has been in existence since 1989
- ii. Organization certifies: Medical assistants; Phlebotomists; Patient care technicians; Medical office assistants; Insurance and coding specialists; ECG technicians; Other health care specialists
 1. Certification Examination
 - a. Credentials for medical assistants include:
 - National Certified Medical Assistant (NCMA)
 - National Certified Medical Office Assistant (NCMOA)
 - b. Must have graduated from an NCCT-approved medical assisting program or qualified through the experience route
 - c. Renewal process every five years
 - d. Must obtain a minimum of 14 clock hours of education per year

E. National Healthcareer Association

- i. Established in 1989 as a certification agency
- ii. Provides products and services to health care professionals including eight certification exams for several allied health care areas
- iii. Medical assisting certifications, including Certified Clinical Medical Assistant (CCMA); Certified Medical Administrative Assistant (CMAA)
 1. Certification Examinations
 - a. Must be a graduate of an NHA-approved school
 - b. Exams given at NHA-approved testing sites

F. American Academy of Professional Coders

- i. Founded in 1988
- ii. Promotes professionalism and encourages support education, networking, and certification in the medical billing and coding areas
- iii. Offers training in the billing and coding areas
- iv. Publishes periodicals
- v. Offers several types of certifications, including the following Certified Professional Coder specialty credentials: CPC (Physician Practice); CPC-H (Outpatient Hospital/Facility); CPC-P (Payer); Other certifications available as well

IV. A BRIEF HISTORY OF MEDICINE

- i. To understand fully the high technical level of current health care and the responsibilities of those who provide it, we must look back at its history and learn how it developed.
- ii. Hippocrates was founder of scientific medicine.
 - 1. Took medicine out of the realm of priests and philosophers and produced an organized method of gaining knowledge
 - 2. Taught illness was the result of natural causes, not punishment for sins
 - 3. Advocated examining a patient's home environment and place of work
 - 4. Stressed the importance of diet and cleanliness
 - 5. Discovered that the course of certain diseases could be traced by listening to the chest (2,000 years before the stethoscope)
 - 6. Studied with the most distinguished teachers of the day
 - 7. Wrote many detailed studies, among which are ones on prognostics, fractures, and surgery
 - 8. Best known for his code of behavior known as the Hippocratic oath (Figure 1–9)

A. Medical Schools

- i. An outstanding medical school was established in Salerno, Italy, around AD 850. Open to men and women of all nationalities.
- ii. The school could use a sound basis for teaching because it was not associated with the Church.
- iii. By the twelfth century, it had a highly organized curriculum upon which students were examined and issued degrees to become the first true doctors.
- iv. Both anatomy and physiology were taught, but were still based on animal dissection.
- v. Other medical schools followed, but again religious and scholarly factions prohibited advancement.
- vi. Medical teaching was predominantly oral because books were scarce—the medical school in Paris had only about 12 books at end of fourteenth century.

B. Alternatives to the Traditional Medical Model

- iii. Different types of therapies include:
 - 1. Complementary alternative medicine (CAM): treatments considered to supplement or add to the conventional form of medicine. Examples include:
 - a. Acupuncture
 - b. Acupressure
 - c. Hypnosis
 - d. Massage
 - e. Alternative therapy: method of treatment used instead of conventional medicine
 - f. Often not validated by research
 - g. No scientific evidence
 - h. Some claims to cure but without scientific study, placebo effect cannot be ruled out
- iv. National Center for Complementary and Alternative Medicine defines complementary and alternative therapies as “medical practices that are not commonly used, accepted, or available in conventional medicine.”
- v. Currently, effort being made by medical science to become more knowledgeable regarding these therapies.
- vi. Refer to Table 1–1 for a listing of complementary or alternative therapies.

V. HEALTH CARE PROVIDERS

- i. A health care provider is an individual licensed to examine, diagnose, and prescribe treatment to patients seeking assistance.
- ii. An organization such as a hospital or clinic may also be referred to as a health care provider.
- iii. Physicians are the most common health care providers.

A. Physicians

- i. A physician is trained to practice medicine. The practice of medicine includes the following components:
 - 1. Art and science of diagnosis
 - 2. Treatment and prevention of disease
 - 3. Maintenance of good health
- ii. Physician training includes the following.

3. Three to eight years of internship and residency
 - a. Licensure requirements for physicians include the following:
 - Be of legal age
 - Be of good moral character
 - Have graduated from an approved medical school
 - Have completed an approved residency program or its equivalent
 - Be a resident of the state in which the physician is practicing
 - Have passed all sections of the United States Medical Licensing Examination (USMLE) prior to receiving a full medical license
 - State Medical Board or Special Review Committee has power to revoke a medical license.
 - A physician may have a license revoked for the following:
 - Conviction of a crime
 - Unprofessional conduct
 - Fraud
 - Incompetence

B. Doctor of Medicine and Doctor of Osteopathic Medicine

- i. Doctor of Medicine (MD) and Doctor of Osteopathic Medicine (DO)
- ii. Holders of either degree have similar educational requirements, are licensed physicians, and may use all accepted methods of treatment.
- iii. The difference in the degrees originates from different schools of thought.
- iv. DOs place special emphasis on the body's musculoskeletal and nervous systems, preventive medicine, and holistic patient care and education.
- v. In the United States, both MDs and DOs perform the same duties, and both must pass a licensing exam by their respective boards to practice medicine.

C. General or Family Practice

- i. General or family practitioners
- ii. See all types of patients
- iii. Generally, refer patients to specialists when the patient's symptoms are beyond the skills of the general or family practitioner

D. Physician Specialties

- iv. Some physicians go into subspecialties.
- v. Refer to Table 1–2 for complete list of physician specialties.

E. Non-Physician Specialties

- i. Several health specialists are not physicians but are referred to as specialists.
- ii. Refer to Table 1–3 for a list of nonphysician specialists.
- iii. The word *doctor* is a Latin term that means to teach.
- iv. Someone who holds a doctorate degree or PhD has attained the highest degree awarded by a college in their particular discipline and may be addressed as Doctor.

F. Midlevel Practitioners

- i. Midlevel practitioners
- ii. Health care providers such as nurse practitioners and physician assistants are sometimes referred to as midlevel practitioners.
- iii. They are able to:
 - 1. Examine patients
 - 2. Order diagnostic testing
 - 3. Prescribe certain types of medication
 - 4. Activities for a midlevel practitioner are usually directed and/or dictated by supervising physician, although in some states, nurse practitioners have more autonomy and can work independently of a physician.

G. Nurses

- i. The American Nurses Association (ANA) describes nursing as the following: Nursing is the protection, promotion, and optimization of health and abilities, prevention of illness and injury, alleviation of suffering through the diagnosis and treatment of human response, and advocacy in the care of individuals, families, communities, and populations.
- ii. Several types of nurses
 - 1. Registered Nurse (RN)
 - a. Successfully completed a course of study at a state-approved school of nursing
 - b. Passed the National Council Licensure Examination (NCLEX-RN)
 - c. Is licensed to practice medicine by the individual state
 - d. Works in a variety of health care settings such as hospitals,

2. Nurse Anesthetist (CRNA)
 - a. An RN certified to administer anesthesia
 - b. CRNA stands for certified registered nurse anesthetist
 - c. Must complete anesthesia training
 - d. Works in hospitals, ambulatory surgical centers, and a host of other surgical environments
3. Nurse Midwife
 - a. RN who has had extensive training and experience in labor and delivery
 - b. Works in a variety of settings similar to other nurses
4. Licensed Practical Nurse
 - a. Has fundamentals of basic nursing
 - b. Works under the supervision of a doctor or registered nurse

VI. HEALTH CARE TEAM MEMBERS

- i. Many other health professionals provide services for patients.
- ii. They work in a variety of health care settings.
- iii. Be familiar with the role of these other team members.
- iv. Knowing the role of these professionals enables you to speak more intelligently with other team members and become more efficient with your role as a medical assistant.
- v. Refer to Table 1–4 for a list of health care team members and their descriptions.

VII. THE IMPACT OF GOVERNMENT ON HEALTH CARE

- i. Federal government provided much impetus and influence in the growth of medicine through funding, grants, and regulations.
- ii. Refer to Table 1–5 for the list of organizations and legislation affecting delivery of health care.

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Additional Activities and Assignments

1. **Professional Organizations Comparison Paper:** Have students research three professional organizations and compare and contrast each one by writing a paper describing similarities and differences of each organization.

3. **Attend Professional Organization Meetings:** Encourage students to attend some local, state, and national meetings of the professional organization with which your school is affiliated. Give bonus points for attending these meetings and have students share their observations from the meetings.
4. **Medical Facility Tour:** Take students on some tours of facilities in which medical assistants work. Have them write a paper about their observations.
5. **Medical Assistant Interview:** Have students interview medical assistants in the field and in pairs share their findings with other classmates.
6. **Alternative Medicine Observation:** Assign students a shadow day in which they have to find a practitioner who practices alternative medicine. Have them spend a day with the practitioner and write a synopsis of their experience. Have them share their findings with the class.
7. **Alternative Medicine Speakers:** Invite practitioners who practice different methods of alternative medicine to speak to the class regarding their specialty.

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Appendix

Generic Rubrics

Providing students with rubrics helps them understand expectations and components of assignments. Rubrics help students become more aware of their learning process and progress, and they improve students' work through timely and detailed feedback.

Customize these rubric templates as you wish. The writing rubric indicates 40 points, and the discussion rubric indicates 30 points.

Standard Writing Rubric

Criteria	Meets Requirements	Needs Improvement	Incomplete
Content	The assignment clearly and comprehensively addresses all questions in the assignment. 15 points	The assignment partially addresses some or all questions in the assignment. 8 points	The assignment does not address the questions in the assignment. 0 points
Organization and Clarity	The assignment presents ideas in a clear manner and with strong organizational structure. The assignment includes an appropriate introduction, content, and conclusion. Coverage of facts, arguments, and conclusions are logically related and consistent. 10 points	The assignment presents ideas in a mostly clear manner and with a mostly strong organizational structure. The assignment includes an appropriate introduction, content, and conclusion. Coverage of facts, arguments, and conclusions are mostly logically related and consistent. 7 points	The assignment does not present ideas in a clear manner and with strong organizational structure. The assignment includes an introduction, content, and conclusion, but coverage of facts, arguments, and conclusions are not logically related and consistent. 0 points

Criteria	Meets Requirements	Needs Improvement	Incomplete
Research	The assignment is based upon appropriate and adequate academic literature, including peer-reviewed journals and other scholarly work. 5 points The assignment follows the required citation guidelines. 5 points	The assignment is based upon adequate academic literature but does not include peer-reviewed journals and other scholarly work. 3 points The assignment follows some of the required citation guidelines. 3 points	The assignment is not based upon appropriate and adequate academic literature and does not include peer-reviewed journals and other scholarly work. 0 points The assignment does not follow the required citation guidelines. 0 points
Grammar and Spelling	The assignment has two or fewer grammatical and spelling errors. 5 points	The assignment has three to five grammatical and spelling errors. 3 points	The assignment is incomplete or unintelligible. 0 points

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Standard Discussion Rubric

Criteria	Meets Requirements	Needs Improvement	Incomplete
Participation	Submits or participates in discussion by the posted deadlines. Follows all assignment instructions for initial post and responses. 5 points	Does not participate or submit discussion by the posted deadlines. Does not follow instructions for initial post and responses. 3 points	Does not participate in discussion. 0 points
Contribution Quality	Comments stay on task. Comments add value to discussion topic. Comments motivate other students to respond. 20 points	Comments may not stay on task. Comments may not add value to discussion topic. Comments may not motivate other students to respond. 10 points	Does not participate in discussion. 0 points
Etiquette	Maintains appropriate language. Offers criticism in a constructive manner. Provides both positive and negative feedback. 5 points	Does not always maintain appropriate language. Offers criticism in an offensive manner. Provides only negative feedback. 3 points	Does not participate in discussion. 0 points

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Title: Entering New Patient Demographics (Alvarez)

Step	Instruction	Answer Key
1	Look for 'Patient/Client' in the top menu, and select 'New/Search' under it.	Select 'New/Search' under 'Patient/Client' from the top menu.
2	First select the 'Source Document' (transcript and audio) to view and hear the telephone interview with the patient. Now enter the patient's first and last name in the Name fields. You can find the patient details in	Select 'Mrs.' from the Title options list. Type 'Alejandra' in the First Name field. Leave the Middle Name field blank. Type 'Alvarez' in the Last Name field. Select the 'Search' button after filling in the details.
3	Select 'OK' to proceed.	Select 'OK'.
4	Fill the 'Who', 'Contact', 'Choices', and 'Insurance' sections of the form for Mrs. Alejandra Alvarez using the information provided in the Source Document. Then select 'Create New Patient'.	Type '10/13/1942' in the <i>DOB</i> field. Leave the SSN field blank. Leave the License/ID field blank. Select 'Widowed' from the Marital Status list. Select 'Female' from the Sex options list. Leave the Notes field blank. Select the 'Contact' section to begin filling its details. Type '3204 Franklin Street' in the Address 1 field. Type 'Apartment 401' in the Address 2 field. Type 'Wellstone' in the City field. Select 'CO' from the <i>State</i> options list. Type '80055' in the Zip Code field. Type '123-555-0165' in the Mobile Phone field. Leave the Home Phone field blank. Leave the Work Phone field blank. Type 'aalvarezsaenz@example.com' in the Contact Email field. Type 'Judy Alvarez Saenz' in the Emergency Contact field. Select 'Daughter' from the Relationship list. Type '123-555-0100' in the Emergency Phone field. Select the 'Choices' section to begin filling its details. Select 'Gill, Raj' from the Provider options list . Select 'Barnes, George' from the Referring Provider options list. Leave the Pharmacy option as 'Unassigned'.

Leave the HIPAA Notice Received option as 'Unassigned'.
Leave the Allow Voice Message option as 'Unassigned'.
Leave the Leave Message With field blank.
Leave the Allow Mail Message option as 'Unassigned'.
Leave the Allow SMS option as 'Unassigned'.
Leave the Allow Email option as 'Unassigned'.
Leave the Allow Immunization Registry Use option as 'Unassigned'.
Leave the Allow Immunization Info Sharing option as 'Unassigned'.
Leave the Allow Health Information Exchange option as 'Unassigned'.
Leave the Allow Patient Portal option as 'Unassigned'.
Leave the Care Team option as 'Unassigned'.
Leave the CMS Portal Login field blank.
Leave the Immunization Registry Status option as 'Unassigned'.
Leave the Immunization Registry Status Effective Date field blank.
Leave the Publicity Code option as 'Unassigned'.
Leave the Publicity Code Effective Date field blank.
Leave the Protection Indicator option as 'Unassigned'.
Leave the Protection Indicator Effective Date field blank.
Select the 'Insurance' section to expand.
Select the 'Primary Insurance' section to begin filling its details.
Select 'Gill, Raj' from the Provider options list .
Select 'Medicare (Original)' from the Plan Name options list.
Leave the Effective Date field blank.
Type '999 00 5656 A' in the Policy Number field.
Leave the Group Number field blank.
Leave the Subscriber Employer field blank.
Leave the SE Address 1 field blank.
Leave the SE Address 2 field blank.
Leave the SE City field blank.
Leave the SE State option as 'Unassigned'.
Leave the SE Zip Code field blank.
Type 'Alejandra' in the First Name field.
Leave the Middle Name field blank.

Type 'Alvarez' in the Last Name field.
Select 'Self' from the <i>Relationship</i> options list.
Type '10/13/1942' in the DOB field.
Leave the SSN field blank.
Select 'Female' from the Sex options list.
Type '3204 Franklin Street' in the Subscriber Address 1 field.
Type 'Apartment 401' in the Address 2 field.
Type 'Wellstone' in the City field.
Select 'CO' from the <i>State</i> options list.
Type '80055' in the Zip Code field.
Type '123-555-0165' in the Subscriber Phone field.
Leave the CoPay field blank.
Leave the <i>Accept Assignment</i> option as 'Yes'.
Select 'Secondary Insurance' to begin filling its details.
Select 'Gill, Raj' from the Provider options list .
Select 'Century SeniorGap Plan' from the Plan Name options list.
Leave the Effective Date field blank.
Type '999 00 5656 SG' in the Policy Number field.
Type 'HCFA 99900' in the Group Number field.
Leave the Subscriber Employer field blank.
Leave the SE Address 1 field blank.
Leave the SE Address 2 field blank.
Leave the SE City field blank.
Leave the SE State option as 'Unassigned'.
Leave the SE Zip Code field blank.
Type 'Alejandra' in the First Name field.
Leave the Middle Name field blank.
Type 'Alvarez' in the Last Name field.
Select 'Self' from the <i>Relationship</i> options list.
Type '10/13/1942' in the DOB field.
Leave the SSN field blank.
Select 'Female' from the Sex options list.
Type '3204 Franklin Street' in the Subscriber Address 1 field.
Type 'Apartment 401' in the Address 2 field.
Type 'Wellstone' in the City field.
Select 'CO' from the <i>State</i> options list.
Type '80055' in the Zip Code field.
Type '123-555-0165' in the Subscriber Phone field.
Leave the CoPay field blank.
Leave the <i>Accept Assignment</i> option as 'Yes'.

	Select the 'Create New Patient' button after filling in the details.
--	--

Title: Scheduling a New Patient Appointment (Alvarez)

Step	Instruction	Answer Key
1	In this activity, you will schedule an appointment for a new patient based on the information obtained during a phone call. The phone transcript is provided in the Source Documents as review. Patient demographics have already been entered based on this transcript. Now select 'Add' to add a new appointment.	Select 'Add'.
2	Select the 'Patient' input field to search for the patient.	Select the 'Patient' input field.
3	Enter the patient Alejandra Alvarez's last name in the search field and select 'Search'.	Leave 'Name' as the selected option in the Search By list. Type 'Alvarez' in the Search input field. Select 'Search'.
4	Select the patient from the list.	Select 'Alvarez, Alejandra'.
5	Mrs. Alejandra Alvarez is a new patient. She is concerned about her chest pain and unstable blood pressure. She wants to see Dr. Gill (the cardiologist) at your practice. When asked the best date and time for her appointment, Mrs. Alvarez states, "Afternoons work best for me, and I'd like to see the doctor as soon as possible." Use these details to fill in the 'Add New Event' screen for scheduling a 60-minute appointment for Mrs. Alvarez. Then select 'Find Available'.	Select 'New Patient' from the Visit Type. Leave the date as '06/05/20xx' in the Date input field. Type 'Chest pain and Blood pressure' in the Visit Reason input field. Leave 'Wellstone Medical Group' as the selected option in the Facility list. Leave 'Wellstone Medical Group' as the selected option in the Billing Facility list. Select 'Gill, Raj' from the Provider list. Leave '- None' as the selected option in the Status list. Leave 'Unassigned' as the selected option in the Room Number list. Leave the Comments input field blank. Leave the Time radio selected. Leave the Search all available radio button selected. Type '60' in the Duration input field. Leave the Repeats checkbox unselected. Select 'Find Available'.
6	Search for the soonest available 60-minute afternoon slot. Select it.	Select '3:00 PM' on Monday, 06/07/20xx.
7	The selected date and time is updated. Select 'Save' to schedule the appointment.	Select 'Save'.

Part 1

CHAPTER WORKSHEETS

ANSWER KEYS

S E C T I O N 1

Medical Assisting Foundations

Introduction to Health Care

The Medical Assistant, Health Care Team, and Medical Environment

Words to Know Challenge

Spelling: Each line contains three spellings of a word. Underline the correctly spelled word.

- | | | |
|-------------------------|------------------|--------------------|
| 1. <u>accreditation</u> | acreditation | accretitation |
| 2. tac | tack | <u>tact</u> |
| 3. <u>Pythagoras</u> | Pithagoras | Phithagoras |
| 4. <u>generalist</u> | gineralist | generelist |
| 5. provyder | providir | <u>provider</u> |
| 6. <u>scribe</u> | srybe | scrieb |
| 7. receprocity | reciprcety | <u>reciprocity</u> |
| 8. docterate | <u>doctorate</u> | doctorite |
| 9. epademic | epedemic | <u>epidemic</u> |
| 10. revocaton | revokation | <u>revocation</u> |

Matching: Match the term in column I to its definition in column II.

COLUMN I	COLUMN II
<u>C</u> 1. Patient-centered medical home	A. Skills that help to manage the business affairs of a medical practice
<u>G</u> 2. Clinical skills	B. When an individual provider makes all the decisions for the practice
<u>I</u> 3. General skills	C. A team-based model of care led by a personal provider who provides continuous and coordinated care throughout a patient's lifetime to maximize health outcomes
<u>F</u> 4. Hospitalist	D. Two or more providers who have a legal agreement to share in the total business operation of the practice
<u>B</u> 5. Solo practice	E. One who assists the patient, or acts on his or her behalf
<u>H</u> 6. Urgent care center	F. Works with patients admitted to the hospital
<u>J</u> 7. Multi-provider clinic	G. Skills that vary by state laws and are an extension of the provider's responsibilities of assessment, examination, diagnosis, and treatment
<u>E</u> 8. Advocate	H. Ambulatory care centers that take care of patients with acute illness or injury and those with minor emergencies; used quite often when patients cannot see their own provider
<u>A</u> 9. Administrative skills	I. Skills necessary regardless of whether working in a clinical or administrative capacity
<u>D</u> 10. Partnership	J. A group practice that consists of three or more providers who share a facility for the purpose of practicing medicine

Fill in the Blank: Complete the following sentences with correctly spelled words from the Spelling section.

1. A potentially infectious, life-threatening disease, usually transmitted by bites of rodent fleas is a(n) plague.
2. A method that enables a person, usually with the help of electronic equipment, to learn to control otherwise involuntary bodily functions is called biofeedback.
3. A 200-year-old system based on the Law of Similars is homeopathy.
4. A multidisciplinary approach to health care based on the belief that the body has power to heal itself is naturopathy.

Chapter Review

Short Answer

1. To become a successful medical assistant, you must acquire a specific knowledge base (theory) and skills (procedures) while also demonstrating specific behaviors.
2. What are the three broad areas of medical assisting?
 - a. General
 - b. Administrative
 - c. Clinical

3. What role should the medical assistant take on concerning communications when working with patients?
Communication liaison

4. The chapter listed a variety of administrative skills performed by medical assistants; name 6.
Any six of the following: scheduling appointments, medical record preparation, demographic data review, providing resource information, office supply inventory, equipment maintenance, accounts receivable/payable, payment receipts, managing petty cash, CPT/ICD-CM coding, and insurance claims

5. The chapter listed many clinical skills performed by medical assistants; name any 6.
Any six of the following: performing vital signs; performing sterilization and minor surgery procedures; collecting and processing specimens; performing lab tests; performing electrocardiograms; administering medications; performing phlebotomy procedures; performing patient screenings; preparing patients for examinations, procedures, and treatments; responding to emergencies

6. List four environments in which medical assistants work.
Any four of the following: physicians offices, specialty practices, urgent care centers, clinics, hospitals, labs, insurance companies, billing companies, government agencies

7. Define the role of the patient navigator.
A person under the provider's supervision or per physician/provider orders who guides a patient through their health care. They perform duties such as explaining insurance policy information, financial information, taking complaints from patients, and helping patients understand their medical rights.

8. Define the principles of self-boundaries.
In general, medical assistants cannot examine, diagnose, or prescribe treatment. Each state has its own medical practice act that may dictate responsibilities a medical assistant is allowed to perform.

9. Describe credentialing as it relates to the medical assistant.
Credentialing is the process of establishing the qualifications of certified and licensed medical professionals and assessing their background and legitimacy. Certified Medical Assistant, CMA (AAMA), is awarded to participants who successfully pass the AAMA's national certification exam. Graduates of medical assisting programs accredited by CAAHEP or ABHES are eligible to take the CMA (AAMA) certification exam. The RMA (AMT) exam is designed to evaluate the competence of the entry-level medical assistant. The AMT also offers a certification for individuals specializing in front-office procedures, the Certified Medical Administrative Specialist, CMAS (AMT).

10. Discuss the certification process for medical assistants and differentiate the examination content and format of the RMA and CMA exams.
Graduates of medical assisting programs accredited by CAAHEP or ABHES are eligible to take the CMA (AAMA) certification exam. Tests are given throughout the year at various Prometric testing centers around the country. Each candidate is allowed a 90-day period in which to take the exam; refer to the AAMA website for specifics on detailed testing timelines. Areas of knowledge and topics covered in the exam are listed in the CMA (AAMA) Certification/Recertification Examination Content Outline. The RMA (AMT) exam is designed to evaluate the competence of the entry-level medical assistant. The AMT also offers a certification for individuals specializing in front-office procedures, the Certified Medical Administrative Specialist, CMAS (AMT). The format and questions on the exam are developed by the Examinations, Qualifications, and Standards Committee of the AMT. After applicants receive their Authorization to Test letter, they can schedule their examination at any PearsonVUE testing center.

11. List and describe five types of nurses and discuss their licensure requirements.

Registered nurse: One who has completed a course of study at a state-approved school of nursing and passed the NCLEX-RN exam

Nurse anesthetist: An RN licensed to administer. RN has completed an anesthesia training program and passed the certification test to administer anesthesia

Nurse midwife: An RN licensed to care for women in labor and to deliver babies. Most states require a certification in addition to the state nurse license.

Nurse practitioner: An RN licensed to practice medicine and to work as a midlevel practitioner.

Licensed practical nurse: Nurse trained in basic nursing care; usually works under the direction of an RN or a physician

12. Why is it important for medical assistants to know the role of other health care providers?

Knowing the role each professional plays in the total health care of patients enables you to speak more intelligently with others in the medical field and become more efficient in your role as the medical assistant.

13. Define complementary alternative medicine and provide an example.

These are treatments that are considered to supplement or add to the conventional form of medicine. Examples include massage, acupressure, acupuncture, and hypnosis.

14. Match the following organizational abbreviations with the descriptions listed in the chart.

American Association of Medical Assistants (AAMA)

American Medical Technologists (AMT)

National Center for Competency Testing (NCCT)

National Healthcareer Association (NHA)

American Academy of Professional Coders (AAPC)

Fill in the Blank: Fill in the organization that corresponds to the description.

Organization Abbreviation	Description
<u>AAPC</u>	Provides the Certified Professional Coder (CPC) credential
<u>AAMA</u>	The only avenue for credentialing with this organization is by graduating from either a CAAHEP- or ABHES-accredited institution
<u>AAMA</u>	Provides the CMA credential with the organization's initials in parenthesis beside it
<u>AAPC</u>	Offers training and certification in the areas of medical billing and coding
<u>NCCT</u>	Provides the National Certified Medical Assistant (NCMA) credential
<u>AMT</u>	Provides the Certified Medical Administrative Specialist (CMAS) credential
<u>AMT</u>	Provides the Registered Medical Assistant (RMA) credential
<u>AAMA</u>	Must take credentialing exam at an approved Prometric center
<u>AMT</u>	After receiving the Authorization to Test letter, applicants can take the test at any PearsonVUE testing center
<u>NCCT</u>	Must receive the candidate's application within two weeks of the requested test date
<u>NHA</u>	Provides eight certification exams for allied health care specialties

15. Match the patient's symptoms or disease to the type of specialist he or she might see.

Podiatrist, Pediatrician, Chiropractor, Dentist, Ophthalmologist, Pulmonary specialist, Sports medicine specialist, Dermatologist, Allergist, Gynecologist, Optometrist, Nuclear medicine specialist, Plastic surgeon, Otorhinolaryngologist, Anesthesiologist, Urologist, Gerontologist, and Endocrinologist

Specialist	Symptoms or Disease
Chiropractor	Whiplash injury
Dentist	Tooth pain
Urologist	Impotence or urinary problems
Pulmonary specialist	Emphysema patient
Sports medicine specialist	Sports injury
Nuclear medicine specialist	Someone who needs radiation treatment for cancer
Ophthalmologist	Patient with glaucoma
Endocrinologist	Patient with diabetes
Allergist	Patient who suffers from hay fever
Anesthesiologist	Patient needing an epidural prior to delivery of her baby
Gerontologist	An 87-year-old patient
Gynecologist	Female with a possible STD
Podiatrist	Patient with foot pain
Dermatologist	Patient with a suspicious mole
Pediatrician	Well-baby check
Plastic surgeon	Patient wanting to make facial improvements
Otorhinolaryngologist	Patient with persistent hoarseness
Optometrist	Patient with vision problems

16. Match the description with the appropriate organization or legislation.

FDA, NIH, WHO, Medicaid, Medicare, CLIA, Uniform Anatomical Gift Act, OSHA, Controlled Substances Act, HIPAA, Patient Protection and Affordable Care Act, Hill-Burton Act, Medicare Part D

Organization or Legislation	Description
Medicare	National insurance for persons over the age of 65, the disabled, or those suffering from end-stage renal disease
CLIA	Establishes guidelines for operating laboratories
FDA	Regulates the foods we purchase and drugs we consume and is part of the Department of Health and Human Services
OSHA	An organization that protects employees in the workplace
Uniform Anatomical Gift Act	An act that allows living individuals to indicate their desire for their organs to be gifted at the time of death
Patient Protection and Affordable Care Act	An act that expands access to health insurance

(continues)

Medicare Part D	A prescription drug plan for seniors to make drugs more affordable
NIH	One of the world's foremost medical research centers
Hill-Burton Act	Legislation responsible for improving construction of hospitals
WHO	A specialized agency of the United Nations that cooperates to control and eradicate disease worldwide
Medicaid	A federal organization that provides for the medical care of the indigent
Controlled Substances Act	Legislation that helps control the abuse of drugs
HIPAA	Intended to limit health administration costs and provide for patient privacy

17. According to the United States Department of Labor, employment for medical assistants is expected to grow by 23% from 2018 to 2028.

18. Summarize the future of integrative medicine and the role of the medical assistant.

In addition to a variety of clinical and administrative skills being performed, the medical assistant working in an integrative medicine facility will likely perform tasks such as supporting patients and loved ones; facilitating, collaborating, and communicating with peers, providers, and patients; and promoting health and healing by meeting the individual mental, physical, and spiritual needs of the patients.

Chapter Application

Case Studies with Critical Thinking Questions

Scenario 1

You are competing with two other candidates for a medical assisting position at a large family practice center. All three of you are new graduates of the same medical assisting program. You all did well in your program and had a good rapport with the other students. Out of the three, you are the only one who is credentialed. During the interview, the supervisor asks you why they should hire you over the other two candidates.

1. What would you say?

Answers will vary but might include something like the following: Out of the three of us, I am the only one who is credentialed. Possessing a credential validates my knowledge and right to practice medical assisting. It also shows my initiative and dedication to the profession

Scenario 2

Mrs. Dobson has been struggling with pain over the past six weeks. She was in an automobile accident and suffered some injuries to her back. The patient is tired of the pain and is searching for some alternatives to traditional medicine. She asks whether you are an advocate of acupuncture and goes on to state that a friend had acupuncture for some pain she was having and feels much better now. You know that your physician is not a huge fan of acupuncture but is not totally opposed to it either.

1. How would you respond to the patient's question?

Answers will vary but might include something like the following: I am not very familiar with acupuncture and am not qualified to give an opinion on the subject; however, I would suggest that you talk to the physicians to get her opinion on the matter.

2. What are some of the other complementary therapies the provider may suggest, and what do they entail?
Answers will vary but should come from Table 1–1 as well as a short description of the therapy.

Scenario 3

You are asked to describe various health care models and services they provide with a patient. Discuss what you would advise them about the following:

1. Managed care operations:
Managed care is a system of health care that integrates the delivery and payment of health care for covered persons (patients, or subscribers) by contracting with selected providers for comprehensive health care services at a reduced cost.
2. Concierge (boutique) or DPC services:
Concierge (Boutique) Medical Practices or Direct Primary Care (DPC) is a system where patients pay an added fee (generally around \$100 per month) in exchange for more personalized care and better access to their providers for medical services, and is available 24/7 to the patient.
3. Accountable care organization:
ACOs are groups of physicians, hospitals, and other health care providers, like the PCMH model who together coordinate high-quality care to their Medicare patients. As with the PCMH model, the goal of coordinated care is to ensure that patients get the correct care needed, avoiding duplication of services and preventing medical errors.

Role-Play Activity

Connecting with patients or communicating with the right health care professional is part of the medical assistant's job. With a classmate role-play the various scenarios below, with one being the MA and the other being the patient or other allied health professional.

1. The patient's results from her hearing test were very poor today. The physicians asks you to set up an appointment for the patient with Susan Klein, an audiologist for the Orange Valley Speech and Hearing Center.
2. A patient calls on the phone regarding her bill. You connect her to Mike Brown, the clinic's medical biller.
3. Your physicians instructs you to call the EMS for a patient exhibiting chest pain. You will need to provide the EMT a list of the patient's current medications upon arrival.
4. You send two tubes of blood to the lab. The lab technician calls to alert you that the patient's lab results are at a critical level and that the physicians needs to be notified right away.
5. The physicians would like you to set the patient up for an appointment with a physical therapist to assist the patient with walking, following her stroke.
6. The pharmacy technician answered the phone when you called the pharmacy to renew a prescription for Mrs. Wong. She immediately transferred you to the pharmacist.
7. Dr. Prime asked you to contact Missy, the radiologic technician, regarding the last set of radiographs she took on Mr. Hodges.
8. Dr. Smith asks you to call Jason Brown, a respiratory therapist with Visiting Health Professionals, to schedule some breathing tests and treatments on Mrs. Kesterson in her home.
9. Dr. Somadi just completed an exam on Mr. Waterson, who is a diabetic. She would like you to set up an appointment for the patient to see a dietician to educate him about proper food selection.
10. The physicians asks you to set up a pelvic ultrasound for Mrs. Jennings, who is pregnant for the first time. The physicians suspects something wrong with the baby because it is measuring at only 12 weeks and should be measuring at 20 weeks. The patient is not scheduled to have an ultrasound today, but the physicians wants the sonographer to skip the patients that are in front of her and perform the ultrasound immediately.

Professionalism

Words to Know Challenge

Spelling: Each line contains three spellings of a word. Underline the correctly spelled word.

- | | | |
|----------------------|-------------------|-------------------|
| 1. divirsity | diversitie | <u>diversity</u> |
| 2. empathitic | <u>empathetic</u> | <u>impathetic</u> |
| 3. inititive | <u>initiative</u> | enitiative |
| 4. <u>innate</u> | inate | enate |
| 5. <u>resiliency</u> | risiliency | rasieliency |
| 6. entigrity | intigrity | <u>integrity</u> |

Fill in the Blank: Complete the following sentences with Words to Know from this chapter.

1. Behaving somewhat arrogantly or disrespectfully showing off your ego is known as having attitude.
2. Understanding that each individual is unique and recognizing our individual differences is known as diversity.
3. To solve issues that may arise during the workday is to use critical thinking.
4. A set of values held by employees of performing work for a moral good is known as work ethic.
5. If you are unable to complete all tasks, then to make sure the important ones will be completed you must prioritize.
6. An assortment of skills, tools, and practices to manage time well during daily activities and when accomplishing specific projects is known as time management.
7. Someone who works cooperatively with a group of people is known as a team player.
8. Having a willingness to get things done and taking responsibility for thigs shows initiative.
9. How you feel about your abilities, believing in oneself and assured is having self-confidence.
10. An awareness of one's own personality or uniqueness is showing self-awareness.

Chapter Review

Short Answer

1. List five traits of a professional medical assistant.
Any five of the following: accurate, adaptable, courteous, confidential, dependable, empathic, honest, initiative-taking, patient, punctual, respectful, tactful, team player.
2. Describe the ideal appearance of a medical assistant.
Students' answers may vary but should reflect on information taken from Table 2–3 on appropriate appearance.
3. List the basic goals of time management.
 - Make a daily list of tasks and projects that must be completed.
 - Learn to say no to low-priority requests—especially those that are optional.
 - Do not be a perfectionist for tasks that do not require your best effort.
 - Stay away from bad habits that rob you of your time such as surfing the Internet or using the phone for extended lengths of time.
4. Describe how biases or prejudices can inhibit therapeutic communication.
Patient histories may not be accurately recorded, and treatment and care may be altered. Having a belief or prejudgment about a certain group of individuals can lead to assumptions that could have negative outcomes. An assumption such as low-income people or elderly patients have lower intelligence and therefore will not follow the treatment plan accurately could lead to providers not delivering the education that is needed.
5. Describe how to apply critical thinking skills when providing patient care.
 1. Determine just what the problem is and write it down. Ask whether there is a contributing problem chain or series of events.
 2. Gather facts and ideas to help you decide what to do about it.
 3. List possible decisions and what you think each outcome will be. Use analytical and creative thinking.
 4. Prioritize your decisions and begin testing them one by one until results are satisfactory to you and others concerned.
6. List examples of cultural, social, and ethnic diversity.
Cultural (values, practices, traditions, or beliefs a group shares, e.g., age, race, religion).
Ethnic (nationalities, ancestry, and language).
Social (when people belonging to different religions, cultural backgrounds, economic status, etc. make up a community).

Case Studies with Critical Thinking Questions

Scenario 1

The following tasks are all occurring at the same time. Prioritize the following tasks by putting numbers 1–4 next to each statement. (1 is the task you will do first, and 4 is the task you will do last.)

1. 3 The physician asks you to perform an ECG on the patient in room 2 as he goes into room 3.
2. 2 Room 1 is open and ready for a patient.
3. 4 The receptionist calls back to tell you that you have a patient who would like you to call her back regarding lab results.
4. 1 The physician is going into room 3 to perform a short procedure and needs you to assist him.

Scenario 2

Your manager calls you into her office to talk about some issues she has heard you are having with taking patient blood pressures. She starts the conversation by describing how some patients have made comments to the provider that they felt your results were not accurate. Initially you feel upset even though you have had some struggles and you take the feedback in a negative way.

1. Describe what feedback is.

Constructive feedback also known as constructive criticism is usually based on observations and is very specific to information or issues surrounding that observation. Generally, there are two ways to provide feedback. One is through praise for the performance or action, which is considered positive feedback, and the other is through criticism, which is often associated with a negative viewpoint or opinion.

2. Describe what feedback can do for our own individual growth.

Feedback is very valuable and assists us with identifying areas in our job performance that we can work on to improve things for the better of the organization and for ourselves. Feedback helps you to be on your way to improving your successfulness at work.

3. What are some tips on handling feedback?

Answers will vary for students but any of the tips listed in the textbook can be listed.

Scenario 3

The clinical facility you work at requires that you punch in and out on a time clock for your arrival time, lunch breaks, and when you leave. One of your coworkers is constantly late and taking extra time on their lunch break. Instead of using the time clock on those days, they write their times in and tell the supervisor that they forgot to use the time clock. After the supervisor leaves the area, they look at you and say, "Works every time."

1. Should you tell the supervisor that they are doing it on purpose, so they do not have to deduct their time? Why or why not?

Yes, you should tell the supervisor. As a medical assistant it is your professional duty to let the supervisor know that you have been witness to the unprofessional behavior.

2. What professional behavior are they violating?

They are violating the code of ethics as well as integrity.

3. What issues can this cause the clinic in the long run?

This behavior can end up getting the providers behind, or leave tasks undone, as well as cost the clinic money. It could be construed as theft.

Competency Practice

1. **Demonstrate Professional Behavior.** With a partner, practice role-playing the various procedure steps that are identified in Procedure 2-1.
2. **Demonstrate Professional Behavior.** Professionalism is a skill you will use daily as a medical assistant. Write one to two paragraphs in response to any of the following scenarios.
 - a. Describe what contributes to an unprofessional appearance and the consequences of an unprofessional appearance. Describe how being tardy and returning late from breaks will affect your success as a medical assistant.
 - b. Describe the ramifications of not using active listening skills in the field.
 - c. How does a poor attitude reflect on you in the workplace?

Answers will vary but should revolve around the professionalism concept.

Legal and Ethical Issues

Words to Know Challenge

Spelling: Each line contains three spellings of a word. Underline the correctly spelled word.

- | | | |
|---------------------------------|----------------------|------------------------|
| 1. misdemeanor | misdemenor | <u>misdemeanor</u> |
| 2. <u>negligence</u> | negligense | negilgense |
| 3. plantif | <u>plaintiff</u> | plaintif |
| 4. <u>respondeat superior</u> | respondent superior | respondat superior |
| 5. libal | lible | <u>libel</u> |
| 6. gardian | <u>guardian</u> | guardan |
| 7. fellany | fellony | <u>felony</u> |
| 8. <u>jurisdiction</u> | juridiction | juresdiction |
| 9. <u>autonomy</u> | automony | autonmony |
| 10. vallues | valuse | <u>values</u> |
| 11. extrinics | <u>extrinsic</u> | extinsic |
| 12. beneficense | benificence | <u>beneficence</u> |
| 13. <u>ethics</u> | ethiks | ethix |
| 14. <u>distributive justice</u> | distribitive justice | distributative justice |
| 15. morrals | morales | <u>morals</u> |
| 16. intrinics | <u>intrinsic</u> | intrinsac |

Matching: Match the term in column I to its definition in column II.

	COLUMN I	COLUMN II
<u>C</u>	1. Manslaughter	A. Spoken defamation of character
<u>G</u>	2. Damages	B. Taking money or property belonging to another without the presence of the victim
<u>H</u>	3. Punitive damages	C. The unlawful killing without malice of a human being
<u>A</u>	4. Slander	D. Unlawfully taking money or goods of another from his or her person or in immediate presence by force or intimidation
<u>B</u>	5. Burglary	E. Written defamation of character
<u>D</u>	6. Robbery	F. Having the mental competency to make health care decisions
<u>M</u>	7. Prosecution	G. Damages recovered in payment for actual injury or economic loss
<u>L</u>	8. Felony	H. Damages awarded in a lawsuit as a punishment and example to others for malicious or fraudulent acts
<u>J</u>	9. Statute	I. Legislation enacted by Congress
<u>K</u>	10. Defendant	J. A written federal or state law enacted by Congress or a state legislature
<u>I</u>	11. Federal law	K. The party sued in a civil lawsuit or the party charged with a crime in a criminal prosecution
<u>E</u>	12. Libel	L. Crimes committed by people who intend to do significant harm to others, either through depriving them of their property or injuring them personally
<u>F</u>	13. Capacity	M. In criminal law, the government attorney charging and trying the case against a person accused of a crime

Fill in the Blank: Complete the following sentences with correctly spelled words from the Spelling section.

- In the context of health care, when we recognize that the patient has the right to make decisions about their life, death, and health, this is known as autonomy.
- Issues that stem from a belief system in which one makes judgments about right and wrong can be defined as morals.
- The egalitarian approach (everyone gets an equal share) is the concept known as distributive justice.
- Pride in knowing one is upholding the high standards of the organization is an example of an intrinsic reward.
- Receiving an end-of-year bonus for achieving the highest patient satisfaction scores is an example of an extrinsic reward.
- The way an organization conducts its business ethics that requires people to do what is in the best interests of others is a representation of its values.
- The rules of conduct with respect to a particular class of actions are known as ethics.

Chapter Review

Short Answer

1. Why is it important for medical assistants to be familiar with the law?
Understanding the laws that apply to a medical office is important for medical assistants to protect themselves, their employer, and patients. Because medicine is closely regulated by state and federal law, it is necessary to be aware of statutes and regulations that define the procedures they are permitted to perform.
2. What are the four elements that must be present in a given situation to prove that a provider or professional practice is guilty of negligence?
(1) a *duty* of care owed by the defendant to the plaintiff, (2) a *breach* of that duty by the defendant, (3) harm (*injury*) suffered by the plaintiff, and (4) that harm a result of the defendant's breach of duty (causation)
3. A contract may be either implied or express. Define what *implied* and *express* mean.
An implied contract gives rise to contractual obligations by some action or inaction without verbally expressed terms. An express contract is an actual agreement between the parties, the terms of which are openly stated in distinct and explicit language, either orally or in writing.
4. Explain the difference between medical malpractice and negligence.
Negligence is defined as not doing something a reasonable person would do or doing something that a reasonable person would not do. Malpractice is associated with professional misconduct and implies a greater duty of care to the injured person than the reasonable-person standard. The term implies that a physician, nurse, or other licensed health care professional has special knowledge, which raises the expectations of society.
5. Crimes are divided into two categories. Identify and explain the difference between the two.
A felony is a crime punishable by death or imprisonment in a state prison. A misdemeanor is a crime punishable by imprisonment in jail for less than one year and/or a fine.
6. Explain the concept of "standard of proof," and list the standard of proof in criminal law and civil law.
The standard of proof in a civil case is the "preponderance of the evidence," whereas the standard of proof in a criminal case is "beyond a reasonable doubt."
7. List and explain the essential elements of a contract.
A contract comes into being when an offer is made by one party and, accepted by another party, and consideration passes between them.
8. Read the following examples listed. Which are examples of express contracts, and which are examples of implied contracts?
 - a. A physician treats a patient in the emergency room for a fractured collarbone. Implied
 - b. You hire your neighbor to clean your house, and you confirm the deal with a handshake. Express
 - c. A patient in your provider's office rolls up his sleeve to have his blood drawn. Implied
 - d. Written agreement. Express
 - e. A provider telling a patient that treatment results are guaranteed. Express
9. What is the Patient Self-Determination Act?
The Patient Self-Determination Act, enacted in 1990, requires health care facilities to provide written information to each adult admission concerning patient rights under state law to make decisions concerning the acceptance or refusal of medical or surgical treatment.
10. List at least six ethical issues in health care.
Any six of the following: Abortion, artificial insemination, assisted suicide, contraception, cryonics, eugenics, euthanasia, gene therapy, DRGs and capitated payments, genetically modified food, human cloning, human enhancement, life extension, life support, organ transplantation, psychosurgery, sex reassignment therapy, suicide, surrogacy, vaccination, or xenotransplantation.

11. Describe an ethical dilemma.

Where two moral principles are in conflict, such as when there is no clear-cut right or wrong on any matter. It might also be true when the right behavior leads to the wrong outcome.

12. List three professional organizations that have a code of ethics relating to the medical field.

List any three of the following: AMA, AAMA, AMT, NHA, AAPC, AMT, NCCT.

13. List four characteristics of an organization that encourages ethical behavior.

(1) A written code of standards. (2) Training for officers, managers, and employees in the subject of ethics.

(3) Availability of advice for employees confronting ethical issues. (4) A system (or systems) for confidential reporting.

14. Identify where to report the following illegal and unsafe activities and behaviors that affect the health, safety, and welfare of others: criminal conduct, improper disclosure of patient information, provider misconduct, office staff misconduct.

- *Criminal conduct:* On occasions when you might witness a crime in progress, it is appropriate to notify the local police.
- *Improper disclosure of patient information:* You will never go wrong by NOT discussing this sort of information with anyone other than the patient or the attending provider. The only exception to this would be when served with a court order directing you to comply. (It would most likely be the provider who would be so served; however, this could happen to you.) HIPAA violations should be reported to the Quality Assurance/Legal Department per office policy.
- *Provider misconduct:* This one is a bit more complicated, assuming you work for the provider in question. If, for example, you are aware that a provider in the office where you work is showing up for work under the influence of alcohol, you do have an ethical obligation to act on that information. After all, the well-being of the patient is your *first* concern. The question is where do you turn to act? In most cases, there will be a practice administrator or office manager or even another provider in the office. Your ethical obligation is to act in accordance with the best interests of the patient. Following this path relieves you of whatever duty you might think you owe in terms of telling a patient directly, which should NOT be done. You also have an obligation to your employer, and if you can address the situation from within, follow that course.
- *Office staff misconduct:* Consider the medical assistant who is aware that a nurse is disclosing information about a celebrity patient to a blogger. Again, putting the patient's interest at the forefront makes the answer a bit easier. This person's activity needs to be disclosed to the practice administrator or office manager.

Matching: Match the ethical issues in column I with their descriptions in column II (refer to Table 3–1).

	COLUMN I	COLUMN II
<u>G</u>	1. Cryonics	A. Surgical procedure in which tissue or whole organ is transferred from one species to another
<u>F</u>	2. Human cloning	B. Attempts either to slow down or reverse the processes of aging to maximize life span
<u>A</u>	3. Xenotransplantation	C. Killing an individual so that they will not suffer pain
<u>H</u>	4. Suicide	D. Brain surgery carried out to ease the complications associated with mental or behavioral problems
<u>B</u>	5. Life extension	E. Resorting to medical equipment to keep an individual alive
<u>I</u>	6. Eugenics	F. Creating a genetically identical copy of a human
<u>C</u>	7. Euthanasia	G. A process whereby the body of a seriously ill or deceased individual is frozen to stop the decomposition of tissues
<u>D</u>	8. Psychosurgery	H. The act of killing oneself

- | | |
|--|--|
| <u>J</u> 9. Surrogacy
<u>E</u> 10. Life support | I. Improving genetic qualities by means of selective breeding
J. A process whereby a woman agrees to carry and deliver a child for a contracted party |
|--|--|

Chapter Application

Case Studies with Critical Thinking Questions

Scenario 1

You receive samples in your office from pharmaceutical representatives. Rosalee Dunning cannot afford the cost of her blood pressure medication. She comes to you for samples.

1. May you give her samples? Why or why not?

No, you may not give her samples without the provider's order. Assessing, diagnosing, and treating the patient is beyond your scope of practice. If she is given samples, that needs to be recorded in her chart.

Scenario 2

Jordan observes one of the other medical assistants taking samples of a narcotic pain reliever and placing them in their pocket. When Jordan confronts the coworker, the coworker states that everyone else takes samples, so they are taking some, too.

1. Is this a legal, ethical, or moral issue? It is not only against the law to steal but also a breach of moral and ethical behavior.

2. Should Jordan report this to their supervisor? Yes. Any suspected theft of drugs must be reported.

3. What could be the outcome for the medical assistant who took the samples? They could (and probably will) be fired.

Scenario 3

Gabrielle, a medical assistant, sees Roberto in the medical office where she works. Roberto works for Gabrielle's husband. Roberto and his wife Sally are also personal friends of Gabrielle and her husband Mark. Roberto has been out of work for the past few weeks because of severe back problems. That night at dinner, Mark asks her if Roberto will be able to return to work and when.

1. Is this a legal, ethical, or moral issue? It is primarily a legal issue; HIPAA has made it illegal to disclose confidential health information about patients to unauthorized sources.

2. What should Gabrielle do in this situation? Although Roberto is a family friend, it is not appropriate (and a legal violation) to talk about his health information, even to Gabrielle's husband. She should, therefore, not discuss Mark's condition with anyone, even her own husband.

Scenario 4

You are standing at the time clock and notice another employee clocking out not only herself but also a fellow employee. You know for a fact that this other employee was not at work today. You check the time card and notice the other employee has “punched in” at the beginning of the day as well as recorded time for lunch. Because you work for a large company and the time cards are not completed at the facility, there is no way anyone at payroll will know whether this person worked.

1. Is this a legal, ethical, or moral issue? It is all three.

2. Who would you report this to? You should report this to the practice administrator or office manager.

Critical Thinking

- Ethics and diversity:** Medical assistants are reminded to strive to provide the same quality of care to all their patients regardless of race or ethnicity and eliminate biased behavior toward any group of patients different from themselves. In the following space, explain why caring for a culturally diverse clientele is an ethical issue.
Answers will vary but should include the following ideas: that medical assistants (as well as all medical professionals) have a responsibility to care for all people equally, without regard to race, creed, or color; medical assistants should recognize and respond appropriately to ideas and elements from other ethnic and cultural backgrounds that might be different from their own.
- Personal versus professional ethics:** Whatever your personal perspective might be with regard to ethical matters, you must adapt your personal views to comply with the ethical standards of your profession and the organization in which you are employed.
 - Assess your personal belief system and upbringing. List two sources that have influenced your own personal ethics the most. Answers will vary.
 - Review the “Ethics Check Questions” presented in this chapter, and list the three questions to ask yourself when considering ethical issues: (1) What promotes the right of the patient to make determinations about his or her own health? (2) What is in the best health interests of the patient? (3) Is doing (or not doing) the act in question fair to others?
 - Now, compare the AAMA Code of Ethics and Creed with the AMT Standards of Practice. What similarities and differences do you see? Answers will vary. Similarities might include focuses on confidentiality, professional advancement, putting patient needs first, and so on. Differences might include more specificity in the AMT Standard of Practice (e.g., “do not make or offer a diagnosis”).
- Your view #1:** Select one of the topics in Table 3–1 not previously selected (or another ethical issue related to health care of your choosing), and discuss your personal opinion of the topic. Relate the opinion to the concepts discussed in the chapter (autonomy, beneficence, and distributive justice) if possible.
Answers will vary but typically include compassion, excellence, stewardship, integrity, respect, and so on. You might want to guide the situations or use this as a class activity.
- Your view #2:** Reflecting on the ethics of the four approaches to Distributive Justice, consider how you would allocate health care resources. In a one- to two-page essay, justify your conclusion with fact and opinion.
Answers will vary but typically include compassion, excellence, stewardship, integrity, respect, and so on. You might want to guide the situations or use this as a class activity.

Competency Practice

1. Locate a State’s Legal Scope of Practice for Medical Assistants

Using the detailed instructions and rationales outlined in Procedure 3–1 as a guideline, go online to research the scope of practice for a different state than chosen in the textbook procedure. Contrast and compare the similarities and differences between the states. In a one- to two-page essay, describe your findings and discuss the scope of practice as if you were employed in each state.

2. Develop a Plan for Separation of Personal and Professional Ethics.

Use the detailed instructions and rationales outlined in Procedure 3–2 as a guideline, and go online to research a health care organization near you that has some form of a mission, vision, and values statement. In a one- to two-page essay, describe your findings and discuss ethical conduct and action that you would express if you were an employee of that organization and then create a plan to separate your personal and professional ethics. (Some examples might include Northwest Health [www.nwhc.org], Ohio Health, [www.ohiohealth.com], or Sutter Health [www.sutterhealth.org].)

3. Demonstrate Appropriate Responses to Ethical Issues.

Using the detailed instructions and rationales outlined in Procedure 3–3 as a guideline, respond appropriately to the following scenario(s):

- a. Fraternization between employees in the same chain of command is prohibited. Are there ethical issues with fraternization between coworkers?
- b. Is it ever appropriate to accept gifts from patients or clients?
- c. A family member of a terminally ill patient has requested information on end-of-life options. What is your ethical responsibility?

Applying Communication Skills

Words to Know Challenge

Spelling: Each line contains three spellings of a word. Underline the correctly spelled word.

- | | | |
|----------------------------|----------------------------|------------------------|
| 1. <u>active listening</u> | activ listening | active listining |
| 2. persepshion | perseption | <u>perception</u> |
| 3. deniul | <u>denial</u> | danial |
| 4. <u>empirically</u> | emperically | imperically |
| 5. contrudict | contredict | <u>contradict</u> |
| 6. intalectualization | <u>intellectualization</u> | intalletualization |
| 7. mallinger | <u>malinge</u> r | milinger |
| 8. regresion | regerssion | <u>regression</u> |
| 9. sublimination | <u>sublimation</u> | subliamation |
| 10. compinsation | <u>compensation</u> | compensasion |
| 11. <u>incongruent</u> | encongruent | incongrunent |
| 12. <u>suppression</u> | supression | suppresion |
| 13. rashonization | rationisation | <u>rationalization</u> |
| 14. adovocasy | avdocacey | <u>advocacy</u> |
| 15. ascertive | <u>assertive</u> | asertive |

Matching: Match the term in column I to its definition in column II.

	COLUMN I	COLUMN II
<u>C</u>	1. Articulate	A. To impart, as an idea; to transfer
<u>G</u>	2. Conceptualize	B. To explain, translate; to determine the meaning
<u>A</u>	3. Convey	C. To join together, as in a joint
<u>F</u>	4. Distort	D. A defense mechanism of trying to blame another for one's own inadequacies
<u>B</u>	5. Interpret	E. To force painful ideas or impulses into the subconscious
<u>H</u>	6. Intuition	F. To misinterpret; to twist into unusual shape
<u>D</u>	7. Projection	G. To form a concept, thought, notion, or understanding
<u>E</u>	8. Repression	H. The immediate knowing or learning of something without the conscious use of reasoning

Chapter Review

Short Answer

- Identify and differentiate between the components of the standard communication model.
The message originates with the sender. The encoder is the means of transmitting the communication. The message is then encoded and transmitted by the medium. The decoder is the means of deciphering the message into a form the receiver understands. The receiver is the intended target of the message.
- There are several styles and types of verbal communication. In general, people process and communicate information in three basic ways. Identify and describe the three ways.
(1) Visual—Visual people need to see pictures or see the information in writing; (2) Auditory—Auditory people learn by hearing; (3) Kinesthetic—Kinesthetic people think in terms of sensations or feeling, often move their hands when talking, and respond physically as well as verbally.
- List six examples of nonverbal communication cues.
Any six of the following: Perception, body language, facial expression, eye contact, gestures, distance, silence, appearance, attitude, therapeutic touch and relationship, and body language in general
- Describe barriers to communication and identify techniques for overcoming them.
A communication barrier is defined as anything that gets in the way of interpreting a message correctly. Three common barriers include:
 - Physical disabilities. Examples include hard of hearing, loss of sight, or other physical problems.
 - Overcome this barrier by adjusting your volume of speech, using an interpreter, or offering Braille or large-print materials.
 - Psychological attitudes and prejudice. This refers to personal opinions or biases formed, for example, about individuals with alternative lifestyles or certain ethnic or religious groups.
 - Overcome this barrier by being empathetic, avoiding touching or eye contact if a cultural or religious barrier warrants this, and having a family member with patient in exam room if possible.
 - Cultural diversity. Not all patients speak, read, write, or understand English.
 - Overcome this barrier by using interpreter services for the patient and family member; have printed materials available in multiple languages.
- List the eight developmental stages of life presented in Erik Erikson's theory of psychosocial development.
A person's psychosocial development is in stages or phases and is delineated by age and characterized by a struggle or crisis that must be overcome throughout the life cycle in order to adapt and continue to develop. (Refer to Figure 4–8 for specifics on stages.)

6. The following chart lists the commonly used behavioral defense mechanisms. Next to each defense mechanism, give an example of it. The first two rows have been filled in for you as examples.

Defense Mechanism	Example
Repression	Not crying at a funeral because you have buried the emotions so deeply in the back of your mind.
Displacement	Yelling at your spouse for no reason after having a hard day at the office.
Suppression	Student answers will vary; an example is working late hours after the death of a close relative.
Projection	An obese patient who has gained a few pounds might blame the medical assistant by saying that the scales were set up or read incorrectly.
Rationalization	"I dieted strictly all day; therefore, it's okay to eat a couple of candy bars later in the evening after supper."
Intellectualization	Discussing all the facts and information about how to begin caring for an older adult relative to avoid dealing with true feelings of sadness.
Sublimation	A 30-year-old parent who is a frustrated athlete forcing their child to excel in a sport.
Compensation	A person who can no longer participate in sports because of illness or injury finds satisfaction in coaching.
Temporary withdrawal	Watching TV or reading excessively to avoid dealing with an issue are common types of withdrawal.
Daydreaming	This is a way to escape momentarily from reality and relax.
Malingering	You deliberately pretend to be sick to avoid dealing with situations that are unpleasant or cause anxiety.
Denial	A person just diagnosed with terminal illness does not accept the reality of it and believes that a recovery is certain.
Regression	During final exam week, a college student eats hot fudge sundaes as they did as a child with their mother whenever problems at school piled up.
Procrastination	Defined as "always putting off until tomorrow what you could do today."

7. Define what it means to coach a patient and give an example of coaching for each of the following:
- Define: Patient coaching and education in the ambulatory setting keeps patients healthier and medical conditions from worsening and can reduce the need for hospitalization. Patients can be taught the importance of prevention, early treatment, and overall health maintenance.
- Health Maintenance: Scheduling a mammogram
- Disease Prevention: Providing instructions on effective hand washing
- Compliance with Treatment Plan: Explaining how to take medications
- Adaptions Relevant to Individual Needs: Providing teaching and materials based on preferred learning style (i.e., in writing or a video)
8. List the five stages of understanding needs according to Maslow's hierarchical model. Then identify which of the stages is the one in which the person tends to be a problem solver and places a great deal of emphasis on family and long-term relationships.
- Physiological, safety, belongingness and love, esteem, self-actualization. Self-actualization is the highest stage; these people tend to be problem solvers.
9. Dr. Elisabeth Kübler-Ross described five stages of grieving. List the five stages.
- Denial, depression, bargaining, anger, and acceptance

10. Describe the difference between positive and negative coping skills.

Positive coping helps you through situations at nearly the same level of effectiveness as those who do not have the disadvantage. Use of negative coping skills can provide short-term relief or distraction but can ultimately worsen the circumstance.

11. List seven adaptive coping skills and seven nonadaptive coping skills.

- a. Adaptive: Any seven of the following: deep breathing, thought changing, diet and exercise, music, stretching, positive affirmations, talking, creating boundaries, journaling, spirituality, planning, humor, sleep, appropriate communications with others
- b. Nonadaptive: Any seven of the following: drinking, drug use, gambling, sex addiction, road rage, holding on to anger, inappropriate boundaries, isolation, obsessions, shopping over credit, over- or undereating, avoiding responsibilities, "Yes, but . . ."

12. Fill in the following grid, identifying adaptations to make when working with these patients.

Patients with disabilities	Patients with disabilities require unique and individually tailored methods to communicate instructions. Reflective (or mirrored) communication can be especially helpful.
Culturally diverse patients	It is critical to understand and respond with sensitivity to the needs and preferences diverse patients present at their health encounter.
Pediatric patients	Incorporate use of the four Es— <i>encouragement, empathy, enlistment, and education</i> —to engage the child in health care matters.
Geriatric patients	Communication might require additional patience and skill. The normal aging process, involving sensory loss, decline in hearing or memory, retirement from work, and separation from family and friends, affects communication functionality.
Difficult or uncooperative patients	The best approach is to hold off any negative judgments and try your best to accommodate the requests.

13. Often, your provider will ask you to provide patient education. List three patient education formats.

Patient education can include verbal instructions, printed materials, or electronic formats. Many organizations have an education department or contract with a company to make materials readily available.

14. Describe the steps to follow when providing patient education.

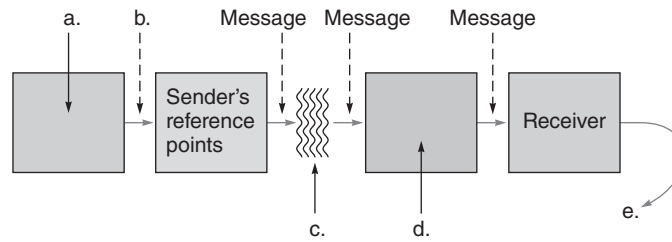
You must first assess the patient's ability to comprehend the instructions. Use reflective (mirror) communication skills, repeating the clear, concise instructions to patient. It is often best to provide a written copy of the educational materials for the patient to take with him or her.

15. What does it mean to be assertive when communicating in the medical office?

Assertive communication is a style by which individuals clearly state their opinions and feelings and firmly advocate for their rights and needs without violating the rights of others. These individuals value themselves, their time, and their emotional, spiritual, and physical needs and are strong advocates for themselves (and others), while being very respectful.

Labeling

Identify the sections of the following communication process model:



a. Sender

b. Message

c. Possible source of interference

d. Receiver's reference points

e. Feedback loop

Chapter Application**Case Studies with Critical Thinking Questions****Scenario 1**

A middle-aged woman is being seen in the office for insomnia and hot flashes. She says she cannot understand why these things are happening to her. She has always been a good sleeper, and she is always cold. She says that her friends tell her she is going through menopause, but she doesn't think she is old enough for that and refuses to believe them.

a. What type of coping skill is she using? She is using a defense mechanism so that she does not have to deal with the situation.

b. Which of these coping skills is this patient using? Repression and denial

c. What can you do to help her accept her condition? Provide her with information regarding menopause and ways to help her control her symptoms.

Scenario 2

You have had an extremely frustrating day at work but have managed to keep your emotions in check and get through the day. You have been very professional with both patients and coworkers even though you wanted to explode. When you get home, your kids ask you what you are making for dinner, and you direct all your pent-up anger toward them.

a. Which defense mechanism are you using? Displacement

b. Which part of you did you use to respond to your children? Your social self or work self