

# A Training Program For Medical Assistants

By JAMES BLOOM, M.D.

The individual physician's burdens are coming to be shared more and more by auxiliary personnel. Described are the conception and birth of an auxiliary which contributes to the conservation and amplification of medical manpower.

**GRADUATES** of the Harrisburg (Pa.) Institute of Medical Arts, a school for administrative assistants and secretaries, because of their unique training, are capable of taking medical case histories for screening by

Dr. Bloom is medical director of the health and welfare department of the International Ladies' Garment Workers' Union for central and western Pennsylvania. He is also on the staff of the Harrisburg (Pa.) Hospital. Dr. Bloom has pioneered in training young women for jobs as tumor clinic secretaries and medical history takers at the recently founded Harrisburg Institute of Medical Arts, where he is president of the board of directors. Public Health Reports published a short account of Dr. Bloom's experience with the ILGWU health survey program, which features referrals to private physicians on the basis of detailed medical histories, in the November 1952 issue (p. 1115). physicians and of doing expert work as medical or laboratory technicians.

The recently founded nonprofit school offers a course of training for tumor clinic secretaries, tumor clinic managers, or general medical assistants. This training has been made possible through the institute's affiliation and close relationship with the Harrisburg Hospital, which has a special tumor clinic program, and with the cooperation of the Harrisburg State Mental Hospital.

The institute offers an extensive curriculum not available in private schools. Most other schools, unlike the institute, have no affiliation with a hospital. It is believed to be the only school of its kind that is housed in a hospital. Generally, other schools training medical assistants are organized for profit. Tuition charges at the institute are \$400 a year. The training course at Harrisburg extends over an 18-month period and is divided into three departments: secretarial, medical orientation, and medical laboratory techniques. The total number of curriculum hours exceeds the standard 2-year college course.

## **Experimental Classes**

When the demand for personnel became acute during the early 1940's, the medical profession and the hospitals suffered, along with industry, from labor shortages. Auxiliary nonmedical personnel were trained by the Armed Forces to assure the continuation of vital services, and the contributions of these specially trained intelligent young men have since earned enthusiastic commendation. From such experience and observations, the Harrisburg Institute was conceived, for the need for skilled workers to assist the medical profession and medical institutions was still urgent.

The first effort at training came as the result of attempts to solve a trying situation in the conduct of the tumor clinic program of the Harrisburg Hospital. It produced a tumor clinic secretary whose performance was greatly admired by hospital representatives who had occasion to attend sessions of the tumor clinic. One hospital made repeated, earnest pleas that a young woman be similarly trained for its tumor clinic.

A more formal effort at training was begun in June 1946 when one student was given a condensed, concentrated course of training over a 4-month period with commendable results.

The next class was composed of 3 young women, 2 of whom were graduates of a 2-year medical secretarial course. After 4 months' instruction, this group manifested the same high quality of training. The limited experience from this early training program, during which no tuition was charged, encouraged plans to establish a school with a formal course to train young women as auxiliary medical personnel. Such plans followed expert technical advice on planning the curriculum and on solving administrative and promotional problems.

The venture was launched by incorporating the institute under the Pennsylvania laws in the early part of 1948 and setting it up as an affiliate of the Harrisburg Hospital. Initial expenses were met from individual contributions. Later in 1948, approval of the Pennsylvania Department of Public Instruction was obtained.

Most of the 10 members of the school's board of directors are on the staff of the Harrisburg Hospital. Two members, the director of vocational education of the Harrisburg School District and the public relations officer from the Pennsylvania State Department of Agriculture, assisted with the early organization of the institute. The superintendent of the Harrisburg State Hospital is also on the board, and another member is a local businessman. The directors serve without pay.

## **Admission Requirements**

Classes were small at first and even now are limited to only 18 students. Admission requirements include graduation from an accredited high school or its private school equivalent, a scholastic rating in the upper two-fifths (or upper half) of a class, and a favorable evaluation of the applicant's character and personality based on a required personal interview. At least twice as many applicants have been rejected as have been accepted.

Special provision is made for those who have already acquired secretarial training outside the institute to permit them to take the additional training necessary for graduation. The courses of study are of college grade, sufficiently broadened to equip the student with special skills, and lead to special certificates awarded by the institute's board of directors.

The institute's program of instruction might be judged ambitious, even presumptuous, but experience has established its practicality. Here, a note of explanation is imperative—the only purpose of the elaborate prospectus issued by the institute is to develop an understanding of, and interest in, the work which the student will be called upon to perform upon graduation.

Let's consider anatomy, for example. Naturally, there is no thought of conveying the impression that this is a course of great detail and including the anatomical minutiae. This would be superfluous, if not actually ridiculous. The goal is only to develop an intelligent understanding of anatomical matters as they concern a medical assistant. The same applies to the other subjects in the curriculum which might be considered "ultra." In choosing students from among the higher brackets of scholastic accomplishment, the institute is dealing with young adults who get no satisfaction from doing a task mechanically—they like to know something about the work they are called upon to do and something about the subjects with which they are dealing.

## **Secretarial Training**

The institute emphasizes certain points in the training program which will make its graduates particularly useful both in the tumor clinic and in the private physician's office. The outstanding feature of the program stems from the skill the youthful medical assistants acquire in taking medical histories. This is of significance in conserving the time of the tumor clinic physicians. The comprehensive history which these young women are trained to take becomes a valuable part of the record of the potential cancer case (see inset). A physical examination is not nearly so effective, in the opinion of many physicians, in discovering the presence of chronic disease as is a carefully taken medical history. If the history can be supplemented with selected laboratory determinations, a conscientious physician or medical director can then determine the patient's need for further diagnosis and treatment.

An ability to write rapid, accurate stenographic notes and to transcribe them with accuracy, coupled with an understanding of medical terminology, are the two primary essentials of an efficient medical secretary. Hence, medical shorthand, typewriting, and general training in secretarial practices plus a study of medical terminology and nomenclature take first place in the institute's curriculum.

### **Medical Assistant Training**

Instruction for training the young women as medical assistants includes subjects which provide the best opportunity for practical orientation in the field of medicine. The objective of this phase of study is obviously not to endow the student with an ability to practice medicine. Merely by developing an understanding and interest in her work, however, it prepares her for intelligent assistance to the physician.

Medical orientation includes constructive courses in anatomy, physiology, pathology, medical psychology, medical ethics, materia medica and prescription writing, a basic course in bacteriology, and an introduction to medical science through lectures in the medical specialties. It also covers instruction in first aid, in the nursing arts with special application for the physician's office practice, and in office procedure and conduct.



Graduate of the Harrisburg Institute of Medical Arts taking a medical case history—part of the service of the mobile health survey project, International Ladies' Garment Workers' Union, in central and western Pennsylvania.

The few nursing arts required in the physician's office are easily mastered; for example, the simple art of draping a patient for the different examination procedures, the techniques of instrument sterilization, and the preparation of medication for parenteral administration. There is no thought of replacing the nurse, but certainly, with the shortage of graduate nurses, she has more vital obligations at the

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# Medical History –

## (First work assignment of a 19-year-old graduate of the Harrisburg Institute of Medical Arts)

Mrs. D. L., Camp Hill, Pa., 2/4/54. Age: 30; Children: 1; B. P.: 110/80.

C. C.: (1) Headaches.

(2) Intermenstrual bleeding. She describes this as "just like when I had the tumor."

H. P. I.: Patient first became aware of intermenstrual bleeding a year ago. She experiences this bleeding 3–4 times weekly. The discharge is described as a mixture of blood and a clear, colorless fluid. The headaches are attributed to worry about the condition just mentioned. Patient does not remember when the headaches first began to occur. She sometimes experiences nausea with these headaches and takes 2–3 aspirins almost every day with little or no relief.

WEIGHT: 115 lbs. This is her best weight.

HEIGHT: 5 ft., 1 in.

HEAD: Headaches described above. Dizziness associated with menstrual periods. No fainting. EYES: Wears glasses for close work. Considers vision to be good. No abnormalities.

EARS: 0.

NOSE: 0.

MOUTH: Full complement of teeth which are said to be in good condition. No abnormalities. PHARYNX: Tonsillectomy at the age of 8 with no complications. No abnormalities.

RESPIRATORY: Experiences "slight night sweats." These are attributed to "nerves." No abnormalities.

CARDIAC: Ankle edema while working and close to menstrual period. No abnormalities.

G. U.: No abnormalities.

MENSES: Regular 28 days. Duration 3–5 days. Flow: Profuse the first few days with "clotting," then moderate. Dysmenorrhea the first day. Two years since last internal examination.

O. B.: One pregnancy. She was told by her physician that "she was too small and the baby was too large;" however, pregnancy was full-term and delivery normal. She says that ever since the birth of her child, 11 years ago, she has had "trouble."

G. I.: Patient says that sometimes her appetite is good and other times she has no desire to eat.

Qualitative dyspepsia for candy, fruit, and "starches." "Always" experiences quantitative dyspepsia. This condition first occurred 2–3 years ago. Patient has to take laxatives "most of the time." No rectal bleeding, no hemorrhoids.

NERVES: "Very bad."

EXTREMITIES: "Pain in the knees all the time." Patient first became aware of this condition about 2 months ago.

P. M. H.: Patient always enjoyed good health until the birth of her child. No serious illnesses. Five years ago she had a tumor removed from her uterus. Hospitalization—14 days.

FAMILY HISTORY: Father, age 62, contracted tuberculosis about a year ago. As far as the patient knows he is well at this time. She says they keep his lung collapsed, and he goes to the hospital once a week for treatments. Mother, age 62, had a "touch of skin cancer on the lip" about 2 years ago. Patient says the cancer is now "cleared-up." Three sisters. One sister has cancer of the "stomach." Patient says this sister has had five operations and now all they do is "tap" her. A second sister, also suffering from a tumor, had an operation in which "they removed most of her insides." Patient says this sister "doesn't look good." This sister is now being given weekly "shots." A third sister who had "kidney stones" is now in good health. Two brothers living and in good health. Patient reveals that all of her "mother's people" have died of cancer.

SOCIAL: Sleeps 10–11 hours nightly but does not rest well. No cigarettes, no alcoholic beverages. Husband living and in good health. Diversions: Watching sports, movies, dancing.

Dr. X, Camp Hill, Pennsylvania.

Last saw him 1½ years ago because she thought uterine tumor was "growing back." No laboratory studies done.

Lat. imb.: 7 Bil. vis.: 20/29 Rt. eye: 20/25 Lt. eye: 20/25.

EDITOR'S NOTE: To protect the identity of the patient, initials and location have been changed.

bedside. Only a limited portion of her training is applicable in office practice.

## Laboratory Techniques

Students are given several months' training in photography also and are taught how to assist in the modeling, painting, and preservation of moulages. They are trained in the basic mechanics of laboratory procedures and in the clinical significance of these procedures. These take in the most commonly employed laboratory tests and examinations and include complete blood counts, urinalyses (physical, chemical, and microscopic), blood sedimentation rates, and blood chemistry tests such as blood sugar and blood urea determinations. Practical work assignments are provided in the laboratories of Harrisburg Hospital.

Unlike many courses in medical technology, where the specimens studied are those taken from the students themselves, students at the institute have access to an almost unlimited supply of material from hospital patients who represent a great variety of pathology.

The medical assistant, properly trained, has an important advantage in that she can perform all of those laboratory procedures which a private practitioner would like to do in his own establishment. It requires little imagination to recognize such an advantage—there is less or no hesitancy in ordering those tests which would facilitate more accurate diagnoses at a more moderate cost to the patient and with greater satisfaction to the practitioner.

### The Hospital Setting

With the exception of the secretarial courses, which are provided by special arrangement with a well-established secretarial school in Harrisburg, all instruction is given at either the Harrisburg Hospital or the Harrisburg State Hospital. The school emphasizes direct contact with the professional staffs of both institutions.

To familiarize students with methods of hospital administration, each is required to spend a prescribed period of time assisting in the administrative departments of the Harrisburg Hospital. Various other departments of this

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hospital are available for classroom, research, library, and other instructional uses. These include the school of nursing, X-ray, and photographic rooms.

The trainees are given an opportunity to become thoroughly familiar with medical procedures by attending and observing transactions of the tumor clinic at Harrisburg Hospital. They must attend 12 autopsies. They are required to attend clinics and to sit in on and observe actual staff meetings of the Harrisburg State Hospital.

Following attendance at operations, clinics, and staff conferences, "quiz" sessions are conducted. Students are required to ask questions of the physician in charge and to participate in discussions relative to the cases and the related discussions. Such conferences between the students and the professional staff build valuable learning experiences and develop an orientation which is of great value in the work for which the student is being prepared.

Whenever possible, the teaching staff is selected from Harrisburg Hospital's own medical staff and from among its graduate nurses, medical record librarians, laboratory technical personnel, and the institute's own graduates working at the local hospitals or working in Harrisburg. Psychologists and an instructor in bacteriology have supplemented the instruction given by the hospital staff. All nonmedical teaching personnel are paid a variable stipend on an hourly basis, and the medical components of the teaching staff are offered an honorarium. Some physicians have contributed their services.

## **Demand for Graduates**

The demand for trainees far exceeds the supply. Students are assigned to their future jobs long before graduation. Employers have frequently asked for additional graduates.

Approximately 61 students have been graduated. Twenty of these are working in physicians' offices, 20 in hospitals, and 4 each are working in clinical laboratories and in medical assignments in government military installations. Six are employed by the mobile health survey program of the International Ladies' Garment Workers' Union. Two are working in insurance company medical departments, and three are engaged in State health department cancer activities. One graduate is employed by a manufacturer of pharmaceutical chemicals and another by an engineering company. The increasing number of teaching enterprises being created for the purpose of training medical assistants is substantial proof that there is a quickening recognition of the medical profession's need for trained assistants to lighten its ever-increasing burdens.

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