

Speaker 1:

Ahead on Pathways.

Zandra Maclean:

You feel like they're a part of your family. I've had some patients I am so attached to, and then when they have passed on, I feel like I've lost a grandparent because you learn to know their family and it's not just John Doe or Jane Doe sitting next to you like they're a person and you actually get to know them in this field.

Speaker 1:

Medical assistants are the link between patient and physician, offering a friendly face to those who need it and detailed information to help doctors diagnose.

Emily Tadlock:

Welcome back to season two of Pathways, part of Northern Light Health's healthy, happy, and wise podcast series. I'm your host, Emily Tablock. This season we are focused on healthcare careers that take you about two years or less of learning to get into. So this episode is going to focus on medical assisting. And I am joined today by Madeline Dow and Zandra McLean, two medical assistants at Northern Light Blue Hill Hospital. Hi ladies.

Madeleine Dow:

Hello.

Zandra Maclean:

Hello.

Emily Tadlock:

Thanks so much for being on with me today.

Madeleine Dow:

Thank you for having us.

Emily Tadlock:

Yeah.

Zandra Maclean:

Yes, absolutely.

Emily Tadlock:

Okay, so let's first of all kind of get to know you both a little bit because you both have different experience. Zandra, why don't we start off with you. Tell me how long have you been a medical assistant and what got you into it?

Zandra Maclean:

Well, I've been a medical assistant for just over four years and I had originally planned on going to nursing school.

Emily Tadlock:

Okay.

Zandra Maclean:

And then life just happened and I could not make the commute back and forth from down east at the time to Bangor so I got into an online program for medical assistant and did my two-year associates and everything was online because COVID was happening, so I couldn't go places.

Emily Tadlock:

Oh, okay, yeah.

Zandra Maclean:

That was great, getting the dummy arm and having to draw blood out of it.

Emily Tadlock:

Yeah.

Madeleine Dow:

That's always fun.

Zandra Maclean:

And as far as the medical aspect, I always had a thing for medical, even in the military. I wasn't a corpsman or anything, but I still had my hands in with that piece of it. So this is just fitting for me.

Emily Tadlock:

Okay. And you were in the military before this?

Zandra Maclean:

Yes.

Emily Tadlock:

What did you do?

Zandra Maclean:

20 years in the Coast Guard.

Emily Tadlock:

Wow, 20 years. Wow.

Zandra Maclean:

So this is my second career.

Emily Tadlock:

Okay, that's awesome. How interesting.

Zandra Maclean:

Yes.

Emily Tadlock:

So Zandra's on her second career, four years in as a medical assistant. Whereas Madeline, you are brand new to the profession.

Madeline Dow:

Brand spanking new.

Zandra Maclean:

She's our baby. Our baby MA.

Madeline Dow:

Yes, the baby.

Emily Tadlock:

So Madeline, tell me, but this isn't your first experience with healthcare either, so tell me a little bit about your journey here.

Madeline Dow:

Yeah, so when I was in high school, I actually took a CNA program at the Hancock community, it was a tech school.

Emily Tadlock:

Okay.

Madeline Dow:

So I went to high school half the day and then I went to the CNA program and I got my CNA and my CRMA and I worked at a nursing home for about four years. And then in 2018 I decided that I wanted to take a break. I got a little burnt out, we were low staff and I was working very long hours. So I took a break from healthcare, went to the Jackson lab and I worked there for four years.

Emily Tadlock:

Okay.

Madeline Dow:

Convenient time to take a break from healthcare because it's 2020 and COVID.

Emily Tadlock:

COVID, right.

Madeleine Dow:

So I didn't have to go through that. But after being at the lab, I missed healthcare and wanted to go back. So I went to radiology school and I was in radiology school for a year and a half and found out that was not for me. I was trying out different fields. And then I applied for this program, the Earn to Learn Medical Assistant program.

Emily Tadlock:

Okay.

Madeleine Dow:

And that was six months. And as Zandra said, some programs are two years and some are six months. This was a hybrid course.

Emily Tadlock:

Okay.

Madeleine Dow:

So I did my labs in person and did my classes on Zoom and I went to the Sullivan Education program, the adult education in Sullivan for my labs.

Emily Tadlock:

Okay. Wow. And look at that. Boom, you're a medical assistant.

Madeleine Dow:

Yes. I just took my test on the 10th and passed first try, so.

Emily Tadlock:

Awesome.

Madeleine Dow:

I was proud about that.

Emily Tadlock:

Yeah, you should be. As you should be.

Madeleine Dow:

So it's fresh and new.

Emily Tadlock:

Yeah, just a couple of weeks in.

Madeleine Dow:

Yes.

Emily Tadlock:

Okay. So tell me a little bit about, you said you tried out some different careers.

Madeleine Dow:

Yes.

Emily Tadlock:

Why did you feel like medical assistant was kind of where you wanted to be?

Madeleine Dow:

I love the one-on-one interaction with my patients. I loved radiology, but you're very busy. You're running the entire day, you're seeing a lot of people. I like to sit down with my patients, talk to them, see how they're doing. A more one-on-one bigger connection with my patient is what I was looking for.

Emily Tadlock:

Okay.

Madeleine Dow:

And with medical assistant, I found that I am talking to many patients a day, having one-on-one conversations, learning about their life and I'm really enjoying it.

Emily Tadlock:

Oh, awesome. Okay.

Madeleine Dow:

Yes.

Emily Tadlock:

So before we go much further, because we have some listeners on here who may not know what a medical assistant is. So Zandra, why don't you explain exactly what a medical assistant is and what they do?

Zandra Maclean:

Well, I think every place you're at is a little bit different as far as what the actual MA would do.

Emily Tadlock:

Okay.

Zandra Maclean:

In primary care here, we have our hands in everything.

Emily Tadlock:

Okay.

Zandra Maclean:

We room in the patients, getting all the vitals, med reconciliation, we give immunizations, we draw blood, we do EKGs, lots of phone calls, med refills, prior authorizations for different things, putting in orders for whatever they need to do. It's kind of like primary care is the hub for everything. You can't go somewhere unless you have that referral. And who's the one who puts the referral in? Usually the medical assistant.

Emily Tadlock:

Oh, okay.

Zandra Maclean:

Yeah, we are busy from the time we get here to the time we go home, it doesn't stop. But there are other offices, specialties, where they might just get say their vitals and help cast and things like orthopedics or something.

Emily Tadlock:

Okay.

Zandra Maclean:

But for us in primary care, we literally have our hands in everything.

Emily Tadlock:

Okay. So you're also the link basically between patient and physician, correct?

Zandra Maclean:

Yes.

Emily Tadlock:

Okay. So especially somewhere like Northern Light Blue Hill Hospital, which is a small rural hospital, you know your patients pretty well.

Zandra Maclean:

Absolutely. And they become a member of, you feel like they're a part of your family. I've had some patients I am so attached to, and then when they have passed on, I feel like I've lost a grandparent because you learn to know them and then when you see their health declining and it really hits, you're just like wow, and you learn to know their family.

Emily Tadlock:

Right.

Zandra Maclean:

It's not just a John Doe or Jane Doe sitting next to you. They're a person and you actually get to know them in this field, which I love. Even patients who come in and they may be having the worst day out there and you talk to them and yes, they are frustrated for whatever reason, they might not be feeling good, but we are still the go-to. And usually when I walk out of the room, they're better.

Emily Tadlock:

Yeah.

Zandra Maclean:

As far as they're not all amped up.

Emily Tadlock:

Yeah.

Zandra Maclean:

And then you talk to the provider, "Hey, this is what's going on." So they know, you know, you're kind of that relay.

Emily Tadlock:

So it's not just about the technical medical things, it's really about care and giving care.

Zandra Maclean:

Absolutely. Absolutely. And that's the thing, is like sometimes you have to just stop everything that you're doing and look at them as a person. I'm not just sitting here typing in a computer, I'm going to talk to you. And if something doesn't seem right with them, seems like they're short of breath, whatever it is, you can initiate the things. You run by the provider, "Hey, they seem like they're low on oxygen." "Yes, they are." Or it could be they need an EKG, they need to go immediately to the hospital. So it's not just black and white, this is how we do it.

Emily Tadlock:

Right.

Zandra Maclean:

It's not like that. It's a whole different field here.

Madeleine Dow:

Yes.

Emily Tadlock:

It sounds exciting. And you're not only in a patient exam room, you're also on the telephone.

Zandra Maclean:

Oh, yes.

Madeleine Dow:

Yes.

Zandra Maclean:

Yes.

Madeleine Dow:

Yes. We do a lot of telehealth.

Zandra Maclean:

A lot.

Madeleine Dow:

Yes.

Emily Tadlock:

Okay. So tell me a little bit about that, Madeline.

Madeleine Dow:

So the telehealth I believe became implemented when COVID became a thing when a lot of people couldn't come in because they were sick, didn't want to get exposed. So we do telehealth where you can meet with your provider over video. We get the patient ready over video, just like if you were coming into the office.

Emily Tadlock:

Okay.

Madeleine Dow:

We go over meds, go over allergies, the same things you do here. And then the doctor will come on, just like in the office, the doctor will come in after the medical assistant. And it's great for a lot of patients that can't get out of the house, don't have transportation, but still want to meet with their doctor and tell them their concerns. So I think it's wonderful.

Emily Tadlock:

Okay. That's awesome. Yeah. Well, I mean it's great for those folks who can't necessarily get out and get into the office. Tell me a little bit about, obviously you're the link.

Zandra Maclean:

Yes.

Emily Tadlock:

You're the person that has to call with whatever news.

Zandra Maclean:

Yes.

Emily Tadlock:

Or call, you're the one that they talk to when they need a refill or whatever.

Zandra Maclean:

Yes.

Emily Tadlock:

People are not always happy.

Zandra Maclean:

No.

Emily Tadlock:

They're not always having the best day.

Zandra Maclean:

No, they are not.

Emily Tadlock:

So what is that like?

Zandra Maclean:

And I, 100%, some days it is very draining and it is taxing. And at the end of the day when you've dealt with more negative... Because when we call to do results, a lot of times it is just basic.

Emily Tadlock:

Right.

Zandra Maclean:

But then there's times when there's stuff and then they start asking you questions. Well, we're not authorized to give out medical advice that way.

Emily Tadlock:

Right.

Zandra Maclean:

So then you have to get back to the provider and then call them back. And sometimes the providers can't answer immediately so then the patient gets frustrated, they don't understand, "Well, why isn't it now? Why can't I have the answer right now?"

Emily Tadlock:

Right.

Zandra Maclean:

And you try to explain it. But for all the ones that might give us a hard time, there's always the ones who are just a delight to talk to and I would talk to them all day, and you just call and you hear. Like this morning, I called a 93-year-old woman just to see how she was doing because I knew last week she was having an issue. I was just checking in on her. I didn't have to, that wasn't in my job profile to call her. But I just wanted to see how her shoulder was. Called her. She said, "I am so much better. Thank you for checking in. I don't need to over mix the chocolate chip batter dough again."

Emily Tadlock:

Okay.

Zandra Maclean:

Because that was what caused it. So it's those things you learn. But yeah, as far as phone calls go, honestly there's some of us, we will pass it around, "Can you please call this patient because they've talked to me five times a day and they don't want to talk to me again."

Madeleine Dow:

They just want someone new.

Zandra Maclean:

Another voice gets on and then they're like, "Oh, okay, thank you."

Emily Tadlock:

Yeah.

Zandra Maclean:

Because now-

Emily Tadlock:

They feel like it's moving, something's being done. Right.

Zandra Maclean:

Absolutely. And that's what as a team here in general, I mean we all look out for each other and we're always on each other's desktops, looking to see calls, whatever needs to be done because it's a team. And I work with one of the busiest providers here so my desktop sometimes will just be overloaded with results and calls from patients and things like that that I have to do. And that's where, as a team, everyone hops on if they're not seeing patients. So as far as here, we are a great team and we work very well together, I think.

Emily Tadlock:

Well, I love that. And so Madeline, that also goes back with as Zandra said, you're our baby.

Madeleine Dow:

Yes, I'm new to the team.

Emily Tadlock:

You are brand new MA. So what is that like coming in and being part of this team and you're fresh, you're new.

Madeleine Dow:

Yeah.

Emily Tadlock:

You may be a little nervous.

Madeleine Dow:

Yeah, it was a little nerve wracking. When I first started this program I was working over at the Castine Primary Care.

Emily Tadlock:

Okay.

Madeleine Dow:

And I was technically a PSR, but because of my medical experience, they had me pretty much working as an MA. So I was working as an MA almost for six months. So before I even came over here, I was very comfortable with what I was doing.

Emily Tadlock:

Okay.

Madeleine Dow:

That's why I really advocate for the Earn to Learn. I'm a hands-on learner.

Emily Tadlock:

Okay.

Madeleine Dow:

I don't know if you guys out there, if there's anyone that's a hands-on learner, but I learn best hands-on. And if I would learn something on a slideshow, I will not retain that information. I could try all day, it won't work. So we'd learn something in class and I could practice it at work the next day. So that's what I really loved about it, the hands-on, and it made me not as nervous. And when I came over here, I love how everybody works together. Everybody's been wonderful, welcoming. I have nothing bad to say about this office.

Emily Tadlock:

I love it.

Madeleine Dow:

Yeah, it's been great.

Emily Tadlock:

Well, that's encouraging for anyone who is teetering on whether they'd like to look at medical assisting as a career, to know that it is a team environment so you wouldn't be alone.

Madeleine Dow:

Yes.

Emily Tadlock:

So if you work best alone, may not be the best career choice for you.

Zandra Maclean:

Probably not. And you need to be a multi-tasker.

Emily Tadlock:

Okay.

Zandra Maclean:

If you are not a multi-tasker, it's probably not a good fit. We've had people who have been here and primary care just isn't their thing as a medical assistant, but they can go to a specialty clinic where they're focused on one particular thing and it's totally different. Whereas here, it's birth to death pretty much and everything in between.

Emily Tadlock:

Okay.

Zandra Maclean:

And no two patient's the same, versus something else. It's literally the same thing over and over.

Emily Tadlock:

Over and over.

Zandra Maclean:

Yep.

Emily Tadlock:

Okay. So while medical assisting is medical assisting, it is still very different.

Zandra Maclean:

Absolutely.

Madeleine Dow:

Yes.

Emily Tadlock:

Depending on where you're at.

Zandra Maclean:

Right. Because I mean some, we don't do it here, but some medical assistants actually do the billing and coding piece of it. And that was one I said, "I absolutely want nothing to do with that."

Madeleine Dow:

That was not my favorite.

Zandra Maclean:

Keep my hands hands way away from it. I don't want to do coding, I don't want to do any of it. I'm good.

Madeleine Dow:

It was not my favorite either.

Zandra Maclean:

I was like, "Hard pass. No." When I had to take that class I was like, "Oh no."

Madeleine Dow:

But it's good to know a little bit of it, but yeah.

Emily Tadlock:

Yeah. And I think Cancer Care in Brewer and possibly even here, the MAs there also do different things too, right?

Zandra Maclean:

Yes. At Cancer Care, they assist with the bone marrow biopsies and they're accessing the ports. And that is super exciting to me because I love having my hands in doing things like that.

Emily Tadlock:

Yeah.

Zandra Maclean:

But here we do get to, I mean we help a lot of different providers with, they're doing procedures, whatever it is. But I mean we're in there, we're taking out the staples, we're taking out the sutures, literally helping with wound care.

Madeleine Dow:

Yeah.

Zandra Maclean:

And whatever we need to do, that's where we go. And no two patients are the same. So literally some days it's like EKG day and we're all waiting for the EKG machine, "Can I have it? " "Me next." You know?

Madeleine Dow:

You never know what's going to happen in your day.

Zandra Maclean:

Yeah.

Madeleine Dow:

And that's what I like.

Emily Tadlock:

The variety.

Madeleine Dow:

And that's why I chose this career. I get bored in doing the same thing every day.

Emily Tadlock:

Yeah.

Madeleine Dow:

So even if I get bored in primary care, I can always go to dermatology. I could go to women's health. A lot of people in my class, we all chose different areas. I'm in primary care and another girl in our class, Jaylen, she's in cancer care in the infusion center at Main Coast at Mary Dow. Hannah's in Women's health. I believe Lacey's in Women's health. Desiree's in Peds. Like we're all over the place. You can go in any area and if you don't like a certain area or you've been there a long time and want to try something else, you can go to a different specialty. And there's always something new to learn, which I love.

Emily Tadlock:

Well that's really neat.

Madeleine Dow:

Yeah.

Emily Tadlock:

That's a cool aspect of the job there.

Zandra Maclean:

Yeah, there's another piece that is like, I think medical assistant honestly is a good stepping stone. Because we've had several MAs since I've been here who they came here, they got their feet in, they learned a lot, and they said, "I'm ready to go be a nurse now." So they went and now they breeze through school easier than had they not had any experience at all because now they know the medical terminology piece of it. They know a lot of things. They already know how to do injections. So I think that's really good. And we have one MA here right now and he's getting ready to pursue the RN program.

Emily Tadlock:

Okay.

Zandra Maclean:

And we just had another one, she just graduated from RN. And so it is exciting to see them grow like that. And I said someday maybe I'll go that way, but right now I'm content doing what I do.

Emily Tadlock:

Yeah, I mean it's a career that you could either stay in forever and love or you could use it as a chance to propel yourself into something different.

Zandra Maclean:

Absolutely.

Emily Tadlock:

And farther along, so that's pretty cool.

Zandra Maclean:

Yes.

Emily Tadlock:

So we're talking a lot about what medical assistants do and things like that and we talked a little bit about the Earn While You Learn Program, but can you explain, Madeline, to our listeners how that program works.

Zandra Maclean:

Yeah.

Emily Tadlock:

And what the learning is like?

Madeleine Dow:

So actually my mom sent me a link, she found it on Facebook. Northern Light was advertising for the Earn to Learn Program. And so I actually applied to Northern Light first, had an interview and they're like, "Okay." And they accepted me. Then I had to contact the adult education and do an interview with them.

Emily Tadlock:

Okay.

Madeleine Dow:

And then once I got accepted there is when the Earn to Learn Program, it started in May. And then I just finished in end of December and took my test in January. So it's very quick. You're learning a lot at once. It helped that I had a lot of medical experience and I've taken a lot of anatomy classes in the past, so that helped a lot. So it is quicker. Some people like to do the two-year program and get their associates as well, but I liked the quicker pace because of my experience.

Emily Tadlock:

Okay.

Madeleine Dow:

So I applied to Northern Light first and then you had to apply to the adult education. In my class we had three separate adult educations that came together. Like mine was Sullivan, a lot of the other girls were from Bucksport and then we had Baileyville.

Emily Tadlock:

Okay.

Madeleine Dow:

We all came together for Zoom classes and then did our separate labs at the adult education.

Emily Tadlock:

Okay. And it was Earn While You Learn, so you were also working for Northern Light Health.

Madeleine Dow:

Yes.

Emily Tadlock:

Technically working part-time but being paid full-time and maintaining benefits too, the whole time, correct?

Madeleine Dow:

Yes. So you get benefits. We did have to make a commitment and we also got paid while we were in class, so that was very helpful. I don't know if anyone has ever worked a full-time job and tried to do school at the same time, it's very difficult. I've tried to do it in the past, but having part-time but also getting paid full-time was very helpful and I didn't feel like I was overwhelmed with work.

Emily Tadlock:

So you were basically being set up to be successful.

Madeleine Dow:

Yes, exactly.

Emily Tadlock:

I think that's super important for anybody out there who's looking at getting into healthcare as a career.

Madeleine Dow:

Yeah.

Emily Tadlock:

And Zandra even you mentioned it as a second career, you may have been doing something else your entire life and then decide, "You know, I've always wanted to give it a go." And this could be the type of program for you.

Zandra Maclean:

Oh yeah, absolutely. And I chose to do my two-year associates just honestly, so that I had a lot of the pre-reqs done for nursing school and everything because those are all required. And I knew myself and at the time COVID was going on and it was going to take a little time, so I said, "Well, might as well do that."

Emily Tadlock:

Yeah.

Zandra Maclean:

And then when it came time to do my clinical hours, no place around is taking any students because COVID. So thankfully here, my university worked with Main Coast to get me here and then two days in they're like, "Hey, are you going to apply for a job here? Are you going to apply? You going to apply?"

And finally, I think I was like close to it, I was like, "Fine." I applied. I knew I was going to anyways, but I just like to keep them hanging.

Madeleine Dow:

Keep your options open.

Emily Tadlock:

Well, I think when they see a good worker, someone who's going to do great and works well with patients, they're like, yeah, we need you. They just want to Lock you in. I like it.

Zandra Maclean:

Yes. And I have thoroughly enjoyed my time here. And as I said, I love I get more responsibility and I train a lot of, I didn't have to train her so much, but a lot of the new MAs coming in. I'm the one who trains them here.

Emily Tadlock:

Okay.

Madeleine Dow:

She's amazing.

Zandra Maclean:

We all do. But because in the military I train so many people and everyone has a different learning style, so I can kind of just go to that. I personally, I'm hands-on, so I love it now, I'll like throw them right in, like, "Let's go, hands-on, this is the only way you're going to know it."

Madeleine Dow:

If I don't do it with my hands, I will not learn.

Zandra Maclean:

Right. Right. It's repetitiveness.

Madeleine Dow:

Yes.

Zandra Maclean:

Even doing charting, all that with the computer, just click, click, click, click. But it becomes second nature to just, as they say, you can sit there and watch me all day long doing it, but until you actually do it-

Emily Tadlock:

Do it yourself.

Zandra Maclean:

...you're not going to.

Madeleine Dow:

And she's a wonderful teacher.

Emily Tadlock:

And that's awesome to hear. It's encouraging to hear as we're looking to hire more medical assistants across our system, that we have people like you, Zandra, who are wonderful mentors to our new ones like Madeline and bringing them along and making them feel welcome and happy to come to work. Because it seems like you're both happy to come to work.

Madeleine Dow:

Oh, very happy.

Zandra Maclean:

Oh yeah, absolutely. I'm usually the one, I'm here early. I leave late. Just because I want to make sure everything is done. I hate having anything not finished at the end of the day.

Emily Tadlock:

Yeah.

Zandra Maclean:

And as an MA, I mean there's so much responsibility that goes into it. And when your provider dumps at the end of the day, here's all your results. And I'm like, oh, okay. So I don't feel right letting them just sit there. So I'll sit there and make phone calls until every one has been addressed or at least a call has been made. Because that's just-

Madeleine Dow:

Yeah. And even when you have an empty inbox, you go and check other people's inboxes. There's always someone helping you out. And I love that. All the MA's are great resources as well. If you don't know an answer to a question, you have so many people to ask to help you.

Zandra Maclean:

Yes.

Madeleine Dow:

And it makes me feel so comfortable working here because no one judges me for a question I ask or anything. So it just makes me feel comfortable.

Emily Tadlock:

You're all just trying to do your best by your patients.

Madeleine Dow:

Exactly.

Zandra Maclean:

Yep. Absolutely.

Emily Tadlock:

And then enjoy working together.

Zandra Maclean:

Absolutely.

Madeleine Dow:

Yes.

Zandra Maclean:

Like I said, it's family medicine and we are primary care, whatever you want to call it, but we are still like a family here. And that's the thing, if somebody's sick, whatever, somebody else can hop right in and take over. And that's the thing is we're trained, everyone knows exactly what they need to do so there is no question. Granted, every provider is different to room for.

Madeleine Dow:

Yeah.

Zandra Maclean:

Some don't want to hear anything. Others, they want the full list of this is exactly, you know.

Madeleine Dow:

I've noticed that. Yes.

Zandra Maclean:

Yes. And you know it, there's some literally like, "Hey, your patient..." and they just look like... "Okay, all right, I'm not going to go any further, but they're ready for you." Instead of, like my provider, I give a full rundown, everything, vitals, the whole everything and she's like, "Okay, great," goes on in. But there's others. So you learn the providers and what they expect and, you know.

Madeleine Dow:

What they like and-

Zandra Maclean:

Yep.

Emily Tadlock:

Yeah.

Zandra Maclean:

Yeah.

Emily Tadlock:

Wow. There's so much that goes into being a medical assistant that I had no clue about.

Zandra Maclean:

Yeah, there is. There is. Like I said, they say, "Come to family medicine," they said, "It's fun," they said. I'm always like, "Yeah, you guys." Four years later here I am still.

Emily Tadlock:

Yeah.

Madeleine Dow:

When they first put me in primary care, I'm like, I don't know guys. I don't know if I'm going to like this. But I ended up loving it and I don't want to leave.

Emily Tadlock:

Yeah, well there it is.

Zandra Maclean:

Yep. Yep.

Emily Tadlock:

That's awesome. Thank you so much ladies, for taking some time out.

Zandra Maclean:

Yeah, thanks for having us.

Madeleine Dow:

Yeah, thank you.

Emily Tadlock:

Just one more question to both of you, if you had one thing to say to encourage someone to become a medical assistant and get into this field, what would you say?

Madeleine Dow:

I would say if you are a people person and you love communicating and working with other people, I think primary care is the place for you, and being a medical assistant is very rewarding. And I would suggest it to anyone.

Zandra Maclean:

Yeah. See, she's the people person. I like just being in my little room with the patient, just chitchatting. I don't like big crowds. But for me, what I could put out there is basically just explore what you want to do. And this is a great stepping stone to further boost where you want to go, what you want to do. And as I said, sometimes you might just want to stay right in your specialty, others, it does boost you up, you can go be a nurse. You can go do whatever you want to do. But this is a great starting point and I think you get your hands in it and you should love it, but not everyone does.

Emily Tadlock:

Well, I can tell that you both do love it.

Zandra Maclean:

Yes.

Emily Tadlock:

And that's awesome. So thank you so much for sharing your stories with me.

Zandra Maclean:

Yes, thank you.

Madeleine Dow:

Thank you.

Speaker 1:

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