

Southern West Virginia Community and Technical College
Division of Allied Health and Nursing



Division OF ALLIED HEALTH
SURGICAL TECHNOLOGY
STUDENT HANDBOOK
2024-2026



SURGICAL TECHNOLOGY PROGRAM

Handbook is subject to change at the Program Director or College's discretion

MISSION STATEMENT

The Surgical Technology program of Southern West Virginia Community and Technical College will enable the students to perform as competent, entry-level Surgical Technologists.

VISION STATEMENT

To establish the Surgical Technology program of Southern West Virginia Community and Technical College as a model for surgical technologists in local and regional communities.

Affirmative Action

Southern West Virginia Community and Technical College is an Equal Opportunity/Affirmative Action Institution and does not discriminate based on race, sex, gender identity, pregnancy, sexual orientation, age, disability, veteran status, religion, color, or age in admission, employment, or educational programs and activities; nor does it discriminate based on genetic information in employment or employee health benefits.

Faculty, staff, students, and applicants are protected from retaliation for making complaints or assisting in investigations of discrimination. This nondiscrimination policy also applies to all education programs, to admission, to employment, and to other related activities covered under Title IX, which prohibits sex discrimination in higher education. Southern will take steps to ensure that a lack of English language skills will not be a barrier to admission and participation in the college's CTC offerings. Auxiliary aids and services are available upon request to individuals with disabilities.

Southern West Virginia Community and Technical College also neither affiliates with nor grants recognition to any individual, group, or organization having policies that discriminate on the basis of race, ethnicity, sex, color, creed, gender, religion, age, sexual orientation or gender orientation or expression, physical or mental disability, marital or family status, pregnancy, genetic information, veteran status, service in the uniformed services, ancestry, or national origin. Inquiries regarding compliance with any state or federal nondiscrimination law may be addressed to:

Title IX Coordinator

Mr. Darrell Taylor
Chief Student Service Officer
Title IX Coordinator
100 College Drive
Logan, WV 25601
Phone: 304-896-7432
Fax: 304-792-7096
TTY: 304-792-7054
Email: darrell.taylor@southernwv.edu

Affirmative Action Officer

Mrs. Debbie Dingess
Chief Human Resources Officer
100 College Drive
Logan, WV 25601
Phone: 304-896-7408
Fax: 304-792-7096
TTY: 304-792-7054
Email: debbie.dingess@southernwv.edu

Section 504 ADA Coordinator

Ms. Diana Toler
Director of Disability and Adult Services
100 College Drive
Logan, WV 25601
Phone: 304-896-7315
Fax: 304-792-7113
TTY: 304-792-7054
Email: Diana.toler@southernwv.edu

For further information on notice of nondiscrimination, contact the Office of Civil Rights, U.S. Department of Education, The Wanamaker Building, 100 Penn Square East, Suite 515, Philadelphia, PA 19107-3323; Phone: 215-656-8541; Fax: 215-656-8605; TTY: 877-521-2172; or email OCR.Philadelphia@ed.gov.

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SOUTHERN WEST VIRGINIA COMMUNITY
AND
TECHNICAL COLLEGE

DIVISION OF ALLIED HEALTH AND NURSING

SURGICAL TECHNOLOGY STUDENT HANDBOOK

All new students reapplying to the program or repeating a surgical technology course will adhere to the most current student handbook for that course and year. However, the Curriculum Plan will only change once admitted to the program for students repeating a course with a separate notice prior to implementation. The notice would be separate from this handbook.

This handbook replaces and supersedes any other handbook the student has been given.

Changes in the student handbook contents may be made according to Southern's policy on students' academic rights and responsibilities.

Implemented: 05/1999

Revised: 05/2001, 01/2003, 08/2009, 08/2011, 08/2012, 08/2013, 08/2015, 08/2016, 06/2017,
8/2018, 5/2019, 8/2023/2024

DEPARTMENT OF SURGICAL TECHNOLOGY

Philosophy

Surgical technologists primarily render care to the patient, providing assistance to the physician. They work as a member of the surgical team, adhering to the principles of asepsis and sterile technique.

The surgical technologist works under the medical supervision of a surgeon. They are to assist in providing a safe environment for the patients and team members.

A surgical technologist must have knowledge of human anatomy, surgical procedures, and the use of surgical instruments and equipment.

Southern's surgical technology faculty complies with the goal of the institutional mission (See College Catalog). We recognize that the needs of healthcare agencies in our communities may include skills beyond those taught in the associate degree program. We consider it to be the responsibility of the health care agency to prepare the Southern graduate to assume duties that require skills not included in our curriculum.

To prepare the associate degree graduate for beginning surgical practice, the faculty has developed and implemented a curriculum that includes activities in the classroom, college laboratory, and clinical setting. These planned educational activities are designed to help students achieve stated curriculum and behavioral objectives. Students are supervised in the clinical site by clinical mentors/instructors. In addition to surgical technology courses, the curriculum includes healthcare sciences, technological sciences, and general education courses.

Conceptual Framework

The conceptual framework of Southern's Surgical Technology Program represents the faculty's plan for organizing cognitive, psychomotor, and affective learning experiences to fulfill educational objectives and produce competent and conscientious surgical technologists.

The Surgical Technology Program employs different levels of progression moving from simple to complex. The student must demonstrate competency at each level before moving to the next.

The student is in the surgical technology lab for the first semester, learning equipment, instruments, supplies, and surgical skills. The students are also learning the fundamental elements of the operating room, such as patient care concepts, sterile and non-sterile responsibilities, and skills in the intraoperative and postoperative phases of surgery. Studies in human biology, biomedical technology, mathematics, and medical terminology enable the student to acquire the background in science necessary in this field.

During the second semester, the student enters the hospital clinical setting to perform the skills as taught in the surgical technology lab. The student may require more direction and

guidance in the operating room this semester. The student begins to study perioperative case management and surgical procedures. The study of English composition is included to foster the development of communication skills and psychology to help understand the surgical patient as a human being.

In the third semester, the student continues in the hospital clinical setting and is expected to perform confidently and proficiently. Surgical procedures continue to be taught in the classroom. The student continues their study of support courses in Healthcare Ethics and Law and Lifespan Psychology.

In the fourth and final semester, the student is in the hospital clinical setting three days a week. They are expected to perform skills with competency and independence and within a reasonable time frame. The student will continue to study the surgical procedures and review with the Surgical Seminar review class. Microbiology will complete the basic science requirements.

The students are exposed to the three roles of a surgical technologist in the operating room during the course of the program: **First Scrub Role, Second Scrub Role, and Observation Role.**

The student must demonstrate competency at each level before moving to the next. Upon successfully completing the program, the student is eligible to take the Surgical Technology Certification exam to become a Certified Surgical Technician.

PROGRAM OUTCOMES/OBJECTIVES
(Characteristics of the Graduate)

Graduates of Southern West Virginia Community and Technical College's Surgical Technology Program should be able to demonstrate entry-level competencies for the following upon initial employment.

1. Handle instruments, supplies, and equipment necessary during the surgical procedure.
2. Have an understanding of the procedure being performed and anticipate the needs of the surgeon.
3. Apply basic scientific principles in learning new techniques and procedures.
4. Apply principles of safety in the operating room.
5. Demonstrate professional conduct and interpersonal communication skills with patients, operating room staff, and other health care professionals.
6. Recognize the use and action of medications used in the operating room.
7. Recognize the biopsychosocial needs of the surgical patient.
8. Demonstrate aseptic techniques at all times, and if contamination occurs, report it.
9. Assist in preoperative, perioperative, and postoperative care of the surgical patient.
10. Recognize and act upon individual needs for continuing education as a function of growth and maintenance of professional competence.

SURGICAL TECHNOLOGY
PROGRAM GOALS

The Surgical Technology Program Goals:

1. The program curriculum will meet or exceed the content demands of the latest Core Curriculum of the Surgical Technologist.
2. Faculty will meet or exceed the qualifications described in the CAAHEP Standards and Guidelines for an Accredited Educational Program in Surgical Technology.
3. Prepare competent entry-level surgical technologists in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains.
4. Provide students with job service information.
5. Maximize the quality of the Surgical Technology Program by ongoing monitoring and evaluating of the program, faculty, facilities, and outcomes.
6. Maintain communication with the community health care agencies through an advisory committee.
7. Maintain random clinical site visits by the Surgical Technology Director/Clinical Instructor to evaluate the progress of the students.
8. Prepare graduates with the necessary knowledge to pass the certification exam.
9. Provide the opportunity for students to experience a variety of surgical procedures.

Student/Graduate Outcomes:

1. 70% of the students entering the program will graduate.
2. 100% of the students who graduate will take the CST exam.
3. 70% of the students taking the CST exam will pass.
4. 80% of the students that graduate will be employed within one (1) year.
5. 70% satisfaction rate by the employer of the new graduate.
6. 70% satisfaction rate by the graduate of education received in the program.

DEPARTMENTAL POLICIES

Policies of Academic Standing

Refer to the College Catalog for general policies.

Surgical Technology students must achieve a minimum grade of “C” in each surgical technology course and all other required courses (as listed in the surgical technology curriculum).

If a student earns less than a “C” in a surgical technology course or withdraws from a course, that course may be repeated only once and must be taken during the next scheduled offering when possible. If a student earns less than a “C” or withdraws from a required course on their second attempt, they will be dismissed from the surgical technology program.

In relation to surgical technology courses that have a lecture and clinical section, students must maintain a “C” or better and meet guidelines in the clinical portion. If either is not met, it will be a failure for both sections (lecture and clinical).

Students must state in writing their intention to repeat a surgical technology course one semester in advance. Consideration for repeating will be determined once the office receives a letter of intent from the repeating student and there is availability of space within the given course considering clinical space, instructor/student ratios, or other faculty concerns.

All students reapplying to the program or repeating a surgical technology course will fall under the student handbook for the current academic year. The students responsible for obtaining a new handbook and reading and discussing any concerns with their advisors.

Students must complete the program within four years after original admission to the surgical technology program. Failure to comply with this policy, or dismissal from the program due to failure, requires the student to apply for readmission to the program and subsequently repeat all surgical technology courses or testing out of any previously passed surgical technology course.

At the conclusion of the last semester, immediately preceding graduation, surgical technology students must have a grade point average of 2.0 in order to be eligible to graduate from Southern’s Surgical Technology Program. This will include courses transferred from other colleges.

SCHEDULE CHANGES

Any changes in academic schedules (add, drop, etc.) must be cleared with the **Director of Surgical Technology**. Advice from anyone else could cause problems relating to eligibility for the next course or for graduation.

GENERAL POLICIES

WITHDRAWAL – No withdrawals are permitted after the published deadline. Refer to the college catalog.

MARRIAGE/NAME CHANGE – A change in name is to be reported promptly to the Surgical Technology Director and to Student Records.

PERSONAL INFORMATION CHANGES – Telephone number and address changes must be reported to the ST Director and Student Records.

HEALTH EXAM – The health exam must be submitted by the announced deadline. The Surgical Technology Director is to be made aware of any changes in health status.

PREGNANCY – A pregnancy must be reported to the Surgical Technology Director immediately. A physician's consent is necessary if the pregnancy occurs during or extends into the clinical rotation.

LIABILITY INSURANCE – Students are currently provided liability insurance coverage under the State of West Virginia's professional liability insurance program. This insurance will not cover students engaged in activities beyond the role of surgical technology student training or activities not authorized by the surgical technology faculty or clinical instructors.

HEALTH/ACCIDENT INSURANCE – All students are encouraged to acquire health and accident insurance if not presently covered under a parent's policy or personal policy.

CPR –The student's CPR card must be American Heart Association, Healthcare Provider, BLS (Basic Life Support) and submitted to the Surgical Technology Director no later than the first day of clinical experience. The CPR card must be kept current during the program.

SNOW/FLOOD POLICY – Students should always use sound judgment concerning travel to or from classes/clinicals during inclement weather. If classes at Southern are canceled due to weather, then ST lectures will be canceled. Due to the geographical location of the clinical sites, inclement weather may occur in one area and not in another. You must decide if it is safe for you to travel to your assigned clinical site. Missed clinical due to inclement weather must be rescheduled with the clinical instructor/director and clinical facility. Refer to Southern's "Inclement Weather and Emergency Situations" Policy.

STUDENT EMPLOYMENT – It is the student's responsibility to prevent outside employment from interfering with their college classes. In addition, the Surgical Technology Program is not required to make any accommodations in the program regarding a student's employment.

EMERGENCY SITUATIONS – In the event of a fire, bomb threat or other emergency situation, students are to follow directions and, if asked, exit the building immediately in a calm and orderly manner.

STUDENT GRIEVANCE PROCEDURE

The Student Grievance Procedure shall provide an equitable and orderly process to resolve any differences or disputes between a student and a staff or faculty member about College policies or learning activities affecting the student. This may include but is not limited to grading, instructional procedures, class attendance policies, instructional quality, and other situations where the student believes he/she is being treated unfairly or arbitrarily.

Procedures concerning academic and non-academic grievances and appeals can be found in the Student Handbook section of the college catalog.

LEGAL GUIDELINES

HIPAA – Health Insurance Portability and Accountability Act

A guide for healthcare workers provides a detailed review focused on patient privacy and data security issues that will have the most impact on healthcare workers' practices.

FERPA – Family Educational Rights and Privacy Act

Higher education institutions are required to establish written policies and guidelines governing the review, inspection, release, amendment, and maintenance of student educational records.

CLERY ACT

Institutions must publish campus security policies and crime statistics in a timely manner for student/public/community review. To learn more about the “Jeanne Cleary Act,” go to www.securityoncampus.com and click “public policy”.

Refer to the “Student Handbook” in the Academic Catalog for more student-related policies, procedures, and student information.

ACADEMIC POLICIES

Additional academic policies covering topics like admission procedures, grading, withdrawal, academic dishonesty, tuition, fees, and refunds, as well as policies governing student rights, responsibilities, standards of conduct, etc. can be located in the college catalog.

ESSENTIAL FUNCTIONS

Purpose: To provide the applicant/student with a clear understanding of the demands required of the student/graduate of the Surgical Technology Program based on the tasks performed by the surgical technologist.

Essential Observation Requirements:

1. Demonstrate visual ability to load fine suture onto needles with/without corrective lenses and while wearing safety glasses.
2. Demonstrate sufficient peripheral vision to anticipate and function in the surgical environment.

Essential Movement Requirements:

1. Move freely and safely about the operating room.
2. Stand, bend, stoop, and/or sit for long periods of time in one location with minimum/no movement.
3. Manipulate instruments, supplies, and equipment with speed, dexterity, and good eye-hand coordination.
4. Assist with and/or lift, move, position, and manipulate, with or without assistive devices, the patient who is unconscious.

Essential Intellectual Requirements:

1. Possess these intellectual skills: comprehension, measurement, mathematical calculation, reasoning, integration, analysis comparison, self-expression, and criticism.
2. Be able to exercise sufficient judgment to recognize and correct performance deviations.

Essential Communication Requirements:

1. Read and comprehend technical and professional materials (i.e., textbooks, magazine and journal articles, handbooks, and instruction manuals).
2. Follow verbal and written instructions in order to correctly and independently perform surgical skills.
3. Hear and understand muffled communication without visualization of the communicator's mouth/lips.
4. Hear activation/warning signals on equipment.
5. Communicate with faculty members, fellow students, staff and other health care professionals verbally and in a recorded format (writing, typing, graphics or telecommunication).

Essential Behavioral Requirements:

1. Be free of reportable communicable diseases and chemical abuse.
Demonstrate immunity to rubella, rubeola, tuberculosis, and hepatitis B, or be vaccinated against these diseases, or be willing to sign a waiver of release of liability with regard to these diseases.
2. Make appropriate judgments and decisions.
3. Demonstrate the use of positive coping skills under stress.
4. Demonstrate calm and effective responses, especially in emergency situations.
5. Demonstrate positive interpersonal skills in patient, staff, and faculty interactions.
6. Be honest, compassionate, ethical and responsible.
7. Be able to accept constructive criticism and look for ways to improve.

Reference: **Surgical Technology for the Surgical Technologist**, Association of Surgical Technologists, Inc. Sixth Edition.

MISCONDUCT

Misconduct is defined as: “Conduct derogatory to the morals or standards of the profession.” Students are expected to obey local, state, and federal statutes. Students are expected to obey the College’s Code of Conduct. The Department of Allied Health determines the following conduct, if proven by preponderance of evidence, constitutes misconduct and is subject to disciplinary action of either suspension or dismissal from the program:

1. All forms of dishonesty, including cheating, plagiarism, knowingly furnishing false information, forgery, and alteration of documents or misidentification with the intent to defraud.
2. Providing false or incorrect information on the physical exam form.
3. Knowingly falsifying an application.
4. Knowingly providing false information regarding completion of educational programs.
5. Knowingly making or filing false reports.
6. Failing to disclose felony or misdemeanor.
7. Failure to disclose treatment for alcohol/substance abuse.
8. Withholding information of any of the above criteria.

Behavior Conduct:

While in the Surgical Technology Program, students are expected to conduct themselves in such a manner to reflect favorably on him/herself and the Surgical Technology Program. Students exhibiting inappropriate conduct will be reprimanded either verbally or written for the first offense depending on the situation. If a student should continue inappropriate conduct after a written reprimand, that student may be dismissed from the ST program.

Examples of inappropriate conduct consist of but are not limited to the following:

1. Disrespectful toward a Surgical Technology instructor
2. Being uncooperative.
3. Being unprepared for lectures, student labs, or clinicals.
4. Being disruptive in lectures, student labs or clinicals.
5. Not paying attention to Surgical Technology instructors.
6. Not notifying instructors/clinical instructors of absences.
7. Making inappropriate comments of a sexual nature in lectures, student labs, or clinicals.
8. Not being able to accept professional/instructional criticism well.
9. All forms of dishonesty.

Examples of Cheating Behavior (This list is not totally inclusive)

1. Eyes directed toward another student's paper.
2. Unauthorized use of resources.
3. Supplying information regarding an exam/quiz to other students.
4. Unauthorized obtainment of an exam or quiz.
5. Changing answers after an exam/quiz is graded.
6. Plagiarism – claiming someone else's work as your own.
7. Crib notes or signaling.

Faculty recognize the effects of and the use of Artificial intelligence (AI) in today's technologically savvy environment. Students are not to utilize or turn in work retrieved with the AI. Failure of the course can result.

If a student is observed exhibiting any cheating behavior, the faculty member making the observation is to document what is observed at that time. If a student is taking an exam, they will be allowed to finish the exam. The faculty member who documents the behavior will meet with the student within two (2) working days to discuss what has been observed. For a first offense, the student may be dismissed from the Surgical Technology program or advised not to repeat the behavior and given a zero on the exam/quiz/assignment. This will be rendered at the discretion of the Surgical Technology Program Director. If the student is not satisfied with the outcome, they may proceed with the Student Grievance Policy in the College Handbook.

A second offense would constitute immediate dismissal from the ST program.

GRADING POLICY

Lecture:

Each course syllabus describes the lecture evaluation criteria and grading scale.

If a student misses an exam, the instructor must be notified before the absence occurs. The student is responsible for contacting the instructor within 24 hours to arrange for a make-up exam.

Make-up exams will be arranged at the instructor's discretion. An alternate form of an exam may be given. The student's grade will be reduced by 10% of the total points possible for the missed exam. Failure to comply with these rules concerning the make-up of exams will result in a "Zero" for the exam.

Laboratory/Clinical:

Clinical evaluation has specific behavior/categories for each course. Critical categories are designated by an asterisk (*). The critical categories must be consistently achieved daily, or the student will be unsatisfactory for that clinical day regardless of the grade in any other category. Also, abandonment of clients will result in immediate dismissal of the program.

The student will be evaluated at the minimum of midterm and final. However, the instructor may initiate an evaluation anytime during the semester if failure of the course is the appropriate action. For example, if the student jeopardizes patient safety or exceeds the maximum absences allowed or remediation does not correct a weakness.

The student is provided feedback on performances as needed each clinical day and may be directed to perform remediation for an identified weakness at any time prior to midterm or final evaluation at the discretion of the instructor.

Final Grades:

Refer to each course syllabus for the grading scale.

Grade Information:

The Surgical Technology Department does not post grades. Also, no grades will be given out to the student on the telephone. Grades are given to the student in person, in the classroom, or emailed to the student's Southern email in a confidential manner.

Student File:

The Surgical Technology Director maintains a student file on each Surgical Technology student. Upon request, the student can review their file at any reasonable time. The file cannot be removed from the Directors office.

Travel and Schedules:

Clinical experiences are held in a variety of healthcare agencies. Although clinicals have historically been held during the day, other time frames may be required when necessary. Lab

Students are totally responsible for transportation to and from the college and health care agencies utilized for classroom and clinical experiences.

Attendance Policies:

One hundred percent attendance is expected. Excessive absences may result in a student's ability to complete the course successfully. Three consecutive days (three lectures, three labs, three clinics, or any combination of the three) are considered excessive. After three non-consecutive absences, students may receive a written warning, which will be placed in the student's file, and if the behavior continues, this may result in the student's failure of the course. These situations will be handled at the Surgical Technology Director's discretion.

Surgical Technology students are expected to arrange doctor, dentist, and other appointments so that they do not interfere with Surgical Technology lectures, labs, and clinical. Allowances are made for emergencies and special situations.

Association of Surgical Technologists (AST):

All surgical technology students are eligible for membership in the AST. Students are encouraged to join the AST and encouraged to become involved at the local, state, and national levels.

Class officers are elected as representatives of their class. They are elected by the class to promote class spirit in achieving the goals of the college and the surgical technology department.

Surgical Technology Advisory Board:

A committee comprised of health care professionals, current and former students, the public and college faculty compose the Surgical Technology Advisory Board Committee. The committee meets once per year to review and help plan the progress of the ST program. The college faculty meets several times a year with the facility professionals for input and suggestions to improve the Surgical Technology program.

UNIFORM CODE

Surgical Technology students are in pre-professional training, and their appearance reflects that professionalism. At all times, students will be expected to be well-groomed, clean, and neat.

Students who do not adhere to the uniform code and professional appearance will be warned once. Further interactions will be grounds for dismissal from the clinical site, receiving an unsatisfactory for the day.

1. Each student must own at least one pair of proper, clean scrubs (shirt and pants) with the school's logo.
2. The students are required to have a Southern ID badge.
3. Each student must own an appropriate pair of shoes to be used for the operating room only. It is recommended that white leather shoes with good arch support of an athletic cut and some markings are acceptable. Clogs are also acceptable (check with the instructor before buying).
4. Classroom: Students are to wear appropriate street clothes. Shirts with inappropriate language, symbols, and/or picture(s) will be dismissed from the classroom.
5. Lab/Clinical Rotation: Wear scrubs and a lab coat with a name tag and change into appropriate scrub attire. No blue jeans are to be worn to a facility at any time.
6. Protective eye-ware must be worn on all surgical procedures.
7. Fingernails should be short, well-groomed, unpolished, and have no artificial nails.
8. No jewelry (including body piercing) or rings are permitted in the OR.
9. Hair should be secured in a manner that prohibits beyond surgical hair cover.
10. Students are not permitted to wear false eyelashes in the clinical setting.
11. Beards and mustaches are permitted if kept clean, neatly trimmed, and well-groomed at all times. Facial hair must also be covered.
12. No heavy make-up is permitted.
13. Good personal hygiene is mandatory for the surgical technologist.
14. Perfumes, colognes, after shave, and/or heavily scented soaps/lotions may not be worn in the clinical setting.
15. No tattoos should be visible; if so, they must be covered. (New tattoos are discouraged while in the Surgical Technology program).

Individual instructors reserve the right to send a student home from the lab if these guidelines are not met. Students will receive an unsatisfactory for the day if sent home.

The student must obey the facility's policies and the school's policies. If a student violates the policies of a clinical facility, it may result in disciplinary action and/or dismissal from the program.

AFFILIATING AGENCIES

The following facilities are presently utilized by the Surgical Technology Department at Southern West Virginia Community and Technical College for clinical experiences and are subject to change.

Logan Regional Medical Center (LRMC)
Logan, WV

Charleston Area Medical Center CAMC
Women's and Children's
Charleston, WV

Saint Francis Hospital WVU Medicine
Charleston, WV

Thomas Hospital's WVU Medicine
South Charleston, WV

CAMC General Division
Charleston, WV

Tug Valley ARH Regional Medical Center
South Williamson, KY

Raleigh General Hospital
Beckley, WV

Pikeville Medical Center
Pikeville, KY

ACCREDITATION

Southern's Surgical Technology Program is accredited by the **Commission on Accreditation of Allied Health Education Programs (CAAHEP)**.

The **Association of Surgical Technologists (AST)** provides the "Core Curriculum for Surgical Technology", which provides the guidelines for ST education.

The **National Board of Surgical Technology and Surgical Assisting (NBSTSA)** is responsible for certification.

ESTIMATED EXPENSES OF THE SURGICAL TECHNOLOGY PROGRAM

Tuition (Resident \$244 per credit hour)	\$ 14,640.00
(Non-resident \$348 per credit hour)	\$ 20,880.00
Course Related Fees (added to tuition)	
Technology Fee (added into tuition)	
Health/Wellness Fee (Per semester \$10.00 x 4)	\$40.00
Books (\$24 per credit hour added above)	
Shoes	50.00
Uniforms/ Lab Jacket	145.00
Drug and Background Check	150.00
Self-Assessment Exam (SAE)	50.00
Graduation Fee	50.00
Physical Exam (Approximately)	150.00
Immunizations (Approximately)	150.00
Certification Exam (AST Member)	190.00
(AST Non-member)	290.00
Surgical Technology Pin (Graduation)	15.00
AST Membership (\$45.00)	45.00
Board Vitals	85.00
Trajecsys	205.50
Tentative Total Cost (Resident)	\$ 16,255.50
Tentative Total Cost (Non-resident)	\$ 22,495.50

All costs of the program as listed above or others that may be incurred during the program, such as travel, motel rooms, conventions, etc. are the sole responsibility of the student. The costs are approximate only.

OCCUPATIONAL EXPOSURE/RISK STATEMENT

FOR ALL ALLIED HEALTH PROGRAMS

Applicants considering a career in an Allied Health Program should be aware that during their course of study and in subsequent employment in the field, they are likely to work in situations where exposure to infectious disease will occur. This is an occupational risk for all healthcare workers. Persons should not become healthcare workers unless they recognize and accept this risk. Proper education and strict adherence to well-established infection-control guidelines can reduce the risk. Thorough education in infection control procedures is an important part of each program of study.

BACKGROUND & DRUG SCREENING PROCEDURE

All students have been contingently admitted to an allied health or nursing program until all information/documentation is received on or before a date designated by the program. Failure to provide all requested information and to disclose prior felony, misdemeanor, and/or pending criminal charges will result in immediate dismissal from a program.

BACKGROUND CHECK

Students must satisfactorily complete a background check and drug screen prior to entry into an allied health or nursing program and at any other time as requested by the faculty, directors, or division head. If a student has been convicted of a **FELONY, MISDEMEANOR** or has **PENDING** criminal charges, a student may be excluded from admission to a program, may not be allowed to attend clinical rotations held at affiliating healthcare agencies, and/or may be prevented from taking the required Certification/Licensure Examination. Entry into a health care agency is the sole determination of the clinical facility. Certification/Licensing Boards may prohibit students from taking national examinations based on the student's physical status, emotional condition, results of a background check and/or drug screen.

It is the student's responsibility to inform the Program Director prior to entering the program or **IMMEDIATELY** after an incident occurs of any felony, misdemeanor, or pending criminal charges/conviction. Any falsification or omission of information may result in disciplinary action, including, but not limited to, dismissal from a program. Pending felony and/or misdemeanor charges or convictions that occur while in a program must be reported immediately to the Program Director.

DRUG TESTING/SCREEN

Drug Screening Upon Admission

Southern West Virginia Community and Technical College, Division of Healthcare and Business, Programs of Allied Health and Nursing are committed to safeguarding the health and safety of students, faculty, staff, administration, community members, and patients/clients while maintaining a drug-free educational/workplace environment. In order to uphold the highest standard of care, the Programs of Allied Health and Nursing will conduct a drug screen test for all students tentatively admitted to any allied health or nursing program.

The alcohol and drug test must occur at the date and time specified by the Program Director or division head and at a location determined by Quality Drug Testing. The type of specimen is at the discretion of the program. Students contingently admitted are **REQUIRED to consult with their attending physician/healthcare provider** in order to determine whether any/all prescribed medication(s) may affect program technical standards. The student who is contingently admitted to a program **MUST** disclose a list of medications prior to testing. Validation of prescriptions must be supplied promptly upon request to the appropriate individuals.

The cost of any and all expenses associated with the drug testing and/or evaluation is the responsibility of the student. It is the student's responsibility to determine from the physician whether prescribed medications may affect program performance and to disclose a list of

medications prior to drug screening. Many prescription drugs alter mental status and may impair the student's ability to perform in the classroom or clinical setting. Impairment in the classroom or clinical setting is not permissible, regardless of the source. Any attempt to alter the drug test, attempt to prevent collection (example but not limited to shaving hair), any positive or diluted test results or failure to follow the proper procedure, failure to have the test performed on the date by the approved company, or refusal of a drug screen will result in withdrawing the selection of the student to the Allied Health or Nursing programs by the respective department. Any future reapplication to an Allied Health or Nursing program may not be considered due to the facility's requirements. A student that is unable to enter a facility for clinicals will not be able to complete the program. Appropriate accreditation/program approval agencies may be notified of the results.

Any positive or diluted results may be challenged by the student. Upon notification of the test results, the student must immediately contact the testing company to request retesting by hair or blood specimen as deemed appropriate by the testing company. Cost is the responsibility of the student. The student may be reinstated into the program if the results of the challenge are in the student's favor.

Disclaimer

A student tentatively admitted to an allied health or nursing program has the right to refuse a drug test. However, refusal to have the drug test and/or failure to follow the procedure/directions prescribed by the Programs of Allied Health and Nursing will result in withdrawing the student's tentative admission and dismissal from a program.

DRUG SCREENING AFTER PROGRAM ENROLLMENT

Enrollment is defined as a student attending the first day of class in an Allied Health or Nursing Program. A random drug test of any student, any group of students or an entire class or program may occur at any time and on more than one occasion. Alcohol and drug testing will be by urine sample, breath analyzer, by hair, and/or blood sample at the discretion of the department/program. The date, time, and company to conduct the drug test are selected by the Programs of Allied Health and Nursing. The cost is the responsibility of the student.

While enrolled in a program, a random drug/chemical screen(s) may be requested. At any time, failure to comply with a request for a drug screen and/or a positive drug screen will result in **IMMEDIATE** dismissal from a program. Further, a student who demonstrates questionable behavior (classroom, laboratory, or clinical setting) or indicates that alcohol or drugs have been consumed will be requested to submit to a drug test. Failure to comply with the request immediately will result in dismissal from a program. The cost is the responsibility of the student. Any future reapplication to an Allied Health or Nursing program may not be considered due to the facility requirements.

Signs and symptoms of alcohol and/or drug use may include but are not limited to any one or more of the following example behaviors: euphoria, altered judgment, impaired motor coordination, inability to concentrate, memory loss, tremors, confusion, anxiety, delusions, agitation, disorientation, diaphoresis, convulsions, slurred speech, emotional instability,

delirium, hallucinations, depression, paranoia, hostility, change in appearance or grooming, hyper-reflexia, lethargy, flushed face, tardiness, absenteeism, dilated/pinpoint pupils, odor of alcohol, mood swings, missed deadlines, careless mistakes, and dozing/sleeping.

Drug/Chemical Dependency

If a student has received or is currently receiving treatment for drug/chemical dependency, please have a copy of the discharge summary/ treatment plan printed on the facility letterhead and sent directly to the Program Director. A statement from the student's physician/healthcare provider **MUST** accompany the letter. The student **MUST** also submit a letter detailing their progress in recovery. Additional documentation regarding drug/chemical dependency and treatment may be requested at any time.

It is the responsibility of the student who is contingently admitted or currently enrolled in a program to read, understand, ask questions, and abide by all requests from a faculty member, program director, or division head at all times. Failure to do so will result in immediate dismissal from the program and/or college.

Division of Allied Health and Nursing

I acknowledge I have received a copy of the Background Check and Drug Screening procedures required by the Department of Allied Health and Nursing Programs. Failure to comply with one or all of the items outlined in the document may result in immediate dismissal from an allied health/nursing program.

Student

Printed Name:	
Signature:	Date:

Program Director or/ Program Faculty

Signature:	Date:
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NEEDLE STICK POLICY

Policy:

All persons participating in teaching and learning in the nursing laboratory settings may acquire a needle stick and must comply with the following guidelines.

Purpose:

To prevent trauma and infection with a break in the skin barrier. Follow the appropriate protocol for needle sticks.

Scope:

1. Needle used in the laboratory setting comes sterilized and pre-packaged from the ordering companies.
2. Students are instructed that any practice done with using needles is not to be done on individuals.
3. Teaching aides are provided to the students with instruction on the use of the teaching models.
4. Disposal of needles/sharps:
 - a. Do not reuse needles;
 - b. Dispose only in sharps container; and
 - c. Never leave needles lying open.

Responsibility:

- Report the needle stick to the laboratory instructor and/or lab manager.
- Students will see and inform the program director/fill out the "Blood and Fluid Exposure Report."
- Director will discuss and document with the student what occurred.
- Treatment will be encouraged to the student (i.e., cleanse with alcohol and apply and bandage with antibiotic ointment).
- If the stick occurred with a needle/sharp that did not come directly from a sterile package, the student should immediately seek health care from their physician/clinical or emergency room.
- The cost of any treatment is the responsibility of the student.

HAZARDOUS EXPOSURE POLICY

Policy:

All persons participating in teaching and learning in the surgical technology program in laboratory settings may be exposed to hazardous waste and must comply with OSHA universal precautions.

Purpose:

- * To outline a regimen for safety in laboratory settings with hazardous materials.
- * Adhere to OSHA guidelines and standards.

Scope:

This policy is designed to cover all that may have exposure to hazardous materials in the laboratory setting at Southern.

Responsibilities:

Student/Faculty

- * Wash exposed area
- * Cleanse open wounds or puncture wounds with 70% alcohol
- * Record the necessary information
- * Provide information to the Program Director

BLOOD AND BODY FLUID EXPOSURE POLICY

Policy: All persons participating in teaching and learning in allied health laboratory settings may acquire a needle stick, sharp injury, and/or skin or mucous membrane exposure to blood or body fluid must comply with the following guidelines.

Scope: Pertains to all students and faculty.

Purpose: To prevent trauma and infection with a break in the skin barrier. Follow the appropriate protocol for blood or body fluid exposure.

Responsibility: General Information

- 1) Students will always follow OSHA Universal Precautions guidelines in the laboratory and clinical settings.
- 2) Students are instructed that any practice using needles **is not** to be done on individuals without **direct instructor supervision**.
- 3) Teaching aides/models are provided to the students.
- 4) Disposal of needles/sharps:
 - a. Do not reuse needles/sharps
 - b. Dispose only in sharps container
 - c. Never leave needles lying open
 - d. Never recap a needle

If exposure to blood or body fluids occurs, the steps to be taken are:

- 1) Report the needle stick, sharp injury, or bloody or body fluid exposure to the instructor, clinical instructor, or laboratory manager immediately.
- 2) Students will see and inform the Program Director as soon as possible.
- 3) The director will discuss the document with the student on the appropriate form and what occurred.
- 4) If a needle stick, sharp injury, or other type of blood or body fluid exposure occurs:
 - a)** The student will **immediately** wash the wound/exposed area (except eyes/mucous membranes and eyes) with 70% isopropyl alcohol or a minimum of 10% bleach solution.
 - b)** Apply bandage with antibiotic ointment (except mucous membranes and eyes) when appropriate.
 - c)** flush the area immediately with water or normal saline for mucous membrane exposure.
 - d)** **The student is to immediately seek health care from their physician/clinical or emergency room and follow the recommended protocol for treatment.**
 - e)** The cost of any treatment is the responsibility of the student.
 - f)** Students must inform the Program Director/ fill out the "Blood and Fluid Exposure Report."

SURGICAL TECHNOLOGY PROGRAM POLICY

TREATING AND REPORTING INJURY OR EXPOSURE TO TRANSMITTED DISEASES

In the event that a student is injured or exposed to a transmitted disease while in a clinical education setting, the student must notify the clinical instructor and supervisor of the department. Appropriate incident forms must be filed and will remain confidential. If treatment is needed, the student will report to the emergency room or infection control. The student is responsible for any cost incurred.

Filing procedure:

- i. Notify the clinical instructor or supervisor of the department.
- ii. Report to the emergency room for infection control.
- iii. Follow facility protocol for treatment.
- iv. Assist in the documentation of incidents.
- v. Notify surgical technology faculty-clinical coordination and/or coordinator.
- vi. The clinical coordinator will document the incident and place a copy in the student's file.
- vii. Students are expected to use their personal insurance as primary coverage when health care is needed.
- viii. An incident report may be filed at the college on a case-by-case basis.
- ix. For infectious disease exposure, the infection control nurse/department will be notified. Protocol for treatment will be followed, and the facility may cover some treatment costs.
- x. The student must be released from the emergency room or infection control, with a written statement, and return to the clinic or class.
- xi. Follow-up with a family physician is strongly suggested.

LATEX SENSITIVITY/ALLERGY POLICY

Policy: All persons will be identified with a history of allergies. Those persons with known sensitivity to latex shall be treated as if they have a known allergy.

Purpose: To identify persons with latex sensitivity/allergy and to provide a safe environment while providing health care and surgical demonstration and practice.

Scope: Pertains to all students and faculty.

Responsibility:

- Students are responsible for providing accurate allergy history.
- Screen all persons for latex allergy. Provide persons with non-latex gloves.

Definitions:

- Latex - the natural sap of the rubber tree (*Hevea Brasiliensis*). It is used to make natural rubber which is used in the production of many products.
- Irritant Dermatitis - A dermatitis caused by chemical irritation that does not involve the immune system.
- Type IV Dermatitis - A chemical contact dermatitis caused by the chemical used in latex production but involving the immune system.
- Type I Systemic Reactions - true allergic reactions caused by protein antibodies in the latex. Type I causes serious and potentially lethal reactions. Symptoms include: Anaphylaxis, dermatitis, erythema, hives, pruritus, swelling, eye/nasal itching, sneezing, coughing, laryngeal swelling, wheezing, asthma, or cardiovascular collapse.

Procedure:

Considerations: Clinical findings may depend on the sensitivity of the patient, the route of administration, and the quantity of the antigen. There are three types of reaction: Irritant Dermatitis, Type IV Dermatitis, and Type I Systemic Reactions (see Definitions).

- a. The student will identify any allergies on their medical history.
- b. Any person who has a known or suspected latex allergy will then be further screened by asking specific questions such as:
 - Have you had a reaction to personal sources of latex? For instance, balloons, rubber gloves, hot water bottles, rubber bands, foam pillows, baby bottle

nipples, shoe wear, erasers, etc.

- After handling latex products, have you experienced breathing problems, swelling, hives, redness, chapping/cracking hands, runny nose, congestion, and itching?
 - Do you have any food allergies? If so, are you allergic to any of the following? Bananas, avocados, potatoes, tomatoes, kiwis, chestnuts, peaches, papaya.
 - Have you ever been told by a doctor that you have an allergy to any latex products?
 - Have you ever had an anaphylactic reaction to latex devices?
 - Do you have any congenital anomalies? (Neural tube defects such as Spina Bifida)
 - Have you had previous surgeries, or extensive dental work, or does your occupation involve frequent contact with products containing latex?
- c. The staff will then proceed to use latex precautions with the patient.

Keynotes:

Persons at risk for developing latex allergies:

- Those with a history of repeated surgical procedures.
- Those with a history of asthma, drug, and food allergies (many of the proteins that cause latex allergy are also found in fruit, vegetables, nuts, and cereals).
- Those with repeated latex exposure may develop latex allergies from repeated exposure to latex products that are used in their work.

Latex precautions should be used for persons at high risk for an allergic reaction to latex.

This population includes patients with:

- Neural tube defects (myelomeningocele, lipomyelomeningocele, spina bifida).
- Congenital urologic disorder.
- A history of systemic symptoms from contact with latex products (e.g., balloons, gloves).
- A positive latex allergy test.

Social Media Policy

Social Media are powerful communication tools that have a significant impact on organizational and professional reputations. Because the lines are blurred between personal voice and institutional voice, Southern West Virginia Community and Technical College's Department of Allied Health has created a policy to help clarify how to enhance and protect personal and professional reputations when participating in social media.

Social media are defined as media designed to be disseminated through social interaction created by highly accessible and scalable publishing techniques. Examples include but are not limited to LinkedIn, Twitter, Facebook, Instagram, SnapChat, YouTube, TikTok, and My Space,

Both in professional and institutional roles, employees, staff, and students need to follow the same behavioral standards online as they would in real life. The same laws, professional expectations, and guidelines for interacting apply online as in the real world. Employees, staff, and students are liable for anything they post to social media sites and may be subject to litigation.

Policies for All Social Media Sites, Including Personal Sites

- Protect confidential and proprietary information: Do not post ANY confidential, disrespectful, or unprofessional information about Southern, clinical affiliates, clients/patients, faculty, staff, or students. You must still follow federal requirements such as FERPA, HIPAA, NCAA, etc. Adhere to all applicable privacy and confidentiality policies. Any confidentiality violation is at the risk of disciplinary action or dismissal from your respective program. Also subject to discipline from respective licensure Boards. You can be held liable for any postings and may be subject to litigation.
- Do not post any content that might put Southern, the program, or clinical agencies in a bad light or incite litigation.
- Respect copyright and fair use.
- Do not use Southern logos for endorsement.
- Respect College property.
- Do not utilize or access social media platforms during clinical hours. Do not utilize cell phones during clinical hours.

Best Practices

- Think twice before posting.
- Once you post, you relinquish control of its proliferation forever.
- Be respectful
- Remember who the audience is.

Description of First and Second Scrub Role and Observation for Surgical Technology Program

FIRST SCRUB ROLE (FS)

To document a case in the FS role, the student surgical technologist shall perform the following duties during any given surgical procedure with proficiency.

- Verify supplies and equipment needed for the surgical procedure.
- Set up the sterile field with instruments,
 1. Instruments
 2. Medication
 3. Supplies
- Perform required operative counts
 1. AST Guidelines
 2. Facility Policy
- Pass Instruments and Supplies
 1. Anticipate needs
- Maintain Sterile Technique
 1. Recognize sterility breaks
 2. Correct sterility breaks
 3. Document as needed

SECOND SCRUB ROLE (SS)

The second scrub role (SS) is defined as the student who has not met all criteria for the first scrub (FS) role but actively participated in the surgical procedure in its entirety by completing any of the following:

1. Assisting with diagnostic endoscopy
2. Assistance with vaginal delivery
3. Cutting suture
4. Providing camera assistance
5. Retracting
6. Sponging
7. Suctioning

OBSERVATION ROLE (O)

The observation (O) role is defined as the student who has not met the criteria for the first (FS) or second scrub (SS) role criteria. The student is observing a case in either the sterile or nonsterile role. Observation cases cannot be applied to the required 120 case count but must be documented by the program.

ASSISTANT CIRCULATOR ROLE

The circulating assist role is defined as the student performing roles such as operating room preparation, how to monitor vital signs, urinary catheterization, patient transport to the operating room, patient transfer to the surgical table, how to apply and connecting accessory devices, patient positioning, surgical skin prep, and patient transfer from the surgical table to the stretcher. The student actively participates by completing any of the following:

- 1) Preoperative
 - A. Room preparation
 1. Positioning furniture
 2. Positioning equipment
 3. Opening sterile supplies
 - B. Physical Preparation of the Patient
 1. Vital Signs
 - a. Blood Pressure
 - b. Pulse
 - c. Respirations
 - d. Temperature
 2. Urinary Catheterization
 - a. Open gloving
 3. Patient transport
 4. Patient transfer
 - C. Positioning
 1. Lateral
 2. Prone
 - a) Kraske
 3. Supine
 - a. Lithotomy
 - b. Fowlers
 - c. Trendelenburg
 1. Reverse
 - D. Application of accessory devices
 1. Electrosurgery
 - a. Applying grounding pad
 - b. Connecting active electrode
 2. Pneumatic tourniquet cuff
 - a. Applying tourniquet cuff
 3. Sequential compression devices (SCD)
 - a. Applying SCD'
 4. Suction
 - a. Connecting tubing
 - E. Medication and irrigation (S)
 1. Verifying
 2. Pouring
 3. Delivering to the sterile field

- F. Initial surgical count
 - G. Skin preparation
 - 1. Opening Gloving
 - a. Abdomen
 - b. Extremity
 - c. Perineal and vaginal
 - H. Assisting with gowning and gloving
- II. Intraoperative
- a. Closing surgical counts
 - b. Specimen Care
 - 1. Verifying
 - 2. Collecting from field
 - 3. Labeling
- III. Postoperative
- a. Securing
 - 1. Dressing
 - 2. Drains
 - b. Patient transfer
 - c. Patient transport
 - d. Disinfecting the surgical environment

Effective Date: 9/16/2008
Revision Date: 8/1/2022
Seventh Edition Core Curr.

Student Clinical Experience Records

Students are responsible for maintaining clinical experience records. Clinical experience records document students' case experiences in the clinical area. All clinical experience records will be maintained on the student's Trajecsys reporting system.

The program director and/or clinical instructor will review the experience records periodically to verify clinical progress. The PD must sign the comprehensive case log to validate the documentation.

Description of Surgical Rotation Case Requirements According to AST Core Curriculum for Surgical Technology (Seventh Edition)

II. Case Requirements: Students must complete a minimum of 120 cases as delineated below.

A. General Surgery

1. A student must complete a minimum of 30 cases in General Surgery
 - a. 20 of these cases must be performed in the FS role.
 - b. The remaining 10 cases may be performed in either the FS or SS role.

B. Specialty Surgery

1. A student must complete a minimum of 90 cases in various surgical specialties, excluding General Surgery;
 - a. A minimum of 60 cases must be performed in the First Scrub Role and distributed amongst a minimum of four surgical specialties.
 1. The 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 cases may be performed in any surgical specialty in either FS or SS role.
2. Surgical Specialties (excluding General Surgery)
 - a. Cardiothoracic
 - b. Genitourinary
 - c. Neurologic
 - d. Obstetrics and Gynecologic
 - e. Orthopedic
 - f. Otorhinolaryngologic
 - g. Ophthalmologic
 - h. Oral Maxillofacial

- i. Peripheral Vascular
- j. Plastic and Reconstructive
- k. Procurement and transplant

III. Counting cases

- A. Cases may be counted according to surgical specialty as defined in the core curriculum.
 - 1. One pathology is counted as one procedure.
 - 2. If a case requires a general surgery case and a fracture, that can be counted as two cases.
 - 3. Diagnostic Vs. Operative endoscopy cases
 - a. An endoscopy is classified as a semi-critical procedure is considered a diagnostic case.
 - b. An endoscopy classified as a critical procedure is considered an operative case.
 - c. Diagnostic and operative cases will be counted according to specialty.
 - d. Diagnostic cases are counted in the SS role up to a total of ten of the required 120 cases.
- B. Vaginal delivery cases are counted in the SS role of the OB/GYN specialty, up to a total of five of the required 120 cases.

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 and he/she moves towards entry-level graduate competency.

- 1. Observation cases cannot be applied to the required 120 cases count but must be documented.

Completion of student clinical experience records is mandatory.

Any student found falsifying information on the clinical experience records will be terminated from the program.

(The above information was obtained from the 2022 "The Core Curriculum Seventh Edition")

08/01/2022

Code of Conduct for Surgical Technology Program

The Surgical Technology Program has a code of conduct for the learning environment (class, clinical, and any other site). Students are expected to respect the rights and welfare of all members of the college community and to exercise common sense, good taste, and applied reason in all learning situations.

The instructor has responsibility for course content, grading practices, classroom procedures, and insisting on adherence to a code of conduct. Maintaining order preserves the integrity of the learning environment. If the instructor feels that the behavior of a student is disturbing, interfering with instruction, offensive, or otherwise inappropriate, the student may be dismissed from the learning environment for that class period. Further action may be taken if indicated by the seriousness of the behavior, including, **but not limited to**, dismissal from the program.

Therefore, students are expected to adhere to the following guidelines:

1. Do not hold conversations in class while the instructor or another person is speaking.
2. Do not participate in distractive behavior such as, **but not limited to**, leaving the room after class has begun, making distractive noise, passing notes, etc. When in the Virtual classroom, students must mute their mics and use the raise hand button to ask the instructor questions.
3. Arrive on time, attend regularly, and stay until the class is dismissed. Students are not permitted to enter class once it is in session unless the consent of the instructor has been given.
4. Be punctual in returning from breaks.
5.
 - a. All cell phones, pagers, and other electronic devices are not prohibited during class and clinical.
 - b. Only the instructor or the Surgical Technologist Director may give permission for the appropriate use of electronic devices in the clinical/classroom setting. Prior approval is required before using devices.
 - c. Inappropriate use of the electronic device is never acceptable regardless if permission was given for the device to be used in clinical or class.
 - d. Patients and visitors are never to be photographed or recorded in any way.
6. Children may not attend class, clinical, or any learning event.
7. Sleeping/lack of attention in class or clinical is not permissible.

8. Students are to conduct themselves in a professional manner while participating in the learning environments of class, clinical, and campus laboratories. Respect for the instructor and fellow students is to be demonstrated at all times through behavior, language, tone, and attitude.
9. Offensive or inappropriate language, behavior, tone, or attitude will not be tolerated. Expect disciplinary action that could include, but is not limited to, dismissal from the classroom for that class period. Further action may be taken if indicated by the seriousness of the behavior, including, but not limited to, dismissal from the program.

August 2008

Surgical Technology Program Sequence

60 Credit Hours

Fall - First Semester		
AH 108 (E)	Medical Terminology	2
BS 124	~Human Anatomy & Physiology I	4
MT 121 or Higher	~College Mathematics for General Education	3
SG 100	Introductory Surgical Technology	3
SG 101	Surgical Technology Skills	4
	Fall Semester Total	16
Spring - Second Semester		
BS 125	~Human Anatomy & Physiology II	4
EN 101 or EN 101A	~English Composition I	3
SG 120	Surgical Technology I	7
	Spring Semester Total	14
Fall - Third Semester		
AH 200 (E)	Health Care Ethics/Law	1
PY 218	~Life-Span Development Psychology	3
SG 210	Anesthetics, Drugs, & Solution	2
SG 220	Surgical Technology II	7
	Fall Semester Total	13
Spring - Fourth Semester		
BS 127	Microbiology for Healthcare Professionals	3
SG 230	Surgical Technology III	11
SG 235	Skills Seminar Review	3
	Spring Semester Total	17
	Total Program Hours	60
<p>~Designates courses on the statewide Core Coursework Transfer Agreement</p> <p>This degree program provides students the opportunity to receive credit for their high school EDGE courses http://careertech.k12.wv.us/edge/edgeCollege.html as designated by the (E) within the program sequence.</p>		

Influenza Policy

Policy:

Seasonal influenza vaccination is required for surgical technology students performing clinical training in hospitals during the influenza season. Clinical facilities may refuse the student entry into the hospital without the vaccination.

Each student receiving vaccination will provide documentation to both the instructor and facility before beginning the clinical rotation.

Purpose:

To provide a safe environment for both students and patients.

Hospitals must now report numbers for influenza immunization rates, declinations, and exemptions.

Scope:

Pertains to all students and faculty in the clinical setting.

Responsibility:

Students are responsible for obtaining influenza injections and providing documentation.

Faculty responsibility is to ensure the student received influenza injection and maintains a copy of the documentation in the student file. Also, provide the facilities with influenza rates, declinations, and exemptions.

Surgical Technologist Residency Program/Student Work Policy

Student Residency Program:

1. Are currently enrolled in a CAAHEP-accredited Surgical Technology program.
2. Have successfully completed and documented basic lab skills checkoffs and qualify for clinical rotations, based upon individual program requirements and Program Director approval; and
3. Are documented in good standing with their program (no disciplinary action in progress or failing grades).

Students must have passed their clinical lab final from the program to be eligible for the residency program. This final is typically in November.

The Surgical Technologist Residency Program capitalizes on paid student internships to help address the workforce shortage and benefit the student, healthcare facility, community, and surgical patient.

Student Work Policy:

A student employed while taking classes may not work a night shift before a scheduled clinical day.

Effective: November 2024

Job Shadowing Policy

Policy:

All students will complete eight (8) hours of job shadowing in an operating room approved by the program.

Purpose:

To allow the prospective surgical technology student the opportunity to observe in the clinical setting before final admission and to become aware of the day-to-day activities required as a surgical technologist in a surgical setting. At the end of the shadowing, the student will decide whether to pursue surgical technology.

Scope:

Pertains to all students entering the surgical technology program.

Process:

Upon tentative acceptance into the program, the student must shadow following these guidelines:

- Sign up for one job shadowing date and location
- Report on time and complete orientation and sessions as scheduled. This is the time you ask questions and decide if you want to continue in the program.
- Complete the shadowing form.
- Return the shadowing form to the Program Director.

Dress Code:

1. Casual business or casual slacks/pants (khaki's i.e.) and a blouse/shirt; no sleeveless; no shorts or capris.
2. No uniforms.
3. No flip-flops, no sandals. Only close-toed shoes.
4. No jewelry.
5. No cologne, perfume, or scented creams.
6. No visible facial piercings.
7. Visible tattoos must be covered.
8. Long hair needs to be put up.

New Policy 05/2015

Cell Phone Policy

Policy:

All persons participating in teaching and learning in the clinical hospital setting are prohibited from having or using a cell phone in the operating room.

Scope: Pertains to all students and faculty.

Purpose: To protect the patients' rights and follow the Health Insurance Portability and Accountability Act (HIPAA) which is a federal law and requires students and hospital staff to protect sensitive patient health information from being disclosed without the patient's consent or knowledge.

Responsibility: Students will clock in on Trajecsys in the hospital locker room, where their cell phones will remain. Cell phones are to not leave the changing area for no reason. If found in the student's possession during clinical hours, disciplinary actions will be taken.

Upon discovering the violation of the policy, the nature of the penalty shall be determined by the Director of the ST program. Such penalties may include, but are not limited to, an Unsatisfactory clinical for that day, or dismissal from the program and a grade of "F" in the course.