

Dear Student,

Welcome to Gateway Community College! We are excited that you have chosen to partner with us in your education. Your program requires you to complete several criteria to meet compliance requirements for externship. These criteria can often take students several weeks to complete, therefore we recommend that you begin to work on this right away. To help you move through these steps as quickly as possible, you should work on multiple criteria simultaneously. Additionally, please take careful consideration to read all pages of this packet in its entirety as it contains valuable information that will help to answer questions you may have.

It is important that you begin this process by first scheduling an appointment with an academic advisor. The academic advisor for our clock hour healthcare programs is Debra Phillips. You can reach her via email at [dmphillips@gatewaycc.edu](mailto:dmphillips@gatewaycc.edu) or schedule an appointment with her through this link: <https://gatewaycc-debraphillips.youcanbook.me/>.

Once you have completed the pre-enrollment criteria, you can request enrollment by sending an email, using your Maricopa Student Email, to the following email address. Please be sure to include the information listed below:

[clockenroll@gatewaycc.edu](mailto:clockenroll@gatewaycc.edu)

* Program name and desired Start Date
* Funding Sources – Please identify how do you intend to pay for your classes. i.e. Self-pay, FASFA, Veteran Benefits, or Other (please explain)

You will need to work closely with the Health and Safety Coordinator to complete all necessary requirements for your program. The Health and Safety Coordinator is Misty Martinez. You can reach her via email at [clockhealthandsafety@gatewaycc.edu](mailto:clockhealthandsafety@gatewaycc.edu). Please reach out to her as soon as you have enrolled in the program so she can provide you with information regarding requirements, deadlines and the online portal you will use to upload compliance requirements.

To ensure that you receive program notifications and information, all student contact information must be accurate and updated in your Student Service Center accessed through the [www.maricopa.edu](http://www.maricopa.edu) website. Once enrolled, all communication will be shared to your Maricopa Student Email. You should be checking your student email several times per week for updates and important notifications.

Again, thank you for partnering with us in your education. Should you have questions at any time during this process, please do not hesitate to reach out to us for assistance. We are here to help you succeed!

Sincerely,

The Healthcare Team

<https://www.gatewaycc.edu/programs/ophthalmic-medical-assistant>

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| **Pre-Admission Criteria** | **Complete** |
| **Attend Instructor Meet and Greet.** Join us in-person every Wednesday from 2:30 p.m. to 3:30 p.m. at [SouthWest Skill Center](https://www.gatewaycc.edu/about-gateway/southwest-skill-center) for a chance to meet with the instructors and learn more about the program!   * Check-in at the SouthWest Skill Center Front Desk when you arrive. * Please arrive early. Arrival more than 5 minutes late will result in not being permitted to attend. * Sessions are not held when GateWay is closed for a holiday.   **Pre-register** for the Ophthalmic Instructor Meet and Greet at:  <https://www.gatewaycc.edu/degrees-certificates/ophthalmic-medical-assistant> |  |
| **Attend Virtual Information Session**   * Click this link to register for a virtual information session: <https://www.gatewaycc.edu/virtual-sessions> * If you cannot attend a session, schedule an appointment with the Advisor:   + Self-schedule an appointment with Debra Phillips through <https://www.gatewaycc.edu/advisement> |  |
| **Obtain Student ID number/ Apply for Program.** You can do this from anywhere!   * Visit [www.gatewaycc.edu](http://www.gatewaycc.edu) * Select “Apply Now” at the top of the page, in the banner. * New Students click “New Student” and follow prompts * Prior MCCCD Students click “Returning Student and login. If you cannot remember your MEID and password, click “Forgot your Username?” and/or “Forgot your Password?” for assistance. * Application:  |  |  | | --- | --- | | Enter/Verify Current Information | | | Primary College of Interest | **GateWay Community College** | | Field of Interest | **Health Sciences** | | Primary Reason for Attending: | **Get a Certificate** | | Select a plan | **Ophthalmic Assistant** | | Select Expected Start | **Select Academic Year** |   **Please contact your academic advisor if you need assistance** |  |
| **Schedule an Academic Advising Appointment**   * Schedule an appointment with your advisor:   + Self-schedule an advising appointment through <https://gatewaycc-debraphillips.youcanbook.me/>   + Email: [dmphillips@gatewaycc.edu](mailto:dmphillips@gatewaycc.edu) |  |

| **Pre-Enrollment Criteria** | **Complete** |
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| **Reading Placement (need one of the following)**   * High School GPA 3.0-4.0 * EdReady Critical Reading Score of 90 or above   + <https://www.gatewaycc.edu/testing> * ACT Reading Score of 22 or higher * ACCUPLACER Next Gen Reading: 249 or higher * ACCUPLACER Classic Reading: 92 or higher * ASSET Reading†: 47 or higher * COMPASS Reading†: 91 or higher * HS GPA: 3.0 or higher * ACT Reading Score: 22 or higher * GED Reasoning Through Language Arts Score: 175 or higher * SAT – Reading & Writing Score:   + Old Version (Prior to 2016): 860or higher * New Version (2016 - Current): 480 or higher |  |
| **Apply for Financial Aid** (if this is the method you plan to use to pay for your program)  **Financial Aid:**   * If applying for Financial Aid; visit the following website: [www.fafsa.gov](http://www.fafsa.gov) * Use Gateway school code: **E00701 (MSC)** * For Financial Aid **assistance please call (602) 286-8117** or email [finaid@gatewaycc.edu](mailto:finaid@gatewaycc.edu)   ***Note:*** *Confirm that all of the “To Do” items on MCCCD Student Center have been completed and cleared in order to be eligible to be awarded for financial aid.*  Financial Aid can take up to 4-6 weeks to be process. You will be required to have Financial Aid in place at a minimum of two weeks before your program begins. If your Financial Aid package is not complete you will be required to set up a payment plan until your package is ready. Please see [page 7](#_Financing_Your_Education) for information on paying for your program. |  |
| **Request Enrollment**  Using your Maricopa Student Email address, email an enrollment request to:   * + clockenroll@gatewaycc.edu     - Be sure to include:     - Program name and desired Start Date and location     - The funding source you intend to use to pay for your classes (self-pay, FAFSA, VA benefits, etc)   + Please call (**602) 238-4350** if you have any questions   ***Enrollment is based on eligibility, completed documents, and space in the program.*** |  |

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| **Post Enrollment** | **Complete** |
| **Externship – compliance requirements and online portal.** Establish Account with American Databank (ADB). For instructions on establishing your account, please contact your Health and Safety Coordinator:   * **Misty Martinez:** [**misty.martinez@gatewaycc.edu**](mailto:misty.martinez@gatewaycc.edu) **or (602)392-5368** * **The following documents will need to be uploaded into ADB. Please reach out to Misty for information regarding the timeline expectations.**    + Basic Life Support (BLS) Provider CPR Certification     - Certification must have hands on component   + Physician Clearance Form  Complete Criminal Background Check\*  * + - Do not order the background check until directed to do so by the instructor and/or Health and Safety Coordinator.   + MMR (measles, mumps, rubella)   + Varicella (chickenpox)   + TDaP (tetanus, diphtheria, pertussis)   + Influenza (flu)   + Two Step TB (tuberculosis)   + Hep B Series (hepatitis B)   + COVID-19 vaccination(s)   + Level One Fingerprint Clearance Card   **Details for each are provided on the pages** [**11 & 12**](#_Explanation_of_Health) |  |
| **Payment Reminders** - Contact Student Financial Services (cashier) at the time of enrollment to discuss payment options by emailing [gwc-sfs@gatewaycc.edu](mailto:gwc-sfs@gatewaycc.edu) or calling (602) 286-8277. Details regarding payment plans can be found on [page 7](#_Financing_Your_Education).   * Cash and check payments can be made in-person at Student Financial Services (check website for hours), credit/debit payments can be made over the phone through the cashier. * If you applied for and received financial aid, please check your student center to determine if you have any To Do List items as this may prolong being awarded.   + **Students unable to secure financial aid or whose aid has not yet disbursed prior to the payment deadline will be required to utilize a payment plan or third-party funding source** **until aid is secured**.   + **Your seat will not be secured until your initial tuition obligation has been met. Failure to secure your seat by your payment deadline may result in a drop from your program for Non Payment regardless of the funding source you are using.** |  |

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| **Attend New Student Orientation** – New student orientation will take place in person or virtually 1-2 weeks prior to your first day of class.Please monitor your Maricopa Student Email for information regarding the date and time. In preparation for your orientation, students should have the following items purchased and available to them:   * Student Uniforms * ID Badge (IDs are issued remotely. Please see <https://www.gatewaycc.edu/student-id>) * All required text books |  |

# Program Costs

## Tuition and Fees

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| **PROGRAM TUITION AND FEES** | **OPHTHALMIC ASSISTANT (ECG)** |
| Registration Fee\* | $ 15.00 |
| Tuition Clock Hour | $ 3,140.00 |
| Course Fees | $ 177.00 |
| TOTAL Tuition & Fees | **$ 3,332.00** |

## Additional Expenses

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| **ADDTIONAL EXPENSES** | **ESTIMATED COST** |
| Books | $282.00 |
| Uniform (approx. cost **per** uniform) | $35.00+ |
| American Databank – Immunization Tracker | $10.00 |
| MyClinicalExchange (mCE) – Clinical Externship *-The clinical site that you are assigned to for Externship may require you submit documents and complete modules through this third party. Information for how to set up this account will be provided to you by the Health & Safety Coordinator, if required.* | $0.00-40.00 |
| Physical Exam-Medical Clearance (varies depending on insurance, co-pay and deductibles) | $0.00-$50.00 |
| Immunizations (varies depending on insurance, co-pay and deductibles) | $0.00-$200.00 |
| Criminal Background Check (done at student orientation) | $59.00 |
| Urine Drug Screen (done in program before clinical externship) | $57.00 |
| Level-One Fingerprint Clearance Card | $75.00 |
| Basic Life Support (BLS) Provider CPR Card | $50.00 |

Books and student uniforms are not part of tuition costs. Other admission requirements will not be covered as part of tuition such as the Immunization Tracker, myClinicalExchange for clinical externship, immunizations, medical clearance forms, CPR cards, background check, level one fingerprint clearance cards, or urine drug screens. Additionally, several healthcare programs tuition and fees do not cover the cost of the certification exam. If your program area does not include the cost of this exam in the course fees, the cost of the exam will be noted in the table below.

**\**Costs are estimated and may change without notice***

## Financing Your Education

Students are responsible for the total program cost, which includes tuition and fees, out-of-pocket expenses, and any additional expenses associated with this program. Each student is expected to secure sufficient financial aid or Agency funding for their tuition and fees, and/or establish a payment plan during their enrollment.

For more details regarding ways to pay for college, please visit <https://www.gatewaycc.edu/pay-for-college>

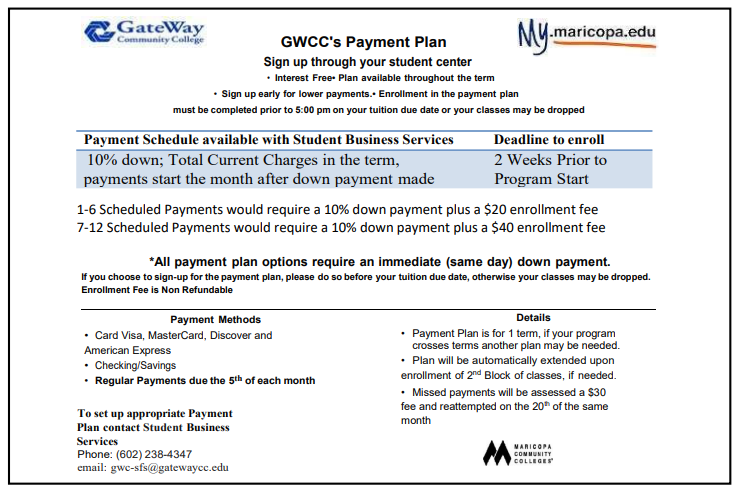
For details regarding scholarship opportunities, please visit <https://www.gatewaycc.edu/scholarships>

\***Registration fee is applied per fiscal year: July 1 – June 30th**.

If a student’s program crosses over June 30th, a 2nd Registration Fee will be assessed. Add $15.00.

**+All tuition and fees are subject to change pending MCCCD Governing Board Approval.**

**Monthly Payment Plan (tuition and fees only)**



## Your Financial Account

* For your convenience, you can view account activity in your Student Center at <https://www.maricopa.edu/current-students>. Cash and check payments can be made in-person at GWCC fiscal services (check website for hours), credit/debit payments can be made over the phone at (602) 286-8277

## Refund Policy for Credit/Clock Classes

Students who officially withdraw from credit/clock classes (in fall, spring, or summer) within the withdrawal deadlines listed below will receive a 100% refund for tuition, class and registration processing fees. Deadlines that fall on a weekend or a college holiday will advance to the next college workday except for classes fewer than 10 calendar days in length or as specified by the college. Calendar days include weekdays and weekends. Refer to individual colleges for withdrawal and refund processes. Never attending is not an allowable refund exemption or an excuse of the debt incurred through registration.

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| **Length of Class** | **Official Withdrawal Deadlines for 100% Refund** |
| 1-9 calendar days | Prior to the class start date |
| 10-19 calendar days | 1 calendar day including the class start date |
| 20-29 calendar days | 2 calendar days including the class start date |
| 30-39 calendar days | 3 calendar days including the class start date |
| 40-49 calendar days | 4 calendar days including the class start date |
| 50-59 calendar days | 5 calendar days including the class start date |
| 60-69 calendar days | 6 calendar days including the class start date |
| 70+ calendar days | 7 calendar days including the class start date |

*\*Course fees and registration processing fees will be refunded only if the student qualifies for a 100% refund. Debts owed to any MCCCD college must be satisfied before any refunds are paid to the student. Refunds for students receiving federal financial assistance are subject to federal guidelines. Requests for exceptions to the refund policy must be filed within one year from the semester in which the course was taken.*

**Maricopa Student Refund Program (MSRP)**

Nelnet is processing all student refunds for the Maricopa Student refund Program (MSRP). To ensure you receive your student refunds, you will need to enroll with Nelnet. You can do this from your student center.

To set up your account, you will need the following information:

* Your student ID#
* Your date of birth
* Your OFFICIAL Maricopa Student email address

Refund options:

* Direct deposit (ACH) transfer to your bank account
* Reloadable debit card- must be provided
* Paper check

For more information: [www.my.maricopa.edu/how-pay/msrp](http://www.my.maricopa.edu/how-pay/msrp)

**Course Curriculum**

All classes are run as a cohort and each course is completed with a predetermined amount of hours. Class curriculum is comprised of classes that will equal entire programs hours. List of courses, in the order in which they are taken, are as follows:

**Ophthalmic Assistant:**

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| **Course #** | **Course Title** | **Total Clock Hours** |
| ISP116 | Computer Foundations | 24 |
| ISP108B | Keyboarding II | 36 |
| OPH101 | Introduction to Eye Care | 54 |
| OPH110 | Ocular Medical Terminology, Abbreviations and Disease Processes | 42 |
| OPH112 | Clinical Theory and Skills | 171 |
| OPH114 | Basic Skills and Ocular Assessment | 181 |
| OPH190 | Ophthalmic Assisting Externship | 120 |
| Total Program Hours | | 628 |

**Externship**

**Externship locations/hours vary and are not guaranteed to reflect the classroom days and times.**

Externship placement is dependent upon site availability and students do not have the option of choosing which site they want to go to. Traveling throughout the greater Phoenix area may be required. Students will be required to secure reliable transportation as 100% attendance is required to complete your externship. Externship location **CANNOT** be changed once selected. Refusal to accept or attend the selected site location could result in withdrawal from program, which will also result in a failure to complete the program. A certificate of completion will not be awarded.

**Uniforms and Professional Appearance**

* Students are required to wear GWCC Ophthalmic Assistant Program Logo, Steel Grey colored scrub tops and matching scrub pants/skirt.
  + For uniform orders: Apparel Pro USA website:

<https://www.apparelprousa.com/gateway-skills-center/skills-center-students.html>

* Shoes must be either all white or all black sneakers made of a non-absorbent material (leather-like, no absorbent fabric, no holes).
* Hair is required to be of a natural color and pulled up off of the collar at all times.
* No visible body piercings.
* Tattoos may need to be covered during clinical rotations.
* Nails must be clean and trimmed.

## Disability Resource Center, Classroom Accommodations

Students with disabilities who believe that they may need accommodations in a class or program must contact the Disability Resource Center (DRC) at Gateway at (602) 286-8171. The manager of Disability Resource Center i responsible for determining a student’s eligibility for services and will notify the faculty in writing of the accommodations requested. During the first class session, faculty members shall announce that students may meet with them during office hours if they need special accommodations for a disability. If you have a question or concern, please contact the DRC. For more information about accommodating students, visit the website at <https://www.gatewaycc.edu/disability-resources>

## Nondiscrimination Policy

The Maricopa County Community College District does not discriminate on the basis of race, religion, color, national origin, sex, handicap/disability, sexual orientation, age, or Vietnam era/disabled Veteran status in employment or in the application, admission, participation, access and treatment of persons in instructional or employment programs and activities.

#### Medical Marijuana Policy

#### Maricopa Community Colleges prohibit the possession and use of marijuana on all campuses and in all off-campus student activities, including clinical externship and clinical learning experiences in health programs. This policy is dictated by Arizona Revised Statutes § 15-108, which prohibits any person, including a medical marijuana cardholder, from possessing or using marijuana on the campus of any public university, college, community college or post-secondary education institution. Federal legislation prohibits any institution of higher education that receives federal funding from allowing the possession and use of marijuana.

#### Maricopa Community Colleges receive federal funds through grants and financial aid. Maricopa Community Colleges continue to enforce current policies regarding controlled substances and any student or employee who violates university policy prohibiting the use or possession of illegal drugs on campus or in student activities - including educational externship - will be subject to disciplinary action and criminal prosecution.

#### Urine drug screens are required of students prior to attending healthcare clinical externship. Medical marijuana, or its metabolite, is not an accepted substance in urine drug screens and will result in a positive urine drug screen. Students with a prescription for medical marijuana would not be considered exempt from urine drug screening.

## Notice

GateWay Community College reserves the right to change, without notice, any materials, pricing, information, curriculum requirements, and regulations stated in this publication

# Explanation of Health and Safety Requirements

For more information regarding the Health and Safety Requirements of the Maricopa County Community College’s Allied Health Programs, please click the link below. A copy of the Allied Health and Safety Checklist can be downloaded here.

# <https://www.maricopa.edu/academics/healthcare/requirements>

## Health and Safety Documentation Required – Documents in chart below should be uploaded into American DataBank. For vaccination accommodation requests, such as medical or religious concerns, please contact the Health and Safety Coordinator at [clockhealthandsafety@gatewaycc.edu](mailto:clockhealthandsafety@gatewaycc.edu).

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| **Immunization** | **To Meet Requirement:** | **Timeline** |
| COVID-19 Vaccination(s) | Provide proof of two-dose vaccination of Pfizer-BioNTech or Moderna vaccine.  OR  Provide proof of one dose vaccination of Johnson & Johnson’s Janssen vaccine. | * If you have had the vaccinations, but do not have records, allow yourself at least 1 week to obtain record or proof of booster vaccination * If you have never had these vaccinations, allow 4 weeks to obtain required vaccines |
| MMR (measles, mumps, rubella) | Record of 2 vaccines at least 4 weeks apart OR positive titer for each: measles, mumps, and rubella. Lab report required. | MMR is a lifetime immunization.   * If you have had the vaccinations, but do not have records, allow yourself at least 1 week to obtain positive titer results. * If you have never had these vaccinations, allow 4 weeks to obtain required vaccines |
| Varicella (chickenpox) | 2 vaccines at least 4 weeks apart OR positive titer. Lab report required. | Varicella is a lifetime immunization.   * If you have had the vaccinations, but do not have records, allow yourself at least 1 week to obtain positive titer results. * If you have never had these vaccinations, allow 4 weeks to obtain required vaccines |
| TDaP (tetanus, diphtheria, pertussis) | Vaccination record within last 10 years | If your TDaP will expire before you enter your externship, you will be required to obtain new vaccination |
| Influenza (flu) | Vaccination every flu season (August – May) | Must be obtained prior to externship, during flu season |
| Two Step TB (tuberculosis) | Record of 2 steps required. Second step to be completed 7-21 days AFTER first step is read. (TB Testing Documentation Form is available if needed, at end of packet) OR negative QuantiFERON or T-Spot blood test. Lab report required.  For individuals with positive TB test, they must provide chest x-ray with attached Tuberculosis Screening Questionnaire. Form attached at end of packet. | * Two step TB skin test, minimum of 2.5 weeks to complete. * If you choose to take the QuantiFERON or T-Spot blood test, allow yourself at least 1 week to obtain negative results * If chest x-ray is required, allow at least 1-2 weeks for results. |
| Hep B Series (hepatitis B) | Record of 3 injections completed over 4-6 months OR positive titer for Hep B. Lab report required. | * If you have had the vaccinations, but do not have records, allow yourself at least 1 week to obtain positive titer results * If you do not have complete records of your vaccinations OR your titer comes back Negative:  1. Obtain 1st vaccine 2. 2nd vaccine: 1-2 months after 1st dose 3. 3rd vaccine: 4-6 months after 1st dose |
| Statement of Clearance | Clearance for Participation in Clinical Practice form to be completed by physician no sooner than 6 months from start date. Form attached at end of packet. |  |
| Basic Life Support (BLS) Provider CPR certification | American Heart Association (AHA) preferred or American Safety and Health Institute (ASHI).  Certification must have hands on component. | This certification is a 4 hour class. GateWay offers CPR certification classes monthly. Please check with your advisor or the Health and Safety Coordinator for details. |
| Level One Fingerprint Clearance Card | Current Level One DPS Fingerprint Clearance Card.  **Obtain Level One Fingerprint Clearance Card –**   * Code: ARS 15-1881 $75 * Students must go to: <http://www.azdps.gov/>and follow the online process.   Questions with the online process, call DPS: (602) 223-2279 | Fingerprint Clearance Cards can take up to 6-8 weeks to process, so make sure to give yourself plenty of time to get this done. |

**Urine Drug Screen Testing**

All students are required to submit to a random urine drug screen as a condition of enrollment in the clinical externship portion of their healthcare program. **Do NOT obtain a drug screen on your own** as it cannot be used. Screen results from tests taken prior to the start of the program will not be accepted. **Urine drug screens will be conducted at a random time during the student’s program, prior to clinical externship. Students should budget for this expense, as it may occur at any time during their program and students will not be given advanced notice.**

#### Background Check Clearance Document

All students admitted to a MCCCD healthcare program are required to obtain a supplemental background check through American Databank within six (6) months prior to the start of clinical externship rotations. Students who have completed a MCCCD supplemental background check earlier than the 6 months may be enrolled, however they will be required to complete an additional background check in order to remain compliant for their clinical rotation.Once a student has been enrolled in a clock hour healthcare program, they will be given information on how to complete the MCCCD supplemental background check with MCCCD’s authorized vendor, at their mandatory new student orientation.

#### IMPORTANT:

* Healthcare students have a responsibility to protect themselves and their patients and families from preventable diseases. All students will purchase a supplemental background screen and Medical Document Tracker from American Databank. Program requirements will be approved by American Databank.
* Students are responsible for maintaining all health and safety requirements and to submit documentation by due date. **Failure to maintain program health and safety requirements will result in inability to continue clinical experiences and may result in withdrawal from the program.**
* All immunization records must include student name and the signature of healthcare provider.
* Health and safety requirements are subject to change depending on clinical agency requirements.

**Clearance for Participation in Clinical Practice**

It is essential that allied health students be able to perform a number of physical activities in the clinical portion of their programs. At a minimum, students will be required to lift patients and/or equipment, stand for several hours at a time and perform bending activities. Students who have a chronic illness or condition must be maintained on current treatment and be able to implement their assigned responsibilities. The clinical allied health experience also places students under considerable mental and emotional stress as they undertake responsibilities and duties impacting patients’ lives. Students must be able to demonstrate rational and appropriate behavior under stressful conditions.

I believe the applicant (print name) Date:

WILL OR WILL NOT be able to function as an allied Health student as described above.

If not, explained:

**Health Care Provider Form:** Reviewed and signed by a licensed health care provider (M.D., D.O., nurse practitioner, or physician’s assistant) within the past six (6) months.

***Licensed Healthcare Examiner (M.D., D.O., N.P., P.A.):***

Print Name: Title:

Signature: Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_



