

STAFFING SPECIALISTS

OPHTHALMIC MEDICAL ASSISTANT SKILLS CHECKLIST

This self evaluation is for assessing your experience in specific clinical areas. This self evaluation will not be a determining factor in accepting your application to become an employee of Supplemental Health Care.

1 = No Experience 2 = Limited Experience 3 = Experienced 4 = Highly Skilled

(All tasks performed with appropriate licensed supervision)

GENERAL DUTIES	1	2	3	4
Admit Patients				
Discharge Patients				
Vital Sign Monitoring				
Isolation Techniques				
Advance Directives				
Documentation				
Reporting to Supervisor				
Assist w/ Patient Health History				
Assist with Patient Exams				
Assist with Consent Forms				
In-office Minor Surgical Assisting				
Request Xray Studies as Ordered				
Request Lab Studies as Ordered				
Assist with Health Education				
Assist with Discharge Instructions				
HIPAA Regulations				
Receive Patient Phone Calls				
Screen / Direct Patient Phone Calls				
Receive Provider Calls				
Screen / Direct Provider Calls				
Receive Screen Correspondence				
Coordinate / Schedule Referrals				
Prepare Reports as needed				
Administrative Procedures				
Monitor Procedure Coding				
Facilitate Billing / Insurance				
Knowledge of Common Ocular Meds				
Observe for Medication Adverse RXN				
Alert Licensed Staff to Adverse RXN				
Call Rx to Pharmacy as Directed				
Instrument Care & Maintenance:				
Aseptic Technique				
Sterilization				
Maintenance of Supplies & Equipment				

OPHTHALMIC SKILLS	1	2	3	4
Basic Tonometry				
Indention Tonometry				
Applanation Tonometry				
Advanced Tonometry				
Basic Ocular Motility				
Visual Field Testing				
Interpupillary Distance				
Ocular Prosthesis				
Low Vision Aids				
BASIC OPHTHALMIC SKILLS	1	2	3	4
Measure / Record Acuities				
Color Vision Testing				
Lensometry				
Amsler Grid				
Evaluation of Pupils				
Keratometry				
Schirmer's Test				
Dilate as Needed				
Care of Patient With:				
Glaucoma				
Ophthalmic Emergency				
Ocular Dressing & Shields				
Laser Surgery				
Macular Degeneration				
Detached Retina				
Other Ocular Disease				
Diabetes				
Hypertension				
Cancer				
Atherosclerosis				
Infection				
BASIC REFRACTOMETRY	1	2	3	4
Auto-Refractometry				
Advanced Dispensing & Adjusting				
Refractometry				
Retinoscopy				
Contact Lenses - Basic Principles				

Age-Appropriate Care: Ability to adapt care to incorporate normal growth and development, adapt method and terminology of client instructions as it relates to the age and comprehension level of the client, and to ensure a safe environment - reflecting specific needs of the client and various age groups.

AGE	1	2	3	4
Newborn (birth-30 days)				
Infant (30 days - 1 year)				
Toddler (1 - 3 years)				
Preschooler (3 - 5 years)				
School Age (5 - 12 years)				

AGE	1	2	3	4
Adolescents (12 - 18 years)				
Young Adults (18 - 39 years)				
Middle Adults (39 - 64 years)				
Older Adults (64+ years)				

The information I have given is true and accurate to the best of my knowledge, and I hereby authorize Supplemental Health Care to release this Skills Checklist to staffing clients of Supplemental Health Care. This skills self evaluation is to be updated annually.

Applicant Signature

Date

Applicant Name & Title (please print)

SHC Representative Signature

Date