Delta College

Surgical Technology Student Handbook

2023-2024
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A Message to the Students

Welcome to Delta College – Surgical Technology Program!

This handbook has been assembled to help familiarize you with the policies utilized by this program as well as student services that are available.

The Surgical Technology Program Student Handbook is written for students who have been admitted to the program and is a supplement to the Delta College Student Handbook. There is a common goal of learning that is shared between faculty and students.

Mission Statement
The mission of this program is to provide didactic and clinical instruction that enables individuals to perform as competent entry-level surgical technologists in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains prepared to sit for the national Certifying Examination and to satisfy the employment needs for Delta College's local and regional communities.

Please remember that you are a very important asset of the program. Your suggestions are welcomed and may be submitted to the Advisory Committee of the program or Program Faculty.

Non-Discrimination Statement
Delta College Surgical Technology Program is non-discriminatory in regard to race, creed, color, sex, age, handicap and national origin.

Institutional Accreditation
Delta College is accredited by the Higher Learning Commission

Programmatic Accreditation
The Delta College Surgical Technology Program is accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP).
9355 – 113th St. N, #7709
Seminole, FL 33775

Disclaimer
Delta College Faculty made every reasonable effort to determine that everything stated in this handbook was accurate at the time it was published. Courses and programs offered, tuition and fees, services, and the academic calendar, together with other matters contained herein, are subject to change without notice by Delta College for reasons related to student enrollment, level of financial support, or for any other reason, at the discretion of the College. Delta College further reserves the right to add, amend, or repeal any of their rules, guidelines, policies and procedures. Although the provisions of this handbook are not to be regarded as a legal contract, students enrolled at Delta College are responsible for all regulations in this handbook as well as additions or changes to regulations as they are posted or printed.
DELTA COLLEGE
SURGICAL TECHNOLOGY PROGRAM

Program Coordinator: Ryan Teeple, CST, CSFA
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**Office hours will be announced and posted on office doors each semester, as well as in each syllabus.

NOTE: **Instructors reserve the right to change the schedule and/or assignments of a course, if needed to meet course objectives and accommodate student learning needs.
Program Costs

Keep in mind, the costs listed do not include meals, housing, transportation, or other personal expenses you may have while attending Delta. Tuition and fees are based on contact hour, not credit hour.

2023-2024 Tuition & Fees

Tuition

<table>
<thead>
<tr>
<th>Residency status</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>In-district</td>
<td>$127 per contact hour</td>
</tr>
<tr>
<td>Out-district</td>
<td>$214 per contact hour</td>
</tr>
<tr>
<td>Out-of-state</td>
<td>$224 per contact hour</td>
</tr>
<tr>
<td>Dual enrollment</td>
<td>$127 per contact hour</td>
</tr>
</tbody>
</table>

If you are a resident of the Delta College district, 60 years of age or older, you may register for courses at 50% of the current tuition rate (excludes fees).

Fees

<table>
<thead>
<tr>
<th>Type of fee</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registration fee (Non-refundable)</td>
<td>$40 / semester</td>
</tr>
<tr>
<td>Technology fee</td>
<td>$25 / contact hour</td>
</tr>
<tr>
<td>Online course fee</td>
<td>Eliminated</td>
</tr>
</tbody>
</table>

Estimated costs for 12 contact hours per semester

<table>
<thead>
<tr>
<th>Fee</th>
<th>In-District</th>
<th>Out-District</th>
<th>Out-State-Foreign</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition</td>
<td>$1,524</td>
<td>$2,568</td>
<td>$2,688</td>
</tr>
<tr>
<td>Registration fee</td>
<td>$40</td>
<td>$40</td>
<td>$40</td>
</tr>
<tr>
<td>Course fees (estimated)</td>
<td>$300</td>
<td>$300</td>
<td>$300</td>
</tr>
<tr>
<td>Total</td>
<td>$1,864</td>
<td>$2,908</td>
<td>$3,028</td>
</tr>
</tbody>
</table>

The Surgical Technology Program consists of 82 contact hours.
Class Schedule and Textbooks for the Surgical Technology Program

Fall Semester:

**ST 207** Pharmacology in the Operating Room (R. Teeple)
Tuesday 1:00 – 3:00 p.m.

Books:

**ST 210** The Surgical Patient (D. Traverse)
Thursday 1:00 – 3:00 p.m.

Books:
Course Pack

**ST 220** Fundamentals of Surgical Technology (D. Traverse)
Tuesday 8:00 -12:00 p.m. – Wednesday 8:00 – 12:00 p.m. – Thursday 8:00 – 12:00 p.m.

Books:
Nemitz, *Surgical Instrumentation-An Interactive Approach*
Pieknik, *Suture and Surgical Hemostasis*
ST220 Course Pack (D. Traverse)

**ST 240** Operative Procedures (M. Muno)
Monday 08:00-11:00 a.m.
Friday 08:00-11:00 a.m.

Books:
Goldman, *Pocket Guide to the Operating Room*
Netter, *Atlas of Human Anatomy*
**Winter Semester:**
ST 250  Clinical Externship  
(D. Traverse) 36 hours a week. OR shifts vary according to facility.

**Books:**
Goldman, *Pocket Guide to the Operating Room*

**ST 251W  Operating Room Seminar**  
(D. Traverse)  
Tuesday  12:30-3:30 p.m.

**Books:**
ST251W Course Pack (D. Traverse)

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**Program Goals**

The Surgical Technology Program will prepare graduates to:
- Perform as a competent entry-level surgical technologist.
- Demonstrate a sound knowledge base in the scientific principles.
- Demonstrate collaboration skills when working as a member of a healthcare team.
- Demonstrate respect for diversity in the professional workplace.
- Exhibit strong ethical behaviors in the professional workplace.
- Explain the importance of assuming responsibility for lifelong learning.
- Demonstrate effective communication.
- Apply critical thinking skills to make independent clinical judgments.

In addition, Delta College's Surgical Technology Program is committed to the premise that a professional surgical technologist, in addition to being an excellent clinician, is a person who also exhibits the "General Education" skills that are acquired by having a well-rounded academic background. Therefore, throughout all of the Surgical Technology courses, the following outcomes will be pursued.
- Demonstrate acceptable communication and language skills in reading, writing, and speaking.
- Demonstrate appropriate critical thinking skills to analyze data and discipline-based knowledge and to formulate logical conclusions and activities.
- Demonstrate good interpersonal/collaborative skills and work constructively within a group.
- Demonstrate the ability to access, analyze, and use information appropriate to the discipline.
DUTIES AND CHARACTERISTICS OF A SURGICAL TECHNOLOGIST

Definition of a Surgical Technologist:

A Surgical Technologist is an Allied Health professional who possesses expertise in the theory and application of sterile and aseptic techniques and who combines knowledge of human anatomy, surgical procedures, and the implementation tools and technologies to facilitate a physician's performance of invasive therapeutic and diagnostic procedures. (AST Bylaws)

Duties of a Surgical Technologist:

1. Maintains surgical equipment and all implements utilized by a surgeon in the operative care of a patient, assuring their proper working condition and safety for patient-use.

2. Selects and prepares the designated surgical equipment and sterilizes or checks the sterility of such instruments and other supplies for surgical operations.

3. Prepares the operating room for surgery, assuring a safe and aseptic environment and adequate instrumentation and supplies.

4. Assists, as delegated by the surgeon, in supporting the patient's physical and emotional security, including safety and the protection of anatomic and physiologic functions.

   This may include:
   a. Providing safety and adequate support and maintenance of body alignment during patient transfer,
   b. Supporting ventilation, circulation, and nervous function during positioning of the patient,
   c. Avoiding undue invasion of the patient's privacy by needless exposure,
   d. Providing tactile and verbal reassurance to the patient concerning his/her welfare and safety,
   e. Maintaining a quiet environment, with minimal disturbance of the pre-medicated patient,
   f. Guarding patient safety at all times, especially the patient who is undergoing General anesthesia whose natural defense reflexes are not functioning,
   g. Maintaining an aseptic environment,
   h. Assisting with placement of drains and dressings,
   i. Offering other assistance specifically requested by any physician involved with the case.

5. Assists the surgeon as directed during operative procedures (usually in the role of surgical technologist).

6. Collects, processes, and properly disposes of surgical specimens, in accordance with hospital policies and practices.

7. Assists in training students in Operating Room work techniques and procedures, if qualified to do so.
**Personality Attributes Sought in a Surgical Technologist:**

1. **Motivation and concern for patient welfare.**
   Active commitment to the medical treatment of human disease and suffering, to the continuous improvement of health care delivery, and to the philosophy that the patient is the center and objective of the hospital organization, is mandatory for the maintenance of the highest quality of health care standards in any area of the hospital. Recognize that dedication, enthusiasm, and alertness greatly affect the quality of work performance.

2. **Ability to respect the patient as a person and not an operative object.**
   Each patient must be respected as an individual who is unique and who possesses intelligence and dignity. Judgmental attitudes are not acceptable in a health care setting. Each patient should receive the undivided attention and individualized care that recognizes his/her own unique needs and value as a human being. Job routines must never compromise concern for patients as individuals or the delivery of optimal patient care. "Treat each patient as you would like to be cared for yourself."

3. **Moral responsibility of retaining unto herself/himself the personal and medical facts they learn about a patient.**
   Operating Room personnel have a professional moral, ethical, and legal responsibility to respect the patient's privacy. Communication from the patient or about his personal or medical condition is privileged information and must never be mentioned outside the Operating Room (HIPPA).

4. **Good personal hygiene and strict adherence to the principles of sterile technique.**
   Prevention of infections is the responsibility of the entire surgical team. An aseptic environment must be maintained.

5. **Acceptable manual facility and mental organization.**
   The operating room staff must exhibit optimal functional efficiency, utilizing maximum speed and dexterity, in order to minimize traumatic operative and anesthesia time, always keeping patient welfare in mind and not compromising aseptic technique. Surgical technologists must be detail oriented and possess good organizational skills.

6. **Personal integrity and responsibility.**
   Honesty is paramount in the Operating Room. Fear of reprimand is misplaced and insignificant compared to the results to which an undiscovered error can lead. Operating Room personnel share in the responsibility for the patient's well-being and contribute a great deal toward the success of surgical interventions by avoidance of error and time-consuming lack of preparation.

7. **Ability to analyze situations and to problem-solve.**
   Operating Room personnel must be able to adapt their actions based on rational analysis of different or changing clinical or job/practice conditions and to creatively generate, evaluate, and revise solutions or alternative activities.
8. Ability to work under stress.
   New procedures, deviations in routines, and complications are constant possibilities in the surgical setting. Surgical technologists must be able to work quickly and accurately without becoming flustered in stressful and emergent situations. The maintenance of an appropriate sense of humor and a proper perspective during challenging or distressing events can help everyone respond to those stresses more productively. It must also be recognized that every procedure in an operating room has the potential for emergency, and all members of the surgical team must remain constantly alert, adaptable, and functional.

9. Ability to learn and to retain and make practical use of this learning.
   All operating room personnel must be committed to the constant process of self-evaluation. Knowledge and skills must be continually improved and expanded to attain the highest possible standards of performance.

10. Proper professional attitude and behavior.
    A professional attitude must be maintained by all Operating Room personnel. Surgery is a time of great importance in the life of the patient, family and friends, and the staff must be sensitive to this and to the tension they may experience. The patient and family will feel more confident if the environment is professional, dignified, and orderly.

11. Ability to work as a productive member of a team.
    All personnel must be dependable, reliable, and consistent in the quality of their work performance. They must be self-directing and accept responsibility for their own behavior and actions. They must also be able to work cooperatively with others and to both give and accept constructive criticism/evaluation. The qualities of an effective team are mutual trust, good communication between members of the team, and confidence in each other's knowledge, abilities, and skills. Sometimes stress can cause team members to be tense or to display aggressive or atypical behavior. Each person must be able to cope not only with their own tensions but with the expressions of stress in other team members. Personal feelings and responses to individuals or circumstances must never be allowed to jeopardize patient welfare.
Program Entry Health Certification Requirements

It is your responsibility to maintain current health and certification records while in the Surgical Technology Program. The following documentation must be provided to the Program Coordinator before you enter any clinical facility. Any student who is not in compliance with these regulations may be denied entrance to clinical facilities. The program utilizes ACEMAPP for accumulation of the listed information and you are responsible for any associated fees.

Physical Exam
You must submit a physical examination report, current within a year of expected program completion, confirming that you are free from any communicable disease and can perform all duties necessary for the safe care of patients.

TB Skin Test
You must provide confirmation of a negative TB skin test, and/or a chest X-ray.

Hepatitis B Vaccine, MMR, and Tetanus
You must provide proof of Hepatitis B immunization or a signed waver form. While the vaccination series is complete, you may need a blood titer verifying that the immunization has been effective. For persons born after 1957, immunization for measles, mumps, and rubella (MMR), is strongly recommended. If MMR documentation is unable to be obtained, a high rubella titer report can be substituted. Tetanus (Td) immunization within the last ten years is strongly recommended.

CPR Certification
You must provide a copy of your current CPR certification, which must include Two Person Rescuer Technique, and remain current throughout the program.

FLU Vaccine
Seasonal influenza vaccine is strongly recommended. A waiver is available and should be signed by your physician. Anyone that does not have proof of the flu vaccine may be required to wear a mask at all times when at the clinical facility.

Student health records are kept in ACEMAPP and will not be available once the student graduates. Please keep a copy of your health records for your portfolio and future job related documentation.
Physical Standards for
Delta College's Surgical Technology Program

1. Must be free of reportable communicable diseases and chemical abuse.

2. Must be able to walk and stand without assistive devices.

3. Must be able to stand in one place for prolonged periods of time, possibly up to 6 or 8 hours.

4. May be required to stand in awkward, sometimes twisted, positions while holding instruments to retract tissue.

5. Must be able to reach across an operating room bed and to reach an overhead operating room light fixture, with or without a lifting stand.

6. Must be able to fit into a regular issue 3X surgical gown.

7. May be required to function without nourishment or medication for a period of time extending up to 6 or 8 hours.

8. May be required to assist in lifting, transporting, and moving a 200-300 pound patient who is unable to assist in these actions.

9. Must be able to independently lift 25 pounds.

10. Must be able to detect odors related to environmental safety.

11. Vision must be 20/30 or better, with or without corrective lenses and while wearing safety glasses.

12. Must be able to thread a needle with a thread that may be smaller than a human hair.

13. Must have sufficient peripheral vision to anticipate and function within the sterile field.

14. Must be able to consistently identify and communicate colors used in color-coding.

15. Must have a functional knowledge of English sufficient to be able to understand and communicate in verbal language and to be able to read and interpret written instructions or information.

16. Hearing must fall within normal ranges, with or without corrective aids, to be able to detect activation/warning signals on equipment and to be able to understand muffled communication within 20 feet without visualization of the communicator’s mouth/lips.

17. Must be able to respond quickly to verbal orders and requests.

18. Must be able to use both hands simultaneously to pass and manipulate instruments.
19. Must be able to assemble delicate instruments and equipment.

20. Must possess short- and long-term memory sufficient to perform tasks such as, but not limited to, mentally tracking surgical supplies and anticipating intraoperative needs or tasks.

21. Must demonstrate calm and effective responses and the use of positive coping skills under stress, especially in emergency situations.

Students must maintain the level of mental and physical stability which will ensure their safe, competent functioning in the classroom and clinical settings. You must notify the Program Coordinator of any significant temporary or permanent change in physical or mental health status. A written statement from your healthcare provider regarding these changes may be required, and these changes may impact your ability to complete course/clinical objectives.

**Latex Allergy**
Each student in a health career program must be aware that if they have an allergy to latex. Although the program and most clinical sites are latex free, some may still have latex on site. Please let program faculty know if you have a latex allergy. **Warning:** If you have a latex allergy, you should be aware that this could potentially lead to a life-threatening emergency in the Operating Room because all latex exposure cannot be eliminated.

**Title IX/Pregnancy Policy**
If you are or think you might become pregnant during your participation in this program, you should notify the Program Coordinator. Being in an Operating Room can expose you to potential teratogenic agents, and we will need to discuss these risks and your options. A written statement from your healthcare provider regarding approved activity and any limitations may be required. These limitations may impact your ability to complete course/clinical objectives on time, but you are protected under Title IX and Delta faculty will abide by all rules under Title IX, and will work with you and your physician, as well as the clinical facility through the completion of your program.

Delta College adheres to Title IX regulations which govern all aspects of educational programs and activities. For further information, visit the Title IX webpage or contact the Title IX Coordinator: Office A-093, phone (989-686-9547) or email equityoffice@delta.edu.

**Drug Testing**
Students will be required to have a 10-panel drug screen completed prior to the start of clinical. Clinical facilities also have the right to require random drug testing on all students who are assigned to that facility for their clinical experiences. A positive result will generally result in the student being denied access to clinical practice in that facility (and possibly in any other facility, which could impact your ability to complete the program's clinical requirements).
**Student Background Check**
All students entering the professional part of the curriculum will have background checks conducted. This is required prior to the start of fall courses. If you know you have a felony conviction, you should discuss this with the program coordinator as it may prevent you from attending clinical.

**Disabilities**
If you feel that you have an issue related to a disability that will require extra accommodation(s) beyond given to all students (see the College Catalogue), please contact the Director of Disability Services at 989-686-9332.

**Smoking**
Please see the Delta College policy at [www.delta.edu/safety/regulations.html](http://www.delta.edu/safety/regulations.html). Many of the clinical sites are smoke free and may perform a tobacco test. A positive result may prevent you from successfully completing the program.

**Exposure or Incident Report**
Students who experience an incident (fall), or exposure to any potentially infectious materials, needle stick, mucous membrane, non-intact skin or airborne inhalation (etc.), require specific follow-up. It is the student’s responsibility to initiate appropriate first aid and report the incident as soon as possible, preferably within one (1 hour), to their clinical instructor or immediate supervisor so appropriate steps can be taken to provide for the safety of the student. The student should also file a report with campus safety at Delta College.
Students are responsible for the cost of any medical care necessary due to injury or illness while practicing in the laboratory and/or clinical education facility. Additionally, students are responsible for blood borne exposure testing that may be needed should an exposure incident occurs while at their clinical education facility. It is strongly recommended that students carry health insurance.
Student Responsibilities and Classroom Conduct

General Rules of Student Conduct

• Attendance
  Delta College requires attendance records for each class. Missing class may inhibit your
  ability to be successful in this program.

• Class begins promptly at the designated scheduled time. Students are expected to be in their
  seat ready to go. Classroom doors will be locked when class begins. If you are late, you will
  have to wait until break to enter the classroom. Emergency situations will be determined on an
  individual basis. Students should remain in their seat for the duration of lecture.

  For policies concerning adverse weather conditions and cancellation of classes, see the
  Delta College catalogue. Policies for the Clinical Externship are listed for the Winter.

• Cell phones and pagers must be turned off and put away during class time.
  If there are times when you must be able to be contacted by others (e.g., regarding a sick
  child or other family member), adjust your cell phone to vibrate and step outside the
  classroom if you believe a call must be answered immediately. This exception should not
  be abused. It is very disruptive to the flow of the class as well as your classmates if you
  are on your cell phone. Please be aware that if you have your cell phone on you and in use
  to post while in the clinical setting, this is cause for dismissal from the program due to HIPAA
  violations.

• Recording of lectures
  There is no objection to recording lectures, however, it is courteous to request permission
  from the instructor. Many topics of conversation should not leave the classroom.

• Disruptive student
  Noises that disrupt others need to be held to a minimum during class. If you are late for
  class, you may have to wait until there is a break to enter class. Individual conversations
  during class may be distracting to the instructor and to other students. Repeated episodes
  of talking may result in your being asked to leave the classroom.

• Verbal abuse and inappropriate language, particularly vulgarity, profanity, and any slurs
  related to race/ethnicity, religion, gender, or sexual orientation will not be tolerated. This type
  of behavior is generally grounds for dismissal in the workplace, and therefore repeated
  episodes may result in your removal from this program.

• Academic Honesty/Integrity
  Students are expected to adhere to the standards of academic honesty, as described in the
  College Catalogue under Integrity of Academic Work. This policy covers cheating,
  plagiarism, falsification, and aiding and abetting dishonesty. If a question of academic
dishonesty should arise, the first efforts toward the solution of the problem will be the
responsibility of the faculty member involved. The student will be notified of the allegation
as soon as it becomes known to the faculty member and will be given a reasonable
opportunity to respond to the faculty member before judgement is reached. Any penalty
assessed will be at the discretion of the faculty member, who will take care to match the
severity of the penalty with the seriousness of the situation. The process for policy
violations will be followed as listed in the Catalogue. A student who receives a failing
grade and/or dismissal from the program based on a charge of academic dishonesty may
dispute the final grade (see the College Catalogue for this process).

Please Note, it is the student’s responsibility to apply for a refund of the Winter Semester
Course’s tuition & fees if you are not successful during the Fall Semester.

Only Delta e-mail accounts will be utilized for communication.

Review the Delta College Catalogue (printed or on-line) for policies regarding:
  Students Rights, Responsibilities, and Conduct:
    Regulations and Rules of Conduct
    Disruptive Students
    Student Complaint and Hearing Process
    Electronic Resource Access and Use Guidelines
  Safety and Security Information:
    Law Enforcement on the Campus
    Reporting Criminal Activities or Emergencies
    Maintenance and Security of Campus Facilities
    Sexual harassment
    Parking Regulations
    Drug and Alcohol Guidelines and Resources
  Records Access and Confidentiality

Also see the Delta College Catalogue for:
  Policies regarding Withdrawal and Refunds
  Procedures for Academic Caution, Probation, and Suspension
  Disputed Final Grade Policy
  Graduation Requirements
  and for all other general college policies
Reentry Process

- A request for reentry can be made if the student has had a course failure or has withdrawn from a program track and the student is in their second or subsequent semester of the program.
- The request for reentry should be made within one month of the course failed or withdrawn from or at the latest one month after the grade is transcripted.
- The student must apply in writing and may choose to attend the meeting to address the Reentry/Review Board.
- If reentry is granted the student must reenter the program within one year or the student is no longer eligible for reentry, and must revalidate for the program unless the Reentry/Review Board determines that a different time period is appropriate.
- Placement into a program course will be determined by Review Board decision and if the number of reentry students exceeds course availability then placement is determined by the date and time that the Review Board form is received back into the Health & Wellness Division Office. No Review Board form can be received until withdrawal from a course has been made or an official grade has been issued by the instructor at the end of the course.
- If, after reentry, a second failure should occur, the student cannot apply for reentry nor can he/she revalidate for the same program. However, he/she can attempt to validate for a different program.
- The Reentry/Review Board will meet within 30 days of a student’s request for reentry.

Reentry/Review Board Membership

The Reentry/Review Board shall have the following membership:

- **Faculty Chair** – 3-year term
- **Faculty Alternate Chair** – 3-year term who will become Chair and preside over situations where the Chair is involved.
- **Discipline Faculty or Alternate** – Non-involved full-time discipline faculty member will be selected, or a full-time division member will be selected by the faculty, of the involved discipline, if all discipline faculty are involved.
- **Student Representative or Alternate** – Students in each program will elect a representative and an alternate in case the student representative in involved.
- **Division Member At-Large** – Pool of 3 division members appointed by the division chair will rotate based on availability at the designated meeting time.
- **Counselor**

The following five (5) members shall vote:

- Board Chair or Alternate
- Discipline Faculty or Alternate
- Student Representative or Alternate
- Division Member
- Counselor

Reentry Decision

- A decision will be made by the Reentry/Review Board at the conclusion of their meeting(s).
- Students will be notified within two weeks by email and certified mail of the decision.
- Decisions denying reentry must have rationale, in writing, for the denial.
• A copy of the Reentry/Review Board’s decision will be sent to the division chair.

**Individual Plan for Success**

• If the Reentry/Review Board approves reentry, the Board will also develop an **Individual Plan For Success (IPFS)** which will be given to the student as part of the reentry process. The IPFS will be discussed with the student by the Program Coordinator or designee. All conditions of the IPFS, which focuses on student success, must be met in order to continue in the program tracks and cannot be appealed.

• It should be noted that reentry into a program is based on space availability since our program tracks have limited enrollment capacities.

**Appeal Process**

• A student may appeal the Reentry/Review Board’s decision if new or pertinent information becomes available that was not considered in the initial request.

• The faculty, division chair or dean can request with supporting rationale.

• Submission of a written appeal to the Reentry/Review Board should be made within 30 days of the initial decision.

• The Reentry/Review Board Chair or Alternate Chair will then schedule a meeting within two weeks. The original Reentry/Review Board members will meet for the purpose of reviewing the appeal. The Board will notify the appellant of their decision by email and certified mail.

• An appeal decision cannot be further disputed in this process.

**Confidentiality Statement**

All participants of the Reentry/Review Board process, in any of the proceedings, should consider all matters covered in the meetings as confidential due to the nature of the situations and discussions that follow to resolve them. Any breach of confidentiality may lead to disciplinary action, according to College policy.

**Note**

To assure continuity in the reentry process, all Health and Wellness disciplines must have their policies in place, within their student handbooks that follow these minimum guidelines. If no specific policy exists then these guidelines as outlined will be used within the Health and Wellness Division. The Associate Dean must review an alternate Reentry/Review Process to assure consistency.

Revised May 2021
AST Code of Ethics  
(Published in 1985)

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 this Code of Ethics at all times in relationship to all members of the health care team.

Patient Confidentiality
Patient confidentiality is not only a matter of ethical concern, it is a right protected by federal law, the Health Insurance Portability and Accountability act (HIPAA) regulations.

In the clinical setting, any information shared among health providers about patient care must be done in a private area where visitors or those not associated with the case cannot overhear. Only information relevant to your care of the patient should be discussed.

In the classroom, when we need to discuss cases and events that occur in the clinical setting, it is for educational purposes only, and anything said in the classroom is considered as privileged information that is not to be communicated or discussed outside the classroom.

Students should refrain from discussing any patient information on any social platform. Failure to follow this request, will result in automatic dismissal from the program.
FALL SEMESTER

Assignments

The assignment sheets for each course represent our approximate schedule for the semester. The textbook assignments listed are to be read before the assigned class time.

Not all readings will be discussed in class, but you are still responsible for the assigned textbook and handout material and it is all fair game for examinations.

Warning: There are some changes in scheduled class times listed on your assignment sheets. There may be other changes in class meeting times, especially for the Procedures course when we have a surgeon guest-lecturer (they also frequently run overtime). Always carry your assignment sheets or a calendar to class; faculty will give you as much advance notice of changes possible.

Courses:

ST207 – Pharmacology in the Operating Room (Instructional contact hours: 2).
Introduces anesthetic agents and other drugs commonly used in the perioperative setting: their uses, methods of administration, physiologic effects, and hazards or unforeseen effects.

ST210 – The Surgical Patient (Instructional contact hours: 2).
Introduces basic concepts of operative patient care, such as preparation of a patient for surgery, patient transportation, surgical incisions, wound healing, operative records, special procedures in the operating room, and the legal, moral and ethical responsibilities of surgical care.

ST220 – Fundamentals of Surgical Technology (Instructional contact hours: 12).
Demonstrates fundamental principles of operating room function: roles of surgical team members, sterilization and disinfection methods, aseptic technique, surgical instruments, sutures and equipment, electrical safety, patients positioning and preparation, draping the sterile field, and care of supplies. Develops beginning technical skills through laboratory practice; later, operating room observational experiences are provided.

ST240 – Operative Procedures (Instructional contact hours: 6).
Studies commonly-performed types of surgical procedures. Discusses the pathology leading to surgical invention, the purposes of the surgery, problems which may arise, and the consequences of the surgery for the patient. In addition to the basic techniques utilized during procedures, special instrumentation, supplies, and the latest technology will be introduced.

Studying

We have a rigorous schedule and a formidable amount of material to cover this semester, and the faculty are aware of the difficulty of your task. You will be required to absorb several times more material than you probably have in previous courses, and the rate at which the material is presented to you will be much faster. [You will also be expected to remember and integrate material from your previous prerequisite courses (horrors!) - they were prerequisites because that information is required as a background for you to build on.] When you go into the hospitals in
January, it will be assumed that you have mastered this material, so we really have no choice but to cover it all and to move at the speed we do.

Whatever you do, do not allow yourself to fall behind, even for a few days, because it will be extremely difficult to catch up. Similarly, trying to cram or pulling an all-nighter before an exam will be counter-productive, both because of the sheer volume of material covered on each exam and because you must be mentally alert during the test. Most importantly, you are not learning this material for an exam or for a grade but for your career.

The best overall study approach is to consistently set aside a period of time each day (including weekends), in a quiet environment and with access to all of your resource materials. If you are an average reader, you should be spending about four hours a day outside class (more on weekends) just to cover the assignments. If you are a slow reader, you will have to spend more time. First, read over each assignment quickly, to get the general sense of the subject, and then reread more carefully, highlighting important points and jotting down questions or areas of confusion for further review and clarification. Do the same with any handouts. Then go through the course objectives and make sure you can respond to their expectations. I suggest that you write down your responses, in as much detail as you think will assist you during later review. Drawing pictures or charts for yourself (depending on the subject matter) may also be helpful. Finally, ask yourself questions or quiz each other to see how well you understand the material. Then, after taking good notes in class, review the objectives again, correcting any discrepancies and identifying any areas that you need to ask questions about. (Note: All the faculty are here to assist you in any way they can, but you need to take the initiative in seeking help if it is needed.)

It will not be possible to be successful in these courses by simply memorizing terms or phrases in a textbook or from class notes. Memorization is very important, but it is not sufficient. Thinking is imperative. You must understand complex concepts and demonstrate the ability to apply them, as well as being able to see connections between concepts. Examinations will often include essay questions, requiring you to state concepts in your own words or to defend reasons for your answers.

The objectives for ST 220 cannot be mastered during class time alone. The O.R. lab and anatomy models are available for your use anytime between 8:00 a.m. and 4:00 p.m. Mondays through Fridays and other times by arrangement with program faculty.

A small library is available in the classroom - reference books, articles, professional journals, instrument catalogues, etc. These reference materials must be used in the classroom and may not be taken home.

It is strongly suggested that you use the area to study in between classes. However, please keep the classroom doors locked if the room is empty.

The most common reason for failing a course is lack of time and attention to the content.

Attendance

Attendance is extremely important. Lectures will offer a great deal that is not covered in your textbooks, plus you are setting patterns for employment and you will be evaluated as such. If you will be absent, you are expected to phone in before the beginning of the class. It is your responsibility to find out what you missed from the class from which you were absent. Make-up times for absences with a medical excuse will be assessed on an individual basis.
**Punctuality**

Punctuality is also extremely important. Class times begin on the hour, unless otherwise designated, so allow sufficient time for parking or for lunch. If you are late, you may have to wait until break to enter the classroom as doors are locked once class begins.

**Absences from exam**

With an excused absence from an exam, the exam must be made up as soon as possible and the grade will be given full credit. (Note: A doctor's note may be required.)

With an unexcused absence, the exam must be made up at the first opportunity and the grade earned can be no higher than a "C".

**Grading**

You must pass every course with a "C" or better to be eligible to continue into the clinical (Winter) semester of the program.

The following grading scale will be used for all courses:

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<thead>
<tr>
<th>Percentage</th>
<th>Grade</th>
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<tbody>
<tr>
<td>92-100%</td>
<td>A</td>
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<tr>
<td>90-91%</td>
<td>A-</td>
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<tr>
<td>88-89%</td>
<td>B+</td>
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<tr>
<td>82-87%</td>
<td>B</td>
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<td>80-81%</td>
<td>B-</td>
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<td>75-77%</td>
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<td>below 59%</td>
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</table>

Grade determination for Fall Semester courses will be available the first day of class. Extra credit projects or bonus points are not awarded in this program.

Since professionalism includes knowledge, skills, and conduct, your ethics, integrity, and maturity are just as important as intelligence and academic achievement. Your readiness to progress into the clinical area will be assessed by attitudes, as well as by grades. **If the Program Coordinator has reason to doubt a student's readiness to continue into the Winter Semester, even with satisfactory academic grades, this will be discussed with the student and an arbitrator.**

**O.R. Laboratory**

You will need to have at least one pair of ceil blue scrubs for lab. You may also want a warm up jacket to wear if you leave the “OR” area. You will need scrubs to enter the ‘semi sterile area of the OR and the operating room’.

While in the laboratory, students are expected to demonstrate professional behavior at all times. Do NOT attempt to use or operate any equipment or supplies until you have received the appropriate instruction. When using instruments and equipment, treat them kindly. Laboratory sessions are not considered adjourned until everything has been replaced in the appropriate storage area and the lab is in proper order. It is everyone’s responsibility to help clean up lab after class is done.

**O.R. Observations**

By early November you must have a pair of O.R. shoes (nursing shoes are suggested) to take to the hospitals. You will be issued a name tag, indicating your student status, which must be worn at all times in the hospital O.R.’s. If you lose your name tag, it will be replaced at your expense. (Scrub suits for observational experiences will be provided by the hospitals.)
A satisfactory physical exam and TB test must be completed before you can go to the hospital in November. By that time you must also have submitted proof that you have received your first two Hepatitis B vaccinations or have signed a waiver as well as an annual flu shot. If you are not able to get a flu shot for medical reasons, you will need to sign a waiver and wear a mask at all times in public areas of the hospital.

**Dress code**

We do not have a formal dress code, but you will need scrubs on days that you will be working in Delta’s OR. You can change into your street clothes after lab if you so desire. Other class days, just a professional casual dress code is fine.

**What does it take to be successful in this program?**

**ADAPTABILITY AND TOTAL COMMITMENT!**

**Time:**

You can’t just "sit-in" on lectures. You must be involved, alert and thinking during class time. You must at all times be striving for comprehension and be engaged in problem-solving, reasoning and application skills. You should be asking questions to ensure you have a good understanding of the material. This will prepare you for the CST® exam.

In lab, where there is not enough room or materials for everyone to have a work-station at all times, if you are not actively involved in a task at the moment, you should be involved in critically observing and assisting others so that you can still be learning from the experience. **This is not the time to socialize, recopy notes, study for other courses, or discuss an upcoming exam.** Watch what your classmates are doing, mentally evaluate, and anticipate what should be done next. Being able to learn by observation is a critical skill in the O.R., where the old adage of "see one, do one, teach one" is often absolutely correct. You can strengthen your own knowledge and skills by being personally prepared for each lab session and by utilizing all lab time wisely and well. Wasting lab time is one of the biggest mistakes a student can make! As with your outside studying, it is not just a matter of time but a commitment to making it quality time.

**Attitude:**

If you can't see (or don't trust your faculty to know) the significance of what you are learning in relation to your future career, if you don't enjoy challenge, or if you don't find hard work and effort rewarding, then you probably won't be successful in this program. Motivation is the key. "The most reliable motivational factors are the ones that come from within, such as your curiosity about the subject matter and your passion to learn." Fear of failure is a negative attitude; wanting to do well is a positive attitude when it demonstrates a quest for personal satisfaction and a sense of accomplishment. Success requires more than just academic achievement. You must not only know but also understand basic concepts and principles. You must be able to think critically and you must be able to apply those concepts/principles in various, often novel, situations. Organizational ability, attention to detail, the ability to be self-directing and to work independently while at the same time having a strong commitment to teamwork are all essential skills and attitudes for successful work in an O.R.
WINTER SEMESTER

Courses:
ST 250 - Clinical Externship (12 Instructional contact hours: 16).

The student obtains supervised clinical externship experience in hospital and ambulatory operating rooms. Evaluation of each student’s progress in the theoretical, behavioral, and practical application of concepts of surgical technology will help determine their final grade.

This program works in conjunction with our community to offer clinical externship experiences at Ascension St. Mary's Medical Center in Saginaw, Ascension St. Mary’s Towne Centre, Covenant Healthcare System in Saginaw, Bay Regional Medical Center in Bay City, and MyMichigan Health in Midland and Alma, Hurley Medical Center in Flint, McLaren Flint, as well as Mackinaw Surgery Center in Saginaw. Periodically, our clinical affiliates will offer our students a paid externship. This is determined by each clinical affiliation and changes annually. These offerings are discussed during orientation and in the fall semester once we hear from the clinical sites.

During the fall semester, each student will be asked to state their three preferences and these are considered when scheduling your clinical rotation in the event there is not a paid externship. The goal of each placement is to fulfill graduation requirements as well as secure you a position upon graduation. Each student placement will be determined by student preference, student skill level, and matching the personality to the clinical site.

Note: Any or all of the clinical assignments may require that you travel outside your home community.

The Clinical Rotation schedule for 2024 will be:
- Rotation I: January 9 – March 3
- Rotation II: March 13 – April 28 (with Spring Break March 4th - March 12th)

You will be required to maintain a daily case log, recording all your activities and participation in at least 120 surgical procedures. On the form, "1S" stands for First Scrub, which means that you have had the primary responsibility for the Mayo Stand and for passing during the case. "2S" stands for Second Scrub, which means that you were standing across the Mayo from the primary Scrub Person or were at the Back Table and you were assisting the primary Scrub Person. The "A" role designates that you were acting as a Second Assistant on the case: holding retractors, sponging or suctioning, cutting sutures, etc. and "O" means that you were simply observing, whether you were scrubbed in or not.

You will also be keeping a record called "Counted Cases for Accreditation Reports", which I will explain more fully on the last class day in December, during the orientation to the Winter Semester. At that time, I will also explain the Weekly Report and how to set goals for the following week.

At the end of each rotation, the Clinical Instructor for the department and/or appropriate preceptors will complete a Clinical Evaluation Form for each of you for that rotation, assessing your knowledge, skills, and attitudes and behaviors. (During the orientation to the Winter Semester, I will pass out the Clinical Evaluation forms so that during the between-semester break you can read over exactly how you will be evaluated during the Externship.) At the end of the semester, I will assess all of the Clinical Evaluations, together with my own personal observations and discussions I have had with department staff and surgeons during the semester, and I will then assign a Final Grade for the clinical course.
All of the rules and regulations regarding this course can be found in the document that follows this, entitled Clinical Externship.

At the end of each rotation, you will be asked to fill out an evaluation of the clinical site and any preceptors you may have worked with. At the end of the year, I will share these comments with the Clinical Instructors (taking care to maintain the anonymity of the sources), so that they can receive input about how they are doing.

**ST 251W - Operating Room Seminar (Instructional contact hours: 3).**
Discuss patient-monitoring devices and diagnostic tests, abnormalities and correlations with surgical patient conditions, and surgery for traumatic injuries. Includes discussion of students’ clinical experiences, the professional role of the Surgical Technologist, general review, assigned research studies, and a cultural diversity project.

All course policies and the grading scale that were defined for the Fall Semester will be in effect for ST 251W during the Winter Semester.

In addition to the new material that we will be covering in this course, we will spend some time at the beginning of each class discussing your clinical experiences. Toward the end of the semester, we will review material learned during the year, both for the comprehensive Final Exam and as preparation for your taking the national Certifying Exam. It is an expectation of this program that, as a professional, you will become a Certified Surgical Technologist (CST).

You will be required to complete surgical case studies in several surgical specialties. These case studies will be graded for content and will become part of your capstone portfolio.

You will be required to participate in a civic engagement assignment. You will have more information on the first day of class regarding this requirement.

We will spend the later part of the class preparing for the National Certification Exam. You will purchase and take the HESI exam which will give you feedback on what areas of study you need to concentrate on. This and your study guide will help prepare you for the exam.

On the last day of the semester, you will be taking the National Certification Exam. This is a requirement for graduation from the program.
CLINICAL EXTERNSHIP
Tips to be Successful

1. Please eat breakfast!

2. You are responsible for providing your own transportation to clinical sites. Be sure you use the appropriate parking facilities at each hospital. If this is not mentioned during your orientation, ask about where you should park.

3. Be dressed and in the department, ready to perform your duties, by your assigned starting time.

4. You are expected to act in a responsible and professional manner with regard to absenteeism and tardiness. If you are late or will be absent, you must call the department before your assigned starting time. Talk to or leave a message for your preceptor at the phone number for the department that is listed on the third page of your Clinical Rotation Schedule. You will need to make an additional call and leave a phone message: one to the department's Clinical Coordinator. If you do not reach the Clinical Coordinator, you must contact the Program Coordinator.

A student who reports late more than three times during a rotation will receive a written warning and will be required to make up 1/2 day at the end of the semester for every 3 times tardy. (In the event that a tardiness is beyond your control, your preceptor or the Clinical Instructor will make the determination as to what course of action, if any, will be taken.)

It is imperative that professionals consider patient care as well as consideration for fellow workers when deciding if they are too sick to work. If you are ill, give the department an estimate of when you expect to return; if that estimate changes, notify your preceptor. The decision to send a student home sick will be made by the department supervisor in accordance with the procedures established by that individual institution, and that will count as a sick day. In the event of a serious illness, your standing in the program will be evaluated by the Program Coordinator, the department's Clinical Instructor, and your physician.

You will be required to have a physician's excuse to be readmitted to the clinical area under the following circumstances:
   a. You have missed three consecutive days.
   b. You have a communicable disease or an infected skin lesion.
   c. You have called in sick the day before or after a holiday/vacation day.

Absent days in the clinical area are not to exceed three days during the semester. Anyone who exceeds three days during the semester may be removed from the program. This will be discussed with the student and will be determined on an individual basis. Only excusable absences will allow the student to remain in the program and make the time up. Arrangements for clinical make-up days will be made by the student with the clinical site and approved by the Clinical Coordinator.
Absenteeism and tardiness will be recorded and will be considered in your evaluation and final grade in the course.

Absence or tardiness without notification could result in dismissal from the program. The first occurrence will result in a written warning; a second occurrence will result in immediate dismissal from the program!

5. It is recognized that weather conditions can vary considerably within the Delta College district, but please make every effort (within reason) to make it to the hospital under adverse weather conditions.

When Delta College is officially closed ("Snow Day" declared), the following rules will apply:
   a. If the announcement for cancellation of classes is made prior to the student's departure for the clinical site, the clinical activities for that day will be cancelled.
   b. If the student has already arrived at the clinical site before being aware that Delta classes have been canceled, the student can choose whether to go home again or to stay and participate in the day's clinical activities.
   c. If the announcement for cancellation of classes is made after the scheduled start of the day's clinical activities, the clinical activities for that day will continue as scheduled.
   d. If a student has to leave the clinical area due to weather conditions or some weather-related situation, it will be handled as any other "personal" or "sick" day.
   e. In the event of fire, power outage, or some other condition that affects only the Delta College campus, the student should report to the clinical site and clinical activities will continue as scheduled.

6. During clinical, you need to follow the hospital dress code. The facility will provide you with scrubs. No jewelry should be worn to the clinical site and nails should be free of nail polish and trimmed ¼ inch. Your name tag, designating you as a student, must be worn at all times in the department. In some hospitals, a hospital ID badge must be obtained and worn (provided without cost by the facility).

7. You will adhere to Standard Precautions and all other safety practices at all times. Students in an off-campus clinical setting will be provided with PPE according to that facility's policies and in accordance with the MIOSHA standard. You are to wear eye protection whenever you are scrubbed on a case and at any other time when an eye splash incident could be anticipated.

8. Coffee breaks: Coffee breaks between cases may be taken if time allows. (Students may not be allowed breaks because they generally take longer to prepare for cases.) Take a break only if you are assigned to do so by your preceptor or circulator, and be sure the room personnel know where you are. Coffee breaks usually are no more than 10 minutes and no more than two a day. Do not leave the department unless that is accepted practice.

9. Lunch breaks: Take lunch breaks with your assigned preceptor/scrub person or as designated by your room circulator or Clinical Instructor. Always let your circulator know where you are. Lunch breaks are 30 minutes. If you are leaving the department, be sure to observe the proper protocol regarding apparel and shoe covers.
10. Physician and dental appointments are to be scheduled after school hours. In the event that this is not possible, you must inform your preceptor/Clinical Instructor and the Program Coordinator three days prior to the appointment and again the morning of the appointment. This will be recorded as an "excused absence" and the time may need to be made up.

11. If you are injured or become ill during clinical hours, you must report that to the Clinical Instructor and/or department supervisor. You will be allowed to have access to the same health care services utilized by employees of that department. However, you must be prepared to pay for such services yourself; neither the hospital nor Delta College provides health insurance coverage for you. Upon completion of treatment you are to report back to the Clinical Instructor and/or department supervisor and comply with whatever instructions are given at that time.

If you are exposed or suspect exposure to a communicable disease, you must report the incident immediately to the Clinical Instructor and/or department supervisor and comply with any requirements for evaluation of the situation. In the case of needle-sticks or injury with sharps, you must follow the department's protocol for reporting penetrating injuries and participate in any follow-up testing that the department may require (at your own expense). Such injury must also be reported to the Program Coordinator as soon as possible. Documentation of all injuries and treatment will be maintained by the college and by the hospital each according to its own prescribed manner.

You are not an employee of the hospital and are not eligible for any Workman's Compensation claims for any injury or illness sustained during clinical hours.

12. If your room is finished, you may not sit around for the rest of the day or go home (unless special permission is granted by your Clinical Instructor -- see below). Your assigned preceptor/scrub person may have other duties to attend to with which you can help (restocking rooms, preparing for the next day, etc.) or you may be able to help out in the instrument room, etc. Check to see if your Clinical Instructor has another assignment for you. I will not accept that there is nothing more to be done around an Operating Room (even if everyone else is sitting in the lounge) or that you can learn nothing more about where supplies are located! And there are always Preference Cards and instrument catalogues!

You may leave for the day prior to the assigned time only if all the following criteria have been met:

a. The operating room to which you are assigned is finished for the day, cleaned and stocked.
b. All case preparation and student experience records are up to date.
c. There are no educationally beneficial cases to observe.
d. You have checked with other operating rooms for stock lists and have gathered and delivered the requested supplies.
e. The decontamination and/or sterile supply areas do not require extra help.
f. The Clinical Instructor determines that your services are no longer required and gives permission for you to leave early.
13. In the event you wish to remain with a case in progress beyond your assigned clinical day (i.e. after class hours), you must first obtain permission to do so from the department supervisor on the understanding that the hospital assumes all responsibility for your presence and actions.

14. Your daily case log is to be kept current and in your folder. This record provides a means to monitor your activities, skill level, and variety of experiences, and it assists the Clinical Instructor in determining your assignments.

You are also responsible for maintaining the record referred to as Cases Counted for Accreditation Reports (a record that is required for the program's accreditation). Each and every time you have performed one of the procedures listed in the role of either the First Scrub with Assist or First Scrub Solo, you need to have your preceptor confirm that participation and sign the form. This list is also to be kept current and in your folder in the department.

Upon graduation, these records will remain on permanent file at the college, as will your clinical evaluation forms. (If you wish to submit a record of the cases you have participated in with a job application after graduation, I will provide you with a means to do that. You may not make copies of any evaluation forms unless you have the express written permission from the evaluator to do so. Ask me about this later in the semester.)

15. Each day, before you leave for the day, be sure that your case logs and all other paperwork are up to date and that you have checked for your assignment for the following day. You case logs must be legible as they become part of your permanent record.

16. Every evening, research the cases you expect to be doing the next day. It may be helpful to write out a procedure sheet for any new cases. Adequate preparation for a surgical procedure is necessary to allow you to participate safely in the care of the patient. A procedure sheet should include: patient position and area of skin prep; draping sequence; synopsis of the procedure; special instruments, supplies, equipment, and suture preferences; any special considerations, back-table medications, and/or techniques. (A suggested format will be distributed.)

17. At the end of each week, fill out a Weekly Report about your experiences and discuss this with your preceptor and/or Clinical Instructor. Then determine a few realistic objectives for yourself for the following week, being as specific as possible. Share your weekly goals with your Clinical Instructor, preceptor, and the room staff with whom you are working. Assess your progress each week and solicit their input.

18. As a student, your responsibility is to perform to the standards of professional practitioners. As we will discuss in ST 210, a patient cannot be subjected to a lower quality of care just because you are a student. This means that you are expected to perform like a competent professional, even though you do not yet have the knowledge or expertise to do so. What are you to do? First of all, be realistic in your assessment of your abilities and acknowledge your limitations. If you have never done something before, communicate that to your preceptor and ask for assistance. Do not attempt to muddle through something if you do not feel confident with it. Remember that the cardinal rule of patient care is *Primum non nocere* ("First, do no harm"). When you are being instructed in the proper procedure, whether by observing someone else performing the task or being "talked through" doing it yourself, ask questions.
that will expand your understanding. Your responsibility is to learn the information you need so that you will be able to perform the task independently later. Learn all you can and develop your performance abilities at every opportunity.

19. Remember: Your clinical time will go fast. It is to your benefit to get as much experience as possible. By the end of the semester you will be expected to be able to function as an entry-level employee. You will gain from the clinical experience only as much as you put into it. Just remember that there will come a time when you not have another person with you to back you up or to hold your hand!

20. When expectations regarding levels of clinical performance are not being met, a verbal warning will be communicated to the student, and the reasons for the warning and possible methods for remediation or correction will be discussed between the student and the Program Coordinator (and possibly with your preceptor and/or Clinical Instructor also present). If, after an appropriate time period, clinical performance is still not deemed to be within acceptable limits, a written notice will be issued. The written notice will define in what way(s) performance expectations are not being met, will state that the student is formally being placed on probation, will delineate guidelines for the improvement of performance, and will specify a deadline for improvement. If improvements are not satisfactory within the allotted time frame, the student may be asked to withdraw from the program or will be issued a failing grade for the Clinical Externship (and therefore not complete the program). The student has the option to appeal such a ruling as per College policies.

21. Unsafe performance is defined as clinical behavior that jeopardizes the patient's safety even though actual harm to the patient may not ensue. Behavior that is potentially harmful to the patient shall be termed unsafe. Errors of omission, as well as commission, are considered to be clinically unsafe. A pattern of clinical behavior that is inconsistent regarding preparation, proper application of principles, or performance of duties shall be considered to be clinically unsafe. A student whose clinical behavior is judged by the Clinical Instructor in consultation with the Program Coordinator to be unsafe may be immediately suspended from further clinical experience. When making such a judgment, the Program Coordinator shall advise the student of the unsafe performance, describing the act(s) or omission(s) which were observed to be unsafe, and, when applicable, provide supporting evidence. The student shall also be advised of what actions s/he needs to pursue in order to be readmitted to clinical experiences. A student who exhibits a pattern of unsafe behavior shall fail the Clinical Externship. The student may dispute a failing grade through the College's "Grade Dispute" process (see the College Catalogue).

22. Clinical experiences are a contractual matter between Delta College and each healthcare agency. Therefore, students are expected to behave as guests in the healthcare facilities, abiding by their policies and procedures. Agencies and patients reserve the right to refuse student access to clinical experiences. You and the clinical site you are assigned to will decide on the schedule that works best for you and the clinical site. **You must share your schedule with the Clinical Coordinator.**
23. When standards of conduct are not met, disciplinary action may include a reprimand, probationary period, suspension, or dismissal. The degree of disciplinary action is determined by the seriousness of the offense. Past conduct and performance will be taken into consideration.

Grounds for disciplinary action include, but are not limited to, the following:

a. Inappropriate dress or appearance, including failure to wear a proper nametag.

b. Undependability, leaving the clinical area without proper authorization, or unexcused absences.

c. Loitering, loafing, or sleeping while in the clinical area.

d. Unauthorized solicitation or distribution on hospital premises at any time.

e. Parking in unauthorized areas.

f. Gambling or conducting games of chance or possession of gambling devices on hospital premises.

g. Insubordination or refusal to obey reasonable orders or instructions.

h. Use of abusive or obscene language, or acting in a disrespectful manner to any faculty member, preceptor or department staff member, patient, visitor, supervisor, surgeon, or classmate.

i. Disruptive behavior or disorderly conduct on hospital premises.

j. Dishonesty or illegal conduct of any kind.

k. Unethical conduct.

l. Violation of patient confidentiality, including the unauthorized possession, use, copying, or reading of patient hospital records or disclosure of information contained in such records to an unauthorized person.

m. Unauthorized disclosure or falsification of school or hospital documents or records or their removal without proper authorization.

n. Negligence, incompetence, failure to perform responsibilities safely, violation of safety rules and regulations, or failure to exercise reasonable care in the performance of any duties.

o. Disruption of patient services or creating or contributing to adverse or unsafe conditions.

p. Sexual harassment.

q. Theft, misuse, unauthorized use, or deliberate destruction of hospital equipment or supplies or the property of any patient, visitor, student, or hospital employee.

r. Threats of violence or assault; intimidating or coercing a classmate, co-worker, or other employee; possession of any object commonly considered to be a "weapon" on hospital premises.

s. Use of alcoholic beverages or illicit drugs on college or hospital premises, or reporting for duty while under the influence of intoxicants.

t. Failure to abide by any other college or hospital policy.

u. Any other conduct which, in the opinion of the college, is inconsistent with satisfactory standards of work, conduct, and general performance, and not in the best interest of patients, fellow students, hospital staff members, surgeons, or instructors.
Surgical Technology Program Work Policy

It is the policy of Delta College’s Surgical Technology Program and the Commission on Accreditation of Allied Health Educational Programs (CAAHEP), that all student activities associated with the curriculum, especially while students are completing clinical rotations, will be educational in nature. Students must not be substituted for hired staff personnel within the clinical institution, in the capacity of a surgical technologist.

I have read and understand the policies regarding my Clinical Externship.

Student: ___________________________ Date: ____________

Program Coordinator: ___________________________ Date: ____________
as witness