Medical Assisting

Administrative and Clinical Procedures with Anatomy and Physiology

Eighth Edition

RN-BSN, RMA (AMT), RPT, EFR, CPhT, MS

Kathryn A. Booth Leesa G. Whicker BA, CMA

Terri D. Wyman CPC, CMCS, CMRS, AS



MEDICAL ASSISTING

Administrative and Clinical Procedures with Anatomy and Physiology



MEDICAL ASSISTING

Administrative and Clinical Procedures with Anatomy and Physiology

Kathryn A. Booth, RN-BSN, RMA (AMT), RPT, EFR, CPhT, MS

Total Care Programming, Inc. Palm Coast, Florida

Leesa G. Whicker, BA, CMA Central Piedmont Community College—Retired Charlotte, North Carolina

Terri D. Wyman, CPC, CMCS, CMRS, AS

Baystate Wing Hospital—Retired Palmer, Massachusetts









MEDICAL ASSISTING: ADMINISTRATIVE AND CLINICAL PROCEDURES WITH ANATOMY AND PHYSIOLOGY

Published by McGraw Hill LLC, 1325 Avenue of the Americas, New York, NY 10019. Copyright ©2024 by McGraw Hill LLC. All rights reserved. Printed in the United States of America. No part of this publication may be reproduced or distributed in any form or by any means, or stored in a database or retrieval system, without the prior written consent of McGraw Hill LLC, including, but not limited to, in any network or other electronic storage or transmission, or broadcast for distance learning.

Some ancillaries, including electronic and print components, may not be available to customers outside the United States.

This book is printed on acid-free paper.

1 2 3 4 5 6 7 8 9 LWI 28 27 26 25 24 23

ISBN 978-1-266-28953-8 MHID 1-266-28953-4

Cover Image: sculpies/Shutterstock

All credits appearing on page or at the end of the book are considered to be an extension of the copyright page.

The Internet addresses listed in the text were accurate at the time of publication. The inclusion of a website does not indicate an endorsement by the authors or McGraw Hill LLC, and McGraw Hill LLC does not guarantee the accuracy of the information presented at these sites.

ໍົ

mheducation.com/highered

About the Authors

Kathryn A. Booth, RN-BSN, RMA (AMT), RPT, EFR, CPhT, MS is a medical assistant (RMA) who started her career as a nurse (RN). She has a master's degree in education as well as certifications as a pharmacy technician and in phlebotomy and medical assisting. She is a certified emergency first responder and rescue scuba diver. Kathryn is an author, an educator, and a consultant for Total Care Programming, Inc. She has over 35 years of teaching, nursing, and healthcare experience that spans five states. As an educator, Kathy has been awarded the teacher of the year in three states where she taught various health sciences, including medical assisting in both a classroom and an online capacity. Kathy serves on the AMT Examinations, Qualifications, and Standards Committee and the Cardiac Credentialing International CRAT Exam Committee. She stays current through volunteer employment and obtaining and maintaining certifications. Her goal is to develop upto-date, dynamic healthcare educational materials to assist her and other educators and to promote healthcare professions, especially medical assisting. Kathy values the medical assisting profession, recognizing that these diverse and dynamic professionals are essential to the future of our healthcare system.

Leesa G. Whicker, BA, CMA is a Certified Medical Assistant with a BA in art with a concentration in art history. She is an educator with more than 20 years of experience in the classroom. With 35 years of experience in the healthcare field as a medical assistant, a research specialist in molecular pathogenesis and infectious disease, and a medical assisting program director and instructor, she brought a broad background of knowledge and experience to



The author team decided to celebrate their careers in Medical Assisting by taking a really big step and soaring in a totally different way! ©Total Care Programming, Inc

the classroom. As a curriculum expert, she served on several committees, including the Writing Team for the Common Course Library for the North Carolina Community College System and the Curriculum Committee at Central Piedmont Community College. Leesa was among the first instructors to develop online courses at Central Piedmont Community College. She has presented Methods of Active and Collaborative Learning on the national level. She recently retired from Central Piedmont Community College in Charlotte, North Carolina. Though retired from teaching, she continues searching for novel and varied ways to reach the ever-changing learning styles of today's students.

Terri D. Wyman, CPC, CMCS, CMRS, AS has over 35 years of experience in the healthcare field, first as a CMA specializing in hematology/oncology and homecare and then in the medical billing and coding field. At the suggestion of a coworker, she began her career in education as instructor and program director for both medical assisting and medical billing and coding programs for several technical schools in New England before returning to a position in hospital revenue systems. Terri recently retired from her position as the revenue management coordinator for the Baystate Health System's Eastern Region in Massachusetts, and now resides in North Carolina with her husband Dale and puppy Domino. She remains active with AAPC and is on the National Advisory Board for the American Medical Billing Association (AMBA). She provides continuing education opportunities for AMBA members, having written numerous billing and coding courses for them and speaking at their national conferences on medical coding and revenue management topics.

Brief Contents

Procedures xxii Digital Exercises and Activities xxv A Closer Look xxix A Guided Tour xxxiii Connect xxxvi Digital Materials for Medical Assisting xxxviii Additional Supplementary Materials xli Acknowledgments xliv

UNIT ONE: Medical Assisting as a Career

- 1 Introduction to Medical Assisting 1
- 2 Healthcare and the Healthcare Team 12
- 3 Professionalism and Success 29
- 4 Interpersonal Communication 44
- **5** Legal and Ethical Issues 64

UNIT TWO: Safety and the Environment

- 6 Infection Control Fundamentals 96
- 7 Safety and Patient Reception 113
- 8 Office Equipment and Supplies 142
- 9 Examination and Treatment Areas 176

UNIT THREE: Communication

- 10 Written and Electronic Communication 191
- 11 Medical Records and Documentation 220
- 12 Electronic Health Records 245
- 13 Managing Medical Records 262
- 14 Telephone Techniques 279
- 15 Patient Education 307

UNIT FOUR: Administrative Practices

- 16 Schedule Management 327
- 17 Insurance and Billing 352
- **18** Diagnostic Coding *392*
- **19** Procedural Coding **416**
- 20 Patient Collections and Financial Management 439

UNIT FIVE: Applied Anatomy and Physiology

- 21 Organization of the Body 478
- 22 The Integumentary System 501
- **23** The Skeletal System 517
- 24 The Muscular System 536
- 25 The Cardiovascular System 553
- 26 The Blood 572
- 27 The Lymphoid System and Immune Response 584
- **28** The Respiratory System *598*
- 29 The Nervous System 614
- 30 The Urinary System 633
- 31 The Reproductive Systems 644

- 32 The Digestive System 668
- 33 The Endocrine System 684
- 34 Special Senses 698

UNIT SIX: Clinical Practices

- 35 Infection Control Practices 714
- 36 Patient Interview and History 738
- 37 Vital Signs and Measurements 760
- 38 Assisting with a General Physical Examination 780
- 39 Assisting in Reproductive and Urinary Specialties 800
- 40 Assisting in Pediatrics 823
- 41 Assisting in Geriatrics 857
- 42 Assisting in Other Medical Specialties 873
- 43 Assisting with Eye and Ear Care 895
- 44 Assisting with Minor Surgery 923

UNIT SEVEN: Assisting with Diagnostics

- 45 Orientation to the Lab 950
- 46 Microbiology and Disease 971
- **47** Collecting, Processing, and Testing Urine and Stool Specimens *1003*
- **48** Collecting, Processing, and Testing Blood Specimens *1032*
- 49 Electrocardiography and Pulmonary Function Testing 1068
- 50 Diagnostic Imaging 1097

UNIT EIGHT: Assisting in Therapeutics

- **51** Principles of Pharmacology *1118*
- 52 Dosage Calculations 1143
- 53 Medication Administration 1156
- 54 Physical Therapy and Rehabilitation 1188
- 55 Nutrition and Health 1211

UNIT NINE: Medical Assisting Practice

- 56 Practice Management 1239
- 57 Emergency Preparedness 1267
- 58 Preparing for the World of Work 1297

APPENDICES

- Prefixes, Suffixes, and Word Roots in Commonly Used Medical Terms A-1
- Abbreviations and Symbols Commonly Used in Medical Notations A-5
- Diseases and Disorders A-7

Glossary G-1 Index I-1

vi



Contents

Procedures xxii Digital Exercises and Activities xxv A Closer Look xxix A Guided Tour xxxiii Connect xxxvi Digital Materials for *Medical Assisting xxxviii* Additional Supplementary Materials xli Acknowledgments xliv

UNIT ONE

Medical Assisting as a Career

CHAPTER 1

Introduction to Medical Assisting

Introduction 2

- 1.1 Responsibilities of the Medical Assistant 2
- 1.2 Medical Assisting Organizations 4
- 1.3 Medical Assistant Credentials 5
- 1.4 Training Programs 6
- 1.5 Professional Development 7
- PROCEDURE 1-1: Obtaining Certification/Registration Information Through the Internet 9
- PROCEDURE 1-2: Locating Your State's Legal Scope of Practice 9

CHAPTER 2

Healthcare and the Healthcare Team

Introduction 13

- 2.1 Healthcare Trends 13
- 2.2 Medical Specialties 15
- 2.3 Working with Other Healthcare Professionals 19
- 2.4 Specialty Career Options 22
- 2.5 Healthcare Professional Associations 22

CHAPTER 3

Professionalism and Success 29

Introduction 30

- 3.1 Professionalism in Medical Assisting 30
- 3.2 Professional Behaviors 31
- 3.3 Strategies for Success 36
- PROCEDURE 3-1: Self-Evaluation of Professional Behaviors
- PRACTICE MEDICAL OFFICE: Admin Check In: Interactions 43

CHAPTER 4

Interpersonal Communication 44

Introduction 45

1

12

- 4.1 Elements of Communication 45
- 4.2 Human Behavior and Needs 46
- 4.3 Types of Communication 49
- 4.4 Improving Your Communication Skills 51
- 4.5 Therapeutic Communication Skills 52
- 4.6 Communicating in Special Circumstances 54
- SKILLS VIDEO: Communicating with the Anxious Patient 54
- SKILLS VIDEO: Communicating Effectively with Patients from Other Cultures and Meeting Their Needs for Privacy 56
- 4.7 Communicating with Coworkers 57
- PROCEDURE 4-1: Communicating with the Anxious Patient 59
- PROCEDURE 4-2: Communicating with the Angry Patient 59
- PROCEDURE 4-3: Communicating with the Assistance of an Interpreter 60
- PRACTICE MEDICAL OFFICE: Admin Check In: Interactions 63

CHAPTER 5

Legal and Ethical Issues 64

Introduction 66

- 5.1 Laws and Ethics 66
- 5.2 The Physician-Patient Contract 68
- 5.3 Preventing Malpractice Claims 72
- 5.4 Administrative Procedures and the Law 74
- 5.5 Federal Legislation Affecting Healthcare 79
- 5.6 Confidentiality Issues and Mandatory Disclosure 86
- 5.7 Ethics 87
- 5.8 Legal Medical Practice Models 89
- PROCEDURE 5-1: Obtaining Signature for Notice of Privacy Practices and Acknowledgment 91
- PROCEDURE 5-2: Completing a Privacy Violation Complaint Form 91
- PROCEDURE 5-3: Obtaining Authorization to Release Health Information 92
- ELECTRONIC HEALTH RECORDS: 5.01 Add an Acknowledgement of Receipt of NPP to a Patient's EHR 95
- ELECTRONIC HEALTH RECORDS: 5.02 Add an Authorization to Release Health Information to a Patient's EHR 95
- PRACTICE MEDICAL OFFICE: Admin Check In: Interactions 95

vií

Safety and the Environment

CHAPTER 6

Infection Control Fundamentals 96

Introduction 97

- 6.1 Occupational Safety and Health Administration 97
- 6.2 The Cycle of Infection 98
- SKILLS VIDEO: Aseptic Hand Hygiene 101
- 6.3 OSHA Bloodborne Pathogens Standard and Universal Precautions 101
- 6.4 Transmission-Based Precautions 106
- 6.5 OSHA-Required Education and Training 107
- PROCEDURE 6-1: Aseptic Handwashing 108
- PROCEDURE 6-2: Using an Alcohol-Based Hand Disinfectant 108
- PROCEDURE 6-3: Using a Biohazardous Sharps Container 109
- PROCEDURE 6-4: Disposing of Biohazardous Waste 109
- ELECTRONIC HEALTH RECORDS: 6.01 Add a Note to a Patient's EHR 111
- PRACTICE MEDICAL OFFICE: Admin Check In: Office Operations 112

CHAPTER 7

Safety and Patient Reception 113

Introduction 114

- 7.1 The Medical Office Safety Plan 115
- 7.2 OSHA Hazard Communication Standard 115
- 7.3 Electrical Safety 116
- 7.4 Fire Safety 117
- 7.5 Chemical Safety 119
- 7.6 Ergonomics and Physical Safety 120
- 7.7 Preventing Injury in the Front Office 122
- 7.8 Design of the Reception Area 124
- 7.9 The Importance of Cleanliness 127
- 7.10 Office Access for All 129
- 7.11 Functions of the Reception Staff 132
- 7.12 Opening and Closing the Office 133
- PROCEDURE 7-1: Handling a Fire Emergency 135
- PROCEDURE 7-2: Maintaining and Using an Eyewash Station 136
- PROCEDURE 7-3: Creating a Pediatric Reception Area 137
- PROCEDURE 7-4: Creating a Reception Area Accessible to Patients with Special Needs 137
- PROCEDURE 7-5: Opening and Closing the Medical Office 138
- PRACTICE MEDICAL OFFICE: Admin Check In: Work Task Proficiencies 141

CHAPTER 8

Office Equipment and Supplies 142

- Introduction 143
- 8.1 Computers 143
- 8.2 Software 144
- 8.3 Software Training 148
- 8.4 Computer System Care and Maintenance 149
- 8.5 Security in the Computerized Office 150
- 8.6 Administrative Medical Office Equipment 151
- 8.7 Purchasing Decisions for Office Equipment 155
- 8.8 Maintaining Office Equipment 156
- 8.9 Maintaining Medical Office Supplies 158
- 8.10 Taking a Supply Inventory 161
- SKILLS VIDEO: Establishing and Conducting the Supply Inventory and Receiving Supplies 161
- 8.11 Ordering Supplies 163
- PROCEDURE 8-1: Using a Facsimile (Fax) Machine 170
- **PROCEDURE 8-2: Using a Photocopier Machine** 170
- PROCEDURE 8-3: Using a Check-Writing Machine 171
- PROCEDURE 8-4: Step-by-Step Overview of Inventory Procedures 171
- ELECTRONIC HEALTH RECORDS: 8.01 Assign Staff Access Levels in an EHR 175
- ELECTRONIC HEALTH RECORDS: 8.02 Assign a Task Item 175
- PRACTICE MEDICAL OFFICE: Admin Check In: Office Operations 175

CHAPTER 9

Examination and Treatment Areas 176

Introduction 177

- 9.1 The Exam Room 177
- 9.2 Sanitization and Disinfection 178
- SKILLS VIDEO: Guidelines for Disinfecting Exam Room Surfaces 180
- 9.3 Preparation of the Exam and Treatment Areas 180
- 9.4 Room Temperature, Lighting, and Ventilation 183
- 9.5 Medical Instruments and Supplies 184
- PROCEDURE 9-1: Performing Sanitization with an Ultrasonic Cleaner 187
- PROCEDURE 9-2: Guidelines for Disinfecting Exam Room Surfaces 188
- PRACTICE MEDICAL OFFICE: Clinical: Office Operations 190

UNIT THREE

Communication

CHAPTER 10

Written and Electronic Communication 191

Introduction 192

- 10.1 Professionalism and Document Preparation 192
- 10.2 Selecting Document Supplies 192
- 10.3 Effective Writing 194
- 10.4 Medical Office Documents and Correspondence 196
- 10.5 Written Communication Using Electronic Format 199
- 10.6 Editing and Proofreading 204
- 10.7 Preparing Outgoing Mail 206
- 10.8 Mailing Options 210
- 10.9 Processing Incoming Mail 213
- **PROCEDURE 10-1: Creating a Professional Letter** 214
- **PROCEDURE 10-2: Writing an Interoffice Memo** 215
- PROCEDURE 10-3: Composing a Professional E-mail Message 215
- PROCEDURE 10-4: Composing an Electronic Patient Letter Using a Template 216
- PROCEDURE 10-5: Sorting and Opening Mail 216
- ELECTRONIC HEALTH RECORDS: 10.01 Create a Patient Test Result Letter 219
- ELECTRONIC HEALTH RECORDS: 10.02 Create an Excuse
 Note 219
- ELECTRONIC HEALTH RECORDS: 10.03 E-mail a Patient 219
- ELECTRONIC HEALTH RECORDS: 10.04 Composing an Electronic Patient Letter Using a Template 219
- PRACTICE MEDICAL OFFICE: Admin Check In: Privacy and Liability 219

Medical Records and Documentation 220

Introduction 221

- 11.1 The Importance of Medical Records 221
- 11.2 Contents of Patient Medical Records 223
- SKILLS VIDEO: Registering a New Patient 223
- SKILLS VIDEO: Initiating a Paper-Based Patient Medical Record 228
- 11.3 Types of Medical Records 230
- 11.4 Documentation and the Six Cs of Charting 233
- 11.5 Appearance, Timeliness, and Accuracy of Records 235
- 11.6 Correcting and Updating Medical Records 237
- SKILLS VIDEO: Correcting the Patient Medical Record 237
- 11.7 Responding to Release of Records Request 238
- PROCEDURE 11-1: Preparing a New Patient Paper Medical Record 240
- PROCEDURE 11-2: Correcting Paper Medical Records 240
- PROCEDURE 11-3: Entering (Adding) Information into a Paper Medical Record 241
- ELECTRONIC HEALTH RECORDS: 11.01 Add a New Patient to the EHR 244
- ELECTRONIC HEALTH RECORDS: 11.02 Edit Patient Demographics 244

- ELECTRONIC HEALTH RECORDS: 11.03 Record a Patient's Vital Signs 244
- ELECTRONIC HEALTH RECORDS: 11.04 Record a SOAP Note 244
- PRACTICE MEDICAL OFFICE: Admin Check In: Privacy and Liability 244

CHAPTER 12

Electronic Health Records 245

Introduction 246

- 12.1 A Brief History of Electronic Medical Records 246
- 12.2 Electronic Records 247
- 12.3 Meaningful Use and the EHR 248
- 12.4 Advantages and Disadvantages of EHR Programs 250
- 12.5 Working with an Electronic Health Record 250
- 12.6 Functions of Practice Management Systems 252
- 12.7 Security and Confidentiality and EHR 255
- SKILLS VIDEO: PHI Authorization Release Health Information 255
- PROCEDURE 12-1: Creating a New Patient Record Using EHR Software 256
- PROCEDURE 12-2: Checking in and Rooming a Patient Using an Electronic Health Record 256
- PROCEDURE 12-3: Creating an Appointment Matrix for an Electronic Scheduling System 257
- PROCEDURE 12-4: Scheduling a Patient Appointment Using an Electronic Scheduler 257
- ELECTRONIC HEALTH RECORDS: 12.01 Navigate an EHR 260
- ELECTRONIC HEALTH RECORDS: 12.02 Schedule a New Patient Appointment 260
- ELECTRONIC HEALTH RECORDS: 12.03 Add Insurance to a New Patient's EHR 260
- ELECTRONIC HEALTH RECORDS: 12.04 Add a New Patient to the EHR 260
- ELECTRONIC HEALTH RECORDS: 12.05 Track a Patient in the EHR 260
- ELECTRONIC HEALTH RECORDS: 12.06 Document Receipt
 of Notice of Privacy Practices 260
- ELECTRONIC HEALTH RECORDS: 12.07 Build a New Patient's Face Sheet 260
- ELECTRONIC HEALTH RECORDS: 12.08 Add Allergies to a Patient's Face Sheet 260
- ELECTRONIC HEALTH RECORDS: 12.09 Add Medications to a Patient's Face Sheet 260
- ELECTRONIC HEALTH RECORDS: 12.10 Record a Patient's Vital Signs 260
- ELECTRONIC HEALTH RECORDS: 12.11 Build an Office Visit Note 260
- ELECTRONIC HEALTH RECORDS: 12.12 Order Lab and Imaging Tests 260
- ELECTRONIC HEALTH RECORDS: 12.13 Add an Immunization to the EHR 260
- ELECTRONIC HEALTH RECORDS: 12.14 Document a Patient's Plan of Care in the EHR 260

ix

- ELECTRONIC HEALTH RECORDS: 12.15 Add Diagnoses and Procedures to a Patient's Encounter 260
- ELECTRONIC HEALTH RECORDS: 12.16 Create a Clinical Visit Summary 260
- ELECTRONIC HEALTH RECORDS: 12.17 Create a Routing Slip 260
- ELECTRONIC HEALTH RECORDS: 12.18 Apply a Patient's Payment to the Account 260
- **ELECTRONIC HEALTH RECORDS: 12.19 Create and Submit** an Insurance Claim 260
- ELECTRONIC HEALTH RECORDS: 12.20 Post Insurance Deposits 260
- ELECTRONIC HEALTH RECORDS: 12.21 Add Lab and Imaging Results to a Patient's EHR 260
- ELECTRONIC HEALTH RECORDS: 12.22 Complete a
 Patient's Telephone Encounter 260
- ELECTRONIC HEALTH RECORDS: 12.23 Create a Patient Test Result Letter 260
- PRACTICE MEDICAL OFFICE: Admin Check Out: Privacy and Liability 261

Managing Medical Records 262

Introduction 263

- 13.1 Filing Equipment 263
- 13.2 Security and Safety Measures 264
- 13.3 Filing Supplies 265
- 13.4 Filing Systems 265
- 13.5 The Filing Process 270
- 13.6 Active, Inactive, and Closed Files 272
- PROCEDURE 13-1: Creating a Filing System for Paper Medical Records 274
- PROCEDURE 13-2: Setting Up an Office Tickler File 275
- PROCEDURE 13-3: Developing a Records Retention Program 275
- ELECTRONIC HEALTH RECORDS: 13.01 Update the Status
 of the Recall List 278
- PRACTICE MEDICAL OFFICE: Admin Check Out: Work Task Proficiencies 278

CHAPTER 14

Telephone Techniques 279

Introduction 280

- 14.1 Telecommunications Equipment 280
- 14.2 Effective Telephone Communication 283
- 14.3 Telephone Etiquette 284
- 14.4 Types of Incoming Calls 286
- SKILLS VIDEO: Managing a Prescription Refill 288
- 14.5 Managing Incoming Calls 290

CONTENTS

14.6 Taking Complete and Accurate Phone Messages

14.7 Placing Outgoing Calls 294

- 14.8 Telehealth 296
- PROCEDURE 14-1: Using a Video Relay Service with an American Sign Language Interpreter 299
- PROCEDURE 14-2: Renewing a Prescription by Telephone 299
- PROCEDURE 14-3: Screening and Routing Telephone Calls 300
- PROCEDURE 14-4: Handling Emergency Calls 301
- PROCEDURE 14-5: Retrieving Messages from an Answering Service or System 302
- PROCEDURE 14-6: Participating in a Telehealth Interaction with a Patient 302
- ELECTRONIC HEALTH RECORDS: 14.01 Create an Electronic Telephone Encounter 306
- ELECTRONIC HEALTH RECORDS: 14.02 Create an Urgent Electronic Telephone Encounter 306
- ELECTRONIC HEALTH RECORDS: 14.03 Complete a Prescription Refill Request 306
- PRACTICE MEDICAL OFFICE: Admin Check In: Office
 Operations 306

CHAPTER 15

Patient Education 307

Introduction 308

- 15.1 The Educated Patient 308
- 15.2 Learning and Teaching 309
- 15.3 Teaching Techniques 309
- 15.4 Patient Education Materials 310
- 15.5 Promoting Health and Wellness Through Education 314
- 15.6 The Patient Information Packet 315
- 15.7 Patient Education Prior to Surgery 319
- PROCEDURE 15-1: Creating Electronic Patient Instructions 321
- PROCEDURE 15-2: Identifying and Using Community Resources 322
- PROCEDURE 15-3: Locating Credible Patient Education Information on the Internet 322
- PROCEDURE 15-4: Developing a Patient Education Plan 323
- PROCEDURE 15-5: Outpatient Surgery Teaching 323
- ELECTRONIC HEALTH RECORDS: 15.01 Document Administration of Patient Education 326
- ELECTRONIC HEALTH RECORDS: 15.02 Document Administration of Pre- and Post-Operative Instructions 326
- PRACTICE MEDICAL OFFICE: Admin Check Out: Interactions 326

UNIT FOUR

Administrative Practices

CHAPTER 16

Schedule Management 327

Introduction 328



- 16.1 The Appointment Book 328
- 16.2 Applying the Matrix 329
- 16.3 Appointment Scheduling Systems 330
- 16.4 Organizing and Scheduling Appointments 336
- 16.5 Special Scheduling Situations 340
- 16.6 Scheduling Outside Appointments 342
- SKILLS VIDEO: Scheduling Outpatient Surgical Appointments 342
- SKILLS VIDEO: Scheduling Inpatient Surgical Appointments 343
- 16.7 Maintaining the Practitioner's Schedule 343
- **PROCEDURE 16-1: Creating an Appointment Matrix** 346
- PROCEDURE 16-2: Scheduling Appointments 346 PROCEDURE 16-3: Completing the Patient Appointment Card 346
- PROCEDURE 16-4: Placing Appointment Confirmation Calls 347
- PROCEDURE 16-5: Scheduling Outpatient Surgical Appointments 347
- PROCEDURE 16-6: Scheduling Inpatient Surgical Appointments 348
- ELECTRONIC HEALTH RECORDS: 16.01 Maintain a Provider's Schedule Matrix in an EHR 351
- ELECTRONIC HEALTH RECORDS: 16.02 Add a Patient to the Schedule in an EHR 351
- **ELECTRONIC HEALTH RECORDS: 16.03 Cancel a Patient's Appointment in an EHR** 351
- ELECTRONIC HEALTH RECORDS: 16.04 Document Administration of Surgical Instructions 351
- ELECTRONIC HEALTH RECORDS: 16.05 Checking-In an Established Patient 351
- PRACTICE MEDICAL OFFICE: Admin Check Out: Work Task Proficiencies 351

Insurance and Billing 352

Introduction 353

- 17.1 Basic Insurance Terminology 353
- 17.2 Private Health Plans 354
- 17.3 Government Plans 359
- 17.4 Payer Payment Systems 365
- 17.5 The Claims Process: An Overview 368
- SKILLS VIDEO: Requesting Prior Authorization 371
- 17.6 Preparing and Transmitting the Healthcare Claim 373
- 17.7 Transmitting Electronic Claims 381
- 17.8 Insurer Processing Claims and Payments 382
- PROCEDURE 17-1: Verifying Workers' Compensation Coverage 385
- PROCEDURE 17-2: Submitting a Request for Prior Authorization 385
- PROCEDURE 17-3: Completing the CMS-1500 Claim Form 386
- PROCEDURE 17-4: Tracking Insurance Claims Submissions 388
- **ELECTRONIC HEALTH RECORDS: 17.01 Create and Submit** an Insurance Claim 391
- PRACTICE MEDICAL OFFICE: Admin Check In: Work Task Proficiencies 391

CHAPTER 18

Diagnostic Coding 392

Introduction 393

- 18.1 The Reasons for Diagnosis Codes 393
- 18.2 Why ICD-10-CM Is Necessary 394
- 18.3 An Overview of ICD-10 396
- 18.4 Coding with ICD-10 399
- 18.5 External Cause of Injury and Health Status Codes 404
- 18.6 Synopsis of ICD-10 Coding Guidelines by Chapter 406
- SKILLS VIDEO: Locating an ICD-10-CM Code 410
- PROCEDURE 18-1: Locating an ICD-10-CM Code 411
- PROCEDURE 18-2: Locating a Health Status (Z) Code 412
- PROCEDURE 18-3: Locating an External Cause Code 412
- ELECTRONIC HEALTH RECORDS: 18.01 Assign a Diagnostic Code to an Office Visit - A 414
- ELECTRONIC HEALTH RECORDS: 18.02 Assign a Diagnostic Code to an Office Visit - B 414
- ELECTRONIC HEALTH RECORDS: 18.03 Maintain the Diagnosis Code Database in an EHR 414
- PRACTICE MEDICAL OFFICE: Admin Check Out: Office Operations 415

CHAPTER 19

Procedural Coding 416

- Introduction 417
 19.1 The CPT Manual 417
 19.2 General CPT Guidelines 419
 19.3 Evaluation and Management Services 424
 19.4 Surgical Coding 428
 19.5 Using the CPT Manual 431
 SKILLS VIDEO: Locating a CPT Code 432
 19.6 The HCPCS Coding Manual 432
 19.7 Coding Compliance 433
 PROCEDURE 19-1: Locating a CPT Code 434
- PROCEDURE 19-2: Locating a HCPCS Code 435
- PROCEDURE 19-3: Entering CPT and ICD Codes into an EHR Program 435
- ELECTRONIC HEALTH RECORDS: 19.01 Assign a Procedure Code to an Office Visit - A 438
- ELECTRONIC HEALTH RECORDS: 19.02 Assign a Procedure Code to an Office Visit - B 438
- ELECTRONIC HEALTH RECORDS: 19.03 Maintain the Procedure Code Database in an EHR 438
- PRACTICE MEDICAL OFFICE: Admin Check Out: Work Task Proficiencies 438

CHAPTER 20

o •

Patient Collections and Financial Management 439 Introduction 441

- 20.1 The Medical Practice as a Business 441
- 20.2 Medical Office Accounting Methods 441
- 20.3 In-Office Transactions 445
- 20.4 Standard Billing Procedures 450
- 20.5 Standard Collection Procedures 451
- SKILLS VIDEO: Posting Charges, Payments, and Adjustments 452
- 20.6 Laws That Govern Credit and Collections 454
- 20.7 Credit Arrangements 456
- 20.8 Common Collection Problems 458
- 20.9 Banking and Negotiable Instruments 459
- 20.10 Preparing a Bank Deposit 462
- 20.11 Reconciling the Bank Statement 464
- 20.12 Electronic Banking 465
- 20.13 Accounts Payable and Managing Disbursements 466
- PROCEDURE 20-1: Posting Charges, Payments, and Adjustments 468
- PROCEDURE 20-2: Using the Superbill as Bill/Receipt 469
- PROCEDURE 20-3: Posting a Nonsufficient Funds (NSF) Check 469
- PROCEDURE 20-4: Processing a Payment Resulting in a Credit Balance 469
- PROCEDURE 20-5: Processing Refunds to Patients 470
- PROCEDURE 20-6: Preparing an Age Analysis 470
- PROCEDURE 20-7: Referring an Account to a Collection Agency and Posting the Payment from the Agency 471
- PROCEDURE 20-8: Completing a Truth in Lending Statement (Agreement) 472
- PROCEDURE 20-9: Making a Bank Deposit 472
- **PROCEDURE 20-10: Reconciling the Bank Statement** 473
- PROCEDURE 20-11: Setting Up the Disbursements Journal 474
- ELECTRONIC HEALTH RECORDS: 20.01 Record a Patient Payment 477
- ELECTRONIC HEALTH RECORDS: 20.02 Post Insurance
 Deposits to the Practice Account 477
- ELECTRONIC HEALTH RECORDS: 20.03 Create a Patient Statement 477
- ELECTRONIC HEALTH RECORDS: 20.04 Create an Age
 Analysis Report 477
- ELECTRONIC HEALTH RECORDS: 20.05 Handle a Returned NSF Check 477
- ELECTRONIC HEALTH RECORDS: 20.06 Process a Patient Payment 477
- ELECTRONIC HEALTH RECORDS: 20.07 Issue a Patient Refund 477
- ELECTRONIC HEALTH RECORDS: 20.08 Posting an
 Insurance Payment to One Patient Account Using an RA 477
- ELECTRONIC HEALTH RECORDS: 20.09 Posting an Insurance Payment to Multiple Patient Accounts Using an RA (Medicare) 477
- ELECTRONIC HEALTH RECORDS: 20.10 Posting an Insurance Payment to a Patient Account Using an RA 477

。°

° °

- ELECTRONIC HEALTH RECORDS: 20.11 Posting Secondary Insurance Payments to Multiple Patient Accounts Using an RA 477
- **ELECTRONIC HEALTH RECORDS: 20.12 Posting a Denial** from an EOB 477
- ELECTRONIC HEALTH RECORDS: 20.13 Posting a Non-Covered Service from an RA 477
- ELECTRONIC HEALTH RECORDS: 20.14 Posting a Deductible from an RA 477
- ELECTRONIC HEALTH RECORDS: 20.15 Batch Invoicing to Patients with Balance Due 477
- PRACTICE MEDICAL OFFICE: Admin Check Out: Work Task Proficiencies 477

UNIT FIVE

Applied Anatomy and Physiology

CHAPTER 21

Organization of the Body 478

Introduction 479

- 21.1 The Study of the Body 479
- BODY ANIMAT3D: Homeostasis 480
- 21.2 Structural Organization of the Body 480
- 21.3 Major Tissue Types 480
- 21.4 Body Organs and Systems 482
- 21.5 Understanding Medical Terminology 483
- 21.6 Anatomical Terminology 483
- 21.7 Body Cavities and Abdominal Regions 486
- 21.8 Chemistry of Life 488
- BODY ANIMAT3D: Basic Chemistry (Organic Molecules) 488
- **BODY ANIMAT3D: Fluid and Electrolyte Imbalances** 490
- 21.9 Cell Characteristics 491
- BODY ANIMAT3D: Cells and Tissues 493
- 21.10 Movement Through Cell Membranes 493
- 21.11 Cell Division 493
- BODY ANIMAT3D: Meiosis vs. Mitosis 494
- 21.12 Genetic Techniques 494
- 21.13 Heredity and Common Genetic Disorders 495
- 21.14 PATHOPHYSIOLOGY: Common Genetic Disorders 496

CHAPTER 22

The Integumentary System 501

Introduction 502

- 22.1 Functions of the Integumentary System 502
- 22.2 Skin Structure 502
- 22.3 Skin Color 503
- 22.4 Skin Lesions 504
- 22.5 Accessory Organs 505
- 22.6 Skin Healing 506

BODY ANIMAT3D: Inflammation 507

- 22.7 PATHOPHYSIOLOGY: Common Diseases and Disorders of the Skin 507
- BODY ANIMAT3D: Burns 509

CHAPTER 23

The Skeletal System 517

Introduction 518

- 23.1 Bone Structure 518
- 23.2 Functions of Bones 520
- 23.3 Bone Growth 521
- 23.4 Bony Structures 522
- 23.5 The Skull 522
- 23.6 The Vertebral Column 524
- 23.7 The Rib Cage 525
- 23.8 Bones of the Shoulders, Arms, Forearms, and Hands 526
- 23.9 Bones of the Hips, Thighs, Legs, and Feet 526
- 23.10 Joints 528
- 23.11 PATHOPHYSIOLOGY: Common Diseases and Disorders of the Skeletal System 529
- **BODY ANIMAT3D: Osteoarthritis vs. Rheumatoid** Arthritis 529
- BODY ANIMAT3D: Osteoporosis 532

CHAPTER 24

The Muscular System 536

Introduction 537

- 24.1 Functions of Muscle 537
- BODY ANIMAT3D: Muscle Contraction 537
- 24.2 Muscle Cells and Tissue 538
- 24.3 Production of Energy for Muscle 539
- 24.4 Structure of Skeletal Muscles 540
- 24.5 Attachments and Actions of Skeletal Muscles 540
- 24.6 Major Skeletal Muscles 542
- 24.7 Aging and the Musculoskeletal System 547
- 24.8 PATHOPHYSIOLOGY: Common Diseases and Disorders of the Muscular System 547

CHAPTER 25

The Cardiovascular System 553

Introduction 554 25.1 The Heart 554 25.2 Cardiac Cycle 556 BODY ANIMAT3D: Cardiac Cycle 557

25.3 Blood Vessels 558

25.4 Circulation 561

25.5 Blood Pressure 563

- 25.6 PATHOPHYSIOLOGY: Common Diseases and Disorders of the Cardiovascular System 564
- BODY ANIMAT3D: Heart Failure Overview, Left-Side Heart Failure, and Right-Side Heart Failure 565
- BODY ANIMAT3D: Coronary Artery Disease (CAD) 566
- BODY ANIMAT3D: Hypertension 567

CHAPTER 26

The Blood 572

Introduction 573 26.1 Components of Blood 573 26.2 Bleeding Control 576

- BODY ANIMAT3D: Strokes 577
- 26.3 ABO Blood Types 577
- 26.4 The Rh Antigen 579
- 26.5 PATHOPHYSIOLOGY: Common Diseases and Disorders of the Blood System 580

CHAPTER 27

The Lymphoid System and Immune Response 584

Introduction 585

27.1 The Lymphoid System 585

- BODY ANIMAT3D: Lymph and Lymph Node Circulation 586
- 27.2 Defenses Against Disease 588
- 27.3 Antibodies 590
- 27.4 Immune Responses and Acquired Immunities 591
- 27.5 PATHOPHYSIOLOGY: Common Diseases and Disorders of the Lymphoid System 593
- BODY ANIMAT3D: Immune Response: Hypersensitivity 593
- BODY ANIMAT3D: Inflammation 597

CHAPTER 28

The Respiratory System 598

Introduction 599

28.1 Organs of the Respiratory System 599

28.2 The Mechanisms of Breathing 602

- BODY ANIMAT3D: Acid-Base Balance: Acidosis 603
- BODY ANIMAT3D: Acid-Base Balance: Alkalosis 603

28.3 The Transport of Oxygen and Carbon Dioxide in the Blood 603

xiií

- BODY ANIMAT3D: Oxygen Transport and Gas Exchange 603
- 28.4 Respiratory Volumes 604
- 28.5 PATHOPHYSIOLOGY: Common Diseases and Disorders of the Respiratory System 605
- BODY ANIMAT3D: Asthma 605
- BODY ANIMAT3D: COPD 606
- BODY ANIMAT3D: Respiratory Tract Infections and Respiratory Failure 606

The Nervous System 614

Introduction 615

29.1 General Functions of the Nervous System 615

29.2 Neuron Structure 615

29.3 Nerve Impulse and Synapse 616

- BODY ANIMAT3D: Nerve Impulse 616
- 29.4 Central Nervous System 617

BODY ANIMAT3D: Spinal Cord Injury 621

- 29.5 Peripheral Nervous System 622
- 29.6 Neurologic Testing 624
- 29.7 PATHOPHYSIOLOGY: Common Diseases and Disorders of the Nervous System 626
- BODY ANIMAT3D: Alzheimer Disease 626
- BODY ANIMAT3D: Strokes 628

CHAPTER 30

The Urinary System 633

Introduction 634

30.1 The Kidneys 634

30.2 Urine Formation 637

30.3 The Ureters, Urinary Bladder, and Urethra 637

- **30.4 PATHOPHYSIOLOGY: Common Diseases and Disorders** of the Urinary System 639
- **BODY ANIMAT3D: Renal Function** 639

CHAPTER 31

The Reproductive Systems 644

Introduction 645

- 31.1 The Male Reproductive System 645
- 31.2 Pathophysiology: Common Diseases and Disorders of the Male Reproductive System 650
- BODY ANIMAT3D: Prostate Cancer 650
- 31.3 The Female Reproductive System 651
- 31.4 Pathophysiology: Common Diseases and Disorders of the Female Reproductive System 655

- BODY ANIMAT3D: Breast Cancer 655
- 31.5 Pregnancy 657
- BODY ANIMAT3D: Meiosis vs. Mitosis 658
- 31.6 The Birth Process 659
- 31.7 Contraception 661
- 31.8 Infertility 662
- **31.9 PATHOPHYSIOLOGY: Sexually Transmitted Infections Occurring in Both Sexes** 663

CHAPTER 32

The Digestive System 668

Introduction 669

- 32.1 Characteristics of the Alimentary Canal 669
- 32.2 Characteristics of the Digestive Accessory Organs 675
- BODY ANIMAT3D: Food Absorption 676
- 32.3 The Absorption of Nutrients 676
- 32.4 PATHOPHYSIOLOGY: Common Diseases and Disorders of the Digestive System 678
- BODY ANIMAT3D: Liver Failure 678

CHAPTER 33

The Endocrine System 684

Introduction 685

33.1 Hormones 685

- 33.2 Hormone Production 687
- 33.3 The Stress Response 690
- 33.4 PATHOPHYSIOLOGY: Common Diseases and Disorders of the Endocrine System 690
- BODY ANIMAT3D: Type 1 Diabetes 693
- BODY ANIMAT3D: Type 2 Diabetes 693
- BODY ANIMAT3D: Hyperthyroidism 695

CHAPTER 34

Special Senses 698

Introduction 699

0

- 34.1 The Nose and the Sense of Smell 699
- 34.2 The Tongue and the Sense of Taste 700
- 34.3 The Eye and the Sense of Sight 701
- 34.4 Visual Pathways 703
- 34.5 PATHOPHYSIOLOGY: Common Diseases and Disorders of the Eyes 705
- 34.6 The Ear and the Senses of Hearing and Equilibrium 707
- 34.7 The Hearing Process 708
- BODY ANIMAT3D: Hearing Loss: Sensorineural 709
- **34.8 PATHOPHYSIOLOGY: Common Diseases and Disorders** of the Ears 709

UNIT SIX

Clinical Practices

CHAPTER 35

Infection Control Practices 714

Introduction 715

35.1 Healthcare-Associated Infections 715

35.2 Infection Control Methods 717

- SKILLS VIDEO: Applying Standard Precautions 720
- 35.3 Safe Injection Practices and Sharps Safety 720
- 35.4 Respiratory Hygiene/Cough Etiquette Practices 721
- 35.5 Infection Control Practices with Medical Equipment 723
- 35.6 Surgical Site Infections (SSIs) 723
- 35.7 Sterilization 724
- SKILLS VIDEO: Wrapping and Labeling Instruments for Sterilization in the Autoclave 725
- 35.8 Reporting Guidelines for Infectious Diseases 728
- **PROCEDURE 35-1: Removing Contaminated Gloves** 730
- PROCEDURE 35-2: Removing a Contaminated Gown 731
- PROCEDURE 35-3: Wrapping and Labeling Instruments for Sterilization in the Autoclave 731
- PROCEDURE 35-4: Running a Load Through the Autoclave 732
- PROCEDURE 35-5: Notifying State and County Agencies About Reportable Diseases 733
- PRACTICE MEDICAL OFFICE: Admin Check Out: Privacy and Liability 737

CHAPTER 36

Patient Interview and History 738

Introduction 739

- 36.1 The Patient Interview and History 739
- SKILLS VIDEO: Using Critical Thinking Skills During an Interview 743
- 36.2 Your Role as an Observer 743
- 36.3 Documenting Patient Information 746
- ELECTRONIC HEALTH RECORDS: Electronic Documentation 748
- 36.4 Recording the Patient's Medical History 750
- SKILLS VIDEO: Obtaining a Medical History 755
- PROCEDURE 36-1: Using Critical Thinking Skills During an Interview 755
- PROCEDURE 36-2: Using a Progress Note 757
- PROCEDURE 36-3: Obtaining a Medical History 757
- ELECTRONIC HEALTH RECORDS: 36.01 Record a Patient's Interview and History in an EHR 759
- ELECTRONIC HEALTH RECORDS: 36.02 Record a Patient's Review of Systems (ROS) in an EHR 759
- PRACTICE MEDICAL OFFICE: Clinical: Interactions 759

CHAPTER 37

Vital Signs and Measurements 760

Introduction 761

37.1 Vital Signs 761

- 37.2 Temperature 761
- SKILLS VIDEO: Measuring and Recording Temperature 764
- 37.3 Pulse and Respiration 765
- SKILLS VIDEO: Obtaining a Pulse Oximetry Reading 767
- SKILLS VIDEO: Measuring and Recording Pulse and Respirations 767
- 37.4 Blood Pressure 767
- SKILLS VIDEO: Taking the Blood Pressure of Adults and Older Children 770
- 37.5 Body Measurements 770
- SKILLS VIDEO: Measuring Adults and Children 771
- PROCEDURE 37-1: Measuring and Recording Temperature 772
- PROCEDURE 37-2: Measuring and Recording Pulse and Respirations 774
- PROCEDURE 37-3: Obtaining a Pulse Oximetry Reading 774
- PROCEDURE 37-4: Taking the Blood Pressure of Adults and Older Children 775
- PROCEDURE 37-5: Measuring Height and Weight of Adults and Children 776
- ELECTRONIC HEALTH RECORDS: 37.01 Record a Patient's Vital Signs and Measurements - A 779
- ELECTRONIC HEALTH RECORDS: 37.02 Record a Patient's Vital Signs and Measurements - B 779
- BODY ANIMAT3D: Hypertension 779
- PRACTICE MEDICAL OFFICE: Clinical: Office Operations 779

CHAPTER 38

Assisting with a General Physical Examination 780

Introduction 781

- 38.1 The Purpose of a General Physical Exam 781
- 38.2 The Role of the Medical Assistant 782
- 38.3 Safety Precautions 782
- 38.4 Preparing the Patient for an Exam 782
- 38.5 Positioning and Draping 784
- SKILLS VIDEO: Positioning the Patient for an Exam 786
- 38.6 Special Patient Considerations 786
- SKILLS VIDEO: Transferring a Patient in a Wheelchair for an Exam 786
- 38.7 Exam Methods 787

<mark>。</mark> °

•

- 38.8 Components of a General Physical Exam 787
- SKILLS VIDEO: Assisting with a General Physical Exam 788

38.9 After the Exam 791

- PROCEDURE 38-1: Practicing Good Body Mechanics 792
- PROCEDURE 38-2: Positioning a Patient for an Exam 793
- PROCEDURE 38-3: Communicating Effectively with Patients from Other Cultures and Meeting Their Needs for Privacy 794
- PROCEDURE 38-4: Transferring a Patient in a Wheelchair for an Exam 795
- PROCEDURE 38-5: Assisting with a General Physical Exam 796
- SKILLS VIDEO: Communicating Effectively with Patients from Other Cultures and Meeting Their Needs for Privacy 799
- ELECTRONIC HEALTH RECORDS: 38.01 Record a Patient's Physical Exam (PE) in an EHR 799
- PRACTICE MEDICAL OFFICE: Clinical: Interactions 799

CHAPTER 39

Assisting in Reproductive and Urinary Specialties 800

Introduction 801

39.1 Assisting with the Gynecologic Patient 801

- SKILLS VIDEO: Assisting with a Gynecological Exam 804
- 39.2 Assisting with the Obstetric Patient 805
- 39.3 OB/GYN Diagnostic and Therapeutic Tests and Procedures 807
- **SKILLS VIDEO: Pregnancy Testing Using the EIA Method** 808
- 39.4 Assisting in Urology 813
- 39.5 Urologic Diagnostic Tests and Procedures 813
- 39.6 Diseases and Disorders of the Reproductive and Urinary Systems *814*
- PROCEDURE 39-1: Assisting with a Gynecologic Exam 817
- PROCEDURE 39-2: Assisting During the Exam of a Pregnant Patient 819
- PROCEDURE 39-3: Assisting with a Cervical Biopsy 819
- ELECTRONIC HEALTH RECORDS: 39.01 Record a Gynecologic Exam in a Patient's EHR 822
- ELECTRONIC HEALTH RECORDS: 39.02 Add Test Results to a Patient's EHR 822
- ELECTRONIC HEALTH RECORDS: 39.03 Document Patient Education for Testicular Self-Exam 822
- PRACTICE MEDICAL OFFICE: Clinical: Interactions 822

CHAPTER 40

Assisting in Pediatrics 823

Introduction 824

- 40.1 Developmental Stages and Care 825
- 40.2 Pediatric Examinations 833
- 40.3 Pediatric Immunizations 835
- 40.4 Pediatric Screening and Diagnostic Tests 840
- SKILLS VIDEO: Measuring Infants 842

40.5 Pediatric Diseases and Disorders 844

40.6 Pediatric Patient Special Concerns 847

- PROCEDURE 40-1: Measuring Infants 850
- PROCEDURE 40-2: Maintaining Growth Charts 851
- PROCEDURE 40-3: Collecting a Urine Specimen from a Pediatric Patient 853
- ELECTRONIC HEALTH RECORDS: 40.01 Record Pediatric Vital Signs and Measurement 855
- ELECTRONIC HEALTH RECORDS: 40.02 Review a Pediatric Growth Chart in an EHR 855
- ELECTRONIC HEALTH RECORDS: 40.03 Document Administration of Patient Education for Infants and Toddlers 855
- ELECTRONIC HEALTH RECORDS: 40.04 Record the Administration of a Pediatric Immunization 855
- PRACTICE MEDICAL OFFICE: Clinical: Interactions 856

CHAPTER 41

Assisting in Geriatrics 857

Introduction 858

- 41.1 The Geriatric Patient 858
- 41.2 Diseases and Disorders of Geriatric Patients 861
- 41.3 Assisting with Geriatric Care 861
- SKILLS VIDEO: Obtaining Information from a Geriatric Patient 861
- 41.4 Geriatric Patient Special Concerns 866
- PROCEDURE 41-1: Coaching and Communicating with Geriatric Patients 868
- PROCEDURE 41-2: Educating Adult Patients About Daily Water Requirements 869
- ELECTRONIC HEALTH RECORDS: 41.01 Document Administration of Patient Education for Fall Prevention 872
- ELECTRONIC HEALTH RECORDS: 41.02 Document Administration of Patient Education for Daily Water Intake 872
 PRACTICE MEDICAL OFFICE: Clinical: Interactions 872

CHAPTER 42

Assisting in Other Medical Specialties 873

Introduction 874

- 42.1 Working in Other Medical Specialties 874
- 42.2 Diseases and Disorders of Medical Specialties 878
- 42.3 Exams and Procedures in Medical Specialties 882
- PROCEDURE 42-1: Assisting with a Scratch Test Examination 891
- PROCEDURE 42-2: Assisting with a Sigmoidoscopy 892
- PROCEDURE 42-3: Assisting with a Needle Biopsy 892
- ELECTRONIC HEALTH RECORDS: 42.01 Document Scratch Test Results 894
- PRACTICE MEDICAL OFFICE: Clinical: Interactions 894

Assisting with Eye and Ear Care 895

Introduction 896

- 43.1 Ophthalmology 896
- 43.2 Eye Diseases and Disorders 896
- 43.3 Ophthalmic Exams 900
- SKILLS VIDEO: Performing Vision Screening Tests 902

43.4 Ophthalmologic Procedures and Treatments 902

- 43.5 Otology 903
- 43.6 Ear Diseases and Disorders 903
- SKILLS VIDEO: Obtaining Information from a Patient with a Hearing Aid 907
- 43.7 Hearing and Other Diagnostic Ear Tests 907
- SKILLS VIDEO: Measuring Auditory Acuity 908

43.8 Ear Treatments and Procedures 908

- SKILLS VIDEO: Performing Ear Irrigation 909
- PROCEDURE 43-1: Preparing the Ophthalmoscope for Use 911
- PROCEDURE 43-2: Performing Vision Screening Tests 911
- PROCEDURE 43-3: Administering Eye Medications 914
- PROCEDURE 43-4: Performing Eye Irrigation 916
- PROCEDURE 43-5: Measuring Auditory Acuity 917
- **PROCEDURE 43-6: Administering Eardrops** 918
- PROCEDURE 43-7: Performing Ear Irrigation 919
- ELECTRONIC HEALTH RECORDS: 43.01 Record Vision Test (Snellen) Results 922
- ELECTRONIC HEALTH RECORDS: 43.02 Document Results of an Auditory Acuity Test 922
- PRACTICE MEDICAL OFFICE: Clinical: Work Task Proficiencies 922
- **PRACTICE MEDICAL OFFICE: Clinical: Interactions** 922

CHAPTER 44

Assisting with Minor Surgery 923

Introduction 924

44.1 The Medical Assistant's Role in Minor Surgery 92444.2 Surgery in the Physician's Office 924

BODY ANIMAT3D: Wound Healing 926

- 44.3 Instruments Used in Minor Surgery 927 44.4 Asepsis 932
- SKILLS VIDEO: Creating a Sterile Field 934
- SKILLS VIDEO: Performing a Surgical Scrub and Donning Sterile Gloves 935
- 44.5 Preoperative Procedures 935
- 44.6 Intraoperative Procedures 937
- 44.7 Postoperative Procedures 940
- SKILLS VIDEO: Assisting after Minor Surgical Procedures 941
- SKILLS VIDEO: Suture Removal 941

- PROCEDURE 44-1: Creating a Sterile Field 941
- PROCEDURE 44-2: Performing a Surgical Scrub 942
- PROCEDURE 44-3: Donning Sterile Gloves 943
- PROCEDURE 44-4: Assisting as a Floater (Unsterile Assistant) During Minor Surgical Procedures 944
- PROCEDURE 44-5: Assisting as a Sterile Scrub Assistant During Minor Surgical Procedures 945
- PROCEDURE 44-6: Assisting After Minor Surgical Procedures 945
- PROCEDURE 44-7: Suture Removal 946
- ELECTRONIC HEALTH RECORDS: 44.01 Document a Patient's Informed Consent 949
- ELECTRONIC HEALTH RECORDS: 44.02 Document Patient Education - Wound Care after Mole Removal 949
- PRACTICE MEDICAL OFFICE: Clinical: Work Task Proficiencies 949

UNIT SEVEN

Assisting with Diagnostics

CHAPTER 45

Orientation to the Lab 950

Introduction 951

- 45.1 The Role of Laboratory Testing in Patient Care 951
- 45.2 The Medical Assistant's Role 953
- 45.3 Use of Laboratory Equipment 953
- SKILLS VIDEO: Using a Microscope 955
- 45.4 Safety in the Laboratory 956
- 45.5 Quality Assurance Programs 957
- 45.6 Communicating with the Patient 964
- 45.7 Recordkeeping 965
- PROCEDURE 45-1: Using a Microscope 967
- ELECTRONIC HEALTH RECORDS: 45.01 Order a Patient's Labs 970
- ELECTRONIC HEALTH RECORDS: 45.02 Record a Patient's Lab Results 970
- PRACTICE MEDICAL OFFICE: Clinical: Privacy and Liability 970

CHAPTER 46

Microbiology and Disease 971

Introduction 972

- 46.1 Microbiology and the Role of the Medical Assistant 972
- 46.2 How Microorganisms Cause Disease 972
- 46.3 Classification and Naming of Microorganisms 973

CONTENTS

xvii

- 46.4 Viruses 974
- 46.5 Bacteria 977

46.6 Protozoans 981

46.7 Fungi 982

46.8 Multicellular Parasites 983

46.9 How Infections Are Diagnosed 985

46.10 Specimen Collection 987

SKILLS VIDEO: Obtaining a Throat Culture Specimen 989

46.11 Transporting Specimens to an Outside Laboratory 990

46.12 Direct Examination of Specimens 991

46.13 Preparation and Examination of Stained Specimens 991

46.14 Culturing Specimens in the Medical Office 991

- PROCEDURE 46-1: Obtaining a Throat Culture Specimen 995
- PROCEDURE 46-2: Performing a Quick Strep A Test on a Throat Specimen 996
- PROCEDURE 46-3: Obtaining a Nasopharyngeal Culture Specimen 996
- PROCEDURE 46-4: Preparing Microbiologic Specimens for Transport to an Outside Laboratory 997
- PROCEDURE 46-5: Preparing a Microbiologic Specimen Smear 997
- PROCEDURE 46-6: Performing a Gram Stain 998
- ELECTRONIC HEALTH RECORDS: 46.01 Order a Strep Test for a Patient 1002
- ELECTRONIC HEALTH RECORDS: 46.02 Record Strep Test Results for a Patient 1002
- PRACTICE MEDICAL OFFICE: Admin Check Out: Privacy and Liability 1002

CHAPTER 47

Collecting, Processing, and Testing Urine and Stool Specimens 1003

Introduction 1004

47.1 The Role of the Medical Assistant 1004

47.2 Obtaining Urine Specimens 1005

SKILLS VIDEO: Collecting a Clean-Catch Midstream Urine Specimen 1006

47.3 Urinalysis 1010

- SKILLS VIDEO: Performing a Reagent Strip Test 1014
- SKILLS VIDEO: Pregnancy Testing Using the EIA Method 1016

47.4 Collecting and Processing Stool Specimens 1019

- PROCEDURE 47-1: Collecting a Clean-Catch Midstream Urine Specimen 1021
- PROCEDURE 47-2: Collecting a 24-Hour Urine Specimen 1022
- PROCEDURE 47-3: Establishing Chain of Custody for a Urine Specimen 1023
- PROCEDURE 47-4: Measuring Specific Gravity with a Refractometer 1024
- PROCEDURE 47-5: Performing a Reagent Strip Test 1024
- PROCEDURE 47-6: Pregnancy Testing Using the EIA Method 1025
- PROCEDURE 47-7: Processing a Urine Specimen for Microscopic Examination of Sediment 1026

- PROCEDURE 47-8: Fecal Occult Blood Testing
 Using the Guaiac Testing Method 1028
- ELECTRONIC HEALTH RECORDS: 47.01 Record Urine Dipstick Results 1031
- ELECTRONIC HEALTH RECORDS: 47.02 Document Release of Urine Specimen for Chain of Custody 1031
- PRACTICE MEDICAL OFFICE: Clinical: Interactions 1031

CHAPTER 48

Collecting, Processing, and Testing Blood Specimens 1032

Introduction 1033

- 48.1 The Role of the Medical Assistant 1033
- 48.2 Preparation for Collecting Blood Specimens 1034
- SKILLS VIDEO: Quality Control Procedures for Blood Specimen Collection 1034
- 48.3 Patient Preparation and Communication 1041
- 48.4 Performing Blood Collection 1043
- 48.5 Performing Common Blood Tests 1045
- SKILLS VIDEO: Preparing a Blood Smear Slide 1051
- SKILLS VIDEO: Measuring Hematocrit Percentage after Centrifuge 1052
- SKILLS VIDEO: Measuring Blood Glucose Using a Handheld Glucometer 1055
- PROCEDURE 48-1: Quality Control Procedures for Blood Specimen Collection 1056
- PROCEDURE 48-2: Performing Venipuncture Using an Evacuated System 1057
- PROCEDURE 48-3: Performing Capillary Puncture 1059
- PROCEDURE 48-4: Preparing a Blood Smear Slide 1061
 PROCEDURE 48-5: Measuring Hematocrit
- Percentage after Centrifuge 1062
- PROCEDURE 48-6: Measuring Blood Glucose Using a Handheld Glucometer 1064
- PROCEDURE 48-7: Performing a Rapid Infectious Mononucleosis Test 1064
- ELECTRONIC HEALTH RECORDS: 48.01 Order Bloodwork for a Patient 1067
- ELECTRONIC HEALTH RECORDS: 48.02 Record Glucose Test Results 1067
- PRACTICE MEDICAL OFFICE: Clinical: Work Task Proficiencies 1067

CHAPTER 49

Electrocardiography and Pulmonary Function Testing 1068

Introduction 1069

49.1 The Medical Assistant's Role in Electrocardiography and Pulmonary Function Testing 1069

- 49.2 Basic Principles of Electrocardiography 1069
- 49.3 The Electrocardiograph 1070
- 49.4 Performing an ECG 1074
- SKILLS VIDEO: Obtaining an ECG 1083
- 49.5 Exercise Electrocardiography (Stress Testing) and Echocardiography 1083
- 49.6 Ambulatory Electrocardiography (Holter Monitoring) 1085
- SKILLS VIDEO: Holter Monitoring 1085
- 49.7 Pulmonary Function Testing 1086
- SKILLS VIDEO: Measuring Forced Vital Capacity Using Spirometry 1088
- SKILLS VIDEO: Peak Expiratory Flow Rate 1089
- PROCEDURE 49-1: Obtaining an ECG 1089
- PROCEDURE 49-2: Ambulatory Monitoring 1090
- PROCEDURE 49-3: Measuring Forced Vital Capacity Using Spirometry 1092
- PROCEDURE 49-4: Obtaining a Peak Expiratory Flow Rate 1093
- ELECTRONIC HEALTH RECORDS: 49.01 Order an ECG for a Patient 1096
- ELECTRONIC HEALTH RECORDS: 49.02 Upload an ECG Tracing to a Patient's EHR 1096
- ELECTRONIC HEALTH RECORDS: 49.03 Record Vital Signs Including Pulse Oximetry 1096
- PRACTICE MEDICAL OFFICE: Clinical: Work Task Proficiencies 1096

Diagnostic Imaging 1097

Introduction 1098

- 50.1 Brief History of the X-ray 1098
- 50.2 Diagnostic Radiology 1098
- 50.3 The Medical Assistant's Role in Diagnostic Radiology 1099
- 50.4 Common Diagnostic Radiologic Tests 1101
- 50.5 Common Therapeutic Uses of Radiation 1109
- 50.6 Radiation Safety and Dose 1110
- 50.7 Electronic Medicine 1112
- PROCEDURE 50-1: Assisting with an X-ray Examination 1113
- PROCEDURE 50-2: Documentation and Filing Techniques for X-rays 1114
- ELECTRONIC HEALTH RECORDS: 50.01 Document Administration of Patient Education -Mammography 1117
- ELECTRONIC HEALTH RECORDS: 50.02 Upload Mammogram Results to a Patient's EHR 1117
- PRACTICE MEDICAL OFFICE: Clinical: Interactions 1117

UNIT EIGHT

Assisting in Therapeutics

CHAPTER 51

Principles of Pharmacology 1118

Introduction 1119

51.1 The Medical Assistant's Role in Pharmacology 1119

- 51.2 Pharmacology 1120
- BODY ANIMAT3D: Pharmacokinetics vs. Pharmacodynamics *1121*
- BODY ANIMAT3D: Medication Absorption, Medication Distribution, Medication Metabolism, and Medication Excretion 1122
- 51.3 Drug Names and Categories 1123
- 51.4 FDA Regulation and Drugs 1127
- 51.5 Sources of Drug Information 1128
- 51.6 Controlled Substances 1132
- 51.7 Prescriptions 1134
- SKILLS VIDEO: Interpreting a Prescription 1137
- 51.8 Nonpharmacologic Pain Management 1137
- 51.9 Vaccines 1137
- PROCEDURE 51-1: Helping the Licensed Practitioner Comply with the Controlled Substances Act 1139
- PROCEDURE 51-2: Interpreting a Prescription 1139
- ELECTRONIC HEALTH RECORDS: 51.01 Record Administration of a Vaccine 1141
- ELECTRONIC HEALTH RECORDS: 51.02 Record Medications in a Patient's EHR 1141
- ELECTRONIC HEALTH RECORDS: 51.03 Create a
 Prescription Refill Request 1141
- PRACTICE MEDICAL OFFICE: Clinical: Privacy and Liability 1142

CHAPTER 52

Dosage Calculations 1143

Introduction 1144

- 52.1 Ensuring Safe Dosage Calculations 1144
- 52.2 Measurement Systems 1145
- 52.3 Conversions Within and Between Measurement Systems 1146
- 52.4 Dosage Calculations 1148
- 52.5 Body Weight Calculations 1151
- PRACTICE MEDICAL OFFICE: Clinical: Privacy and Liability 1155

CONTENTS

xix

CHAPTER 53

Medication Administration 1156

Introduction 1157

53.1 Preparing to Administer a Drug 1157

- 53.2 Rights of Medication Administration 1160
- 53.3 Drug Routes and Equipment 1161
- 53.4 Medications by Mouth 1163
- SKILLS VIDEO: Administering Drugs by Mouth 1164
- 53.5 Medications by Injection 1164
- SKILLS VIDEO: Drawing a Drug from an Ampule 1166
- SKILLS VIDEO: Reconstituting and Drawing a Drug for Injection 1166
- SKILLS VIDEO: Giving an Intradermal Injection 1167
- SKILLS VIDEO: Giving a Subcutaneous Injection 1167
- SKILLS VIDEO: Giving an Intramuscular Injection 1167
- 53.6 Other Medication Routes *1169*
- 53.7 Special Considerations 1169
- 53.8 Patient Education About Medications 1171

53.9 Charting Medications 1174

- PROCEDURE 53-1: Administering Oral Drugs 1174
- PROCEDURE 53-2: Administering Buccal or Sublingual Drugs 1176
- PROCEDURE 53-3: Drawing a Drug from an Ampule 1177
- PROCEDURE 53-4: Reconstituting and Drawing a Drug for Injection 1177
- **PROCEDURE 53-5: Giving an Intradermal (ID) Injection** *1178*
- PROCEDURE 53-6: Giving a Subcutaneous (Subcut) Injection 1179
- PROCEDURE 53-7: Giving an Intramuscular (IM) Injection 1180
- PROCEDURE 53-8: Administering Inhalation Therapy 1181
- PROCEDURE 53-9: Administering and Removing a Transdermal Patch 1182
- PROCEDURE 53-10: Assisting with Administration of a Urethral Drug 1183
- PROCEDURE 53-11: Administering a Vaginal Medication 1184
- PROCEDURE 53-12: Administering a Rectal Medication 1184
- ELECTRONIC HEALTH RECORDS: 53.01 Document Medication Administration 1187
- ELECTRONIC HEALTH RECORDS: 53.02 Record Medications in a Patient's EHR 1187
- ELECTRONIC HEALTH RECORDS: 53.03 Document Allergies in a Patient's EHR 1187
- PRACTICE MEDICAL OFFICE: Clinical: Office Operations 1187

CHAPTER 54

Physical Therapy and Rehabilitation 1188

Introduction 1189

- 54.1 General Principles of Physical Therapy 1189
- 54.2 Cryotherapy and Thermotherapy 1192
- 54.3 Hydrotherapy 1195
- 54.4 Exercise Therapy 1196

- 54.5 Massage 1198
- 54.6 Traction 1199
- 54.7 Mobility Aids 1199
- SKILLS VIDEO: Teaching a Patient How to Use Crutches 1202
- 54.8 Referral to a Physical Therapist 1204
- PROCEDURE 54-1: Administering Cryotherapy 1204
- PROCEDURE 54-2: Administering Thermotherapy 1205
- PROCEDURE 54-3: Teaching a Patient How to Use a Cane 1206
- PROCEDURE 54-4: Teaching a Patient How to Use a Walker 1207
- PROCEDURE 54-5: Teaching a Patient How to Use Crutches 1207
- ELECTRONIC HEALTH RECORDS: 54.01 Refer a Patient to
 Physical Therapy 1210
- PRACTICE MEDICAL OFFICE: Clinical: Work Task Proficiencies 1210

CHAPTER 55

Nutrition and Health 1211

- Introduction 1212
- 55.1 Daily Energy Requirements 1212
- 55.2 Nutrients 1213
- BODY ANIMAT3D: Protein Synthesis 1214
- 55.3 Dietary Guidelines 1220
- 55.4 Assessing Nutritional Levels 1222
- 55.5 Modified Diets 1222
- 55.6 Patients with Specific Nutritional Needs 1224
- **BODY ANIMAT3D: Digestion: Lactose Intolerance** 1225
- BODY ANIMAT3D: Obesity 1229
- 55.7 Eating Disorders 1230
- 55.8 Patient Education 1231
- PROCEDURE 55-1: Teaching Patients How to Read Food Labels 1233
- PROCEDURE 55-2: Alerting Patients with Food Allergies to the Dangers of Common Foods 1235
- ELECTRONIC HEALTH RECORDS: 55.01 Document Administration of Patient Education for Nutrition 1238
- ELECTRONIC HEALTH RECORDS: 55.02 Record Food Allergies in a Patient's EHR 1238
- PRACTICE MEDICAL OFFICE: Admin Check In: Interactions 1238

UNIT NINE

Medical Assisting Practice

CHAPTER 56

Practice Management 1239

Introduction 1240

56.1 Organizational Design 1240

- 56.2 Managing the Medical Practice 1242
- SKILLS VIDEO: Petty Cash 1244

56.3 Human Resources and Practice Management 1246

- 56.4 Being a Leader 1249
- 56.5 Risk Management and Quality Assurance 1250
- SKILLS VIDEO: Completing an Incident Report 1252
- 56.6 Handling Payroll 1252
- 56.7 Calculating and Filing Taxes 1257
- PROCEDURE 56-1: Preparing a Travel Expense Report 1262
- PROCEDURE 56-2: Preparing an Agenda 1262
- PROCEDURE 56-3: Completing an Incident Report 1263
- PROCEDURE 56-4: Generating Payroll 1263
- ELECTRONIC HEALTH RECORDS: 56.01 Assign Access Rights to an Employee 1266
- PRACTICE MEDICAL OFFICE: Admin Check Out: Privacy and Liability 1266

CHAPTER 57

Emergency Preparedness 1267

Introduction 1268

- 57.1 Understanding Medical Emergencies 1268
- 57.2 Preparing for Medical Emergencies 1269
- SKILLS VIDEO: Performing an Emergency Assessment 1271
- 57.3 Accidental Injuries 1271
- BODY ANIMAT3D: Concussion 1274
- SKILLS VIDEO: Controlling Bleeding 1275
- SKILLS VIDEO: Cleaning Minor Wounds 1278
- 57.4 Common Disorders 1278
- SKILLS VIDEO: Caring for a Patient Who Is Vomiting 1281
- 57.5 Less Common Disorders 1281
- SKILLS VIDEO: Performing Cardiopulmonary Resuscitation (CPR) 1283
- 57.6 Common Psychosocial Emergencies 1285
- 57.7 The Patient Under Stress 1285
- 57.8 Educating the Patient *1286*
- 57.9 Disasters and Pandemics 1286
- 57.10 Bioterrorism 1287
- PROCEDURE 57-1: Stocking the Crash Cart 1289

- PROCEDURE 57-2: Performing an Emergency Assessment 1289
- PROCEDURE 57-3: Foreign Body Airway Obstruction in a Responsive Adult or Child 1290
- PROCEDURE 57-4: Foreign Body Airway Obstruction in a Responsive Infant 1291
- PROCEDURE 57-5: Controlling Bleeding 1292
- PROCEDURE 57-6: Cleaning Minor Wounds 1293
- PROCEDURE 57-7: Caring for a Patient Who Is Vomiting 1293
- PROCEDURE 57-8: Assisting During a Chemical Disaster 1294
- BODY ANIMAT3D: Burns 1296
- PRACTICE MEDICAL OFFICE: Clinical: Privacy and Liability 1296

CHAPTER 58

Preparing for the World of Work 1297

Introduction 1298

- 58.1 Training in Action 1298
- 58.2 Obtaining Professional Certification 1302
- 58.3 Preparing to Find a Position 1303
- 58.4 Interviewing 1309

58.5 On the Job 1313

- PROCEDURE 58-1: Résumé Writing 1314
- PRACTICE MEDICAL OFFICE: Admin Check Out: Work Task Proficiencies 1316

APPENDICES

- Prefixes, Suffixes, and Word Roots in Commonly Used Medical Terms A-1
- Abbreviations and Symbols Commonly Used in Medical Notations *A-5*

CONTENTS

xxi

Diseases and Disorders A-7

Glossary G-1 Index I-1

Procedures

PROCEDURE 1-1	Obtaining Certification/Registration Information Through the Internet 9
PROCEDURE 1-2	Locating Your State's Legal Scope of
PROCEDURE 1-2	Practice 9
PROCEDURE 3-1	Self-Evaluation of Professional Behaviors 40
PROCEDURE 4-1	Communicating with the Anxious Patient 59
PROCEDURE 4-2	Communicating with the Angry Patient 59
PROCEDURE 4-3	Communicating with the Assistance of an Interpreter 60
PROCEDURE 5-1	Obtaining Signature for Notice of Privacy Practices and Acknowledgment 91
PROCEDURE 5-2	Completing a Privacy Violation Complaint Form 91
PROCEDURE 5-3	Obtaining Authorization to Release Health Information 92
PROCEDURE 6-1	Aseptic Handwashing 108
PROCEDURE 6-2	Using an Alcohol-Based Hand Disinfectant 108
PROCEDURE 6-3	Using a Biohazardous Sharps Container 109
PROCEDURE 6-4	Disposing of Biohazardous Waste 109
PROCEDURE 7-1	Handling a Fire Emergency 135
PROCEDURE 7-2	Maintaining and Using an Eyewash Station 136
PROCEDURE 7-3	Creating a Pediatric Reception Area 137
PROCEDURE 7-4	Creating a Reception Area Accessible to Patients with Special Needs 137
PROCEDURE 7-5	Opening and Closing the Medical Office 138
PROCEDURE 8-1	Using a Facsimile (Fax) Machine 170
PROCEDURE 8-2	Using a Photocopier Machine 170
PROCEDURE 8-3	Using a Check-Writing Machine 171
PROCEDURE 8-4	Step-by-Step Overview of Inventory Procedures 171
PROCEDURE 9-1	Performing Sanitization with an Ultrasonic Cleaner 187
PROCEDURE 9-2	Guidelines for Disinfecting Exam Room Surfaces 188
PROCEDURE 10-1	Creating a Professional Letter 214
PROCEDURE 10-2	Writing an Interoffice Memo 215
PROCEDURE 10-3	Composing a Professional E-mail Message 215
PROCEDURE 10-4*	Composing an Electronic Patient Letter Using a Template 216
PROCEDURE 10-5	Sorting and Opening Mail 216
PROCEDURE 11-1	Preparing a New Patient Paper Medical Record 240

PROCEDURE 11-2	Correcting Paper Medical Records 240
PROCEDURE 11-3	Entering (Adding) Information into a Paper Medical Record 241
PROCEDURE 12-1*	Creating a New Patient Record Using EHR Software 256
PROCEDURE 12-2*	Checking in and Rooming a Patient Using an Electronic Health Record 256
PROCEDURE 12-3*	Creating an Appointment Matrix for an Electronic Scheduling System 257
PROCEDURE 12-4*	Scheduling a Patient Appointment Using an Electronic Scheduler 257
PROCEDURE 13-1	Creating a Filing System for Paper Medical Records 274
PROCEDURE 13-2	Setting Up an Office Tickler File 275
PROCEDURE 13-3	Developing a Records Retention Program 275
PROCEDURE 14-1	Using a Video Relay Service with an American Sign Language Interpreter 299
PROCEDURE 14-2	Renewing a Prescription by Telephone 299
PROCEDURE 14-3	Screening and Routing Telephone Calls 300
PROCEDURE 14-4	Handling Emergency Calls 301
PROCEDURE 14-5	Retrieving Messages from an Answering Service or System 302
PROCEDURE 14-6	Participating in a Telehealth Interaction with a Patient 302
PROCEDURE 15-1*	Creating Electronic Patient Instructions 321
PROCEDURE 15-2	Identifying and Using Community Resources 322
PROCEDURE 15-3	Locating Credible Patient Education Information on the Internet 322
PROCEDURE 15-4	Developing a Patient Education Plan 323
PROCEDURE 15-5	Outpatient Surgery Teaching 323
PROCEDURE 16-1	Creating an Appointment Matrix 346
PROCEDURE 16-2	Scheduling Appointments 346
PROCEDURE 16-3	Completing the Patient Appointment Card 346
PROCEDURE 16-4	Placing Appointment Confirmation Calls 347
PROCEDURE 16-5	Scheduling Outpatient Surgical Appointments 347
PROCEDURE 16-6	Scheduling Inpatient Surgical Appointments 348
PROCEDURE 17-1	Verifying Workers' Compensation Coverage 385
PROCEDURE 17-2	Submitting a Request for Prior

Authorization 385

•

°°°

0 0

*Includes EHRclinic Exercise(s)

xxii

PROCEDURE 17-3 Completing the CMS-1500 Claim Form 386		ing with a General Physical Exam 796
PROCEDURE 17-4 Tracking Insurance Claims Submissions 388		ing with a Gynecologic Exam 817
PROCEDURE 18-1 Locating an ICD-10-CM Code 411		ing During the Exam of a Pregnant
PROCEDURE 18-2 Locating a Health Status (Z) Code 412		nt 819
PROCEDURE 18-3 Locating an External Cause Code 412		ing with a Cervical Biopsy 819
PROCEDURE 19-1 Locating a CPT Code 434	PROCEDURE 40-1 Measu	•
PROCEDURE 19-2 Locating a HCPCS Code 435	PROCEDURE 40-2 Mainta	•
PROCEDURE 19-3* Entering CPT and ICD Codes into an EHR Program 435	Patien	ting a Urine Specimen from a Pediatric nt 853
PROCEDURE 20-1 Posting Charges, Payments, and Adjustments 468	Patien	ning and Communicating with Geriatric nts 868
PROCEDURE 20-2 Using the Superbill as Bill/Receipt 469		ting Adult Patients About Daily Water
PROCEDURE 20-3 Posting a Nonsufficient Funds (NSF)		rements 869
Check 469	PROCEDURE 42-1 Assisti	ing with a Scratch Test ination 891
PROCEDURE 20-4 Processing a Payment Resulting in a Credit		
Balance 469		ing with a Sigmoidoscopy 892
PROCEDURE 20-5 Processing Refunds to Patients 470		ring with a Needle Biopsy 892
PROCEDURE 20-6 Preparing an Age Analysis 470		ring the Ophthalmoscope for Use 911
PROCEDURE 20-7 Referring an Account to a Collection		rming Vision Screening Tests 911
Agency and Posting the Payment from the		nistering Eye Medications 914
Agency 471 PROCEDURE 20-8 Completing a Truth in Lending Statement	PROCEDURE 43-4 Perfor	
(Agreement) 472	PROCEDURE 43-5 Measu	• • •
PROCEDURE 20-9 Making a Bank Deposit 472	PROCEDURE 43-6 Admin	•
PROCEDURE 20-10 Reconciling the Bank Statement 473	PROCEDURE 43-7 Perfor	• •
PROCEDURE 20-11 Setting Up the Disbursements Journal 474	PROCEDURE 44-1 Creatin	•
PROCEDURE 35-1 Removing Contaminated Gloves 730		rming a Surgical Scrub 942
PROCEDURE 35-2 Removing a Contaminated Gown 731	PROCEDURE 44-3 Donni	•
PROCEDURE 35-3 Wrapping and Labeling Instruments for Sterilization in the Autoclave 731	During	ing as a Floater (Unsterile Assistant) g Minor Surgical Procedures 944
PROCEDURE 35-4 Running a Load Through the Autoclave 732		ting as a Sterile Scrub Assistant During Surgical Procedures 945
PROCEDURE 35-5 Notifying State and County Agencies	PROCEDURE 44-6 Assisti	-
About Reportable Diseases 733		dures 945
PROCEDURE 36-1 Using Critical Thinking Skills During an	PROCEDURE 44-7 Suture	e Removal 946
Interview 755	PROCEDURE 45-1 Using	a Microscope 967
PROCEDURE 36-2 Using a Progress Note 757	PROCEDURE 46-1 Obtain	ning a Throat Culture Specimen 995
PROCEDURE 36-3 Obtaining a Medical History 757		rming a Quick Strep A Test on a Throat
PROCEDURE 37-1 Measuring and Recording Temperature 772	Specin	men 996
PROCEDURE 37-2 Measuring and Recording Pulse and Respirations 774		ning a Nasopharyngeal Culture men 996
PROCEDURE 37-3 Obtaining a Pulse Oximetry Reading 774	•	ring Microbiologic Specimens
PROCEDURE 37-4 Taking the Blood Pressure of Adults and Older Children 775		ansport to an Outside Laboratory 997 ring a Microbiologic Specimen
PROCEDURE 37-5 Measuring Height and Weight of Adults and Children 776		r 997 ming a Gram Stain 008
PROCEDURE 38-1 Practicing Good Body Mechanics 792	PROCEDURE 46-6 Perfor PROCEDURE 47-1 Collect	ting a Clean-Catch Midstream Urine
PROCEDURE 38-2 Positioning a Patient for an Exam 793		men 1021
PROCEDURE 38-3 Communicating Effectively with Patients		ting a 24-Hour Urine Specimen 1022
from Other Cultures and Meeting Their Needs		lishing Chain of Custody for a Urine
for Privacy 794		men 1023
PROCEDURE 38-4 Transferring a Patient in a Wheelchair for an Exam 795	PROCEDURE 47-4 Measu with a	uring Specific Gravity I Refractometer 1024
		PROCEDURES xxiii

PROCEDURE 47-5	Performing a Reagent Strip Test 1024
PROCEDURE 47-6	Pregnancy Testing Using the EIA Method 1025
PROCEDURE 47-7	Processing a Urine Specimen for Microscopic Examination of Sediment 1026
PROCEDURE 47-8	Fecal Occult Blood Testing Using the Guaiac Testing Method 1028
PROCEDURE 48-1	Quality Control Procedures for Blood Specimen Collection 1056
PROCEDURE 48-2	Performing Venipuncture Using an Evacuated System 1057
PROCEDURE 48-3	Performing Capillary Puncture 1059
PROCEDURE 48-4	Preparing a Blood Smear Slide 1061
PROCEDURE 48-5	Measuring Hematocrit Percentage after Centrifuge 1062
PROCEDURE 48-6	Measuring Blood Glucose Using a Handheld Glucometer 1064
PROCEDURE 48-7	Performing a Rapid Infectious Mononucleosis Test 1064
PROCEDURE 49-1	Obtaining an ECG 1089
PROCEDURE 49-2	Ambulatory Monitoring 1090
PROCEDURE 49-3	Measuring Forced Vital Capacity Using Spirometry 1092
PROCEDURE 49-4	Obtaining a Peak Expiratory Flow Rate 1093
PROCEDURE 50-1	Assisting with an X-ray Examination 1113
PROCEDURE 50-2	Documentation and Filing Techniques for X-rays 1114
PROCEDURE 51-1	Helping the Licensed Practitioner Comply with the Controlled Substances Act 1139
PROCEDURE 51-2	Interpreting a Prescription 1139
PROCEDURE 53-1	Administering Oral Drugs 1174
PROCEDURE 53-2	Administering Buccal or Sublingual Drugs 1176
PROCEDURE 53-3	Drawing a Drug from an Ampule 1177
PROCEDURE 53-4	Reconstituting and Drawing a Drug for Injection 1177

PROCEDURE 53-5 Giving an Intradermal (ID) Injection 1178
PROCEDURE 53-6 Giving a Subcutaneous (Subcut)
Injection 1179
PROCEDURE 53-7 Giving an Intramuscular (IM) Injection 1180
PROCEDURE 53-8 Administering Inhalation Therapy 1181
PROCEDURE 53-9 Administering and Removing a Transdermal
Patch 1182
PROCEDURE 53-10 Assisting with Administration
of a Urethral Drug 1183
PROCEDURE 53-11 Administering a Vaginal Medication 1184
PROCEDURE 53-12 Administering a Rectal Medication 1184
PROCEDURE 54-1 Administering Cryotherapy 1204
PROCEDURE 54-2 Administering Thermotherapy 1205
PROCEDURE 54-3 Teaching a Patient How to Use a Cane 1206
PROCEDURE 54-4 Teaching a Patient How to Use a Walker 1207
PROCEDURE 54-5 Teaching a Patient How to Use Crutches 1207
PROCEDURE 55-1 Teaching Patients How to Read Food
Labels 1233
PROCEDURE 55-2 Alerting Patients with Food Allergies to the
Dangers of Common Foods 1235
PROCEDURE 56-1 Preparing a Travel Expense Report 1262
PROCEDURE 56-2 Preparing an Agenda 1262
PROCEDURE 56-3 Completing an Incident Report 1263
PROCEDURE 56-4 Generating Payroll 1263
PROCEDURE 57-1 Stocking the Crash Cart 1289
PROCEDURE 57-2 Performing an Emergency Assessment 1289
PROCEDURE 57-3 Foreign Body Airway Obstruction in a
Responsive Adult or Child 1290
PROCEDURE 57-4 Foreign Body Airway Obstruction
in a Responsive Infant 1291
PROCEDURE 57-5 Controlling Bleeding 1292
PROCEDURE 57-6 Cleaning Minor Wounds 1293
PROCEDURE 57-7 Caring for a Patient Who Is Vomiting 1293
PROCEDURE 57-8 Assisting During a Chemical Disaster 1294
PROCEDURE 58-1 Résumé Writing 1314

Digital Exercises and Activities

NEW! EHRclinic Exercises

5.01 Add an Acknowledgement of Receipt of NPP to a Patient's EHR 95 5.02 Add an Authorization to Release Health Information to a Patient's EHR 95 6.01 Add a Note to a Patient's EHR 111 8.01 Assign Staff Access Levels in an EHR 175 8.02 Assign a Task Item 175 **10.01 Create a Patient Test Result Letter** 219 10.02 Create an Excuse Note 219 **10.03 E-mail a Patient** 219 10.04 Composing an Electronic Patient Letter Using a Template 219 11.01 Add a New Patient to the EHR 244 **11.02 Edit Patient Demographics** 244 11.03 Record a Patient's Vital Signs 244 11.04 Record a SOAP Note 244 12.01 Navigate an EHR 260 12.02 Schedule a New Patient Appointment 260 12.03 Add Insurance to a New Patient's EHR 260 12.04 Add a New Patient to the EHR 260 12.05 Track a Patient in the EHR 260 **12.06 Document Receipt of Notice of Privacy Practices** 260 12.07 Build a New Patient's Face Sheet 260 12.08 Add Allergies to a Patient's Face Sheet 260 12.09 Add Medications to a Patient's Face Sheet 260 12.10 Record a Patient's Vital Signs 260 12.11 Build an Office Visit Note 260 12.12 Order Lab and Imaging Tests 260 12.13 Add an Immunization to the EHR 260 12.14 Document a Patient's Plan of Care in the EHR 260 12.15 Add Diagnoses and Procedures to a Patient's Encounter 260 12.16 Create a Clinical Visit Summary 260 12.17 Create a Routing Slip 260 **12.18 Apply a Patient's Payment to the Account** 260 12.19 Create and Submit an Insurance Claim 260 12.20 Post Insurance Deposits 260 12.21 Add Lab and Imaging Results to a Patient's EHR 260 12.22 Complete a Patient's Telephone Encounter 260 12.23 Create a Patient Test Result Letter 260 13.01 Update the Status of the Recall List 278 14.01 Create an Electronic Telephone Encounter 306

14.02 Create an Urgent Electronic Telephone Encounter 306 14.03 Complete a Prescription Refill Request 306 **15.01 Document Administration of Patient Education** 326 15.02 Document Administration of Pre- and Post-Operative Instructions 326 16.01 Maintain a Provider's Schedule Matrix in an EHR 351 16.02 Add a Patient to the Schedule in an EHR 351 16.03 Cancel a Patient's Appointment in an EHR 351 16.04 Document Administration of Surgical Instructions 351 16.05 Checking-In an Established Patient 351 **17.01 Create and Submit an Insurance Claim** 391 18.01 Assign a Diagnostic Code to an Office Visit - A 414 18.02 Assign a Diagnostic Code to an Office Visit - B 414 18.03 Maintain the Diagnosis Code Database in an EHR 414 19.01 Assign a Procedure Code to an Office Visit - A 438 19.02 Assign a Procedure Code to an Office Visit - B 438 19.03 Maintain the Procedure Code Database in an EHR 438 20.01 Record a Patient Payment 477 20.02 Post Insurance Deposits to the Practice Account 477 **20.03 Create a Patient Statement** 477 20.04 Create an Age Analysis Report 477 20.05 Handle a Returned NSF Check 477 20.06 Process a Patient Payment 477 20.07 Issue a Patient Refund 477 20.08 Posting an Insurance Payment to One Patient Account Using an RA 477 20.09 Posting an Insurance Payment to Multiple Patient Accounts Using an RA (Medicare) 477 20.10 Posting an Insurance Payment to a Patient Account Using an RA 477 20.11 Posting Secondary Insurance Payments to Multiple Patient Accounts Using an RA 477 20.12 Posting a Denial from an EOB 477 20.13 Posting a Non-Covered Service from an RA 477 20.14 Posting a Deductible from an RA 477 **20.15 Batch Invoicing to Patients with Balance Due** 477 36.01 Record a Patient's Interview and History in an EHR 759 36.02 Record a Patient's Review of Systems (ROS) in an EHR 759 **37.01 Record a Patient's Vital Signs and** Measurements - A 779

XXV

37.02 Record a Patient's Vital Signs and
Measurements - B 779
38.01 Record a Patient's Physical Exam (PE) in an EHR 799
39.01 Record a Gynecologic Exam in a Patient's EHR 822
39.02 Add Test Results to a Patient's EHR 822
39.03 Document Patient Education for Testicular
Self-Exam 822
40.01 Record Pediatric Vital Signs and Measurement 855
40.02 Review a Pediatric Growth Chart in an EHR 855
40.03 Document Administration of Patient Education for
Infants and Toddlers 855
40.04 Record the Administration of a Pediatric
Immunization 855
41.01 Document Administration of Patient Education for Fall
Prevention 872
41.02 Document Administration of Patient Education for Daily Water Intake 872
42.01 Document Scratch Test Results 894
43.01 Record Vision Test (Snellen) Results 922
43.02 Document Results of an Auditory Acuity Test 922
44.01 Document a Patient's Informed Consent 949
44.02 Document Patient Education - Wound Care after Mole
Removal 949
45.01 Order a Patient's Labs 970
45.02 Record a Patient's Lab Results 970
46.01 Order a Strep Test for a Patient 1002
46.02 Record Strep Test Results for a Patient 1002
47.01 Record Urine Dipstick Results 1031
47.02 Document Release of Urine Specimen for Chain of Custody 1031
48.01 Order Bloodwork for a Patient 1067
48.02 Record Glucose Test Results 1067
49.01 Order an ECG for a Patient 1096
49.02 Upload an ECG Tracing to a Patient's EHR 1096
49.03 Record Vital Signs Including Pulse Oximetry 1096
50.01 Document Administration of Patient
Education - Mammography 1117
50.02 Upload Mammogram Results to a Patient's EHR 1117
51.01 Record Administration of a Vaccine 1141
51.02 Record Medications in a Patient's EHR 1141
51.03 Create a Prescription Refill Request 1141
53.01 Document Medication Administration 1187
53.02 Record Medications in a Patient's EHR 1187
53.03 Document Allergies in a Patient's EHR 1187
54.01 Refer a Patient to Physical Therapy 1210
55.01 Document Administration of Patient Education
for Nutrition 1238
55.02 Record Food Allergies in a Patient's EHR 1238
56.01 Assign Access Rights to an Employee 1266
-

Body Animat3D

Homeostasis 480 Basic Chemistry (Organic Molecules) 488 Fluid and Electrolyte Imbalances 490 **Cells and Tissues** 493 Meiosis vs. Mitosis 494 Inflammation 507 **Burns** 509 Osteoarthritis vs. Rheumatoid Arthritis 529 Osteoporosis 532 Muscle Contraction 537 Cardiac Cycle 557 Heart Failure Overview, Left-Side Heart Failure, and Right-Side Heart Failure 565 Coronary Artery Disease (CAD) 566 Hypertension 567 Strokes 577 Lymph and Lymph Node Circulation 586 Immune Response: Hypersensitivity 593 Inflammation 597 Acid-Base Balance: Acidosis 603 Acid-Base Balance: Alkalosis 603 Oxygen Transport and Gas Exchange 603 Asthma 605 **COPD** 606 **Respiratory Tract Infections and Respiratory** Failure 606 Nerve Impulse 616 Spinal Cord Injury 621 Alzheimer Disease 626 Strokes 628 Renal Function 639 Prostate Cancer 650 Breast Cancer 655 Meiosis vs. Mitosis 658 Food Absorption 676 Liver Failure 678 Type 1 Diabetes 693 Type 2 Diabetes 693 Hyperthyroidism 695 Hearing Loss: Sensorineural 709 Hypertension 779 Wound Healing 926 Pharmacokinetics vs. Pharmacodynamics 1121 **Medication Absorption, Medication Distribution, Medication Metabolism, and Medication** Excretion 1122 Protein Synthesis 1214

Digestion: Lactose Intolerance 1225 Obesity 1229 Concussion 1274 Burns 1296

Administrative and Clinical Skills Videos

Communicating with the Anxious Patient 54 **Communicating Effectively with Patients from Other Cultures** and Meeting Their Needs for Privacy 56 Aseptic Hand Hygiene 101 **Establishing and Conducting the Supply Inventory and Receiving Supplies** 161 Guidelines for Disinfecting Exam Room Surfaces 180 **Registering a New Patient** 223 Initiating a Paper-Based Patient Medical Record 228 Correcting the Patient Medical Record 237 PHI Authorization Release Health Information 255 Managing a Prescription Refill 288 Scheduling Outpatient Surgical Appointments 342 Scheduling Inpatient Surgical Appointments 343 **Requesting Prior Authorization** 371 Locating an ICD-10-CM Code 410 Locating a CPT Code 432 Posting Charges, Payments, and Adjustments 452 Applying Standard Precautions 720 Wrapping and Labeling Instruments for Sterilization in the Autoclave 725 Using Critical Thinking Skills During an Interview 743 **Obtaining a Medical History** 755 Measuring and Recording Temperature 764 **Obtaining a Pulse Oximetry Reading** 767 Measuring and Recording Pulse and Respirations 767 **Taking the Blood Pressure of Adults and Older** Children 770 Measuring Adults and Children 771 Positioning the Patient for an Exam 786 Transferring a Patient in a Wheelchair for an Exam 786 Assisting with a General Physical Exam 788 **Communicating Effectively with Patients from Other Cultures** and Meeting Their Needs for Privacy 799 Assisting with a Gynecological Exam 804 Pregnancy Testing Using the EIA Method 808 Measuring Infants 842 **Obtaining Information from a Geriatric Patient** 861 **Performing Vision Screening Tests** 902 **Obtaining Information from a Patient with a** Hearing Aid 907 Measuring Auditory Acuity 908

Performing Ear Irrigation 909 Creating a Sterile Field 934 **Performing a Surgical Scrub and Donning** Sterile Gloves 935 Assisting after Minor Surgical Procedures 941 Suture Removal 941 Using a Microscope 955 **Obtaining a Throat Culture Specimen** 989 Collecting a Clean-Catch Midstream Urine Specimen 1006 Performing a Reagent Strip Test 1014 Pregnancy Testing Using the EIA Method 1016 **Quality Control Procedures for Blood Specimen** Collection 1034 Preparing a Blood Smear Slide 1051 Measuring Hematocrit Percentage after Centrifuge 1052 Measuring Blood Glucose Using a Handheld Glucometer 1055 Obtaining an ECG 1083 Holter Monitoring 1085 Measuring Forced Vital Capacity Using Spirometry 1088 Peak Expiratory Flow Rate 1089 Interpreting a Prescription 1137 Administering Drugs by Mouth 1164 Drawing a Drug from an Ampule 1166 Reconstituting and Drawing a Drug for Injection 1166 Giving an Intradermal Injection 1167 Giving a Subcutaneous Injection 1167 Giving an Intramuscular Injection 1167 Teaching a Patient How to Use Crutches 1202 Petty Cash 1244 Completing an Incident Report 1252 Performing an Emergency Assessment 1271 Controlling Bleeding 1275 Cleaning Minor Wounds 1278 Caring for a Patient Who Is Vomiting 1281 Performing Cardiopulmonary Resuscitation (CPR) 1283

NEW! Application-Based Activities (ABAs) Including Practice Medical Office (PMO)

Admin Check In: Interactions43Admin Check In: Interactions63Admin Check In: Interactions95Admin Check In: Office Operations112Admin Check In: Work Task Proficiencies141Admin Check In: Office Operations175Clinical: Office Operations190Admin Check In: Privacy and Liability219

Admin Check In: Privacy and Liability 244 Admin Check Out: Privacy and Liability 261 Admin Check Out: Work Task Proficiencies 278 Admin Check In: Office Operations 306 Admin Check Out: Interactions 326 Admin Check Out: Work Task Proficiencies 351 Admin Check in: Work Task Proficiencies 391 Admin Check Out: Office Operations 415 Admin Check Out: Work Task Proficiencies 438 Admin Check Out: Work Task Proficiencies 477 Admin Check Out: Privacy and Liability 737 Clinical: Interactions 759 Clinical: Office Operations 779 Clinical: Interactions 799 Clinical: Interactions 822 Clinical: Interactions 856 Clinical: Interactions 872 Clinical: Interactions 894 Clinical: Work Task Proficiencies 922

Clinical: Interactions 922 Clinical: Work Task Proficiencies 949 Clinical: Privacy and Liability 970 Admin Check Out: Privacy and Liability 1002 Clinical: Interactions 1031 Clinical: Work Task Proficiencies 1067 Clinical: Work Task Proficiencies 1096 Clinical: Interactions 1117 Clinical: Privacy and Liability 1142 Clinical: Privacy and Liability 1155 Clinical: Office Operations 1187 Clinical: Work Task Proficiencies 1210 Admin Check In: Interactions 1238 Admin Check Out: Privacy and Liability 1266 Clinical: Privacy and Liability 1296 Admin Check Out: Work Task Proficiencies 1316

Find the list of of NEW! Application-Based Activities (ABAs) with the Instructor Resources on Connect.

Step into the career of your choice with medical assisting's high growth potential and diversity of skills and workplace locations. A medical assistant performs many tasks. These tasks are always expanding and changing as the healthcare environment changes. Learning these tasks and finding and developing your skills will put you on the highest course towards success. This eighth edition is updated to help students as well as instructors learn these ever-changing tasks and stay current in the healthcare environment. McGraw Hill is committed to helping prepare students to succeed in their educational program and career by providing a complete and easy set of solutions for the educators of these programs. The following will give you a snapshot of some of the exciting solutions available with the eighth edition of Medical Assisting: Administrative and Clinical Procedures with Anatomy and Physiology for your Medical Assisting course. Instructors across the country have told us how much preparation it takes to teach medical assisting. To help, we have added more detailed information on how to organize and utilize the many available practice features and activities, as well as a breakdown by Learning Outcomes for corresponding activities entitled the Comprehensive Asset Map, located in the Instructor Resources portion of Connect.

The Content—A Note from the Authors

The eighth edition of Medical Assisting: Administrative and Clinical Procedures with Anatomy and Physiology has many noteworthy updates. With insightful feedback from our users

and reviewers, our experienced author team set out to create a one-of-a-kind, dynamic, practical, realistic, and comprehensive set of tools for individuals preparing to become medical assistants as well as the instructors helping them to accomplish this task.

When you begin the book, you will find it is not just about rote memorization of concepts. Medical Assisting immerses you in the world of BWW Medical Associates, where you learn as you confront new workplace challenges in each chapter. All elements of the book-from the case studies in each chapter and the Soft Skills Success exercises to the \bigcup EHR clinic screenshots and other visuals-immerse the student in a realistic learning environment. Case studies are built around a set of patients who regularly visit BWW Medical Associates, and you will get to know these patients as well as the employees of BWW Medical Associates as you move through the chapters and the accompanying EHR exercises.

Within this framework, we have worked to provide the most up-to-date information about all aspects of the medical assisting profession, with a focus on consistency, authenticity, and accuracy. Along with thousands of minor tweaks and updates, Medical Assisting, eighth edition, incorporates the following:

- Over 100 **EHR**clinic electronic health record exercises correlated to 34 chapters.
- A complete set of 23 VEHRclinic exercises included with Chapter 12 Electronic Health Records that provides documentation of EHR proficiency and a "big picture" journey for the student.

xxix

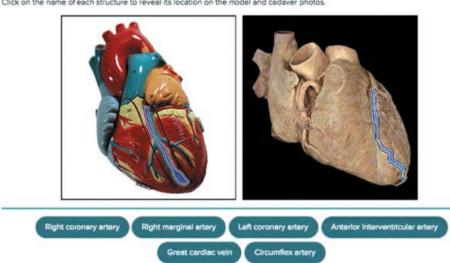


FIGURE FM-1 The new Practice Atlas. (left): ©2017 Denoyer-Geppert Science Company; (right): McGraw Hill

Coronary Circulation: Anterior View

Click on the name of each structure to reveal its location on the model and cadaver photos

• Over 30 **EHR** clinic screenshots throughout the text to showcase basic EHR skills in the context of the BWW Medical Associates.

• Dozens of BWW EHR documentation/progress note exam-

· Soft Skills Success exercises located within the Chapter

Review that test employability skills and link students to related modules in Practice Medical Office (PMO) and

ples in both clinical and administrative chapters.

- Case studies that are enhanced by the inclusion of more detailed clinical information and link to the new Soft Skills Success activities where applicable.
- Coding content focusing on ICD-10-CM, including detailed 1500 claim form instructions utilizing the 5010 updates to make the form compliant with ICD-10 requirements.
- Thirteen math and dosage videos and questions located as assignments in Connect.
- Inclusion of content and terminology related to all of the current medical assisting standards to help ensure student certification success.
- Brand new level headings in all of the anatomy and physiology chapters titled "Diagnostic Exams and Tests."
- Medical Terminology Practice feature with the anatomy and physiology chapters to bring further understanding of the power of the construction and deconstruction of medical terms, as well as corresponding practice questions in the Chapter Review.
- Corresponding practice of anatomy and physiology with **Practice Atlas** on Connect.

A more detailed list of chapter changes is covered in the next section.

Key Chapter-by-Chapter Changes

The following chapter-by-chapter list includes the essential changes and updates made to the book. A full list of changes is available in the transition guide provided in the Instructor Resources on Connect.

- Chapter 1 The medical assistant as a patient navigator, scope of practice procedure, standard of care, and practice test provided by certification organizations. A new procedure titled "Locating Your State's Legal Scope of Practice."
- Chapter 2 2022 TJC Safety Goals, latest American Board of Medical Specialties and Telehealth.
- Chapter 3 Skills and professional behaviors expected of a medical assistant. Strategies for success and growth in the profession.
- Chapter 4 Effective communication and how it changes throughout life stages. New table outlines non-face-to-face communication styles using electronic technology such as e-mail, texting, and patient portals.

- Chapter 5 Broadly defined compliance. Added statement about the purpose of medical malpractice. Added information about what a medical assistant should do if they become aware of an unethical action.
- Chapter 6 Updated to reflect necessary COVID-related changes and clarifications. Updated penalties for not following OSHA regulations.
- Chapter 7 Updated Internet site for more information regarding access to a medical office for differently-abled individuals to the official ADA site. Added information about working with hearing-impaired individuals.
- Chapter 8 Basic computer information updated to now include information on patient portals as well as technology advances in telehealth and speech recognition software. Also new is a section on Computer Disaster Recovery processes.
- Chapter 9 Emphasized need for using facemasks and protective clothing during sanitization procedures. Added statement about importance of proper room ventilation in conjunction with other infection control procedures in order to control the spread of bacteria and viruses.
- Chapter 10 Electronic communication etiquette updated to include texting and patient portal use. Information on phishing, malware, and ransomware is also included.
- Chapter 11 Patient registration and information updates include sex and sex at birth, as well as patient gender identity and gender pronoun preferences.
- Chapter 12 Expanded promoting interoperability information (formerly known as meaningful use). Increased information on practice management systems with updated EHR content utilizing EHRclinic program.
- Chapter 13 Retaining files in the office, filing to reflect modern filing standards, records retention rules and regulations.
- Chapter 14 Telecommunication methods used in the office for hard-of-hearing patients. Expanded information on telehealth visits and the medical assistant's role in these visits, as well as teleconferencing used within the medical office.
- Chapter 15 Electronic media use, defined modeling versus return demonstration; sample e-newsletter, patient information form, and physician information figures added.
- Chapter 16 Scheduling telehealth visits; electronic scheduling via online and patient portals; patient reminders through e-mail, text, and patient portals.

- Chapter 17 Understanding the patient insurance card, updated Medicare information for 2022, expanded information on claim denials and appeals.
- Chapter 18 Explanation of how medical necessity is defined by ICD-10 codes. All figures and exercises updated with 2022 information. New section on "U" codes–Codes for Special Purposes, new for 2022.
- Chapter 19 Updated information on E/M coding using 2021 guidelines, with outline of *proposed changes* for 2023. Avoiding fraud and abuse when submitting claims to third-party payers.
- Chapter 20 Patient payments via patient portal, practice management systems assisting with end-of-day and month-end reporting, accounts payable using electronic banking systems.
- Chapter 21 Updated terminology to align with the *Terminologia Anatomica* and *Terminologia Histologica*; added functions of smooth and rough endoplasmic reticulum; added detail to the mitosis section for a more complete description of the process.
- Chapter 22 Updated terminology to align with the *Terminologia Anatomica*; updated the text to reflect that skin consists of only two layers-epidermis and dermis; clarified that the epidermis is comprised of five sublayers, although only two are discussed; added the free border of nail, nail matrix, and cuticle to the chapter reading and updated the purpose of the lunule and nail root.
- Chapter 23 Updated terminology to align with the *Terminologia Anatomica*; added trabeculae in the discussion of bone structure; expanded on the types of long bones; updated the names of the vertebral curvatures; updated section on false ribs to include pairs 8 through 12 with pairs 11 and 12 being also known as floating ribs.
- Chapter 24 Updated terminology to align with the *Terminologia Anatomica* and *Terminologia Histologica*; heavily revised energy production section by removing lactic acid as an energy source, adding the role of creatine phosphate in resting muscle fibers and glycolysis, and expanding on aerobic respiration; added new section on excess postexercise oxygen consumption to replace previous oxygen debt section; revised muscle fatigue section to include known causes of fatigue during short duration-high intensity and long duration-low intensity exercise.
- Chapter 25 Updated terminology to align with the *Terminologia Anatomica*; reorganized and expanded the cardiac cycle discussion; expanded on how those nerves carry signals

created by the cardiac center; revised the effects of potassium ion and calcium ion imbalances on the cardiac cycle.

- Chapter 26 Updated terminology to align with the *Terminologia Anatomica*; added that globin and iron are recycled when RBCs are destroyed; revised text to reflect that the red pigment in RBCs is converted into biliverdin by macrophages after RBCs are destroyed; updated the functions of the white blood cells.
- Chapter 27 Updated terminology to align with the *Terminologia Anatomica* and *Terminologia Histologica*; expanded the function of natural killer cells; reorganized and updated the discussion on T cell and B cell activation; new Figures 27-7 and 27-8 to support the revisions to the T cell and B cell activation section.
- Chapter 28 Updated terminology to align with the *Terminologia Anatomica*; revised the role of the external intercostal muscles in resting exhalation and updated Figure 28-4 to match this revision; added new paragraph on forceful inhalation and exhalation; updated the location and function of the respiratory rhythmicity center.
- Chapter 29 Updated terminology to align with the *Terminologia Anatomica*; updated to resting membrane potential and revised its description to include the average RMP for a neuron and why it exists; added more detail to the description of nerve impulse formation to better clarify why the electrical changes occur; added a new paragraph on the epithalamus.
- Chapter 30 Updated terminology to align with the *Terminologia Anatomica* and *Terminologia Histologica*; revised and reorganized the gross anatomy discussion to focus on the roles of and the structures comprising the functional and nonfunctional portions of the kidney; added that the proximal convoluted tubule performs most tubular reabsorption; described the effects of diuretics on both urine and blood volumes.
- Chapter 31 Updated terminology to align with the *Terminologia Anatomica* and *Terminologia Histologica*; added the role of bulbo-urethral gland secretions in neutralizing the acidity of the male's urethra; clarified the roles of parasympathetic and sympathetic impulses in female sexual arousal and orgasm; added additional detail to more fully explain the hormonal changes that occur during the female reproductive cycle.
- Chapter 32 Updated terminology to align with the *Terminologia Anatomica*; revised to include the three types of polysaccharides, three types of disaccharides, and three types of monosaccharides.

A CLOSER LOOK

xxxi

Chapter 33	Updated terminology to align with the
	Terminologia Anatomica and Terminologia
	Histologica; added that cholesterol is used
	to make steroids; updated the functions of
	luteinizing hormone; added the specific role of melatonin in regulating the biological clock.

- Chapter 34 Updated terminology to align with the *Terminologia Anatomica* and *Terminologia Histologica*; revised the pathway for nerve impulses from the olfactory receptors to the cerebrum; explained the relationship between the rate of nerve impulse conduction and sensory adaptation.
- Chapter 35 Updated CDC Reportable Diseases to 2022 list, added information about droplets versus aerosols, streamlined OSHA worker protection guidelines.
- Chapter 36 Added information regarding reporting abuse, neglect, and exploitation; updated tables.
- Chapter 37 Updated vital signs measurements according to PALS data. Pulse oximetry is in this chapter.
- Chapter 38 Added SARS-CoV-2 to Table 38-1 and updated general guidelines for safety precautions.
- Chapter 39 Table 39-1 updated to screening tests only and included ACOG current recommendations for pelvic exam; updated Table 39-2, ThinPrep test, and Table 39-3.
- Chapter 40 Added causes of jaundice and details about fontanels; added statement about checking vaccines for recall; updated immunization chart.
- Chapter 41 Added enuresis, COVID-19 immunizations, new lens to restore vision due to glaucoma.
- Chapter 42 Updated Figure 42-2, explained RAST test in detail, added latex to contact dermatitis and verrucae vulgaris to Table 42-3.
- Chapter 43 Added blepharitis, added description of conjunctivitis, added info about corneal ulcer, added ARDM surgery to macular degeneration, and added specific treatment for strabismus.
- Chapter 44 Updated wound healing stages.
- Chapter 45 Updated tables to include COVID-19 rapid tests.

Chapter 46	Added reference to DOT website for transporting infectious substances safely brochure, added a Points on Practice feature for collecting a sputum specimen, added procedure for collecting a nasopharyngeal specimen, updated pathogen tables.
Chapter 47	Revised the text and illustrations for clarity, and replaced some illustrations with photographs; added new photos for bacteria, yeasts, and parasites.
Chapter 48	Added rapid diagnostic tests (RDT) with link; added more word parts to key terms.
Chapter 49	Updated Figure 49-6, updated Table 49-3, added clipper to skin prep and electrode gel build-up to flat line.
Chapter 50	Updated dosimetry information; updated procedure to reflect conventional X-ray file handling versus digital X-rays.
Chapter 51	Updated drug names and addressed look-alike/ sound-alike drugs.
Chapter 52	Added additional information about means

- and extremes; added basic rule for dosage calculations.
- Chapter 53 Updated what needs to be known about drugs to indications, effects, side effects, contraindications, drug interactions, and potential adverse effects; Z-track; and use of lidocaine.
- Chapter 54 Updated information regarding assisting with a wheelchair transfer.
- Chapter 55 Updated to newest MyPlate image, celiac and non-celiac gluten sensitivity, allergy treatments, preventing obesity.
- Chapter 56 All tax documents updated to 2022 versions. Updated information on when incident reports may be required.
- Chapter 57 New Points on Practice feature Recognizing Wounds of Violence, updated Caution box to reflect current pandemic knowledge.
- Chapter 58 Updated to reflect need to include experience with practice management software on résumé; updated salary range based on bls.gov.



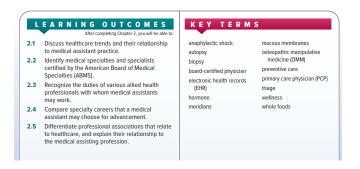
A Guided Tour

Learning Outcomes, Key Terms, and Textbook Organization

Every learning outcome in *Medical Assisting*, eighth edition, is aligned with a level I heading. McGraw Hill has made it even easier for students and instructors to find, learn, and review critical information. The chapter organization of the eighth edition is organized to promote learning based on what a medical assistant does in practice. The chapters build on one another to ensure student understanding of the many tasks they will be expected to perform. The chapters can be easily grouped together to create larger topics or units for the students to learn. For ease of understanding, content can be organized as follows:

- Unit One, Medical Assisting as a Career–Chapters 1 to 5
- Unit Two, Safety and the Environment–Chapters 6 to 9
- Unit Three, Communication-Chapters 10 to 15
- Unit Four, Administrative Practices-Chapters 16 to 20
- Unit Five, Applied Anatomy and Physiology–Chapters 21 to 34
- Unit Six, Clinical Practices-Chapters 35 to 44
- Unit Seven, Assisting with Diagnostics-Chapters 45 to 50
- Unit Eight, Assisting in Therapeutics-Chapters 51 to 55
- Unit Nine, Medical Assisting Practice-Chapters 56 to 58

Key terms are called out at the beginning of each chapter and are set in bold throughout the text to further promote the mastery of learning outcomes.



Content Correlations

Medical Assisting, eighth edition, also provides a correlation structure that will enhance its usefulness to both students and instructors. We have been careful to ensure that the text and supplements provide coverage of topics crucial to all of the following:

• CAAHEP (Commission on Accreditation of Allied Health Education Programs) Standards and Guidelines for Medical Assisting Education Programs

- ABHES (Accrediting Bureau of Health Education Schools) Competencies and Curriculum
- AAMA (American Association of Medical Assistants) CMA (Certified Medical Assistant) Occupational Analysis
- AMT (American Medical Technologists) RMA (Registered Medical Assistant) Task List
- AMT (American Medical Technologists) CMAS (Certified Medical Assistant Specialist) Competencies and Examination Specifications
- NHA (National Healthcareer Association) Certified Clinical Medical Assistant (CCMA)
- NHA (National Healthcareer Association) Certified Medical Administrative Assistant (CMAA)
- CMA (AAMA) Certification Examination Content Outline
- NCCT (National Center for Competency Testing) National Certified Medical Assistant (NCMA) Detailed Test Plan
- NAHP (National Association for Health Professionals) Nationally Registered Certified Medical Assistant (NRCMA) content outline
- NAHP (National Association for Health Professionals) Nationally Registered Certified Administrative Health Assistant (NRCAHA) content outline
- CAHIIM (Commission on Accreditation for Health Informatics and Information Management Education)
- SCANS Correlation

Correlations to these are included with the instructor resources located on Connect (see later pages for information about ConnectTM). In addition, CAAHEP requires that all medical assistants be proficient in the 71 entry-level areas of competence when they begin medical assisting work. ABHES requires proficiency in the competencies and curriculum content at a minimum. The opening pages of each chapter provide a list of the areas of competence that are covered within the chapter.

CAAHE	٢	ABHES		
V.C.15	Identify the medical assistant's role in telehealth	1. General Orientation a. Describe the current employment outlook for the		
V.P.2	Correctly use and pronounce medical terminology in health care interactions.	medical assistant b. Compare and contrast the allied health		
X.C.2	Identify the provider role in terms of standard of care	professions and understand their role in medical assisting		
XI.C.4	Identify professional behavior of a medical assistant	 List the general responsibilities and skills of the medical assistant. 		
		10. Career Development		
		b. Demonstrate professional etiquette		
		 c. Identify the importance of continuing education and how it is achieved 		

You will also find that each procedure is correlated to the ABHES and CAAHEP competencies within the workbook on



the procedure sheets. These sheets can be easily pulled out of the workbook and placed in the student file to document proficiency.

Chapter Features

Each chapter opens with material that includes the Case Study, the learning outcomes, a list of key terms, the ABHES and CAAHEP medical assisting competencies covered in the chapter, and an introduction. Since the learning outcomes represent each of the level I headings in the chapter, they serve as the chapter outline. Chapters are organized into topics that move from the general to the specific. Updated color photographs, anatomical and technical drawings, tables, charts, and text features help educate the student about various aspects of medical assisting. The text features include the following:

• Case Studies are provided at the beginning of all chapters. They represent situations similar to those that the medical assistant may encounter in daily practice. The case studies include pictures of each of the patients who come to BWW Medical Associates for care (and, where applicable, matching *avatars* in the new VEHRclinic and ABAs). Students are encouraged to consider the case study as they read each chapter. Case Study Questions in the end-of-chapter review check students' understanding and application of chapter content.

A	S I	S T	UDY
Employee	Name	Position	Credentials
Miguel	A. Perez	Administrative Assistant	CMA (AAMA)
Supervise	or	Date of Hire	Other Information
Malik K CMM	atahri,	06/21/2021	Wants to further his education

Miguel A. Perez, CMA (AAMA), is the administrative assistant at BWW Medical Associates. He came in early to get caught Perez, CMA (AAMA), is the administrative assista up on some important duties. He needs to schedule consult for Raja Lautu and Ken Washington, call in a medication refil for Svlvia Gonzales, and verify insurance cover Chen. Just as he is getting started, Kaylyn Haddix, RMA (AMT)

calls from one of the exam rooms and tells him to call 911 because a patient has just gone into cardiac arrest. So much for com-ing in early; looks like it is going to be a busy day. Keep Miguel in mind as you study this chapter. There will be questions at the end of the chapter based on the case study. The information in the chapter will help vou answer these auestic



Procedures give step-by-step instructions on how to perform specific administrative or clinical tasks that a medical assistant will be required to perform. The procedures are referenced within the content when discussed and found in their entirety at the end of the chapter. In the workbook, the tearable procedure sheets mirror the exact procedures in the book and allow for easy practice and assessment. Critical procedures also can be studied in Clinical or Administrative skills video exercises on Connect, as well as new step-by-step videos of the procedures using the VEHR clinic.

PROCEDURE 16-2 Scheduling Appointments

Procedure Goal: Utilizing the previously created matrix ok patient appointments applying the correct amount of time for each appointment SHA Guidelines: This procedure does not involve exposure

to blood, body fluids, or tissue. Materials: Appointment book and pen or pencil, or electronic scheduler (with appropriate matrix) template, outlining time

frames for patient appointment types Method:

- 1. Establish the type of appointment required by the patient, particularly if this is a new patient or a returning patient. RATIONALE: New patients typically require a longer
- appointment time than do returning existing patients. If necessary, consult the template for the amount of time required for the patient appointment. Keep in mind the reason for the appointment when scheduling (for ng (foi
- example, if the patient is required to be fasting). RATIONALE: Some appointments are best scheduled
- When possible, schedule appointments earlier in the day first and then move to later time frames. Do ask th patient if he or she has a preferred time frame in mind and, if at all possible, accommodate the request. ALE: Open appointments later in the day al space for unexpected appointments required at a later time

WORK // DOC

- When using an appointment book, enter the patient name, phone number, and reason for the appointment in the appropriate space, blocking out additional blocks of time, if necessary, to accommodate a longe appointment time.
- If an electronic scheduler is used, use the search option to find the next available appointment for the time frame required for the appointment. Enter the patient name, phone number, and reason for the appointment.
- 6. Repeat the appointment information to the patient, giving Repeat the appointment mormation to the patient, g any necessary instructions regarding preparation for appointment, such as early arrival for blood tests. Als is a good time to remind patients about any copaym the sum of the sum of the second second second second second that will be due at the time of the appointment
- Points on Practice feature boxes provide guidelines on keeping the medical office running smoothly and efficiently.
- Educating the Patient feature boxes focus on ways to instruct patients about caring for themselves outside the medical office.
- Caution: Handle with Care feature boxes cover the precautions to be taken in certain situations or when performing certain tasks.

CAUTION: HANDLE WITH CARE

Maintaining Standards of Cleanliness in the Reception Area

Cleanliness is (and should be) one of a medical office's hallmarks. Not only is cleanliness required in the examination and testing rooms, it is also expected in the patient reception area. A messy patient reception area reflects badly on the practice. Patients may think, "If they don't care about this, what else do they not

and unink, in they ubin take about the main takes what evel users more care about? Maintaining standards of cleanliness helps ensure that the reception area is presentable and inviting at all times. As a medical assistant, you may be involved—along with the physician, office manager, and other staff members—in setting the office's cleanliness standards. Standards are general guideli In addition to setting standards, you will need to specify the tasks

required to meet each standard. You also may want to create a checklist of the tasks required to meet all of these standards The following list outlines standards you may want to con-sider. Specific housekeeping tasks for meeting those standards are included in parentheses.

- Keep everything in its place. (Complete a daily visual check for out-of-place items. Return all magazines to racks. Push chairs back into place.) 2. Dispose of all trash. (Empty trash cans. Pick up trash on the
- floor or on furniture.)

3. Prevent dust and dirt from accumulating on surface (Wipe or dust furniture, lamps, and artificial plants. Polish doorknobs. Clean mirrors, wall hangings, and pictures.)

- 4. Spot-clean areas that become dirty. (Remove scuffmarks Clean upholstery stains.)
- 5. Disinfect areas of the reception area if they have be exposed to body fluids. (Immediately clean and disinfect all soiled areas.)
- 6. Handle items with care. (Take precautions when carrying potentially messy or breakable items. Do not carry too much at once.)

After the standards have been established, type and post them in a prominent place for the office staff (but not the patients) to see. The cleaning activities checklist may be posted, but the person responsible for cleaning the office also should keep a copy. It is everyone's duty to keep the office looking clean and presentable

A schedule of specific daily and weekly cleaning activities also should be posted. Less frequent housekeeping duties, such as laundering drapes, shampooing the carpet, and clean ws and blinds, can be noted in a tickler file so that

In y will down and ormady, can be noted in a lacker me so that they will be performed on a regular basis. It is always a good idea to have a second staff member responsible for periodically working with the medical assis-tant on housekeeping responsibilities. That person also may these noted bases of the second sec be responsible for handling cleaning duties when the medical assistant is away from the office

• Pathophysiology is featured in each of the chapters on anatomy and physiology. These sections provide students with details of the most common diseases and disorders of each body system and include information on the causes, common signs and symptoms, diagnostic exams and tests, treatment, and, where possible, the prevention of each disease.

PATHOPHYSIOLOGY Common Diseases and Disorders

of the Skeletal System

Arthritis is a general term meaning "joint inflammation. Although there are more than 100 types of arthritis, we will discuss the two most common types: osteoarthritis and rheuma toid arthritis.

OSTEOARTHRITIS also known as degenerative joint diseas OSIEDARTHATIS, also known as degenerative joint diseder (JDD), is the most common type of joint disorder, affecting nearly everyone to some degree by the age of 70. DJD primarily affects the weight-bearing joints of the hips and knees, and the cartilage between the bones and the bones themselves begin to break down.

Causes. Research points to inflammatory processes or metabolic disorders as the etiology of DJD.

Signs and Symptoms. These include joint stiffness, a and pain, especially with weather changes. There is often fluid around the joint and grating noises with joint movement. The grating noise is usually caused by bone-on-bone contact.

Diagnostic Exams and Tests. X-rays of the affected joint are used to determine if osteoarthritis is present. Blood tests are used to rule out rheumatoid arthritis.



FIGURE 23-14 X-ray image of the Birmingham Hip Resurfacing prosthesis of the left hip Total Care I

Causes, RA is an autoimmune disease. The body's immu response attacks the synovial membranes of the joints, triggering inflammation.

Signs and Symptoms. In this disease, the immune causes edema (swelling), tenderness, and warm around the joints. Tissue becomes granular and thick, eventually Each chapter closes with a summary of the Learning Outcomes. The summary is followed by an end-of-chapter review with questions related to the case study, as well as 10 multiple-choice exam-style questions.

οι	ITCOME	KEY POINTS
2.1	Discuss healthcare trends and their relationship to medical assistant practice.	Medical assistants typically work in ambulatory care settings using EHR and with telehealth. They can expect to work with many older patients and should practice and assist patients with preventive care.
2.2	Identify medical specialities and specialists certified by the American Board of Medical Specialties (ABMS).	The ABMS certifies 24 major medical specialties and multiple subspecialties. The medical assistant may work with practitione in each of these areas. As medical advances occur, demand for more specialty areas may emerge.
2.3	Recognize the duties of various allied health professionals with whom medical assistants may work.	Medical assistants are members of a healthcare team. The healthcare team includes physicals must be physical therapistic other allied health professionals, and patients. Understanding the duties of other healthcare professionals will assist you as a professional medical assistant. Leven if you do not work with some of the team members directly, you may have to contact them through telephone, written, or electronic communication.
2.4	Compare specialty careers that a medical assistant may choose for advancement.	A variety of medical specialty careers are available for the practicing administrative or clinical medical assistant. These careers require additional training or education and/or other certifications.
2.5	Differentiate professional associations that relate to healthcare, and explain their relationship to the medical assisting profession.	Being a member of a professional association is essential to medical assisting practice. Knowledge of other healthcare an medical organizations allows the practicing medical assistant to function successfully within their profession.

• Medical Terminology practice exercises have been added to all the anatomy and physiology chapters.

• Soft Skills Success practice scenarios emphasize employability skills and critical thinking in complex situations. These new exercise features are included in most non-A&P chapters and are correlated to Practice Medical Office and Application-Based Activities where applicable.



The book also includes a glossary and three appendices for use as reference tools. The glossary lists all the words presented as key terms in each chapter, along with a pronunciation guide and the definition of each term. The appendices present a list of common medical terminology, including prefixes, root words, and suffixes, as well as medical abbreviations and symbols. A Diseases and Disorders appendix provides a quick reference point for patient conditions that the student may encounter.



Instructors The Power of Connections

A complete course platform

Connect enables you to build deeper connections with your students through cohesive digital content and tools, creating engaging learning experiences. We are committed to providing you with the right resources and tools to support all your students along their personal learning journeys. 65% Less Time Grading



Laptop: Getty Images; Woman/dog: George Doyle/Getty Images

Every learner is unique

In Connect, instructors can assign an adaptive reading experience with SmartBook[®] 2.0. Rooted in advanced learning science principles, SmartBook 2.0 delivers each student a personalized experience, focusing students on their learning gaps, ensuring that the time they spend studying is time well-spent. **mheducation.com/highered/connect/smartbook**

Affordable solutions, added value

Make technology work for you with LMS integration for single sign-on access, mobile access to the digital textbook, and reports to quickly show you how each of your students is doing. And with our Inclusive Access program, you can provide all these tools at the lowest available market price to your students. Ask your McGraw Hill representative for more information.

Solutions for your challenges

A product isn't a solution. Real solutions are affordable, reliable, and come with training and ongoing support when you need it and how you want it. Visit **supportateverystep.com** for videos and resources both you and your students can use throughout the term.



Students Get Learning that Fits You

Effective tools for efficient studying

Connect is designed to help you be more productive with simple, flexible, intuitive tools that maximize your study time and meet your individual learning needs. Get learning that works for you with Connect.

Study anytime, anywhere

Download the free ReadAnywhere® app and access your online eBook, SmartBook® 2.0, or Adaptive Learning Assignments when it's convenient, even if you're offline. And since the app automatically syncs with your Connect account, all of your work is available every time you open it. Find out more at

mheducation.com/readanywhere



"I really liked this app—it made it easy to study when you don't have your textbook in front of you."

- Jordan Cunningham, Eastern Washington University

iPhone: Getty Images

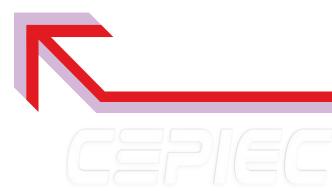


Everything you need in one place

Your Connect course has everything you need—whether reading your digital eBook or completing assignments for class—Connect makes it easy to get your work done.

Learning for everyone

McGraw Hill works directly with Accessibility Services Departments and faculty to meet the learning needs of all students. Please contact your Accessibility Services Office and ask them to email accessibility@mheducation.com, or visit **mheducation.com/about/accessibility** for more information.



For the eighth edition, we expanded our offerings to better cover all aspects of medical assisting. Links between the textbook and the key study resources are highlighted by eye-catching icons divided by resource type. Digital study resources with icons include BodyANIMAT3D, UEHRclinic electronic health record exercises, and both Administrative and Clinical Skills videos. Real-life practice opportunities include Practice Medical Office and Application-Based Activities, with icons at the end of the chapter.



These different types of icons are then used to call out specific activities and exercises by name. For example, above you can see an icon for Connect skills videos (the resource) about Establishing and Conducting Supply Inventory and Receiving Supplies (the exercise name).

McGraw-Hill Connect® Medical Assisting

A number of our key resources for *Medical Assisting, 8e*– including BodyANIMAT3D activities, skills video exercises, and **EHRclinic** electronic health records exercises—are part of our Connect offering for Medical Assisting.

Here is more on what you can expect to find in Connect for *Medical Assisting, 8e*, specifically:

- **EHR**clinic Exercises
 - Over 100 *electronic health record actionable exercises* correlated to over 34 chapters of Booth *Medical Assisting, 8e.* These simulated exercises allow students to navigate the **EHRclinic** tool while learning the tasks of a Medical Assistant.
- UEHRclinic *financial practice management exercises* designed to provide students with practical experience with electronic billing, charge capture, payment posting, and more.
- Pre- and Post-Tests.
- End-of-Chapter Exercises.
- Interactive Exercises.
- Administrative and Clinical Skills Video Exercises.*
- BodyANIMAT3D Exercises.*
- ICD-10 Coding Exercises.*
- Utilizing scenarios developed by the authors, students can practice identifying and inputting the proper ICD-10 codes.

*in applicable chapters

xxxviii

- Medical Terminology Practice.*
 - A refresher area for the body systems chapters with Word Part exercises on select terms as well as audio terms with associated spelling practice.
- Math and dosage videos with questions that reinforce basic math needed by Medical Assistant students.*
- **Practice Atlas** exercises for all of the Anatomy and Physiology chapters. The Practice Atlas for Anatomy & Physiology is an interactive tool that pairs images of common anatomical models with stunning cadaver photography, which allows students to practice naming structures on both models and human bodies. Additional multiple choice questions for practice are available as assignments in Connect.
- NEW! Anatomy & Physiology Revealed (APR) is an interactive human cadaver, fetal pig, and cat dissection tool to enhance lecture and lab that students can use anytime, anywhere. APR covers Body Orientation, Body Systems, Cells and Chemistry, and Tissues. Animations, rotatable 3D models, dissection, histology, imaging, and quizzing capabilities aid in preparing students for ultimate success. APR is now assignable in Connect, with integration for you to see the tasks your students complete. The APR Assignment will be visible under the Add Assignment tab. Within this assignment type, instructors will have the ability to assign all the features found in APR: Dissection, Animations, 3D Models, Histology, Radiology, and Quizzes.
- A completely revised and updated Test Bank (also available through the Instructor Resources).

As part of Connect for *Medical Assisting*, we also offer Smart-Book's adaptive reading experience. SmartBook provides personalized learning to individual student needs, continually adapting to pinpoint knowledge gaps and focus learning on concepts requiring additional study.

Simulations and Games for Medical Assisting

EHRcline, McGraw Hill's electronic health record tool, allows for the look and feel of a real electronic health records system fully integrated with Connect. EHRcline provides over 100 exercises directly correlated to 34 chapters of Booth Medical Assisting, 8e, with Chapter 12 Electronic Health Records being the most robust. These actionable exercises allow students to navigate the EHRcline tool, providing practical experience using electronic health records while they learn the tasks of a medical assistant. These simulated exercises are assignable in Connect and are autograded. Chapter 12 Electronic Health Records in Connect includes 23 exercises that take the student through the paces of electronic health records, including administrative functions and financial management.



EHRchnig	Administrative tools			
ichedules	Patient tracking	Charts, graphs and reports	Information management	
ncounter	Track where the patient is in the EHR system	Generate charts, graphs and reports	Manage Information	
heckout	Track patients	Manage reports	Manage practice data	
ā	Access management	Template management	Backup and recovery	
Cocounts	Manage access for different users of the system	Manage templates for communication and soap notes	Manage and recover backup	
Claims	Manage access	Manage templates	Take backup	
lessages	Settings			
Tasks	Manage font size and units of measurement			
X Tools	Settings			

FIGURE FM-2 The new EHRclinic



FIGURE FM-3 A new Application-Based Activity (ABA) (top left, top right, bottom left): McGraw Hill; (bottom right): ©Total Care Programming, Inc.

Completion of these exercises in total provides the basis for documenting electronic health record practical experience and gives the student "the big picture."



In **Practice Medical Office (PMO)**, the student takes on the role of a new medical assistant in a 3D, immersive game focused on teaching the six key skills important to working in a medical office—professionalism, soft skills, office acumen, liability,

medical knowledge, and privacy. **Practice Medical Office** features 12 engaging and challenging modules representing the functional areas of a medical practice: administrative check-in interactions, clinical interactions, and administrative check-out interactions. As the players progress through each module, they will be faced with realistic situations and learning events that will test their mastery of critical job-readiness skills in a fun, engaging learning experience. The **PMO modules** will be found together with the **Application-Based Activities** described below.

For a demo of **Practice Medical Office**, please go to http:// www.mhpractice.com/products/Practice_Medical_Office and click on "Play the Demo." An instructor's manual for PMO, correlated to ABHES and CAAHEP standards by learning event, is available in your Instructor Resources on Connect.

For the **Application-Based Activities**, or **ABAs**, the student is immersed in a brief, microsimulation experience, with the ability to practice steps in key Procedures *outside* a lab and "virtually" with an instructor. Along with the **Procedure ABAs**, students will be able to practice real-life **Scenario ABAs** that call upon decision making and application of medical assisting knowledge. Depending on the **ABA**, students will be graded on Objectives such as Clinical Skills, Administrative Skills, Interpersonal Skills, Communication, and more, all of which are aligned with ABHES and CAAHEP standards in the instructor materials. Find a full list of the **ABAs**, as well as resources for how to incorporate in your course, in the Instructor Resources on Connect.



NEW! Virtual Labs is a fully online lab solution that can be used as an online lab/clinic replacement, preparation, supplement, or make-up lab to bridge the gap between lab/clinical experience and lecture. These simulations help a student learn the practical and conceptual skills needed, then check for understanding and provide feedback. Students are better prepared, are more efficient, and retain more of the fundamental skills necessary for a successful lab/clinical experience.

On Connect, the ABAs and Virtual Labs can be found within the "Add Assignment" menu.

Student Workbook for Use with *Medical Assisting,* 8e–in print and full color (ISBN: 978-1-264-96450-5)

The *Student Workbook* provides an opportunity for the student to review and practice the material and skills presented in the textbook. The workbook is divided into parts and presented by chapter; the first part provides the following:

- Vocabulary review exercises, which test knowledge of key terms in the chapter.
- Content review exercises, which test the student's knowledge of key concepts in the chapter.
- Critical thinking exercises, which test the student's understanding of key concepts in the chapter.
- Application exercises, which include figures and practice forms and test mastery of specific skills.
- Case studies, which apply the chapter material to real-life situations or problems.

Each section, Clinical and/or Administrative, contains the appropriate procedures, presented in the order in which they are shown in the student textbook. These have been revised for ease of use and include correlations to the ABHES and CAA-HEP competencies mastered with the successful completion of each procedure. Accompanying Work Product Documentation (work/doc) provides blank forms for many of the procedures that require a specific type of document to complete the procedure. These documentation forms are used when completing many of the application activities as well as procedure competencies. Over 100 procedures as well as multiple application activities in the workbook include correlated work docs.

Pocket Guide for Use with *Medical Assisting*, 8e (ISBN: 978-1-264-96306-5)

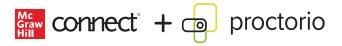
The *Pocket Guide* is a quick and handy reference to use while working as a medical assistant or during training. It includes critical procedure steps, bulleted lists, and brief information all medical assistants should know. Information is sorted by Administrative, Clinical, Laboratory, and General content.

Instructor Resources

Medical Assisting also comes with the instructor resources you've come to expect, all of which can be found through the Instructor Resources section in Connect.

• An **Instructor's Manual** that contains everything to organize your course, complete with lecture outlines (with PowerPoint slide references), discussion points, learning activities, and case studies. Also included are the answer keys to the book and workbook.

- Correlation Guides map the standards of many accreditation bureaus, including the Accrediting Bureau of Health Education Schools (ABHES) Medical Assisting competencies and curriculum; the Commission on Accreditation of Allied Health Education Programs (CAAHEP) Standards and Guidelines for Medical Assisting Education Programs competencies; American Association of Medical Assistants (AAMA) Occupational Analysis; the Association of Medical Technologists (AMT) Registered Medical Assistant (RMA) Certified Exam Topics; the National Healthcareer Association (NHA) Medical Assisting Duty/Task List; the National Association for Health Professionals (NAHP) Nationally Registered Certified Medical Assistant (NRCMA) and Nationally Registered Certified Administrative Health Assistant (NRCAHA) content outlines; the Commission for Accreditation on Health Informatics and Information Management Education (CAHIIM); and the Secretary's Commission on Achieving Necessary Skills (SCANS) areas of competence, as well as others.
- **PowerPoint Presentations** have been fully updated to include the latest figures and content and to mirror the design of the book. Teaching notes offer suggestions—in addition to those in the Instructor's Manual—to keep your class running smoothly. We also have taken steps to make our Power-Points more accessible, including adding alt tags for images and tables and ensuring that our slides are organized to be easily read by screen readers.
- A **Comprehensive Asset Map** breaks down all of the resources available through the book and Connect by chapter and by learning outcome to help you identify *what* you want to include in your course and *where* to find it.
- A **Transition Guide** to help users of earlier editions make the leap to this new edition, with thorough details outlined by the authors about changes big and small.



Proctorio: Remote Proctoring & Browser-Locking Capabilities

Remote proctoring and browser-locking capabilities, hosted by Proctorio within Connect, provide control of the assessment environment by enabling security options and verifying the identity of the student. Seamlessly integrated within Connect, these services allow instructors to control the assessment experience by verifying identification, restricting browser activity, and monitoring student actions.

Instant and detailed reporting gives instructors an at-aglance view of potential academic integrity concerns, thereby avoiding personal bias and supporting evidence-based claims.



ReadAnywhere®

Read or study when it's convenient for you with McGraw Hill's free ReadAnywhere® app. Available for iOS or Android smartphones or tablets, ReadAnywhere gives users access to McGraw Hill tools including the eBook and SmartBook® 2.0 or Adaptive Learning Assignments in Connect. Take notes, highlight, and complete assignments offline—all of your work will sync when you open the app with Wi-Fi access. Log in with your McGraw Hill Connect username and password to start learning—anytime, anywhere!

OLC-Aligned Courses

Implementing High-Quality Instruction and Assessment through Preconfigured Courseware

In consultation with the Online Learning Consortium (OLC) and our certified Faculty Consultants, McGraw Hill has created pre-configured courseware using OLC's quality scorecard to align with best practices in online course delivery. This turnkey courseware contains a combination of formative assessments, summative assessments, homework, and application activities, and can easily be customized to meet an individual instructor's needs and desired course outcomes. For more information, visit https://www.mheducation.com/highered/olc.

Test Builder in Connect

Available within Connect, Test Builder is a cloud-based tool that enables instructors to format tests that can be printed or administered within an LMS. Test Builder offers a modern, streamlined interface for easy content configuration that matches course needs, without requiring a download.

Test Builder allows you to:

- Access all test bank content from a particular title.
- Easily pinpoint the most relevant content through robust filtering options.
- Manipulate the order of questions or scramble questions and/or answers.
- Pin questions to a specific location within a test.
- Determine your preferred treatment of algorithmic questions.
- Choose the layout and spacing.
- Add instructions and configure default settings.

Test Builder provides a secure interface for better protection of content and allows for just-in-time updates to flow directly into assessments.

Tegrity: Lectures 24/7

Tegrity in Connect is a tool that makes class time available 24/7 by automatically capturing every lecture. With a simple one-click start-and-stop process, you capture all computer screens and corresponding audio in a format that is easy to search, frame by frame. Students can replay any part of any class with easy-to-use, browser-based viewing on a PC, Mac, iPod, or other mobile device.

Educators know that the more students can see, hear, and experience class resources, the better they learn. In fact, studies prove it. Tegrity's unique search feature helps students efficiently find what they need, when they need it, across an entire semester of class recordings. Help turn your students' study time into learning moments immediately supported by your lecture. With Tegrity, you also increase intent listening and class participation by easing students' concerns about note-taking. Using Tegrity in Connect will make it more likely you will see students' faces, not the tops of their heads.

Writing Assignment

Available within Connect and Connect Master, the Writing Assignment tool delivers a learning experience to help students improve their written communication skills and conceptual understanding. As an instructor, you can assign, monitor, grade, and provide feedback on writing more efficiently and effectively.

Create: Your Book, Your Way

McGraw Hill's Content Collections Powered by Create® is a self-service website that enables instructors to create custom course materials-print and eBooks-by drawing upon McGraw Hill's comprehensive, cross-disciplinary content. Choose what you want from our high-quality textbooks, articles, and cases. Combine it with your own content quickly and easily, and tap into other rights-secured, third-party content such as readings, cases, and articles. Content can be arranged in a way that makes the most sense for your course, and you can include the course name and information as well. Choose the best format for your course: color print, black-and-white print, or eBook. The eBook can be included in your Connect course and is available on the free ReadAnywhere® app for smartphone or tablet access as well. When you are finished customizing, you will receive a free digital copy to review in just minutes! Visit McGraw Hill Create®-www.mcgrawhillcreate.com-today and begin building!

Reflecting the Diverse World around Us

McGraw Hill believes in unlocking the potential of every learner at every stage of life. To accomplish that, we are dedicated to creating products that reflect, and are accessible to, all the diverse, global customers we serve. Within McGraw Hill, we foster a culture of belonging, and we work with partners who share our commitment to equity, inclusion, and diversity in all forms. In McGraw Hill Higher Education, this includes, but is not limited to, the following:

- Refreshing and implementing inclusive content guidelines around topics including generalizations and stereotypes, gender, abilities/disabilities, race/ethnicity, sexual orientation, diversity of names, and age.
- Enhancing best practices in assessment creation to eliminate cultural, cognitive, and affective bias.
- Maintaining and continually updating a robust photo library of diverse images that reflect our student populations.

- Including more diverse voices in the development and review of our content.
- Strengthening art guidelines to improve accessibility by ensuring meaningful text and images are distinguishable and perceivable by users with limited color vision and moderately low vision.

Check out the Instructor Resources area on Connect for additional resources, including an image library, sample syllabi, printable procedure checklists and work documents, and more!

xliii

The task of putting together a textbook and all of its supplements, both written and digital, takes a vast amount of cumulative effort and coordination among multiple individuals and companies. To acknowledge each of them here individually would take far too long. However, we would like start by acknowledging McGraw Hill and all of the individuals who are listed in the front of this book for their continued assistance, encouragement, and support. A special thanks for those who are so close to this edition, including Monica Toledo, Marah Bellegarde, Maria McGreal, Diane Nowaczyk, Alicia Weddle, Ann Courtney, and Krystal Faust. Without McGraw Hill and its valued employees and subcontractors, there would be no need for this acknowledgment to be written. We'd also like to give a special thank you to those who helped with supplement materials and new digital tools on Connect, including our ABAs: Amy Ensign, Amy Blochowiak, Ashita Patel, Beth Kersten, and Lori Tyler.

Leesa and Terri would like to give a special thanks to Kathy Booth. Without her tireless work, team spirit, and dedication to this project, we would not be able to "reach to new heights." Her grasp of the big picture and her constant happy nature are an inspiration to us both. It is a pleasure and an honor to work with her. Kathy gives many thanks back to Terri and Leesa for some extra flying through this edition.

Contributors and Reviewers

We, along with McGraw-Hill, would like to thank the reviewers and contributors for their assistance in developing content, offering suggestions, and shaping this revision. We appreciate you. Many of the additions, improvements, and changes are due directly to their feedback. We appreciate their insight and commitment to helping us provide information that is relevant and valuable to medical assisting students.

8e Reviewers

- Dominique Burkett NCMA, NCCT Remington College-Fort Worth, TX
- Thomas E. O'Brien, AAS, CCT, CRAT, RMA, CCMA, CPT Remington College-Fort Worth, TX

7e Reviewers

- Joseph Balatbat, MD, RMA, RPT, AHI (AMT), CPT Swedish Institute College of Health Sciences
- Tricia Berry, Ph.D Kaplan University
- Melissa Bettigole, M.Ed, CMA EMTP Northwestern Connecticut Community College
- LeeAnn Bird, BA, CMA (AAMA) *Ivy Tech Community College-Indianapolis*
- Sharon Breeding, MAE Bluegrass Community and Technical College

Mary Elizabeth Browder, M.Ed, CMA (AAMA) Cuyahoga Community College, Metropolitan Campus

- Donna Carl, BA, BS, MLS Austin Community College
- Denise DeDeaux, AA, BS, MBA Fayetteville Technical Community College

- Jennifer Dietz, MS, CMA (AAMA), PBT (ASCP)^{CM} Cuyahoga Community College,
- Metropolitan Campus
- Laura Diggle, MS, CMA (AAMA), CCMA (NHA) *Ivy Tech Community*
- College-Anderson
- Nancy Draper, CMA (AAMA), AAS
- Chattanooga State Community College
- Christine Dzoga, MA Program Director
- Malcolm X College-City College of Chicago Melissa Edenburn, MS, RHIA, CCS Austin
- Community College
- Rene Flemming, RN, ADN *ATA College* Deborah Franklin, MSEd, CMRS *Bryant* &
- Stratton College
- Kathy Gaeng, RMA, AHI Vatterott Educational Centers
- Melissa Gauna, CMA South Texas College Stefanie Goodman Ivy Tech Community College-Marion

Lisa Huehns Lakeshore Technical College Greg Klingler, MPAS, DHSc, PA-C Brigham Young University-Idaho Jodi Landfair, MS, RMA El Paso County

Medical Society

- Marta Lopez, MD, RMA, BXMO *Miami* Dade College, Medical Campus Barbara Parker, BSEd, CMA (AAMA), CPC Olympic College
- Kimberly Poag, MHA Ed, CMA (AAMA) Baker College-Owosso
- Lori Rager, CMA (AAMA), CPC, COC (AAPC) Utah State University Eastern
- Melanie Shearer, MS, MT (ASCP), PBTCM, CMA (AAMA) Cuyahoga Community College, Metropolitan Campus

Paula Silver, BS Biology, PharmD College of Health Science at ECPI University

- Jennifer Spencer, CMA (AAMA) Elmira Business Institute
- Francisco Velazquez, MD Southern Technical College
- Rebecca Voelker, AAS, BHSA, MBA Baker College
- Amy Voytek, MBA/MHA, MT, CT, RMA Westmoreland County Community College Melanie Zandi, BA, MA Jamestown Community College



UNIT ONE: MEDICAL ASSISTING AS A CAREER Introduction to Medical Assisting

0	CASE	S	T U D Y
NO	Employee Name	Position	Credentials
EMPLOYEE INFORMATION	Sandro Peso	Student	In Training
<u></u>	Supervisor	Date of Hire	Other Information
EMPLOYE	Malik Katahri, CMM	10/11/2024	Assigned to Dr. Paul F. Buckwalter

Sandro Peso, a father of four in his mid-thirties, lost his job at a local factory. He is now a medical assistant-in-training and is currently working at BWW Medical Associates. He will be working in the administrative, clinical, and laboratory sections of the office. He wants to decide which area he likes best and where he might like to work when he finishes his



Ryan McVay/Lifesize/Getty Images

training. It will not be long until he graduates and needs to take the test to become credentialed. He is nervous about the exam but really wants to do well to get the best job he can to help support his family.

Keep Sandro Peso in mind as you study this chapter. There will be questions at the end of the chapter based on the case study. The information in the chapter will help you answer these questions.

L E A R N I N G O U T C O M E S

After completing Chapter 1, you will be able to:

- **1.1** Recognize the duties and responsibilities of a medical assistant.
- **1.2** Distinguish various organizations related to the medical assisting profession.
- **1.3** Explain the need for and importance of the medical assistant credentials.
- **1.4** Identify the training needed to become a professional medical assistant.
- **1.5** Discuss professional development as it relates to medical assisting education.

KEY TERMS

accreditation

Accrediting Bureau of Health Education Schools (ABHES)

- American Association of Medical Assistants (AAMA)
- American Medical Technologists (AMT)
- certification

Certified Medical Assistant (CMA)

Clinical Laboratory Improvement Amendments of 1988 (CLIA '88)

Commission on Accreditation of Allied Health Education Programs (CAAHEP) cross-training

continuing education

Health Insurance Portability and Accountability Act (HIPAA)

licensed practitioner

multiskilled healthcare professional (MSHP)

Occupational Safety and Health Administration (OSHA)

patient navigator

professional development

Registered Medical Assistant (RMA)

ASSISTANT

registration

résumé

scope of practice

standard of care

ME DICAL Α S N G С 0 S S Т Μ Ν C CAAHEP ABHES

- V.C.10 Identify the role of the medical assistant as a patient navigator
- X.C.1 Identify scope of practice and standards of care for medical assistants
- X.C.2 Identify the provider role in terms of standard of care
- X.C.5 Identify licensure and certification as they apply to healthcare providers
- X.P.1 Locate a state's legal scope of practice for medical assistants
- XI.C.4 Identify professional behaviors of a medical assistant

1. General Orientation

- a. Describe the current employment outlook for the medical assistant
- c. Describe and comprehend medical assistant credentialing requirements
- d. List the general responsibilities and skills of the medical assistant

4. Medical Law and Ethics

- f. Comply with federal, state, and local health laws and regulations as they relate to healthcare settings
 - Define the scope of practice for the medical assistant per state requirements
 - Describe what procedures can and cannot be delegated to the medical assistant and by whom orders can be given

10. Career Development

- b. Demonstrate professional etiquette
- c. Identify the importance of continuing education and how it is achieved

Introduction

Healthcare is changing at a rapid rate. Advanced technology, implementation of cost-effective medicine, and the aging population are all factors that have caused growth in the healthcare services industry. The US Department of Labor projects that medical assisting will grow 18% between 2020 and 2030 with an average of 104,400 openings each year over the decade. The growth in the number of physicians' group practices and other healthcare practices that use support personnel such as medical assistants will in turn continue to drive up demand for medical assistants. The multifunctional medical assistant is the perfect complement to the changing healthcare industry.

Medical assistants have the training to perform a variety of duties, which qualify them to fill many different job openings in the healthcare industry. This chapter provides an introduction to the medical assisting profession. It presents a general description of your future duties, credentials, and needed training. Some basic facts about professional associations, organizations, and development related to medical assisting also are discussed. All of this to help you understand the career of a medical assistant.

Responsibilities of the Medical Assistant

LO 1.1

Your specific responsibilities as a medical assistant will depend on the type, location, and size of the facility, as well as its medical specialties. General tasks performed by most medical assistants include working and communicating with patients throughout the healthcare experience. In fact, medical assistants often perform the role of **patient navigator**. They help patients find their way through the sometimes complex healthcare system, helping them overcome any barriers they may encounter to help ensure that they get the diagnosis and treatment they need in a timely manner.

Medical assistants work in an administrative, clinical, and/ or laboratory capacity. As an administrative medical assistant, you may handle the payroll for the office staff (or supervise a payroll service), obtain equipment and supplies, and serve as the link between the physician or other licensed practitioner and representatives of pharmaceutical and medical supply companies. As a clinical medical assistant, you will be the physician's or other licensed practitioner's right arm by maintaining an efficient office, assisting the practitioner during examinations, and keeping examination rooms in order. Your laboratory duties as a medical assistant may include performing basic laboratory tests and maintaining laboratory equipment. In small practices, you may handle all duties. In larger practices, you may specialize in a particular duty. As you grow in your profession, advanced duties may be required. Table 1-1 lists various duties of a medical assistant in practice.

You also may choose to specialize in a specific area of healthcare. For example, podiatric medical assistants make castings of feet, expose and develop X-rays, and assist podiatrists in surgery. Ophthalmic medical assistants help ophthalmologists (doctors who provide eye care) by administering diagnostic tests, measuring and recording vision, testing the

	Duties of Medical Assistants	Advanced Duties
Duty Type	Entry-Level Duties	Advanced Duties
General General Control of the second second of the second	 Maintaining medical records Greeting patients 	 None Developing and conducting public outreach programs t market the licensed practitioner's professional services
JGI/Daniel Grill/Getty Images	 Handling correspondence Scheduling appointments Answering telephones Creating and maintaining patient medical records Handling billing, bookkeeping, and insurance processing Performing medical transcription Arranging for hospital admissions 	 Negotiating leases of equipment and supply contracts Negotiating nonrisk and risk managed care contracts Managing business and professional insurance Developing and maintaining fee schedules Participating in practice analysis Coordinating plans for practice enhancement, expansion, consolidation, and closure Performing as a HIPAA (Health Insurance Portability and Accountability Act) compliance officer Providing personnel supervision and employment practice Providing information systems management
Clinical Websel VGstockstudio/Shutterstock	 Assisting the licensed practitioner during examinations Assisting with asepsis and infection control Performing diagnostic tests, such as spirometry and ECGs Giving injections, where allowed Phlebotomy, including venipuncture and capillary puncture Disposing of soiled or stained supplies Performing first aid and cardiopulmonary resuscitation (CPR) Preparing patients for examinations Preparing and administering medications as directed by the licensed practitioner, and following state laws for invasive procedures Recording vital signs and medical histories Removing sutures or changing dressings on wounds Sterilizing medical instruments Instructing patients about medication and special diets, authorizing drug refills as directed by the licensed practitioner, and calling pharmacies to order prescriptions Assisting with minor surgery Teaching patients about special procedures before laboratory tests, surgery, X-rays, or ECGs 	 Initiating an IV and administering IV medications with appropriate training and as permitted by state law Reporting diagnostic study results Assisting patients in the completion of advance directives and living wills Assisting with clinical trials
Laboratory	 Performing Clinical Laboratory Improvement Amendments (CLIA)—waived tests, such as a urine pregnancy test, on the premises Collecting, preparing, and transmitting laboratory specimens Teaching patients to collect specific specimens properly Arranging laboratory services Meeting safety standards (OSHA guidelines) and fire protection mandates 	 Performing as an OSHA compliance officer Performing moderately complex laboratory testing with appropriate training and certification

STUDY

INTRODUCTION TO MEDICAL ASSISTING _____3

functioning of eyes and eye muscles, and performing other duties. A discussion of medical specialties is found in the chapter *Healthcare and the Healthcare Team*. For specific information about medical assistant duties within medical specialty practice, refer to the following chapters: *Assisting in Reproductive and Urinary Specialties, Assisting in Pediatrics, Assisting in Geriatrics, Assisting in Other Medical Specialties, and Assisting with Eye and Ear Care.*

Medical Assisting Organizations Lo 1.2

Many organizations guide the profession of medical assisting. These include professional associations such as the American Association of Medical Assistants (AAMA), the American Medical Technologists (AMT), National Healthcareer Association (NHA), and other accrediting and registering organizations. As a future medical assistant, knowledge of these organizations will help you make critical decisions about your career.

Professional associations set high standards for quality and performance in a profession. They define the tasks and functions of an occupation, provide members with the opportunity to communicate and network with one another, as well as offer **continuing education.** Becoming a member of a professional association helps you achieve career goals and furthers the profession of medical assisting. Joining as a student is encouraged, and some associations even offer discounted rates to students for a specified amount of time after graduation.

American Association of Medical Assistants

The idea for a national association of medical assistants-later to be called the **American Association of Medical Assistants** (AAMA)-was suggested at the 1955 annual state convention of the Kansas Medical Assistants Society. The next year, at an American Medical Association (AMA) meeting, the AAMA was officially created. In 1978, the US Department of Health, Education, and Welfare declared medical assisting as an allied health profession.

The AAMA works to raise standards of medical assisting to a more professional level. It is the only professional association devoted exclusively to the medical assisting profession. The AAMA provides the CMA (AAMA) credential.

The certifying board of the AAMA performs an occupational analysis of the medical assisting profession approximately every five years to ensure the currency and quality of the CMA (AAMA) Certification Exam and the CMA (AAMA) credential. This occupational analysis does not define the legal scope of medical assisting practice. Responsibilities of medical assistants vary from state to state.

Professional Support for CMAs (AAMA) When you become a member of the AAMA, you will have a large support group of active medical assistants. Membership benefits include:

- Professional publications, such as CMA Today.
- A large variety of educational opportunities, such as chapter-sponsored seminars and workshops about the latest administrative, clinical, and management topics.
- Group insurance.

- Legal information.
- Local, state, and national activities that include professional networking and multiple continuing education opportunities.
- Legislative monitoring to protect your right to practice as a medical assistant.
- Access to the website at http://www.aama-ntl.org.

American Medical Technologists (AMT)

American Medical Technologists (AMT) is a nonprofit certification agency and professional membership association representing over 45,000 individuals in allied healthcare. Established in 1939, AMT began a program to register medical assistants at accredited schools in the early 1970s. The AMT provides allied health professionals with professional certification services and membership programs to enhance their professional and personal growth. Upon certification, individuals automatically become members of AMT and start to receive benefits. The AMT provides many certifications, including the Registered Medical Assistant (RMA) (AMT), Medical Administrative Specialist (CMAS) (AMT), Patient Care Technician (PCT), Medical Laboratory Assistant (CMLA), and the Phlebotomy Technician (RPT) credential.

Professional Support for AMT credentials (RMA, CMAS, PCT, CMLA, and RPT)

- Professional publications.
- Continuing education.
- Membership in the AMT Institute for Education.
- Group insurance programs-liability, health, and life.
- State chapter activities.
- Legal representation in health legislative matters.
- Annual meetings and educational seminars.
- Student membership.
- Access to the website at http://www.americanmedtech.org.

National Healthcareer Association (NHA)

The National Healthcareer Association (NHA) (http://www. nhanow.com) was established in 1989 as an information resource and network for today's active healthcare professionals. NHA provides certification and continuing education services for healthcare professionals and curriculum development for educational institutions. It offers a variety of certification exams, including Clinical Medical Assistant (CCMA), Medical Administrative Assistant (CMAA), Billing and Coding Specialist (CBCS), and Electronic Health Records Specialist (CEHRS).

Some of the NHA's programs and services include:

- Certification development and implementation.
- Continuing education curriculum development and implementation.
- Program development for unions, hospitals, and schools.
- Educational, career advancement, and networking services for members.
- Registry of certified professionals.



Healthcare educators working in their various fields of study develop the National Healthcare Association certification exams. The NHA is a member of the National Organization of Competency Assurance (NOCA).

Other Medical Assistant Organizations

Other organizations assist potential and current medical assisting professionals. These include the National Center for Competency Testing (NCCT) and the National Association for Health Professionals (NAHP).

The National Center for Competency Testing (NCCT) (https://www.ncctinc.com) is an independent agency that certifies the validity of competency and knowledge of the medical profession through examination. Medical assistants and medical office assistants receive the designation of National Certified Medical Assistant (NCMA) and National Certified Medical Office Assistant (NCMOA) after passing the certification examination. The NCCT avoids any allegiance to a specific organization or association.

The National Association for Health Professionals (NAHP) (http://www.nahpusa.com) offers multiple credentials for healthcare professionals. The organization, which has been in existence for 30 years, prides itself in making the process of obtaining a credential an accessible, affordable, and obtainable goal for individuals who wish to show commitment to their chosen profession. Having multiple credentials with one agency makes maintaining continuing education easier for practicing healthcare professionals. The NAHP offers many credentials, including the Nationally Registered Certified Medical Assistant (NRCMA), the Nationally Registered Certified Coding Specialist (NRCCS), and the Nationally Registered Certified Administrative Health Assistant (NRCAHA).

With the growth of the medical assisting field, new organizations have developed to serve professionals. For example, the American Medical Certification Association (AMCA), founded in 2010, provides certification for clinical and/or administrative medical assistants. The American Registry of Medical Assistants (ARMA) is also one of many national certifying organizations that certify/register medical assistants. Prospective medical assistants should be knowledgeable about the agency they will use to obtain their medical assistant credential.



FIGURE 1-1 Wearing one of these pins indicates you have obtained a credential in medical assisting. Medical assistants registered by the American Medical Technologists must past the RMA exam to be certified and can wear the pin on the left. Members of the American Association of Medical Assistants who pass the CMA exam wear the pin on the right. Total Care Programming, Inc.

Medical Assistant Credentials LO 1.3

Certification is confirmation by an organization that an individual is qualified to perform a job to professional standards. **Registration**, on the other hand, does not guarantee an individual's competence. Instead, registration is the granting of a title or license by a board that gives permission to practice in a chosen profession. Once credentialed, you earn the right to wear a pin that is obtained through the credentialing organization (Figure 1-1).

Medical assistant credentials such as certification and registration are not always required to practice as a medical assistant. However, employers today are aggressively recruiting medical assistants who are credentialed in their field. As discussed in the Medical Assisting Organizations, many credentials are available for medical assisting by various organizations. Small physician practices are being consolidated or merged into larger providers of healthcare, such as hospitals, to decrease operating expenses. Human resource directors of these larger organizations place great importance on professional credentials for their employees. Hiring credentialed medical assistants may lessen the likelihood of a legal challenge. Common administrative and clinical certifications are provided in Table 1-2.

TABLE 1-2 Medical Assisting Credentials					
Type of Certification	Certification Title	Certifying Organization			
Administrative and Clinical	Certified Medical Assistant (CMA)	AAMA			
Administrative and Clinical	Registered Medical Assistant (RMA) AMT	AMT			
Administrative and Clinical	National Certified Medical Assistant (NCMA)	NCCT			
Administrative and Clinical	Nationally Registered Certified Medical Assistant (NRCMA)	NAHP			
Administrative and Clinical	Certified Clinical Medical Assistant (CCMA)	NHA			
Administrative	Medical Administrative Assistant (CMAA)	NHA			
Administrative	Certified Medical Assistant Specialist (CMAS)	AMT			
Administrative	National Certified Medical Office Assistant (NCMOA)	NCCT			
Administrative	Nationally Registered Certified Administrative Health Assistant (NRCAHA)	NAHP			

5

State and Federal Regulations

Certain provisions of the Occupational Safety and Health Administration (OSHA) and the Clinical Laboratory Improvement Amendments of 1988 (CLIA '88) are making mandatory credentialing for medical assistants a logical step in the hiring process. OSHA and CLIA '88 regulate healthcare but presently do not require that medical assistants be credentialed. However, various components of these statutes can be met by demonstrating that medical assistants are certified. For example, some physician offices perform moderately complex laboratory testing onsite. The medical assistant can perform moderately complex tests if they have the appropriate training and skills.

AAMA Credential

The **Certified Medical Assistant (CMA)** credential is awarded by the Certifying Board of the AAMA. The AAMA's certification examination evaluates mastery of medical assisting competencies based on the Occupational Analysis of the CMA (AAMA), which is available at http://www.aama-ntl. org/resources/library/OA.pdf. The National Board of Medical Examiners (NBME) also provides technical assistance in developing the tests.

Students who have completed medical assisting programs accredited by CAAHEP and ABHES are eligible to take the certification examination. The AAMA offers the Candidate's Guide to the Certification Examination to help applicants prepare for the examination. This guide explains the test format and test-taking strategies. It also includes a sample examination with answers and information about study references. Some schools also have incorporated test preparation reviews into their programs.

The CMA (AAMA) examination is a computerized test that may be taken any time at a designated testing site in your area. You may search the Internet for an application and test review materials. Once you have successfully passed the CMA (AAMA) examination, you have earned the right to add that credential to your name, such as Miguel A. Perez, CMA (AAMA).

CMAs (AAMA) must recertify the credential every 5 years. To be recertified as a CMA (AAMA), 60 contact hours must be accumulated during the 5-year period: 10 in the administrative area, 10 in the clinical area, and 10 in the general area, with 30 additional hours in any of the three categories. In addition, 30 of these contact hours must be from an approved AAMA program. The AAMA also requires you to hold a current CPR card.

The recertification mandate requires you to learn about new medical developments through education courses or participation in an examination. Hundreds of continuing education courses are sponsored by local, state, and national AAMA groups. The AAMA also offers self-study courses through its continuing education department.

AMT Credentials

The American Medical Technologists (AMT) organization credentials certified medical assistants as **Registered Medical**

Assistants (RMA) or Medical Administrative Specialists (CMAS). This section focuses on the RMA credential; you can find more about the CMAS credential on the AMT website at https://ameri-canmedtech.org/Medical-Administrative-Specialist.

Requirements for the RMA (AMT) credential include:

- Graduation from a medical assistant program that is accredited by ABHES or CAAHEP or is accredited by a regional accrediting commission, by a national accrediting organization approved by the US Department of Education, or by a formal medical services training program of the US Armed Forces.
- Alternatively, employment in the medical assisting profession for a minimum of 5 years, no more than 2 years of which may have been as an instructor in the postsecondary medical assistant program.
- Passing the AMT examination for RMA (AMT) certification.

RMAs (AMT) must accumulate 30 contact hours for continuing education units (CEUs) every 3 years if they were certified after 2006. Once a medical assistant has passed the AMT exam, they have earned the right to add RMA (AMT) to their name: Kaylyn R. Haddix, RMA (AMT).

Credentialing Examinations

Credentialing examinations are rigorous. Participation in an accredited program will help you learn what you need to know. Each certification examination is based on a specific content outline created by the certifying organization. Most organizations provide their content outline as well as practice examinations for potential medical assistants to prepare. You should research the Internet to gain additional information regarding any of these certifications. See Procedure 1-1, Obtaining Certification/Registration Information Through the Internet.

Training Programs

LO 1.4

The role of the medical assistant is dynamic and wide-ranging. Changes in healthcare have expanded the expectations for medical assistants. The knowledge base of the modern medical assistant includes:

- Administrative and clinical skills.
- Patient insurance product knowledge (specific to the workers' geographic locations).
- Use of technology for electronic health records and telehealth.
- Compliance with healthcare-regulating organizations.
- Exceptional customer service.
- Practice management.
- Current patient treatments and education.

The medical assisting profession requires a commitment to self-directed, lifelong learning. Healthcare is changing rapidly and a medical assistant who can adapt to change and is continually learning will be in high demand. Formal programs in medical assisting are offered in a variety of educational settings, including vocational-technical high schools, postsecondary vocational schools, community and junior colleges, and 4-year colleges and universities. Vocational school programs usually last 9 months to 1 year and award a certificate or diploma. Community and junior college programs are usually 2-year associate's degree programs. Training can be obtained through traditional classroom as well as online settings.

An accredited medical assisting program is competency based; this means that standards are set by an accrediting body for skill and proficiency in administrative and clinical tasks. It is the educational institution's duty to ensure that medical assisting students learn all medical assisting competencies and that evidence is clearly documented for each student. Periodic evaluations are performed by the accrediting agencies to ensure the effectiveness of the program.

Program Accreditation

Accreditation is the process by which programs are officially authorized. The US Department of Education recognizes two national entities that accredit medical assisting educational programs:

- Commission on Accreditation of Allied Health Education Programs (CAAHEP). CAAHEP works directly with the Medical Assisting Educational Review Board (MAERB) of Medical Assistants Endowments to ensure that all accredited schools provide a competency-based education. CAA-HEP accredits medical assisting programs in both public and private postsecondary institutions throughout the United States that prepare individuals for entry into the medical assisting profession.
- Accrediting Bureau of Health Education Schools (ABHES). ABHES accredits private postsecondary institutions and programs that prepare individuals for entry into the medical assisting profession.

Accredited programs must cover the following topics:

- Anatomy and physiology
- Medical terminology
- Medical law and ethics
- Psychology
- Oral, written, and electronic communications
- Laboratory procedures
- Clinical and administrative procedures

Medical assisting programs also must include a practicum (externship) or work experience. This applied training is for a specified length of time in an ambulatory care setting, such as a physician's office, hospital, or other healthcare facility. Additionally, the AAMA lists its minimum standards for accredited programs. This list of standards ensures that all personnel administrators and faculty alike—are qualified to perform their jobs. These standards also ensure that financial and physical resources are available at accredited programs.

Graduation from an accredited program helps your career in three ways. First, it shows that you have completed a program

that meets nationally accepted standards. Second, it provides recognition of your education by professional peers. Third, it makes you eligible for registration or certification. Students who graduate from a CAAHEP- or ABHES-accredited medical assisting program are eligible to take the CMA (AAMA) or RMA (AMT) immediately.

Work Experience

Your practicum (externship) or work experience is mandatory in accredited schools. The length of your experience will vary, depending on your particular program, so familiarize yourself with the program requirements as soon as possible. Because this is a required part of the program, no matter how good your grades are in class, if the work experience is not completed, you will not graduate.

Your practicum (externship) or work experience is an extension of your classroom learning experience. You will apply skills learned in the classroom in an actual medical office or other healthcare facility. You also earn the right to include this applied training experience on your résumé under job experience, as long as you title it as "Medical Assistant Practicum, Externship, or Work Experience." The *Preparing for the World of Work* chapter will further explain your practical work experience.

Professional Development Lo 1.5

Professional development refers to skills and knowledge attained for both personal development and career advancement. During your training, you should strive to improve your knowledge and skills. This will help you transition into your first job. You also can gain valuable knowledge and skills through volunteering prior to or in addition to work experience obtained as a student.

Once you have entered the world of work as a medical assistant, you will want to continue to develop in your profession. You can do this through additional training, **cross-training**, and other forms of continuing education.

Volunteer Programs

Volunteering is a rewarding experience. Before you even begin or during your medical assisting program, you can gain experience in a healthcare profession through volunteer work. As a volunteer, you will get hands-on training and learn what it is like to assist patients who are ill, disabled, or frightened.

You may volunteer as an aide in a hospital, clinic, nursing home, or doctor's office, or as a typist or filing clerk in a medical office or medical record room. Some visiting nurse associations and hospices (homelike medical settings that provide medical care and emotional support to terminally ill patients and their families) also offer volunteer opportunities. These experiences may help you decide if you want to pursue a career as a medical assistant.

The American Red Cross also offers volunteer opportunities. The Red Cross needs volunteers for its disaster relief programs locally, statewide, nationally, and abroad. As part of a disaster relief team at the site of a hurricane, tornado, storm,

INTRODUCTION TO MEDICAL ASSISTING

flood, earthquake, or fire, volunteers learn first-aid and emergency triage skills. Red Cross volunteers gain valuable work experience that may help them obtain a job.

Because volunteers are not paid, it is usually easy to find work opportunities. Just because you are not paid for volunteer work, however, does not mean the experience is not useful for meeting your career goals.

Include information about any volunteer work on your **résumé**—a document that summarizes your employment and educational history. Be sure to note specific duties, responsibilities, and skills you developed during the volunteer experience. Refer to the *Preparing for the World of Work* chapter for examples of résumés.

Scope of Practice

Professional development includes knowing your **scope of practice** and working within it. Medical assistants are not "licensed" healthcare professionals, and most often work under a licensed healthcare provider, such as a nurse practitioner or physician. Licensed healthcare professionals may delegate certain duties to a medical assistant, provided they have had the appropriate training through an accredited medical assisting program or through on-the-job training provided by the medical facility or physician.

Questions often arise regarding the kinds of duties a medical assistant can perform. There is no universal answer to these questions. There is no single national definition of a medical assistant's scope of practice, so the medical assistant must research the state in which they work to learn about the scope of practice. You can find this information online by entering "medical assistant scope of practice" and the name of your state in any major search engine. See Procedure 1-2, Locating Your State's Legal Scope of Practice. In general, a medical assistant may not perform procedures for which they were not educated or trained. Examples of procedures medical assistants may not perform include administering intravenous medications (without advanced training), diagnosing patients or informing patients of a diagnosis, and giving any advice to a patient unless permitted by a facility's standard policies and procedures. The AAMA and AMT are good resources to assist you in your research. The AAMA Occupational Analysis is also a helpful reference source that identifies the procedures that medical assistants are educated to perform.

Do not confuse the terms *scope of practice* and *standard of care.* A medical assistant's scope of practice is the set of procedures that can be performed and the actions that can be taken under the terms of their professional license and training. **Standard of care** is a legal term that refers to the care that would ordinarily be provided by an average, prudent health-care provider in a given situation.

Networking

Networking is building alliances—socially and professionally. It starts long before your job search. By attending professional association meetings, conferences, or other functions, medical assistants generate opportunities for employment and personal and professional growth. Networking, through continuing education conferences throughout your career, keeps the doors open to employment advancement.

Multiskilled Healthcare Professionals

Medical assistants are trained to be multiskilled. Hospitals and healthcare practices are embracing the idea of a **multiskilled healthcare professional (MSHP).** A medical assistant who is a cross-trained team member is able to handle many different duties. If you are multiskilled, you will have an advantage when job hunting. Employers are eager to hire multiskilled medical assistants and may even create positions for them. Cross-training to become a MSHP helps the healthcare facility and your career.

Reducing Healthcare Costs By hiring multiskilled healthcare professionals, healthcare organizations can reduce personnel costs. MSHPs can perform the functions of two or more people, so they are cost-effective employees and are in high demand.

Expanding Your Career Opportunities Career opportunities are vast if you are self-motivated and willing to learn new skills. Following are some examples of positions for medical assistants with additional experience and certifications:

- Medical office manager
- Medical biller and coder
- Medical assisting instructor (with a specified amount of experience and education)
- ECG technician
- Sterilization technician
- Patient care technician
- Phlebotomy technician

You can gain multiskill training by showing initiative and a willingness to learn every aspect of the medical facility in which you are working. When you begin working in a medical facility, establish goals regarding your career path and discuss them with your immediate supervisor. Indicate to your supervisor that you would like cross-training in every aspect of the medical facility. Begin in the department in which you are currently working and branch out to other departments once you master the skills needed for your current position. This will demonstrate a commitment to your profession and a strong work ethic. Cross-training is a valuable marketing tool to include on your résumé.

WORK // DOC

Procedure Goal: To obtain information from the Internet regarding professional credentialing

OSHA Guidelines: This procedure does not involve exposure to blood, body fluids, or tissue.

Materials: Computer with Internet access and printer

Method:

- Open your Internet browser and use a search engine to search for the credential you would like to pursue—for example, Certified Medical Assistant or Registered Medical Assistant. If you are unsure of the credential you would like to pursue, you may just want to search for "Medical Assisting Credentials."
- Select the site for the credential you are pursuing. Avoid sponsored links. These links are paid for and typically will not take you to the site of a credentialing organization. For example, to navigate to the home page:
 - For the CMA (AAMA) credential, enter the site http:// www.aama-ntl.org.



• For the RMA (AMT) or CMAS (AMT) credential, enter the site http://www.americanmedtech.org.



American Medical Technologists

- For other selected credentials navigate to the selected organization.
 - National Association for Health Professionals (NAHP): http://nahpusa.com/

- National Center for Competency Testing (NCCT): https://www.ncctinc.com/
- National Healthcareer Association (NHA): http:// www.nhanow.com/
- **3.** Determine the steps you must take to obtain the selected credential. You will need to navigate to the information about the requirements for eligibility, certification standards, and the examination outline.
- 4. Print or write down the qualifications you must obtain. **RATIONALE:** *Maintaining a record of needed qualifications will be a reference as you pursue your chosen credential.*
- 5. Once you have met the qualifications, you will need to apply for the examination or certification. Download the application and the application instructions for the RMA (AMT) or the CMAS (AMT) or the candidate application and handbook for the CMA (AAMA).
- 6. To view or print these instructions, you may need to download Adobe Reader. You can click on a link to download Adobe Reader after you click on the "Apply Online" link for AMT or "Apply for the Exam" for AAMA.
- Before or after you apply for the examination, you will need to prepare for the examination. Select the link "Study for the Exam" on the AAMA site or the "Prepare for Exam" link under the "Get Certified" drop-down menu on the AMT site.
- **8.** Prepare for the exam by reviewing the content outline, obtaining additional study resources, or taking a practice exam online.
- **9.** Print or save downloaded information in a file folder on your desktop labeled "Credentials" or another name you can recognize. To print, click the printer icon found at the bottom of the web page or click the printer icon in your browser.
- **10.** Return to the appropriate site if you have additional questions. For the CMA (AAMA) site, you may want to check the "FAQs on CMA (AAMA) Certification" link. On the AMT site for RMA or CMAS, find the link "Take the Exam" and download the FAQs regarding the testing process.
- **11.** Any questions you have that are not addressed on the sites can be e-mailed to the organizations.

PROCEDURE 1-2 Locating Your State's Legal Scope of Practice

WORK // DOC

9

Procedure Goal: To obtain information from the Internet regarding your state's scope of practice

OSHA Guidelines: This procedure does not involve exposure to blood, body fluids, or tissue.

Materials: Computer with Internet access and materials to document and report your findings through a written or oral report

Method:

- Open your Internet browser and use a search engine to find your state's Scope of Practice for Medical Assistants. Consider a search such as ["your state name" scope of practice for medical assistants].
- **2.** Verify that the Internet site is credible and save the site address(es) as a reference.

INTRODUCTION TO MEDICAL ASSISTING