



**First Coast  
Technical College**  
*Your Future Comes First*

**2021-22**

**Medical Assisting Program  
Training Contract Agreement**

## **CHARACTER COUNTS**

You have chosen one of the most trusted professions in the world. With this honor also comes an incredible responsibility to conduct yourself in a manner that is deserving of this trust. This responsibility does not begin at graduation; it begins upon admission into your program.

### **Trustworthiness:**

Be honest.

Be reliable— do what you say you'll do.

Have the courage to do the right thing.

Build a good reputation. Be loyal— stand by your family, friends, school, and country.

Don't deceive, cheat or steal.

### **Respect:**

Treat others with respect; follow the Golden Rule.

Be tolerant of differences. Use good manners.

Be considerate of the feelings of others.

Don't threaten, hit or hurt anyone, or use bad language.

Deal peacefully with anger, insults and disagreements.

### **Responsibility:**

Do what you are supposed to do.

Persevere: keep on trying!

Always do your best.

Use self-control.

Be self-disciplined.

Think before you act— consider the consequences.

Be accountable for your choices.

### **Fairness:**

Play by the rules.

Take turns and share.

Be open-minded; listen to others.

Don't take advantage of others.

Don't blame others.

### **Caring:**

Be kind.

Be compassionate and show you care.

Express gratitude.

Forgive others.

Help people in need.

### **Citizenship:**

Do your share to make your school and community better.

Cooperate.

Stay informed, vote.

Be a good neighbor.

Obey laws and rules.

Respect authority.

Protect the environment.

## **STUDENT LEARNING OUTCOMES**

The student learning outcomes below provide the framework that directs and informs the medical assisting curriculum at First Coast Technical College. The importance of each outcome is introduced, emphasized, and reinforced in an organized and thoughtful manner.

### **1. COMPETENCE**

The student will demonstrate competence through the delivery of safe medical assisting care that is based on sound judgment, current evidence and the utilization of up-to-date technology.

### **2. COMPASSION**

The student will show compassion through advocacy and respect for the values, needs and preferences of individual clients and families.

### **3. CONFIDENCE**

The student will develop confidence through inquiry, interdisciplinary collaboration and clinical reasoning in simulated learning environments and varied medical care practice settings to ensure the provision of quality care.

### **4. CONSCIENCE**

The student will apply legal and ethical principles based on professional medical assistant standards while recognizing personal limitations, exhibiting integrity, and valuing the contributions of others.

### **5. COMMITMENT**

The student will demonstrate commitment to excellence through professionalism, leadership, ownership of one's practice, and dedication to lifelong learning.

### **6. COMMUNICATION**

The student will utilize effective forms of communication including networking strategies and informatics to continuously improve the quality and safety of medical care for clients, families and communities.

### **7. CULTURE**

The student will integrate culturally sensitive and competent medical care through a holistic approach that is client-centered and practiced within the context of family and community.

## **PROFESSIONAL RESPONSIBILITY**

The purpose of the Medical Assisting Program is to enable you to be a competent Medical Assistant. Upon completion of the program, the student will be eligible to sit for the (Certified Clinical Medical Assistant (CCMA) through the National Healthcare Association.

I understand that as a medical assisting student, I am expected to conduct myself in a professional manner while in the classroom, lab and extern sites.

When a student's conduct seriously affects the College's operation or property in a negative way, the student will be disciplined according to FCTC regulations up to and including dismissal from the College and/or payment for damaged property.

## **INSURANCE**

FCTC does not carry personal health insurance on students. Students are personally responsible for their own accident/health insurance. All students enrolled in the medical assisting program purchase medical liability (malpractice) insurance. This cost is included in the program fees.

## **DISCIPLINE**

Student conduct and discipline is based on School Board rules, which adhere to Florida Law, Chapter 1006.07(2) F.S., Code of Student Conduct. Students are required to read and understand responsibilities as stated in the FCTC Student Handbook.

## **DECLARATION OF INTENT**

First Coast Technical College's mission is to provide career, technical, & adult education to meet the changing needs of students, businesses and the workforce. We expect that our students will attain certification and/or licensure appropriate for their field. However, there are times when students enroll in our career courses for reasons other than certification and/or employment. In that case, students must declare his or her intent to enroll for personal reasons, waiving their commitment to attain certification and/or licensure.

## **DRUG SCREENING and BACKGROUND CHECKS**

I understand before I can participate in clinical training, I must have a Level I background check by the Florida Department of Law Enforcement (FDLE). I understand that information received regarding a FDLE offense will be handled on an individual basis. I understand an offense of a serious nature could result in the following:

- unable to attend the required clinical training for the program
- not be permitted to take the Certification Examination which may be required for employment
- not be employed after completion of the program.

I understand that prior to clinical training, a urine drug screen will be required. I understand that I will be contacted by the medical review officer should the test results indicate a positive reading for illegal substances or prescription drugs. If the substance is illegal or a drug for which I do not have a valid prescription, I will be immediately dismissed from the Medical Assisting program.

## **SUBSTANCE ABUSE POLICY**

For the purposes of this program, substance abuse is defined as: the abuse or illegal use of alcohol and/or drugs, and being under the influence of such, while participating in any school sanctioned activity.

The Health Careers Department faculty actively opposes the ingestion of any substance that interferes with healthy development and function in the physical, psychological, social, occupational and spiritual areas.

First Coast Technical College Policies and Florida State laws governing Medical Assistants both consider substance abuse to be a health and safety problem. Substance abuse has significant negative effects on safety and performance. Patients/clients are at risk for serious injury if a student is under the influence of a substance which inhibits performance. **THE SAFETY OF THE PATIENTS/CLIENTS IS OUR FIRST PRIORITY.**

### **Expectations**

All student medical assistants shall abstain from alcohol and/or drug use within eight hours prior to their practicum and class periods. This includes the use of illegal drugs, the illegal use of prescription drugs, and the abuse or illegal use of alcohol. Attending classes and/or practicum while under the influence of alcohol and/or drugs will be cause for dismissal from the program.

If a student takes a prescribed medication, he/she must inform his/her instructor. If the medication causes the student to be sleepy or slow in response, he/she may be sent home. An individual on medications that dull the senses is not considered a safe practitioner. **THE SAFETY OF THE PATIENTS/CLIENTS IS OUR FIRST PRIORITY.**

**ALL/ANY REPORTS OF SUBSTANCE ABUSE IN ANY SCHOOL-SANCTIONED ACTIVITY WILL BE ACTED UPON IMMEDIATELY.** (See "Procedure" below).

If a student medical assistant should be convicted of a drug-related felony, he/she will be dismissed from the medical assisting program. Health care facilities will not allow students who have been convicted of a drug-related felony to practice in the clinical area.

The Health Careers Department will assist and support any student who wishes to obtain help for drug-related problems.

### **Reporting Suspected Substance Abuse**

A staff member of the agency who suspects a student of being under the influence of alcohol and/or any other drug should immediately report this observation to the agency supervisor and the FCTC instructor.

A student who suspects a peer of being under the influence of alcohol and/or any other drug should immediately report this observation to the FCTC instructor.

### **Procedure**

An instructor who has received a report of suspected abuse or who suspects a student of being under the influence of alcohol and/or any other drug will immediately remove the student from direct patient care. The instructor will then confer with another instructor or agency staff member to assess, and if possible, confirm, the evidence of suspected alcohol or drug use.

Should **two agree** that there is observable evidence of substance abuse, the following will occur:

- The student will submit to urine and blood drug testing immediately. *Failure to submit to the testing will result in immediate dismissal from the program.*
- It will be the student's responsibility to arrange for transportation to the testing facility. Students suspected of substance abuse may not transport themselves.
- If the test results are positive or not immediately available, the student will not be allowed to drive and/or leave the testing facility alone. It is the student's responsibility to arrange for safe transportation home.
- The student will be suspended from all program activities until the Health Career Specialist or Medical Assisting Instructor receives a copy of the test results.
- If the results for alcohol and/or drugs are positive the student will be immediately dismissed from the program.
- All expenses incurred due to mandatory testing and/or required transportation shall be the responsibility of the student.

### **Readmission**

Students dismissed for alcohol/drug problems must provide documentation of substance abuse treatment prior to readmission to the Medical Assisting Program. In addition, the student will be required to adhere to a plan, developed in conjunction with a counselor, for ongoing evaluation of compliance to the substance abuse policy.

### **CELL PHONES**

Cell phones are not permitted on your person or in your possession in the extern/lab and/or classroom sites – unless specifically instructed by instructor for educational purposes.

Inappropriate use will result in loss of points on student's employability grade. Emergency calls should be directed to the program office at (904) 547-3471.

### **STUDENT TRANSPORTATION**

I agree to provide my own transportation to and from classroom, extern sites, and other activities.

### **PROGRAM PROGRESS**

I agree to progress consistently toward meeting the objectives necessary to attain my goal. I will become knowledgeable in theory and skill performance realizing my responsibilities as a health care professional. I understand that failure to progress may lead to dismissal from the program.

I understand and agree that if, for any reason, a facility refuses to allow me to gain clinical experience at the facility; I will be referred for an Administrative Review and possible dismissal from the program.

## **GROUNDS FOR ADMINISTRATIVE REVIEW**

- Refusal of clinical/practicum placement or assignment
- Refusal of the agency, institution and or instructor to provide clinical/classroom experience or placement due to, but not limited to the following:
  - Poor, unsafe extern/clinical/lab/practicum performance
  - Previous employment performance at specified clinical/extern/practicum site
  - Disrespectful attitude/aggressive behavior towards institution, staff, classmates/peers or patients
  - Non-compliance with policies, procedures or regulations of institution
  - Any breach of ethical or legal standards
  - Behavior or manner deemed unsafe to patient contact caused by the effects of any substance
  - Results of drug screen or criminal background check.

## **DRESS CODE – Classroom/Clinical/Practicum**

I agree to dress in accordance with accepted standards in the health care profession, including health and safety requirements, as outlined below.

- Designated uniforms must be clean and neat. The medical assisting students will wear the designated FCTC uniform. All students must wear white leather, vinyl, polymer flat shoes with white socks, which must be clean. Students may wear the designated lab coat. Uniforms should be washed daily. All aspects of the uniform must be in good repair. Underclothes may not protrude from the uniform.
- Proper hygiene is required regarding bathing, using deodorant and maintaining oral hygiene.
- Tattoos must always be covered.
- False eyelashes of any kind are not permitted.
- Smoking odor of any kind is not allowed in uniform.
- All visible piercings must be removed.
- No perfumes or colognes are permitted.
- Make-up is worn modestly.
- Hair must be worn off the collar, neatly arranged, off the face, shoulders and out of the eyes. No extreme style may be worn in the clinical/practicum area. Color must be natural. Hair may not be higher than two inches above the scalp at top of head. Hair clips / ties should be modest and the color of student's hair.
- Natural fingernails must be short and clean with no polish. No acrylic, artificial or SNS nails are permitted.
  - A wristwatch with a second hand is required. No other jewelry is to be worn.
  - Current FCTC picture identification badge is always required.

I understand and agree I will not be permitted to participate in classroom, laboratory, clinical or practicum activities unless wearing the designated uniform. This is an employability skill requirement and is essential to successfully complete the Medical Assisting program.

## **CONFIDENTIALITY POLICY**

In accordance with HIPAA (Health Insurance Portability and Accountability Act) guidelines - the faculty of the FCTC program of MA have adopted the following policy:

1. Except within the structured, teaching-learning situation, all aspects of the client's medically related information and/or data shall not be discussed with any other person or persons under any circumstances.
2. Proper identification as stated in the FCTC Student Dress Code is required before reading charts/records.
3. Under no circumstances is the student to photocopy or record in any way any part of the patient/client's charts/records.
4. Under no circumstances is the student to remove from the Affiliate premises any reports or records pertaining to any patient/client.
5. Students may become privileged to Affiliate information which is considered private.
6. Students who divulge Affiliate or patient/client information acquired during courses may be immediately dismissed from the program.
7. Failure to honor this basic ethical right of the patient/client or Affiliate may result in the immediate dismissal of the student from the Medical Assisting Program.

Student recognizes that the disclosure of confidential information may give rise to irreparable injury to the patient/client or owner of such information, and that accordingly, the patient/client or owner of such information may seek such LEGAL remedies against the student.

**NOTE: Any violation of the Confidentiality Policy – Student Agreement may result in disciplinary action including, but not limited to, the possibility of dismissal.**

## **SAFETY**

- I agree to follow all safety rules and regulations as outlined by the instructors.
- I agree not to use equipment until I have been instructed in the proper method of operation.
- I agree to demonstrate my ability to operate, use, and maintain all equipment correctly and safely under the supervision of an instructor, laboratory assistant, or designated student.



## Examples of Unsafe Practices

1. Unorganized work.
2. Not being familiar with patient history and record prior to care.
3. Guessing at answers.
4. Refusing to ask for help.
5. Discussing patients with outsiders.
6. Refusing to accept constructive criticism.
7. Not following the accepted procedure.
8. Concealing errors and/or making excuses for errors.
9. Not using proper disposal facilities for contaminated dressings, syringes, etc.
10. Using poor judgment in measures concerning patient safety.
11. Not notifying proper personnel of changes in patient status.
12. Failure to assist any patients not assigned when they need/call for help.
13. Not completing assignments, and not notifying the proper person.
14. Leaving a patient who requires student's presence.
15. Taking shortcuts to the detriment of patients.
16. Attempting a procedure without understanding the what, how and why of the procedure.
17. Failure to report off to primary resource professional.

## STUDENT HEALTH REQUIREMENTS

Each student must provide evidence of immunity against the following diseases. These requirements must be completed and results on file at **FCTC BEFORE** going to any clinical site. Please refer to the Health Careers department office or your instructor for further clarification of allowable evidence of immunity.

Failure of compliance will result in student inability to attend extern rotation and dismissal from the course and/or program.

- Physical exam – physical exam to remain current throughout MA program

Immunizations – student must have proof of immunity or proof of immunization for:

- Measles – documentation of two immunizations
- Mumps – documentation of two immunizations
- Rubella – documentation of two immunizations
- Tdap – within 10 years
- Varicella – documentation of two immunizations, titer or documentation of disease from physician - 28day requirement between doses
- TB/PPD – within 1 year must remain current while in the program or CXR within 3 years
- Hep B - – documentation of three immunizations
- CPR – Current Healthcare Provider must stay current through program
- Background Check – completed with application
- Drug Screening – See Precheck sheet for instructions
- COVID precautions – see student handbook – according to CDC guidelines and facility request

For the protection of you and your patients/clients, inform your instructor immediately if you have any injury/illness/procedure while in the program. A letter from your physician documenting any physical limitations and granting permission to continue in the program is required. A decision will be made by the Health Career Specialist in collaboration with the student, due to any safety issues of the student and health care clients/patients, as to whether the student may continue in the program.

I understand I must be able to perform the physical tasks expected of a medical assistant in the extern area. If, for any reason, I am unable to physically perform these tasks, a maximum of three weeks' alternative experience is allowed. At that time, if I cannot physically perform the tasks, I will have to withdraw from the program until cleared by a physician.

For the protection of you and your unborn child, inform your instructor immediately if you learn or suspect that you are pregnant. A letter from your physician documenting any physical limitations and granting permission to continue in the program is required. A decision will be made by the Health Career Specialist in collaboration with the student, due to safety issues of the pregnant student and health care clients/patients, as to whether the student may continue in the program.

### **PROFESSIONAL COMMITMENT**

As an FCTC Medical Assisting student, I recognize that a commitment to the following will improve my chances for success in the program:

- Give each course and the entire program my **BEST** effort
- Be in class, clinic and/or extern at the designated time for the designated hours
- Always be prepared prior to class, clinic and/or extern ie. Reading, Studying, Assignments and/or homework, workbooks, study guides.
- **It is recommended you devote a minimum 30 minutes of study time for each hour of lecture, this time is above the time required for preparing for class/clinic and/or homework**
- Keep an open mind
- Develop problem solving skills, critical and creative thinking skills in the clinic and classroom setting
- Complete all homework/assignments for both clinic and class, done on time and in proper format
- Understand that a certain amount of stress is normal, you must use appropriate coping mechanisms in stressful situations
- Seek assistance from instructors/advisors as needed for clarification and issues (personal or academic) that could impact your education
- Complete assigned remediation tools in the skills lab or online

### **COURSE PROGRESSION**

Attendance performance and remediation performance factor into the course grade to develop appropriate work ethics. As is expected in the workplace, when it is necessary to be absent due to illness or emergency situations, all students are to email the instructor at least 1 hour before class begins if absent or tardy. Students are required to email the "practicum coordinator and the assigned site" before the assigned arrival time if absent or tardy. Not following protocol is a "No Call / No Show" and is cause for disciplinary action after the first offense.

Students are required to submit timesheets for externship experience weekly, failure to timely submit can result in loss of financial aid.

| OCP | Course Number | Course Title                       | Course Hours |
|-----|---------------|------------------------------------|--------------|
| A   | HSC0003       | Basic Health Care Worker           | 90 hrs.      |
| B   | MEA0002       | Introduction to Medical Assisting  | 250 hrs.     |
|     | MEA0501       | Medical Office Procedures          | 75 hrs.      |
| C   | MEA0521       | Phlebotomist, MA                   | 75 hrs.      |
| D   | MEA0543       | EKG Aide, MA                       | 75 hrs.      |
| E   | MEA0581       | Clinical Assisting                 | 230 hrs.     |
|     | MEA0530       | Pharmacology for Medical Assisting | 90 hrs.      |
|     | MEA0573       | Laboratory Procedures              | 125 hrs.     |
|     | MEA0506       | Administrative Office Procedures   | 90 hrs.      |
|     | MEA0942       | Practicum Experience               | 200 hrs.     |

I understand if I am late for the extern site, I may be relieved for the day because patients must be cared for in a timely manner and the doctor is expecting you to assist with managing the previously booked schedule.

Any breach (tardy, absent, uniform, shoes, no ID etc.) in employability skills will result in a 5-point deduction per breach this will affect the Employability Skills grade percentage which will affect the overall course grade.

I understand emailing prior to class does not result in an “excused” absence, but rather assists in evaluating the student’s progress in professionalism and employability skills.

### EVALUATION

Course evaluation will include the following:

- Class participation and professionalism.
- Quizzes over material presented in class, workbook, and reading assignments.
- Tests are given upon completion of a course topic, or end of a unit.
- Workbook pages to be completed before class and before a unit test can be taken.

### ASSIGNMENTS

All assignments are considered individual work unless otherwise specified by instructor. All assignments must be completed on time and according to the specified criteria; late assignments will result in a reduction of the assignment grade. You are responsible for all reading assignments in course texts, and the workbook manual, as well as the content of the lecture sessions themselves. Since assignments will be used during the class sessions, **it is essential that materials be read and carefully studied prior to class.** Class sessions will be used to clarify concepts answer questions and provide additional information on the subject being studied.

## THEORY TESTING

I understand and agree to meet the following criteria regarding written exams.

- Maintain a minimum, overall average score of 75% in the Medical Assisting Program.
- Participate in tutoring/remediation as assigned by instructor.
- If absent for a scheduled exam, an alternate form of the exam will be taken on the next designated exam day and 5 points deducted. Make up exams not taken within one week after the student returns to class will have five additional points deducted. There will be **no exceptions** to this requirement.
- Arrangements must be made by the student with the instructor to take make-up exams. or to retake exams after class on the designated day.
- If all tests for a course are not completed before the end of that course, the student will receive an unsatisfactory rating for that course and will not proceed to the next course. (Please note this may jeopardize certain funding arrangements.)
- Students are required to take scheduled exams if they return to class on the scheduled date. Make up exams are to be taken on scheduled dates at the instructor's discretion. Make up exams can be in any format.
- Cheating is unacceptable and will result in an immediate Administrative review. Penalties will include suspension or immediate dismissal.
- Late assignments will result in a deduction of 5 points off total assignment grade.

## GRADING SCALE AND COURSE PROGRESSION

The Medical Assisting Program will use the following scale in all theory, attendance, laboratory, externship and employability evaluations:

### Course Grade

|    |  |     |
|----|--|-----|
| 1. | Exams/Homework/Quizzes/Projects          | 35% |
|    | a. Average per course must be >75%,      |     |
| 2. | Clinical/Practicum                       | 35% |
| 3. | Affect/Employability Skills (attendance) | 15% |
| 4. | Course Final                             | 15% |

The grading scale that is used in all medical courses is as follows:

|     |         |     |        |     |       |
|-----|---------|-----|--------|-----|-------|
| A = | 90-100% | B = | 80-89% |     |       |
| C = | 70-79%  | D = | 60-69% | F = | 0-60% |

**A minimum, overall average of 75% is required to pass the Medical Assisting Program**

## **READMISSION TO LIMITED ACCESS HEALTH PROGRAM**

This procedure applies to students who fail to successfully complete a course in the Medical Assisting Program. The process for readmission to a limited-access health program depends upon the course the student is requesting to repeat.

Students who do not pass a program course must request to repeat the course by submitting an email to the Career Specialist requesting re-entry.

- If the request is approved, students will be allowed to enroll in the next available course, on a space available basis.
- Students must meet all program and graduation requirements in effect at the time of their readmission. In addition, students approved to repeat a course will be required to demonstrate retention of essential prerequisite knowledge and skills before being allowed to re-enter the didactic and clinical sequence of courses.
- Students will be notified by the Health Careers office of the next available start date.
- Students will have no more than two years to re-enter and complete the program requirements. Students, who are unable to re-enter and complete the graduation requirements within the two-year allowance, must reapply as a new admission to the program.
- Students will be notified by the Health Careers Office of the next available start date.
- Students will have no more than two years to re-enter and complete the program requirements. Students, who are unable to re-enter and complete the graduation requirements within the 2-year allowance, must reapply as a new admission to the program.

## **ATTENDANCE POLICY**

See FCTC Student Handbook

## **EMPLOYABILITY SKILLS**

I understand and agree that employability skills will be evaluated during each course for both classroom, lab and extern, with on-going feedback.

I understand any breach (tardy, absent, uniform, shoes, no ID etc.) in employability skills will result in a five-point deduction per breach this will affect the Affect/Employability Skills grade percentage which will affect the overall course grade. The only exception is safety breaches; they will result in a deduction of 25 points.

I understand and agree that I must achieve an acceptable or outstanding rating on all factors essential to success in the Medical Assisting program, as indicated on the final student competency transcript.

I understand and agree that if I fail to demonstrate competence or acceptable improvement in any one or combination of the employability skills, there will be an initial review of my progress by the instructor, and if necessary, an administrative review.

I understand that I am a member of the medical assisting team, while at the preceptor sites, even though I am a student. I must always be ready to help other team members without being prodded to do so.

I understand that at the extern site, I will be assigned to assist with patients in a clinical setting. Leaving the patient, for **any** reason without reporting appropriately to the supervising authority, is considered **abandonment of patients**. Abandonment of patients is cause for immediate disciplinary action and possible dismissal from the Medical Assisting program. Dismissal from the program will be decided by, an instructor, health careers specialist, and FCTC Vice-Principal, during an administrative review.

I understand and agree an immediate review by the health careers specialist may be scheduled any time I demonstrate an inability to maintain acceptable employability skills, including professional communication and behavior, deemed essential in performance as a Medical Assisting student.

I understand NO food or drink is allowed in the classrooms. **ONLY** bottled water is permissible.

### **EXTERNSHIP PERFORMANCE**

Externships will be assigned by the instructor. Externship progress is evaluated with two sets of criteria: Employability Skills and Clinical Skill Competencies.

**Employability Skills:** I understand and agree I must achieve a minimum of a B within the following ratings on all competencies.

**3 = Above Average**

**2 = Acceptable**

**1 = Below Average**

**Clinical/Practicum Competencies:** I understand and agree I must achieve a minimum of a 3 or above in Clinical/practicum Competencies.

|   |           |   |   |
|---|-----------|---|---|
| A | 90 - 100% | = | 3 - Skilled, can work independently               |
| B | 80 - 89%  | = | 2 - Moderately skilled, needs limited supervision |
| F | 0 - 60%   | = | 1 - No skills in this area                        |

NO = Site did not offer training in this area (please inform instructor if this occurs)

***I understand practicum rotations will be assigned by the instructor/career specialist and must be unpaid and may require travel.***

To complete the program a grade of B or better must be obtained in the area of employability skills and an acceptable grade must be achieved in clinical/lab skills.

I understand and agree that if I do not achieve an acceptable rating or above in clinical performance, there will be an initial review of my progress by the instructor, and if necessary, an Administrative Review.

### **WORK BASED ACTIVITIES**

In order to participate in real world experiences, apply problem-solving skills; develop positive work attitudes, and good customer service skills, students will participate in supervised hands-on learning opportunities.

**OBJECTIVE:**

Exhibit an understanding of the principles, theories and skills required to be a Medical Assistant.

**EXPERIENCE:**

Students will attend clinical and practicum to develop skills in a work-based setting to provide experience to build marketability and grooming for employment in the Medical Assisting profession.

**COMPETENCY:**

Students will perform competencies prior to externship to be evaluated for readiness for externship by the instructor. After successfully completing this program, the student will be able to perform the following:

- Demonstrate knowledge of the healthcare delivery system and health occupations.
- Demonstrate the ability to communicate and use interpersonal skills effectively.
- Demonstrate legal and ethical responsibilities.
- Demonstrate an understanding of and apply wellness and disease concepts.
- Recognize and practice safety and security procedures.
- Recognize and respond to emergency situations.
- Recognize and practice infection control procedures.
- Demonstrate an understanding of information technology applications in healthcare.
- Demonstrate employability skills.
- Demonstrate knowledge of blood borne diseases, including HIV/AIDS.
- Apply basic math and science skills.
- Demonstrate communication skills used by medical assistants.
- Demonstrate knowledge of legal and ethical responsibilities for medical assistants.
- Demonstrate an understanding of anatomy and physiology concepts in both illness and wellness states.
- Demonstrate basic clerical/medical office duties.
- Demonstrate accepted professional, communication, and interpersonal skills.
- Discuss phlebotomy in relation to the health care setting.
- Identify the anatomic structure and function of body systems in relation to services performed by a phlebotomist.
- Recognize and identify collection reagents supplies, equipment and interfering chemical substances.
- Demonstrate skills and knowledge necessary to perform phlebotomy.
- Practice infection control following standard precautions.
- Practice accepted procedures of transporting, accessioning and processing specimens.
- Practice quality assurance and safety.
- Describe the role of a medical assistant with intravenous therapy in oncology and dialysis.
- Describe the cardiovascular system.
- Identify legal and ethical responsibilities of an EKG aide.
- Perform patient care techniques in the health care facility.
- Demonstrate knowledge of, apply and use medical instrumentation modalities.
- Demonstrate basic office examination procedures.
- Demonstrate knowledge of the fundamentals of microbial control and use aseptic techniques.
- Demonstrate minor treatments.

Demonstrate knowledge of basic diagnostic medical assisting procedures. Demonstrate basic X-Ray procedures.

Demonstrate knowledge of pharmaceutical principles and administer medications.

Perform CLIA-waived diagnostic clinical laboratory procedures.

Demonstrate awareness of clinical microscopy techniques and procedures that may be performed in CLIA-exempt laboratories under physician supervision.

Demonstrate knowledge of emergency preparedness and protective practices.

Perform administrative office duties.

Perform administrative and general skills.

Perform clinical and general skills.

Display professional work habits integral to medical assisting.

## **EVALUATIONS:**

Students are evaluated by preceptors in the extern site and by the instructor for program completion.

## **OCCUPATIONAL EXPOSURE TO POTENTIALLY INFECTIOUS SECRETIONS**

Medical Assistants must balance occupational risks with providing quality care to all clients/patients. As front-line providers of care, medical assistants have an increased risk of exposure to potentially infected blood and body fluids.

The medical assisting program accepts the Center for Disease Control recommendations that all health care workers should strictly adhere to Standard Precautions as the most effective means of preventing exposure and transmission of potentially infectious secretions.

Standard Precautions are intended to prevent parenteral, mucous membranes and non-intact skin exposures to health care workers to blood-borne pathogens.

Under Standard Precautions, blood and certain body fluids of all clients/patients are considered potentially infectious for human immune deficiency virus (HIV), hepatitis B virus (HBV), hepatitis C virus (HCV), and other blood-borne pathogens.

The risk of nosocomial transmission of HIV, HBV, HCV, and other blood-borne pathogens can be minimized if health care workers use the following general guidelines.

I understand and agree to adhere to the following communicable disease policies established for all health Careers students in contact with potentially communicable patients while performing in clinical areas.

To standardize the delivery of health care to all clients and minimize the risk of transmission of communicable disease, all health careers students will:

1. Follow instructional guidelines for basic skills in isolation techniques, injections, and handling of body fluids in the skills laboratories before actual clinical practice of these skills on a client.
2. Follow classroom instruction related to communicable disease treatment, modes of transmission, and prevention.



3. Follow hospital, nursinghome, health care facilities procedures and specific policies for prevention of blood and body fluid disease transmission.
4. Utilize the following blood and body fluid precautions:
  - Gloves are worn when handling blood and body fluids, mucous membranes, nonintact skin of clients, or when touching items or surfaces soiled with blood or body fluids (including performing venipuncture and other vascular access procedures).
  - Hands are washed immediately before gloving and again after removing gloves.
  - Hands are washed immediately and thoroughly when contaminated with blood or body fluids.
  - Wash hands between clients and gloves are changed after each client.
  - Gowns, masks, and protective eyewear are worn for any procedures likely to result in or prone to splashing of blood or body fluids.
  - Used needles are not recapped, bent or broken, removed from disposable syringes, or in any way manipulated by hand. Disposable needles, syringes, scalpel blades, and other sharp items are placed in puncture-resistant containers for disposal.
  - Soiled linen is handled as little as possible with minimum agitation. All soiled linen is bagged and tied closed at the location where used or according to facility policy.
  - Gloves are worn for post-delivery care until all blood and amniotic fluid have been cleaned from an infant's skin.
  - Upon death, state law requires that a tag be affixed to the body of anyone known to have a blood-borne pathogen.
  - Specimens of blood and body fluids are placed in a leak-proof container. When collecting the specimen, care is taken to prevent contamination of the outside of the container. All containers are placed in a zip-lock bag.
  - Mouthpieces and resuscitation bags are used in place of mouth-to-mouth resuscitation.
  - Students with exudative lesions or weeping dermatitis should refrain from all direct client care until condition resolves.
5. A hospital and school incident report are to be completed if the student is exposed to blood or body fluids through the following means.
  - Needle stick or cut

- Mucous membrane (splash to the eyes or mouth)
- Cutaneous (through skin which is chapped, abraded or has dermatitis)

Follow-up screening will be recommended according to hospital/school guidelines. **The student will pay all cost of follow-up and screening.**

6. Follow the infection control guidelines of the obstetrical units in the clinical facilities regarding staphylococcal and herpes infections. These policies state that no person may work in the area if they or a family member living in the same household has a staphylococcal or herpes infection (the most common diseases include impetigo, chickenpox, shingles, cold sores, and venereal herpes).
7. Any student, who has any temporary or permanent condition that may put them or their clients/patients at risk, has the responsibility to notify their practicum instructor.

## **MANAGEMENT OF OCCUPATIONAL EXPOSURE**

### **1. Provide immediate care to the exposed site:**

- Wash wounds and skin with soap and water.
- Flush mucous membranes with water.

### **2. Initiate report:**

- Immediately report the incident to the FCTC Instructor.
- Complete an agency “incident report”.
- Complete the FCTC accident form. (must be submitted on-line).
- Instructor to submit all forms to FCTC Health Coordinator for appropriate submission and follow-up.

### **3. Follow-up screening:**

- Level of risk will be recommended according to agency/school guidelines.
- The student will pay all costs of follow-up and screening.

## First Coast Technical College

### INFORMED CONSENT AND WAIVER OF LIABILITY

I, \_\_\_\_\_, understand that as a clinical student, I may be exposed to environmental hazards and infectious diseases including, but not limited to Tuberculosis, Hepatitis B and HIV (AIDS) while in a clinical facility.

Neither First Coast Technical College nor any of the clinical facilities used for clinical practice assumes liability if a student is injured on the campus or in the clinical facility/practicum during training unless the injury is a direct result of negligence by the college or clinical facility.

I understand I am responsible for the cost of health care for any personal injury I may suffer during my education. I understand that I must obtain and maintain private health insurance while enrolled in the Health Careers program.

I willingly consent to participate in all laboratory treatments and practice sessions (including invasive procedures) as a human subject (i.e., patient) for educational purposes at FCTC. These treatments may be rendered by faculty or fellow students. It is my responsibility to disclose any information or medical issues that will limit or bar me from the above participation to the Career Specialist and/or Instructor in a timely manner.

I willingly consent to participate in simulated patient interviews in both lab and lecture demonstrations.

I willingly consent to give the Program Specialist or FCTC designee permission to give my student ID and other personal information to the FCTC clinical/practicum affiliations and licensure/registration authorities for appropriate reasons.

I willingly consent to give the Health Careers Department permission to release drug testing results, or criminal background information to clinic sites that may require such information as terms of their contract with FCTC for clinical/practicum affiliations.

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**First Coast Technical College**

**CONFIDENTIALITY STATEMENT**

A Patient's Bill of Rights (1975)

The patient has a right to every consideration of privacy concerning his/her own medical care program, case discussion, consultation, examination, and treatment are confidential and should be conducted discreetly. Those not directly involved in his/her care must have the permission of the patient/client to be present. The patient has the right to expect that all communications and records pertaining to his/her care should be treated as confidential.

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I am aware that as a student of First Coast Technical College Health Careers Program, I have access to patient information that will remain confidential. I agree to respect and protect the confidentiality of all patient information. I understand that if I violate any HIPAA regulations, I will be dismissed from the program.

I authorize the FCTC Medical Assisting Career Specialist to release information regarding my performance while enrolled in the program.

\_\_\_\_\_  
Printed Name of Student

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date

# First Coast Technical College

## DECLARATION OF INTENT

First Coast Technical College's mission is to provide career, technical and adult education to meet the changing needs of students, businesses and the workforce. We expect that our students will attain certification and/or licensure appropriate for their field. However, there are times when students enroll in our career courses for reasons other than certification and/or employment. In that case, students must declare his or her intent to enroll for personal reasons, waiving their commitment to attain certification and/or licensure.

If you **DO NOT PLAN** to work in this field:

Please complete the information below, indicating your reason for enrolling in this program:

- I enrolled for personal enrichment.
- I plan to work as volunteer or as a hobby.
- I plan to continue my education at another college or university.

Student Name: \_\_\_\_\_  
Print Please

Student's Signature: \_\_\_\_\_

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

If you **DO PLAN** to work in this field:

Please complete the information below, indicating your reason for enrolling in this program:

- I enrolled to attain certification and become employed.

Student Name: \_\_\_\_\_  
Print Please

Student's Signature: \_\_\_\_\_

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

**I HAVE RECEIVED A COPY OF THE FCTC MEDICAL ASSISTING STUDENT HANDBOOK AND I AM PERSONALLY RESPONSIBLE FOR THE INFORMATION CONTAINED THEREIN.**

I, (student name) \_\_\_\_\_, have carefully read and studied the Student Handbook and Training Contract Agreement and by my signature, agree to abide by the policies and regulations with the understanding this is a condition of acceptance and continuance in the program.

I agree \_\_\_\_\_, I do not agree \_\_\_\_\_ to FCTC releasing school attendance, grades, competency information, health and/or background information to a potential employer, federal, state or local government agency.

I authorize \_\_\_\_\_, I do not authorize \_\_\_\_\_ emergency medical care.

I agree \_\_\_\_\_, I do not agree \_\_\_\_\_ that FCTC may use my photo, likeness, and or name in school publications or periodicals for such purposes as advertising and media releases.

I understand \_\_\_\_\_, I do not understand \_\_\_\_\_ that the clinical schedule will include longer hours and travel depending on the course in which the clinical rotation occurs.

I understand \_\_\_\_\_, I do not understand \_\_\_\_\_ that lab remediation experience outside of classroom time may be assigned in the lab.

I willingly \_\_\_\_\_, I do not willingly \_\_\_\_\_ consent to participate in all laboratory treatments and practice sessions as a human subject (i.e., patient) for educational purposes at First Coast Technical College. These treatments may be rendered by faculty or by fellow students. It is my responsibility to disclose any information or medical issues that will limit or bar me from the above participation to the Program Specialist or Instructor in a timely manner.

\_\_\_\_\_  
Health Career Specialist Signature

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

**PARENT/GUARDIAN RESPONSIBILITY** (required if student is under 18 years of age).

I, as the parent/guardian, have carefully read and studied the Training Contract Agreement and by my signature, agree to abide by the policies and regulations with the understanding this is a condition of acceptance and continuance in the program.

\_\_\_\_\_  
Parent/Guardian's Signature (required if under 18 years of age)

\_\_\_\_\_  
Date

**This signature page will be kept in each student's SIS file.**