



# Medical Assisting Student Handbook 2021-2022

*Effective April 1, 2021*

Community College of Vermont  
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## WELCOME

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The Community College of Vermont (CCV) offers two medical assisting certificates, Administrative Medical Assisting and Clinical Medical Assisting, and an A.S. degree in Health Science. The A.A.S. degree in Medical Assisting was archived in 2019. Students currently enrolled in the A.A.S. degree will continue to access the courses necessary to complete their program by using planning tools provided and should consult the Medical Assisting student handbook from the 2018-2019 catalog for more information about that program.

Medical assistants perform routine administrative and clinical duties in a healthcare practice and serve as vital liaisons between the doctor and patient. This is an area of high demand in Vermont and beyond. Students will enjoy small classes taught by faculty who are professionals in their field and bring into the classroom a wealth of practical skills and expertise. Each certificate requires an internship that will give you the opportunity to apply your learning and connect with local healthcare professionals. CCV's Medical Assisting certificates provide students the opportunity to obtain nationally-recognized certification through successful completion of the Certified Clinical Medical Assistant (CCMA) or the Certified Medical Administrative Assistant (CMAA) examinations offered by the National Healthcareer Association (NHA).

This Medical Assisting Student Handbook serves as an addendum to CCV's Student Handbook and includes critical information that will help you succeed in these certificate programs. In the pages ahead, you will find information about the specific requirements and expectations of students enrolled in the Administrative Medical Assisting and Clinical Medical Assisting certificates.

Other sources of support and information include the CCV catalog, CCV website, CCV student portal, and your academic advisor. If you can't find what you need, please ask! Asking for help is one of the most important lessons you can learn; it is what helps students become successful in college and beyond. I wish you success and warmly welcome you to CCV!

Best,



Candace Lewis  
Associate Academic Dean

**THIS MEDICAL ASSISTING STUDENT HANDBOOK PROVIDES INFORMATION SPECIFICALLY FOR STUDENTS ENROLLED IN THE MEDICAL ASSISTING CERTIFICATES OR MEDICAL ASSISTING COURSES.**

A full listing of student rights, responsibilities, policies, and procedures is available at [Consumer Information](#).

## ABOUT THE MEDICAL ASSISTING CERTIFICATES

A full description of certificate requirements is available in the [CCV Catalog](#).

The following diagram provides a sample three semester pathway through the Clinical Medical Assisting certificate. Please note that some of the classes in this program have several prerequisite courses that must be completed first, so attention to course sequence is very important. Your advisor can introduce you to CCV's [Program Planning](#) tool to assist in your degree planning.

Table 1. Sample sequence of courses in Clinical Medical Assisting Certificate; course availability varies by academic center (see below).

| Semester 1   | Semester 2   | Semester 3  |
|--|--|---|
| <p><b>Submit Immunizations before enrollment in classes.</b></p> <ul style="list-style-type: none"> <li>INT 1050<br/>Dimensions of Self &amp; Society</li> <li>AHS 1045<br/>Introduction to Health Care</li> <li>BIO 1140<br/>Human Biology</li> <li>AHS 1205<br/>Medical Terminology</li> </ul> | <p><b>Complete Background Check before enrollment in classes.</b></p> <ul style="list-style-type: none"> <li>ENG 1060<br/>English Composition</li> <li>CIS 1041<br/>Computer Applications</li> <li>AHS 2470<br/>Fundamentals of Pharmacology*</li> <li>AHS 2070<br/>Clinical Medical Assisting*</li> </ul> | <p><b>Submit CPR/First Aid Certification before enrollment in classes.</b></p> <ul style="list-style-type: none"> <li>AHS 1410<br/>Introduction to Phlebotomy</li> <li>AHS 2820<br/>Clinical Medical Assisting Internship*</li> </ul> |

\*Course has prerequisite requirements.

### Course Availability

Many courses for the Administrative Medical Assisting certificate, and some courses for the Clinical Medical Assisting certificate are offered at several CCV locations and online. However, some courses, such as Clinical Medical Assisting, Fundamentals of Pharmacology, and the clinical internship course are available in select locations that may require travel for students. Please note that these courses are offered in a hybrid format to minimize travel as much as possible. Students will find these courses primarily in Brattleboro, Rutland, Montpelier, Newport, and Winooski.

# STUDENT REQUIREMENTS

There are many additional requirements for students and professionals in the healthcare field. As you gather documents, such as immunization information and BLS certifications, you must retain copies and create a file so that you can easily produce these documents whenever they are requested by potential internship locations or future employers.

## IMMUNIZATIONS

Allied health program students are required by the State of Vermont to provide documentation of immunizations before they can enroll in program courses. A letter is sent to all students who apply to these programs (Appendix A). Students must comply with state regulations regarding proof of immunization. In addition, most internship placement locations will require proof of immunizations beyond that required of academic programs. Students should be prepared to supply proof of the following immunizations to their internship locations:

- Tetanus
- Diphtheria
- Pertussis
- Measles
- Mumps
- Rubella
- Varicella
- Hepatitis B
- TB\*
- Influenza vaccine^
- COVID-19 vaccine\*\*

\*For TB, evidence of a PPD with negative results performed within the past 12 months is often required.

^Current season flu vaccine is required by some internship partners. Students are strongly encouraged to have this vaccination.

\*\*Most internship partners are expected to require this vaccine in the coming years.

If an internship placement location requests documentation, students must submit proof of immunization directly to the facility in addition to CCV.

If you have any questions about immunization requirements at CCV, please contact Linda Schlott at [Linda.Schlott@ccv.edu](mailto:Linda.Schlott@ccv.edu) or call (802) 828-3024. You may also fax immunization documentation to (802) 828-2805.

## BLS FOR HEALTHCARE PROVIDERS/PROFESSIONALS

All Medical Assisting students must successfully complete BLS for Healthcare Providers/Professionals as a program requirement and before enrolling in internships. You must complete this requirement through either the American Red Cross or American Heart Association. **Fully online classes are not acceptable.** The course must include some in-person practical testing component. Copies of the front and back of the certification cards must be provided to the college prior to enrolling in the internship courses in order for this program requirement to be met. Your advisor will provide the documentation to the registrar and the course requirement, AHS-2310 BLS for Healthcare Providers, will be marked as completed on your degree audit. **Please note that you must maintain your certification throughout your program.** Certification must be current when enrolling in internship.

## CRIMINAL BACKGROUND CHECK

You must successfully complete the CCV-specific criminal background check through CastleBranch before you can register for the Administrative and Clinical Medical Assisting courses. These records are confidential and can only be viewed by select staff at CCV and you.

**Previously completed background checks or background checks from other agencies or colleges cannot be used to meet this requirement.**

If an internship placement requests documentation, you must submit the results of the criminal background check directly to the facility. If the clinical facility requests additional searches or a drug test, you will be responsible for obtaining any additional data and providing it directly to the facility.

To start the criminal background check process:

1. Go to: [www.CastleBranch.com](http://www.CastleBranch.com).
2. Click on "Place Order" and enter package code: CQ01.
3. You will then be directed to set up your CastleBranch account.
4. Pay the fee directly to CastleBranch online.

## CRIMINAL BACKGROUND CHECK FAQs:

### **What happens in the criminal background check process?**

Once you set up your CastleBranch account and pay the required fee, you will submit information to run your criminal background check. CCV and CastleBranch have agreed on a package that checks the nationwide federal criminal search, county criminal search, residence history, social security search, nationwide database search and OIG (Office of Inspector General-List of Excluded Individuals/Entities) report. You will be given a unique password which allows you to view your criminal background check results securely online. Once the check is run, you will be notified of your status by CastleBranch. Completion of this program requirement will also be displayed in your program evaluation.

### **What if I have already completed a background check through a different vendor for employment or another program?**

All students must complete the criminal background check through CastleBranch as described in the CCV Catalog. Each vendor and institution packages different combinations of local, state, and federal searches. Only the package (CQ01) available through CastleBranch is acceptable to meet CCV's program requirement.

### **What happens if I have a prior conviction?**

Students who have a misdemeanor charge involving theft, abuse, or drugs or any felony conviction may be prevented from participating in some of the required courses and thus be unable to complete the certificates. In addition, students with recent or multiple misdemeanor charges may also be prevented from some program courses or have other restrictions imposed. Each situation will be reviewed on a case by case basis by the Academic Dean, Dean of Students, and Associate Academic Dean. This may require a meeting with you to better understand the conviction. After a decision is reached, you will be notified in writing whether or not you will be allowed to enroll in required program courses.

## **How will a prior conviction impact my ability to gain employment as a medical assistant?**

A felony conviction may prevent employment in a medical assisting job. Some healthcare providers will accept a misdemeanor conviction not involving theft, abuse, or drugs. You should check with the agency with which you wish to work for its policy on prior convictions.

## **What happens if the clinical facility requests additional information?**

If the clinical facility requests documentation, you must submit the results of your criminal background check directly to the facility. If the clinical facility requests additional searches or a drug test, you will be responsible for obtaining any additional data and providing it directly to the facility.

## **How long does the criminal background check take to process?**

Criminal background checks by CastleBranch have a fairly quick turnaround. They estimate it will take between 24 and 72 hours to process. In some cases, the process can take up to several weeks.

## **How do I dispute additional charges or criminal records?**

Once your results are returned, you will receive a message in your CastleBranch Message Inbox entitled *Completed Order Results*. In this message, links are provided to dispute additional charges or criminal records.

## **Scrubs and Nametags for Clinical Medical Assisting Students**

Students are responsible for purchasing their own scrubs and nametags to wear to select clinical program courses and to their internship placement site. Faculty in the following courses will expect **Medical Assisting certificate students** to come to class in their scrubs:

- AHS-1410 Introduction to Phlebotomy
- AHS-2070 Clinical Medical Assisting
- AHS-2470 Fundamentals of Pharmacology
- AHS-2820 Clinical Medical Assisting Internship

CCV students must purchase pewter (dark gray) colored scrubs, but may choose any style that is comfortable. Scrubs may be purchased through any vendor, so long as the color is pewter (dark gray). Instructions for ordering scrubs through a local vendor and for ordering name tags are below:

Scrubs:

1. Go to <https://ccvuniforms.itemorder.com/sale>
2. Click CCV link located at the top of the screen
3. Choose pant and shirt options and quantity
4. Proceed to checkout where you will create an account to pay for your order

Name Tag:

1. Call Initial Ideas at (802)773-6310
2. Identify yourself as a CCV Medical Assisting student needing a name tag.
  - a. You have the option for a pin back or magnetic back; the magnetic back has an additional charge
3. They will ask for your name and payment information.



# INTERNSHIP REQUIREMENTS

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As a student in either of CCV's Medical Assisting certificates, you must complete one 80-hour internship with patient contact in out-patient facilities, private practices, or clinic settings, without compensation. Internships provide an environment for students to practice and demonstrate skills learned in their courses. Internships also provide an opportunity for students to refine skills, interact with patients, staff, and physicians, as well as use equipment in actual clinical settings. Students participating in internships must abide at all times by the rules and regulations of their assigned clinical facility. Many internship locations will require students to attend orientation or training sessions prior to beginning their internship hours. Students should be aware that orientation requirements are in addition to the 80 internship hours. **Students must conduct themselves in a professional manner and adhere to all dress codes.** In the case that policies and procedures of the clinical facility are not immediately clear, it is the student's responsibility to ask for clarification from his/her Internship Supervisor. Additional information is available in the Student Conditions for Internship Placement document (Appendix B).

## Planning for Your Internship

Completing your internships will require planning on your part. **Before the internship semester, students must ensure that they are able to create flexibility and availability in their schedules to meet the demands of the internship.** This might include arranging for additional support with family obligations or working with supervisors to modify existing work schedules. Your advisor can be of assistance in thinking through these concerns.

Internship placements are coordinated by the college with partnering healthcare institutions. Students must not communicate directly with healthcare facilities until instructed to do so by the college. We will do our best to match students up with a healthcare facility that coincides with their strengths and interests, and is within reasonable driving distance to your home. However, please be aware that you will need to arrange travel for your internship. The capacity of our partners to host internships changes on a semester by semester basis depending on staffing availability and requests by multiple educational institutions and programs. Students may need to commute within a 50 mile radius of their home CCV center in order to complete their internship. Students must notify the college of their intent to enter an internship by using the Internship Intent Form (Appendix C). This form must be submitted to the college during the semester prior to enrolling in the internship course. On this form, you will be asked for your availability. Please note that most of our healthcare partners place interns in workplaces that are open during the workweek (M-F, 7am-5pm).

Students are encouraged to consider securing personal liability insurance in advance of their internship semester. A few of our placement locations are requiring proof of this insurance before they will accept students. This is good practice for anyone working in a healthcare field and student rates are often quite reasonable. The following is a list of a few organizations that offer this type of coverage.

- [CPH & Associates](http://www.cphins.com) (www.cphins.com): approx. \$25 (be sure to choose student, not medical assistant, on application)
- [CM&F Group](http://www.cmfgroup.com) (www.cmfgroup.com): approx. \$30
- [HPSO](http://www.hpso.com) (www.hpso.com): approx. \$40

In some cases, students who enroll in the internship many semesters after their didactic coursework or having completed didactic coursework elsewhere, may be asked to demonstrate competency in clinical and administrative skills before placement in an internship.

### Key Points to Remember:

- **CCV will secure your internship placement, please do not contact healthcare facilities until instructed to do so.**

- All internship communication will be done through your CCV email. Make sure to monitor this daily in order to provide additional needed documents and confirm a placement in a timely manner.
- Your internship will require you to have availability during the workweek (M-F, 7am-5pm).
- You may be required to travel up to 50 miles for your internship.
- Some internship sites have additional requirements such as drug testing, orientations, or proof of personal liability insurance.

## STUDENT INTERNSHIP FAQs:

### What is an internship?

An internship is an on-site work experience that is either directly related to your major field of study or your career interest.

### What are the benefits of an internship?

Internship experience is valuable for exploring fields of work which you may wish to enter after graduation. Experience develops new skills and strengthens existing skills. Work experience helps you establish professional contacts in a potential field of interest. You will be able to demonstrate work setting accomplishments in your resume.

### If I have work experience in the field of medical assisting, do I still have to complete the CCV internship courses?

All students must enroll in the Administrative Medical Assisting Internship and the Clinical Medical Assisting Internship after completing the course prerequisites. In extremely rare cases, students with transfer credit reflective of recent extensively documented experience may request a substitution of their transfer credit (this includes students with credit earned through prior learning assessment). Students should consult with their advisor or the Associate Academic Dean.

### May I complete my internship at my current place of employment?

Completing the required internship courses in different healthcare settings provides students a low-risk opportunity to explore new potential workplaces. In some cases, students' employers endorse completing the internship hours at their place of employment. If you are currently working as a medical assistant, it may be possible for you to complete the required 80 hours at your place of employment. In order to do so, you should appeal in writing to the Associate Academic Dean overseeing this program. If the Associate Academic Dean provides permission, you would need to complete the 80 internship hours outside of your work hours, the internship hours cannot be paid, and your clinical supervisor must be someone other than your current supervisor.

### Am I responsible for finding an internship?

No, CCV has formal partnerships around the state and we will match you with one of our participating healthcare facilities. **Students must not communicate directly with healthcare facilities until instructed to do so by the college.** The capacity of our partners to host internships may change on a semester by semester basis. Students may need to commute within a 50 mile radius of their home CCV center in order to complete their internship.

### May I enroll in both the Administrative and Clinical Medical Assisting Internship courses in the same semester?

In very rare cases, a student may request permission from the Associate Academic Dean overseeing the program to enroll in both internship courses in the same semester. If permission is granted, you must

ensure your schedule allows you to complete a total of 160 hours in healthcare facilities including availability for a minimum of 3 days per week throughout the semester, attend all class sessions, and spend an average of 12-18 hours per week on out-of-class homework.

### **What if I have an internship in mind?**

Many students have connections in the field and organizations with which they would like to intern. Please discuss potential internship locations with CCV Career Services to assess the feasibility of an affiliation agreement. CCV has formal affiliation agreements with each approved healthcare facility, and establishing new agreements can take some time.

### **Are there any restrictions on what I can do for my internship?**

- A. Internships cannot be a continuation of previous or existing employment responsibilities, nor natural job promotions.
- B. Internships are not allowed with companies owned or managed, fully or in part, by family members nor can internship positions be supervised, directly or indirectly, by family members.
- C. Commission-based internships (or similar compensation methods) are not allowed.
- D. Internships involving direct payments from clients and customers to students are not allowed.
- E. Activities of an unethical or illegal nature are not permitted.
- F. Credit is not allowed retroactively for internship experience.

### **How do I receive credit for my internship class?**

For credit, you must first enroll in the internship course and complete and abide by all necessary requirements. In addition to the assignments that must be completed through the in-class component, interns must complete a **minimum** of 80 hours of work at their internship site. Credit is given based on successfully completing all course requirements by the specified due dates and in a satisfactory manner. Commuting time, meal breaks, extracurricular activities, and social functions do not count towards work hours.

### **Can I register for the internship class right up until the first day of class?**

No. Enrollment in the Clinical and Administrative Medical Assisting Internship courses closes two weeks before the start of the semester. Locating and securing internship placements can take some time, and students who enroll late may not have an assigned internship until midway through the semester. For this reason, students may not register late for the Clinical and Administrative Medical Assisting Internship courses.

### **Do I get paid for my internship?**

Internships through CCV are unpaid.

### **What will I be doing at my internship?**

Two Medical Assisting courses, Administrative Medical Assisting Internship and Clinical Medical Assisting Internship, give you hands-on workplace experience and an opportunity to make connections with local healthcare facilities and employers. For each class, you will work with your site supervisor to create a Learning Contract (Appendix D)

The Administrative Medical Assisting Internship course provides you with the opportunity to practice administrative duties such as data entry, computer applications, records management, financial procedures, and scheduling patients in a medical office.

The Clinical Medical Assisting Internship course provides you with the opportunity to practice clinical duties such as infection control, equipment operation, patient preparation, diagnostic testing, and collecting and processing specimens in a medical office.

See Appendix E for a detailed list of competencies you will be expected to demonstrate in each course.

### **What are my responsibilities as an intern?**

- A. Learn the registration procedures and assume leadership to ensure that all forms and requirements are met.
- B. Comply with state regulations regarding proof of immunization. If the Clinical Facility requests documentation, you must submit proof of immunization directly to the facility in addition to CCV.
- C. Successfully complete a criminal background check through CastleBranch before registering for either the Administrative or Clinical Medical Assisting didactic course. If the Clinical Facility requests documentation, you must submit the results of the criminal background check directly to the facility. If the clinical facility requests additional searches or a drug test, you will be responsible for obtaining any additional data and providing it directly to the facility.
- D. Provide personal transportation to the internship site and assume responsibility for meeting internship hours at the site.
- E. Be willing to be supervised and evaluated, and willing to engage in self-evaluation.
- F. Complete all requirements as outlined in the course syllabus and attend class regularly.
- G. Ensure completed site supervisor surveys and competency checklists are provided to your instructor.
- H. Demonstrate commitment and dedication to the employer and treat work as first priority.
- I. Be punctual (including notification of employer when absence or tardiness is **absolutely necessary**), dependable and perform in a professional manner (this includes a positive attitude and proper work attire).
- J. Communicate regularly and effectively with team/co-workers, site supervisor, and course instructor to ensure timely and accurate completion of work and to establish good interpersonal relationships.
- K. Communicate promptly with the site supervisor and course instructor by phone or email if you have any questions or problems.
- L. Conduct yourself in a professional manner and adhere to all dress codes. In the case that policies and procedures of the clinical facility are not immediately clear, it is your responsibility to ask for clarification from your site supervisor.

### **What are the responsibilities of my site supervisor?**

The site supervisor is an employee of the healthcare organization who assumes responsibility to work with a student intern. She or he has the obligation to do the following:

- A. Designate appropriate personnel as internship site supervisor to oversee the internship experience at the clinical facility.
- B. Provide internship opportunities that meet the learning objectives as determined by the College and listed in the competency checklists.
- C. Provide orientation, appropriate training, and supervision for students during the internship.
- D. Provide evaluation of student progress in the internship, as outlined in the Site Supervisor Evaluation form and as requested by the responsible faculty member from the College.
- E. Acknowledge that student records relating to or concerning the internship are educational records and are protected by the Family Educational and Privacy Rights Act (FERPA). The clinical facility shall not disclose such records except to the College in strict compliance with the provisions of FERPA and upon prior written approval by the student.
- F. Meet with the intern on a regular basis, providing immediate feedback to the student so s/he knows when the work is satisfactory or what measures to take to improve.

- G. Orient the student intern to any required safety standards, confidentiality standards, organization rules, and legal requirements at the start of the internship.
- H. Coordinate and communicate with the course instructor about the student's progress by completing the site supervisor survey and competency checklists in a timely manner.
- I. During the internship period, employ each intern for a minimum of 80 hours as required by the curriculum. (Appendix F)
- J. Communicate with the course instructor if there is a serious deficiency found in the student's performance. In such event, the site supervisor and course instructor will attempt to devise a plan by which the student may be assisted in achieving the stated objectives of the educational experience. The site supervisor has the right to terminate any student whose health or performance is a detriment to patient, client, or patron well-being.

### **What are the responsibilities of the course instructor?**

- A. Review the student's site supervisor evaluation forms and provide feedback in a timely manner (Appendix G).
- B. Meet with the interns in class sessions, providing interns with supplemental assignments that address the essential objectives and support students' learning in a professional setting.
- C. Evaluate and assess the extent to which students meet the essential objectives.
- D. Maintain contact with the intern and the site supervisor over the internship period.
- E. Meet with the student and site supervisor by phone, Skype, or some other technology-mediated platform at the mid-point of the semester to provide the student with formative assessment and determine how we can improve the site supervisor's experience.
- F. Make appropriate interventions if problems occur and coordinate adjustment or termination of the internship, in extreme circumstances.
- G. Provide the site supervisor with copies of current course outlines and course objectives, when requested.
- H. Create and submit mid-semester and final evaluations and grades.
- I. Collect completed internship competency checklists and completed site supervisor surveys, and submit them to the hiring coordinator.

### **How do I request accommodations for my internship location?**

Students must meet with an ADA coordinator to request specific accommodations for internship locations as requirements in internships differ from those in the classroom. Students must also request classroom accommodations, if needed.

### **What if I am unable to complete the required 80 hours before the end of the semester?**

Students are expected to complete all course requirements, including at least 80 hours in a clinical facility, before the last day of classes. In rare cases, extenuating circumstances may prevent a student from completing the required 80 hours by the end of the semester. Students should review the [Evaluation System Policy](#) and consult with their advisor and course instructor to determine whether an extension may be granted.

### **What if I am asked to leave my internship placement?**

Students who exhibit unprofessional behaviors or unsafe/unskilled practices may be asked to leave their placement. CCV is not obligated to find a second placement for students who have been dismissed from their internship placement due to their behavior or skills deficit. In this case a student will fail the internship course if they have not fulfilled the 80 hour requirement and/or have been identified as having a serious unsafe or unprofessional behaviors in their internship placement. Furthermore, CCV retains the right to require additional demonstration of preparedness before students are allowed to take the internship course a second time (see below).

### **What if I do not pass the internship course?**

Students must file an appeal with the academic dean's office in order to receive permission to enroll in either internship course a second time. As part of the appeal, students should reflect on constructive feedback provided by the internship supervisor and articulate steps they have taken to address the feedback and improve their behavior or skills deficits. The appeal letter should be sent to [AcademicDean@ccv.edu](mailto:AcademicDean@ccv.edu). CCV retains the right to require additional demonstration of preparedness before students are allowed to take the internship course a second time.

### **What if my question isn't answered here?**

One of the most effective ways to get answers and plan for your internship is to meet with your advisor. Advisor information can be found in the CCV Portal under the Web Services > Student Academic Profile drop down menu.

## **PROFESSIONAL CERTIFICATION**

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CCV's Clinical Medical Assisting certificate provides students the opportunity to obtain nationally-recognized certification through successful completion of the Certified Clinical Medical Assistant (CCMA) examination offered by the National Healthcareer Association (NHA). Students in the Administrative Medical Assisting certificate will be eligible for the NHA's Certified Medical Administrative Assistant (CMAA) certification upon successful completion of the certification examination.

# APPENDIX A



**IMPORTANT – PLEASE READ CAREFULLY**

Dear CCV Allied Health Student:

**As a student enrolled in a CCV health science program either part-time or full-time (and born after 1956), you are subject to the Vermont Immunization Law. The intent of this law is to ensure that all Vermonters are protected from vaccine preventable diseases. You are required to provide CCV with documentation for the immunizations listed below right away. A medical hold has been placed on your student account and will remain in effect until all requested documentation is received.** To be clear, a medical hold does NOT affect your ability to receive financial aid. ***However, you will not be able to register for the next semester(s) while a medical hold is on your account.***

**You will be required to provide CCV with documentation that you have received the following immunizations:**

- **Tdap (Tetanus, Diphtheria, and Pertussis) vaccine or Td (Tetanus and Diphtheria) vaccine** within the past 10 years
- **MMR (measles, mumps, and rubella) vaccine** – 2 doses. *You may substitute documentation of Positive Titer tests.*
- **Hepatitis B vaccine** – 3 doses. *You may substitute documentation of Positive Titer test*
- **Varicella (Chickenpox) vaccine** – 2 doses or positive titer test, or if you have actually had chickenpox, you do not need the vaccine. However, a Health Department form noting that you have had the disease must be submitted to the college. This form can be obtained at any CCV academic center or through this link: [http://healthvermont.gov/sites/default/files/documents/2016/11/ID\\_IZ\\_CCP\\_Documentation\\_of\\_Varicella\\_Disease.pdf](http://healthvermont.gov/sites/default/files/documents/2016/11/ID_IZ_CCP_Documentation_of_Varicella_Disease.pdf)

Acceptable documentation can be supplied by any of the following:

- An official school record from any school listing the individual immunizations and the complete date the immunization was administered.
- A record from any public health department listing the individual immunizations and the complete date the immunization was administered.
- A certificate signed by a physician, nurse practitioner, or physician assistant listing the individual immunizations and the complete date the immunization was administered.
- A record from an Immunization Registry listing the individual immunizations and the complete date's immunization was administered.
- A laboratory report of a titer indicating evidence of immunity to a specific disease.

If you do not have any of the documentation listed above:

- Ask your parents or other family members to check their record of your childhood immunizations;
- Check with the school you last attended;  
*High schools have to keep medical records for 9 years, so this may be your best source.*
- Schedule an appointment with your primary care provider as soon as possible to assure you get the required immunizations or laboratory report;
- If you do not currently have a primary care provider, you can access a list of Federally Qualified Health Centers in your area that provide low-cost or free immunizations: <http://www.bistatepca.org/bi-state-members-vt>

Vermont does allow for exemption to the immunization vaccine requirement for medical or religious reasons. ***However, please keep in mind that if your health science program requires an internship, you cannot get placed in an internship without the required immunization documentation.***

Please send us a copy of your immunization records, but remember to keep your original. You can fax it to **(802) 828-2805**; bring it to your local CCV academic center, or mail it to: **Linda Schlott, CCV Student Services, PO Box 489, Montpelier, VT 05601.** Thank you.

Sincerely,

Linda Schlott

Senior Staff Assistant, Student Services

(802) 828-3024

## APPENDIX B

### STUDENT CONDITIONS FOR MEDICAL ASSISTING INTERNSHIP PLACEMENT

As a student in the Medical Assisting degree program at the Community College of Vermont, it is important that you understand the responsibilities expected in an internship setting.

Please read this form carefully and sign at the bottom attesting that you agree to the conditions below.

#### PATIENT CONFIDENTIALITY AND PRIVACY:

Students must understand and respect the confidential nature of the patient-specific data that is available to them. Students must comply with the policies and procedures of the clinical facility regarding the confidentiality and security of patient health information.

#### BLOOD-BORNE PATHOGENS:

Students must have a basic understanding of blood-borne pathogens and avoidance of transmission.

#### PROOF OF IMMUNIZATION:

Students must comply with state regulations regarding proof of immunization. If the clinical facility requests documentation, students must submit proof of immunization directly to the facility in addition to CCV.

#### CRIMINAL BACKGROUND CHECK:

Students must successfully complete a criminal background check through Certified Background before they can register for both the Administrative and Clinical Medical Assisting Internship courses and before they can begin their internship placement. If the clinical facility requests documentation, students must submit the results of the criminal background check directly to the facility. If the clinical facility requests additional searches or a drug test, students will be responsible for obtaining any additional data and providing it directly to the facility.

#### ADHERENCE TO POLICIES AND PROCEDURES:

Students participating in the 80-hour internship must abide at all times by the rules and regulations of both their assigned clinical facility and the Community College of Vermont. Students must conduct themselves in a professional manner and adhere to all dress codes. In the case that policies and procedures of the clinical facility are not immediately clear, it is the student's responsibility to ask for clarification from his/her Internship Supervisor. I understand that, if I am dismissed from my internship placement due to my behavior or skills, CCV is under no obligation to locate another placement for me. I also acknowledge that I will not likely pass the course if I am unable to complete the required 80 hours.

#### PERSONAL LIABILITY:

Although not required by CCV, students are encouraged to secure personal liability insurance in advance of their internship. Some internship sites will require this before placement.

By signing here, I agree to abide by the conditions stated above during and after my placement by the Community College of Vermont in an internship at a clinical facility for educational purposes.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_ (Please print below)

NAME: \_\_\_\_\_ COLLEAGUE ID: \_\_\_\_\_

COURSE TITLE: \_\_\_\_\_ SEMESTER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_



# Appendix C

## Medical Assisting Internship Intent Form Please return to [careerservices@ccv.edu](mailto:careerservices@ccv.edu)



Internship Semester: \_\_\_\_\_

Please circle one:           Administrative                   Clinical

Student Name: \_\_\_\_\_

CCV Email: \_\_\_\_\_ (please note: all correspondence will use your CCV email)

Phone: \_\_\_\_\_                   Text okay?        Yes    No

**Please enable voicemail and check both phone and email daily to aid in professional correspondence.**  
**Internship placements may be rescinded if not responded to within 48 hours.**

Please list preferred towns for internship placement: \_\_\_\_\_

Do you have access to reliable transportation? \_\_\_\_\_ If not, please explain: \_\_\_\_\_

Describe your area(s) of interest within the medical field: \_\_\_\_\_

Check all that apply:

- |   |   |
|---|---|
| <input type="checkbox"/> I like a fast paced work environment     | <input type="checkbox"/> I like to work on self-directed projects |
| <input type="checkbox"/> I like a quiet work environment          | <input type="checkbox"/> I like to work with children             |
| <input type="checkbox"/> I like to be a leader in the workplace   | <input type="checkbox"/> I like to work with the elderly          |
| <input type="checkbox"/> I like to work collaboratively in groups | <input type="checkbox"/> I like to work with adults               |

Is there any other information we might need to help us determine an appropriate internship location? Please include anything that might impact your performance of expected commonly expected duties.

### Internship Availability

**Please keep in mind that most healthcare offices are open only during normal business hours (M-F 7am-5pm) and do not have weekend hours available.**

What days of the week work best for you? Please ensure that you have availability for at least two weekdays.

Monday           Tuesday           Wednesday           Thursday           Friday

Do you have any scheduling restrictions including class times or scheduled work hours that you are unable to change during your internship semester? Please explain: \_\_\_\_\_

## Internship Document Checklist

Many internship locations will require you to come in for an interview and/or provide several pieces of documentation before committing to host your internship. These documents should be stored on your computer, ready to send, or via an online portfolio such as College Central Network (see your CCV Portal or contact Career Services for more information). Please confirm that you have in hand the following items:

- A current resume – **please include with this form for faster placement**
- A copy of your background check
- Your current CPR/First Aid certification; AHS Basic Life Support (BLS) for Healthcare is preferred by most internship partners.
- Proof of Immunizations:
  - Tetanus
  - Diphtheria
  - Pertussis
  - Measles
  - Mumps
  - Rubella
  - Varicella
  - Hep B
  - TB\*
  - Influenza vaccine^

\*For TB, you must provide evidence of a PPD with negative results performed within the past 12 months.

^Current season flu vaccine is required by some internship partners. Students are strongly encouraged to have this vaccination.

- Optional: Personal liability insurance (required by some internship locations):

\_\_\_\_\_ I have personal liability insurance.

\_\_\_\_\_ I am willing to purchase personal liability insurance (~\$35/year).

\_\_\_\_\_ I am NOT willing to purchase personal liability insurance.

I confirm that I have the above documents in my possession and available for review.

---

Signature

---

Date

## Appendix D



### Medical Assisting Internship Learning Contract

Students will complete 80 hours of field work as part of their Administrative Medical Assisting Internship course, and their Clinical Medical Assisting Internship course. The student and site supervisor should collaborate to complete the following *Learning Contract* and **return it to the faculty member before the start of the internship**. Completion of this contract will be used as one aspect of your final course evaluation.

#### CONTACT INFORMATION

---

- a. Student's Name:
- b. Student's Preferred Phone:
- c. Student's Email Address:
  
- d. Faculty Member's Name:
- e. Faculty Member's Email Address:
  
- f. Internship Site & Address:
  
  
- g. Site Supervisor's Name & Position Title:
- h. Site Supervisor's Work Phone:
- i. Site Supervisor's Email Address:

#### TIMELINES

---

- a. Mutually determined starting date:
- b. Mutually agreed completion date:
- c. Supervisor evaluation submission date:
- d. Completed competency checklist submission date:
- e. Date of mid-semester check in with faculty member, site supervisor, and student:

#### LEARNING OUTCOMES & INTERNSHIP GOALS

---

The learning outcomes for each specific internship experience are listed below. For a listing of the full program outcomes for the CCV Medical Assisting degree can be located in the current [CCV Catalog](#) .

The student and the site supervisor will work together to create three goals with action steps that align with the learning outcomes of the internship course and respective competency checklist. (See page 4 for examples of goals, action steps, and rationales of goal/outcome alignment.)

**AHS-1810 Administrative Medical Assisting Internship 3 Credits**

This internship course provides students with the opportunity to practice administrative duties performed by a medical assistant in a medical office. Students will demonstrate competencies including professional communication and behavior, data entry, computer applications, records management, scheduling patients, and financial procedures. This course should be completed early in the Medical Assisting program. Students must complete at least 80 hours in the medical office. Prerequisites: Medical Terminology and Administrative Medical Assisting, and Medical Coding & Billing I.

1. Display a professional manner and image, demonstrate initiative and responsibility, and work as a member of the healthcare team.
2. Perform within legal and ethical boundaries; maintain patient privacy, confidentiality, and HIPAA.
3. Comply with established risk management and safety procedures.
4. Recognize and respect cultural diversity and adapt communication to the individual's ability to understand.
5. Utilize electronic technology to receive, organize, prioritize, and transmit information.
6. Schedule, coordinate and monitor appointments, admissions, and procedures.
7. Perform procedural and diagnostic coding, apply bookkeeping principles, and manage accounts receivable.
8. Research and establish educational, career, and professional goals related to the medical assisting field.

**AHS-2820 Clinical Medical Assisting Internship 3 Credits**

This internship course provides students with the opportunity to practice clinical duties performed by a medical assistant in a medical office. Students will demonstrate competencies including infection control, patient interviews, equipment operation, patient preparation and assisting the physician, diagnostic testing, and collecting and processing specimens. Students must complete at least 80 hours in the medical office. Students who have not completed Clinical Medical Assisting in the previous four semesters must receive permission to enroll. Prerequisites: Human Biology, Pharmacology, Clinical Medical Assisting, and CPR/First Aid.

1. Comply with quality assurance practices and perform routine maintenance of clinical equipment.
2. Apply principles of aseptic techniques and infection control.
3. Prepare and maintain examination and treatment room.
4. Prepare patients for examination and procedures, and obtain patient history and vital signs.
5. Adhere to established patient screening procedures and follow up on patient test results.
6. Assist with examination, procedures, and treatments.
7. Provide patient education regarding nutrition, medication and special tests.
8. Maintain medication, immunization, and patient health records.
9. Collect and process specimens and perform diagnostic tests
10. Research employment opportunities, prepare a cover letter and professional resume.

**Program outcomes for my Medical Assisting degree (locate them and list them here):**

**Develop three goals (with action steps) and describe how they align with your program outcomes:**

**Goal One:**

**Action Steps:**

**How it aligns with my program outcome(s):**

**Goal Two:**

**Action Steps:**

**How it aligns with my program outcome(s):**

**Goal Three:**

**Action Steps:**

**How it aligns with my program outcome(s):**

## **WORKPLACE PROTOCOLS**

---

Please describe the workplace protocols that the student will be expected to follow (dress code, schedule, communication with peers & supervisors, required orientation, paperwork, etc.):

## **SITE SUPERVISION**

---

Describe the site supervision to be provided. What kind of instruction, assistance, and consultation will the student receive and from whom will they receive it to ensure success in meeting their learning goals? **Please note:** the site supervisor will be completing a formal evaluation of the student's skills and behaviors at the end of the semester. The site supervisor will also complete a checklist of competencies.

**Develop one to three goals (with action steps) the site supervisor would like the student to achieve :**

**Goal One:**

**Action Steps:**

**EXAMPLE OF GOALS, ACTION STEPS, AND RATIONALES OF GOAL/PROGRAM ALIGNMENT FOR HUMAN SERVICES  
2013/2014 Program Outcomes for Human Services:**

1. *Demonstrate methods social scientists use to research and interpret evidence about patterns of human behavior and experience across the life span;*
2. *Demonstrate effective interpersonal communication techniques with diverse populations;*
3. *Identify client needs, locate resources, and support individuals as appropriate;*
4. *Exhibit professional conduct in a human services organization including legal and ethical responsibilities, roles, and boundaries;*
5. *Explore pathways for educational and career development in the student's field of study.*

**Develop Three Goals (with action steps) and describe how they align with your program outcomes.**

**Goal One:**

*I will increase my understanding of alcoholism to learn more about addiction and recovery.*

**Action Steps:**

- *I will sit in on an Alcoholics Anonymous meeting in January to observe Kelly facilitate discussions about addiction.*
- *I will research information about alcoholism in the Journal of Alcohol and Drug Education on the Hartness Library and develop a pamphlet about addiction for the center by April.*

**How it aligns with my program outcome(s):**

*This goal aligns with Program Outcome number one and three because I will be conducting research to learn about human behavior patterns, and I will be locating resources to support the clients in the drop in center.*

**Goal Two:**

*I will learn how to conduct intakes and will become comfortable working with the diverse clients at the Center.*

**Action Steps:**

- *Interview and provide initial phone support to clients after observing for the first two weeks. I will practice interpersonal communication skills including the use of closed and open-ended questioning when supporting clients.*
- *I will familiarize myself with the agency's computer system and update computer database with intake information from interviews and phone conversations starting in March.*

**How it aligns with my program outcome(s):**

*This goal aligns with Program Outcome number two, three, and four because I will be demonstrating interpersonal communication skills and identifying initial client needs during the intake process. In addition, I will learn about confidentiality and boundaries as part of this process.*

**Goal Three:**

*I will locate and develop resources to assist the clients at the Center.*

**Action Steps:**

- *I will research and create a master list of agencies within the local and regional area for use with referrals by the first week of April.*
- *I will review the policies and procedures of the agency and create a brochure for the agency by the end of the semester that will help clients understand how it can help them.*

**How it aligns with my program outcome(s):**

*This goal aligns directly with Program Outcome number three because I will be creating resource materials after researching them for clients at the Center.*

# Appendix E



## ADMINISTRATIVE MEDICAL ASSISTING INTERNSHIP EVALUATION

STUDENT NAME/ID: \_\_\_\_\_

PHONE: \_\_\_\_\_

INSTRUCTOR: \_\_\_\_\_

PHONE: \_\_\_\_\_

INTERNSHIP PLACEMENT & ADDRESS: \_\_\_\_\_

SUPERVISOR NAME: \_\_\_\_\_

PHONE: \_\_\_\_\_

**NOTE: For any 'Not Yet Assessed' marks, please explain the reason after that section.**

| MEDICAL LAW AND ETHICS  | Exceeds Expectations | Meets Expectations | Needs Improvement | Not Satisfactory | Not Yet Assessed |
|---|----------------------|--------------------|-------------------|------------------|------------------|
| Confidentiality, ethical boundaries, documentation, risk management |                      |                    |                   |                  |                  |
| <b>Please explain any items not yet assessed</b>                    |                      |                    |                   |                  |                  |
| PATIENT EDUCATION   | Exceeds Expectations | Meets Expectations | Needs Improvement | Not Satisfactory | Not Yet Assessed |
| Respect for cultural diversity                                      |                      |                    |                   |                  |                  |
| Patient instruction   |                      |                    |                   |                  |                  |
| Patient resource materials  |                      |                    |                   |                  |                  |
| Documentation   |                      |                    |                   |                  |                  |
| <b>Please explain any items not yet assessed</b>                    |                      |                    |                   |                  |                  |
| COMMUNICATION   | Exceeds Expectations | Meets Expectations | Needs Improvement | Not Satisfactory | Not Yet Assessed |
| Written communication   |                      |                    |                   |                  |                  |
| Verbal communication  |                      |                    |                   |                  |                  |
| Nonverbal communication   |                      |                    |                   |                  |                  |
| Telephone techniques  |                      |                    |                   |                  |                  |
| <b>Please explain any items not yet assessed</b>                    |                      |                    |                   |                  |                  |
| INSURANCE   | Exceeds Expectations | Meets Expectations | Needs Improvement | Not Satisfactory | Not Yet Assessed |
| Insurance terminology   |                      |                    |                   |                  |                  |
| Claims  |                      |                    |                   |                  |                  |

|  |                             |                           |                          |                         |                         |
|--|-----------------------------|---------------------------|--------------------------|-------------------------|-------------------------|
| Coding   |                             |                           |                          |                         |                         |
| Insurance finance applications                   |                             |                           |                          |                         |                         |
| <b>Please explain any items not yet assessed</b> |                             |                           |                          |                         |                         |
| <b>FINANCIAL BOOKKEEPING</b>                     | <b>Exceeds Expectations</b> | <b>Meets Expectations</b> | <b>Needs Improvement</b> | <b>Not Satisfactory</b> | <b>Not Yet Assessed</b> |
| Financial Bookkeeping Terminology                |                             |                           |                          |                         |                         |
| Patient billing                                  |                             |                           |                          |                         |                         |
| Collections                                      |                             |                           |                          |                         |                         |
| Accounting Procedures                            |                             |                           |                          |                         |                         |
| Banking Procedures                               |                             |                           |                          |                         |                         |
| Financial Mathematics                            |                             |                           |                          |                         |                         |
| <b>Please explain any items not yet assessed</b> |                             |                           |                          |                         |                         |
| <b>CLERICAL FUNCTIONS</b>                        | <b>Exceeds Expectations</b> | <b>Meets Expectations</b> | <b>Needs Improvement</b> | <b>Not Satisfactory</b> | <b>Not Yet Assessed</b> |
| Medical reception terminology                    |                             |                           |                          |                         |                         |
| Patient reception                                |                             |                           |                          |                         |                         |
| Scheduling                                       |                             |                           |                          |                         |                         |
| Records and chart management                     |                             |                           |                          |                         |                         |
| Supplies and equipment management                |                             |                           |                          |                         |                         |
| Computer applications                            |                             |                           |                          |                         |                         |
| <b>Please explain any items not yet assessed</b> |                             |                           |                          |                         |                         |
| <b>PROFESSIONALISM</b>                           | <b>Exceeds Expectations</b> | <b>Meets Expectations</b> | <b>Needs Improvement</b> | <b>Not Satisfactory</b> | <b>Not Yet Assessed</b> |
| Exhibit professional behavior and image          |                             |                           |                          |                         |                         |
| Perform as a member of a team                    |                             |                           |                          |                         |                         |
| <b>Please explain any items not yet assessed</b> |                             |                           |                          |                         |                         |

**SUPERVISOR SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

These competency checklists are subject to change based on current standards and requirements of the program and medical assisting examination requirements. Students will be notified of changes.



CLINICAL MEDICAL ASSISTING INTERNSHIP EVALUATION

STUDENT NAME/ID: \_\_\_\_\_

PHONE: \_\_\_\_\_

INSTRUCTOR: \_\_\_\_\_

PHONE: \_\_\_\_\_

INTERNSHIP PLACEMENT & ADDRESS: \_\_\_\_\_

SUPERVISOR NAME: \_\_\_\_\_

PHONE: \_\_\_\_\_

NOTE: For any 'Not Yet Assessed' marks, please explain the reason after that section.

| FUNDAMENTAL PRINCIPLES                           | Exceeds Expectations | Meets Expectations | Needs Improvement | Not Satisfactory | Not Yet Assessed |
|--|----------------------|--------------------|-------------------|------------------|------------------|
| Perform hand washing                             |                      |                    |                   |                  |                  |
| Wrap items for autoclaving                       |                      |                    |                   |                  |                  |
| Perform sterilization techniques                 |                      |                    |                   |                  |                  |
| Dispose of bio hazardous materials               |                      |                    |                   |                  |                  |
| Practice standard precautions                    |                      |                    |                   |                  |                  |
| <b>Please explain any items not yet assessed</b> |                      |                    |                   |                  |                  |

| SPECIMEN COLLECTION   | Exceeds Expectations | Meets Expectations | Needs Improvement | Not Satisfactory | Not Yet Assessed |
|---|----------------------|--------------------|-------------------|------------------|------------------|
| Perform venipuncture  |                      |                    |                   |                  |                  |
| Perform capillary puncture  |                      |                    |                   |                  |                  |
| Obtain throat specimen for microbiological testing                            |                      |                    |                   |                  |                  |
| Instruct patients in the collection of clean-catch, mid-stream urine specimen |                      |                    |                   |                  |                  |
| Instruct patients in the collection of fecal specimen                         |                      |                    |                   |                  |                  |
| <b>Please explain any items not yet assessed</b>                              |                      |                    |                   |                  |                  |

| <b>DIAGNOSTIC TESTING</b>                        | <b>Exceeds Expectations</b> | <b>Meets Expectations</b> | <b>Needs Improvement</b> | <b>Not Satisfactory</b> | <b>Not Yet Assessed</b> |
|--|-----------------------------|---------------------------|--------------------------|-------------------------|-------------------------|
| Use methods of quality control                   |                             |                           |                          |                         |                         |
| Perform urinalysis                               |                             |                           |                          |                         |                         |
| Perform hematology testing                       |                             |                           |                          |                         |                         |
| Perform chemistry testing                        |                             |                           |                          |                         |                         |
| Perform immunology testing                       |                             |                           |                          |                         |                         |
| Perform microbiology testing                     |                             |                           |                          |                         |                         |
| Screen and follow-up test results                |                             |                           |                          |                         |                         |
| Perform electrocardiograms                       |                             |                           |                          |                         |                         |
| Perform respiratory testing                      |                             |                           |                          |                         |                         |
| Perform pregnancy testing                        |                             |                           |                          |                         |                         |
| <b>Please explain any items not yet assessed</b> |                             |                           |                          |                         |                         |

| <b>PATIENT CARE</b>   | <b>Exceeds Expectations</b> | <b>Meets Expectations</b> | <b>Needs Improvement</b> | <b>Not Satisfactory</b> | <b>Not Yet Assessed</b> |
|---|-----------------------------|---------------------------|--------------------------|-------------------------|-------------------------|
| Perform telephone and in-person screening   |                             |                           |                          |                         |                         |
| Obtain vital signs  |                             |                           |                          |                         |                         |
| Obtain and record patient history   |                             |                           |                          |                         |                         |
| Prepare and maintain examination and treatment area                                     |                             |                           |                          |                         |                         |
| Prepare patients for and assist with routine and specialty examinations                 |                             |                           |                          |                         |                         |
| Prepare patients for and assist with procedures, treatments and minor surgery           |                             |                           |                          |                         |                         |
| Apply pharmacology principles to prepare and administer oral and parenteral medications |                             |                           |                          |                         |                         |
| Maintain medication and immunization records  |                             |                           |                          |                         |                         |
| <b>Please explain any items not yet assessed</b>  |                             |                           |                          |                         |                         |

| <b>PATIENT INSTRUCTION</b>                                     | <b>Exceeds Expectations</b> | <b>Meets Expectations</b> | <b>Needs Improvement</b> | <b>Not Satisfactory</b> | <b>Not Yet Assessed</b> |
|--|-----------------------------|---------------------------|--------------------------|-------------------------|-------------------------|
| Explain general office policies                                |                             |                           |                          |                         |                         |
| Instruct individuals according to their needs                  |                             |                           |                          |                         |                         |
| Instruct and demonstrate the use and care of patient equipment |                             |                           |                          |                         |                         |
| Provide instruction for health maintenance disease prevention  |                             |                           |                          |                         |                         |
| Identify community resources                                   |                             |                           |                          |                         |                         |
| <b>Please explain any items not yet assessed</b>               |                             |                           |                          |                         |                         |

| <b>OPERATIONAL FUNCTIONS</b>   | <b>Exceeds Expectations</b> | <b>Meets Expectations</b> | <b>Needs Improvement</b> | <b>Not Satisfactory</b> | <b>Not Yet Assessed</b> |
|--|-----------------------------|---------------------------|--------------------------|-------------------------|-------------------------|
| Perform an inventory of supplies and equipment                       |                             |                           |                          |                         |                         |
| Perform routine maintenance of administrative and clinical equipment |                             |                           |                          |                         |                         |
| Utilize computer software to maintain office systems                 |                             |                           |                          |                         |                         |
| <b>Please explain any items not yet assessed</b>                     |                             |                           |                          |                         |                         |

**TRANS DISCIPLINARY COMPETENCIES**

| <b>COMMUNICATION</b>                             | <b>Exceeds Expectations</b> | <b>Meets Expectations</b> | <b>Needs Improvement</b> | <b>Not Satisfactory</b> | <b>Not Yet Assessed</b> |
|--|-----------------------------|---------------------------|--------------------------|-------------------------|-------------------------|
| Respond to and initiate written communication    |                             |                           |                          |                         |                         |
| Recognize and respond to verbal communication    |                             |                           |                          |                         |                         |
| Recognize and respond to nonverbal communication |                             |                           |                          |                         |                         |
| Demonstrate telephone techniques                 |                             |                           |                          |                         |                         |
| <b>Please explain any items not yet assessed</b> |                             |                           |                          |                         |                         |

| LEGAL CONCEPTS                                    | Exceeds Expectations | Meets Expectations | Needs Improvement | Not Satisfactory | Not Yet Assessed |
|---|----------------------|--------------------|-------------------|------------------|------------------|
| Identify and respond to issues of confidentiality |                      |                    |                   |                  |                  |
| Perform within legal and ethical boundaries       |                      |                    |                   |                  |                  |
| Establish and maintain the medical record         |                      |                    |                   |                  |                  |
| Document appropriately                            |                      |                    |                   |                  |                  |
| Perform risk management procedures                |                      |                    |                   |                  |                  |
| Maintain liability coverage                       |                      |                    |                   |                  |                  |
| <b>Please explain any items not yet assessed</b>  |                      |                    |                   |                  |                  |

EVALUATOR SIGNATURE \_\_\_\_\_

CLINIC \_\_\_\_\_

DATE \_\_\_\_\_

These competency checklists are subject to change based on current standards and requirements of the program and medical assisting examination requirements. Students will be notified of changes.

# Appendix F

## Internship Attendance



Please keep one timesheet for yourself and give one timesheet to your supervisor for use as a sign-in sheet to document your internship hours. Give a copy of the signed and completed time sheet to your instructor at the end of your internship. Students must complete 80 hours.

Internship Location: \_\_\_\_\_

Student Name: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

Internship beginning and ending dates: \_\_\_\_\_

| Date | Arrival | Departure | Total Hours | Verified By |
|------|---------|-----------|-------------|-------------|
|      |         |           |             |             |
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|      |         |           |             |             |

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Appendix G



## CCV MEDICAL ASSISTING INTERNSHIP: SITE SUPERVISOR SURVEY

SITE: \_\_\_\_\_ Check Internship Type:  Administrative  Clinical

Please complete this brief survey at the midpoint (40 hours) and end of the internship.

Using the scale below, please rate your satisfaction with the following items related to the CCV Medical Assisting Internship:

Excellent=5 Good= 4 Acceptable= 3 Needs attention= 2 Unacceptable= 1

Thank you for sharing your important feedback with the student and CCV. **Student:** \_\_\_\_\_

| STUDENT INTERN PERFORMANCE | DATE | COMMENTS | DATE | COMMENTS |
|----------------------------|------|----------|------|----------|
| Attendance                 |      |          |      |          |
| Initiative/appearance      |      |          |      |          |
| Communication              |      |          |      |          |
| Critical thinking          |      |          |      |          |
| Information use            |      |          |      |          |
| Quality of work            |      |          |      |          |
| Multi-tasking              |      |          |      |          |
| Technical proficiency      |      |          |      |          |
| Professional attitude      |      |          |      |          |

Site Supervisor Additional Comments (Cont. on back, if needed.):

Site Supervisor: \_\_\_\_\_

Site Supervisor's Signature: \_\_\_\_\_

Faculty: \_\_\_\_\_

Faculty Signature: \_\_\_\_\_

Faculty Comments (Cont. on back, if needed.):