



Certified Clinical Medical Assistant (CCMA) Externship Skills Checklist

Student Name: _____

Facility Name: _____

Supervisor: _____

Date Started: _____

Date Completed: _____

INSTRUCTIONS FOR USE: This checklist is to be completed by the externship supervisor during the student's externship experience. Each skill should be marked under the appropriate column to indicate whether it was Observed, Performed Under Supervision, Performed Independently, or not performed. The supervisor should initial each skill verified and provide comments as needed. Please ensure all sections are completed before the end of the externship. The final checklist must be signed by both the student and supervisor.

A. Administrative Skills

Skill	Observed	Performed Under Supervision	Performed Independently	Did not perform or observe	Supervisor Initials	Comments
Greeting patients and checking them in						
Verifying insurance coverage						
Scheduling appointments						
Answering phone calls professionally						
Managing electronic medical records (EMR)						
Filing and scanning documents						

B. Clinical Skills

Skill	Observed	Performed Under Supervision	Performed Independently	Did not perform or observe	Supervisor Initials	Comments
Vital signs (BP, HR, Temp, Respiration)						
Height and weight measurements						
Patient history and chief complaint intake						
Performing EKG						
Administering injections (IM, SQ, ID)						
Venipuncture and capillary blood draws						
Performing CLIA-waived tests (e.g., glucose, urinalysis)						
Sterile and non-sterile dressing changes						
Assisting with minor procedures						

C. Communication & Professionalism

Skill	Observed	Performed Under Supervision	Performed Independently	Did not perform or observe	Supervisor Initials	Comments
Communicates clearly with patients						
Demonstrates professionalism and teamwork						
Practices HIPAA and confidentiality standards						
Responds to feedback appropriately						



Supervisor Comments/Recommendations:

Supervisor Signature: _____ Date: _____

Student Signature: _____ Date: _____