**The MA/LVN role in the SETMA Model of Care**

In the [SETMA Model of Care](http://www.setma.com/the-setma-way/setma-model-of-care-pc-mh-healthcare-innovation-the-future-of-healthcare), a team approach to care is imperative. The assignment of responsibilities is not rigid, as at one time or another one member of the team is busier than another, so responsibilities can be and are shared.

The typical patient care performed by the MA/LVN:

* Refills chronic medications by e-prescribing
* Completes vital signs, including pulse ox when appropriate, body fat, BMR and BMI assessment, weight, blood pressure (done based on evidence-based literature feet flat on the floor sitting in a chair, bicep measures to determine appropriate size cuff and repeated after ten minutes of sitting quietly if elevated), etc.
* Completes the LESS Initiative (lose weight, exercise, stop smoking) and gives the patient a 17-page personalized plan for these three issues.
* Chief Complaint
* History of Present Illness
* Review of Systems
* Fall Risk Assessment
* Pain Assessment
* Mental Status Assessment
* Completes the 12 Framingham Risk Score assessments and ‘What If” Scenarios
* Allergy review
* Medication Reconciliation
* Pre-visit screening and Preventive health review
* Completes any referrals which are required, such as mammograms, dilated eye exams, bone densities, etc.
* Administers any immunizations that are due

The MA/LVN has 15 minutes to complete this work on an established patient, but may take 30 minutes on a new patient. The EMR has templates that automatically populate patient data available about these services, to guide the MA/LPN on this work. For example, the Pre-visit screening template populates with date of last service and current status for immunizations, HIV, LDL, A1c, PSA, pap, mammogram, glaucoma, and advanced directive.