



Business phone: (510) 452-4626
 Toll-free: (800) 704-8391
 Fax: (510) 452-4642
 Locations on the East and West Coasts

NAME: _____ DATE: _____

CHECKLIST FOR MEDICAL ADMINSTRATIVE POSITION (BACK OFFICE)

KEY

Please check the appropriate column of proficiency for each skill or patient care situation.

Level of Proficiency:

- 0 - Never done**
- 1 - Not done regularly**
- 2 - Six (6) months to one (1) year experience**
- 3 - More than one (1) year experience**

PATIENT GROUPS

	0	1	2	3
Infant				
Pediatric				
Adolescent				

	0	1	2	3
Adult				
Geriatric				

EKG

	0	1	2	3
Take EKG, Apply Leads, Troubleshoot, etc.				
Belts, Sensors, Bulbs, and Leads				

	0	1	2	3
Disposable				
Mounting Card				

VITAL SIGNS

	0	1	2	3
Scales: Infant, Pediatric, Adult				
Temp: Digital, Manual, Tympanic				
Radial Pulse				
Carotid Pulse				
Apical Pulse				

	0	1	2	3
BP Equipment/Cuff/ Sphygmometer				
Respirations				
Tape Measures				
Stethoscope				

RADIOGRAPHIC EXAMS

	0	1	2	3
Extremities				
Chest, Sternum				
Laterals				
Skull				

	0	1	2	3
Cervical Spine				
Thoracic Spine				
Lumbar Spine				

CLERICAL, SECRETARIAL, MEDICAL ASSISTANT: MEDICAL AREAS

	0	1	2	3
Cardiology				
Cosmetic				
Dentistry				
Dermatology				
Ear/Nose/Throat				
Emergency Room				
Endocrinology				

	0	1	2	3
Family Practice				
Gastroenterology				
General Surgery				
Infectious Disease				
Internal Medicine				
Nephrology				
Neurology				

PHLEBOTOMY

	0	1	2	3
Adult Venipuncture				
Infant/Pediatric Venipuncture				
Finger Puncture				

	0	1	2	3
Heel Puncture/Stick				
PKU Specimen Collection				

PROCEDURES

	0	1	2	3
Charting, Documentation, Consents				
Front Office: Coding, Insurance, etc.				
Exam Room Setup (e.g., Pap Smear, Supplies, Cleanup)				
Ear Irrigation				
Vision Exam, Snellen Eye Chart				
Hearing Screens				
Autoclaving				
Spirometry Treatments				
Suture Setup				

	0	1	2	3
Assist with Cast Application/Removal				
Splints, Slings, Braces, Crutches				
Restraints: Application/Use				
Growth Charts				
Splints, Slings, Braces, Crutches				
Throat Swabs				
Confidentiality of Information				
Universal Precautions and Infection Control				

LABORATORY PROCEDURES



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	0	1	2	3
Automated Complete Blood Count				
Wright's Stain				
Rapid Strip				
Glucose Check, Accu-chek				
Urine Dipstick: Protein, Glucose				

	0	1	2	3
Serum and Urine Pregnancy Tests				
Occult Blood Test (Fecal)				
Gram Stain Procedure and Interpretation				

MEDICATIONS AND INJECTIONS

	0	1	2	3
Subcutaneous Injections				
Intramuscular, Vaccinations				
TB Skin Test				

	0	1	2	3
Oral Medications, Eye, Ear and Nose Drops				
Teaching: Patient, Family				

Signature: _____ Date: _____