

# Surgical Technology Student Handbook



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Dear Surgical Technology Student,

The staff and faculty of the Department of Surgical Technology and Neosho County Community College would like to welcome you to the Surgical Technology Program. We look forward to working with you.

This handbook contains policies, which apply to all students enrolled in the Surgical Technology Program, as well as contact information, class forms and locations. Please read this handbook carefully prior to your orientation day and keep it available for reference throughout the program.

Respectfully,

The Surgical Technology Program Staff and Faculty

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## **Accreditation**

Neosho County Community College is accredited by the North Central Association of Higher Learning Commission and the Kansas Board of Regents.

The NCCC Surgical Technology program is accredited by the Commission on Accreditation of Allied Health Education Programs ([www.caahep.org](http://www.caahep.org)) upon the recommendation of the Accreditation Review Council in Surgical Technology and Surgical Assisting (ARC-STSA).

This allows NCCC Surgical Technology graduates to sit for the National Board of Surgical Technology and Surgical Assisting (NBSTSA) Certification Exam.

CAAHEP contact information:

Commission on Accreditation of Allied Health Education Programs

9355 113<sup>th</sup> St N, #7709

Seminole, FL 33775

Phone: 727-210-2350; Fax: 727-210-2354; Email: [mail@caahep.org](mailto:mail@caahep.org)

**[www.caahep.org](http://www.caahep.org)**

## **Philosophy**

The philosophy of the surgical technology program is based on the following beliefs:

We believe that the surgical technologist occupies an essential role in the total pattern of perioperative patient care; the surgical technology student can gain certain knowledge and technical skills in a specific period of time, in a well-planned education program, which will enable him/her to assist nurses, surgeons and anesthesia care providers in the care of the surgical patient.

We believe that emphasis should be placed on the specific role of the surgical technologist as a member of the surgical team. This position is in direct correlation to the organized implementation of surgical intervention by the surgical team for the optimal patient outcome and is extremely critical to the surgical experience for the patient.

We believe that both instructor and student must understand the duties of the surgical technologist in relationship to the professional role on the health care team.

We believe that as in healthcare, the curriculum must be an ongoing learning process which requires educators to work proactively and progressively in developing the total surgical team concept; these educators contribute their expertise to the unified purpose of surgical technology and the restoration of health in our community.

## **Mission Statements:**

### **Neosho County Community College**

To enrich our communities and our students' lives.

### **Outreach and Workforce Development Department**

To provide educational opportunities, develop partnerships in the community, and encourage lifelong learning.

### **Surgical Technology Program**

To prepare competent, entry-level surgical technologists in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains and encourage continued, lifelong leadership in their practice to promote a higher quality of care for the surgical patient.

## **Faculty Goals:**

To plan and administer a program of the highest quality that will produce technologists who are adequately trained, possess self-confidence and desirable motives, and exhibit ethical behavior.

To instill in the students a sense of personal responsibility and accountability for their individual actions in the operating room while functioning effectively as part of a team effort in the critical care setting.

To provide students with a foundation in basic science and subjects unique to the operating room which will enable them to utilize their individual reasoning powers in various circumstances.

To instruct students and guide their practice in the necessary manipulative skills that will enable them to function as a surgical technologist.

## **Program Goal:**

To provide the community and surrounding area with a pool of trained, professional leaders in surgical technology that is prepared for lifelong learning and practice.

## **Program Description:**

Neosho County Community College offers a two-year AAS degree program in surgical technology. The curriculum consists of general education support courses as well as technical courses and follows the Surgical Technology Program Alignment from the Kansas Board of Regents. In accordance with the Association of Surgical Technologists (AST) and their 6<sup>th</sup> Ed. Core Curriculum, and the Association of periOperative Registered Nurses (AORN) guidelines, the students will learn aseptic (sterile) technique, functioning in and maintaining the sterile environment, surgical conscience, surgical instrumentation, surgical technology practice and principles, surgical procedures in all surgical specialties, and direct patient care in the circulating assistant, first scrub and second scrub roles. The program prepares students for entry-level positions as surgical technologists.

The didactic section of the core surgical technology classes will be taught in a face-to-face classroom setting. All labs and clinical will be taught utilizing a hands-on, face-to-face format at the NCCC Surgical Technology Skills lab and local clinical facilities.

The successful completion of the program of study meets the qualifying standards required to attempt the National Certification Examination for Surgical Technologists. These certifying examinations are written and administered by the National Board of Surgical Technology and Surgical Assisting and taken via web-based testing on the Ottawa campus during finals week at the end of the program.

The clinical experience is received at local and surrounding hospitals. The student functions under the supervision of the instructor, staff surgical technologist, and/or registered nurses as a member of the operating room team. The clinical phase includes further classroom instruction that will be scheduled, but emphasis is placed on extensive clinical experience in actual surgical procedures.

### **Clinical Facilities:**

AdventHealth Ottawa, Ottawa, KS  
AdventHealth Shawnee Mission, Merriam, KS  
Olathe Medical Center, Olathe, KS  
Newman Regional Health Center, Emporia, KS  
Advanced Eye Surgery Center, Emporia, KS  
Lawrence Memorial Hospital, Lawrence, KS  
Miami County Medical Center, Paola, KS  
University of Kansas Health—St. Francis Campus, Topeka, KS  
Stormont Vail Health, Topeka, KS  
Menorah Medical Center, Overland Park, KS  
Providence Medical Center, Kansas City, KS  
Neosho Memorial Regional Health Center, Chanute, KS  
Coffeyville Regional Hospital, Coffeyville, KS  
Via Christi Hospital, Pittsburg, KS  
Freeman Surgical Center, Pittsburg, KS

## Surgical Technologist Scope of Practice

Surgical Technology is the Allied Health profession whose primary concern is the care of the surgical patient in the operating room. The surgical technologist is a direct patient care provider and is in contact with and/or works in conjunction with the patient, their relatives, physicians, nurses, and other health care professionals in the perioperative setting. Scope of practice is determined by regulating agencies to protect the public and ensure high-quality medical care. These regulating agencies specify the type of activities the surgical technologist can legally perform. These regulating agencies are state nurse practice acts, state medical boards, state business and professional codes, facility policies and procedure manuals and The Joint Commission. Many states specify certain tasks that the surgical technologist **cannot** perform even if a surgeon, licensed nurse, or another licensed professional delegates the task:

- *Administer medication*
- *Perform patient assessments or teaching*
- *Practice nursing or medicine*

According to AORN, the surgical technologist may perform limited direct patient care under direct supervision of an RN. Activities may include:

- Handling instruments, supplies, and equipment essential to the surgical procedure
- Displaying understanding of the procedure being performed and anticipating the needs of the surgeon
- Creating the sterile field
- Maintaining the sterile field
- Participating in the surgical count
- Cleaning and preparing instruments for disinfection and terminal sterilization
- Assisting other members of team with room turnover and terminal cleaning
- Assisting in the preparation of the procedure room for the next patient

## **Oath of an AST Fellow**

I, (state name), hereby recognize that the Association of Surgical Technologists serves to enhance the surgical technology profession through the establishment of traditions and high standards that contribute to the advancement of quality surgical patient care. Accordingly, I pledge myself to continue practicing surgical technology with the highest of utmost honesty, strict application of aseptic principles, establishing myself as an example for peers, respecting the knowledge and skills of my peers, and placing above all else, the safety and welfare of the surgical patient in accordance with the AST motto Aeger Primo-The Patient First. This I solemnly swear as a Fellow of the Association of Surgical Technologists.

## **Professional Organization**

The Association of Surgical Technologists (AST) is your professional organization to which membership is required. **Proof of membership due on last day of SURG 102**—please plan to join AST **on or after** May 1st (no sooner).

Membership benefits include:

1. Association with other students and practicing surgical technologists.
2. Surgical Technologist - a monthly scientific publication.
3. Discounted registration fees at AST-sponsored educational programs.
4. A forum for voicing your concerns for the profession.
5. A discounted fee for attempting the National Certification Examination.
6. Continuing education opportunities post-graduation.



## **Program Outcomes:**

The goal of the surgical technology program is to provide students with the opportunity to develop the skills and knowledge necessary to gain employment as a surgical technologist and become contributing members of the health care team. This will be accomplished by preparing competent graduates in the cognitive, psychomotor, and affective learning domains:

### **Cognitive Domain:**

The Graduate will:

1. Correlate the knowledge of surgical procedures, anatomy and physiology, microbiology to their role as a surgical technologist and recognize their relationship to safe patient care.
2. Understand the principles of safe patient care in the preoperative, intraoperative and postoperative settings.

### **Psychomotor Domain:**

The Graduate will:

3. Develop and apply fundamental surgical assisting skills through practice and evaluation in the laboratory and clinical settings.
4. Accurately apply the principles of asepsis across the spectrum of common surgical experiences.

### **Affective Domain:**

The Graduate will:

5. Recognize the variety of patients' needs and the impact of their personal, physical, emotional, and cultural experiences on the rendering of patient care.
6. Demonstrate professional responsibility in performance, attitude and personal conduct.
7. Practice within the confines of the recognized scope of practice within the healthcare community to provide optimal patient care.

## **Policy for Grading**

The Surgical Technology Program follows the state policy relating to the standards for academic progress found in the NCCC School Student Handbook. The grading scale is listed below:

91 – 100	A	Excellent
83 – 90.99	B	Good
76 – 82.99	C	Average
0 – 75.99	F	Unsatisfactory

Satisfactory completion of any and all didactic courses requires a minimum of a 76% (C) with lab courses as pass/not pass with an 80% minimum to pass, and clinical courses being pass/not pass with an 80% minimum to pass. Since the Surgical Technology Program is progressive in nature, courses in one semester must be successfully completed before the student may enter the next semester. All students will receive a grade report at mid-term and at the end of each semester, and can view their course grades concurrently at any point through *myNeosho*. Grades are updated weekly.

Course grades will be determined by an average of grades for examinations, quizzes, assignments, skills tests, evaluations and final examinations. Distribution of these various components are listed in the applicable syllabus supplements. Punctuality, attendance, participation, professionalism and growth are added to each course as a grade.

When a student experiences difficulty mastering the competencies of any course, he/she is expected to seek extra help from the instructor. Students should contact the instructor if he/she has any questions concerning their progress. Tutoring in surgical technology courses is available, if requested.

Students are expected to submit their own work. Evidence of plagiarism, copying, or any other form of cheating will result in forfeiture of the grade for the work and/or potential dismissal from the program to be determined by the program director.

Grading is ultimately a method of quantifying the degree of a student's competency development. It is the hope and intent of the program that each student will excel.

## **AAS Degree Program of Study:**

### **Possible Prerequisites:**

Developmental reading, writing, science and/or math (based on test scores)

**Course Code**   **Course Title**                      **CH**

#### **Semester I**

SURG 100	Intro to ST	4
BIOL 257	Human A&P Lecture	3
BIOL 258	Human A&P Lab	2
ALHE 105	Medical Terminology	3
#CURR 100	First Year Seminar	1
ENGL 101	English Composition I	3
<b>TOTAL</b>		<b>16</b>

#### **Semester II**

*SURG 102	Principles and Practices of ST	5
*SURG 101	Intro to ST Lab	2
BIOL 271	Microbiology Lecture	3
BIOL 272	Microbiology Lab	2
PSYC 155	General Psychology	3
CSIS 105	Computer Lit. (test-out accepted)	1
<b>TOTAL</b>		<b>16</b>

#### **Summer**

SOSC 100	Intro to Sociology	3
COMM 213	Interpersonal Communications	3
ALHE 141	Basic Life Support/Prof. Res.	1
<b>TOTAL</b>		<b>7</b>

#### **Semester III**

*SURG 103	Principles and Practices of ST Lab	3
*SURG 202	Surgical Procedures I	4
*SURG 106	Surgical Clinical	3
ALHE 122	Intro to Pharmacology	3
<b>TOTAL</b>		<b>13</b>

#### **Semester IV**

*SURG 204	Surgical Procedures II	5
*SURG 206	Surgical Clinical II	8
*SURG 208	ST Certification Review	1
<b>TOTAL</b>		<b>14</b>

**Total Program Credits**                      **35**  
**+Total AAS Degree Program Credits**   **66**

#Indicates course is required only if < 15 credit hours are successfully **transferred** from another institution.

\*Indicates prerequisite required.

^ Indicates American Heart Association Basic Life Support for Healthcare Providers may be acquired elsewhere.

## **Classroom and Laboratory Standards**

Students are expected to demonstrate professional behavior at all times in the classroom and laboratory. All students, teachers, visitors, and employees of the college are to be treated with courtesy and respect. Inappropriate questions or comments, bad language or behavior will not be tolerated. **Professional requirements and responsibilities are set for you not just as a student at NCCC, but also as a member of the medical community.**

1. Students are expected to be on time when reporting to classroom and laboratory sessions → 3 tardies = 1 absence.
2. Cheating (exams, quizzes, etc.) is grounds for dismissal.
3. Meeting personal needs (ie: going to the bathroom) should be taken care of during break and at lunch if possible.
4. Students are to be awake, attentive, and courteous at all times.
5. Smoking, eating, drinking, chewing gum or candy are allowed ONLY during break in designated areas at the school.
6. Required textbooks, needed supplies, etc., must be available for all classes.
7. If a student has any problems, he/she is to go through the proper chain of command to resolve the situation. The chain of command is as follows: course instructor → program director → dean → vice president.
8. Students are expected to maintain the standards of academic honesty and integrity in accordance the Academic Code of Conduct found in the NCCC Student Handbook.
9. Students are expected to conduct themselves as professional, honest, respectful, ethically sensitive and responsible persons.
10. Punctuality, attendance and participation are given as grades in each class.

### **These items are not tolerated:**

1. Excessive tardiness – (Three tardies equal one absence.)
2. Excessive absences from class – (more than 2 absences in a semester is considered excessive and is grounds for dismissal.)
3. Disregard of proper dress and/or personal hygiene – including smoke smell.
4. Intoxication and/or use of intoxicants which include prescription medication.
5. Substance abuse or misuse.
6. Inconsiderate or disrespectful treatment of classmates, faculty, and/or patients.
7. Abusive treatment of others, including but not limited to physical/psychological abuse of another person, abuse/damage/misuse of another's property.
8. Illegal, indecent or obscene conduct.

## Surgical Technology Laboratory

During laboratory usage, ALL students will treat the mock OR as a real OR. This is necessary to obtain the knowledge needed to achieve the sterile techniques required for clinical placement. The lab provides a setting for students to practice and demonstrate skills in a mock operating room under faculty supervision. Specific lab skills will be assessed and must be completed successfully in order to be determined safe to attend clinical rotations. The clinical readiness exam will be given to each student prior to their first clinical rotation, which they must successfully complete within the specified time in order to be approved to go to clinical. The lab setting and program instructors are available for practice of skills during scheduled open lab. One-on-one practice with an instructor outside class time must be arranged by appointment. The student will have multiple options for practice and evaluation by the instructor(s) prior to the clinical readiness exam. Determination for additional attempts will be determined by the program director and instructors on an individual basis. **Failure to pass the clinical readiness exam will result in failure of the laboratory class and the student will not be allowed to attend clinical.** This, in turn, will require the student to withdraw from the program due to inability to obtain clinical requirements. The student may re-enter the lab/program session at the same point the following year if placement is available, and at the discretion of the Director of Surgical Technology.

### Laboratory Use Expectations

1. No cell phones in the lab
2. No food or drinks allowed in the lab or Simulation Hospital.
3. Handle all equipment/supplies with care including but not limited to furniture, supplies, electrical cords, etc...Do not run wheels over cords. Report if frayed.
4. Report breakage/spillage to the instructor.
5. Report accidental injuries.
6. Keep lab clean and tidy. **Lab time is not adjourned until the lab is in proper order.** Do not leave trash, supplies or disheveled bed sheets behind you.
7. Be prepared for check offs (validation of competencies).
8. Request extra practice time if needed.
9. Scrubs and appropriate OR attire are required while in the lab.
10. No jewelry or nail polish while in the lab.
11. Conduct in the lab should be similar to the conduct accepted within the clinical facility operating room.
12. Use supplies sparingly and at the discretion of faculty. A fee may necessary to cover costs of consumable sterile supplies (gowns, gloves and drapes) beyond a reasonable amount.
13. All equipment should be replaced in the appropriate storage area after use.
14. Each student is responsible for completion and approval of each lab form.

## **Student Conduct**

In any organization, it is important that all members work together for the good of the whole. Any failure to work together harmoniously and effectively by maintaining good standards of behavior may affect the well-being of fellow students during lab and *patients in the operating room*. For this reason, the following rules of conduct have been established. It is your responsibility to know and follow them. Common sense, good judgment and acceptable personal behavior on your part will make our program and the hospitals a better place to study, learn and practice. Demonstration of poor behavior and unprofessional attitudes of others are not an excuse for you. **You are expected to be leaders not only in technique and practices but in professional behaviors as well; you are accountable for your own actions.**

Students are expected to conduct themselves in a professional manner at all times. Every patient, physician, instructor and all members of the health care team are to be treated with respect. Students enrolled in this training course are expected to demonstrate a high level of motivation, reliability and dedication to the practice of surgical technology.

Students are expected to communicate effectively and respectfully in the clinical area. It is necessary to report errors to appropriate persons--don't ignore the situation; guidance and support is available. This is the part of the development of a Surgical Conscience.

## **Electronic Device/Cell Phone Policy**

The **use\*** of electronic communication devices (pager/cell phones), MP3/iPODs in the classroom, laboratory, and clinical externship site is **STRICTLY PROHIBITED**.

**\*Use: Receiving or sending messages (verbal or text) while in the classroom, laboratory, or clinical externship site.**

Utilizing these devices for the purposes of photographing test questions or other forms of academic misconduct or illegal activity is prohibited. Photographing individuals in secured areas such as clinical sites, restrooms or locker rooms is prohibited. Taking photographs of any individuals against their will is strictly prohibited. Usage of recording devices without the expressed consent of the individual/s being recorded is strictly prohibited.

**Usage of cell phones or pagers is restricted to break times only. Students found to be non-compliant to this policy will be dismissed from that day's activity and counted absent. The pertinent absence policy will apply.**

## **PROGRAM EXPECTATIONS OF THE STUDENT**

1. Meets standards/competencies for course/program completion.
2. Follows standards stated in NCCC Student Handbook and NCCC Surgical Technology Handbook.
3. Completes ***all*** assignments.
4. Participates in lab setting as care giver ***and*** patient.
5. Maintains classroom work area, equipment, and supplies in a manner conducive to efficiency and safety.
6. Participates fully in didactic, laboratory, team activities, and clinical experience.
7. Meets attendance requirements.
8. Maintains personal appearance and hygiene.
9. Complies with dress code.
10. Effectively handles adverse situations.
11. Demonstrates effective written and oral communication.
12. Models socially appropriate behaviors.
13. Is able to multi-task.
14. Manages time effectively.
15. Demonstrates problem solving skills.
16. Follows Surgical Principles.
17. Practices and behaves as a leader in perioperative techniques and practices.
18. Travels to clinical site.
19. Follows all procedures and policies of clinical site.
20. Maintains patient/client confidentiality.

## **EXPECTED BEHAVIORS of the SURGICAL TECHNOLOGIST**

Surgical technologists are expected to be both human *and* humane. They are also expected to be competent. The ability to discharge duties successfully contributes to the efficient execution of teamwork, but more importantly, to the patient's sense of security. Perceived behavior makes a lasting impression that patients associate with their experiences in the operating room. It may reveal self-confidence or a lack of it, interest in what's going on or indifference, and proficiency in their skills or ineptitude. In addition to possessing special technical expertise, operating room personnel must possess personal attributes that inspire confidence, trust, and honesty in patients and team members. OR personnel must show these traits that typify professionalism:

- **Conscientious:** These persons will not compromise or sacrifice principles of self-accountability. A surgical conscience implies an awareness of the importance of applying knowledge to ensure quality in practice.
- **Efficient and well-organized:** Organized work habits greatly contribute to the ability of the OR personnel to anticipate the needs of patients and team members. They save time and energy by being properly prepared and having the OR ready for the procedures with the required equipment and supplies, and having them in good working order. They are prepared for the unexpected.
- **Flexible and adaptable:** Team members must react quickly to changing circumstances in a calm manner. Appropriate judgment prepares adaptable people to cope with all situations with professional decorum.
- **Skilled listeners, keen observers, and able communicators:** People who watch, look, and listen will act effectively. Personnel who are aware will not underestimate the value of communication in their relationships with patients and coworkers.
- **Considerate:** These persons respect other people's concepts and do not automatically reject those different from their own. Consideration extends to all interpersonal relationships.
- **Objective:** These individuals assemble factual data before making a judgment. They view situations from all sides prior to taking action. Objectivity requires experience and self-discipline. This attribute includes concern and is combined with empathy.
- **Manually and intellectually dexterous:** These people have quick hands, sharp minds, and keen eyes. Manual and intellectual dexterity is perfected with experience.
- **Versatile:** These persons have a vast comprehensive knowledge of an extensive amount of instrumentation and equipment. They are familiar with many operative procedures and the care required for a diversity of patients. They are able to adapt and apply their knowledge and experience to unplanned and unexpected circumstances.
- **Analytical:** These persons are competent in analyzing and correlating significant data. They know the "why" as well as the "how" of surgical intervention. Patients depend on their judgment.
- **Intellectually eager and curious:** OR personnel have legal responsibility to keep current in their knowledge, to be present-oriented and informed. Documented proof of continuing education and demonstrated competence in performing functions are of value in litigation. Continuing education is a shared responsibility of the hospital, the department, and the individual.
- **Empathetic:** OR team members act in a humane manner toward others. They consider the patient as a person, not as a procedure.
- **Ethical:** These persons utilize ethical principles, moral values, and professional codes as a basis for making decisions and solving problems. Personal values do influence behavior, but they should not violate the legal or ethical rights of patients or the hospital. Personnel should always be honest and tell the truth. There are many ethical dilemmas you will encounter in your career that must be resolved in the best interest of all involved.



## **Personal Grooming and Professional Appearance**

As part of the health care team, Surgical Technologists are held to a high standard of professional appearance. While these guidelines are not intended to restrict personal expression, they are written, in part, to mirror the expectations of community employers. When not in uniform, students are expected to dress appropriately for classes. “Appropriately” is defined as any attire that is NOT disruptive of the learning process. Expectations include, but are not limited to:

1. Fingernails are to be no longer than finger-tip length with NO polish.
2. No jewelry of any kind in the lab or clinical setting.
3. No other body piercing is permitted at any time. This includes but is not limited to nose, lip, brow, tongue.
4. Hair is to be styled in a manner that does not restrict vision or give the perception of restriction/distraction and easily put under surgical cap. No untraditional hair colors allowed.
5. No scented sprays or lotions are to be worn and student must not smell of tobacco/smoke.
6. Clinical shoes must not be worn outside the hospital, or shoe covers must be worn at all times in the clinical facility.
7. Uniform is clean and not wrinkled.
8. Make-up should be understated.
9. No revealing tops
10. No bare midriff
11. No clothing with offensive language or graphics
12. No bare backs
13. No shorts/skirts that are less than mid-thigh length
14. No bandanas

## **Attendance Policy**

Student’s attendance is to be regular and punctual in both classroom and clinical areas. Tardiness and absenteeism reflect a lack of professional responsibility. Three (3) occurrences of tardiness during a semester, per class will result in one (1) absence. Three (3) absences during a semester can result in dismissal from the class and ultimately the program. The services you will be providing are necessary for optimal care of the patient. Good attendance is a mark of dedication and maturity, which is a component of professionalism that future employers consider seriously.

Regular attendance is expected of all Surgical Technology Students. Attendance will be graded and recorded as a part of each student’s permanent overall grade and record. It will be utilized in reporting to Financial Aid and other training expense payment sources. It will also be utilized for inquiries made by potential employers. Clinical attendance is addressed later in this handbook, specifically.

## **Jury Duty**

Students should notify Program Director if summoned for Jury Duty. Due to the pace at which the program moves, it could be detrimental to the student's progression in the program if they're selected to serve on a jury. Depending on the student's county of residence, a letter can be provided by the Program Director requesting the student be excused from jury duty.

## **Make-up Assignment / Late Assignment Policy**

Students must notify appropriate instructor if they will be absent from class, lab or clinical. Notification must be made prior to scheduled class end time (with the exception of clinical absences, which will be discussed later in this handbook.) **“No call/No shows” will not be tolerated.**

It is the student's responsibility to obtain **any/all** missed class content. Assignments and/or tests *eligible to be made up* (see syllabus supplement) will be penalized with an automatic **5% deduction**.

Make-up tests with an online format will be taken in the TLC or CLC. Make-up instrument and/or supply tests are taken with the course instructor. ***Both are subject to proctor availability.*** It is the student's responsibility to schedule their make-up tests as soon as practical and to not wait until the last minute. Any adjustments will be determined by the program director/instructor on a case by case basis. Make-up tests can be of any format. Our make-up policy requires students to make up any/all missed class content *prior to* the next class period or the student will receive a 0% for that assignment and/or test.

**Tests are not available prior to their scheduled date, unless extenuating circumstances exist. Extenuating circumstances will be evaluated by the course instructor and/or program director.**

Any assignment that is a file upload assignment within *myNeosho* will NOT be accepted late and the student will earn a 0%. These assignments and due dates are shown throughout the entire course and are available for upload up until the due date. If you are unable to complete the file upload from your computer, you are responsible to find one that will allow you to do so. Emailed assignments will not be accepted except in critical situations, must be by the same due date and time, and are at the discretion of the instructor.

Operating Room field trips should be treated as clinical days in regard to notifying your instructor if you cannot make your scheduled time. You should call their cell phone (listed in front of handbook) as soon as possible, before your scheduled time for potential rescheduling. If rescheduling cannot occur, the student will receive a 0% for that visit. Class participation/attendance will be added into the final course grade. Clinical make-up policy is addressed later in this handbook, specifically.

## **Emergency Closings**

All students are encouraged to sign up for cell phone alerts for all pertinent announcements by the college, including emergency closings. At times, emergencies such as severe weather, fires, power failures, or earthquakes, can disrupt college operations. In extreme cases, these circumstances may require the closing of a scheduled classroom, skills laboratory or externship assignment. In the event that such an emergency occurs during non-college hours, local radio and/or television stations will be asked to broadcast notification of the closing per NCCC announcement.

When class and/or externship assignments are officially closed due to emergency conditions, the time off from scheduled class/externship will not be counted as an absence from the program. Special circumstances may apply and will be evaluated on a case by case basis.

### **WINTER STORMS/SEVERE WEATHER**

College authorities will make the decision to close the campus, usually prior to 6:00 a.m. the day of classes. Information will be made available to the following radio and TV stations:

<b>KINZ – 95.3 FM</b>	Chanute	<b>KOFO – 1220 AM</b>	Ottawa
<b>KKOY – 105.5 FM</b>	Chanute	<b>LAZER – 105.9 FM</b>	Lawrence
<b>Cablevision</b>	Chanute	<b>KLWN – 1320 AM</b>	Lawrence
<b>KKOW - 96.9 FM</b>	Pittsburg	<b>KJHK – 90.7 FM</b>	Lawrence
<b>KOAM TV CH 7</b>	Pittsburg	<b>WIBW – 580 AM</b>	Topeka
<b>KIKS – 101.5 FM</b>	Iola	<b>WIBW – CH 13</b>	Topeka
<b>KLKC - 93.5 FM</b>	Parsons	<b>97Country - 97.3</b>	Topeka
<b>CH 4, CH 5, CH 9 Kansas City</b>			

## Exam Taking Procedures

All testing is done electronically through *myNeosho* in our computer labs. To ensure equal opportunity and prevent distractions during exams, the following policy will apply:

1. All students are to be present and tests taken at one time.
2. Once the test has begun, no late admission will be allowed.
3. Any student leaving the room during testing will not be readmitted.
4. Table surfaces are to be cleared. A blank piece of paper may be used if necessary. All scratch paper must be submitted to exam proctor at completion of exam.
5. Purses, smart watches, book bags, etc., remain in back of room.
6. No verbal or nonverbal communication between participants.
7. After exam is taken, student may quietly leave the room but not re-enter until all students have completed the test.
8. Student receiving verbal and/or text messages during an exam will be required to submit the exam to the instructor immediately.
9. Once a test is submitted, you cannot re-enter for any reason.
10. Tests should be checked for completeness before submitting.
11. Students are not allowed to look over the answers in the book while others are still taking the test.
12. Students are allowed 1 attempt at the test. If computer problems cause the student to be blocked out, they should inform their instructor for consideration.
13. All late testing receives a 5% deduction immediately. Students that fail to complete a make-up test (see Make-Up Policy) will receive a 0%.

### Other Test Taking Reminders Include:

- Alternate tests and/or random question placement are given.
- Read ALL tests carefully; once a test is turned in, you may not go back.
- Make up tests may be in an alternate form and any extra credit given to students during regular scheduled class testing will not be available during make up tests.
- Students receiving verbal and/or text messages during an exam will be required to submit the exam **immediately**. Student's test will be graded based on the number of questions answered correctly (at that point), divided by the total number of possible points for the exam. **Best practice is to turn your electronic devices OFF.**

## **Remediation**

Students are responsible for compliance with specific classroom and clinical role expectations as outlined in the college and student handbooks.

When a student is found in violation of program standards and/or expectations, remediation may be offered to assist the student in obtaining required knowledge, skill or behavior. Didactic, laboratory or clinical remediation may include:

1. A Remediation Plan is written by the instructor and/or the program director and details the area of concern, expectations and outcomes for identified concerns relating to academics, attendance or other issues.
2. This plan includes areas of concern, student/faculty plan of action and progress dates. Improvements/adjustments must be made by these agreed upon dates for continuation in the program.
  - a. Laboratory Remediation may incur a fee resulting from consumption of sterile supplies beyond a reasonable amount. Remediation for skills learned in SURG 101 may result in \$50 fee, while skills learned in SURG 103 may result in \$100 fee, at the discretion of program faculty.
3. A faculty/student conference serves as a guide to success and identifies program expectations and the benchmarks to be used to assess needed improvements. The faculty member initiating the conference signs the written statement. Students are provided space to sign and also write comments. Student signature acknowledges their receipt, understanding and agreement of the conditions of the document.
4. Program faculty members are available as academic advisors. Tutoring is available on either campus or online. Resources for non-academic needs such as financial aid or counseling can be available to students—please contact your advisor.

## **Types of Remediation**

- Academic:** Grades in theory. Any class with a grade below a 76% average.
- Laboratory:** Grades in lab. Skills testing requiring more than two attempts.
- Attendance:** Excessive absenteeism/tardiness.
- Behavioral:** Excessive or critical violation of behavioral expectations found in this program/college handbook. Additional exceptions may be at department's discretion.
- Clinical:** Any clinical rotation with failure to meet the critical skills outlined in the clinical evaluation, or lack of professional conduct. Any negligence involving patient care or violation of HIPPA agreement. Disregard of surgical principles.

At the close of the stated remediation period, the student's progress will be re-evaluated by the Director, faculty and/or Department Chair. At that time, the student will:

1. Be removed from remediation
2. Have remediation extended
3. Be dismissed from course/program

## **Grounds for Dismissal**

The Grounds for Dismissal are listed below. Students that violate any of the following grounds can be suspended from the program at any time during their training. Due process would be allowed in applicable situations.

- a. Found to be under the influence or have possession of illegal drugs, mind/mood altering substances, including prescription medications and alcohol while in the classroom, laboratory, or clinical setting(s).
- b. Failure to accomplish clinical assignments and objectives.
- c. Failure to successfully complete the Clinical Readiness Exam and/or specific skills in the lab.
- d. Unprofessional or unethical conduct. Academic dishonesty in general education or program courses.
- e. If an affiliated clinical site refuses to allow a student into their facility for violations such as, but not limited to, theft, misconduct, or patient endangerment, the student will not be allowed to continue at that facility or at any other.
- f. Failure to maintain academic average of 76% in didactic courses or 80% in laboratory and/or clinical courses.
- g. Failure to display appropriate workplace principles (ie: poor attitude or inappropriate behavior).
- h. Breach of confidentiality.
- i. Inability to follow policies/procedures in the lab and/or clinical setting.
- j. Unsatisfactory clinical performance/progression.
- k. Any falsification of records.
- l. Insubordination to faculty members and/or personnel at any clinical site.
- m. Conduct that is deemed detrimental to the operating room environment or patient including disregard of any surgical principle.
- n. Exceeding the allowable parameters regarding attendance.
- o. Smoking or smelling of smoke while at a clinical site.
- p. Recipient of harassment complaint/s.

## **Sexual Harassment**

- a. Neosho County Community College has a zero tolerance policy concerning sexual harassment. Violations or suspected violations will be addressed immediately.
- b. This policy applies to ALL clinical sites, at ALL times.
- c. Sexual harassment is defined as “unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature.”
- d. Sexual harassment can include, but is not limited to:
  - Submission is made either explicitly or implicitly during any term of the student’s academic opportunities.
  - Submission or rejection of such conduct by a student is used as a basis for academic decisions.
  - Conduct has the purpose or effect of unreasonably interfering with the student’s educational performance or it creates an intimidating, hostile or offensive educational environment.

Any student with concerns should report these concerns to their instructor, program director, assistant dean or dean as appropriate.

## **Drug-Free Campus Policy**

The unlawful possession, use, or distribution of illicit drugs and alcohol by students on the property of NCCC or as part of any of the activities of the college is strictly prohibited. College vehicles are covered under this policy. Alcohol may not be transported in any College vehicle without the express written prior approval of the President. Students who violate this policy will be reported to the appropriate law enforcement officials and are subject to the following: probation, suspension, or expulsion depending upon the severity of the offense.

Students subject to these penalties will be afforded due process. In addition to the above sanctions, a student may be required to meet with a campus counselor. A student may be required to complete a drug or alcohol abuse education or treatment program as a condition of continued enrollment. The cost of completing such a program will be the responsibility of the student.

**SURGICAL TECHNOLOGY**  
**DEPARTMENT**  
**POLICY & PROCEDURES MANUAL**  
**FOR**  
**SURGICAL CLINICAL ROTATIONS**



## **Surgical Clinical Rotation:**

### **Description**

The learner will demonstrate employment-acceptable clinical proficiency in general surgical procedures and commonly performed specialty procedures. (The learner is not expected to be clinically proficient in more complex procedures). Emphasis will be on the first scrub role; however, the learner will have experience with the assistant circulating role and the second scrub role and must complete all 6<sup>th</sup> Ed. Core Curriculum case requirements prior to graduation.

### **Teaching Method**

The learner will receive supervised work experience in operating rooms, pre and post anesthesia care units, endoscopy units, labor and delivery units. Supervision will be in the form of facility employed and assigned preceptors (ST, CST or RNs in the scrub role) and college faculty.

### **Student Work Policy**

All student activities associated with the curriculum, especially while students are completing clinical rotations, will be educational in nature. Students will not be substituted for hired staff personnel within the clinical institution, in the capacity of a surgical technologist. Students employed by clinical sites are not permitted to receive financial compensation while completing course requirements (i.e.: clinical hours).

### **Evaluation Methods**

Demonstrated proficiency to an employment-acceptable level in general surgical procedures and commonly performed specialty procedures as identified by clinical competencies, facility preceptor, and clinical instructor evaluations. Each student will meet with the clinical coordinator and/or the program director regularly to review evaluations and case requirement attainment and plan appropriate progress which may require additional lab time.

### **Grade Determination**

Demonstrated proficiency for identified clinical competencies at the satisfactory level and course assignments will indicate successful completion of the course and a passing grade. The specific grading scale items can be found in the course syllabi and syllabus supplement. Clinical courses are pass/fail with an 80% minimum required to pass. Refer to make-up/late assignment section for important assignment information.

## **Objectives of Clinical Rotation**

1. Use medical terminology correctly.
2. Demonstrate knowledge of body organization and terms of reference.
3. Discuss the relationship between humans and pathogenic and nonpathogenic bacteria.
4. Demonstrate knowledge and ability to accurately calculate dosages of liquids and solids.
5. Demonstrate procedures for the care and handling of drugs and solutions.
6. Demonstrate the process used to obtain an informed consent for a surgical procedure or treatment.
7. Demonstrate the required pre-, intra-, and postoperative routines, i.e.: chart review, patient identification, patient transportation and transferring, surgical positioning, operative site preparation, surgical case preparation, accurate surgical counts, organization and management of surgical instrumentation during procedures, handling, labeling, and containment of specimens, use of thermoregulatory devices, vital sign measurement and recording, case documentation, etc.
8. Apply the concepts of asepsis, i.e. sterilization, disinfection, antisepsis.
9. Identify, care for, handle, assemble, organize and pass/provide surgical instruments, surgical supplies, suture materials, stapling devices, surgical needles, and accessory and specialty equipment.
10. Demonstrate correct draping procedures.
11. Demonstrate techniques for opening and preparing supplies and instruments needed for any operative procedure, with maintenance of asepsis at all times.
12. Demonstrate knowledge of relevant anatomy, indications for surgery, patient preparation, special equipment and supplies, purpose and expected outcomes, and possible complications for the selected procedures.
13. Practice within the legal and ethical guidelines for the surgical technologist.
14. **DEMONSTRATE ABILITY TO ANTICIPATE THE NEEDS OF THE PATIENT, SURGEON, AND SURGICAL TEAM!!**

## **General Surgical Knowledge Requirements**

1. Relevant anatomy
2. Pathology
3. Diagnostic procedures/tests
4. Special preoperative preparation
5. Special instruments, supplies, drugs
6. Special equipment (including Minimally Invasive and Robotic)
7. Intraoperative preparation
8. Surgical procedure
9. Prognosis
10. Postoperative care and complications

## **Surgical Specialties**

1. General and rectal surgery
2. Obstetric and gynecologic surgery
3. Ear, nose, and throat surgery
4. Genitourinary surgery
5. Orthopedic surgery
6. Ophthalmic surgery
7. Oral and maxillofacial surgery
8. Neurosurgery
9. Plastic surgery
10. Peripheral vascular surgery
11. Cardiothoracic surgery
12. Pulmonary and thoracic surgery
13. Pediatric surgery
14. Trauma surgery

## **Surgical Rotation Guidelines**

The following are guidelines for the NCCC instructors, clinical preceptors, and NCCC surgical technology program students at the various clinical rotation sites.

1. Surgical rotation will be graded on a pass/fail basis with grading scale listed in course syllabi and syllabus supplements.
2. The preceptor shall immediately correct any error made by the student either before, during (if appropriate), or after the surgical procedure. When correcting the student the explanation will include what was performed incorrectly, why it was incorrect, and how it should be done correctly. If the preceptor deems the error threatened the patient's life or seriously compromised patient care delivery, he/she should immediately have the clinical instructor contacted.

3. The preceptor will complete evaluations on a regular basis. The evaluation may be an electronic or traditional document. The preceptor will read, date, and sign the evaluation. The evaluation will become a permanent part of the student's file and are another means of evaluating the student's performance. The evaluation(s) will list the strengths of the student as well as recommendations for areas of improvement and will be a confidential document.
4. The student's clinical case log will be validated by the preceptor on a case by case basis with preceptor initials, and initials and signature both put on the signature page included in the case log.
5. On a regular basis, an assessment will be conducted of the student by the clinical coordinator. Information, observation, and analysis of the student's performance will be discussed during the progress meeting between the student, instructor and/or program director. The student will be informed of whether their performance is satisfactory or unsatisfactory. If unsatisfactory, the factors warranting the grade will be discussed and exactly what the student needs to improve in order to be successful. The student will know, after each meeting, exactly what their status is concerning their surgical rotation and what areas need to improve.
6. The clinical coordinator will collaborate the surgical department's manager/supervisor regarding the scheduling of students and number of students the department will train at a time.
7. The student must complete a minimum of 120 surgical procedures in order to graduate. The student will be required to keep a Case Log of the number of surgical procedures they have first scrubbed, second scrubbed, and/or observed; this will be validated by the facility preceptor and turned into the program instructor on a weekly basis. The case number requirement and forms used by the student in keeping the journal are discussed later in this document.
8. Follow all directions and procedures as instructed. Only those competencies you have mastered in the classroom or laboratory setting may be utilized in the clinical setting. Those which have not been mastered via passing skills tests are to be attempted only with direct supervision in the clinical setting.
9. Inform the preceptor of what procedures you have not had the opportunity to perform. Show initiative in finding learning opportunities for yourself!
10. Do not discuss your personal life and problems with patients or hospital personnel. Leave your personal life at home. Program faculty and students are guests in clinical facilities.
11. Make sure your assigned preceptor is aware of your whereabouts at all times including break time and lunch time.

12. DO NOT leave your assigned operating room or clinical site without permission.

13. DO NOT wander the halls or enter another room for curiosity's sake. You may enter the room if the team needs a supply, positioning help, etc., then return to your assigned room when done. Do neglect your own responsibilities in your room (ie: room turnover) to help in another.

14. BEEPERS OR CELL PHONES ARE NOT ALLOWED OUT OF YOUR LOCKER WHILE AT THE CLINICAL SITES. You may check your cell phone for messages while on break or at lunch. If you are expecting important information or an emergency call while at the clinical site, please communicate directly with your preceptor and clinical educator to create a professional arrangement for the situation.

15. Display of your student ID is mandatory while at the clinical sites. If you forget your student ID, you may be sent home from the clinical site and counted absent for that day.

16. **The student is to be changed into scrubs and ready to work at 6:45 a.m. (unless an alternate arrival time is required) as established by the surgical department.** *This does not mean arriving at 6:45 a.m. and then changing into scrubs. It means fully dressed and ready to work in your assigned O.R. at 6:45 a.m.*

**Any infraction of the above rules will result in disciplinary actions.**

## **Clinical Case Logs**

**All clinical rotation documents become a permanent part of the student's file. It is the responsibility of the student to make photocopies for their personal records.**

**The student must share the responsibility in completing the rotation to satisfy the AST 6<sup>th</sup> Ed. Core Curriculum 120 minimum surgical procedure requirements as follows:**

As required by the Association of Surgical Technologists Core Curriculum, 6<sup>th</sup> Edition, the students must complete a minimum of 120 surgical cases for graduation, of which; 80 must be in the first scrub role and 40 in the second scrub role. Of the 80 first scrub cases, 20 cases must be general surgery and 60 must be within other surgical specialties. Of the 60 surgical specialty cases a minimum of 40 must be distributed amongst four surgical specialties. 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). The additional 20 cases in the First Scrub Role may be distributed amongst any one surgical specialty or multiple surgical specialties. Of the 40 second scrub cases, 10 cases must be general surgery and 30 must be within other surgical specialties and may include 10 endoscopy cases and 5 vaginal delivery cases. The students will document their accomplishment of any of these requirements through their clinical case logs, which will be verified by their instructor(s) and preceptor(s).

AST Core curriculum Surgical Rotation Case Requirements form will be provided in both SURG 106 and SURG 206 for review.

## Clinical Attendance

Any and all clinical absences MUST be made up.

*Should a student's absences exceed 10 percent of scheduled clinical classes (for any reason), the instructors may recommend the student be withdrawn from the course.* Any deviation from this policy will be at the discretion of the Surgical Technology Program Director.

Students with conditions involving an elevated temperature, open lesions, contagious upper respiratory or gastrointestinal conditions put others health at risk and therefore will not be admitted to class/clinical. Absences exceeding one day must have a doctor's note.

1. The student must notify the clinical coordinator and facility EACH day that he/she is absent **PRIOR to 6:30 AM**.
  - a. A "No Call/No Show" to a clinical site once reported to the clinical coordinator and Program Director will not be tolerated and are grounds for dismissal upon consideration of circumstance. **A second "No Show/No Call" will result in dismissal from the program.** Your instructor's cell phone numbers are listed in the front of this handbook for this purpose.
2. Students must complete the Clinical Absence Make-Up Day form for each individual absence.
3. Leaving the clinical site prior to the designated time without prior approval of facility management and notification of the clinical coordinator will not be tolerated. **This is considered abandonment of your responsibilities toward the patient and will incur disciplinary action up to program dismissal.**
4. Children, other family members, or friends of students are not permitted in classes, on-campus laboratories, or clinical areas unless they are designated "patients" for an instructional activity.
5. You are required to be punctual and ready to work each clinical day.

## **Clinical Dress Code and Policies**

People form impressions usually within the first 15-30 seconds after being introduced. Appropriate visual impressions are important as they influence how others perceive your abilities.

### **METICULOUS PERSONAL HYGIENE IS REQUIRED!**

**Hair** - Hair must be clean and off the face. Conservative hair color and a professional style are required. No ribbons, flowers, barrettes, hair rollers or bandanas are to be worn. Hair must be completely covered by a surgical cap while in the surgical areas. Disposable surgical caps are supplied by the facilities. **Cloth hats are not permitted.**

**Teeth** – Oral hygiene is critical to your appearance as a professional. Teeth should be cleaned appropriately.

**Nails**- Fingernails must be kept short, trimmed and clean. The nail should not be allowed to grow out past the end of the finger. Nail polish is **NOT** allowed. **NO FALSE FINGERNAILS OR ARTIFICIAL OVERLAYS.**

**Make-up** – Is allowed in minimal amounts. False eyelashes are not permitted.

**Fragrance** – Cologne, perfume, tobacco/smoke odor, scented after shave, and scented lotions are **NOT** allowed. Odors may exacerbate asthma, nausea and other ailments in the surgical patient, up to and including an extreme allergic reaction.

**TATTOOS SHOULD BE COVERED** if possible!!

**Beards** - No longer than 1 inch and trimmed neatly. Beards must be completely covered with a mask in the operating suite.

Halitosis and body odors are most distasteful. Good personal hygiene includes: personal cleanliness, use of effective deodorant and good oral hygiene. Deodorants, mouthwash, breath fresheners or mints are recommended. Gum chewing is not permitted in the lab or clinical sites.

**SMOKING IS NOT PERMITTED ANYWHERE--INSIDE OR OUTSIDE--AT THE CLINICAL FACILITY. THIS INCLUDES ANY PARKING LOTS/GARAGES OR EVEN INSIDE YOUR CAR AT THE CLINICAL SITE.**

**Jewelry** – None allowed. No earrings, necklaces, or bracelets allowed! Jewelry for body piercings **NOT** allowed! (Example: eyebrow, nose, tongue, etc.) The hospital and school will not be responsible for jewelry



worn to the clinical area and left in lockers or pinned to scrub attire. *The best policy is to leave your jewelry at home.*

You are to wear only hospital-laundered scrubs when in the O.R. setting.

You must wear NCCC Surgical Technology scrubs to report to the clinical facilities. If students arrive at the clinical site in inappropriate dress, they will be dismissed and counted absent.

Undergarments are to be contained under scrub clothes in clinical facilities – ABSOLUTELY NONE SHOULD BE VISIBLE AT ANY TIME.

Socks or hose must be worn while at the facility.

### **Accidents and Incidents in the Surgery Department**

If the student is involved in any kind of accident or incident at the clinical site, the clinical instructor and program director should be notified immediately at the time of the occurrence. Hospital procedures will be followed with respect to Incident/Accident reports.

Students, during their course of education, will become very familiar with Universal Precautions and will know the precautions to follow when there is a chance of contact with bodily fluids. Students are expected to observe Universal Precautions during lab and clinical rotation to minimize incidents in the Surgery Department.

If a student is injured, he/she may be treated by his/her own private physician or in the hospital emergency room. The student is responsible for seeking treatment and will be responsible for any cost incurred by using hospital services.

### **Eye Protection and Personal Protective Equipment**

Students will be **required** to wear instructor-approved eye protection and all other personal protective equipment at appropriate times in the operating room. They will also be required in other areas (i.e. central supply/ decontamination area) where there is a risk of contact with bodily fluids. Students disregarding this rule are subject to disciplinary action and dismissal from the Surgical Technology Program.

## **Unsafe and Unprofessional Clinical Practice Defined**

Unsafe clinical practice is deemed as behaviors demonstrated by the student which threaten or violate the physical, biological or emotional safety of the patient assigned to their care.

The following are examples of unsafe behaviors which may serve as guidelines for the student's understanding. Examples are not exhaustive:

**PHYSICAL SAFETY:** engaging in activities that distract your focus away from the case at hand including talking, not following the principles of maintaining the surgical environment, disorganization and inaccurate counts, inappropriate use of equipment including side rails, wheelchairs, positioning straps and O.R. equipment, lack of proper protection of the patient which could lead to falls, lacerations, burns, etc.

**BIOLOGICAL SAFETY:** not wearing personal protective equipment as appropriate, failing to recognize errors in aseptic technique, attending clinical site while ill, performing technical actions without appropriate supervision, failing to seek help when needed, etc.

**EMOTIONAL SAFETY:** threatening a patient, making a patient fearful, providing the patient with inappropriate or incorrect information, failing to seek help for patients when needed, demonstrating unstable emotional or unprofessional behaviors, etc.

**Violations of these standards are considered to be of exceptional importance. At the clinical instructor's discretion, the student may be removed from the clinical site immediately. Such a violation WILL result in the student being placed on remediation and may result in withdrawal from the program.**

## **Patient Medical Records**

Students are allowed to access patient medical records. With this privilege comes the responsibility for maintaining PATIENT CONFIDENTIALITY.

Medical records may NOT be removed from a nursing station or from the Medical Records Department at any time.

Medical records may NOT be reproduced at any time or for any purpose.

Keep discussion to classroom and operating room, NOT in public areas of the hospital (i.e.: cafeteria, stairwells, etc.) If a violation of patient confidentiality is reported, sanctions may be imposed upon the student including dismissal from the program.

**BREACH OF CONFIDENTIALITY IS GROUNDS FOR DISMISSAL FROM THE SURGICAL TECHNOLOGY PROGRAM. PATIENTS, THEIR PROCEDURES AND THEIR PHYSICIANS ARE NOT TO BE DISCUSSED--EVEN WITH CLASSMATES.**

## **Communicable Disease Policy**

Faculty and students shall adhere to the guidelines for infection control in skills laboratories, externship and classroom settings as set forth by the Center for Disease Control and the externship facility assigned.

## **Student Health Care Policy**

The program or the health care facilities to which you may be assigned do not provide health services or pay for your health care services. In the event of illness or accidents during externship, classroom, or skills laboratory hours, neither the school nor externship site can assume responsibility. Illnesses are to be reported promptly. It is required that you carry health insurance for this purpose.

## **Physical Requirements**

As a surgical technologist you may be required to:

- Stand or sit for long periods of time with no break. You should be able to tolerate standing for 6-8 hours.
- Function without nourishment for 6-8 hours (or be unable to have a bathroom break).
- Assist in lifting, transporting, and moving a patient.
- Lift and transport heavy instrument sets.
- Push and transport heavy equipment.
- Push and control a patient gurney or hospital bed.
- Hold in position a retractor for extended periods of time.
- Have excellent vision with or without corrective lenses.
- Have hearing within normal range with or without corrective aids and be able to respond quickly to verbal orders.
- Compensate for any range of motion limitations.
- Have excellent dexterity in order to quickly and efficiently pass surgical instruments, supplies, and equipment and assemble and handle delicate equipment.

## **Travel Requirements**

The surgical technology program has no jurisdiction over where hospitals are built, nor do they have any control over where your place of residence is located. Students should expect to attend clinical at multiple hospitals in different locations (ie: *not the hospital closest to your residence.*)

Students are expected to attend surgical rotation off-campus to maximize their educational opportunities. Program faculty make every effort to affiliate only with hospitals within a 60-mile radius from each respective campus (Ottawa and Chanute). A student's campus selection is determined by their proximity to said campus (ie: a student residing in Chanute but completing the program in Ottawa traditionally is deemed a Chanute campus clinical student). Clinical assignments are made based on the priority for students to meet graduation requirements, as delineated by the AST 6<sup>th</sup> Ed. Core Curriculum. Students interested in expanding their area of clinical opportunity are encouraged to discuss the matter with the Clinical Coordinator. A travel agreement will be required in such situations.

Students are expected to provide their own reliable transportation to the facility. NCCC and the Surgical Technology Department are not liable for any accidents during the off-campus surgical rotation.

## **IMMEDIATE WITHDRAWAL POLICY**

The following circumstances will result in the automatic withdrawal of the student from clinical rotation and, subsequently, the surgical technology program. The student is banned on a lifetime basis for readmission into the NCCC Surgical Technology Program. The circumstances for permanent withdrawal from the program includes, but are not limited to:

1. Violation of patient confidentiality.
2. Student's behavior and/or performance are disruptive and hazardous to themselves, patient/s, or other healthcare providers.
3. Harassment of a student, peer, NCCC employee, preceptor or other surgical team member, or hospital patient.

## **PLACEMENT OF STUDENT ON REMEDIATION STATUS IN SURGICAL ROTATION**

The following circumstances will result in the placement of the student on probationary status in surgical rotation and repeated behavior will result in withdrawal. The circumstances for remediation in the program includes, but are not limited to:

1. Failure to progress within surgical rotation.
2. Failure, on a regular basis, to be prepared for assigned surgical procedures.
3. Unprofessional conduct as determined by surgeons, preceptors, clinical management or instructors.
4. Failure to maintain sterile environment.

## **Reminders for Students**

This is a list for the student's convenience so you will be prepared as much as possible for the first day of clinical rotation.

1. Wear a pair of good, comfortable, acceptable shoes. Remember that you might be standing in one spot for long periods of time. Shoes that are easily cleaned with no mesh or openings on the top, and no open toe are required. Shoe covers are required at all times at the clinical sites. Bring an extra pair of socks for those "wet" orthopedic and C-section procedures. Not all departments have boot-type shoe covers.
2. Cloth hats are not allowed at the clinical sites. They will provide you with disposable hair coverings and these must be worn.
3. Leave all jewelry and valuables at home. It cannot be guaranteed that the O.R. department will be able to provide you with a secured locker.
4. EAT BREAKFAST!! We **highly** recommend including a healthy source of protein in your meal.
5. Most hospitals have refrigerators and microwaves for use while on site allowing you to bring your lunch if you choose. If you prefer to eat at the cafeteria, you may bring cash to purchase your lunch and/or meal ticket (if provided at clinical site. Not all sites participate in meal ticket plans.) You are NOT allowed to leave the hospital for lunch.
6. Students are allowed 30 minutes for their lunch break when they are scheduled for their 8-hour clinical days. An assigned lunch break will not be made, but may be taken at a time when your assigned duties are completed or at the discretion of the assigned clinical preceptor. Breaks are limited to 15 minutes in length to begin when you leave the OR suite. One 15-minute break is allotted for every four (4) hours of clinical time.

**NOTE: Situations arise from time to time when a break will not be allowed due to emergencies or other extenuating circumstances; however, every effort will be made to ensure that all students receive their break whenever possible. The flow of a case will not be interrupted for a break. Confine eating and drinking to designated areas and only during break time. Do not eat or drink the hospital staff's food or drinks.**

7. Make sure you leave home with sufficient time to get to the ***department*** on time. Department does NOT mean parking lot, and on time means changed and ready to work.
8. When you have changed into scrubs, report to the preceptor, clinical instructor or assigned operating room.
9. **DO NOT** wear perfume or cologne in surgery.
10. Students must exhaust all possible opportunities in the clinical facility to be productive before using clinical time for coursework assignments (ie: homework). Opportunities include transferring to another department, cleaning O.R.s, checking outdates, putting supplies away, pulling cases for the next day, working in Central Supply, etc. **Do not** work on coursework assignments in the hospital lounge.

## **Daily/Weekly Clinical Assignments**

1. The student is required to fill out their clinical case log on a daily, case-by-case, basis. All procedures must be initialed and signed by their preceptor and turned in to the instructor for weekly validation. The clinical case log tally sheet must be updated.
2. Students must complete a surgical procedure report with specific physician notes for each procedure listed within their clinical case log.
3. The student is required to complete a weekly self-evaluation and goal sheet through *myNeosho* coursework by Sunday night at 11:55pm; **no late assignments will be accepted. Failure to complete will result in a 0% on the assignment.**

## **Clinical Evaluations**

The student's daily clinical performance will be evaluated by their preceptor. If the student's performance is unacceptable a written comment is required. These evaluations are tracked as course assignments, and they allow the student and/or instructor to track the student's progress.

During the student's clinical education, the Clinical Coordinator will evaluate the student's performance on an ongoing basis through instructor evaluations, review of preceptor evaluations, and discussions with facility staff.

The Clinical Coordinator and/or Program Director will meet with each student regularly to review their clinical progress by identifying strengths and weaknesses and methods for improvement where necessary. The clinical case log will be evaluated for case number/surgical specialties needed or attained. The student is encouraged to bring any problems or concerns related to their clinical experience to the clinical coordinator in a professional and timely manner, or discuss during their clinical meetings. *Appointments are preferred.*

Satisfactory clinical evaluations must be maintained in all clinical case assignments. Failure to meet clinical requirements will affect the clinical grade and could result in remediation or withdrawal from the program.

## **Responsibilities and Actions**

<b><i>Responsibility</i></b>	<b><i>Action</i></b>
Student	<ul style="list-style-type: none"> <li>✓ Provide preceptors with evaluation forms so that they don't have to go look for them.</li> <li>✓ Be open to and appreciative of suggestions and opportunities for learning.</li> <li>✓ Be proactive and helpful toward clinical staff and tasks.</li> <li>✓ Complete staff and facility evaluations at end of rotation.</li> <li>✓ Maintain accurate clinical case log with required initials and signatures.</li> <li>✓ Complete homework as assigned.</li> <li>✓ Be leaders of surgical principle management and practice.</li> <li>✓ Be leaders of professional practice.</li> </ul>
Instructor	<ul style="list-style-type: none"> <li>✓ Review all preceptor evaluations.</li> <li>✓ Complete regular instructor evaluations.</li> <li>✓ Seek input from facility staff.</li> <li>✓ File evaluations in proper folders.</li> <li>✓ Notify student of unsatisfactory performance and methods to improve.</li> <li>✓ Recommend to Program Director a remediation status when student is not meeting expectations.</li> </ul>
Program Director	<ul style="list-style-type: none"> <li>✓ Reviews all records and has final say concerning policy and procedures.</li> </ul>



### **First Scrub Role:**

The surgical technologist student shall perform the following duties during any given surgical intervention, with proficiency. A student not meeting the criteria below cannot count the case in the first scrub role and the case must be documented in the second scrub role or observation role:

- Check supplies and equipment needed for the surgical procedure
- Scrub, gown and glove
- Set up the sterile field with instruments, supplies, equipment and medication/solutions needed for the procedure
- Perform appropriate counts with the circulator prior to the procedure and during closure of the incision
- Gown and glove additional surgical team members
- Assist with draping the sterile field
- Pass instruments and supplies to the sterile surgical team members during the procedure
- Maintain the highest standard of sterile technique during the procedure
- Prepare sterile dressings
- Perform terminal activities of cleaning and preparation of instruments, supplies and the OR

### **Second Scrub Role:**

The second scrub role is defined as the student who is at the sterile field who has not met all criteria for the first scrub role, but actively participates in the surgical procedure in its entirety by completing any of the following:

- Sponging, suctioning, cutting suture, holding retractors, manipulating endoscopic camera, etc.

### **Observation Role:**

The observation role is defined as the student who is in the operating room performing roles that do not meet the criteria for the first or second scrub role, including the circulator's assistant role. These observation cases are not to be included in the required case count, but must be documented in the case log.

**NEOSHO COUNTY COMMUNITY COLLEGE  
SURGICAL TECHNOLOGY PROGRAM**

***Program Release Form***

I am aware that during the surgical technology program, certain risks and dangers to my physical, psychological, and/or emotional well-being may occur, including but not limited to, accidents and illness. I understand and agree to a criminal background check. I have read and agree to follow the policies outlined in the Student Handbook as adopted by the Board of Trustees. I have read the Neosho County Community College Surgical Technology Student Handbook, understand its content and agree to abide by the policies contained therein.

I understand and agree that continued placement in the surgical technology program's clinical courses is determined by my success in the laboratory course and that if I am determined by the instructor and program director to be lacking the ability to perform the required surgical technology skills or professional behavior, I will not advance in the program nor earn my degree. This is determined by performance during the laboratory class and the clinical readiness exam.

I acknowledge, I have read the Substance Abuse Policy in the surgical technology student handbook. I understand that I will not be allowed to attend clinical under the influence of any drugs or alcohol, including prescription narcotics or other mind/mood altering substances. I understand that I could be required to submit to a drug test, at my cost, if the Clinical Instructor or Facility request I do so, according to policy. I am aware that if because I am determined by drug testing to be under any influence and therefore not able to provide a clean drug screen, this constitutes making me unable to attend clinical and for these reasons I may be dropped from the program.

I understand that cooperating clinical agencies will require that the surgical technology program submit a range of required information gathered by Neosho County Community College which may include but is not limited to my immunization status, TB test results, and/or CPR certification, to their education department in order that I may attend clinical in the corresponding clinical agencies. I consent to the release of this information so that I may complete the clinical component of my surgical technology courses.

I am aware and understand that said risks are inherent in and a part of said program and I fully acknowledge my awareness of those risks and dangers which may include but are not limited to being exposed to patients who may have AIDS, Herpes, Hepatitis and other infectious diseases.

In considering the right to participate in the surgical technology program, I have and do hereby assume all the above mentioned risks and will hold Neosho County Community College, its agents, servants, employees, volunteers, faculty, staff, students, insurers, Board of Trustees and its members, and affiliated clinical institutions harmless from any or all liabilities, actions, causes of actions, debts, claims, and demands of any kind and nature whatsoever I now have or which may arise in connection with this program and/or any course which is a part thereof. The terms hereof shall serve as a release and an assumption of risk and shall be binding upon my heirs, executors, administrators, and all members of my family, including any minors.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

NEOSHO COUNTY COMMUNITY COLLEGE  
SURGICAL TECHNOLOGY PROGRAM

**Protected Health Information, Confidentiality & Security Policy**

Protected Health Information (PHI) includes patient-identifiable information which may be obtained upon examination, while viewing diagnostic exam results and progress notes (any part of the chart), upon observation and while in conversation with the patient and includes, but is not limited to:

1. Patient's name
2. Account number
3. Birth date
4. Admission and discharge dates
5. Photographs
6. Health plan beneficiary number

Surgical Technology students are given access to patient information and exposed to PHI while in the clinical setting. Although the college has taken steps to remove patient identification information from required clinical paperwork, all healthcare information on said paperwork must be protected and treated as confidential by the student. In order to maintain confidentiality and security of PHI and patient-identifiable information, the following are prohibited:

1. Disclosure of said information with anyone outside of the direct care of the patient and directly related to learning activity.
2. Discussion (includes verbal, written, electronic copies, etc.) of said information in public areas (public buildings, social networking sites, etc.).
3. Photocopying or printing any part of the patient chart for student use as this is unauthorized removal of medical records.
4. Accessing information on patients other than those included in their assignments and responsibilities.
5. Disclosure of any ID and/or passwords provided in order to conduct patient care/documentation.
6. Use of any ID and/or passwords which are not their own.

In addition to the above, the student is expected to:

1. Abide by the clinical agency's privacy policies.
2. No patient identifiers will be on any clinical paperwork, including names, initials, or date of birth.
3. Dispose of all clinical paperwork by shredding or incineration of paper copies and/or removal from electronic resources upon leaving the surgical technology program whether by dismissal, withdrawal, or graduation.

As a Surgical Technology student, I understand I have been given access to patient-identifiable information which must be protected at all times, kept confidential, and secure. I accept this responsibility and agree to be accountable for my actions regarding such. Any breach of patient confidentiality by disregarding this policy or policies of clinical agencies is grounds for dismissal from the program. I understand that Federal and State laws govern the confidentiality and security of PHI and that unauthorized disclosure of PHI is a violation of law and may result in civil and criminal penalties.

\_\_\_\_\_  
Signature \_\_\_\_\_ date \_\_\_\_\_

\_\_\_\_\_  
Print name

**NEOSHO COUNTY COMMUNITY COLLEGE  
SURGICAL TECHNOLOGY PROGRAM**

**Physical Examination**

(To be completed by a Physician, PA or ARNP)

Health Care Facility Name & Address: \_\_\_\_\_  
\_\_\_\_\_

Student Name: \_\_\_\_\_  
Last First Middle

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Male: \_\_\_\_\_ Female: \_\_\_\_\_

NORMAL	ABNORMAL	SYSTEM	DESCRIBE ABNORMALITIES
		Head:	
		Eyes, Vision (Snellen):	W/O glasses: Rt. 20/ Lt. 20/ W/glasses: Rt. 20/ Lt. 20/
		Color Vision (REQUIRED):	
		Pupils:	
		Extraocular Motions:	
		Ears, Canals, Drums:	
		Hearing: Rt. Ear	
		Lt. ear	
		Nose and throat:	
		Teeth:	
		Tonsils:	
		Lungs:	
		Breasts:	
		Heart, Pulse - At rest:	After ex.: 2 min. after ex.:
		Thrills, Murmurs:	
		Blood Pressure:	
		Abdomen:	
		Hernia:	
		Musculoskeletal:	
		Posture:	
		Feet:	
		Nervous System:	
		(Reflexes, Coordination)	
		Skin and Scalp:	

**COMMENTS:** (Indicate any handicaps, restrictions, or limitations)

**RECOMMENDATION:** (Do you consider the applicant mentally and physically able to undertake the surgical technology program?)

[ ] YES [ ] NO

\_\_\_\_\_  
Physician/PA/ARNP Signature

\_\_\_\_\_  
Date



## **Immunization, Physical, CPR, and Health Insurance Policies**

**All documentation, including health requirements, must be completed and turned in according to specific deadlines determined by program faculty. Ability to attend clinical activities is determined by this documentation.**

Persons accepted into the surgical technology program will be required to provide evidence of good health **before attending class**. Up-to-date immunizations will be required for:

1. Tetanus/Diphtheria
2. MMR
3. Varicella (Chicken Pox)
4. Influenza
5. Hepatitis B
6. COVID-19

as recommended by the Kansas State Department of Health and Environment and our clinical facilities. Please see the Immunization Requirements for further explanations.

A current, yearly physical examination must be completed prior to clinical courses. Forms for the physical examination are provided by program faculty.

A two-step TB skin test is required annually or chest x-ray every two years of the program and must be current while in the program. A letter from physician stating no change in health status since last negative Chest X-Ray for students that require chest x-rays to determine TB status is acceptable. **It is the student's responsibility to maintain a current TB skin test or chest x-ray. This may require additional screenings which are the responsibility of the student.**

Applicants accepted into the program will be required to obtain American Heart Association Health Care Provider Basic Life Support Healthcare Provider CPR certification. Classes are offered at NCCC, however students may obtain this certification at an alternate location. **It is the student's responsibility to obtain certification and maintain certification while in the program. Students must carry their CPR certification with them. Students must provide proof of certification to program faculty.**

Provide documentation of a current **American Heart Association-Healthcare Provider** card. This is the only CPR certification accepted by the program.

All immunizations must be current through the final semester of the program and in the student's file. Failure to do so will prevent students from attending clinical, thereby resulting in program cessation.

A drug screen and background check will be done upon acceptance in the program and will include alcohol, all illegal drugs, prescription narcotics, and mind/mood altering substances. Should the tests find a positive result, acceptance into the program will become void. The program maintains the right to request random drug screens for the same items at any time throughout the program at the student's expense.

Proof of Health Insurance is required for all students upon beginning their clinical rotation. No student will be permitted to attend clinical without proof of health insurance on file with the program.

**NEOSHO COUNTY COMMUNITY COLLEGE  
SURGICAL TECHNOLOGY PROGRAM**

**Immunization Requirements**

Students accepted into the program are required to provide documentation of immunization for the following diseases prior to the start of classes and to be kept current throughout the program:

**Tuberculosis (TB)**

- ✓ Two-step TB skin test dated after May 25th. Two-step TB skin test requires 4 visits to health care provider within 14 days.  
*or*
- ✓ Proof of **two** consecutive annual tests (within the appropriate window of time), the second within six months of the start of classes.  
*or*
- ✓ Proof of negative chest x-ray within 18 months of the start of classes. If x-ray exceeds 18 months, must get new chest x-ray or letter from physician stating no change in health status since last negative chest x-ray.  
*or*
- ✓ Proof of BCG or other tuberculosis vaccination.

**Tetanus/Pertussis (Tdap)**

- ✓ Immunization within eight years of the completion of classes.

**Rubeola (Red Measles), Rubella (German Measles) and Mumps**

- ✓ Proof of 2 MMR vaccinations For MMR vaccines, you may have 1 dose as a child and 1 dose as an adult, or 2 as a child, or 2 as an adult. Any combination of 2 will work.  
*or*
- ✓ Positive Mumps, Measles & Rubella titers (MMR titer must include all 3 diseases)

**Varicella (Chickenpox)**

- ✓ Positive Varicella titer If you've just begun your hepatitis B series, proof of first vaccination is sufficient. Remaining two vaccinations and documentation is required as directed by your health care provider!  
*or*
- ✓ Proof of 2 Varicella vaccinations

**Hepatitis B**

- ✓ 3 vaccination dates – If you've just begun your hepatitis B series, proof of first vaccination is sufficient. Remaining two vaccinations and documentation is required as directed by your health care provider!  
*or*
- ✓ Positive anti-HB titer

**Influenza**

- ✓ Immunization each October while in the program.

**COVID-19**

- ✓ Proof of immunization (Moderna, Pfizer, Janssen/Johnson & Johnson)  
*or*
- ✓ Applicable declination documentation (medical or religious).

## 2024-25 AAS Surgical Technology Program

**\$12,910.00\***

\*Cost for non-Neosho County Kansas (ie: Franklin County) residents who take all courses in Ottawa.  
(Includes all course fees. Cost of textbooks not included.)

If you live in Neosho county, and take all available courses in Chanute, *subtract* \$1437.\*

If you live in Neosho County, but take all courses in Ottawa, *subtract* \$885.

If you live outside Neosho County, and take all available courses in Chanute, *subtract* \$552.\*

If you live out-of-state, and take all available courses in Ottawa, *add* \$1298.

*\*Surgical Technology courses are offered only on the Ottawa Campus.*

**ATI TEAS Test Fee: \$70**

**Acceptance fee: \$150**

Criminal Background Check \$100

Scrubs (Including embroidery) \$25.00

Badges \$5.00

Liability Insurance \$20

*Personal health insurance is required for clinical attendance -- **not provided by program!***

### Program Specific Course Fees and Textbook Cost Breakdown

(tuition NOT included)

<b><u>SURG 100 Intro to ST</u></b> (fees and <b>required</b> books only)	<b>\$310.00</b>
Fuller Textbook Bundle (available at NCCC Ottawa Bookstore) (includes textbook, workbook, surgical instrumentation book AND ST Exam Review)	\$310.00
Taber's Dictionary (Optional--not included in costs)	\$56.00
<b><u>SURG 101 Intro to ST Lab</u></b> (fees and <b>required</b> books only)	<b>\$454.65</b>
Course Fee	\$388
Operating Room Skills	\$66.65
<b><u>SURG 102 P&amp;P Lecture</u></b> (fees and <b>required</b> books only)	<b>\$287.00</b>
Course Fee	\$287.00
<b><u>SURG 103 P&amp;P Lab</u></b> (fees and <b>required</b> books only)	<b>\$485.00</b>
Course Fee	\$425.00
Pocket Guide to OR Text	\$60.00
Atlas of Human Body Text (Optional--not included in costs)	\$83.15
<b><u>SURG 106 Clinical 1</u></b> (fees and <b>required</b> books only)	<b>\$225.00</b>
Course Fee	\$225.00
<b><u>SURG 202 Surg Proc 1</u></b> (fees and <b>required</b> books only)	<b>\$390.00</b>
Course Fee	\$390.00
Alexander's Surgical Procedures text (Optional--not included in costs)	\$148.20
<b><u>SURG 204 Surg Proc 2</u></b> (fees and <b>required</b> books only)	<b>\$415.00</b>
Course Fee	\$415.00
<b><u>SURG 206 Clinical 2</u></b> (fees and <b>required</b> books only)	<b>\$275.00</b>
Course Fee	\$275.00
<b><u>SURG 208 ST Exam Review</u></b> (fees and <b>required</b> books only)	<b>\$415.00</b>
Course Fee ( <b>INCLUDES CST EXAM FEES</b> )	\$415.00

*Prices are subject to change. Revised 6/2024*

*Specific textbook information will be provided to students once accepted into the program.*





