

Putnam Career & Technical Center
School of Medical Assisting

Clinical Handbook

2022-2023



300 Roosevelt Blvd. • PO Box 640
Eleanor, WV 25070
(304) 586-3494 • Fax (304) 586-4467
www.pctc.edu

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Clinical Overview

Clinical rotations are a crucial portion of the learning experience at Putnam Career and Technical Center, and you will be spending many hours in the clinical setting. Our school has contracts with multiple facilities in the area and as a student of the Medical Assisting Program, you are held to the expectations stated within these contracts. Local, state and federal regulations and accrediting agencies also drive the policies and procedures for much of the program.

This handbook, along with the Medical Assisting Student Handbook, provides the framework for clinical expectations and your responsibilities as a student. Each student will be held accountable for all information stated here and new information as it arises. Failure to comply with these standards will result in probationary status and may lead to dismissal from the class or program. Therefore, it is vital that each student familiarize himself/herself with this information.

Expectations

Students will be held to the highest standards of professionalism while in the clinical setting. While you are in uniform or representing the Medical Assisting program in any way, you will be expected to maintain dignity, integrity and behave in a manner that is flattering to the program, the profession and yourself as a future medical assistant. While professionalism is expected at all times and covers all areas, specific examples under key topics are outlined in this handbook.

Communication - general expectations include being dignified and courteous at all times, assisting peers when appropriate and resolving conflicts in a professional manner. Avoid loud talking/laughing- inappropriate conversations will not be tolerated.

1. With clients:
 - a. Always knock on the door of a patient room before entering.
 - b. Address a patient by surname with the proper (Mr., Mrs., Miss, etc.) prefix unless the age of an individual makes this out of place or the patient requests.
 - c. Maintain a cheerful, friendly, empathetic but professional manner with patients and do not discuss:
 - Your social activities
 - Your assigned duties
 - Other personnel's or patient's health
 - Your personal health
 - Your opinions of the facility or facility staff.
2. With faculty and clinical site staff:
 - a. Will be treated with courtesy, respect and cooperation.
 - b. Will be called by surname, unless otherwise requested.
 - c. When constructive correction is given, students will understand this is part of the process to ensure that unsafe behaviors are not practiced.
3. With Facility Visitors:
 - a. Each student while on duty is to conduct oneself as a host/hostess to visitors.
 - b. In each case, she/he should treat the individual courteously and try to aid in as possible.

Confidentiality

4. Students are responsible for maintaining a standard of strict confidentiality according to HIPAA laws, facility policies and clinical guidelines. Do not remove any paperwork from the facility with patient identifiers. This is a breach of confidentiality.
5. Discussion of facility staff, patients or events during the rotation and other potentially confidential information should be used for learning purposes only and carried out in private areas.
6. Utilizing social media such as Facebook, Twitter etc., to convey confidential information or discussing clinical events will result in disciplinary actions and may result in failure of the course and/or removal from the program.

General Clinical Expectations

1. Students are responsible for understanding the clinical handbook, facility policies, scope of practice issues and any information received from faculty or facility staff.
2. Students will be assigned to patients and are responsible to report information to both clinical site staff members and faculty.
3. Though faculty and staff members are present, students are ultimately responsible for their actions and are expected to utilize critical thinking in all situations.
4. Specific site expectations and policies will be given prior to each rotation. Students are expected to attend all orientations, including computer, equipment training and any other orientations the clinical facilities or faculty deem necessary.
5. Students will park in assigned areas. Tickets, or towing may result from parking in other areas and may result in loss of clinical privileges.
6. Smoking is not allowed at clinical sites. This includes parking areas.
7. Students are expected to report **any** incidents to the clinical site staff and faculty immediately.
8. Cell phones are NOT allowed in the clinical area. Please leave your cell phone in your car. If public transportation is used, please turn off your cell.
9. Students may not take physician orders, including by telephone, verbal or in other manner.
10. Students are responsible for understanding what procedures they may perform and for direct instructions received from faculty or staff. Students are expected to ask for clarification of any instructions they are unsure of.
11. Students may not have personal visitors at the clinical setting.

Dress and Hygiene

Equipment

Students are expected to have basic equipment with them at all rotations: a watch with a second hand, stethoscope, black ink pens, black sharpie, and a pocket-sized notebook. Faculty may request that students have other items for specific clinical rotations.

Uniform

1. Students not dressed in proper clinical attire will be sent home and counted as absent. Uniforms are expected to be of the proper fit, in good repair and free from wrinkles, odors and visible dirt.
2. Lab jacket is to be worn to and when leaving floor or facility.
3. Male students must wear a plain black undershirt under the scrub top.
4. White, black or gray closed toe shoes are the expected footwear.
5. ID badges will be visible and worn at all times, at the neck or chest level.

Personal Appearance

1. Fingernails must be trimmed short. No artificial nails are allowed.
2. Makeup should be natural looking with no extreme looks. Heavy perfumes/colognes are not permitted.
3. Tattoos must be covered.
4. Hair and body must be clean and free from odors.
5. Hair is to be neatly groomed.
6. No extravagant hair accessories, colors or extreme hairstyles will be allowed.
7. Facial hair must be neatly trimmed, close to the face.
8. Appropriate jewelry only- one pair of earrings that are studs (no hoops or dangling items), a watch and one ring
9. The instructors and clinical site staff reserve the right to send a student home based on any violation of the dress/hygiene standards and the student will be counted absent.

Attendance

1. The importance of clinical attendance cannot be stressed enough. Attendance during clinical rotations will be monitored closely.
2. Students are expected to arrive to the clinical site leaving enough time to find parking and meet at the designated area.
3. Tardiness will be tracked, and a student may be sent home if they arrive late.
4. When assigned to an area, a student is expected to be there the entire scheduled time. Students must notify the facility staff and faculty prior to leaving the assigned area for any reason, including breaks. Leaving early will also be tracked.
5. Leaving the site/area without permission or notifying the instructor and staff correlates to patient abandonment and will not be tolerated.
6. If a student will be absent, they must call the assigned faculty member. Failure to do so is referred to as a “No call No show” and carries heavy penalties (dismissal from program).
7. You may not miss any Clinical days unless you have a valid doctor’s excuse.
8. Refer to the Medical Assisting Student Handbook, Student Attendance section.

Health, Safety, Mental and Physical Requirements

Students may face hazards from caustic chemicals, radiation and infectious diseases such as hepatitis. They are subject to back injuries when moving patients and to shock from electrical equipment. They often must deal with the heavy workloads, both physically and mentally. The patients they care for may be confused, irrational, agitated or uncooperative. Mental capacity and emotional control must be maintained in the high stress field of medical assisting. Students will be required to meet certain criteria in order to participate in clinical experiences for the safety of themselves and others:

A. Immunizations/CPR/Background Checks

1. Immunizations/CPR/background checks must be current and remain so during the **entire** program.
2. Students will be removed from the clinical setting should **any** immunization/CPR expire and not allowed to return until corrected. This may result in removal from the course and/or class.

B. Illness/Injury/Surgery/Restrictions

1. Students are expected to use common sense and professional judgment with regards to attending clinical while ill. If a student is found in the clinical setting with an infectious disease, this is considered Unsafe Behavior (see specific section).
2. If a student is out more than 3 consecutive days due to illness, a note from a physician clearing the student for clinical is required (see Student Medical release form in appendix).
3. Students that have an injury or surgery are required to provide physician documentation stating they are cleared for clinical, have no restrictions and are able to perform duties described under item E-Physical Requirements. An example of this clearance can be found in the Appendix.
4. Any condition that requires special accommodation will need to be addressed with the Medical Assisting Instructor. A plan will be developed with the student and other faculty/staff as needed.
5. While pregnancy does not by any means exclude a student from attending clinical, it can in some instances limit the patient assignments (i.e.- taking care of patient receiving chemotherapy, certain diseases, etc.). While not required, it is recommended that students inform the instructor of pregnancy in order to make appropriate assignments. Time missed due to pregnancy will be treated as any other absence.
6. If a student becomes unable to perform the basic requirements for clinical or makes statements related to their inability to do so, documentation of full clearance may be requested. The student will be prohibited from attending clinical until such time that full clearance is provided. There is no "light duty" designation in the program (see physical requirements at item E).

C. Safety

Safety encompasses all aspects of health care, from utilizing patient identifiers and wiping up spills to verifying orders and following procedure. In general, though, when one is speaking of safety, the following topics are addressed.

1. *Sharps*
Sharp instruments are essential tools for providing quality health care. Exposure to these "sharps" is a fact of life for most health care workers. Exposure may include hypodermic needles, IV needles, razors, scalpels, or broken glass. Injuries from sharps are often called needle-stick injuries, puncture wounds or needle punctures. These injuries are a major cause of infection and may have serious results. The greatest risk is from Hepatitis B. However, there are other infections to be concerned about such as HIV, staphylococcus, or herpes simplex. Each student is responsible for knowing the 'sharps' policies for each facility and for practicing safety measures at all times.
2. *Moving/Lifting and Use of Equipment*
Students will practice proper body mechanics and patient transfer techniques at all times. Students will ensure that electrical equipment is properly grounded, in good repair and will follow policies of use at all times. Students will attend training, practice in the skills lab or request assistance when using unfamiliar equipment.
3. *PPE/Specialty safety equipment*
Students will utilize appropriate PPE (personal protective equipment) and any required special safety equipment at all times.

4. *Emergency Procedures*

All facilities have policies and procedures for fire, natural and man-made situations/disasters, codes and other occurrences. Students will be oriented to each facility and is responsible for understanding these procedures.

5. *Accidents/Incidents*

Students are expected to report any accident or incident immediately to the instructor. Students may be asked to complete reports based on the nature of the accident/incident. If a student is injured while at clinical, most facilities will provide treatment, but it is important to understand that the treatment will be at the student's cost.

D. Mental/Emotional Requirements

Students will be expected to demonstrate skills in communication, critical thinking/clinical reasoning problem solving, decision making and conflict resolution. Students will maintain professionalism even in stressful situations. At no time will profanity, angry outbursts, malicious gossip or any other unprofessional manner of communication be tolerated. Students must be able to take constructive correction, leave personal problems at home, encounter difficult situations with becoming emotionally involved and maintain focus on clinical priorities at all times.

E. Physical Requirements

Students are frequently required to lift and/or carry objects of 30 pounds or greater. They must transport items heavier than 50 lbs. with the use of carts, dollies or assistance. They must support, lift and move patients of all heights and weights. The work occasionally requires climbing and/or balancing, stooping, kneeling, crouching, reaching, handling, fingering and/or feeling, pushing and pulling. All extremities must be able to perform full range of motion (casts and splints are not allowed). Students must be able to complete an 8-hour shift. There are no "light duty" arrangements that can be made for students (see Restrictions above at item B).

Unsafe Behavior

A student that practices any unsafe behavior will be in jeopardy of failing the rotation and possibly being removed from the class and/or program. Unsafe behavior includes, but is not limited to:

1. Being under the influence of drugs or alcohol.
2. Attending clinical with a possibly communicable infectious process.
3. Performing procedures without training and/or permission of instructor.
4. Performing any invasive procedure/passing medications without instructor present.
5. Failure to use Standard Precautions at all times.
6. Failure to apply basic safety rules.
7. Failing to report an abnormal finding or incident.
8. Failure to follow directions of instructor.
9. Failure to follow the "rights" while administering medications.
10. Practicing skills outside the Scope of Practice for Medical Assistants.
11. Any action or failure to act that would jeopardize client safety.
12. Any blatant violation of school or clinical facility policy.

Medical Assisting Skills Proficiency Checklist

Name: _____ Date: _____

Please select the column that most accurately describes the student's proficiency level and initial beside each item evaluated.

KEY: 1 Performs proficiently and independently

2 Some Experience (Assistance Required) or Classroom Training (Never Performed)

3 No Training or Experience

	1	2	3		1	2	3
General Clinical Skills				OB/GYN			
Vital Signs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<i>Assisting with Procedures</i>			
Obtaining Medical Histories	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	• Vaginal Exam	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Height/Weight	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	• Colposcopy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Blood Pressure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	• Cryosurgery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Peripheral Pulses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	• IUD Insertion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Draping and Preparing Patients for Exams	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	• D & C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explaining Treatment Procedures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Cultures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dressing Changes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pap Smears	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sterile Technique	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fetal Doppler	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ear Irrigation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fetal Non-Stress Test	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Enemas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Perineal Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medication Administration				Douches	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Oral	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Use of Contraceptives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Injection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pediatrics			
• Optic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Height/Weight	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Suture Removal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Head Circumference	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Autoclave Use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Immunizations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Orthopedics				Lab Skills			
Ace Wraps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Venipuncture	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Casting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Urine Dipstick – Routine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Splinting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Midstream Urine Analysis Collection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crutch Assembly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Clean Catch Urine Analysis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crutchwalking Instruction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Collection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cane Instruction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Urine Drug Screen Collection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Physical Testing				(legalities)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EKG	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Throat Cultures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visual Screens	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wound Cultures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Holter Monitor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Accucheck	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Peak Flow Meter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Front Office			
Pulmonary Function Test	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Scheduling Appointments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Glaucoma Screen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Update & File Medical Records	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Audiometry –Automatic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insurance Forms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Audiometry - Manual	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Correspondence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				Billing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				Bookkeeping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				Word-processing Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				Typing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please provide comments as needed:

Student Printed Name

Student Signature

Date

Supervisor/Coordinator Signature

Date

Sample Student Medical Release Form

Printed Student Name: _____

I, the undersigned health care provider, confirm that the above-named student is fully released for school/clinical duties and has no restrictions that would limit their capacity to provide care in the healthcare setting. I understand that the student is required to meet the following requirements for the clinical setting:

Students are frequently required to lift and/or carry objects of 30 pounds or greater. They must transport items heavier than 50 lbs. with the use of carts, dollies or assistance. They must support, lift and move patients of all heights and weights. The work occasionally requires climbing and/or balancing, stooping, kneeling, crouching, reaching, handling, fingering and/or feeling, pushing and pulling. All extremities must be able to perform full range of motion. Students must be able to complete an 8 hour.

Physician Comments: _____

Physician's Signature _____ Date _____

Please attach official script or work release from the health care provider's office.

By my signature, I assume full responsibility for my health and understand that if I am unable to meet the clinical requirements, the assigned instructor reserves the right to dismiss me from the clinical setting.

Patient/Student Signature _____ Date _____

Student Signature Sheet

I understand that as an adult student, I am responsible for reviewing and understanding these documents. I understand that these policies may change throughout the school year, and I will be made aware of them as they occur.

Printed Name _____

Signature _____

Date _____