READING HOSPITAL
SCHOOL OF HEALTH SCIENCES

SURGICAL TECHNOLOGY
PROGRAM

STUDENT HANDBOOK

Accredited by:

Commission on Accreditation of Allied Health Education Programs (CAAHEP)
1361 Park St.
Clearwater, FL 33756
727-210-2350
www.caahep.org

Revised 6/2016
READING HOSPITAL SCHOOL OF HEALTH SCIENCES
SURGICAL TECHNOLOGY PROGRAM

STUDENT HANDBOOK
TABLE OF CONTENTS

SECTION I: INTRODUCTION
1. EDUCATIONAL STATEMENT
2. PROGRAM RULES, REGULATIONS, AND POLICIES
3. PROGRAM ACCREDITATION
4. MISSION STATEMENTS
   a. READING HOSPITAL
   b. READING HOSPITAL SCHOOL OF HEALTH SCIENCES
   c. SURGICAL TECHNOLOGY PROGRAM
5. PROGRAM OUTCOMES
6. STUDENT WORK POLICY
7. MALPRACTICE INSURANCE

SECTION II: PROFESSIONAL ETHICS
1. AST CODE OF ETHICS
2. PROFESSIONAL PERFORMANCE
3. DRESS POLICY
   a. CLASS ASSIGNMENTS
   b. CLINICAL ASSIGNMENTS

SECTION III: ATTENDANCE & HEALTH
1. HOLIDAYS
2. ACADEMIC BREAKS
3. MEALTIME BREAKS
4. ACADEMIC & CLINICAL ASSIGNMENT HOURS
5. GENERAL ATTENDANCE REQUIREMENTS
6. ESSENTIAL FUNCTIONS & STANDARDS FOR SURGICAL TECHNOLOGY
7. BLOODBORNE PATHOGEN EXPOSURE PROCEDURE
8. STUDENT PREGNANCY POLICY
   a. PROCEDURE FOR VOLUNTARY DISCLOSURE
   b. VOLUNTARY DISCLOSURE OF PREGNANCY FORM

SECTION IV: ACADEMIC POLICIES
1. COMPUTER LAB
2. CPR REQUIREMENTS
3. CORRELATION OF ACADEMIC & CLINICAL EDUCATION
4. GRADING
5. PROBATION

SECTION V: SKILL ASSESSMENTS
1. OR SKILLS LABORATORY
2. SKILL ASSESSMENTS
SECTION VI: WORKSHEETS
1. PATIENT CASE STUDY
2. GI LAB
3. LDRP

SECTION VII: CLINICAL EXPERIENCE DOCUMENTATION
1. COMPETENCIES
2. CLINICAL CASE LOG

The Reading Hospital School of Health Sciences Surgical Technology Program reserves the right to change the curriculum, educational policies, program requirements, fees, and calendar as considered necessary for the progressive development of the Surgical Technology Program.

Student Handbook Reviewed/Revised 7/01, 7/02, 6/03, 8/04, 7/05, 7/06, 7/07, 8/08, 7/09, 6/10, 7/13, 5/14, 6/15, 5/16
SECTION I: INTRODUCTION

1. EDUCATIONAL STATEMENT

Reading Hospital is committed to educational sponsorship, as evidenced by the numerous programs it makes available to the community. The faculty and staff accept the responsibility for the design of a curriculum that will enable the students to meet the stated learning goals and objectives of the program. By enrolling in the Surgical Technology Program, students agree to make the necessary commitment to achieve the educational foundation necessary to enter the profession of Surgical Technology. Through active participation in all scheduled classes and clinical assignments, the student will learn the skills necessary to provide health care to their community in a professional, compassionate, and responsible manner.

Reading Hospital School of Health Sciences Surgical Technology Program reserves the right to change the curriculum, educational policies, program requirements, fees, and academic calendar as considered necessary for the progressive development of the Surgical Technology Program.

2. PROGRAM RULES, REGULATIONS, AND POLICIES

The education of a Surgical Technologist comprises two distinct areas: technical and ethical. The technical portion deals with academic and clinical education, while the ethical instruction governs the student technologist's professional and personal conduct.
Student technologists have a personal investment in their education and must consider themselves part of a working team, the primary function of which is to provide for the welfare of the patient. The Surgical Technology Program, to provide a structured pathway to achieving excellence in health care, has formulated policies and guidelines for student use. By carefully reviewing these pages, the student will gain the information necessary to know what is expected of them during their surgical technology education. The student is also expected to review and follow the rules and policies of the School.

3. PROGRAM ACCREDITATION

RHSISH Surgical Technology Program is accredited by:

Commission on Accreditation of Allied Health Education Programs (CAAHEP)
25400 US Highway 19 N., Suite 158
Clearwater, FL 33763
727-210-2350
www.caahcep.org

upon the recommendation of Accreditation Review Council on Education in Surgical Technology and Surgical Assisting (ARC/STSA).
In order to be an accredited program, the Surgical Technology Program must adhere to The Standards and Guidelines for the Accreditation of Educational Programs in Surgical Technology set
forth by CAAHEP. These standards are developed to protect the student and the public by ensuring that a program is meeting its stated objectives. A copy of these standards may be reviewed by visiting the CAAHEP web site.

If a student believes the Program is not in compliance with the standards set forth by CAAHEP, the student may report the Program to CAAHEP via the CAAHEP web site.

4. MISSION STATEMENTS

READING HOSPITAL
MISSION STATEMENT
The mission of Reading Hospital is to provide compassionate, accessible, high quality, cost effective health care to the community; to promote health; to educate health care professionals; and to participate in appropriate clinical research.

Reading Hospital is a 501c3 corporation and operates without distinction to race, color, handicap, sex, national origin, or economic status.

READING HOSPITAL SCHOOL OF HEALTH SCIENCES
MISSION STATEMENT
The mission of Reading Hospital School of Health Sciences is to provide educational programs that develop competent and compassionate professionals capable of providing high-quality services to individuals, families and communities.

READING HOSPITAL SCHOOL OF HEALTH SCIENCES
SURGICAL TECHNOLOGY PROGRAM
MISSION STATEMENT
The mission of the Surgical Technology Program is to prepare entry-level surgical technologists in the cognitive, psychomotor, and affective domains. Graduates will meet the diverse needs of the communities they serve with competence and compassion through the application of ethical standards, inter-professional collaboration, and active professional engagement.
5. PROGRAM OUTCOMES

In support of this Mission, the Surgical Technology Program has established program outcomes that define the knowledge, skills, and behaviors that will be reflected by a graduate of the Program.

A graduate of Reading Hospital School of Health Sciences, Surgical Technology Program will:

1. Synthesize knowledge and skills essential to the successful practice of surgical technology.
   - Exhibit a thorough understanding of surgical technology fundamentals
   - Apply knowledge from physical, biological, and social sciences to provide quality healthcare to individuals
   - Integrate the ethical and legal standards pertinent to a surgical technologist

2. Utilize the problem solving process effectively.
   - Assess and analyze data for effective decision making
   - Select an appropriate course of action based on presenting circumstances
   - Evaluate effectiveness of action taken
   - Modify course of action as required

3. Practice competently as an entry-level Surgical Technologist.
   - Create a sterile field appropriate for the surgical procedure
   - Anticipate and respond to the needs of the surgical team
   - Demonstrate appropriate patient care
   - Collaborate effectively across inter-professional team lines

4. Communicate effectively with all communities of interest.
   - Instill comfort and a sense of confidence through clear, understandable communication
   - Transmit information to members of the healthcare team accurately and appropriately

5. Practice surgical technology ethically and compassionately.
   - Exhibit compassionate behavior during the care of all patients
   - Demonstrate empathy during the care of all patients
   - Employ the AST Practice Standards for Surgical Technology
   - Adhere to the AST Code of Ethics

6. Model ongoing professional growth and development.
   - Value the need for ongoing professional growth and development
   - Investigate a variety of professional growth opportunities
   - Design a five-year career pathway
6. STUDENT WORK POLICY

SUBJECT: Student Work Policy
Responsibility of Program Director
Revised: May 2014 Reviewed: July 2013

SCOPE:
Surgical Technology students

PURPOSE:
To ensure that all student activities, especially while students are completing clinical rotations, will be educational in nature.

POLICY:
The clinical practice is designed to be an educational experience for the student. Students, while attending the Surgical Technology Program, are not the employees of the clinical education centers of the School, nor are they paid or used to replace paid employees.

DEFINITIONS:

PROCEDURE:
1. Students will not receive remuneration from the clinical education center during their clinical practice.
2. Students will not be substituted for employees of the clinical education center.
3. Students who participate in full- or part-time employment are expected to meet the requirements of the Surgical Technology Program, as well as the Program’s scheduled activities.
4. Students are not guaranteed employment with Reading Hospital during their education or upon graduation.

7. MALPRACTICE INSURANCE

Professional liability coverage will be provided by Reading Hospital for each student at no cost to the student. The liability coverage is provided to the student only when the student is in the student role at Reading Hospital and its affiliates.
SECTION II: PROFESSIONAL ETHICS

1. Association of Surgical Technologists (AST)

The Association of Surgical Technologists is the professional organization for surgical technologists. Its primary goal is to ensure that surgical technologists have the knowledge and skills to provide the highest quality of care.

Surgical Technologist Code of Ethics

Students are required to conduct themselves in a manner deemed appropriate to represent the profession.

The Code of Ethics published by AST establishes guidelines of behavior expected of surgical technologists and students seeking entry into the profession.

1. To maintain the highest standards of professional conduct and patient care.
2. To hold in confidence, with respect to the patient's beliefs, all personal matters.
3. To respect and protect the patient's legal and moral rights to quality patient care.
4. To not knowingly cause injury or any injustice to those entrusted to our care.
5. To work with fellow technologists and other professional health groups to promote harmony and unity for better patient care.
6. To always follow the principles of asepsis.
7. To maintain a high degree of efficiency through continuing education.
8. To maintain and practice surgical technology willingly, with pride and dignity.
9. To report any unethical conduct or practice to the proper authority.
10. To adhere to the Code of Ethics at all times in relationship to all members of the health care team.
2. PROFESSIONAL PERFORMANCE:

Individuals aspiring to become involved in surgical technology must possess or develop characteristics that consistently denote professionalism. In addition to achieving the expected academic and clinical skills necessary to proficiently and safely practice surgical technology, the Surgical Technology Program at The Reading Hospital School of Health Sciences requires that students routinely exhibit behaviors indicative of a professional. Behaviors which denote professionalism include but are not limited to:

- Actively supporting the policies and procedures established for the good of patient care and the educational process.
- Addressing concerns directly, constructively and in a timely fashion.
- Seeking, accepting and acting upon constructive criticism in order to improve personal skills.
- Reliable and punctual attendance at scheduled classes and clinical assignments.
- Attentiveness and participation during academic courses.
- Active and accurate participation in all clinical assignments, consistent with current level of education.
- Respectful, courteous interactions with the public and all members of the healthcare team.
- Tailoring content and volume of conversations based on those within earshot.
- Demonstrating knowledge and practice of safety procedures.
- Maintaining a professional appearance as outlined in the dress policy.
- Identifying and acting upon ways to provide service above the expected level.
- Actively promoting Reading Hospital’s Culture of Excellence by consistently engaging in the highest quality possible of communication, courtesy, safety, and attitude.

3. DRESS POLICY

SUBJECT: Student Dress Code
Responsibility of Program Director
Revised: May 2016 Reviewed: July 2013

SCOPE:
Surgical Technology Students

PURPOSE:
To provide guidelines that will enable the surgical technology student to meet the expectation of maintaining a professional appearance.
POLICY:
Surgical Technology students are expected to maintain a professional appearance when reporting to all assignments. If a student is not compliant with these regulations they will be placed on probation and may be dismissed for the day; missed time will be recorded as an unexcused absence. Students in attire considered unprofessional and therefore unacceptable will not be permitted in the classroom or clinical environment.

DEFINITIONS:

PROCEDURE:
1. CLASS ASSIGNMENTS
Whether in the classroom, OR skills lab, hospital, cafeteria, or clinical setting, students enrolled in the Surgical Technology Program are expected to present a professional image and dress in a manner that reflects attention to safety, respect for self and others, and cleanliness. The Director or faculty will address infractions of the dress code on an individual basis.

- Student dress on campus should reflect the professional nature of the setting. School photo ID badge must be worn in accordance with School Policy # 385.

- Students are expected to dress sensibly and appropriately. Clothing that is disruptive, provocative or offensive in nature or focuses undue attention on the wearer should not be worn.

- Clothing or accessories with words or symbols that are obscene, profane, sexually explicit, or refer to drugs, alcohol, violence, or weapons or are otherwise improper are prohibited.

- Spaghetti strapped, tube, single shoulder, halter or bare midriff tops, short skirts and short shorts are not appropriate.

- Shoes must be worn at all times. For safety reasons, open toed and open heeled shoes are prohibited in the OR skills lab.

- All electronic devices must be placed on the silent setting and must be put away when in the classroom. Electronic devices are not permitted in the OR skills lab or clinical setting.

- Blue OR scrubs and proper OR attire will be worn for OR lab practice.

- The dress code above is a guide to promote the professional appearance of Surgical Technology Program students. Students are expected to comply with variations in interpretation and alterations in the dress code as requested by the faculty, Reading Hospital or the Hospital’s representatives.
2. **CLINICAL ASSIGNMENTS**

   **Proper OR attire including personal protective equipment will be worn.**
   - The *only* type of jewelry permitted is pierced earrings. Pierced earrings, if worn, should be conservative in style and number and must be covered by the OR cap.
   - Extreme jewelry or visible body piercing is not permitted.
   - Hair will be clean and natural appearing in color. Hair will be covered by the OR cap at all times.
   - Fingernails must be clean and well groomed. Extreme length, artificial nails, and nail polish are prohibited as all of these factors contribute to an increased infection rate.
   - Tattoos are not to be excessive or offensive.
   - Shoes must be clean, in good repair, and promote safety.
   - Perfumes and other strong smelling substances are not appropriate in the clinical setting.
   - The School photo ID is considered part of the student uniform and is to be worn at all times in accordance with School Policy # 385.
   - The Surgical Technology Program Handbook is considered part of the student uniform and must be brought to the OR Skills Lab and clinical unit.
   - Pagers, cellular phones, and other electronic devices are not permitted in the clinical setting.
   - Faculty will make the determination of appropriate attire in the clinical setting.
SECTION III: ATTENDANCE and HEALTH

1. HOLIDAYS

The School of Health Sciences observes the following holidays:
- Labor Day
- Columbus Day
- Thanksgiving Day
- New Year's Day
- Martin Luther King Jr. Day
- Memorial Day
- Independence Day

If other holidays are observed based upon religious beliefs, a written request for a schedule change may be made to the Program Director. Requests must be submitted within the first 30 days of the academic year.

2. ACADEMIC BREAKS

Scheduled academic breaks are identified on the School Academic Calendar.

3. MEALTIME BREAKS

   CLINICAL DAYS: Students will be assigned 35 minutes for lunch during the 8 hour school day. On clinical rotation days, student meal time will coincide with that of the clinical area of assignment and will be determined by the faculty or preceptor.

   CLASS DAYS: Lunch on class days will be taken as assigned on the schedule. Students are expected to promptly return to assignments following lunch.

   • Failure to adhere to these guidelines will result in the student being placed on probation.

4. ACADEMIC & CLINICAL ASSIGNMENT HOURS

ST course class days are generally 0900-1500.

Clinical days are generally 0700-1530 or 0730-1600, but may vary depending on the clinical specialty to which the student is assigned.
Surgical Technology Program  
Curriculum Plan 2016 - 2017

<table>
<thead>
<tr>
<th>Term</th>
<th>Course</th>
<th>Credit</th>
<th>Theory/Lab</th>
<th>Clinical Experience</th>
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<td>Fall (16 weeks)</td>
<td>*Fund of ST</td>
<td>143</td>
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<tr>
<td>August/December</td>
<td>*Intro Pt. Care</td>
<td>56</td>
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<tr>
<td></td>
<td>*SS I</td>
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<td>131</td>
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<td><strong>131</strong></td>
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<tr>
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<td>456</td>
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<tr>
<td>Microbiology</td>
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<tr>
<td><strong>Subtotal</strong></td>
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<td><strong>4</strong></td>
<td><strong>147</strong></td>
<td><strong>456</strong></td>
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<tr>
<td>Summer (12 weeks)</td>
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<tr>
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<tr>
<td><strong>Subtotal</strong></td>
<td></td>
<td><strong>27</strong></td>
<td><strong>312</strong></td>
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5. GENERAL ATTENDANCE REQUIREMENTS

SUBJECT: General Attendance  
Responsibility of Program Director  
Revised: May 2016 Reviewed: July 2013

SCOPE:  
Surgical Technology Students

PURPOSE:  
To ensure that Surgical Technology Students are aware of the expectations regarding attendance/participation in Program activities.

POLICY:  
Students are expected to attend all classes, clinical assignments, and laboratories scheduled for their learning experience.
DEFINITIONS:

PROCEDURE:

1. **GENERAL ATTENDANCE INFORMATION**

   **SCHEDULES:** Clinical and academic schedules are provided at the beginning of each semester. Students are expected to be in their area of assignment, organized, and ready for clinical or class experience at the time scheduled. Schedule changes will be communicated by faculty. There are two types of absences that will be recorded on the student attendance record, excused or unexcused absence. The following list of guidelines are not all inclusive.

   **Excused Absence:**
   1. Personal illness or injury documented by a healthcare professional.
   2. Funeral leave according to **2. FUNERAL LEAVE** in the ST handbook.
   3. Illness of a dependent family member documented by a healthcare professional.
   4. Mandatory court appearance or jury duty (requires verification to be provided such as a police summons, subpoena, or a signed note from a court official).
   5. Religious holiday: If a holiday other than those observed by RHSHS are based upon religious beliefs, a written request for a schedule change may be made to the Program Director. Requests must be submitted within the first 30 days of the academic year.
   6. Other reasons that are within the discretion of the Program Director considered to constitute a valid absence. The student must provide documentation to the Program Director substantiating the reason for the absence.

   **Unexcused Absence:**
   1. Work
   2. Personal or dependent family member non acute medical service.
   3. Vacation or recreational activities.
   4. Student is under the influence of a controlled substance.
   5. Repair or maintenance of car or household.
   6. Slept too late
   7. Transportation is not available/missed the bus.
   8. Personal or dependent family member illness without documentation by a Health Care Provider.
   9. Personal or family member appointment.

   **These lists are not all-encompassing, they are examples and guidelines only.**

**ABSENCE / TARDINESS / EARLY OUT:** The expectation is that students will attend all assignments as scheduled. If a student will be absent or tardy, it is their responsibility to personally notify the program secretary (488-628-0200 – this number is serviced by voice mail 24 hours/day) at least 30 minutes prior to their scheduled assignment. Except under extraordinary or emergent circumstances, or previously approved absences/tardiness/early out, notification...
must be made by the student for each day of absence/tardiness/early out from class or clinical assignment and will result in an unexcused absence if notification is not given. Notification of absence should include the student’s full name and that you are a surgical technology student. Additionally, notification of tardiness should include the expected time of arrival.

- If a student is absent due to an illness, a note from a qualified health care provider is required. The absence will be recorded as unexcused if the student does not produce a healthcare provider excuse note within three days of resuming classes.
- Any missed assignment, skill assessment, exam, or quiz must be made up or scheduled to be made up within one week of the missed assignment. Any missed assignment, skill assessment, exam, or quiz that is not made up or scheduled to be made up within this time frame will receive a zero for the grade. If the student is absent for the scheduled make up assignment they will receive a zero for the grade. Assigned make-up work will be determined by the Program Director and may be different from the original assignment.
- It is the student’s responsibility to make up work that has been missed. It is the student’s responsibility to contact the Director immediately upon returning to school. The Director will determine any make up assignments according to the student’s needs.
- Two unexcused absences in a semester will result in probation.
- Tardiness or leaving early will be recorded as an unexcused absence. An unexcused absence exception must be made in writing to the Program Director within two days from the date of tardiness or leaving early.

Clinical Experience:
It is the student’s responsibility to make arrangements for clinical make-up with the Director.
- Students who miss clinical will be required to do clinical make up.
- The student is required to make-up all missed clinical time by the last day of the semester.
- Missed clinical time will require a make-up time and date determined by the Director. Failure to attend on the date and time determined for clinical make-up may result in clinical failure.
- The Director will determine the make-up assignment based on the nature of the missed experience and the individual student’s needs.
- Documentation for clinical absences/tardiness/early out is required; i.e., proof of illness documented by a physician or other licensed health care provider
- If the student is tardy to the clinical unit or assigned operating room the student may be sent off of the unit at the discretion of the Instructor which will result in an unexcused absence. At the discretion of the Instructor and Preceptor, if the student is permitted to stay on the clinical unit they may not have the opportunity to scrub for the surgical procedure.
- The student may request an unexcused absence exception. An unexcused absence exception must be made in writing to the Program Director within two days from the date the unexcused absence occurred.
• Leaving the clinical unit early without previous notification and documented permission from an Instructor is considered an unexcused absence. An early out/leaving the clinical unit early must be associated with an excused absence or it will be recorded as an unexcused absence.
• An absence, tardy, or early out of any length of time that is not for an excused purpose will be recorded and counted as an unexcused absence. The clinical day must be made-up.
• Three unexcused clinical absences in one semester will result in clinical failure.

2. FUNERAL LEAVE
Students may use up to three days bereavement for immediate family members. The term "immediate relative" usually means husband or wife, father, mother, brother, sister, son or daughter, and grandparents. Because all situations are not covered in the above rulings (i.e., foster parents, in-laws, etc.), the student may discuss exceptions with the Program Director and one day off may be granted. Exceptions may be granted if a student's performance and attendance records are satisfactory. Students desiring additional bereavement time which exceeds the time outlined above may apply for a leave of absence (LOA). The School of Health Sciences policy will be followed if additional time off is required. Extended absence or LOA may require the student to withdraw from a course or the Surgical Technology Program.

3. PERSONAL APPOINTMENTS
Students are expected to schedule all appointments (medical, legal, personal, etc.) outside of program hours. All personal appointments/appointments for dependent family members that result in an absence, tardy or an early out/leaving early will be recorded as an unexcused absence unless the occurrence qualifies as an excused absence. The student may request an unexcused absence exception. An unexcused absence exception must be made in writing to the Program Director within two days from the date of the occurrence.

4. CONTACT NUMBERS
Cathy James ST Program secretary: 484-628-0200
Hospital OR office: 484-628-8278
Davina Foster: 484-628-0206
Carol Crabb: 484-628-0213
ST Classroom: 484-628-0144
Christine Hydock: 484-628-0199
## 6. ESSENTIAL FUNCTIONS AND TECHNICAL STANDARDS

<table>
<thead>
<tr>
<th>Essential Function</th>
<th>Technical Standard</th>
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| **Critical Thinking** | 1. Ability to apply critical, logical thinking to perform tasks such as, but not limited to: tracking supplies (counting instruments & sponges), and anticipation skills for intraoperative safe patient care.  
2. Ability to adapt and function under stressful conditions so as not to impair safety.  
3. Ability to develop a surgical conscience and follow strict aseptic procedures without exception. |
| **Interpersonal Skills** | 1. Ability to exhibit positive interpersonal skills with patient, staff and faculty interactions.  
2. Able to perform learned skills with minimal supervision.  
3. Able to interact appropriately and function as part of the surgical team.  
4. Able to accept differences in others (ex. cultural, religious) without judgement. |
| **Communication** | 1. Ability to effectively interact with others in written and spoken English.  
2. Quickly and accurately understand and follow verbal instruction in English  
3. Ability to read and understand the patient chart, computer screen, digital print outs, labels, and gauges. |
| **Physical Ability** | 1. Ability to remain on task for several hours while standing, moving, lifting, and/or bending with minimal or no breaks.  
2. Strength to turn, position, and transfer patients.  
3. Upper body strength great enough to lift 20 pounds while standing erect with arms extended away from the body for at least 30 seconds.  
4. Strong and agile enough to push litters, beds, and large pieces of equipment.  
5. Ability to stand for long periods of time, 4-6 hours or longer, without a break.  
6. Ability to control bladder for extended periods of time, 4-6 hours or longer.  
7. Ability to breathe effectively with a surgical or respirator mask on for extended periods of time, 4-6 hours or longer.  
8. Ability to tolerate smoke produced from electrical and laser surgery. |
| **Mobility** | 1. Able to handle surgical instruments and equipment rapidly with both right and left hands.  
2. Has full range of motion, manual and finger dexterity, can supinate (hands palm side up) and pronate (hands palm side down).  
3. Gross and fine motor skills to assemble and pass instruments and equipment safely during surgical procedure.  
5. Able to position oneself in the clinical setting to provide patient care without obstructing other team members or equipment being used for patient safety. |
| **Hearing Acuity** | 1. Ability to hear and detect alarms or emergency signals.  
2. Acute hearing to hear and understand words muffled by a mask (individuals with auditory processing disorder will not have visual clues to assist with processing the spoken word).  
3. Acute enough to perceive vocalized words in an environment with high levels of background noise. |
| **Visual Ability** | 1. Acute enough to read small print on medication labels, instruments, implants, and guides.  
2. Acute enough to handle extremely fine thread surgeons sew with (suture).  
3. Able to visually adapt to varying levels of light and a surgical microscope. |
| **Tactile Ability** | 1. Able to use sense of touch for physical examination and assessment of patient. |
| **Olfactory Ability** | 1. Able to tolerate and distinguish smells essential to assess and/or maintain the patient’s health status or safety. |
| **Professional Attitude** | 1. Able to present a professional appearance.  
2. Maintain calm composure during emergency situations.  
3. Demonstrate flexibility and tolerance of others’ ideas.  
4. Show empathy and concern for others. |
7. BLOODBORNE PATHOGEN EXPOSURE PROCEDURE

SUBJECT: Bloodborne Pathogen Exposure
Responsibility of Program Director
Revised: May 2016 Reviewed: July 2013

SCOPE:
Surgical Technology Students

PURPOSE:
To ensure that any student who experiences an exposure to bloodborne pathogens receives prompt and appropriate treatment.

POLICY:
If a student sustains any injury which may subject the student to bloodborne pathogens, the student must report the incident immediately and seek appropriate treatment using the established procedure.

DEFINITIONS:
Bloodborne pathogen – an organism carried through the bloodstream in an infected individual which can cause disease in any person who comes into contact with the infected blood.

PROCEDURE:
CALL Program Director or Program Faculty via Vocera (3300) IMMEDIATELY if there is any injury or exposure to any body fluids.

1. Break scrub immediately after exposure occurs.
   - Note date, time, location, circumstances, source patient’s name, date of birth, and MRN if known.

2. Immediately wash the wound with soap and copious amounts of water, for splashes to the nose, mouth or skin flush with copious amounts of water. Eyes should be irrigated with clean water, saline, or sterile irrigants.

3. Go to Occupational Medicine in the Doctors’ Office Building (DOB) immediately for additional evaluation/treatment

4. If a student recaps a bent hypodermic needle they will be placed on probation. This action is high risk behavior that places the student at risk for a needle stick.
6. STUDENT PREGNANCY POLICY

SUBJECT: Pregnancy
Responsibility: Program Director
Revised: May 2016 Reviewed: July 2013

SCOPE:
Surgical Technology Students

PURPOSE:
To provide a safe, fair, and compliant policy for pregnant students.

POLICY:
This policy is provided to safeguard the welfare of pregnant employees and the fetus.

DEFINITIONS:

PROCEDURE:
Should a student become pregnant while enrolled in the Program, she will be allowed to continue the educational process under the following provisions:

- All academic policies and syllabi guidelines remain in effect. Any time missed by the student must be made up before the student will be permitted to participate in graduation activities or a diploma will be awarded.
- Depending on the number of classes and amount of material missed, the student may need to create a new curriculum plan/program completion plan with the Program Director.
- All clinical competencies and clinical assignments must be completed before a student will be permitted to participate in graduation activities or receive a diploma.
- The student will be excused from any procedures that involve the use of poly methyl methacrylate or long term fluoroscopy.
- The student may request a Leave of Absence - any absenteeism or Leave of Absence due to pregnancy will be addressed by the guidelines set forth in the School of Health Science’s policy.

The program recognizes that an enrolled student who becomes pregnant has the right to declare or not to declare pregnancy. The disclosure of pregnancy is strictly voluntary.

Every measure will be taken to adhere to the above policy. The student maintains the right to withdraw the declaration at any time. If the declaration is not withdrawn, it is considered expired after one year.
This is to inform ____________________ and the Surgical Technology Program Director at Reading Hospital School of Health Sciences that I am pregnant with an estimated due date of _____________________.

- I understand that I will be excused from participation in surgical procedures involving the use of polymethylmethacrylate
- I understand that I will be excused from participation in surgical procedures involving the use of long term fluoroscopy
- I understand that I must complete all academic and clinical requirements before I will be permitted to participate in graduation activities or awarded a diploma.
- If scheduled for any of the above excused procedures I understand that it is my responsibility to request to be excused from the assignment
- I understand that I may need to create a new curriculum plan with the Program Director in order to meet graduation requirements

____________________________________
Student Signature

____________________________________
Student Name (Please Print)

____________________________________
Date of Disclosure

The student maintains the right to withdraw the declaration at any time. If the declaration is not withdrawn, it is considered expired after one year.
SECTION IV: ACADEMIC POLICIES

1. COMPUTER LABORATORY

Students are encouraged to use the computer lab located at the School as a learning resource. The lab is accessible any time the School’s programs are in session. An access card (ID badge) is required for entry. Students are expected to adhere to use guidelines posted in the computer laboratory.

2. CPR REQUIREMENTS

No student will be allowed to attend clinical assignments prior to documenting successful completion of Health Care Provider CPR certification. Responsibility lies with the student to remain certified throughout the educational program. All students are responsible for providing updated CPR information to the School for entry into their file.

3. CORRELATION OF ACADEMIC and CLINICAL EDUCATION

Students must successfully complete all coursework to qualify for graduation from the Reading Hospital School of Health Sciences Surgical Technology Program.

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<th>Level I</th>
<th>Semester</th>
<th>Course</th>
<th>Credit</th>
<th>Theory</th>
<th>Clinical Experience</th>
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4. GRADING

SUBJECT: Grading
Responsibility of Program Director
Revised: May 2016 Reviewed: July 2013

SCOPE:
Surgical Technology Students

PURPOSE:
To inform students of grade requirements for the Surgical Technology Program

POLICY:
The School of Health Sciences Grading Policy # 305 is followed in determining final grades. Students are informed of specific course evaluation/grading in each course syllabus.

PROCEDURE:
1. Students must obtain a minimum academic average of 75% in all general education courses. Academic grades are determined by quizzes, examinations, and other modalities. If a student fails a general education course they will be placed on probation. The student must meet with the Program Director within two weeks following the end of the semester to create a new curriculum plan for completion of the program. Failure to do so will result in dismissal/termination from the ST Program. The development of a new curriculum plan and enrollment in an established cohort is dependent upon the number of students already enrolled in that cohort. Maximum cohort capacity is determined by issues such as accreditation standards and availability of clinical sites. The ST Program is thus not able to guarantee that a student who leaves one cohort (due to course failure, injury, or any other reason) will be able to move to the next cohort of students. The Program Director will work closely with the student and admissions to identify available curriculum opportunities to facilitate program completion for the student.

2. Didactic evaluation is accomplished through the use of examinations, quizzes, worksheets, Skills Lab assessments, and other modalities. All final grades are recorded in the student’s permanent file. Students enrolled in the core Surgical Technology (ST) courses must achieve a minimum academic average of 80% in each core course AND achieve a satisfactory rating on the summative clinical evaluation. Failure to achieve either part will result in course failure. A student who fails a core ST course will be dismissed from the program.

3. Clinical education is evaluated through the use of performance appraisals and clinical competencies. All students must meet the basic clinical competency requirements and the competencies for each specialty. A student who is unable to meet the competencies and achieve expectations will be placed on probation.

   • Students who are unable to meet the required clinical expectations will be counseled. A probationary period will be developed and implemented by the Program Director.

   • If a student is unable to meet the required clinical competencies of the course at the end of the probationary period, the student will fail the course clinically and be dismissed from the program.
5. PROBATION

SUBJECT: Probation
Responsibility of Program Director
Revised: May 2016

SCOPE:
Surgical Technology Students

PURPOSE:
To inform students of the performance expectations; provide a structure for consistent intervention when students are not performing well; and connect students with the resources that help facilitate their success.

POLICY:
Continued enrollment in the Surgical Technology (ST) Program depends upon the student maintaining satisfactory progress throughout the curriculum. It is the expectation of the ST Program that the student will:

- Maintain a grade of 75% or higher in general education courses. If, at the completion of any semester, a student receives a failing general education course grade or withdraws failing (WF) he/she will be placed on probation. The student needs to notify the Program Director of the course failure. A student who has failed a general education course will have one opportunity to repeat the course. The student must register for and successfully pass the failed course the next semester the course is offered. Students that do not follow the requirements of probation will be dismissed from the ST Program. The student will remain on probation until they successfully pass the failed course. A student will be placed on probation for general education course failure one time during the curriculum. A general education course failure or WF- withdraw failing of a course in any subsequent semester will result in dismissal from the ST Program. If, at the completion of any semester, a student receives any combination of two failing general education course grades or withdraws failing (WF) he/she will be dismissed from the ST Program.

- Meet all classroom and clinical course requirements, performance expectations, and follow Reading Hospital School of Health Science’s and Surgical Technology Program’s policies.

A student who does not achieve expectations will be placed on probation. Probation is a warning that performance or progress is not satisfactory and steps are required to improve performance. Probation is an indication of serious difficulty which may result in dismissal from the program. If placed on probation the student is required to develop an action plan to improve performance in the ST Program. If a student does not meet the requirements of their probation action plan, they will be dismissed from the program. There may be circumstances when a student’s failure to meet expectations will result in immediate dismissal from the program without a probationary period.
SECTION V: SKILL ASSESSMENTS

1. OR SKILLS LABORATORY

The OR skills lab is open to students from 0730 – 1600, Monday – Friday.

Open lab sessions are available to review/practice skills prior to skill assessments.
- Schedule appointment with Instructor
- Open labs will be scheduled either prior to class or after class

Students must successfully complete all OR skill assessments in order to continue in the course.
- Each assessment is performed in the sequence as identified in the assessment
- Prepare for each assessment by reviewing class notes, reading materials, and the skill assessment

2. SKILL ASSESSMENTS

Students must be competent in the following skills in order to participate in the clinical experience:
- Basic Hand Hygiene
- Packaging Techniques
- Vital Signs
- Open Sterile Supplies
- Surgical Skin Prep
- Instrument Handling – Knife Handle
- Intraoperative Handling of Instruments
- Handling of Medication
- Urinary Catheterization
- Glove Oneself – Open Technique
- Surgical Scrub
- Gowning & Gloving
SECTION VI: WORKSHEETS

1. WORKSHEETS

Worksheets are utilized to enhance the student’s understanding of special surgical experiences. Worksheets must be submitted to an Instructor the day after the special experience or the next class day after the specialty rotation. Worksheets are marked as quiz grades. Each student is expected to complete all worksheets in a timely manner. All assignments must be handed in on time. Late assignments will be penalized 5% each day that they are late and assignments handed in more than 5 days late will not be accepted. In the event of an unforeseen difficulty, discuss the problem with the Instructor.

The worksheets include:

- Patient Case Study
- GI Lab
- LDRP
- Specialty Case Studies
SECTION VII: CLINICAL EXPERIENCE DOCUMENTATION

1. COMPETENCIES

There are multiple clinical competencies. All clinical competencies must be complete and submitted to the Program Director before the student graduates. Any student who has not completed his/her clinical documentation will not receive a diploma or participate in graduation services.

Basic competencies identify basic tasks in which a student must achieve competency in order to progress in the clinical experience.
- The student must be observed by an instructor or preceptor performing each task a minimum of three times before the student is deemed competent
- Competence in the task is identified by Program faculty who sign the student off on the task

Specialty competencies are completed for each specialty rotation.
- Competency in a task can be observed by the preceptor, Program faculty, or an experienced team member.
- Each Activity on the Surgical Specialty Clinical Competency must have the date and the signature or initials of the Observer. Competency sheets with arrows to indicate the activity was observed will not be accepted.

2. CLINICAL CASE LOGS

Clinical case logs are used to identify every surgical procedure in which the student participates.
- It is the student’s responsibility to maintain accurate case logs.
- Every student must participate in a minimum of 120 surgical cases to meet graduation requirements.
  - Specific information about meeting the 120 case requirement is on the Clinical Case Log Requirements page
- Every case must have a verification signature by Program faculty or a preceptor

Clinical case logs must be complete and submitted to the Program Director before the student graduates. Any student who has not completed his/her clinical case log documentation will not receive a diploma or participate in graduation services.
CLINICAL CASE LOG REQUIREMENTS

RHS HS SURGICAL TECHNOLOGY PROGRAM SURGICAL ROTATION CASE REQUIREMENTS

- Every student must participate in a minimum of 120 surgical cases in the First Scrub Role to meet graduation requirements.
- A **MINIMUM** of 30 First Scrub cases in General Surgery.
- A **MINIMUM** of 90 First Scrub cases distributed evenly amongst CVT/Vascular, Eye/ENT, GU, GYN, Neuro, Orthopedic, and Plastic Surgery. Approximately 13 First Scrub cases in each surgical specialty.

**RHS HS Surgical Technology Program clinical requirements exceed the AST Surgical Rotation Case Requirements.**

AST SURGICAL ROTATION CASE REQUIREMENTS

Goal Statement: The goal of the Surgical Rotation Case Requirements is to contribute to the development of a well-rounded, competent, entry-level surgical technologist.

Objectives:

I. The surgical technology program is required to verify through the surgical rotation documentation the students’ progression in the scrub role in surgical procedures of increased complexity as he/she moves towards entry-level graduate competency.

A. While it is understood that no program is able to control surgical case volume or the availability of various surgical specialties, it is the responsibility of the program to provide students with a diversified surgical rotation experience.

B. No information in this document prevents programs from exceeding the minimum established by the Surgical Rotation Case Requirements.

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

A. General Surgery cases
   1. Students must complete a minimum of 30 cases in General Surgery; 20 which must be performed in the First Scrub Role. The remaining 10 cases may be performed in either the First or Second Scrub Role.

B. Specialty cases
   1. Students must complete a minimum of 90 cases in various surgical specialties, excluding General Surgery; 60 which must be performed in the First Scrub Role. The additional 30 cases may be performed in either the First or Second Scrub Role.
      a. A minimum of 60 surgical specialty cases must be performed in the First Scrub Role and distributed amongst a **minimum of four** surgical specialties.
(1) A minimum of 10 cases in the First Scrub Role must be completed in each of the required minimum of **four** surgical specialties (40 cases total required).

(2) The additional 20 cases in the First Scrub Role may be distributed amongst any one surgical specialty or multiple surgical specialties.

b. The remaining 30 surgical specialty cases may be performed in any surgical specialty either in the First or Second Scrub Role.

C. Optional surgical specialties

1. Diagnostic endoscopy cases and vaginal delivery cases are **not** mandatory. However, up to 10 diagnostic endoscopic cases and 5 vaginal delivery cases can be counted toward the maximum number of Second Scrub Role cases.
   a. Diagnostic endoscopy cases **must** be documented in the category of “Diagnostic Endoscopy”, rather than by specialty.
   b. Vaginal delivery cases **must** be documented in the category of “Labor & Delivery” rather than in the OB/GYN specialty.

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

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

F. Counting cases

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

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

FIRST SCRUB ROLE
The student surgical technologist shall perform the following duties during any given surgical procedure with proficiency. The following list is provided to identify the items that must be completed in order to document a case in the First Scrub Role. A student not meeting the five 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.

- Verify supplies and equipment needed for the surgical procedure.
- Set up the sterile field with instruments, supplies, equipment, medication(s) and solutions needed for the procedure.
- Perform counts with the circulator prior to the procedure and before the incision is closed.
- Pass instruments and supplies to the sterile surgical team members during the procedure.
- Maintain sterile technique as measured by recognized breaks in technique and demonstrate knowledge of how to correct with appropriate technique.

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 by performing one or more of the following:
- Sponging
- Suctioning
- Cutting suture
- Holding retractors
- Manipulating endoscopic camera

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. These observation cases are not to be included in the required case count, but must be documented by the program.