

CCMA Digital INB

1st 9 weeks

2nd 9 weeks

3rd 9 weeks

4th 9 weeks

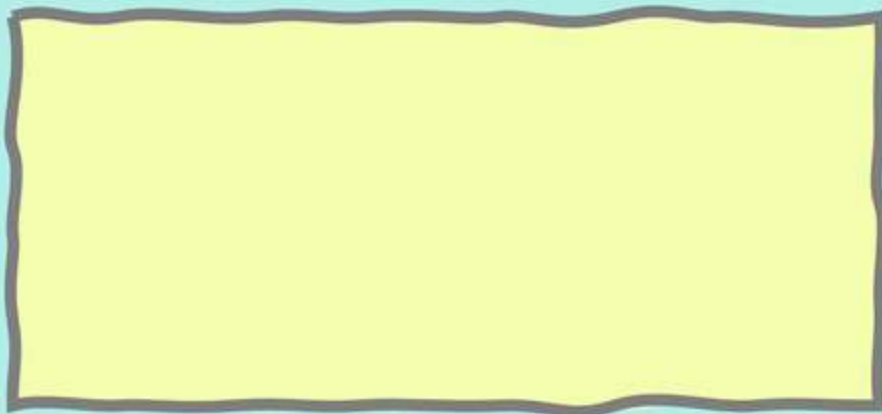


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Acceptable Abbreviations

Abbreviation	Meaning	Abbreviation	Meaning
abd	abdomen	bx	biopsy
ABGs	arterial blood gases	c	with
ac	before meals	C	Celsius
ACLS	advanced cardiac life support	C&S	culture and sensitivity
ad lib	as desired	ca	calcium, cancer
ADHD	attention deficit hyperactivity disorder	CABG	coronary artery bypass graft
AKA	above-the-knee amputation	CAD	coronary artery disease
AMA	against medical advice	CBC	complete blood count
ASA	aspirin	CC	chief complaint
ASAP	as soon as possible	CDC	Center for Disease Control and Prevention
BE	barium enema	cm	centimeter
BKA	below the knee amputation	CNS	central nervous system
BMI	body mass index	CPR	cardiopulmonary resuscitation
BP	blood pressure	c/o	complains of
BPH	benign prostatic hypertrophy	COPD	chronic obstructive pulmonary disease
BPM	beats per minute	csf	cerebrospinal fluid
BRP	bathroom privileges	CT	computerized tomography
BSA	body surface area	cv	cardiovascular
BUN	blood urea nitrogen	CVA	cerebrovascular accident (stroke)

A-C

Acceptable Abbreviations

Abbreviation	Meaning	Abbreviation	Meaning
CXR	chest x-ray	Hct	hematocrit
d	day	HEENT	head, ears, eyes, nose, throat
D&C	dilation and curettage	HF	heart failure
D/C, dc	discharge, discontinue	Hgb	hemoglobin
DM	diabetes mellitus	HIV	human immunodeficiency virus
DNR	do not resuscitate	HPV	human papillomavirus
DOB	date of birth	Htn, HTN	hypertension
DTap	diphtheria, tetanus, and acellular pertussis vaccine	hx	history
dx	diagnosis	I&D	Incision and drainage
ECG, EKG	electrocardiogram	I&O	intake and output
ED	emergency department	ICU	intensive care unit
EEG	electroencephalogram	IUD	intrauterine device
ENT	ear, nose, throat	K	potassium
F	Fahrenheit	KUB	kidneys, ureters, bladder
FBS, FBG	fasting blood sugar/glucose	L	liter
f/u	follow up	lb	pound
FUO	fever of unknown origin	LLE	left lower extremity
fx	fracture	LLL	left lower lobe
GI	gastrointestinal	LLQ	left lower quadrant
GTT	glucose tolerance test	LMP	last menstrual period
GU	genitourinary	LUE	left upper extremity
GYN	gynecology, gynecologist	LUQ	left upper quadrant
h, hr	hour	mg/dL	milligrams per deciliter
H2O	water	MI	myocardial infarction

C-M

Acceptable Abbreviations

Abbreviation	Meaning	Abbreviation	Meaning
mL	milliliters	PMS	premenstrual syndrome
MM	mucous membranes	PO	by mouth
mm Hg	millimeters of mercury	PRN	as needed
MRI	magnetic resonance imaging	PT	physical therapy or therapist
MS	multiple sclerosis	pt	patient
N/V	nausea and vomiting	RA	rheumatoid arthritis
NB	newborn	RBC	red blood cell
NG	nasogastric	RLL	right lower lobe
NKA	no known allergies	RLQ	right lower quadrant
NPO	nothing by mouth	R/O	rule out
NS	normal saline	ROM	range of motion
NSAID	nonsteroidal anti-inflammatory drug	RT	respiratory therapy or therapist
O2	oxygen	RUE	right upper extremity
OB	obstetrics	RUQ	right upper quadrant
OC	oral contraceptives	Rx	prescription
OOB	out of bed	s	without
OP	outpatient	SOB	shortness of breath
OT	occupational therapy or therapist	stat	immediately
OTC	over-the-counter	STI	sexually transmitted infection
PA	posteroanterior, physician assistant	sx	symptoms
pc	after meals	T&A	tonsillectomy and adenoidectomy
PE	physical examination	TB	tuberculosis
PID	pelvic inflammatory disease	TIA	transient ischemic attack

M-T

Acceptable Abbreviations

Abbreviations	Meaning	Abbreviation	Meaning
Tx	treatment	WBC	white blood cell
UA	urinalysis	WNL	within normal limits
URI	upper respiratory infection	YO, y/o	years old
VS	vital signs		

T-Z

Acceptable Abbreviations

Symbol	Meaning
#	pounds, number
↑	increase
↓	decrease
♂	male
♀	female
'	feet
"	inches

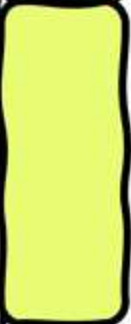
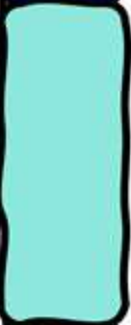
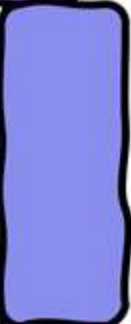
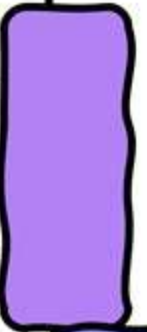
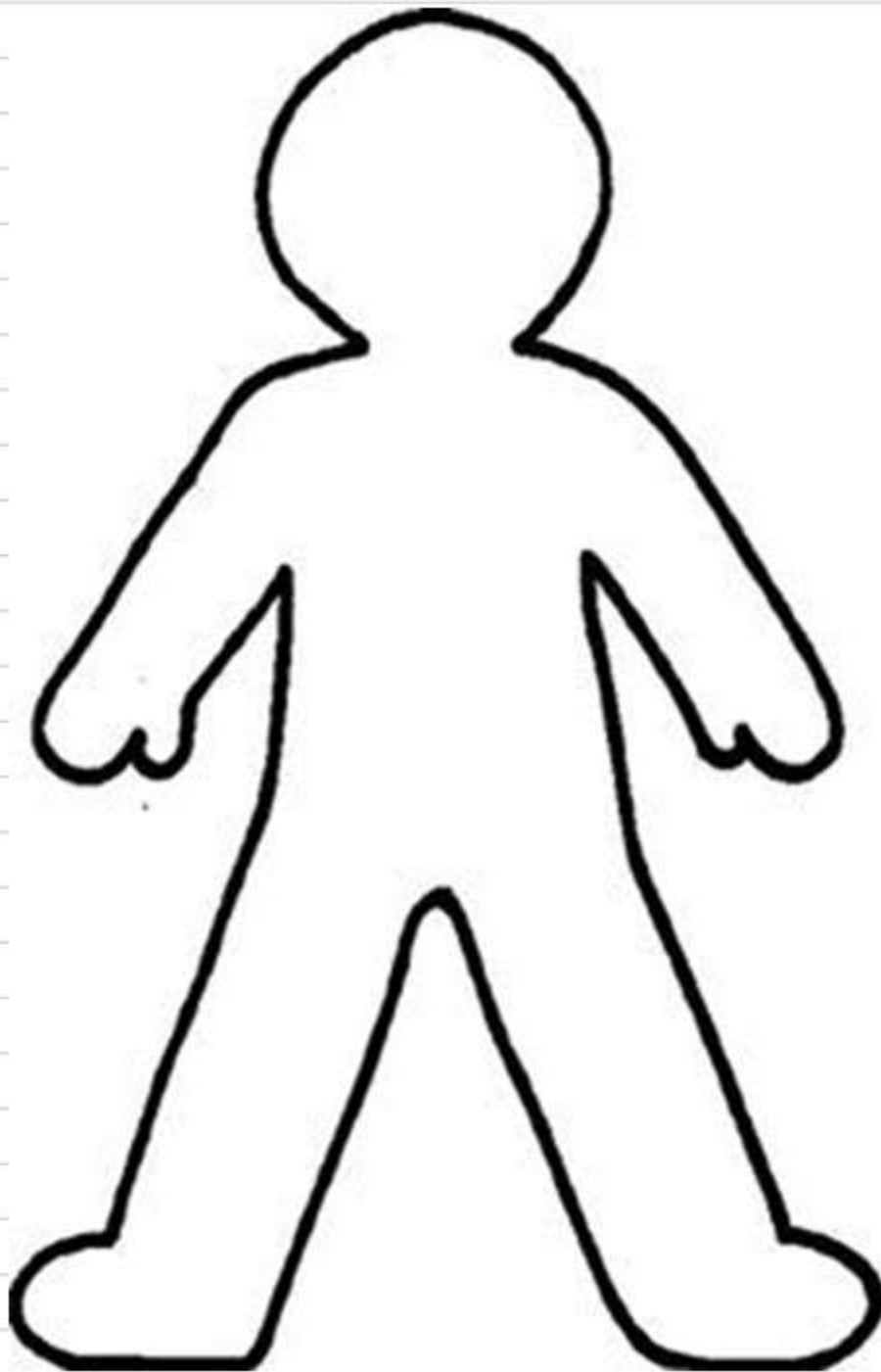
Symbols

DO NOT USE

DO NOT USE

DONT NOT USE	USE		
MS, MSO4	morphine	BT, hs, HS qhs, qn	bedtime or hour of sleep
MgSO4	Magnesium sulfate	SC, SQ, sub q	subcutaneous ly
Abb. med names AZT, KCl, HCT, PTU, HCTZ	Full name of meds	IN	intranasal
nitro	nitroglycerin	IJ	injection
decimal points without a leading zero (.5mg)	smaller units (500 mcg) or a leading zero (0.5mg)	OJ	orange juice
trailing zero (1.2 mg, 100.0g)	no trailing zero (1mg, 100g)	> or <	greater than or less than
u, U, IU	units	@	at
x3d	time 3 days	&, +	and
cc	mL	/	per
apothecary units	metric units	AD, AS, AU	right ear, left ear, both ears
od, O.D, OD	daily or intended time of administration	OD, OS, OU	right eye, left eye, both eyes
q.d., qd, Q.D, QD, q1d, i/d	daily	D/C, dc, d/c	discharge or discontinue
q.o.d., QOD	every other day		
Q6pm, etc	6 p.m. daily or daily at 6 p.m.		
TIW, tiw	3 times weekly		
mg., mL.	mg, mL (no period)		
HS	half-strength, bedtime (hour of sleep)		

Directional Terms/Planes



Med Term Review

Define each of the following abbreviations

1. PRN
2. Rx
3. MI
4. c/o
5. stat
6. ac
7. BM
8. DM
9. WNL
10. Fx
11. HTN
12. N/V
13. UA
14. abd
15. cc
16. R/O
17. I&O
18. CXR
19. sx
20. NPO

Define the following symbols

21. #
22. ‘
23. “
24. ↑
25. ↓

Med Term Review

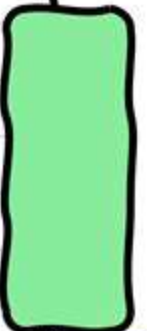
● Write the correct medical term for each of the following definitions on the next slide

1. Inflammation of the joint
2. High blood pressure
3. Slow pulse
4. Surgical excision of a breast
5. Inflammation around the heart
6. Pertaining to both sides
7. Pertaining to difficulty swallowing
8. Condition of death
9. Disease condition of the brain
10. Study of life

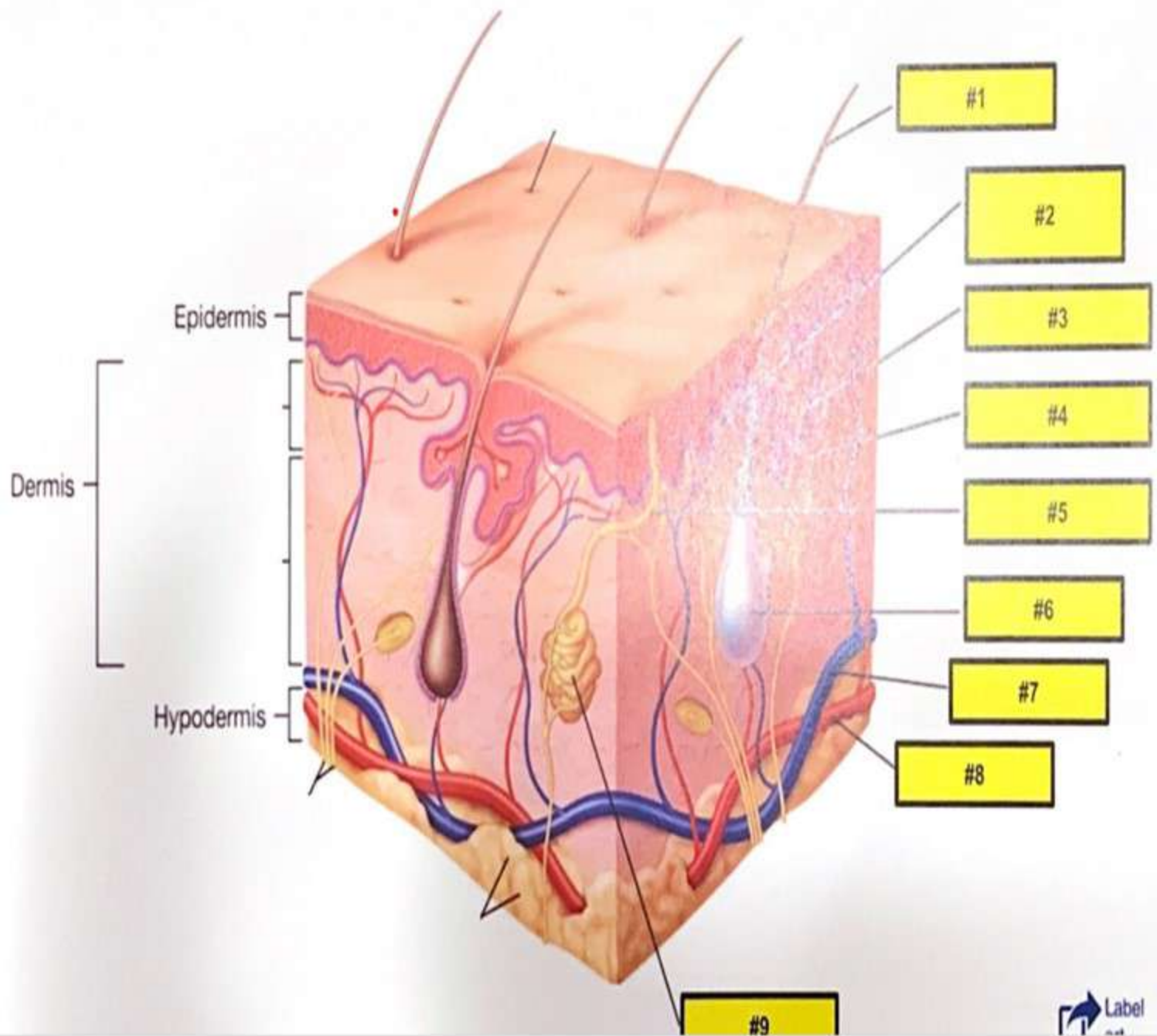
● Define each of the following word parts on the next slide

11. Cervic/o
12. Carcin/o
13. -oma
14. -algia
15. -ectomy
16. A-, an-
17. Hyper-
18. Hypo-
19. Tachy-
20. Brady-
21. Auto-
22. -emesis
23. Hepat-
24. Cyst-
25. Hemat-

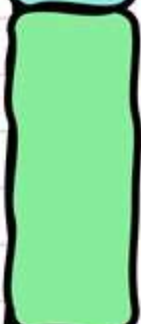
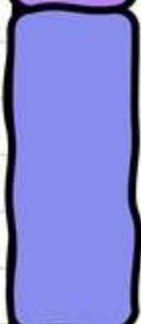
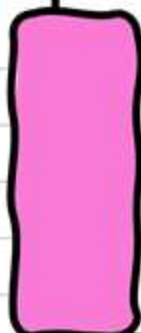
Answers



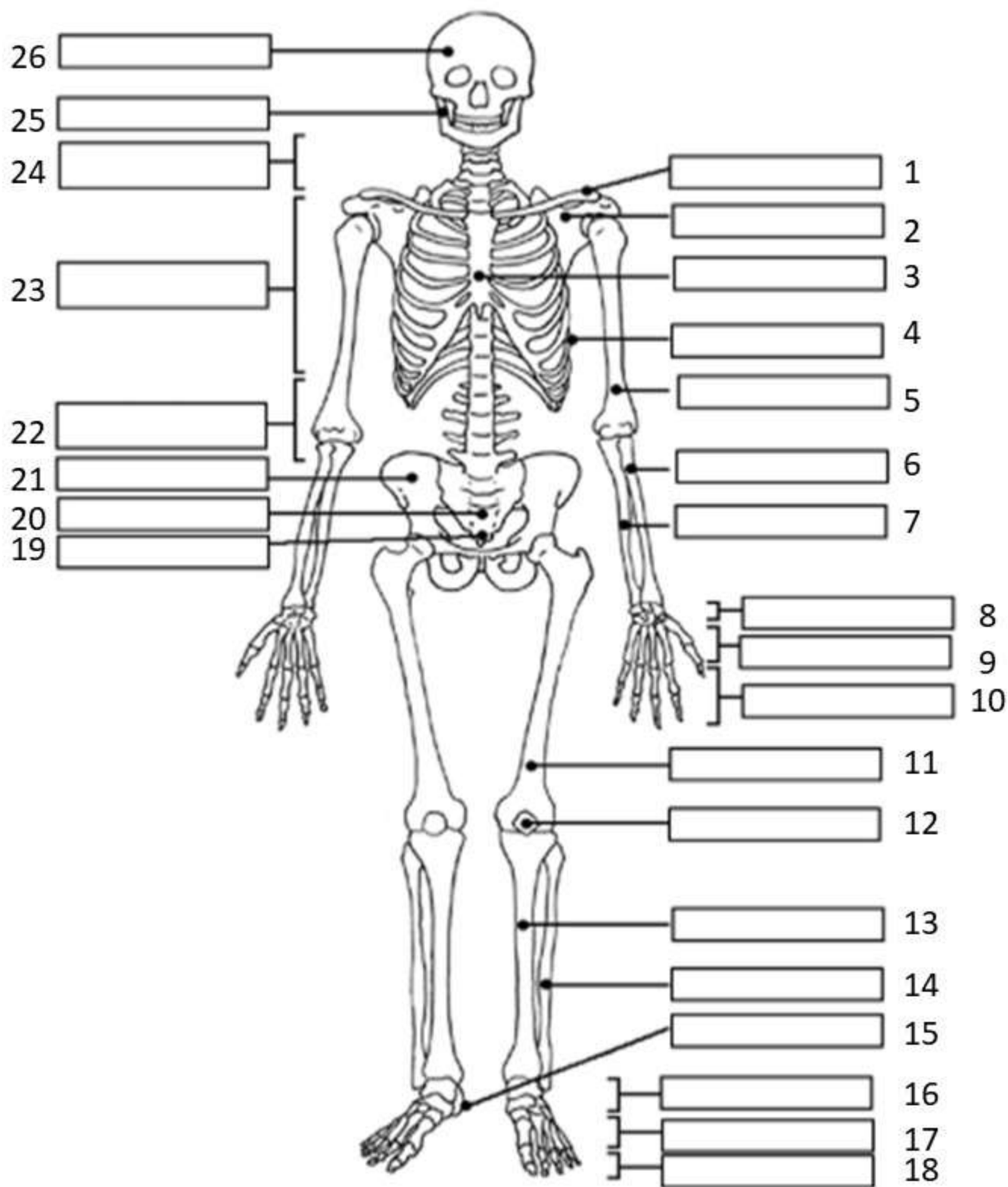
Integumentary System



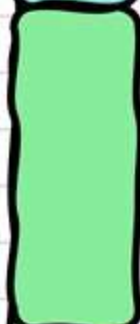
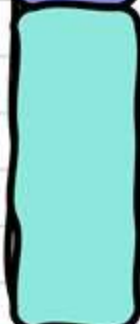
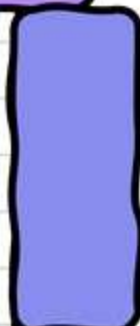
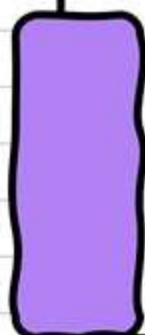
Answers



Skeletal System



Answers



Muscular System

Term	Definition
<u>Automaticity</u>	
<u>Contractility</u>	
<u>Elasticity</u>	
<u>Excitability</u>	
<u>Extensibility</u>	

Cardiac/Resp System

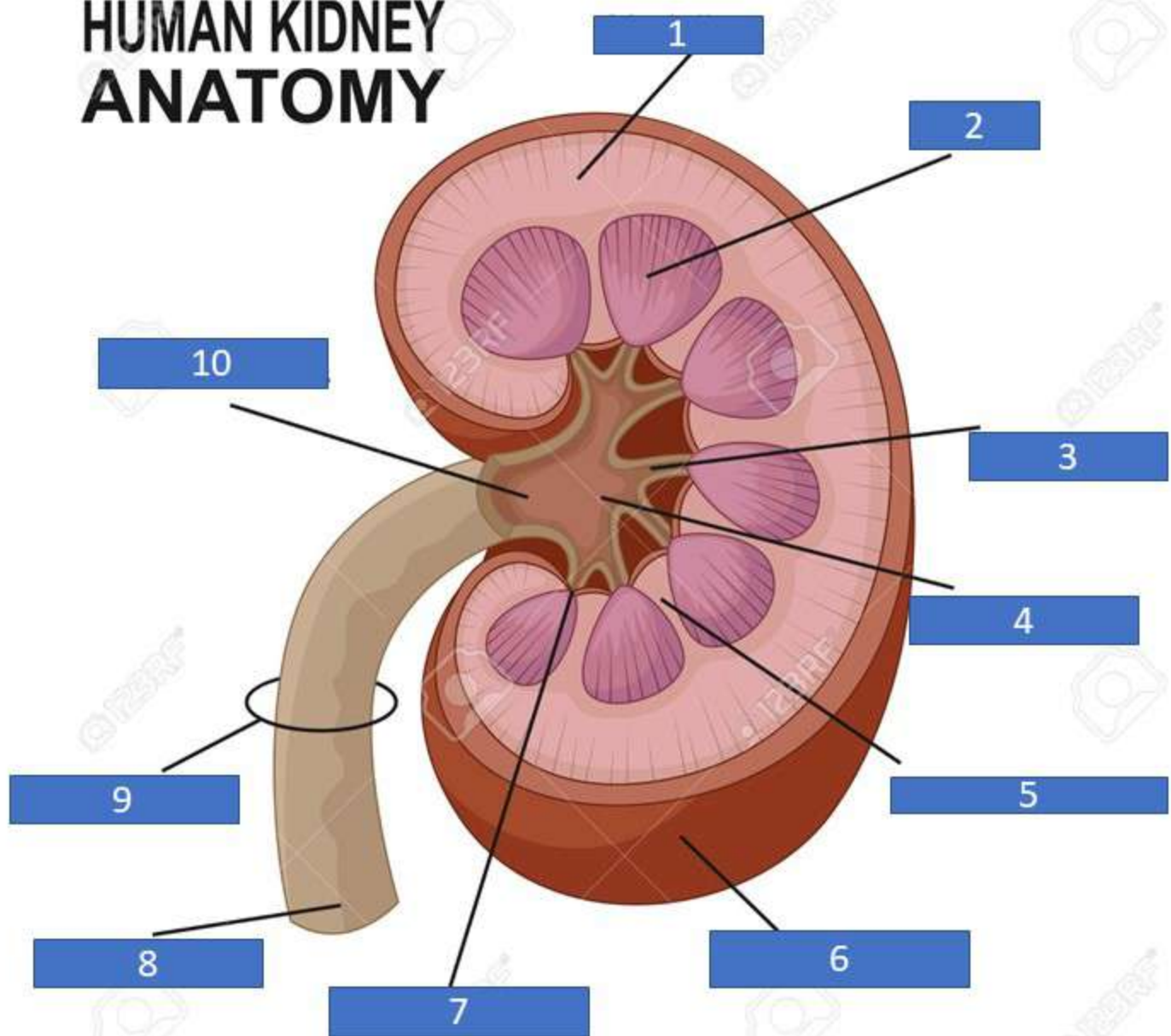
Draw an image which depicts the cardiopulmonary circuit. Your drawing must be drawn in anatomical position and include the following:

- All 4 chambers of the heart
- All 4 valves of the heart
- Deoxygenated areas of the heart must be colored in blue and oxygenated areas must be colored red.
- Draw and label the septum of the heart
- Draw and label the pulmonary arteries and veins
- Draw and label the aorta and the vena cava
- Draw arrows which depict how the blood flows through the heart
- Lobes of the left and right lung
- Be sure to label and name each thing you draw. For example right atria. Please take a picture of your drawing and upload it on the next page.

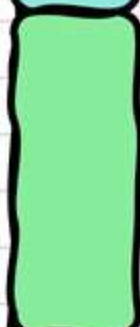
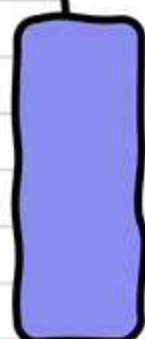
Heart/Lungs

Urinary System

HUMAN KIDNEY ANATOMY

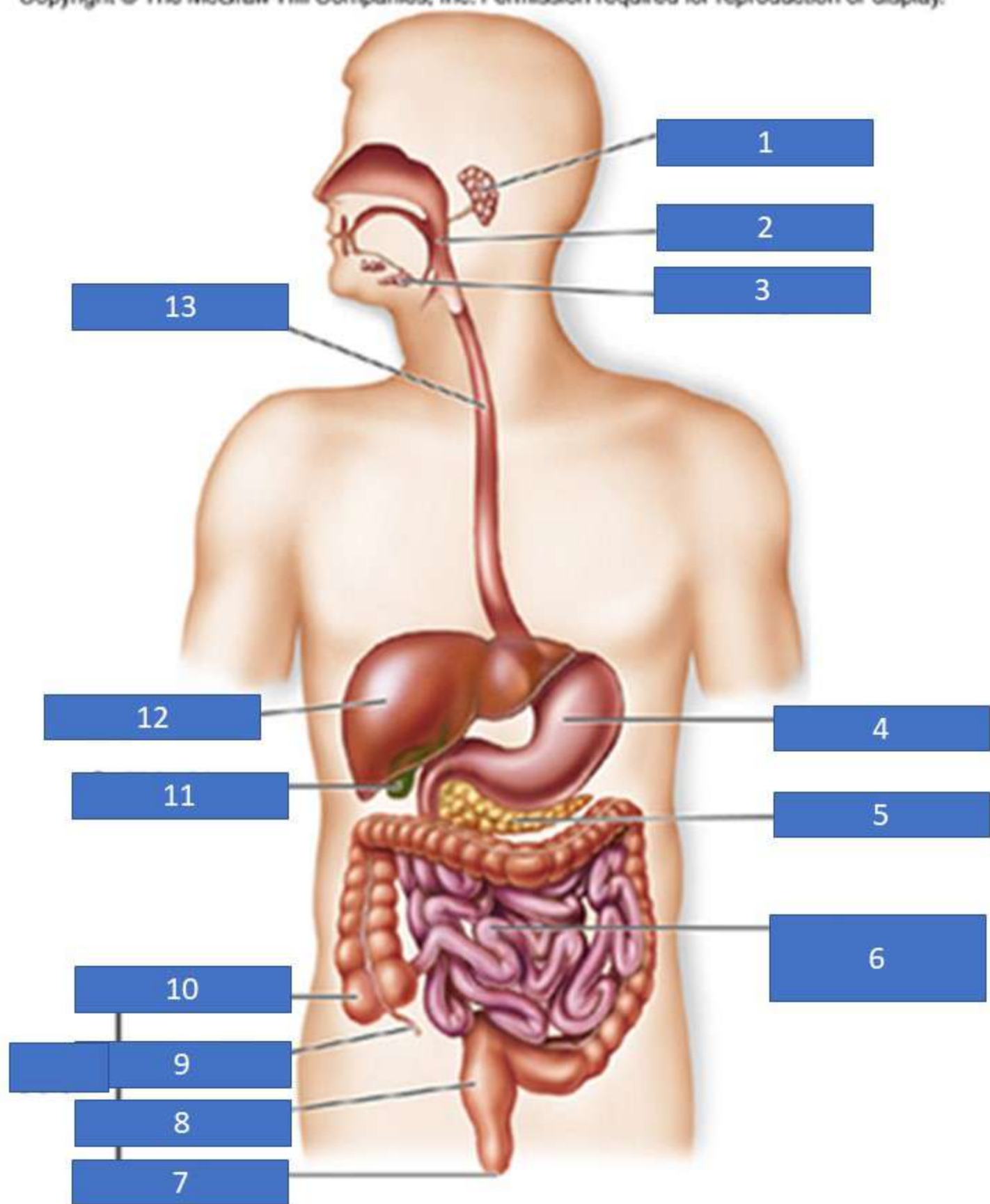


Answers

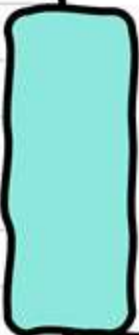


GI System

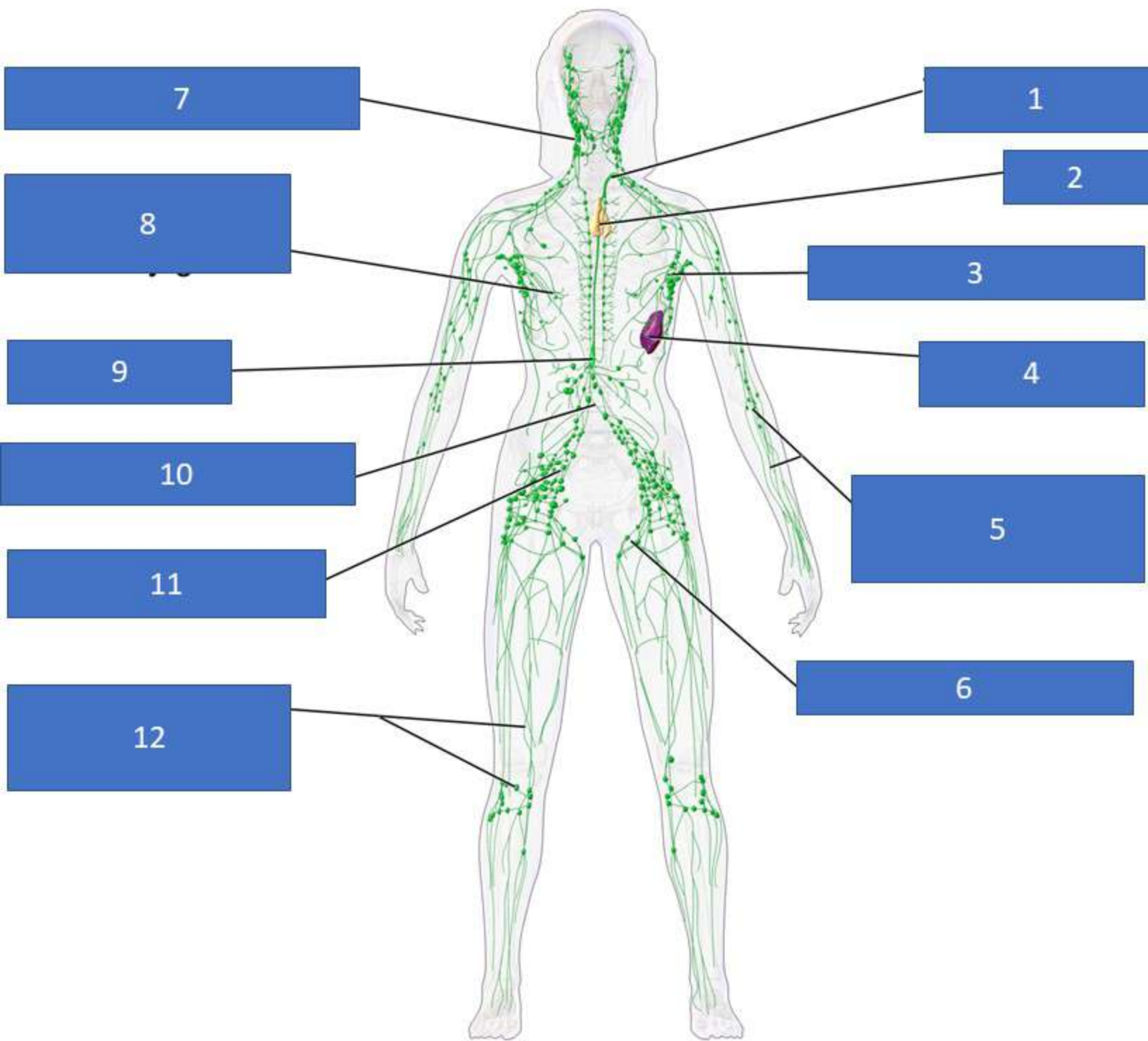
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Answers

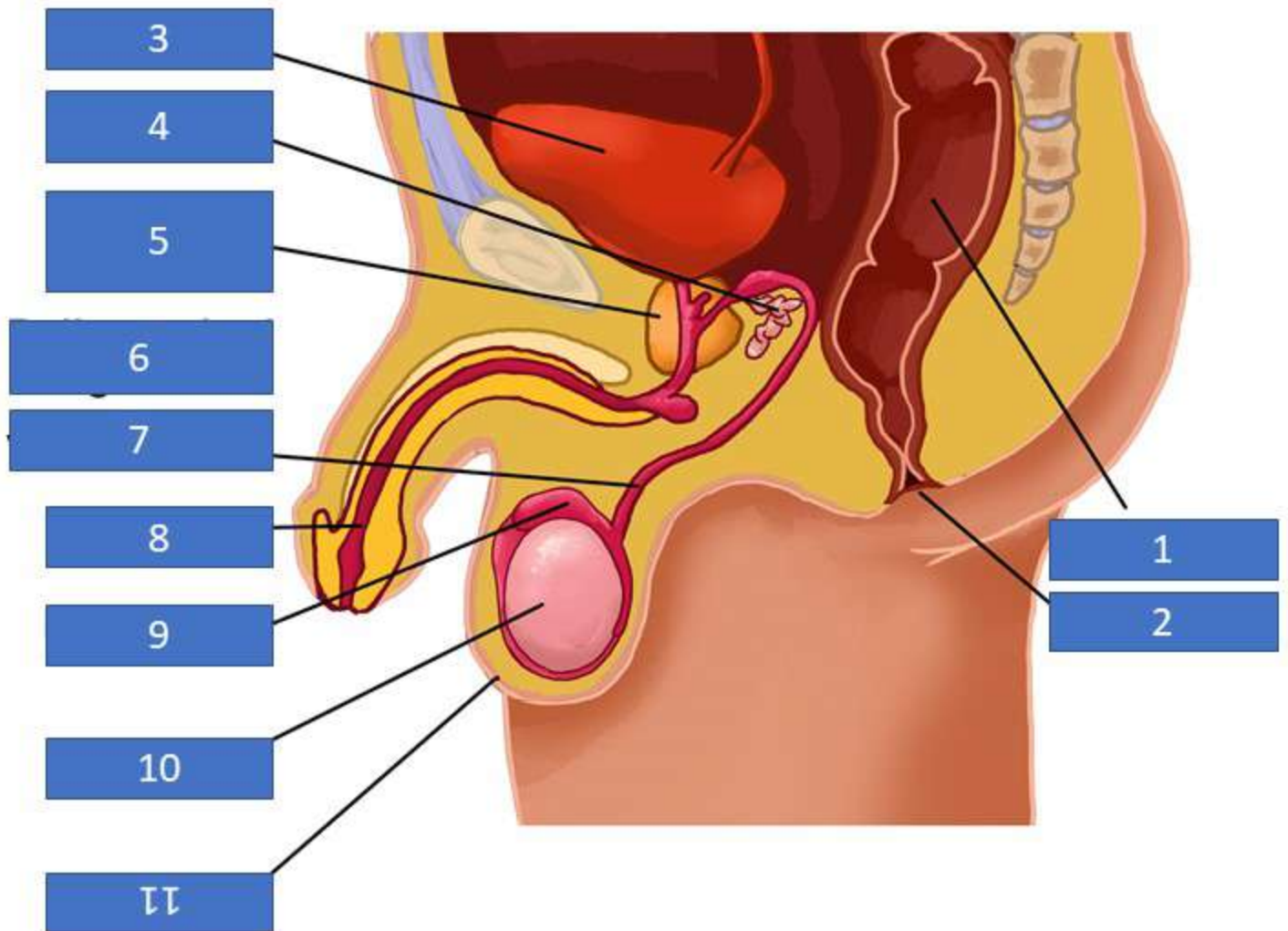


Immune/Lymph System

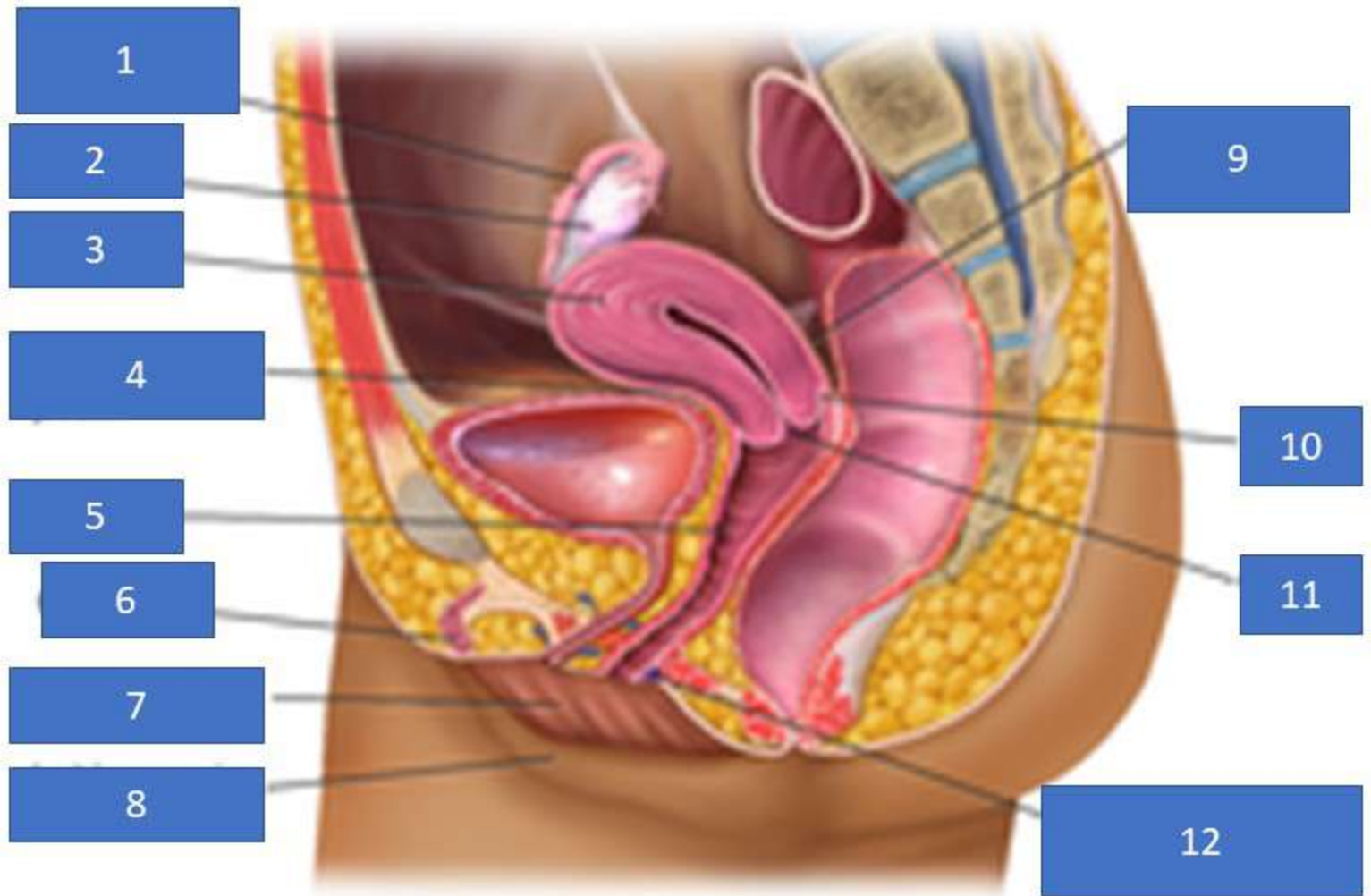


Answers

Male Reproductive System



Female Reproductive System



The Female Reproductive System

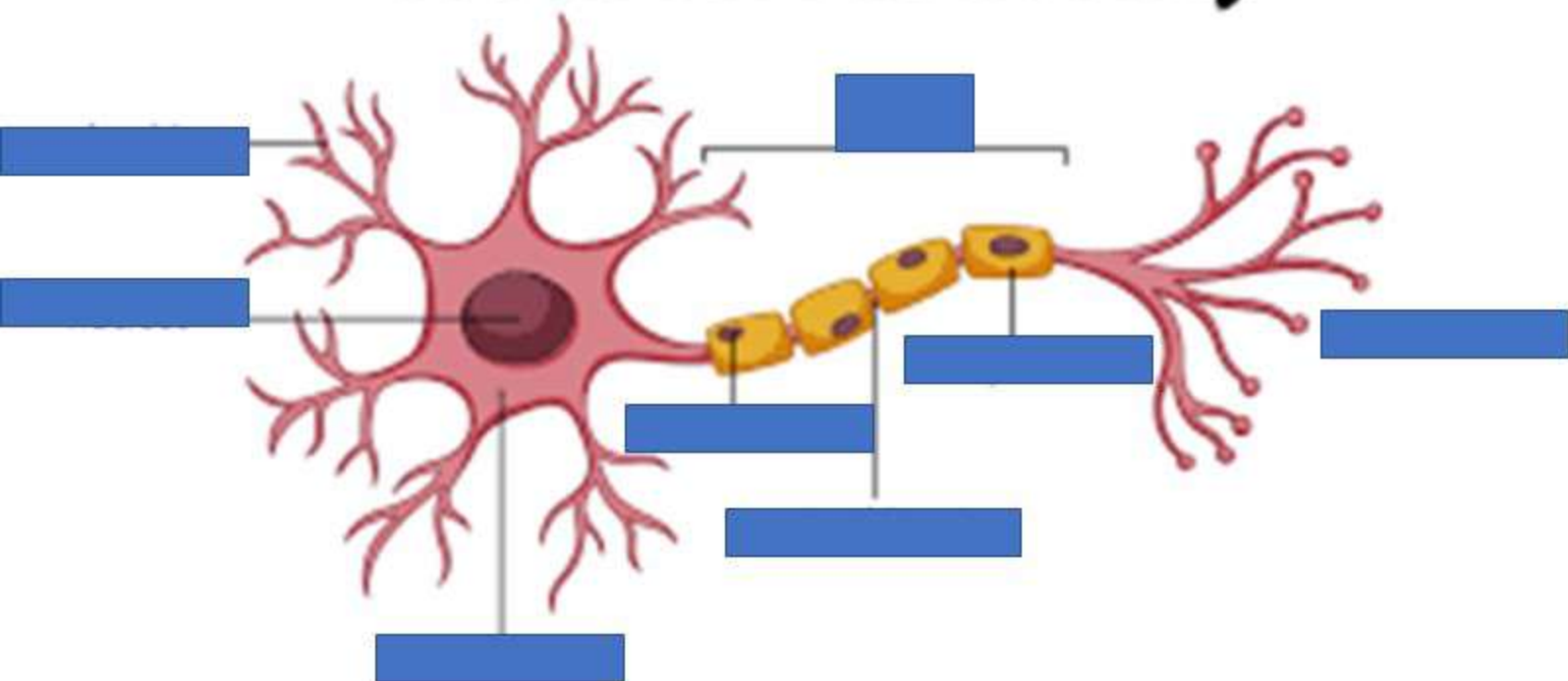
Answers

Male

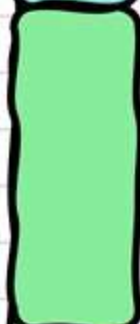
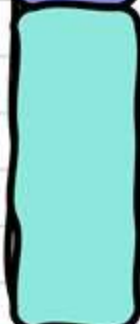
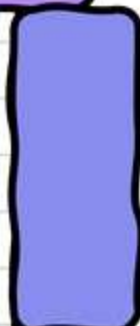
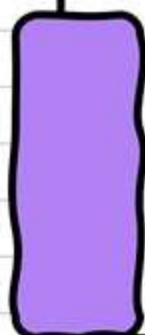
Female

Neuron

Neuron Anatomy



Answers

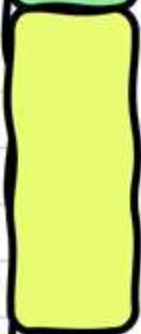
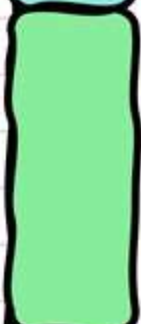
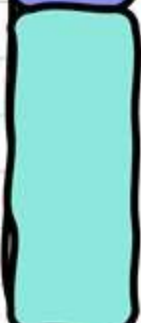
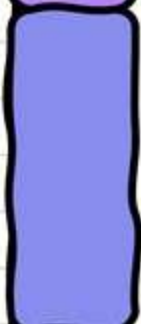
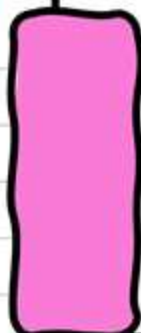


CCMA: Body Structures & Organ Systems Review

1. Which organ serves as the body's number one defense against infection and injury?
2. This attaches bone to bone for joint stability.
3. Which muscle tissue type is voluntary?
4. What is an antigen?
5. This vessel type carries oxygen rich blood to the tissues and organs of the body.
6. Gas exchange occurs in this organ.
7. This type of immunity occurs when a person has an infectious disease and then develops antibodies against that particular pathogen.
8. The outermost layer of the heart is called
9. This organ is primarily responsible for the absorption of nutrients.
10. Insulin is produced by the _____ cells of the _____.
11. This organ is responsible for the filtration of the blood.
12. This is often called the "voicebox"
13. The arteries, veins and nerves of the skin are located in this layer.
14. Vitamin D production occurs in this system as a result of exposure to this in the environment
15. What is the difference between the axial skeleton and appendicular skeleton?
16. What is hematopoiesis and where does it occur in the body?

17. Explain the blood flow through the heart and lungs (from where blood enters the heart all the way to where it exits).
18. This type of lymphocyte can recognize antigens and attaches to them to attack the invading cell directly.
19. This is the smallest type of blood vessel and is where oxygen and nutrient exchange occurs.
20. What is considered the natural pacemaker of the heart?
21. The majority of the liver lies within this abdominal quadrant.
22. Wave like contractions which propels food through the esophagus to the stomach are called
23. Explain the difference between the central nervous system (CNS) and peripheral nervous system (PNS).
24. This hormone is responsible for our "flight or fight" response and is produced by the
25. This is part of the lymphatic system and is responsible for production and maturation of T-cells. (Hint: it atrophies after adolescence.)
26. This type of immunity can be transferred from mother to baby via the placenta and breast milk.
27. This organ serves as a holding tank for urine.
28. This hormone stimulates reabsorption of water in the kidneys.
_____ It is produced in the _____
29. The female sex cell is called the
30. This type of immunity comes as a result of administering a vaccine.
31. This attaches muscle to bone

Answers



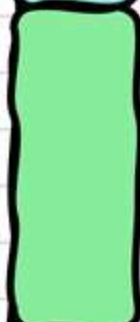
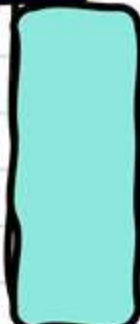
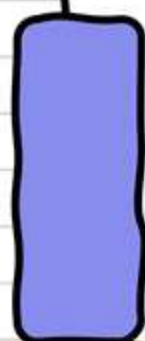
MA Scope of Practice

Place a check beside the skills a MA can do in Texas and a X by the skills they cannot do in Texas:

- ☐ 1. Schedule appointments
- ☐ 2. Perform venipuncture with order
- ☐ 3. Perform a rapid strep test with order
- ☐ 4. Administer medication straight into a vein with order
- ☐ 5. Administer oral medications with an order
- ☐ 6. Take vital signs
- ☐ 7. Maintain medical equipment
- ☐ 8. Apply a cast with order
- ☐ 9. Perform an x-ray with order
- ☐ 10. Diagnose a pt
- ☐ 11. Prescribe a medication
- ☐ 12. Prepare medical records
- ☐ 13. Give immunization injections with order
- ☐ 14. Determine a plan of care for a pt
- ☐ 15. Perform an EKG with order
- ☐ 16. Interpret test results
- ☐ 17. Take a personal or medical history from the pt
- ☐ 18. Maintain pt charts
- ☐ 19. Order supplies for the medical office
- ☐ 20. Perform TB testing with order
- ☐ 21. Give an intramuscular injection with order
- ☐ 22. Manage money accounts for the pt
- ☐ 23. Give an anesthetic to make a pt unconscious with order
- ☐ 24. Instruct a pt on how to perform a pulmonary function test with order
- ☐ 25. Schedule a patient for surgery with the MD's order

Roles and Responsibilities

What are the roles and responsibilities of a MA?



Vocabulary

CCMA: Health Care Systems and Settings

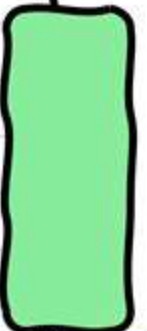
Define the following:

1. AAMA
2. Advocate
3. Scope of Practice
4. General skills
5. Clinical skills
6. Administrative skills
7. Solo practice
8. Partnership
9. Multi-provider clinics
10. Patient Centered Medical Home (PCMH)
11. Innate
12. Accreditation

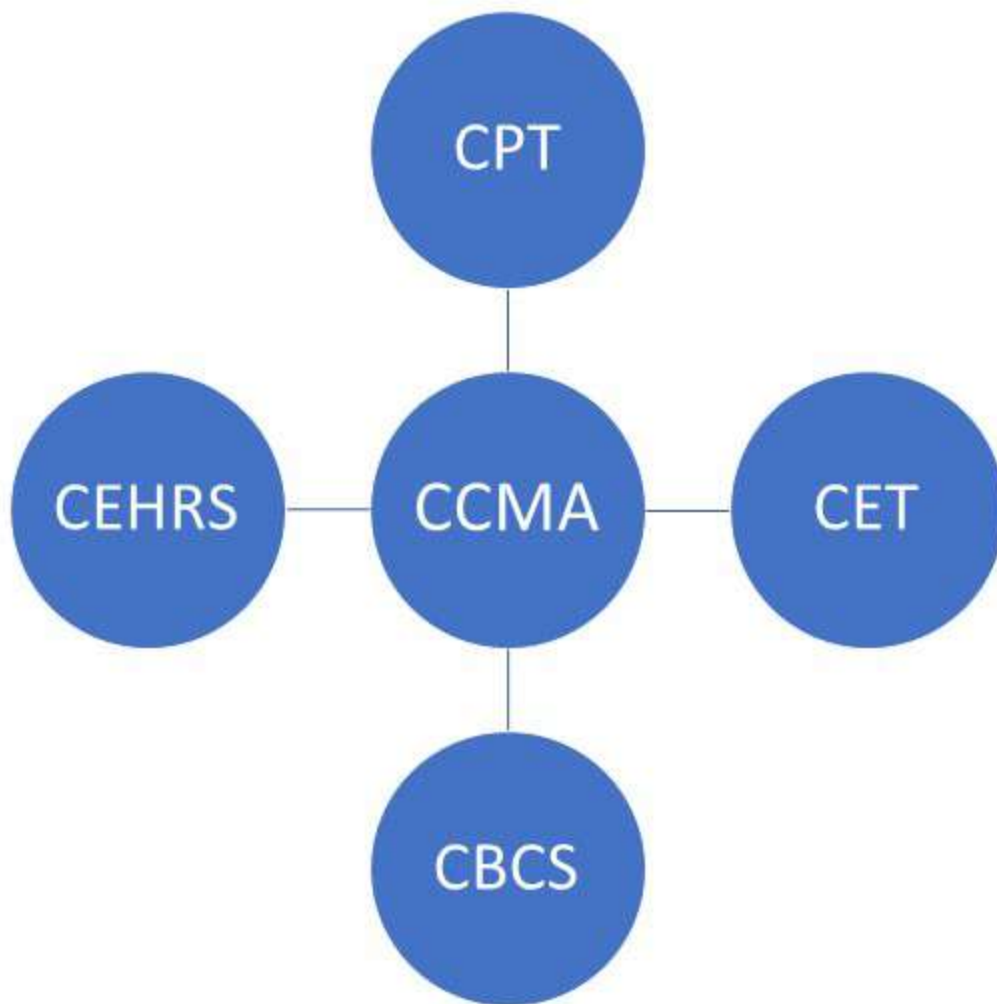
Vocabulary

- 13. CMA
- 14. RMA
- 15. NCMA
- 16. NCMOA
- 17. CCMA
- 18. CMAA
- 19. AAPC
- 20. Standard of Care
- 21. License
- 22. Certification
- 23. Knowledge base
- 24. Time management

Answers



Titles & Credentials



What do credentials stand for? Insert a text box with the answers.

Scope of Practice

1. Describes the duties that can be delegated to medical assistants based on their education, training, and experience.
2. The scope of practice for the MA does not constitute the practice of medicine.
3. MA's should not perform duties that they have not been trained (or in some situations certified) to do.
4. Prior to practice, review the duties and restrictions related to medical assisting, which vary by state.
5. The MA works under the supervision of a provider and performs tasks allowed by state and provider approval.

Standard of Care

1. Is the degree of care of competence expected in a particular circumstance or role.
2. Standard of care applies to all health care professionals who provide care to pts. Providers are extensively trained skilled professionals who are licensed to dx conditions and tx patients.
3. MA's cannot dx, tx, or instruct pts to take any course of action. Be careful to remain within the MA scope of practice when carrying out duties at work.

General V. Specialty

Define the following specialists: (What do they do)? Use the next slide to write your answers:

General practitioners (GP's)

Family Practitioners

Internist

Allergists

Anesthesiologist

Cardiologist

Dermatologist

Endocrinologist

Gastroenterologist

Gynecologist

Hematologist

Hepatologist

Neonatologist

Nephrologist

Obstetricians

Oncologists

Ophthalmologist

Orthopedists

Otolaryngologists

Neurologist

Pathologist

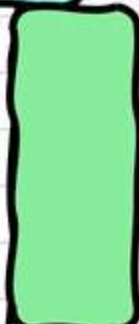
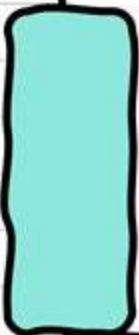
Pediatricians

Psychiatrist

Radiologist

Urologist

Answers



CATCHING A BREAK

Barnaby Wild was riding his bike while next-door neighbor Mr. Eman was walking his dog. Sadly, he didn't hear or see Barnaby in time to avoid the crash.

Barnaby was taken to the ER at the local hospital. It was determined that he had broken his leg. Five days later in a cast and on crutches, he was released to return home.

Several weeks later, Barnaby's mom and dad received an invoice in the mail from the hospital. They were shocked to see a bill for \$25,000.

If Barnaby had no health insurance, they would be liable for the whole amount. However, they do carry insurance and will only pay a portion of that amount.

Instructions:

Look at each of the insurance cards and then calculate what Barnaby's family would need to pay over the entire year if this was their only medical expenses.

First, add up what they would be paying in premiums for the entire year.

$$\$400/\text{month} \times 12 \text{ months} = \$4,800$$

Next, subtract out the deductible from the \$25,000 bill since this amount has to be paid before insurance will start paying.

$$\$25,000 - \$1000 = \$24,000$$

Now find 10% of this new total (the Wild's part of the co-insurance).

$$\$24,000 \times .10 = \$2,400$$

Don't forget to include the \$50 ER visit co-pay!

Now compare this total to the out of pocket max (the most the Wild family would have to pay in medical expenses that year). If the total is larger than the out of pocket max, the family will simply pay that amount. In this case, \$2,400 is less than \$3000, so the Wild family will pay the \$2400.

Finally, just add up the amounts that were paid:

$$\text{TOTAL AMOUNT PAID: } \$4,800 \text{ (premium)} + \$1000 \text{ (deductible)} + \$2400 \text{ (10\% coinsurance)} + \$50 \text{ (co-pay)} = \$8,700$$



Co-pay: Doctor's visit: \$25 ER visit: \$50
\$1000 deductible
90/10 coinsurance
\$3000 out of pocket max
Premium: \$400/month
Prescriptions: \$15 generic, \$35 brand name



GOLDEN EAGLE
INSURANCE

Co-pay: Doctor's visit: \$75 ER visit: \$100
\$500 deductible
80/20 coinsurance,
\$2000 out of pocket max
Premium: \$250/month
Prescriptions: \$5 generic, \$15 brand name

Show your work here:

National General

Co-pay: Doctor's visit: \$25 ER visit: \$50
\$2000 deductible
70/30 coinsurance
\$10,000 out of pocket max

Premium: \$200/month

Prescriptions: \$15 generic, \$35 brand name

Show your work here:

TOTAL AMOUNT PAID: \$

Brightway INSURANCE

Co-pay: Doctor's visit: \$75 ER visit: \$100
\$100 deductible
80/20 coinsurance
\$1000 out of pocket max

Premium: \$325/month

Prescriptions: \$10 generic, \$30 brand name

Show your work here:

TOTAL AMOUNT PAID: \$

Ailing Amy

Amy has Allianz insurance. Read the following scenarios and determine what Amy must pay versus what her insurance plan will pay. Assume that it is the beginning of the year and the start of her coverage period.

Allianz

Co-pay: Doctor's visit: \$25 ER visit: \$50
\$1500 deductible
80/20 coinsurance
\$5000 out of pocket max
Premium: \$200/month
Prescriptions: \$15 generic, \$35 brand name



Amy hasn't reached her \$1,500 deductible. She went to the doctor and owed \$125.
 How much will:

Amy pays: \$ _____

Her insurance pays: \$ _____



Amy has reached her \$1,500

deductible. Her co-insurance now begins. She had a medical procedure that cost \$2,000.
 How much will:

Amy pays: \$ _____

Her insurance pays: \$ _____



Amy has reached her \$5,000 out of pocket limit. She had minor surgery and owed \$5,000.
 How much will:

Amy pays: \$ _____

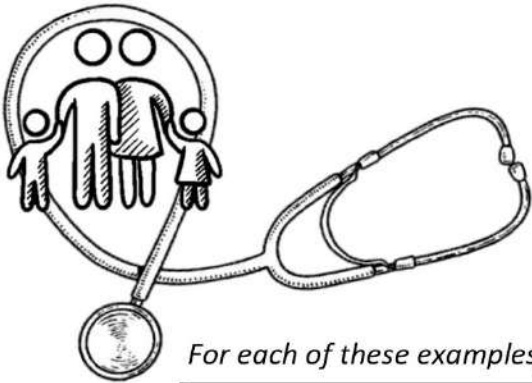
Her insurance pays: \$ _____

HEALTH INSURANCE 101

Name: _____ Date: _____

Match the term with the definition.

- | | |
|---------------------------------------|--|
| 1) _____ deductible | a) The flat fee that an individual is expected to pay for a medical service, such as a doctor's appointment |
| 2) _____ out of pocket max (or limit) | b) The amount of money that you and/or your employer pays the insurance company every month or year as part of the insurance plan |
| 3) _____ co-pay | c) The amount of money that an individual pays before the benefits of health insurance kick in and coinsurance starts |
| 4) _____ co-insurance | d) After you have paid this amount of money, your health insurance will cover 100% of your costs for medical services that are included in your plan |
| 5) _____ premium | e) The percentage of money that you are expected to pay after the deductible is reached |



For each of these examples, fill in the correct term with the choices listed below:

deductible	out of pocket max	co-pay	co-insurance	premium
------------	-------------------	--------	--------------	---------

- 6) John had a lot of medical bills over the course of a year. His total bill was \$5,600. His insurance company would not pay any of his bill until he paid \$500. This is called a _____.
- 7) After John paid his \$500, the insurance company covered 80% of the remainder and John paid the remaining 20%. This is called _____.
- 8) Jane has to take her kids to the doctor for their check-ups twice a year. Each time she goes, she pays \$30 each visit. This is called a _____.
- 9) Bob has \$250 taken out of his paycheck each month to pay for his health insurance. This is called a _____.
- 10) Jane had several major medical procedures in one year. By August she had paid over \$10,000 and the insurance company will now pay 100% of the remainder of her medical bills for the year. This is called the _____.

Use the terms in the box below to match with the definitions listed:

PPO

HMO

CMS

Medicare

Medicaid

Marketplace

- 11) _____ The federal agency that runs the Medicare, Medicaid, and Children's Health Insurance Programs, and the federally facilitated Marketplace.
- 12) _____ A federal health insurance program for people 65 and older and certain younger people with disabilities.
- 13) _____ Insurance program that provides free or low-cost health coverage to some low-income people, families and children, pregnant women, the elderly and people with disabilities.
- 14) _____ A service that helps people shop for and enroll in affordable health insurance.
- 15) _____ A managed care plan where the patient must use physicians from a list of network providers in order to have the expenses paid by the insurance.
- 16) _____ A managed care plan where there is incentive to use physicians from a list of network providers. Typically, the incentive is a higher co-insurance percentage.

You have been asked to suggest a type of insurance to the following individuals. If you had to choose between PPO, HMO, Medicare and Medicaid, what health insurance would best match their needs? Fill in your choice in the box next to their name.



I am 63 years old and was recently diagnosed with end stage renal disease.



I am 29 and pregnant with my first child. I recently lost my job and struggle financially.



I am 39 years old and I like to have control over what doctors I see.



I am 28 years old and don't really care which physician I see. I just want the highest coverage possible.

Name: _____ Period: _____ Date: _____

CCMA: Health Care Systems & Settings Review

1. Explain the difference between a Doctor of Osteopathy (DO) and a Medical Doctor (MD).
2. Explain the difference between a certificate and a license.
3. Is it legally required for a Medical Assistant to hold a certification?
4. Define Scope of Practice.
5. Where can you find the Scope of Practice for a Medical Assistant in Texas?
6. List examples of “administrative duties” a medical assistant may perform.
7. List examples of “clinical duties” that a medical assistant may perform.
8. Define CAM.
9. What are ancillary services?
10. This is a needs based insurance program sponsored by the State and Federal Government for those with limited income and resources.
11. This is a Federal Insurance program for those age 65 and older or those with a qualifying disability.

12. This is the amount of money paid to an insurance company for coverage.
13. Money that must be paid by the patient before the insurance company pays their portion.
14. An amount paid by the patient for a certain medical service, device or medication.
15. With this type of insurance plan if you treat outside of your network, you will receive no benefits and it also requires a referral to see a specialist.
16. With this type of insurance plan, you may treat outside of your network, however, you will incur additional costs.
17. This is health insurance for surviving spouses and dependent children of veteran's who died as a result of service related disabilities.
18. This type of insurance coverage will cover you free of charge if you sustain an injury while in the course and scope of your employment.
19. This is a statement from an insurance company that details what payments were made, denied or reduced in payment.
20. What is a participating provider?
21. This type of provider manages pain and sedation during surgery.
22. This type of provider specializes in hormonal and glandular conditions.
23. This type of physician deals with blood and blood producing organs.

24. This provider specializes in the study of body parts such as the liver, gallbladder and pancreas.
25. This provider specializes in the care of newborns.
26. This provider specializes in the treatment of the kidneys.
27. This provider deals with the ear, nose and throat.
28. This provider specializes in the care of patients who have cancer.
29. This provider specializes in the care of patients who have eye conditions.
30. This provider specializes in disorders of the urinary tract.
31. This provider specializes in the care of women during and after pregnancy
32. This professional assists patients with improving mobility, strength and range of motion.
33. Which healthcare professional is legally responsible for the outcomes of a medical assistant's duties and performance?
34. Which health care delivery model emphasizes patients' involvement in organizing their own health care?
35. This provider can assess patients of all ages with a wide variety of acute and chronic medical conditions.
36. This term means the maximum amount of money a third party payer will provide.

37. This is the oldest and largest system of independent health insurers in the United States.

Please click on the link and read the story. On the next page you will answer questions about what you read.

<http://www.bioethics.net/2015/01/cassandra-c-right-to-refuse-treatment-or-protecting-a-minor/>

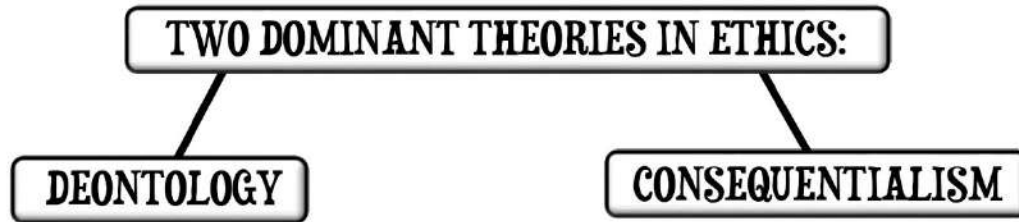
Name: _____ Date: _____

CCMA: The Case of Cassandra C.

1. Who has the legal authority to make medical decision for minors?
2. What rights, if any, do 17 year old minors have when it comes to healthcare decisions?
3. What age should people be allowed to make their own medical decisions? Why?
4. Why were Cassandra C. and her mother wishes not honored?
5. 4. In the case of Cassandra C., do you feel her rights were violated? Why or why not?

MEDICAL ETHICS

Name: _____ Date: _____



Decisions based on good , moral rules. Once these are established it is important to stick with them.

Decisions based on outcomes. The best decision is the one with the best results.

Fill in the blanks with either "deontology" or "consequentialism" based on the scenarios.

_____ Scenario 1: Dr. Jones knows that performing surgery on her patient only results in a 5% chance of sustaining their life another year. Nonetheless she decides to perform the surgery. Which theory does she identify more with?

_____ Scenario 2: Dr. Dupree refuses to halt life-sustaining therapy on his patient even though the family demands he do so. He strongly believes this could potentially save their life. Which theory does he identify more with?

_____ Scenario 3: 23.5% of doctors reported that they would prescribe a placebo treatment simply because the patient wanted the treatment, even if they knew it would not be effective. Which theory do they identify more with? (A placebo is kind of treatment that looks just like a regular treatment or medicine but is not. It's actually an inactive "look-alike" treatment or substance.)

_____ Scenario 4: Dr. Bentley knew a mistake was made in surgery on her patient. She decided not to tell the patient because it was minor and would have no long-term effect. In fact, she feels like it would only make the patient worry and cause distress. Which theory does she identify more with?

_____ Scenario 5: Dr. Smith does not believe in physician-assisted suicide in any circumstance. Which theory does he identify more with?

_____ Scenario 6: Dr. Edwards stopped taking patients with LifeWay Insurance Company because the company did not pay well. He would be losing some long-time patients by doing so, but it was costing too much money for his practice. What theory does he identify more with?

_____ Scenario 7: 53.2% of doctors reported that they would break patient confidentiality if they knew the patient's status would/could be harming to others. Which theory do they identify more with?

WHAT WOULD YOU DO?

Read the scenarios and decide what you personally would do in those situations. Be as honest as possible.

_____ Scenario 1: A pharmacy rep offers you gifts in exchange for prescribing their medication. You do not believe the medication is the best option available. Do you (A)- accept the gifts and promote the medication or (B)- refuse the gift and agree for that medication to be the preferred choice?

_____ Scenario 2: Do you think it should be (A)- legal for people to have the ability to purchase organs for transplant if they would not be able to receive an organ by waiting their turn through the database, or (B)- the sale of human body parts is immoral?

_____ Scenario 3: You suspect your patient is faking pain in order to have pain medication prescribed. Would you (A)- still prescribe the medication or (B)- refuse to prescribe the medication?

_____ Scenario 4: Would you ever (A)- hide information from a patient about a terminal diagnosis in order to boost their spirit or attitude or (B)- always have total honesty even if you feel like it could bring a negative emotional response?

_____ Scenario 5: Your closest friend, who is also a physician, came to work intoxicated. Would you (A)- tell a superior or (B)- not say anything?

_____ Scenario 6: You know that the spouse of your patient has HIV, but your patient does not know. Would you (A)- figure out a way to alert your patient or (B)- protect the confidentiality of the spouse?

_____ Scenario 6: Your patient could benefit from a surgery that insurance refuses to cover. Would you (A)- perform the surgery even though you know it will cost your practice or (B)- not perform the surgery and try other treatments?

_____ Scenario 7: Your friend calls and is wanting you to write them a prescription for a medication they need. They are not your patient. Would you (A)- write the prescription or (B)- decline and offer to see them in your office.

_____ Scenario 8: You tell a family that their child's life could be saved with a treatment, but they refuse based on religious reasons. Do you (A)- perform the treatment without their permission or (B)- honor their request?

_____ Scenario 9: A male urology patient insists upon a male surgeon because he tells the hospital staff, "Everyone knows that men, on average, cut straighter." Would you (A)- honor his request even though it might put a strain on the staffing that day or (B)- tell him that he must use the female surgeon assigned to his case.

_____ Scenario 10: A patient's daughter asks that her father, who suffers from mild dementia, be assigned a Caucasian home health aide because having a nonwhite person in his home will "confuse and frighten" him. Would you (A)- honor her request or (B)- explain that they must accept whatever staff member is available.

Based on your responses, do you think you identify more with deontology ethics or consequential ethics?

ALLOCATING THE ANTIDOTE



Group Members: _____

It's 2035 and the world has been stricken with H2N1, otherwise known as the "Scarlett Death", a deadly super-pathogen that has already wiped out billions of people. The U.S. has manufactured a life-saving vaccine that is in mass production. Also in production is a drug that acts as an antidote to those already affected. If taken, it can increase chance of survival significantly. You and your team have been assigned with creating the algorithm (process) for distributing the vaccine and the antidote.

First, lay out a plan for distributing the vaccine. In what order will healthy individuals receive the vaccine? Would you start with children? Government officials? Will it be exclusively random? Write the official proposal in the space below.

Next, develop a strategy for distributing the antidote. Should the vaccine be given to the sickest first? Should younger people have priority over older adults? Should priority be given to people in authority or those that are in overall good health? Write the official proposal in the space below:

THAT'S DEBATABLE



Name: _____ Date: _____

Read through the bioethical topics and select two that interests you the most. Research the issue to have a better understanding of the topic. Write a minimum of 3 pros and 3 cons for each. Use the space below to organize your thoughts and then transfer to the graphic organizer

- 1) Should pediatricians be allowed to refuse taking on patients whose parents are unwilling to vaccinate their children?
- 2) Should doctors honor a request by an adult child not to tell their elderly parent she has cancer because they believe the patient "wouldn't want to know"?
- 3) Should families be able to decide to give medication that would speed up the death of an infant who is likely to die within weeks due to an untreatable disease?
- 4) Should convicted sex offenders be allowed to undergo voluntary castration in return for shortened prison sentences?
- 5) Should employers be permitted to hire only nonsmokers?
- 6) Should anabolic steroids be permitted in professional/Olympic sports?
- 7) Should a patient who is deaf be able to use genetic screening in order to ensure they will not have a child who is also deaf?
- 8) Studies have shown that the presence of lithium in drinking water is associated with lower rates of suicide. Should the US be allowed to add trace quantities of the element in the water supply?
- 9) Should it be allowed to use animals in medical research and dissection?
- 10) Should all birth control be over the counter and not require prescription?
- 11) Should obesity be labeled as a "disease"?
- 12) Should prescription drugs be able to advertise to the public?



FIRST DO NO HARM

4 BASIC PRINCIPLES OF MEDICAL ETHICS

Name: _____ Date: _____

Match the principle with the definition that best describes it. Draw a line from the principle to the definition.

AUTONOMY

BENEFICENCE

NONMALEFICENCE

JUSTICE

- ☐ Strive to be as fair as possible when offering treatments to patients and allocating scarce medical resources.
- ☐ All healthcare providers must strive to improve their patient's health, to do the most good for the patient in every situation.
- ☐ People have the right to control what happens to their bodies.
- ☐ In every situation, healthcare providers should avoid causing harm to their patients.

Determine which principle matches the scenarios below. Write "A" for autonomy, "B" for beneficence, "N" for nonmaleficence, and "J" for Justice.

- _____ 1) Providing free breast cancer screenings to the public.
- _____ 2) Obtain consent before medical interventions with patients.
- _____ 3) Providing pain medication as soon as possible to an injured patient in the emergency room
- _____ 4) Always being truthful to the patient regarding their condition.
- _____ 5) Refusing to give a patient a medication because it has not been proven to be effective.
- _____ 6) Lifting side rails on a patient's hospital bed to prevent falls.
- _____ 7) Not allowing an athlete to return to play because their injury has not fully healed.
- _____ 8) Treating a convicted felon in the same way any other patient would be treated.

Develop and write a medical scenario for each of the principles.

AUTONOMY

BENEFICENCE

NONMALEFICENCE

JUSTICE

Name: _____

Date: _____

HIPAA Regulations - CCMA

1. What does the HIPAA acronym stand for?

- A. Health Identification Privacy and Affordability Act
- B. Health Information Portability and Affordability Act
- C. Health Information Privacy and Accountability Act
- D. Health Insurance Portability and Accountability Act

2. Can a provider in your organization use the database to access the medical record of a patient who was seen by another provider in the organization?

- A. No, he/she must create a new record for the patient based on his/her personal interactions with the patient.
- B. No, he/she must obtain written consent from the patient.
- C. Yes, as long as he/she will be treating that patient or the provider is assisting another provider with the coordination of the patient's care.
- D. Yes, he/she can access any information available in the database.

3. A covered entity must obtain an individual's written authorization for use or disclosure of protected health information in which of the following scenarios?

- A. A coder must review a patient's chart to code a recent hospital stay.
- B. A consulting physician needs to access a patient's record to inform his/her opinion.
- C. A hospital administrator needs to access patient data to create a report about how many patients were treated for diabetes in the last six months.
- D. None of the above

4. True or False: Patients can request a copy of billing records associated with their care.

- A. True
- B. False

5. Which division of The Department of Health and Human Services (HHS) is responsible for administering and enforcing HIPAA privacy and security standards?

- A. Centers of Medicare and Medicaid Services (CMS)
- B. Office of Civil Rights (OCR)
- C. Office of Inspector General (OIG)
- D. Office of the National Coordinator for Health Information Technology (ONC)

6. True or false: In order for a provider to use a smartphone to contact an answering service, HIPAA requires the phone be encrypted.

- A. True
- B. False

7. Any healthcare provider, regardless of size, is considered a covered entity under the HIPAA Privacy Rule, so long as the provider:

- A. Demonstrates meaningful use of electronic health records (EHR)
- B. Electronically transmits health information in connection with certain transactions
- C. Handles health information in any way
- D. Receives reimbursement from a government health program

8. All of the following pieces of information are considered individually identifiable health information, EXCEPT:

- A. Birth Date
- B. Diagnosis
- C. Name
- D. Social Security Number

9. True or false: Providers may leave a message on a patient's answering machine reminding him or her of an upcoming surgery as long as it doesn't specify the type of surgery or the specialty practice.

A. True

B. False

10. Which of the following scenarios is considered an incidental disclosure?

A. A member of the housekeeping staff overhears two physicians discussing a case in the break room

B. A nurse practitioner leaves a laptop containing protected health information on the subway

C. A nurse tells a 10-year-old patient's parents the details of their child's case

D. A physician tells his or her spouse that he saw their neighbor in the hospital

Name: _____ Period: _____ Date: _____

CCMA: Common Laws & Agencies that affect medical practices

Directions: For each of the following, please define what it is and explain how it will impact either your practice or employment as a Medical Assistant. You will need to use a separate sheet of paper to complete your work.

1. Affordable Care Act (ACA)
2. Occupational Safety & Health Administration (OSHA)
3. Health Insurance Portability & Accountability Act (HIPAA)
4. Controlled Substances Act (CSA)
5. Title VII of Civil Rights
6. Equal Pay Act
7. Americans with Disabilities Act (ADA)
8. Family Medical Leave Act (FMLA)
9. The Joint Commission (TJC)

Name: _____ Period: _____ Date: _____

CCMA: Medical law & ethics review

Define the following:

Assault

Battery

Capacity

Mutual assent

Litigation

Tort

Slander

Libel

Fraudulent

Malfeasance

Misfeasance

Nonfeasance

Agent

1. A formal statement that someone who has promised to tell the truth makes so that the statement can be used in Court is called _____.
2. A written order that commands someone to appear in Court, or for a document to be provided, is called a _____.
3. Most medical malpractice cases are (civil or criminal) cases. (Circle the correct answer).
4. Define administrative law and then name an example of an administrative law that impacts a medical assistant's practice.

5. This federal agency is charged with making and enforcing laws that keep American workers safe. _____
6. Under this Federal Law, certain employers must allow their employees to receive time off of work for medical reasons. _____
7. This organization is the major accrediting body for hospitals. _____
8. What does Title VII of the Civil Rights Act prohibit?
9. What is “standard of care?”
10. Who often gives testimony to establish the standard of care in a lawsuit?
11. What is the difference between an informed consent and an implied consent?
12. Who can report a privacy violation complaint? Who is the report made to?
13. What fines or punishments can be imposed for a privacy violation?
14. Federal law states that medical documentation must be retained for how long?
15. Describe the following medical directives:
 - a. Living Will
 - b. Durable power of attorney for healthcare
 - c. DNR
 - d. MOLST
 - e. Organ & tissue donation
16. Who must comply with medical directives?

Endocrine System

Condition	Causes	Symptoms	Treatment
Diabetes mellitus type 1	Unknown (possibly autoimmune, genetic, or environmental)	Polyuria Polydipsia Fatigue Blurry vision Weight loss Elevated blood glucose	Insulin therapy
Diabetes mellitus type 2	Obesity Inactivity Genetics	Polyuria Polydipsia Fatigue Elevated blood glucose	Diet modification Exercise Medication Insulin therapy
Polycystic ovary syndrome	Unknown (possibility genetic, excessive insulin)	Irregular menstrual cycles Elevated hormone levels Multiple cysts on ovaries	Weight loss Estrogen and progestin
Hypothyroidism	Autoimmune disease Medications Thyroid surgery	Fatigue Weight gain Muscle aches Bradycardia Elevated cholesterol Dry skin	Synthetic thyroid hormone medication (levothyroxine)

Integumentary System

Condition	Causes/risk factors	Symptoms	Treatment
Basal cell carcinoma (BCC)	Light/fair skin Sun exposure	New growth or sore that does not heal	Curettage and electrodesiccation Mohs surgery Cryosurgery Laser therapy
Squamous cell carcinoma	Light/fair skin Sun exposure Less common than BCC	Spreads to surrounding tissue Most common on face and head	Curettage and electrodesiccation Mohs surgery Cryosurgery Laser therapy
Malignant melanoma	Light/fair skin Sun exposure	Itchy/bleeding mole New mole Mole with changes	Depends on stage of lesion Surgery Lymph node biopsy Chemotherapy Radiation therapy Immunotherapy
Acne vulgaris	Surge of sex hormones during puberty Excess sebum on skin surface	Black heads, white heads (comedos) Papules, pustules	Regular cleansing of affected area OTC benzoyl peroxide products Prescription medication (topical or oral)

Alopecia	Often hereditary Hormone changes Chemotherapy Stress Burns Fungal skin infections	Loss or lack of hair anywhere on the body, typically on the scalp Can include eyebrows and eyelashes	No cure Hair transplants and medications can slow progression
Cellulitis	Staphylococcal and streptococcal bacterial infections	Red, tight skin Pain in inflamed area Fever	Oral/topical antibiotics Hospitalization if at risk for developing systemic infection
Dermatitis	Multiple causative agents Contact with irritants	Inflammation of skin resulting in rash and pruritus	Treatment is based on cause Corticosteroid creams Oral steroids
Eczema	Unknown (possible allergy or inflammatory condition)	Chronic dermatitis with vesicular eruptions developing into itchy, red, scaly rash	Topical or systemic steroids NSAIDs for discomfort
Folliculitis	Shaving or repeated rubbing of shaved area Bacteria or fungi	Red, itchy hair follicles (pimple appearance)	Regular cleansing of affected area Topical antibiotics Electric shaver instead of razor

Herpes simplex	Contact with herpes simplex virus	Type I: painful blisters on lips, mouth, and face Type II: similar lesions, located in genital area	No cure Antiviral medication to decrease frequency of outbreaks
Impetigo	Staphylococcal and streptococcal bacteria	Itchy, oozing skin lesions with honey-like appearing crust	Antibiotics Frequent cleansing of area
Pediculosis	Parasitic lice infestation	Skin itching Nits (eggs) in hair, particularly near roots	Prescription or OTC lice treatments/shampoos
Psoriasis	Inherited autoimmune disorder	Silvery, scaly, severely itchy skin lesions Can cause systemic symptoms such as joint pain and inflammation (psoriatic arthritis)	Oral NSAIDs Topical creams containing vitamins A and D Hydrocortisone cream UV treatments
Ringworm	Contact with causative fungus	Flat, circular lesions (dry/scaly or moist/crusty)	Topical and oral antifungal medication
Rosacea	Dilation of small facial blood vessels Cause of dilation is unknown	Redness Acne-like eruptions on face	Topical cortisones Antibiotics Vascular laser therapy

