OBJECTIVES FOR : EKG Technician

Training and Certification may be obtained in:

Health Science Clinical Study 5560 – 2 unit course offering

Grade Level: 12 – must be a high school graduate to sit for exam

EKG rhythms provide important data for the diagnosis of heart conditions. As a Certified EKG Technician (CET), you’ll have the credentials nearly all healthcare employers require to perform the critical tasks of administering EKGs, as well as Holter monitoring and stress testing. These tests can be performed during physical exams, when cardiovascular problems are suspected, or in preparation for surgery.

By administering EKGs — testing the electrical activity of the heart through small electrode patches attached to the body — you’ll be making a life-changing difference by helping people of all ages prevent and treat heart disease.

As an EKG Technician you may perform some or all of the following tasks:

- Set up and administer EKGs (electrocardiograms) and stress tests
- Prepare patients for Holter or ambulatory monitoring
- Edit and deliver final test results to physicians for analysis
- Schedule appointments
- Transcribe physicians’ interpretations

The need for qualified EKG technicians continues to rise as the aging population in America grows (and with it, the prevalence of heart-related conditions). Earning your CET will help you launch a successful and meaningful career that can help make a difference in countless lives. Whether you seek full-time or part-time employment, the opportunities in this profession are flexible and in high demand. Plus, the added skills of Holter monitoring and stress tests required for the Certified EKG Technician (CET) will help you to be even more competitive as you launch your healthcare career.

Some EKG certification programs only test EKGs. Your CET also gives you credentials to perform Holter monitoring and stress testing, opening up more options for your future and giving you a competitive advantage in the job market.

Candidate Handbook: http://www.nhanow.com/docs/default-source/pdfs/handbooks/nha-candidate-handbook4d5de88694956aeb8535ff0f00b0a11e.pdf?sfvrsn=2
Contact: Lyndsey McDonald – Career and Technical Education Division
National Healthcareer Association | 11161 Overbrook Rd | Leawood, Kansas 66211
p 978-460-2605 | f 913-661-6285 | www.nhanow.com

Resources are located on the NHA website:


<table>
<thead>
<tr>
<th>NHA Certified Electronic Health Record Specialist (CEHRS)</th>
<th># scored items on test</th>
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<tbody>
<tr>
<td><strong>OBJECTIVES</strong></td>
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<tr>
<td>1. Software Applications and Equipment</td>
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<tr>
<td>A. Application Operation</td>
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<tr>
<td>1. Manage backup of EHR data (e.g., restore patient data)</td>
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<td>2. Execute EHR work flows within a healthcare facility (e.g., clinical and administrative protocols).</td>
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<td>3. Retrieve patient information from the EHR database.</td>
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<td>4. Store patient information in the EHR database.</td>
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<td>5. Acquire external patient data.</td>
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<td>6. Edit EHR with proper privileges.</td>
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<td>7. Perform routine EHR clinical and/or administrative tasks within a healthcare facility per facility protocols.</td>
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<td>8. Transmit patient data for external use (e.g., insurance, pharmacies, other providers).</td>
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<td>9. Execute software updates.</td>
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<td>10. Maintain inventory of software and hardware assets.</td>
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<td>11. Operate integrated devices with EHR software (e.g., scanners, fax machine, signature pads, cameras).</td>
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<td>12. Access clinical vocabularies in a health information system when appropriate.</td>
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<td>B. Practice Management</td>
<td>12</td>
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</table>
1. Maintain a provider database for the purpose of continuity of care.

2. Develop clinical templates for data capture (e.g., by diagnosis, by procedure, by practice).

*based on the results of the Job Analysis Study completed in 2011

3. Coordinate patient flow within the office (e.g., scheduling, patient registration and verification, patient referrals).

4. Provide ongoing end-user training of EHR software.

5. Provide end-user technical support of EHR software.

6. Edit existing searchable databases (e.g., code changes, patient demographics, insurance carriers).

7. Identify inconsistencies between patient information and practice management software.

2. Insurance and Billing

   A. Enter coding and billing information in the EHR.

   B. Abstract diagnoses and procedural descriptions from the medical record.

   C. Enter diagnoses and procedural descriptions from the medical record into the EHR.

   D. Generate insurance verification reports.

   E. Generate patient statements.

   F. Post payments to patient accounts at the time of visit.

   G. Generate encounter forms/super bills.

   H. Generate face/admission sheets.

   I. Find codes in the ICD, CPT, and HCPCS manuals.

3. Charting

   A. Monitor the provider documentation for completeness and accuracy.

   B. Categorize patient’s health information into a reliable and organized system that promotes error identification.

   C. Enter live data into an EHR.

   D. Assist clinicians with charting.

   E. Locate requested information in a patient chart.
4. Regulatory Compliance

A. Adhere to professional standards of care as they pertain to medical records.
B. Maintain confidentiality of Protected Health Information (PHI) in compliance with HIPAA Privacy Rule and facility policy.
C. Maintain security of Protected Health Information (PHI) in compliance with HIPAA Security Rule and facility policy.
D. Detect threats to the security of electronic information
E. Reconcile threats to the security of electronic information
F. Audit compliance and report to proper enforcement officer.
G. Release Protected Health Information (PHI) in accordance with HIPAA and facility policy.
H. Participate in internal audits of medical records (e.g., consent forms, Release of Information forms (ROI), signature on file).
I. Comply with patient safety standards regarding abbreviations in a health information system.
J. Execute a plan for data recovery in the case of a catastrophic event.
K. De-identify Protected Health Information (PHI) when directed.

5. Reporting

A. Generate statistical reports for clinical Quality Improvement (QI) measures.
B. Compile medical care and census data for continuity of care records (e.g., statistical reports on diseases treated, surgery performed, use of hospital beds for clinical audits).
C. Generate statistical reports for financial Quality Improvement (QI) measures.
D. Generate aging reports by guarantor or carrier.
E. Generate financial analysis reports by provider, diagnosis, or procedure.