Training Check-list for Front Office

Volunteer/Staff Name: _____   **Trained by:** _____

Patient Intake	Date Completed
Patient sign-in sheet	
Daily log sheet use	
Checking for follow-up visit	
Putting a chart together	
Computer	
Entering a new patient	
Entering a return medical visit	
Entering a dental visit	
Check-out medical patient	
Check-out dental patient	
Entering labs and procedures	
Name labels	
Charts	
Letter system	
Filing	
Documentation of no-show appointments	
Tab dividers	
Office machines	
Copy machine	
Fax machine	
Answering the phone	
Transfer to voicemail	
Intercom system	
Medical Records	
Social Security	
Attorney request	
Medical providers	