

Secretary Medical

As of 6/12/2018

General Information

| | | | | |
|---------------|--------------|-------------------|-----------------|----------|
| Profile ID: | B00078_98922 | Secretary Medical | Profile Status: | Active |
| Profile type: | JOB | Job | Status Date: | 9/8/2014 |

Job Summary

Description

A Medical Secretary working within the Georgia Poison Center department will primarily act as a public health specialist. Primary duties include answering calls and servicing any caller from the "1-866-Pub-Hlth" Georgia Public Health Hotline, functioning in an answering service capacity. The specialist will provide appropriate information to callers and utilizes best resources in the shortest time. Specialist will compile and record calls involving public health inquiries, reports public health reports and situations to the appropriate administration staff and state epidemiologists. They assist clinical staff by answering and documenting pill identification inquiries and conduct poison center caller satisfaction surveys. Specialists will be involved in training other office secretarial personnel, and perform various clerical and administrative functions, independently and when requested. The specialist will be under the direct supervision of a Specialist in Poison Information.

Job Responsibilities

Description

Using telephone communications: serves as a resource to the lay public who seek public health advice, refers these individuals to the appropriate resource based on the urgency of the request, and provides these services after hours, on weekends, and on holidays.

Attends appropriate safety training and other mandatory sessions, including staff meetings.

Ascertain all necessary information from the caller and an accurate history from caller prior to making decision on a referral plan.

Documents all incoming calls and referral plans electronically in GaPC data base, ensuring all information is complete and accurate.

Tactfully addresses errors or incomplete documentation with the appropriate individual.

Assists clinical staff by conducting pill identification inquiries.

Conducts poison center caller satisfaction surveys.

Demonstrate flexibility and adaptability in staffing a 24-hour emergency telephone service while remaining punctual and on-time for every shift.

Demonstrates sensitivity to caller's level of knowledge and degree of stress in terms the caller can understand and act upon.

Uses downtime to perform other administrative duties assigned.

Education

Description

Required:
High School Diploma or GED is required.

Preferred:

Experience

Description

Required:
One to three years of experience is required.

Preferred:

Skills/Cert/Licenses

Description

Required:
-Must possess knowledge of medical terminology and excellent interpersonal skills, including good telephone etiquette.

- Must be able to perform basic history taking tasks.

- Must possess knowledge of various software applications including but not limited to Word, Excel, Powerpoint, etc.

- Must be able to accurately 40 - 45 WPM.

Preferred:

Bilingual fluency preferred in Spanish or another language widely spoken by callers to the Public Health Department.

ADA Competency Requirements

| Content Item ID | Description | N/A | 0% - 33% | 34% - 66% | 67% + |
|-----------------|------------------------|--------------------------|-------------------------------------|-------------------------------------|--------------------------|
| 1000 | Chemical Hazards | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1001 | Dust/Mites Hazards | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 1002 | Electrical Hazards | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1003 | Extreme Cold | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1004 | Extreme Heat | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1005 | Extreme Noise | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1006 | Extreme Swings in Temp | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1007 | Fume/Odor Hazards | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1008 | Heights | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1009 | Mechanical Hazards | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1010 | Radiation Hazards | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1011 | Toxic Waste Hazards | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| Content Item ID | Description | N/A | 0% - 33% | 34% - 66% | 67% + |
|-----------------|--------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| 1012 | Wet Hazards | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1013 | Working below ground | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1014 | Working Indoors | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1015 | Work on ladders or scaffolding | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1016 | Working Outdoors | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1017 | AbilityToHear-With/Without aid | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1018 | AbilityToSee-With/Without aid | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1019 | Balancing | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1020 | Climbing ladders | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1021 | Climbing stairs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1022 | Crawling | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1023 | Depth perception needed | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1024 | Dual simultaneous grasping | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1025 | Heavy carrying 45 lbs or over | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1026 | Heavy lifting 45 lbs or over | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1027 | Kneeling | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1028 | Light carrying under 15 lbs. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1029 | Light Lifting under 15 lbs. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1030 | Moderate carrying 15-44 lbs. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1031 | Moderate lifting 15-44 lbs. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1032 | Pulling hand over hand | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1033 | Pushing | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 1034 | Reaching above shoulder | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1035 | Repeated bending | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1036 | Repeated motion | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1037 | Simple grasping | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1038 | Sitting | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1039 | Standing | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1040 | Stooping | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1041 | Straight pulling | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1042 | Twisting | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1043 | Walking | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 1044 | Ability to adapt to change | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1045 | Ability to count | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1046 | Ability to read | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

| Content Item ID | Description | N/A | 0% - 33% | 34% - 66% | 67% + |
|-----------------|--------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| 1047 | Ability to write | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1048 | Analyzing info/data | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 1049 | Called into work unanticipated | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1050 | Conflicting demands/priorities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1051 | Decision making-complex | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1052 | Decision making-simple | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1053 | Handling multiple assignments | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1054 | Identify colors | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1055 | Operate motor vehicle equipmnt | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1056 | Operating office equipment | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1057 | Perform ACLS/ BCLS/ PALS | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1058 | Planning complex | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1059 | Planning-simple | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1060 | Talking | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1061 | Travel: plane/car/van/bus | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1062 | Work at GHS facility | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1063 | Work cooperatively with others | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1064 | Working alone | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1065 | Working closely with others | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1066 | Working regular schedule | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1067 | Working scheduled overtime | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1068 | Working under time constraints | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1069 | Working unscheduled overtime | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 1070 | Work w/ frustrating situations | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1071 | Work w/ high stress situations | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1072 | Works on-call | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

** End of report **