To the Hiring Physician or Practice Manager:

RE: Graduates of the Zoe Med Tech Academy Clinical Medical Assistant Program — Attestation of Training and Certification

I am writing on behalf of the graduates of Zoe Med Tech Academy, the Clinical Medical Assistant program in Barnesville, Georgia. This is not a sales letter. I am telling you what these graduates were taught, how they were credentialed, and why you should include them in your practice.

Let me start with the part that matters most to you.

A medical assistant does not simply save you steps. A well-trained one protects you. If the cuff is too small and the blood pressure reading comes back twelve points high, you may treat a patient who does not need treating. If a tube sits unlabeled on a counter for four minutes, you have a result you cannot trust and a patient you have to stick twice. If someone says the wrong thing in a waiting room, you have a liability problem that no amount of good intention will undo. Every one of those failures is preventable with training. Training is exactly what we did.

The program consists of 256 hours of classroom and laboratory instruction plus an eight-week supervised clinical externship in a working practice. This means the person sitting across from you has already done this work with real patients on a real schedule, not only in a classroom. Here is what each graduate completed:

Medical ethics and professional conduct. Punctuality, appearance, honest documentation, respect for the chain of command, and — the hardest lesson — what to do when you do not know something. The answer we drilled: say so, then ask. A graduate of this program will not cover an uncertainty with a guess.

Patient confidentiality and HIPAA compliance. Minimum necessary disclosure. No hallway conversations. No screens left open. No discussing a patient with a spouse, a parent, or an adult child without authorization on file. And no looking up a neighbor's chart — which, in a town this size, is the rule that gets tested first. We taught it until it became reflex rather than policy.

Accurate blood pressure and pulse measurement. Correct cuff size selected for the arm, not grabbed from the wall. Bare arm supported at heart level, back supported, feet flat, five minutes seated, no conversation during the reading. They know the common sources of error — cuff over a sleeve, legs crossed, arm dangling, rushing the reading, and the old habit of rounding to a comfortable number. They can take a manual auscultatory reading, not only an automated one, and they know to repeat and document an elevated reading rather than record it and move on. Pulse is counted a full sixty seconds when the rhythm is irregular, not fifteen seconds and multiplied. They are all tested with double-headed teaching stethoscopes, so the instructor hears exactly what the student hears at the same moment. A misread cannot pass unnoticed.

Phlebotomy and specimen handling. Two-identifier patient verification before anything else. Site selection and assessment, correct order of draw, tourniquet released within one minute, safety-engineered devices, immediate sharps disposal. Tubes are labeled at the patient's side, in the patient's presence — never at a station down the hall, never later. Each graduate performed 40 venipunctures under direct observation until an instructor certified competence.

Scope-of-practice boundaries. This is the section I would read first if I were you. These graduates can explain what a test is and how it will be done. They will not tell your patient what a result means, whether one medication is safe alongside another, what the diagnosis appears to be, or what to expect next. They were taught one sentence

and made to use it: "That is a good question for the doctor — let me write it down so the doctor answers it before you leave." They will not guess at an answer that belongs to you.

National certification. Each graduate sat for and passed the Certified Clinical Medical Assistant (CCMA) certification examination administered by the National Healthcareer Association (NHA). The credential is earned, not conferred, and verifiable directly with the NHA.

Whether it is law, medicine, or engineering, people coming out of training need experience. And I will not tell you that every graduate is right for every practice. Character, temperament, and fit are yours to judge, and you should judge them hard. What I will tell you is that the training behind this credential is real, the standards were not relaxed for anyone, and no one reached your desk who could not perform these skills correctly in front of an instructor who was looking for the error.

If you want to talk about a particular graduate, call me. I answer for them personally.

Sincerely,

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