



CLINICAL MEDICAL ASSISTING

What is a Clinical Medical Assistant?

A Clinical Medical Assistant (CMA) is a medical support professional that performs a variety of tasks to assist physicians in providing patient care. While CMAs working in smaller practices may be required to perform some administrative tasks, those working in larger medical facilities focus mainly on providing support services directly related to patient care. Typically, Medical Assistants prep rooms and prepare patients for examinations, while helping manage medical supply inventories. CMAs may also assist nurses and physicians providing direct patient care by taking medical histories, charting vitals, and assisting in procedures. Some even perform more advanced tasks under the supervision of a physician such as cleaning and dressing wounds, removing sutures, collecting blood and other specimens, as well as administering medication.

Characteristics of a successful Clinical Medical Assistant: Excellent communicator, ability to multitask, organized, ability to handle stress and think clearly on their feet. One must be compassionate while still maintaining a professional distance.

Career Outlook:

Employment of medical assistants is projected to grow 16 percent from 2021 to 2031, much faster than the average for all occupations. About 123,000 openings for medical assistants are projected each year, on average, over the decade. Many of those openings are expected to result from the need to replace workers who transfer to different occupations or exit the labor force, such as to retire.¹

1. Bureau of Labor Statistics, U.S. Department of Labor, Occupational Outlook Handbook, Medical Assistants, at <https://www.bls.gov/ooh/healthcare/medical-assistants.htm> (visited July 03, 2023).

Conference Room #408

100 McMorran Boulevard
1-866-516-8274 (toll free)

Port Huron, MI 48060
207-449-1242 (fax)

www.academyofmedicalprofessions.com info@academyofmedicalprofessions.com

CERTIFICATE PROGRAM

WITH CCMA NATIONAL CERTIFICATION

All Inclusive - Tuition Includes:

- All Textbooks and supplies
- CCMA Practice Exams
- Resume Building, Job Search, and Interview Skills
- NHA CCMA Exam Fees
- Externships are suggested and may be required in your area; we will assist you in obtaining them through our partners.

Class Calendar

Hybrid Program: A combination of Online Classes and in-person skills held locally.

Online Tuesday evenings for 16 Weeks.

5:30 PM to 8:30 PM

In-Person Clinical Skills Lab

- **Locations vary and will be arranged prior to program start.**

Zoom Class Start Dates:

Tuesday, October 17, 2023

Tuesday, March 5, 2024

Tuesday, June 18, 2024



CLINICAL MEDICAL ASSISTANT - WHAT YOU WILL LEARN:

- Medical Terminology, Body Systems, HIPAA
- Vital signs, PPE, infections control, wound care
- EKG, OB/GYN, and surgical procedures
- Phlebotomy, Injections, Immunizations
- Pharmacology and Lab Procedures
- Professionalism, basic procedural coding and administrative duties

COURSE DESCRIPTIONS

• **Clinical Medical Assisting (CMA)- 16 Weeks.** This program will be held a total of 6 hours, twice a week for 16 weeks. Classes meet via Zoom on Tuesday evenings, and Clinical Skill Labs are held in person at an adult education center near you. Locations and days for labs may change each term. Upon completion of the program, you will take your national certification of CCMA (Certified Clinical Medical Assistant). All books, supplies, and exam fees are included. \$3,750.

• **Medical Assistant Professional Program- 32 Weeks.** This all-inclusive program combines the above Clinical Medical Assistant program and our Certified Medical Administrative Assistant. Most employers prefer a Medical Assistant to be able to work both front and back office. This 32-week Medical Assistant Program provides you with cross-training for both clinical and administrative/insurance/billing tasks. \$6,350 when taken with Clinical Medical Assistant program. If only taking the Medical Administrative Assistant Program, please see Medical Administrative Assistant information package for costs and class information.

ENTRANCE REQUIREMENTS

All applicants must be 18 years of age. A high school diploma or GED equivalent is also required for most employment opportunities but is not required to take or start the training. ***No criminal record *** please contact the school for more information should you have any prior record.

Must submit a copy of current, up-to-date immunization records (titers preferred) before attending Labs. Measles Ab (IgG) Qual; Mumps (IgG) Qual; Rubella Ab (IgG) Qual; Varicella Zoster Virus (IgG) Qual; we do not require Hep B, tetanus, flu, COVID, or TB test, but these may be needed by several clinical facilities.

Students must be aware and agree to participate in “sticking/drawing” each other in class and will sign a consent prior to the first class.

ATTENDANCE POLICY

The attendance policy set forth by the Academy of Medical Professions is strictly enforced.

Students attending Live Classes are expected to attend 100% of all scheduled meetings; missing a scheduled meeting will require the student to watch the recorded version of the meeting prior to attending the next lecture.

Self-Paced students are expected to watch recorded lectures and communicate weekly with the Academy or their assigned instructor. Students whose attendance drops below 70% (not withstanding mitigating circumstances), may be dis-enrolled from the program.

STANDARDS OF PROGRESS

Students whose academic average drops below 70% will be placed on academic probation. We will work with the student to develop an action plan for success, to include specific goals and target dates. If the student is unsuccessful in meeting the goals and target dates of the action plan or success, the student will be subject to academic dismissal with no refund.

REFUND POLICY

1. You may terminate the Enrollment Agreement or training at any time. If you do so, you must inform the school, not the instructor, in writing. Termination will become effective upon receipt of the written notice. The refund will be based on notification week corresponding with your course assignments or week associated with start date of the program.

2. If you terminate before you commence training, you will receive a refund of the money paid to the school, minus \$500 for the course books, unless they are returned unused, unopened. The \$300.00 application fee is nonrefundable. If no unused books are returned, the total subtracted from the refund will be \$800.00.

3. If you terminate within the first 3 weeks, you will receive a prorated refund equal to the unused portion of monies received from your last day of attendance, or week corresponding with your course assignments, less the application fee of \$300.00 and the book fee of \$500.00. If you terminate any time after week 3, there will be no refund. If you are on a payment plan, the balance will be effective as of drop date, 30 days to pay in full or sent to collections.



CLINICAL MEDICAL ASSISTANT COURSE ENROLLMENT AGREEMENT

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CLINICAL MEDICAL ASSISTANT COURSE ENROLLMENT AGREEMENT: Port Huron Campus

NAME: _____ SS# _____
DATE OF BIRTH: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____ Race: _____
PHONE NUMBER: _____ (H) _____ (C) Ethnicity: _____
E-MAIL: _____ Gender: _____
COURSE START DATE _____
WHERE DID YOU HEAR ABOUT OUR COURSES? _____

PAYMENT METHOD

- \$500 Deposit is required for Payment Plan Option
- ****Please make checks payable to the Academy of Medical Professions****
- \$300.00 Non-refundable enrollment fee is **already included** in the price
- Voucher Payments: (I.E. Goodwill, Dept Of Labor, Mycaa, Etc.)

ONE TIME FULL PAYMENT- Check one, see next page for additional Payment Options

Self-Pay Voucher

_____ _____ **\$3,500** Clinical Medical Assisting (CCMA Certification)

_____ _____ **\$6,425** Medical Assisting (CCMA, CMAA, Billing Certificate)

Voucher Payments:

Name Of Organization Paying: _____
Point of Contact: _____

CONTRACT AGREEMENT

I, _____ hereby agree to the above mentioned terms of the program. I have read and understand the REFUND POLICY and STANDARDS OF PROGRESS for this course and agree to its terms.

SIGNATURE: _____ DATE: _____

PAYMENTS MADE BY CREDIT CARDS

CREDIT CARD # _____

EXPIRATION DATE: _____ SECURITY CODE: _____

NAME AS IT APPEARS ON CARD: _____

BILLING ADDRESS IF DIFFERENT FROM REGISTRATION FORM:

FULL PAYMENT \$ _____ Date you wish to have payment taken: _____

PAYMENT PLAN DOWN PAYMENT Amount \$500.00 Date to take out deposit from credit card: _____

PAYMENT PLANS

All payment plans do require a \$500 down payment which is deducted from the cost of tuition

Choose One program

Payment Plan

_____ \$3,750 (CMA)

\$500 Down Payment/ \$325 for 10 months.

_____ \$6,675 (Both Programs combined) Contact school for payment plan

Date you wish to have monthly payment taken: _____ of the month.

_____ (initial) I agree to the payment plan chosen above

_____ (initial) I agree that if I have a payment plan, that I will keep it in good standing, and that if my account is sent to collections, I am responsible for the legal fees, late fees, and payment plan I have agreed to

Payment Plan SIGNATURE: _____ DATE: _____