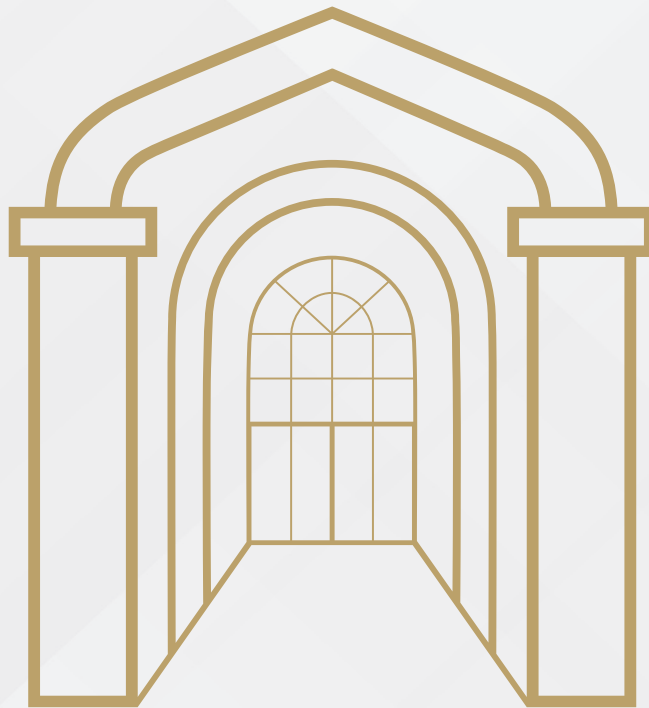


2024-2025
SURGICAL TECHNOLOGY
STUDENT
HANDBOOK



EAST CENTRAL
COMMUNITY COLLEGE

With *you* In Mind

Accreditation

East Central Community College is accredited by the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) to award the certificate in Practical Nursing. Questions about the accreditation of East Central Community College may be directed in writing to the Southern Association of Colleges and Schools Commission on Colleges at 1866 Southern Lane, Decatur, GA 30033-4097, by calling (404) 679-4500, or by using information available on SACSCOC's website (www.sacscoc.org).

Non-Discrimination

East Central Community College does not discriminate on the basis of race, color, religion, national origin, sex, age, or qualified disability in its educational programs and activities, employment practices, or admissions processes. The following offices have been designated to handle inquiries regarding the non-discrimination policies of East Central Community College:

Inquiries regarding compliance with Title VI and ADEA are coordinated by the Executive Vice President, Walter Arno Vincent Administration Building, Room 171, Post Office Box 129, Decatur, MS 39327, Phone: 601-635-6202 Fax: 601-635-4011, Email: compliance@eccc.edu.

Inquiries regarding compliance with Title IX and Section 504 are coordinated by the Vice President of Student Services, Eddie M. Smith Student Union Building, Room 101, Post Office Box 129, Decatur, MS 39327, Phone: 601-635-6267, Fax: 601-635-6247 Email: compliance@eccc.edu.

Inquiries regarding compliance with ADA are coordinated by the Director of Student Success, Mamie Ethel Burton Memorial Library, Post Office Box 129, Decatur, MS 39327, Phone: 601-635-6228, Fax: 601-635-2150, Email: compliance@eccc.edu.

Please refer to the ECCC College Catalog, the ECCC Policies & Procedures Manual, and the ECCC Student Handbook to review all College policies, procedures, guidelines, and other information as it pertains to both students and employees of East Central Community College in Decatur, Miss. These publications are located on the college's website at www.eccc.edu.

(The College reserves the right to change any policies announced herein when deemed necessary.)

Table Of Contents

Introduction	5
Drug Free School	5
Inclement Weather Policy	5
Accreditation.	5
ECCC Vision Statement	6
ECCC Mission Statement	6
Institutional Commitments	6
Program Goals	7
Program Philosophy	7
Program Purpose	8
Core Curriculum Surgical Technology	8
Program Description	8
Grading And Evaluation	9
Division Of Healthcare Education Rounding Policy	9
Withdrawals	9
Reasons For Dismissal	10
Policy For Readmission Of Students	10
Appeal, Complaint, Or Grievance Procedures	11
Line Of Authority In Clinical Experience	11
Smoking/Tobacco/Gum Policy	11
Background Checks	11
Disciplinary Measures	11
Student Expectations	12
Written Evaluations	12
Missed Assignments	12
Missed Tests	12
Attendance Policy	13
Surgical Rotation Case Requirements	14-15
Clinical Rotation Case Requirements	16

Scrub Role Descriptions	17
Student Work Policy And Procedure	18
Assignment of Clinical Experience	18
Clinical Setting	18
Ethics And Etiquette	18-19
Liability Insurance	19
CPR Certification	19
Health Requirements	19
Essentials Requirements	20-21
Student Evaluation	22
Clinical Evaluation Sheets	23-24
Weekly Case Report Form	25-29
ECCC Surg Tech Program Summative Clinical Case Log	30
Information Concerning Hepatitis B Vaccine	31
Drug And Alcohol Policy	32-33
Tattoo Policy	33
Uniform Policy.	33
Surgical Technology Scrub, Gown, Glove Critical Form	34-45
Catherization Critical Form	46
Surgery Evaluation Form	47
Vital Sign Critical Form	48
Simulation Confidentiality.	49
Photography/Recording.	49
Healthcare Documents	49
Distance Learning Mission Statement	49

The College Reserves The Right To Change Any Policies Announced Herein When Deemed Necessary.

Introduction

The Surgical Technology Handbook is intended to address information needs which are unique to the Surgical Technology students. The handbook serves to supplement the College Policies and Procedures publications, which applies to all students of East Central Community College, such as the:

- Current College Catalog
- East Central Community College Student Handbook
- College Policy and Procedure Manual
- Each semester course syllabus

The plans, policies, and procedures described in this handbook are subject to change by the College at any time.

Failure to read this handbook and other sources of regulations governing college life at ECCC does not excuse the student from the requirements and regulations described therein.

This edition of the handbook does repeal and supersede all previous editions of the handbook.

Drug Free School

East Central Community College adheres to the requirements of the Drug Free Workplace and the Drug Free Schools Act passed by the United States Congress and signed by the President. The possession, manufacture, or distribution of controlled substances is a violation of college rules and regulations. Please refer to the appropriate policies and disciplinary procedures outlined in the ECCC Student Handbook for more details.

Inclement Weather Policy

Please refer to East Central Community College's student handbook regarding inclement weather policy and the use of Warrior Alert.

Accreditation

The Surgical Technology Program, located on the Decatur, MS campus, receives continuing accreditation from the Commission on Accreditation of Allied Health Education Programs (CAAHEP), 9355 113th St. N., #7709, Seminole, FL 33775, Phone: 727-210-2350, Website: www.caahep.org and Accreditation Review Council on Education in Surgical Technology and Surgical Assisting (ARC/STSA), 19751 E. Mainstreet, Suite 339, Parker, CO, 80138, Phone: 303-694-9262, Website: [https://arcstsa.org](http://arcstsa.org)

Revised: Spring, 2025

EAST CENTRAL COMMUNITY COLLEGE

Vision Statement

East Central Community College will be recognized nationally as a premier community college and locally as the preferred gateway to higher education and training for residents of east central Mississippi due to our focus on students and their success and our commitment to communities and their development.

Mission Statement

East Central Community College is a public, open-access, comprehensive, two-year institution of higher education that provides university transfer education, distance education opportunities, career-technical programs, workforce development services, and basic skills offerings to meet the educational and training needs of the residents of Leake, Neshoba, Newton, Scott, and Winston counties located in east central Mississippi.

Institutional Commitments

Student Success: Students are the reason for our existence and their achievement is the focus of all of our work at East Central. Therefore, we are determined to foster the academic, career, and personal success of all of our students through providing a vibrant and healthy learning environment and assisting them in developing their full potential and achieving their life goals.

Teaching & Learning: The ultimate purpose of teaching is to help students make passionate connections to learning. Therefore, we will be committed to the highest standards of instructional excellence and will provide exemplary learning opportunities for our students through effective teaching, innovative programming, and the utilization of various instructional methodologies.

Community Partnerships: The long-term, strategic goals of any community college must be aligned with and responsive to the needs of the communities it serves as it seeks to provide a high quality, postsecondary education. Therefore, we will engage in collaborative and innovative partnerships with business and industry, education, government, and community groups to enrich the learning experiences of our students and communities and to advance the quality of life for our citizens.

Resource Planning & Development: Strategic investments in human, physical, financial, and technological resources have a fundamental impact on the desired outcomes of a community college. Therefore, we will align our resources with our vision, mission, and institutional commitments and pursue innovative resource utilization and development strategies in an effort to ensure student success and community development.

Communication: Clear, concise, and timely communication with internal and external constituencies is a critical success factor for any effective organization. Therefore, we will develop comprehensive strategies and implement broad plans and/or policies to advance our visibility and to educate, engage, and involve stakeholders in the achievement of the college vision and the performance of the college mission.

Program Goals

The goals of the Surgical Technology Program at East Central Community College are to: Prepare entry-level Surgical Technologists who are competent in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains to enter the profession.

1. Provide a scientific foundation for surgical technology through a competency based program whereby each student can develop:
 - a. An appreciation of surgical technology as an art and as a science
 - b. Scientific principles in related sciences for their value to surgical technology but limited to that learning which directly applied to surgical technology
 - c. Surgical technology abilities based on an accepted body of scientific facts and concepts
 - d. The skill needed to function as a member of the surgical team.
2. Improve self-understanding and interpersonal relationships with others whereby the student can develop:
 - a. Abilities for effective communications
 - b. Abilities for problem solving
 - c. Professional concepts to function effectively in surgical technology organizations, in related organizations, and in community activities.
3. Teach students to function as an effective sterile team member through competency based program with validated performance checklists so he/she will have the ability to:
 - a. Provide assistance to the surgeon during surgery cases
 - b. Meet physical, emotional, and social needs of individuals of all age groups within the scope and functions of surgical technology
 - c. Provide sterile techniques and basic setups for various surgery procedures, and assist the professional nurse, oral surgeon, or surgeon in more complex situations.
4. To prepare students for employment as surgical technologists.

Philosophy

The Surgical Technician must be a very dedicated knowledgeable person who can easily and readily adapt to the rapidly changing medical field.

We believe that it is the responsibility of the faculty of East Central Community College to provide a sound educational program. We believe it is our responsibility to plan and secure learning experiences, whether in the classroom or clinical setting which will prepare the student to function in the role of a Surgical Technician upon graduation.

Upon graduation, the Surgical Technician should be able to provide a safe, efficient, and supportive environment for the surgical patient. The Surgical Technician should respect the patient's inherent right to privacy, dignity, and confidentiality. The Surgical Technician should have an understanding and recognize the importance of teamwork, consideration, and cooperation.

We, at East Central Community College believe that everyone regardless of race, religion, or sex has the right to expect competent, safe and efficient health care. We will respect the rights of our patients and maintain their privacy and confidentiality at all times. We are committed to teaching and instilling these qualities in our surgical technology students.

Purpose

The purpose of the Surgical Technology program at East Central Community College is to help meet the needs of the community for surgical technician services. This is achieved through an integrated teaching structure between local hospitals and East Central Community College.

The curriculum is designed to establish a competency based program of instruction and educational practice experiences, which will prepare qualified students to apply their skills in relation to operating room patient care, to become certified in their profession, and to become active citizens of the community in health related areas.

Core Curriculum For Surgical Technology

Upon final adoption of the Recommended Standards of Practice, Section II, Role Definitions and qualifications, by the House of Delegates or the Board of Directors of the Association of Surgical Technologists, Inc. (AST), all prior definitions and statements of qualifications and competencies, if at variance with those stated in the Recommended Standards of Practice, shall be considered to be null and void; and all reference to role definition, qualifications and competencies, and/or questions of scope of practice shall be made to the Recommended Standards of Practice, Section II, as adopted with the provision that the Core Curriculum for Surgical Technology and to be considered the appropriate educational guides for curriculum design and statement of the expected base of knowledge for each area. The areas of the core curriculum include, Basic Science which consists of Anatomy & Physiology, pathophysiology, and microbiology. The Related Sciences consist of Pharmacology, anesthesia, and medical terminology. Biomedical Sciences include computer skills, electricity, physics, and robotics.

Program Description

Fundamentals of Surgical Technology SUT 1113. 3SH

This is a basic introductory course including hospital and surgical suite organization and environment, history, legal responsibilities, terminology, interpersonal relationships, and biomedical sciences. (3hr lecture)

Principles of Surgical Technology SUT 1217. 7SH

This course is a comprehensive study of aseptic technique, safe patient care, anesthesia, pharmacology, and surgical techniques. (3 hr lecture, 8 hr lab)

Medical Terminology for the Surgical Technologists SUT 1223. 3SH

This course is a study of medical terminology as it relates to the practice of surgical technology. (3 hr lecture)

Surgical Microbiology SUT 1413. 3SH

This is an introduction to pathogenic microorganisms related to surgery and their effect on wound healing and infection. Includes principles of sterilization and disinfection. (3hr lecture)

Basic & Related Surgical Procedures SUT 1518. 8SH

This course includes instruction in regional anatomy, pathology, instrumentation, surgical techniques, and safe patient care in general surgery, gynecology, obstetrics and genitourinary. It requires clinical experience in area hospital surgical suites and related departments. (4hr lecture, 12 hr clinical)

Specialized Surgical Procedures SUT 1528. 8SH

This course includes instruction in regional anatomy, pathology, instrumentation, techniques and safe patient care in surgical specialty areas of ear, nose, and throat; eye; oral and maxillofacial surgery, orthopedics and plastics. This course requires clinical experience in area hospital surgical suites and related departments. (4hr lecture, 12 hr clinical)

Advanced Surgical Procedures SUT 1539. 9SH

This course includes instruction in regional anatomy, pathology, instrumentation, techniques, and safe patient care in surgical specialty areas of orthopedics, neurosurgery, thoracic, peripheral vascular, cardiovascular surgery, employability skills, and all hazards preparation. This course requires clinical experience in area hospital surgical suites and related departments. (4hr lecture, 15 hr clinical)

Grading And Evaluation

The grading scale in surgical technology is as follows:

A	94-100
B	87-93
C	80-86 (Must maintain 80 averages on courses and critical grades to continue)
D	73-79
F	Below 73
W	Withdrawal passing
I	Incomplete but can be made up

Classroom Performance: Students must maintain a score of 80 or above in each of the subject areas taught. Any student that does not maintain an 80 score will not be allowed to continue in the Surgical Technology Program at East Central.

Clinical Performance: The student will have critical pass-offs to assess their clinical performance prior to the hospital setting. The student must pass these skills with a minimum score of 80 before being allowed into the hospital setting. Please see the critical pass-offs description below for grading details.

Written Assignments: All written work must be turned in on time. Instructors will notify the students of the dates specific written assignments are due. Five points per day will be deducted from the grade for assignments that are up to three days late. After three days, the student will receive a zero for the assignment.

Critical Pass-offs: Each student has up to 3 attempts to make an 80 on a critical. After a failing grade on the first attempt, a 2nd attempt will automatically be deducted 5 points, and a 3rd attempt will automatically be deducted 10 points. (For example, a student will begin with a 95 on a 2nd attempt and a 90 on a 3rd attempt.)

Division of Healthcare Education Rounding Policy

Final grades will be rounded to the next higher number at the 0.5 or greater point. Grades will not be rounded to the next higher number at the hundredth's place; however, these points will be retained and computed into the student's average. No rounding will take place until the final grade average.

Example:

91.5 rounds to 92

91.4 remains 91.4

91.49 remains 91.49

Withdrawal

Registration for a course makes the student responsible for attending the class until the course is completed or until, with permission of the Dean, the Office of Admissions authorizes withdrawal (W) from that course. A student who withdraws from the program must file an official withdrawal in *myEC*. Failure to comply will result in the recording of failing grades in all Surgical Technology courses in which the student is registered.

Reasons For Dismissal

The following actions will result in suspension from the Surgical Technology Program.

1. Willfully refusing to carry out orders given by a superior. (Superior includes, but is not limited to, instructor, head nurse, or department head).
2. Exhibiting evidence of being under the influence of alcohol or drug stimulants during the scheduled work or school day.
3. Cheating.
4. Falsification of any information relative to work in the program.
5. Missing more than the allowed number of absences.
6. Failing to maintain a score of 80 in each subject area.
7. Failing to achieve a score of 80 on skills after three attempts.
8. Failing to follow the policies of the facility at which clinical experience is gained.
9. Failing to maintain confidentiality in the clinical setting. Any discussion of patients, their diagnoses, or problems outside the clinical or classroom setting will not be tolerated.
10. Inappropriate behavior in the classroom such as: excessive talking, sleeping in class, foul language or being disruptive to fellow students.
11. Failing to follow the policies of East Central Community College.

Policy For Readmission Of Students

Each readmission case will be considered on an individual basis. Readmission may be denied based on any relevant information regarding the individual application. Falsification of any part of an application is reason for denial of readmission.

Students who withdrew passing or who satisfactorily completed one or more semesters and who seek readmission must:

1. Submit a letter to the Dean of Healthcare Education requesting readmission.
2. Readmission may be granted on space available basis.
3. Such students seeking readmission must be interviewed by the Surgical Technology instructors prior to readmission.
4. Students readmitted may be required to take (retake) all of the Surgical Technology course work.

Students who withdrew failing or who failed in any area of the Surgical Technology curriculum and who seek readmission must:

1. Submit a letter to the Dean of Healthcare Education requesting readmission.
2. Readmission may be granted on space available basis.
3. The student who seeks readmission will be interviewed by the Surgical Technology Instructors prior to readmission.
4. Any student who seeks readmission after an absence of one year or more must take (retake) all of Surgical Technology course work.

Appeal, Complaint, Or Grievance Procedures

Absentee appeals, due process procedures, grade appeals, and student complaints will follow the procedures prescribed in the *East Central Community College Catalog*, the *Policies and Procedures Manual*, and the *ECCC Student Handbook*. Student complaints under Part H of the Higher Education Act may be filed following the procedures outlined in the *East Central Community College Catalog*.

Line Of Authority In The Clinical Experience

The instructor is employed to help the students. The instructor is the student's immediate supervisor. The students work under the direction of the O. R. supervisor or head nurse. The supervisor is required to contact the instructor regarding any situation, which needs the instructor's attention, and to request help needed with a procedure.

Smoking/Tobacco/Gum Policy Tobacco-Free Policy (ECCC Policy No: 620)

East Central Community College is committed to providing a safe and healthy working and learning environment for the students, faculty, staff, and visitors on its campus; therefore, the college has adopted the following tobacco-free policy, effective January 1, 2016.

"This policy prohibits use of all tobacco products including smoke-emanating (electronic) and smokeless products on all campuses of East Central Community College including, but not limited to, campus buildings; campus housing; community areas; campus parking lots; college-owned vehicles, regardless of location; and privately-owned vehicles while on campus. This policy applies to all students, faculty, staff, and other persons on campus, regardless of the purpose for their visit. Violators of the policy will be disciplined through the disciplinary system. For students, repeated infractions may result in expulsion; for employees, repeated infractions may result in termination of employment; for visitors, infractions may result in removal from campus property."

In addition to the college tobacco-free policy, students are not allowed to use tobacco products at the clinical facilities.

GUM

Students are to refrain from chewing gum while in the classroom and the patient care areas of the clinical facilities.

Background Checks

All Healthcare Education Division students must submit to and satisfactorily complete a criminal background check. Admission may be rescinded and reversed based on review of the students' criminal background check. Students who refuse to submit to a criminal background check or submit an unsatisfactory criminal background check review will not be eligible for admission into the program. Students who are dismissed from a Healthcare Education Division program may seek admission into another educational program.

Disciplinary Measures

East Central Community College attempts to protect the rights of all students by establishing, in writing, the procedures governing students' rights and responsibilities. These are spelled out in the *ECCC Student Handbook*. Any situation involving disciplinary action will follow the procedures outlined in the *ECCC Student Handbook*.

Student Expectations

The following expectations apply to all students in the Surgical Technology Program at East Central Community College.

1. Students are expected to complete all homework assignments.
2. Students are expected to demonstrate initiative both in the classroom and in the clinical setting.
3. Students are expected to adhere to all college and hospital policies.
4. Students are expected to cooperate and put forth every effort to become a qualified, ethical, and efficient Surgical Technician.
5. Students are expected to know the roles of the Surgical Technician and to function within those roles.
6. Students are expected to know the limitations of the Surgical Technician and function within those limitations.
7. Students are expected to become knowledgeable of and interested in the professional organization for the Surgical Technician.
8. Students are expected to conserve supplies and prevent waste.
9. Students are expected to be courteous, patient, and understanding with patients, relatives, and other students in the classroom and clinical setting.
10. Students are expected to accurately perform mandatory surgical technology skills.
11. Students are expected to develop the ability to organize work in the clinical setting in a quick, safe, and efficient manner.
12. Students are expected to access (AST review) in the computer lab 45 minutes every week. The designated time for this is after class on Friday. Your instructors will receive an email with data showing scores and individuals that log in. This is mandatory, and will be monitored!

Written Evaluations

Clinical evaluations of student performance will be made by the instructor. The instructor will counsel with each student at regular intervals about these evaluations. Students must sign the evaluation to verify that they have reviewed its contents.

Missed Assignments

The student is responsible for any assignments missed due to absences, tardies, or leaving early regardless of the cause. If the student misses an assignment due date, the student is responsible for submitting the work on the day he/she returns to class. Five points will be deducted from the grade for every day the assignment is late; after three days, the student will receive a zero, "0" for the assignment.

Missed Tests

The student is responsible for making up a missed test due to absences for any cause. The student will be expected to take the test the first day upon returning to school, or a grade of zero, "0", will be given to the student. Excused absences will have no penalty (i.e.: doctor's written excuse, personal or child's illness, funeral, or approved school function absences). Students with any unexcused absences will be expected to take the test on the first day they return to school and 15 points will be deducted from their test score.

Attendance Policy

Students are expected to attend all classes and meetings which constitute a regular component of the course. To guide and protect students the following policies are adopted:

Absences

1. A total of eight (8) absences are allowed during a 12 month period. These eight (8) absences will be prorated as follows: Three days are allowed in the fall; three days are allowed in the spring; and two days are allowed in the summer. These absences can be used for personal illness, illness in the immediate family, or death in the family. A student is expected to notify the instructor of any absence as soon as possible. Students missing more than the allowed number of absences in a semester will be cut out of the program with a grade of F.
2. There will be four (4) clinical makeup days during the year. These days will be made up as follows: Two make-up days in the summer and two make-up days in the fall. Only excused absences will be allowed to be made up.
3. If any clinical time is missed, the student must make-up one (1) entire clinical day.
4. A student may not leave the clinical site during clinical hours for any reason, unless give verbal/ written permission from the instructor.
5. The student must have documented proof of 125 scrubbed cases at the end of the fall semester to graduate from the program.
6. A student may not work beyond the eighth month of pregnancy without written approval from her physician. Maternity leave should begin at the end of a regular semester if at all possible. Students returning from maternity leave may enter a future program at the beginning of the term missed. All grades for previously completed course work will be retained in the student's permanent record in the Office of Admissions, Records, and Research.

East Central Community College
Surgical Technology
Surgical Rotation Case Requirements

Goal Statement: The goal of the Surgical Rotation Case Requirements is to contribute to the development of a well-rounded, competent, entry-level surgical technologist. As stated in CAAHEP Standard II. Program Goals, C. Minimum Expectations:

"To prepare competent entry-level surgical technologists in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains."

Objectives:

- I. The surgical technology program is required to verify through the surgical rotation documentation the students' progression in the scrub role in surgical procedures of increased complexity as he/she moves towards entry-level graduate competency.
 - A. While it is understood that no program is able to control surgical case volume or the availability of various surgical specialties, it is the responsibility of the program to provide students with a diversified surgical rotation experience.
 - B. No information in this document prevents programs from exceeding the minimum established by the Surgical Rotation Case Requirements.
- II. Students must complete a minimum of 120 cases as delineated below.
 - A. General Surgery cases
 1. Students must complete a minimum of 30 cases in General Surgery; 20 which must be performed in the First Scrub Role. The remaining 10 cases may be performed in either the First or Second Scrub Role.
 - B. Specialty cases
 1. Students must complete a minimum of 90 cases in various surgical specialties, excluding General Surgery; 60 which must be performed in the First Scrub Role. The additional 30 cases may be performed in either the First or Second Scrub Role.
 - a. A minimum of 60 surgical specialty cases must be performed in the First Scrub Role and distributed amongst a minimum of four surgical specialties.
 - (1) A minimum of 10 cases in the First Scrub Role must be completed in each of the required minimum of four surgical specialties (40 cases total required).
 - (2) The additional 20 cases in the First Scrub Role may be distributed amongst any one surgical specialty or multiple surgical specialties.
 - b. The remaining 30 surgical specialty cases may be performed in any surgical specialty either in the First or Second Scrub Role.

C. Optional surgical specialties

1. Diagnostic endoscopy cases and vaginal delivery cases are not mandatory. However, up to 10 diagnostic endoscopic cases and 5 vaginal delivery cases can be counted toward the maximum number of Second Scrub Role cases.

- a. Diagnostic endoscopy cases must be documented in the category of "Diagnostic Endoscopy", rather than by specialty.
- b. Vaginal delivery cases must be documented in the category of "Labor & Delivery" rather than in the OB/GYN specialty.

D. Case experience in the Second Scrub Role is not mandatory.

E. Observation cases must be documented, but do not count towards the 120 required cases.

F. Counting cases

1. Cases will be counted and documented according to surgical specialty (exception being diagnostic endoscopic cases; refer to II. C.1.a. above).

2. Examples of counting cases

- a. Trauma patient requires a splenectomy and repair of a Lefort I . Two cases can be counted and documented since the splenectomy is general surgery specialty and repair of LeFort I is oral-maxillofacial surgical specialty.
- b. Patient requires a breast biopsy followed by mastectomy. It is one pathology, breast cancer, and the specialty is general surgery; therefore, it is counted and documented as one procedure – one case.
- c. Endoscopic cases that convert to an open case (e.g.: Laparoscopic Cholecystectomy converted to an Open Cholecystectomy) are counted and documented as one (1) procedure—one case.

Clinical Rotation Case Requirements

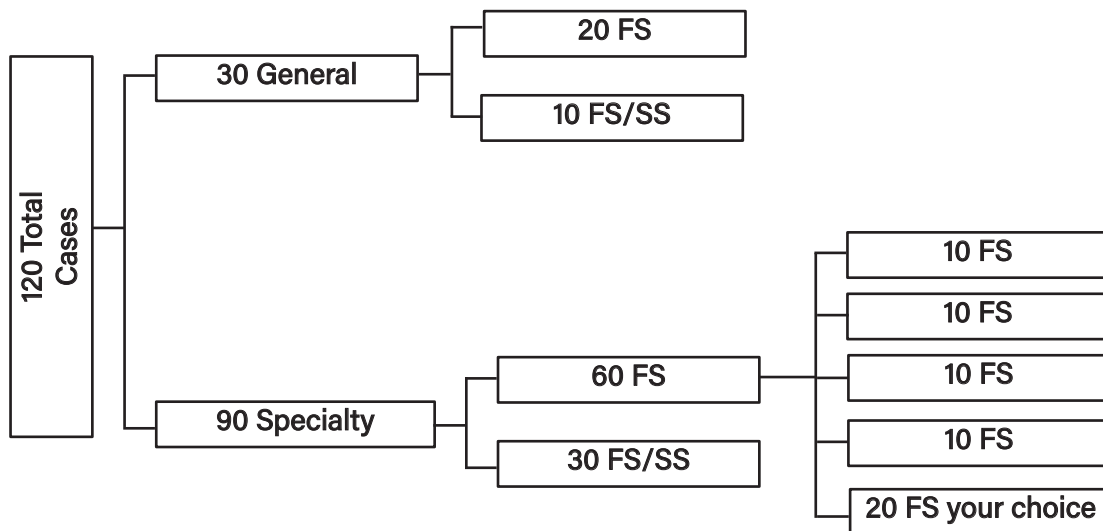
Surgical Specialty	Total # of Cases Required	Minimum # of First Scrub Cases Required	Additional first or Second Scrub role cases that can be applied towards the minimum of 120
General Surgery	30	20	10
Surgical Specialties: <ul style="list-style-type: none"> • Cardiothoracic • ENT • Eye • GU • Neuro • OB-GYN • Oral/maxillofacial • Orthopedics • Peripheral-vascular • Plastics 	90	60	30
Optional: <ul style="list-style-type: none"> • Diagnostic Endoscopy: • Bronchoscopy • Colonoscopy • Cystoscopy • EGD • ERCP • Esophagoscopy • Laryngoscopy • Panendoscopy • Ureteroscopy 			10 diagnostic endoscopy cases may be applied only toward the Second Scrub Role cases. <ul style="list-style-type: none"> ▪ Refer to Objective II.C.
Optional: Labor & Delivery			5 vaginal delivery cases may be applied only toward the Second Scrub Role cases. <ul style="list-style-type: none"> ▪ Refer to Objective II.C.
Totals	120	80	40

Scrub Role Descriptions

I Surgical Rotation and Roles

1) Surgical Rotation Case Requirements

a) A student must complete a minimum of 120 cases as delineated below in the diagram.



2) First and Second Scrub Role and Observation

a) First Scrub Role

- I. To document a case in the First Scrub (FS) role, the student shall perform the following duties during any given surgical procedure with proficiency:
 - i) Verify supplies and equipment
 - ii) Set up the sterile field
 1. Instruments
 2. Medication
 3. Supplies
 - iii) Perform required operative counts
 1. AST guidelines
 2. Facility policy
 - iv) Maintain sterile technique
 1. Recognize Sterility breaks
 2. Correct Sterility breaks
 3. Document as needed

b) Second Scrub Role

- I. The SS role is defined as a student who has not met all the criteria for the FS role, but actively participates in the surgical procedure in its entirety by completing any of the following:
 - i) Assistance with diagnostics endoscopy
 - ii) Assistance with vaginal delivery
 - iii) Cutting suture
 - iv) Providing camera assistance
 - v) Retracting
 - vi) Sponging
 - vii) Suctioning

c) Observation Role

- I. The O role is defined as a student who has not met criteria for the FS or SS role. The student is observing a case in either the sterile or non sterile role. Observation cases cannot be applied to the required 120 cases count but must be documented.

Student Safeguard Work Policy And Procedure

As specified in the East Central Community College Surgical Technology Handbook and the East Central Community College Catalog, all student activities associated with the curriculum, especially while students are completing his or her clinical rotations, will be educational in nature. Students will not be receiving any monetary remuneration during this educational experience, nor will he or she be substituted for hired staff personnel within the clinical institution, in the capacity of a surgical technologist. Students who work at a clinical institution must work after clinical hours only, and students must be pre-approved to work by the surgical technology instructors and their employer (hospital, etc.). Students are under the supervision of East Central Community College surgical technology instructors during clinical hours, 6:30 a.m.-3 p.m. After 3 p.m. students working are under the supervision of the clinical institution. Students who work 11 p.m. to 7 a.m. the night before a clinical experience are considered impaired and are not safe to provide patient care in the clinical setting.

Assignment of Clinical Experience

Students will be assigned to the appropriate clinical rotation by the ECCC surgical technology instructor(s). Clinical schedules may be altered/changed by the ECCC surgical technology instructor(s) based on clinical agency requirements or changes. Students may not switch or manipulate their assigned clinical schedule at any time. The ECCC surgical technology instructor(s) may manipulate the clinical schedule at any time to meet the needs of the College, students and clinical site.

Clinical Setting

1. Clinical time begins at 6:30 a.m. and the student must be at the hospital in proper attire ready to begin work at 6:30 a.m.
2. No jewelry is to be worn at any time in the clinical setting. (Example: earrings, belly rings, tongue rings, necklaces, watches, etc. . .). No false eyelashes are to be worn in clinical setting.
3. Fingernails are to be kept short, clean, and neat.
4. Students are required to practice good hygiene. (Example: bathe daily, wear deodorant, etc.).
5. Excessive make-up or perfume will not be allowed.
6. If a student cannot be at clinical he/she must notify the instructor and the O. R. Supervisor before 6:30 a.m.
7. In the clinical setting the student will be required to abide by the rules set by that establishment. This includes parking in the area designated for students.
8. Students will leave the clinical area at 3:00 p. m. Students will not remain in the operating room after the designated time, unless specifically requested to remain by the instructor or operating room supervisor.
9. There will be a 30 minute break allowed during clinical practice. Breaks will be allowed according to the surgery schedule.

Ethics And Etiquette

Your actions outside the college and hospital reflect upon you, East Central, and the hospital. Therefore it is imperative that one conduct him/herself in a manner which brings credit to the individual, East Central, and the hospital.

You must separate familiarity and friendliness. Patients and their families appreciate friendliness but resent any intrusion into their personal lives.

Do not accept tips from patients. This includes candy and food, which a patient may offer you.

The Golden Rule is the best guide for behavior in any area, especially in a hospital. Remember to apply the Golden Rule in working. Care for your patients but respect their rights as individuals.

Do not discuss patients and their problems outside the professional setting. Do not take your work into the hospital corridors or home with you.

These behaviors are crucial to future employability. Begin to practice them now so that they will become part of your normal behavior pattern.

Liability Insurance

All students are required to have liability insurance to protect them in the performance of their duties. The forms for the liability insurance will be provided by East Central. Fees are paid through student course fees.

CPR Certification

All students are required to hold certification in American Heart Association Basic Life Support for Healthcare Providers before beginning the clinical phase of instruction. The instructor will arrange for this certification; however the student will be responsible for any cost.

Health Requirements

ECCC healthcare programs promote health of students and the public for whom care is provided in compliance with affiliated clinical agencies. Applicants and students in healthcare programs are required to submit and maintain documented proof of health to the Office of Healthcare Education. Applicants must submit documentation of the following:

All healthcare students are required to submit and maintain health requirements to include the following.
Post-admission

- Varicella immunization (2 series) or positive titer
- Annual 2-step tuberculosis skin test or QuantiFeron®-TB Gold In-Tube blood test (within last 6-months).

NOTE: The 2-step TB skin tests are charged through course fees. Students are responsible for any fees associated with the blood test or clearance of TB from a healthcare provider.

- Measles, Mumps and Rubella (MMR) vaccination with 2 vaccinations or positive titer documentation.
- Hepatitis B vaccination, proof of titer, or statement of declination.
- A satisfactory physical examination including the essential functions related to the American with Disabilities Act (ADA) core standards completed by a licensed Physician or Nurse Practitioner.
- All students will be required to have annual influenza vaccination.

East Central Community College - Division Of Healthcare Education

Essential Requirements For Health Care Students

The faculty has specified the following non-academic criteria, which all students are expected to meet in order to participate in healthcare education programs and professional practice. The student must be able to participate actively in all demonstrations, laboratory exercises, and clinical experiences in the clinical component and comprehend the condition of all patients assigned to them.

STANDARD	ESSENTIAL ACTIVITIES/TASKS (not all inclusive)
Critical thinking ability sufficient for clinical judgment and decision-making. *	<ul style="list-style-type: none"> • Use relevant data to support the decision making process. • Identify priorities of care based on analysis of data. • Analyze and use assessment findings to plan care for clients and families. • Evaluate the plan of care and revise as appropriate. • Solve problems and make valid, rational decisions using logic, creativity, and reasoning. • Demonstrate ability to compute dosages and knowledge of pharmacology.
Interpersonal abilities sufficient to interact with individuals, families and groups from a variety of social, emotional, cultural, and intellectual backgrounds.	<ul style="list-style-type: none"> • Establish rapport with clients and colleagues through speech, touch, and hearing. • Work effectively in small groups as team members and as a team leader. • Practice therapeutic (non-harmful) communication using speech, hearing, and judgment of appropriate responses.
Communication abilities sufficient for interaction with others in verbal, nonverbal, and written form.	<ul style="list-style-type: none"> • Communicate therapeutically with clients, families, and groups in a variety of settings. • Communicate pertinent information in the English language both verbally and in writing to appropriate persons. • Document data and nursing care completely and accurately using appropriate terminology. • Provide health teaching for clients, families and groups.
Gross and fine motor abilities sufficient to provide safe and effective surgical technologist care.	<ul style="list-style-type: none"> • Calibrate and use equipment such as reading numbers on measuring cups, syringes and adjusting flow rates with stopcocks. • Maintain sterile technique when performing sterile procedures. • Hold skin taut with one hand while inserting needle in skin or vein with the other hand and perform other procedures requiring the use of two hands. • Maintain immobilization devices such as traction equipment and casts, feel for heat or wetness. Be able to use a computer keyboard. • Have good eye-hand coordination and manual dexterity to manipulate equipment, instrumentation, and medication as appropriate.
Environmental	<ul style="list-style-type: none"> • Be exposed to infectious agents, chemicals, medications, blood and body fluids and communicable diseases. • Work in environmental temperatures determined by the client and/or client's condition. • Be able to perform duties in potentially dangerous situations. *

Auditory abilities sufficient to monitor and assess health needs.	<ul style="list-style-type: none"> • Be able to hear alarms, emergency signals, cries for help, and answer phones. • Distinguish changes in tone and pitch such as in listening to patients breathing characteristics. Able to hear and interpret communication in stressful situations such as when more than one person is talking at a time, or when they are talking in a loud voice.
Tactile ability sufficient for physical assessment and intervention *	<ul style="list-style-type: none"> • Palpation related to physical examination. • Perform therapeutic intervention (example, IV catheter insertion).
Physical abilities sufficient to move from room to room, maneuver in small spaces, and accommodate stairwell when necessary.	<ul style="list-style-type: none"> • Move around in patient's rooms, workspaces and treatment rooms. • Perform physical activities necessary to do basic skills such as put on sterile gloves, attach blood pressure cuff on patient's arm, hold one part of a patient's body while performing an action on another part of the body. • Provide or assist with activities of daily living such as bed bath, oral hygiene, and positioning patients. • Transport and transfer patients from various areas to other areas using stretchers, wheelchairs, walkers. EMTs must be able to walk and crawl in less than ideal conditions and terrain. • Lift at least 50 lbs. of weight. EMTs must lift 125 lbs independently or 250 lbs with assistance. • Respond quickly in an emergency. • Able to stand or walk for 75% of a shift. • Gather a minimum of 3-4 pieces of equipment and carry to client's room.
Visual abilities sufficient for observation and assessment necessary in surgical technologist care.	<ul style="list-style-type: none"> • Read numbers on dials, thermometers, gauges, measuring cups, etc. • Distinguish changes in color, size, and continuity of body parts. • Distinguish alterations in normal body activities such as breathing patterns, level of consciousness. • Observe safely features in environment such as water on the floor, obstacles in the path of patient. • Observe nonverbal responses of patients, families or coworkers. • Read small print. • Perform basic surgical technologist skills.
Demonstrate accountability and responsibility in all aspects of surgical technologist practice.	<ul style="list-style-type: none"> • Able to distinguish right from wrong, legal from illegal and act accordingly. • Accept responsibility for own actions. • Able to comprehend ethical standards and agree to abide by them. • Demonstrate flexibility. • Show concern for others.

** Applies to EMT Students.

*** Does not apply to Surgical Technology Students

SUT 1539 Advanced Procedures
Surgical Technology Student Evaluation

Student name: _____

Date: _____

Please rate students with the number system

5 – Excellent

4 – Good

3 - Average

2 – Below average

- a. Knowledge of sterile technique _____
- b. Knowledge of instruments _____
- c. Student's understanding of surgical procedures _____
- d. Is student willing to help others (transporting, pulling supplies, etc . . ? _____
- e. Student's scrubbing technique _____
- f. Gowning and gloving themselves maintaining sterility _____
- g. Gowning and gloving another person _____
- h. Student's behavior toward superiors _____
- i. Student's response to constructive criticism _____
- j. Student's overall attitude _____

Would you have any hesitations about hiring this student based on the questions asked above? _____

If so, why? _____

Student signature: _____ Date: _____

Instructor signature: _____ Date: _____

Student and instructor comments on back.

Student: _____ Date: _____

SUT 1518 Basic and Related Surgical Procedures Clinical Evaluation Sheet

Requirements	Components	Possible Points	Points Received
Punctuality	Be on time, all or none	20	
Attitude	Toward instructor, peers, and coworkers	30	
Assertiveness	Independently volunteering to scrub and cases, pull cases, whatever is necessary to gain experience as a surgical technician	20	
Teamwork	Being an active, productive member of the OR team, working well with others, knowledgeable of instrumentation, anticipating the surgeon's needs, etc.	20	
Open to Constructive Criticism	Being able to accept constructive criticism as a means of improving skills	20	
Case Reports	One due every Friday x7wks. Possible 10 points each =	70	
	Total Possible Points	180	
	Total Points Earned		

Action to be taken:

Students Signature:

Date:

Instructor Signature:

Date:

**SUT 1528 Specialized Procedures
Clinical Evaluation Sheet**

Requirements	Components	Possible Points	Points Received
Punctuality	Be on time, all or none	20	
Attitude	Toward instructor, peers, and coworkers	30	
Assertiveness	Independently volunteering to scrub and cases, pull cases, whatever is necessary to gain experience as a surgical technician	20	
Teamwork	Being an active, productive member of the OR team, working well with others, knowledgeable of instrumentation, anticipating the surgeon's needs, etc.	20	
Open to Constructive Criticism	Being able to accept constructive criticism as a means of improving skills	20	
Case Reports	One due every Friday x7wks. Possible 10 points each =	70	
	Total Possible Points	180	
	Total Points Earned		

Action to be taken: _____

Students Signature: _____ Date: _____

Instructor Signature: _____ Date: _____

Date/Week:_____

Clinical Site:_____

WEEKLY CASE REPORT EVALUATION FORM
Clinical Case Information

Clinical Case Information

This report form is to be used for one or two cases per week as assigned by the instructor. These forms are filled out following the procedures using textbooks, information from patient chart, doctor preference information sheets, and recalled activities. **This is a report that concerns itself with the case as performed.** It requires information according to the expectations of *The Core Curriculum for Surgical Technology* and asks for a report in the general style of a surgeon's post-operative report. This form is used weekly to show progression during clinical aspect of the program.

Date: _____

Student: _____

1st Scrub _____ 2nd Scrub _____ Asst. Circulate _____ Observe _____

Procedure: _____

Surgeon: _____

First Assistant: _____

Staff CST: _____

Circulator: _____

Other: _____

1. Discuss the relevant anatomy.

2. Preoperative Diagnosis:

A. Postoperative Diagnosis:

3. List any special preoperative diagnostic procedures/tests.

4. Discuss any special preoperative preparation procedures.

5. Identify the names and uses of special instruments, supplies, and drugs.

[illegible]

A. Upon dismissal from the surgical room, the patient was:
Alert _____ Awake _____ Asleep _____
Intubated _____ Extubated _____

D. PACU reported the patient's dismissal condition as _____

One Thing I Learned From This Case That Will Help Me As A Surgical Technologist Is:

Instructor's Feedback:

ECCC Surg Tech Program Summative Clinical Case Log

Student Name: _____

Surgical Specialty: Total # of required cases: Minimum # 1st Scrub Required: Additional 2nd scrubs:

General Surgery	30	20	10
-----------------	----	----	----

Student total General:	_____	_____	_____
------------------------	-------	-------	-------

90	60	30
----	----	----

Cardiothoracic	_____	_____	_____
----------------	-------	-------	-------

ENT	_____	_____	_____
-----	-------	-------	-------

Eye	_____	_____	_____
-----	-------	-------	-------

GU	_____	_____	_____
----	-------	-------	-------

Neuro	_____	_____	_____
-------	-------	-------	-------

OB-GYN	_____	_____	_____
--------	-------	-------	-------

Oral/Maxillofacial	_____	_____	_____
--------------------	-------	-------	-------

Orthopedics	_____	_____	_____
-------------	-------	-------	-------

Peripheral-vascular	_____	_____	_____
---------------------	-------	-------	-------

Plastics	_____	_____	_____
----------	-------	-------	-------

Optional GI:	_____	_____	_____
--------------	-------	-------	-------

Optional L&D:	_____	_____	_____
---------------	-------	-------	-------

Totals:	120:	80:	40:
---------	------	-----	-----

Student total:	_____	_____	_____
----------------	-------	-------	-------

Student Signature: _____ 30Director Signature: _____

Information About Hepatitis B And Hepatitis B Vaccination

Hepatitis B virus (HBV) is transmitted from one person to another through blood and body fluids, and primarily infects the liver. In the United States, it is most commonly spread through sexual contact or injection drug use. Health care workers and others exposed to infected blood or body fluids are also at high risk for infection. Worldwide, it is most commonly spread to infants by their infected mothers.

More than half of those infected with the disease show no signs or symptoms, although they may become chronic carriers of the disease and may develop liver disease or liver cancer later in life (usually by age 40). Symptoms of HBV infection vary and may include loss of appetite, fatigue, nausea, and jaundice (yellow eyes and skin), joint pain, and skin rashes.

Worldwide, over 350 million people have chronic HBV infection, and approximately 1 million HBV patients die annually. An estimated 1.25 million people in the U.S. have chronic HBV infection. Each year, approximately 4,000 to 5,000 children are infected with HBV in the United States. The younger the patient is when the disease is acquired, the more likely it is that he or she will develop chronic liver disease or liver cancer.

Who Should and Should Not Receive this Vaccine?

- Adults over 18 who are at risk for hepatitis B should receive the HBV vaccine. Adults are at risk for hepatitis B virus infection if they have had more than one sex partner during a six month period; have been evaluated for a sexually transmitted disease; are health care personnel, or are otherwise exposed to infected blood or body fluids; are men who have sex with other men; or use injection drugs.

Who should not receive the vaccine?

- Those who have had a serious allergic reaction to a previous dose of the vaccine should not receive additional doses.
- People who are moderately or severely ill should consult with their physician before receiving any vaccine.

The series of immunizations with recombinant hepatitis B vaccines are 95% effective at inducing sero-immunity. Because the vaccine has only been in use 20 years, that is how long immunity is known to last. Immunity is probably lifelong.

The summary of adolescent/adult immunization recommendations can be found at:

www.cdc.gov/hepatitis-b/vaccination/index.html

East Central Community College
Health Related Programs

Drug And Alcohol Policy And Procedure

East Central Community College's Healthcare Division is committed to zero tolerance of the use of illegal drugs and the abuse of legal drugs. In addition, the Division strictly prohibits the illicit use, possession, sale, conveyance, distribution and manufacture of illegal drugs, intoxicants, or controlled substances in any amount or in any manner and the abuse of non-prescription and prescription drugs. All Healthcare Division programs prohibit any student from being in a clinical/practicum educational setting or on the campus under the influence of alcohol, drugs, or controlled substances.

All students are required to submit to a drug screen after acceptance to any Healthcare Division program at a time and laboratory designated by the program. The student must provide written consent for the results to be released to the Healthcare Division Dean or designee. It is the intent of the Healthcare Division to maintain an environment that is drug and alcohol free.

If a student is suspected of being under the influence of alcohol or drugs in the clinical/practicum setting, the assigned clinical faculty reserves the right to require a drug/alcohol test. A student's participation in the clinical/practicum program is conditioned upon the student willingness to waive any rights that the student may have and to consent to the initial drug testing, and subsequent random or reasonable-suspicion drug or alcohol screening.

Definition of Impairment

A Healthcare Division student who meets any one of the following criteria will be identified as impaired:

1. The student exhibits impaired professional (i.e., academic or clinical) performance in association with the observed or alleged improper use of alcohol or drugs.
2. The student poses a danger to himself/herself or others or displays behavior that is disruptive to the goals of the student's academic or clinical programs in association with the observed or alleged improper use of alcohol or drugs.
3. The student is, or appears to the reasonable observer to be, under the influence of alcohol and/or other drugs in the classroom, clinical, or other campus or professional setting.
4. The student is discovered using or is found to have possession of any illicit substance on college property or at an event which utilizes the college's name.

For purposes of this policy, the following definitions shall apply:

1. Drug/alcohol screen is a forensic drug screen conducted by a licensed drug screening facility. The screen will detect the presence/non-presence of specified drugs or their analogs at standard industry levels indicating a positive (present)/negative (not present) screen.
2. Illegal drugs are drugs identified by state and federal law as illegal and include but are not limited to: marijuana, hashish, cocaine (including crack), amphetamines, heroin, PCP, hallucinogens and legal drugs taken without a documented prescription for the student.
3. Legal drugs are prescription drugs and controlled substances that are required by law to be prescribed by a physician or licensed health care provider for a specific individual. The drug is considered legal if the person has a written prescription from their health care provider in their name and the dose taken is the dose prescribed.
4. Reasonable Suspicion Testing means drug and alcohol testing based on the belief that a student is using or has used drugs or alcohol in violation of the Healthcare Division's Drug and Alcohol Policy and will be based on a suspicion of impairment (see definition of impairment above). If the student is required to submit to a drug test under this assumption, the student must undergo the testing within 2 hours of notification by faculty and the test will be done at the student's expense.

Procedure:

If the student refuses testing, the student will be immediately dismissed from the program with a grade of "W", unless after the withdrawal date, which will result in a grade of "F".

All collection of specimens, storage, and transportation of specimens and analysis procedures shall be in accordance with the proper chain of custody procedures adopted by the Mississippi State Department of Health.

Confidentiality regarding drug and alcohol testing will be maintained to the extent possible without preventing the use of the information for appropriate academic purposes. The results of any drug/alcohol test will only be given to those persons with a "need to know".

An initial positive test will be followed by a confirmation test to further define the initial test. Only certified labs will conduct confirmation and alcohol tests. If an initial drug/alcohol test is negative, there will be no confirmation drug/alcohol test. Serum alcohol levels are not sent for confirmation. Abnormal alcohol levels will result in the immediate dismissal from the program with a grade of "W", unless the testing is after the drop date, which will result in an "F".

The student will be notified within five working days after receipt of a positive confirmed test result. A positive drug screen will result in academic dismissal. The Dean of the Healthcare Division will inform the student of the consequences of the positive report and options available to the student.

Consequences of a positive confirmed test result: A student for whom a confirmed test for drugs yields a positive result will be dismissed from the program with a grade of "W", unless the testing is after the drop date, which will result in an "F". The student may be referred to a rehabilitation program. Upon successful completion of a rehabilitation program, if eligible, the student can apply for readmission. The college will in no event pay for or provide financial assistance in conjunction with any such rehabilitation program.

Tattoo Policy

In all cases, students must follow the professional appearance policy of the clinical agency.

Uniform Policy

Student uniforms are to be neat, clean, well-fitting, without tears, wrinkles, or stains. The uniform is to be worn only in the healthcare facility or for faculty-approved activities in the community. A lab coat is to be worn over the uniform when not in the hospital giving care. Females may wear a dress in the official uniform of ECCC. The ECCC emblem should be placed on the left side of lab coats. Stirrup pants or ankle fitting pants are not permissible. Dress length should be two inches below the knee. Pants length should touch the top of the shoe at the instep. Appropriate underclothes should be worn (no thongs or colorful underwear) and not be visible through the uniform.

Same colored shoes as uniform are required (black: black). Nursing shoes or athletic shoes must be constructed of materials that are impervious to liquids and contaminated materials. No open-toe or open-heel shoes are allowed. Cloth or canvas tennis shoes are not acceptable. Shoes must be polished and shoestrings must be clean. Socks or knee-high hose must be the same color of shoes and uniform. Socks or knee-high hose must be worn with pants.

Hair is to be kept clean and well groomed. Extremes in hair color should be avoided. Long hair must be pulled back in a ponytail while in the clinical area and the hair should not be allowed to drop down on patient or in work area. Ribbons and colored hair barrettes are not permitted. False eyelashes are not permitted. Males who wear mustaches or beards should keep them trimmed appropriately and well groomed. Those who shave their facial hair should be clean-shaven.

ECCC Surgical Technology Scrub, Gown, Glove Critical
SUT 1217 Principles of Surgical Technique

Student: _____ Evaluating Instructor: _____

Procedure II	Scrubbing (Preliminary and Major Scrub) Time for Procedures II-IX not to exceed 30 minutes	Possible	Allocated
II-A Preliminary Surgical Scrub			
1.	Opened basic pack on back-table	3	
2.	Opened gown pack on Mayo Stand	3	
3.	Checked hands and arms for cuts, infections, etc.	1	
4.	Checked fingernails – clean, short, free of nail polish	1	
5.	Removed all jewelry	1	
6.	Adjusted cap or hood	1	
7.	Adjust goggles or protective eye-wear	2	
8.	Adjusted scrub shirt inside scrub pants	1	
9.	Turned on water and regulated temperature	1	
10.	Washed hands and forearms with antimicrobial soap for 30 seconds	5	
11.	Rinsed thoroughly -- hands higher than elbows	5	
12.	Cleaned fingernails under running water	5	
13.	Discarded nail file	1	
TOTAL POINTS – PROCEDURE II – A		30	

Items Evaluated		Possible	Allocated
II-B	Major Scrub – five minutes – anatomical scrub using circular friction on all four surfaces of hands and arms		
1.	Opened sterile brush/sponge – held in hand during entire procedure	5	
2.	Held brush/sponge perpendicular to nails – scrubbed 30 strokes in a back and forth motion	2	
3.	Brushed all four sides of each digit – 10 strokes for each plane of each digit	2	
4.	Brushed hand 40 strokes		
	a. Back (10 strokes)	2	
	b. Front (10 strokes)	2	
	c. Inner side (10 strokes)	2	
	d. Outer side (10 strokes)	2	
5.	Scrubbed forearm from wrist to 2" above elbow, each side of arm including elbow and antecubital space		
	a. Used light friction with circular motion	4	
	b. Scrubbed arm to 2" above elbow	2	
6.	Rinsed all visible lather from brush/sponge	2	
7.	Transferred brush/sponge to opposite hand	2	
8.	Holding brush/sponge perpendicular to nails of opposite hand, scrubbed 30 strokes – each stroke was a back and forth motion	2	
9.	Brushed all four sides of each digit – 10 strokes for each plane of each digit	2	
10.	Brushed hand 40 strokes		
	a. Back (10 strokes)	2	
	b. Front (10 strokes)	2	
	c. Inner side (10 strokes)	2	
	d. Outer side (10 strokes)	2	

Items Evaluated		Possible	Allocated
11.	Scrubbed forearm from wrist to 2" above elbow, each side of arm including elbow and antecubital space a. Used light friction with circular motion	4	
	b. Scrubbed arm to 2" above elbow	2	
12.	Discarded brush	2	
13.	Rinsed arm scrubbed first thoroughly from fingertip to elbow, keeping hands higher than elbows	3	
14.	Rinsed arm scrubbed last thoroughly from fingertip to elbow, keepings hands higher than elbows	3	
15.	Turned off water and drained excess water from arms	1	
16.	Proceeded to operation room a. held hands between waist and shoulder level	1	
	b. held hands away from body	5	
TOTAL POINTS – PROCEDURE II – B		60	

Surgical Technology

Procedure III	Drying Hands	Possible	Allocated
1.	Picked up towel and held away from sterile field	2	
2.	Did not let towel touch the gown	5	
3.	Did not drop water onto gown or gowning table	5	
4.	Stepped away from sterile field to wipe hands and arms	2	
5.	Faced sterile field	2	
6.	Bent slightly at waist	2	
7.	Did not touch towel to un-sterile scrub unit	5	
8.	Dried one hand, forearm and elbow with blotting, rotating motion	5	
9.	Did not return to an area already dried	5	
10.	Grasped the opposite end of towel with dried hand	5	
11.	Dried opposite hand, forearm and elbow with blotting, rotating motion	5	
12.	Did not return to an area already dried	5	
13.	Discarded towel	2	
14.	Kept hands in front and in view at all times	3	
TOTAL POINTS – PROCEDURE III		53	

Surgical Technology

Procedure IV	Gowning	Possible	Allocated
1.	Picked up gown by lifting straight up and away from sterile field without contaminating sterile field	2	
2.	Stepped away from sterile field	2	
3.	Remained facing sterile field	5	
4.	Lifted gown to shoulder height	2	
5.	Held gown away from body and allowed to open	2	
6.	Put gown on by lacing hands in armholes	2	
7.	Guided arms into sleeves by raising and spreading arms	2	
8.	Kept hands inside cuff of gown	5	
9.	Did not shake gown	2	
TOTAL POINTS – PROCEDURE IV		24	

Procedure V	Closed Gloving (self)	Possible	Allocated
1.	For right hand, kept hand inside gown sleeve	5	
2.	Opened glove folder	2	
3.	With left hand inside sleeve, picked up right glove by cuff	2	
4.	Lifted glove up and away from sterile field	1	
5.	Held right arm with palm upward hand inside sleeve	2	
6.	Placed glove on right forearm	2	
	a. Fingers toward elbow		
	b. Thumb downward		
	c. Glove cuff touching upper edge of cuff	2	
7.	Grasped underside of glove cuff with the right hand	2	
8.	Grasped upper side of glove cuff with the left sleeve-covered hand	2	
9.	Pulled glove out and over cuff of sleeve	5	
10.	Grasped the top of the right glove and/or underlying sleeve with cuff-covered left hand	2	
11.	Pulled sleeve up and glove on	2	
12.	Extended fingers into proper finger slots	5	
13.	For left hand, picked up and away from sterile field	2	
14.	Lifted glove up and away from sterile field	1	
15.	Held left arm with palm upward, hand inside sleeve	2	

Items Evaluated	Possible	Allocated
16. Placed glove on left forearm a. Fingers toward elbow	2	
b. Thumb downward	2	
c. Glove cuff touching upper edge of gown cuff	2	
17. Grasped underside of glove cuff with the left hand	2	
18. Grasped upper side of glove with right gloved hand	2	
19. Pulled glove out and over cuff of sleeve	2	
20. Grasped the top of the right glove and/or underlying sleeve with gloved right hand	2	
21. Pulled glove out and over cuff of sleeve	5	
22. Grasped the top of the right glove and/or underlying sleeve with cuff-covered left hand	2	
23. Pulled sleeve up and glove on	2	
24. Extended fingers into proper finger slots	5	
25. Turned and tied own gown	5	
TOTAL POINTS – PROCEDURE V	74	

Procedure VI Back-table – Mayo Stand		Possible	Allocated
1.	Arranged articles from basic pack in an organized manner on back-table	2	
2.	Draped Mayo Stand		
	a. Checked that stand was not too close to an un-sterile field	1	
	b. Checked cover for a wide cuff	1	
	c. Kept hands under cuff at all times	3	
	d. Slid covers over stand without contaminating hands or gown	3	
	e. Prevented the folded end of cover from folding below back-table level	5	
	f. Assured smoothness of cover on flat surface tray	2	
TOTAL POINTS – PROCEDURE VI		17	

Procedure VII	Establish a Functional, Organized Setup for a Basic Back-table and Mayo Stand for a Specified Procedure	Possible	Allocated
TOTAL POINTS – PROCEDURE VII		100	

Procedure VIII Gowning and Gloving Another Person		Possible	Allocated
1.	Gowning		
	a. Opened hand towel and laid it on extended hand without contamination	5	
	b. Handed gown to other person without contamination	5	
	c. Released the gown without contamination	5	
2.	Gloving		
	a. Obtained gloves from circulator without contamination	5	
	b. Picked up right glove with fingers under the cuff	2	
	c. Held the palm toward the person	5	
	d. Stretched cuff for introduction of hand without contamination	5	
	e. Held glove steady while hand was plunged in	2	
	f. Unfolded cuff of glove over cuff of sleeve, covering the entire cuff	5	
	g. Repeated steps 2 through 6 for left glove	5	
	h. Tied surgeon's gown	5	
TOTAL POINTS – PROCEDURE VIII		49	

Procedure IX Remove Gown and Gloves (self)		Possible	Allocated
1.	Removed gown first	5	
2.	Grasped gown at shoulders without touching self	5	
3.	Pulled downward, pulling sleeves inside out as pulled off arms	5	
4.	Disposed of gown properly	3	
5.	Removed gloves inside out using glove-to-glove then skin-to-skin technique	5	
TOTAL POINTS – PROCEDURE IX		23	

Procedure X	Identify Surgical Instruments	Possible	Allocated
1.	Identified by proper surgical name	25	
2.	Classified instrument in correct category by use	25	
TOTAL POINTS – PROCEDURE X		50	

GRADE:

pts. /480 pts.= /

SUT 1113 Fundamentals of Surgical Technology
Catherization Critical

-
1. Patient Care and Communication 5 pts
 2. Opening sterile tray 10 pts
 3. Minimally exposing patient 5 pts
 - 4. Open-gloving without contamination 10 pts
 - 5. Draping patient without contaminating gloves 5 pts
 - 6. Assembling supplies 5 pts
 - 7. Testing balloon on foley cath 10 pts
 - 8. Pt. prep using proper technique 5 pts
 - 9. Inserting cath without contamination 20 pts
 - 10. Can identify no resistance, clear urine return, etc . . . 5 pts.
 - 11. Inflate balloon without spraying NS 5 pts
 - 12. Slightly tugs on cath to ensure placement 5 pts
 - 13. Deflates balloon 5 pts
 - 14. Proper clean up 5 pts
 - 15. Response to constructive criticism 5 pts
 -

STUDENT:

DATE:

**SUT 1539 Advanced Surgical Procedures:
Surgery Evaluation**

Name:

0- unable/refuses to do

1-needs assistance

2-performs satisfactory

Maximum score 32

Minimum score 26

Failing score 25

1. Prepares OR for surgery, by arranging furniture and opening sterile supplies.
2. Scrubs according to hospital policy.
3. Sets up an organized and workable back table and mayo.
4. Gowns and gloves the doctor.
5. Assist with draping the patient.
6. Passes instruments throughout the case with minimal assistance.
7. Anticipates the surgeons needs.
8. Maintains sterile technique and recognizes breaks.
9. Counts laps, sponges, needles, and instruments correctly.
10. Has an adequate knowledge of suture routine.
11. Assist with application of sterile dressing.
12. Cleans all prepping solution from the patient.
13. Assist with transfer of patient from OR bed to PACU bed.
14. Properly handles OR clean up after surgery.
15. Removes gown and gloves correctly.
16. Wears face shield during entire procedure.

Comments:

Student Signature:

Instructor Signature:

SUT 1113 Fundamentals of Surgical Technology

Vital Signs Critical

BLOOD PRESSURE

- *Cleans ear piece
- *Places cuff on appropriately
- *Feels for pulse
- *Accurate reading
- *Identified self
- *Identified patient

PULSE

- *Located radial pulse
- *Accurate counting

RESPIRATIONS

- *Accurate counts

TEMPERATURE

- *Accurate Reading
- *Possible 10 points each for a total of 100 points*

