

SCHOOL OF HEALTH SCIENCES



SURGICAL TECHNOLOGY

CLINICAL HANDBOOK

081423

Table of Contents

General Information.....	4
Preface.....	4
SOHS Mission Statement.....	4
ILOs-Institutional Learning Outcomes	4
PLOs- Program Learning Outcomes	5
Essential Functions/Technical Standards	5
School of Health Sciences Contacts.....	5
Accreditation.....	6
Requirements and Expectations	6
Attendance, Tardiness, and Absence.....	7
Behavior and Conduct.....	7
Student Employment.....	8
Transportation	8
Clinical Errors	8
Clinical Hours and Case Requirements for the Program	8
Safety Policies and Procedures	11
Performance Standards for Admission and Progression in the Surgical Technology Program	11
Student Illness, Injury or Hospitalization.....	11
Latex Allergies.....	11
Bloodborne Pathogens	11
Infection Control.....	12
OSHA Guidelines	12
Confidentiality	13
Non-Compliance	13
SCHOOL OF HEALTH SCIENCES (SOHS).....	15
STUDENT GUIDELINES FOR IMMUNIZATIONS	15
Appendices.....	17
Appendix A: Tips for Success in the Surgical Technology Program.....	18
Appendix C: Essential Functions.....	20
Appendix D: Surgical Technology Uniform and Professional Appearance Requirements	22



.....	24
HEALTH STATUS RELEASE	24
INSTRUCTOR’S REPORT OF STUDENT EXPOSURE	26
Post-Exposure Evaluation and Follow-Up for Students	27
PROGRAM POLICY AGREEMENT	28
PROGRAM POLICY ACKNOWLEDGEMENT & AGREEMENT	28

General Information

Students have the responsibility of knowing about the information contained in this document as well as the TCC and Surgical Technology Program Student Handbooks, so please do not hesitate to reach out to the Surgical Technology faculty should you have any questions!

Preface

This handbook has been developed to inform surgical technology students of the policies, procedures, and guidelines specific to clinical rotations. It serves as a supplement to the *Tulsa Community College Catalog, School of Health Sciences Policies & Procedures*, <https://www.tulsacc.edu/programs-courses/academic-schools/school-health-sciences> and the *Tulsa Community College Student Handbook*, <https://www.tulsacc.edu/student-resources/student-handbook> which contain the general institutional policies. In addition to these documents, students are to comply with individual course expectations as defined in each course syllabus. In the case of variations in any policies or procedures, it should be noted the course syllabus takes precedence. Each student is expected to review the handbook in its entirety and to refer to it as needed. Students should be aware of and comply with all current written policies and procedures. This handbook takes precedence over any previous versions. Failure to be informed is not an acceptable excuse for non-compliance.

SOHS Mission Statement

The mission of Tulsa Community College's School of Health Sciences shall be to build success in healthcare through quality, affordable education by developing healthcare professionals who communicate effectively, think critically, and practice social and personal responsibility. We strive to equip graduates with the essential skills to provide excellence in compassionate care; collaborate across healthcare teams; and maintain practices of safety, ethics, and integrity while serving and investing in their diverse communities.

The mission of the Surgical Technology program at Tulsa Community College is to prepare surgical technologists for practice as a certified surgical technologist (CST) with demonstrated competence in the cognitive (knowledge), psychomotor (skills) and affective (behavior) domains.

ILOs-Institutional Learning Outcomes

1. **Communication Skills:** Graduates will be able to exchange information or ideas through listening, speaking, reading, writing, and other modes of interpersonal expression.
2. **Critical Thinking:** Graduates will be able to evaluate existing information to form judgments, raise new questions, and/or implement creative and effective solutions.
3. **Personal Responsibility:** Graduates will be able to implement the skills necessary for physical, financial, mental, and/or emotional well-being.
4. **Social Responsibility:** Graduates will be able to evaluate one's ethics and traditions in relation to others to respectfully interact with diverse groups.

PLOs- Program Learning Outcomes

- **Minimum Expectation: Demonstrates** competency in the cognitive, psychomotor, and affective domains to enter the surgical technology profession.
- Model the Association of Surgical Technologists recommended guidelines in the practice of surgical technology in the lab and clinical setting. (psychomotor)
- Build critical thinking skills by analyzing information and adjusting a position or plan as evidence dictates. (cognitive)
- Maintain a high standard for professionalism by accepting responsibility for words or actions. (affective)
- Measure cognitive competency by correctly answering at least 102 items in the NBSTSA web-based CST exam. (cognitive)

Essential Functions/Technical Standards

- **Interpersonal** – interacts with patients and surgical team members with a variety of social, emotional, cultural, and intellectual backgrounds. Must be flexible and capable of reacting to changing circumstances in a calm manner with professional decorum.
- **Critical Thinking** – Sufficient for clinical judgment and problem solving; Concentrate and focus for prolonged periods of time.
- **Communication** – Ability to interact with others orally and maintain professional communication.
- **Mobility** – Physical abilities sufficient to move and bend; lift a minimum of thirty pounds; push pull equipment weighing up to three hundred pounds.
- **Motor Skills** – Gross and fine motor abilities to grasp, grip and hold with hands. Ability to work with and manipulate fine surgical instrumentation and suturing needles.
- **Hearing** – Auditory ability sufficient to hear the surgical team members through a surgical mask with background noise.
- **Visual** – sufficient for observation in full or dimmed light. Visual near acuity of 20 in. or less with clarity. Distinguish depth, color, and spatial attributes of images.
- **Tactile** – sufficient for handling and manipulating small surgical instrumentation.
- **Physical Condition** – condition and stamina sufficient to lift and assist in moving the anesthetized patient; move equipment; ability to stand for extended periods of time during surgical procedures.

School of Health Sciences Contacts

School of Health Sciences Campus Site

METRO CAMPUS

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Full-time faculty are supported by part-time adjunct faculty who help with program delivery in various settings.

Accreditation

TCC is accredited by the Higher Learning Commission (ncahlc.org / 312 263-0456). The College most recently underwent self-study in 2018 and received a 10-year (2028-29) reaccreditation. The College is a member of the American Association of Community Colleges, the North Central Council of Two-Year Colleges and is also approved by the federal government to offer education under the Veteran's and Social Security laws.

The TCC Surgical Technology Program has a site visit scheduled. This step which is in process is neither a status of accreditation nor a guarantee that accreditation will be granted by the Commission on Accreditation of Allied Health Education Programs (CAAHEP.org) – 9344- 113th St. N. #7709 Seminole, FL 33775 727-210-2350

“Clinical” refers to the hands-on learning experiences that occur in healthcare agencies throughout Tulsa and surrounding area.

Clinical education integrates academic knowledge with application skills and attitudes at progressively higher performance levels. Requirements and responsibilities and the use of clinical sites may vary with each semester.

Requirements and Expectations

Immunizations: See School of Health Sciences Guidelines for Immunizations at the end of this section.

1. **Criminal Background Check:** A comprehensive criminal background check will be performed on all Surgical Technology students prior to the initial clinical practicum experience. The student will be given instructions on completing the online application through SurPath. It is the student's responsibility to initiate the criminal background check. The cost of the initial background check will be collected from the student through tuition and fees during their first semester in the Surgical Technology Program. Results are posted to SurPath in a secure, password-protected environment. The School of Health Sciences reserves the right to deny continued enrollment to any student whose background check results in a denial of entry into clinical facilities on contract with TCC. Based on the policies of facilities with contractual agreements for TCC clinical experiences, students may be required to undergo additional background checks.
2. **Drug Screen:** Drug screening is required of ALL Health Sciences students. The date and time of the drug screening will be determined by the School of Health Sciences. The initial drug screen will occur one time and will not be rescheduled. Failure to complete this screening process can result in dismissal from the Surgical Technology Program. If the test result is “confirmed positive,” the student is notified by the Dean

or designee and is dismissed from the Program. Additional drug testing may be required of the student “for cause” or reasonable suspicion and may either be announced or unannounced.

3. **HIPAA, OSHA, Fire and Safety, TB Training:** An integral part of the educational experience is having access to Protected Health Information (PHI) of the patients under a student’s care. Maintaining the confidentiality of patients’ information is a legal and ethical matter. The Health Insurance Portability and Accountability Act of 1996 (HIPAA) provides specific guidelines to protect the privacy of patients and outlines the penalties of violations of that privacy. The Occupational Safety and Health Administration published a federal standard for which all healthcare providers are mandated to comply. The standard includes performance criteria, which relates to protection against blood borne pathogens. It is mandatory for every student in the Surgical Technology Program to review HIPAA, OSHA, Fire Safety & TB training PowerPoint presentations and to pass the accompanying HIPAA, OSHA, and Fire Safety & TB tests with a 90% score prior to the first day of clinical. The PowerPoint presentations and tests are available on the “Allied Health Connections” Blackboard site. Test scores are automatically recorded on Blackboard and respiratory care faculty are informed of the results.

Attendance, Tardiness, and Absence

1. **General:** Attendance and punctuality are expected behaviors of a professional surgical technologist; therefore, the student is expected to arrive on time or early for every clinical experience. If the total hours of absences and tardiness are excessive, the student may be required to exit the program. Arriving later to the clinical site on three occasions and or leaving the clinical site early will be counted as a clinical absence. Exceeding the allowable absences as defined by the clinical course syllabus will result in the student failing the clinical course. The student may be eligible for readmission into the Surgical Technology program. The course may be repeated the following year resulting in a one-year delay in graduation.
2. **Tardy:** If a student expects to be tardy, a call should be made to the clinical instructor explaining why. Depending upon how tardy the student will be, the instructor will decide whether the clinical experience guidelines can be met that day or whether the student will need to be rescheduled.
3. **Absence: If an absence is necessary, the student should contact the clinical instructor at least 30 minutes before the clinical rotation begins.**

Behavior and Conduct

1. **General:** Students are considered guests in each assigned clinical practicum facility, agency, or home and must adhere to all policies/procedures of each setting. Students should realize they represent TCC and the entire surgical technology profession as well as themselves. They are responsible for their own behavior. Examples of expected clinical behaviors may be reviewed in Appendix F.
2. **Unsafe Clinical Behaviors:** Maintaining patient safety is an essential foundation of surgical technology practice. “Unsafe clinical behavior” is defined as: 1) a potentially LIFE-THREATENING incident; 2) an incident contributing to the actual/potential injury of self; and/or 3) an incident contributing to the actual/potential injury of another. Examples of unsafe clinical behaviors may be reviewed in Appendix B. Failure to maintain safety or demonstrating a pattern of disregard for patient safety may result in immediate clinical failure and failure of the course. Students may NOT be in any unassigned area during clinical.

3. **Consequences of Unsafe Behaviors:** A student who displays flagrant violations of established standards and behavior related to professional behavior or safe clinical performance may be subject to academic discipline. This may include, but not be limited to, the following: 1) immediate dismissal from the clinical setting; 2) a written warning; 3) probation; 4) temporary exclusion from participation in the course; 5) student dismissal without prejudice. Refer to School of Health Sciences Student Dismissal Procedure.

Student Employment

Students are not to complete any clinical coursework during their hours of employment should they be employed at a clinical facility, nor should students be substituted as staff when in clinical.

Transportation

Students are responsible for their own transportation to and from clinical sites. Assignments may be given for any clinical sites in Tulsa or surrounding area on weekdays and possibly weekends. Clinical assignments cannot be based on carpools, public transportation, or student preferences.

While many sites are located within Tulsa County, there are a few within 50-80 miles of campus. All transportation costs (including parking, tolls, and lodging) are the student's responsibility.

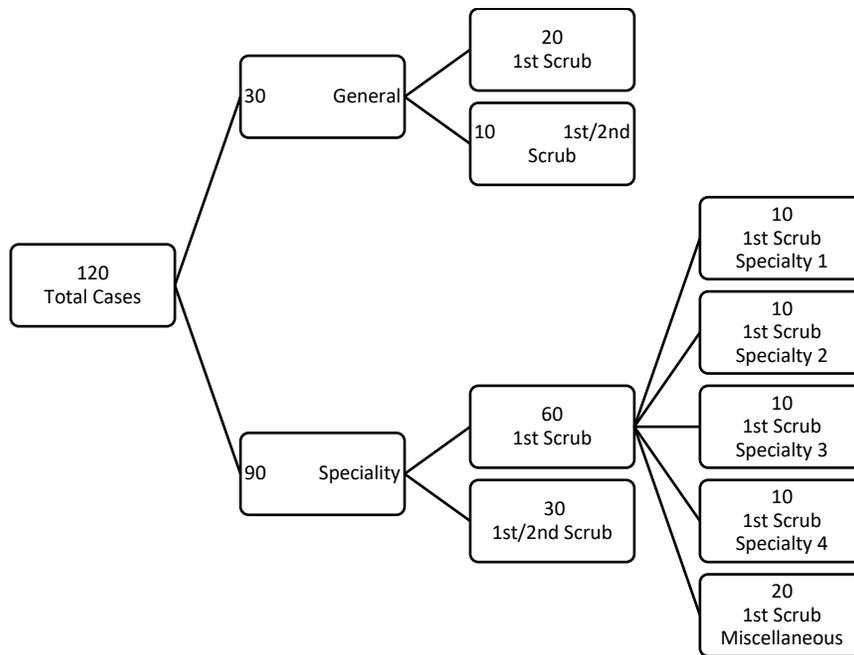
Clinical Errors

Errors do not necessarily reflect clinical incompetence. Reporting the error and learning from it are signs of competent practice. If a student makes an omitted or committed error while providing care for patients, the error must be reported to the preceptor and instructor. The staff responsible and clinical instructor must be notified immediately when an error is discovered.

Clinical Hours and Case Requirements for the Program

- CLINICAL I
 - 4-week schedule 8 hr. days, 4 days week (17) days = 136 clock hours
- CLINICAL II
 - 15-week schedule 7-hour days, 3 days week, Tu-Th = 300 clock hours
- CLINICAL III
 - 15-week schedule 7-hour days, 3 days week, Tu-Th= 300 clock hours

736 clock hours



Role definitions:

A. First Scrub Role (FS)

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

- a) Verify supplies and equipment
- b) Set up the sterile field
 - 1) Instruments
 - 2) Medication
 - 3) Supplies
- c) Perform required operative counts
 - 1) AST guidelines₁
 - 2) Facility policy
- d) Pass instruments and supplies
 - 1) Anticipate needs
- e) Maintain sterile technique
 - 1) Recognize sterility breaks
 - 2) Correct sterility breaks
 - 3) Document as needed

B. Second Scrub Role (SS)

1. The SS role is defined as a student who has not met all criteria for the FS role but actively participates in the surgical procedure in its entirety by completing any of the following:

- a) Assistance with diagnostic endoscopy
- b) Assistance with vaginal delivery
- c) Cutting suture
- d) Providing camera assistance

- e) Retracting
- f) Sponging
- g) Suctioning

Observation Role (O)

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

Counting Cases

ONE PATHOLOGY = ONE CASE

Example: A breast biopsy followed by a mastectomy. One pathology (breast cancer) and both surgeries are general cases, so it counts as one case.

COUNTING MORE THAN ONE CASE ON THE SAME PATIENT

Must be from different specialties or require different setups.

Example: A trauma patient requires a splenectomy and a repair of a LaFort 1 fracture. The splenectomy is a general case and the LaFort 1 is an oral-maxillofacial case so they can be counted as two different cases.

Example: A mastectomy immediately followed by reconstruction would have two separate setups and can be counted as two cases.

DIAGNOSTIC VS OPERATIVE ENDOSCOPY CASES

An endoscopy classified as a semi-critical procedure is considered a diagnostic case and will be counted in the Second Scrub Role. **Only a total of ten diagnostic cases in the Second Scrub Role can be counted toward the total 120 cases.**

An endoscopy classified as a critical procedure is considered an operative case and can be counted in the First or Second Scrub Role as indicated by scrub role criteria.

Example: A cystoscopy is a diagnostic procedure. If an adjunct procedure is performed, such as a cystoscopy with ureteral stent placement, it is considered an operative case.

Obstetrics:

Vaginal deliveries are counted in the Second Scrub Role and **only a total of five can count toward the 120 total cases.**

Safety Policies and Procedures

The following policies exist for the safety of the student, peers, patients, and faculty.

Performance Standards for Admission and Progression in the Surgical Technology Program

The performance standards describe the nonacademic qualifications that faculty and administration consider essential for successful admission and progression in the Surgical Technology Program. These standards were developed upon consideration of several factors, including the minimum competencies expected of any professional, the demands of Surgical Technology education and clinical training, and the welfare of patients who will entrust their health to the OR team. Students accepted into the Surgical Technology Program need to demonstrate sufficient abilities and skills in these core performance standards. The examples corresponding to each standard are not inclusive of all expected abilities. See Appendix C for the performance standards.

Student Illness, Injury or Hospitalization

1. If a student develops a serious illness, injury, or hospitalization of three days or more during the semester, the student must submit a completed Health Status release Form signed by a licensed healthcare provider.
2. After completion by the licensed healthcare provider, the student should:
 - a. make two copies of the form.
 - b. submit original copy to the Program Director to be placed in the student's file; and
 - c. submit one copy to the course facilitator upon return to the first scheduled learning activity. This form must be submitted before the student can attend clinical practicum. It is suggested that students retain one copy for their personal files.
3. The faculty must be notified immediately should the student have an injury. Students are responsible for securing and financing any medical treatment required as a result.

Students who are ill or have a fever are encouraged to stay home.

Latex Allergies

If a student has an allergy to latex, it is imperative for the student to inform faculty and their clinical faculty regarding the specifics of their allergy. These students will be required to complete a Latex Response Plan form to be able to participate in all clinical and laboratory activities. The student must be responsible for preparing a response plan in the event of an adverse occurrence related to latex. Although every effort will be made by faculty to anticipate sources of latex exposure for a student, it is impossible to control all sources of exposure to this allergen during clinical and laboratory experiences.

Bloodborne Pathogens

The management of issues related to infectious diseases and hazardous materials in schools of allied health is of primary concern to faculty and administration. The rapid increase of bloodborne diseases has caused awareness of the need for policies and guidance. Control of microorganisms, which cause disease in humans, is vital in the healthcare environment. Although the risk of infection transmission exists, that risk can be minimized by appropriate education and actions taken to avoid transmission. This policy and guidelines, when implemented, are designed to balance the protection from risk for students, faculty, and patients with the individual rights of privacy and equal opportunity.

It is the policy of the TCC Surgical Technology Program that:

1. All students shall view a PowerPoint presentation and achieve a 90% score on a test regarding measures which prevent the transmission of infection.
2. All students will use infection control measures consistent with Centers for Disease Control (CDC) and OSHA guidelines when caring for every patient in every clinical practicum experience. Since healthcare workers are unable to identify all clients with bloodborne disease, blood and body fluid precautions should be consistently used for all patients. This approach, recommended by the CDC, is referred to as standard or universal precautions. (CDC Guidelines for Infection Control in Health Care Personnel, 1998, modified 2005.)
3. Universal precautions and CDC recommended infection control measures will be reinforced at regular intervals throughout the Program including clinical orientation.
4. Students are to report any exposure to potential infectious diseases or hazardous materials immediately to the supervising faculty.
5. All students are to follow TCC Surgical Technology Program and clinical agency policies and procedures if the student has a significant occupational exposure to potentially infectious or hazardous materials during any practicum experience.

Infection Control

The following guidelines are established for infection control.

1. Handle the blood and body fluids of all clients as potentially infectious.
2. Wash hands before and after all patient or specimen contact. Hands should be washed even if gloves are used. If hands or other body areas have contact with tissue, blood, or other body fluids, they should be washed immediately with soap and water.
3. Wear gloves for potential contact with blood or body fluids.
4. Wear gloves if splash with blood or body fluids is anticipated.
5. Wear an agency-approved filtration mask if airborne transmission is possible.
6. Wear protective eyewear if splatter with blood and body fluid is possible.
7. Place used syringes immediately in nearby impermeable sharps container. Do not replace needle cover or manipulate needles in any way. Do not place hands in sharp containers or wastebaskets even if gloves are worn.
8. Treat all linen soiled with blood/body secretions as potentially infectious.
9. Follow AST Guidelines related to OR attire and aseptic techniques.

OSHA Guidelines

1. **Definition:** A significant occupational exposure is defined as:
 - a. A needle stick or cut caused by a needle or sharp that was potentially or actually contaminated with blood/body fluid.
 - b. A mucous membrane exposure to blood or body fluids (i.e., splash to the eyes, ears, mouth).

- c. Cutaneous exposure involves substantial amounts of body fluid or prolonged contact with body fluid, especially when the exposed skin is chapped, abraded, or afflicted with dermatitis or compromised/broken in any way.
2. **Procedure following exposure:**
 - a. Wound care/first aid should occur immediately following exposure:
 - b. All wounds should be vigorously cleansed with soap and water immediately.
 - c. Mucous membranes should be flushed with water or normal saline solution immediately.
 - d. Other treatment will be rendered as indicated.
3. **Following immediate wound care/first aid measures**
 - a. The student will report immediately to the clinical instructor any incident of exposure if exposure occurs on campus.
 - b. Students will complete a “Student Exposure Form” and submit it to the Surgical Technology Program Director. Instructions for completing this form are listed on the form.
 - c. The clinical instructor will complete a separate form to report student exposure and submit it to the clinical agency and the School of Health Sciences office.
 - d. Complete clinical agency form if exposure occurs during Clinical Practicum experience.
 - e. A clinical instructor or student will notify the Infection Control Officer of the clinical agency involved.
 - f. Follow agency guidelines/recommendations for post exposure care.
 - g. Obtain healthcare from personal healthcare provider, if necessary, as determined by the type of exposure.
4. **Student Responsibilities for Post Exposure Care**
 - a. The student should refer to the Post Exposure and Evaluation Follow-Up document review the procedure for follow-up of exposure to the harmful substance.
 - b. The student is responsible for all medical and laboratory costs incurred for post exposure care.
 - c. The source individual’s blood will be tested per agency protocol as soon as possible after the exposure.

Confidentiality

When caring for patients and working with healthcare institutions/agencies, confidentiality is of major importance. Students are responsible for maintaining confidentiality and complying with policies such as HIPAA and those related to the specific institution. Any personal data collected for the purposes of completing a course assignment is expected to be altered to protect the patient’s identity. Students will engage in personal data collection only in relationship to the requirements of the course. Violations of confidentiality will result in disciplinary action.

Non-Compliance

Noncompliance of the rules may result either in dismissal from the clinical area for the scheduled experience or dismissal of the student to home with a suggestion that the student become compliant and return to the clinical setting.

Pregnancy

Certain occupational hazards may negatively impact pregnancy, and it is the responsibility of the student to alert the instructor of pregnancy during the clinical practicum so the student can be reminded of the environmental

hazards listed within this handbook. Should it be medically necessary for the student to be removed from clinical, they may be able to move forward with any didactic work. The clinical hours would need to be made up which could result in a delay in program completion.

STUDENT GUIDELINES FOR IMMUNIZATIONS

Students are encouraged to use this form as a guide for gathering and submitting the correct clinical requirements information to SurPath. Failure to submit the required immunization and other evidence by the deadline will prevent your entry into clinical rotations. History of having the disease WILL NOT fulfill any of the requirements except for Health Care Provider verification of Varicella.

THERE ARE NO EXCEPTIONS ~ You must complete items 1-10

1. TB – Tuberculin PPD Mantoux Skin Test

One of the following is required:

- a. 1 step TB skin test, OR
- b. QuantiFERON Gold blood test (lab report or physician verification of results required), OR
- c. T-Spot (IGRA) (lab report or physician verification of results required)

If results are positive, clear chest x-ray (lab report or physician verification of results required). Following treatment for a positive test result you will need to annually submit a physician's note stating it is OK to work in public.

2. CPR – Cardiopulmonary Resuscitation Certification

Copy of the front and back of your current American Heart Association (AHA) Basic Life Support (BLS) Provider or Health Care Provider Card or copy of an eCard. Make sure you have signed the card on the back before submission. eCard's do not require a signature. This certification must be renewed every 2 years while a TCC Health Sciences student.

3. Varicella (chickenpox)

One of the following is required:

- a. Evidence of two varicella immunizations received at least 4 weeks apart, OR
- b. Copy of a positive varicella titer (blood test), OR
- c. Health care provider verification of medical history of chicken pox

4. Rubeola (Measles)

One of the following is required for students born after 1956:

- a. Evidence of two MMR (Measles, Mumps, and Rubella) vaccinations received at least 4 weeks apart, OR
- b. Copy of a positive rubeola titer (blood test)

5. Mumps

One of the following is required for students born after 1956:

- a. Evidence of two MMR vaccinations received at least 4 weeks apart, OR
- b. Copy of a positive mumps titer (blood test)

6. Rubella (German Measles)

One of the following is required for students born after 1956:

- a. Evidence of two MMR vaccinations received at least 4 weeks apart, OR
- b. Copy of a positive rubella titer (blood test)

7. Tdap – Tetanus, Diphtheria, and Pertussis

The following is required:

- a. One adult booster dose of Tdap required once since 2005 with Td boosters required every 10 years.

8. Hepatitis B

One of the following is required:

- a. Evidence of three hepatitis B immunizations administered in a 6-month sequence, OR
- b. Copy of a positive hepatitis B titer (blood test), OR
- c. Completed official Tulsa Community College declination.

NOTE: Students are strongly encouraged to complete this immunization.

9. Flu – Seasonal Influenza Vaccine

One of the following is required:

- a. Copy of a current annual seasonal flu vaccine, OR
- b. Completed official Tulsa Community College declination.

NOTE: Flu season begins September 1st through March 31st of the following year. Vaccinations given outside of the Flu Season will not be considered. Deadline for annual submission of this vaccination is October 31st during the current flu season.

10. SARS-COV-2 Vaccine

One of the following is required:

- a. Proof of vaccination, OR
- b. SOHS Student Medical Exemption Request form submitted for review and approval, OR
- c. SOHS Religious Exemption Request form submitted for review and approval.

Vaccination Allergy Information

If a student has a documented allergy to any of the above vaccine requirements, documentation from a health care provider must be submitted. Students completing clinical rotations may need to meet additional requirements as provided by the clinical agency to the student.

Documentation Instructions

All immunizations/vaccines must be completed as instructed above. SurPath is a secure online storage facility for all your important documents. Please follow the order instructions given to you for creating an account on the SurPath website to order your background check and storing documents in your immunization tracker. At the end of your online order process, you will be prompted to upload specific documents required by TCC for immunization, medical or certification records.

Appendices

The following documents are considered appendices to the Surgical Technology Program Handbook. They should be used in conjunction with the handbook. They contain useful information and forms which may be used at the point of need.

- Appendix A: Tips for Success in The Surgical Technology Program
- Appendix B: Clinical Behaviors
- Appendix C: Essential Functions
- Appendix D: Uniform and Professional Appearance
- Appendix E: Student Exposure

Appendix A: Tips for Success in the Surgical Technology Program

Surgical Technology is an exciting and fulfilling career, and the faculty and staff of the program are committed to providing the curriculum and clinical experiences necessary for you to achieve your goal. Success in the Surgical Technology Program will be equal to your commitment, and the more you know, the better your choices can be. If you implement these tips in the first and second semesters, you will be able to modify them for sequential semester success.

The following are some best practices for facilitating your success.

1. **Attempt to work no more than 20 hours per week, if possible.**
2. **Stay healthy.** Eat well, get some quality rest and exercise in the fresh air every day. Fast food may be easy, but the lack of high-quality nutrition will take its toll on your body. Make time for enough sleep and rest. In the middle of a busy school schedule, sleep is often sacrificed first. Create and stick to a formal exercise plan, even if it is just parking in the farthest space from your class.
3. **Join a study group.** Support each other while learning!
4. **Utilize your syllabus and Blackboard learning maps.** The syllabus contains information critical to your success.
 - The Unit Objectives/Learning Outcomes are the source of exam items.
 - Be sure you understand what is being asked of you in each objective and how you will be expected to display your mastery of the objective.
 - Ask your instructor for examples if you are unsure of what is expected.
 - **Use your instructor's office hours** for help with review, testing concerns and clarification. Your instructor has office hours per week dedicated to helping you. If possible, schedule an appointment.
5. **Be sure you understand your assignments.**
6. **Study Effectively and Efficiently.** Reading complex textbooks is quite different than recreational reading. Use your personal learning preferences. Do you not know them? Try this website:
<http://www.learning-styles-online.com/inventory/>
7. **Family support.** Family support has been linked to success in allied health programs. Reliable transportation and childcare are both necessary to attend all course activities.
8. **Utilize the available resources for your course(s):**
 - Utilize the student resources from your textbooks.
 - Utilize the online resources from your textbook as available.
 - Make use of the library.

Appendix B: CLINICAL BEHAVIORS

A. EXPECTED CLINICAL BEHAVIORS

The following behaviors are considered expected behaviors for a student to demonstrate in a clinical setting.

- Accept responsibility for own behavior, practice, and scholarship.
- Adequately prepare, attend, and participate in all clinical practice sessions unless excused by instructor.
- Arrive and depart from the clinical setting promptly.
- Exhibit professional appearance and behavior as described in this handbook.
- Maintain patient dignity, privacy, confidentiality, and security of patient information (HIPAA).
- Demonstrate ethical behavior as described in the Association of Surgical Technology (AST) Code of Ethics.
- Recognize own limitations when delivering patient care and seek guidance as needed.
- Promote personal growth by self-assessment, self-disclosure, and utilization of feedback.
- Display a positive attitude, verbally and non-verbally.

B. EXAMPLES OF UNPROFESSIONAL/UNETHICAL CONDUCT

- Display a lack of respect for the dignity of and uniqueness of patients.
- Leaving a clinical site or department without notifying the instructor.
- Falsifying time or documented procedures.
- Disclose personal information about a patient or family.
- Attending clinical while sleep deprived or sleeping during clinicals. Students should be off shift (not work in any capacity) at least 8 hours before the clinical rotation begins.
- Theft from a clinical site
- Taking photographs or videos while at clinical.
- Making comments about the clinical site and or the college on social media.
- Violation of HIPAA laws.

C. EXAMPLES OF UNSAFE CLINICAL BEHAVIOR

- Performing unauthorized alteration in medication dosage.
- Failing to use expected informed clinical judgment in the delivery of care.
- Failure to report through proper channels the unsafe or illegal practice of another person who is providing care.
- Engaging in activities for which the student is unprepared or unknowledgeable or which fall outside the realm of standardized surgical technology practice.
- Endangering the welfare of a patient through their own physiological or mental health status.
- Attending clinical while impaired or intoxicated.

If a student is removed from a clinical site by request of the clinical facility due to safety issues, unprofessional misconduct, or dereliction of duties, the student will be referred to the program director for possible immediate dismissal from the program. [00]

Appendix C: Essential Functions

Students admitted to the Surgical Technology program must demonstrate sufficient physical and emotional health to participate in academic and laboratory activities and to practice clinically with the public in a safe and effective manner. Students with disabilities are expected to perform all the essential functions of the program with or without reasonable accommodation. The College will work with the students and the AR to provide, if possible, reasonable accommodation. While the College will make every effort to work with our students with disabilities to accommodate their disability related needs, it is important to note we are not required to provide requested accommodations that would fundamentally alter the essential functions, technical standards, or academic requirements of the Surgical Technology Program, or result in an undue financial or administrative burden.

Students may not come to class or participate in Clinicals or Program activities impaired by alcohol or drugs, including marijuana.

Your role as a student in one of the TCC School of Allied Health programs is considered a “safety-sensitive position.” This includes tasks or duties that can affect the safety and health of the student or others. Examples include (but not exclusive to):

- patient care
- working with sharp supplies such as surgical scalpels and needles.
- using power equipment such as saws, lasers, drills, etc.
- ability to escape injury and to prevent injury to others.
- working with hazardous materials, including pharmaceuticals, disinfectants, and other substances
- working with volatile materials, including compressed gases and gas anesthetics

Essential Functions for Surgical Technologists:

1. **Interpersonal** – interacts with patients and surgical team members with a variety of social, emotional, cultural, and intellectual backgrounds. Must be flexible and capable of reacting to changing circumstances in a calm manner with professional decorum.
2. **Critical Thinking** – Sufficient for clinical judgment and problem solving; Concentrate and focus for prolonged periods of time.
3. **Communication** – Ability to interact with others orally and maintain professional communication.
4. **Mobility** – Physical abilities sufficient to move and bend; lift a minimum of thirty pounds; push pull equipment weighing up to three hundred pounds.
5. **Motor Skills** – Gross and fine motor abilities to grasp, grip and hold with hands. Ability to work with and manipulate fine surgical instrumentation and suturing needles.
6. **Hearing** – Auditory ability sufficient to hear the surgical team members through a surgical mask with background noise.
7. **Visual** – sufficient for observation in full or dimmed light. Visual near acuity of 20 in. or less with clarity. Distinguish depth, color, and spatial attributes of images.
8. **Tactile** – sufficient for handling and manipulating small surgical instrumentation.
9. **Physical Condition** – condition and stamina sufficient to lift and assist in moving the anesthetized patient; move equipment; ability to stand for extended periods of time during surgical procedures.

Behavioral/Social Skills and Professionalism:

Program applicants/current surgical technology students must:

1. Demonstrate attributes of empathy, integrity, concern for others, interpersonal skills, interest, and motivation.
2. Possess the emotional well-being required for use of their intellectual abilities, the exercise of sound judgment, the prompt completion of all responsibilities regarding the evaluation and care of patients.
3. Be able to adapt to ever changing environments, display flexibility, and learn to function in the face of uncertainties and stresses, which are inherent in the educational process, as well as the clinical problems of many patients.
4. Be able to maintain professional conduct and appearance, maintain patient confidentiality and operate within the scope of practice.
5. be assertive, delegate responsibilities appropriately, and function as part of a medical team. Such abilities require organizational skills necessary to meet deadlines and manage time.

Environmental Exposure Risks:

Risk	Examples
Bloodborne pathogens	Hepatitis B, Hepatitis C
Sharps injuries	Accidental sticks from suture needles or sharp instrumentation
Latex allergy	Surgical gloves and medical supplies
Smoke plume	Laser and electrocautery (Commercial suction available for protection)
Chemical	Gases, cold sterilant, cleaning chemicals
Musculoskeletal	Static postures, lift injuries
Radiation exposure	X-ray imaging – fluoroscopy (lead aprons available for protection)

Appendix D: Surgical Technology Uniform and Professional Appearance Requirements

Students in the TCC Surgical Technology Program have a designated uniform, which is to be worn during all lab and clinical experiences. In addition to the uniform, there are requirements regarding the student's overall professional appearance. This document speaks to these requirements.

A. PROFESSIONAL APPEARANCE REQUIREMENTS

A surgical technology student is expected to demonstrate professionalism through appropriate personal appearance and hygiene. This applies when wearing the student uniform while administering direct patient care or when wearing business attire and lab coat for community experiences. Only the approved student uniform is to be worn during clinical practicum experiences. TCC Surgical Technology faculty place students in the available clinical spaces and it is the student's responsibility to comply with the facility appearance requirements. To present a professional image, the student should meet the standards of appearance listed below.

1. Students are to wear the official Surgical technology Program uniform in all clinical settings unless the setting or agency requires other attire.
2. A picture ID badge is always to be on the student while in a clinical practicum experience and should be worn above the waist with the picture facing forward.
3. No jewelry is allowed in the OR.
4. No visible facial or body piercing jewelry is allowed. No objects of any type may be worn on the tongue, lips, eyebrow, cheek, ear gauges/bars, etc. The student must comply with the professional appearance policy of the clinical agency in all cases.
5. Hair must be clean, neat, natural color (not pink, blue, etc.) and worn off the collar and back from the face while in uniform to meet health and safety standards. Decorative hair items (e.g., ribbons, ornate or colored barrettes, hats, scarves, and combs) may not be worn. Eccentric hair styles (such as Mohawk) are not permissible in lab or clinical settings. Closely trimmed beards (less than ½ inch from the skin), sideburns, and mustaches must be clean and must meet facility policy for client safety.
6. Facial cosmetics should be minimal and in good taste. The manicured length of fingernails should not exceed length of fingers with palms turned upward. Nails should be clean with "hangnails" cut. Nail polish, artificial nails, nail wraps, or extenders are not permitted in the clinical setting.
7. Students should maintain personal hygiene including oral care and be free from offensive body odor. No cologne, after-shave, scented lotions and/or perfumes are permitted.
8. Smoking is not allowed on clinical site grounds.

9. The uniform must be clean and wrinkle-free. Undergarments must always be worn and cannot be visible. When business attire is allowed, the student must be clean, neat, and dressed conservatively. Thin or see-through clothes, sleeveless tops, sun dresses, halter tops, tank tops, T-shirts, shorts, mini dresses, jeans, or denim, sweat tops or pants or jogging suits are not permitted while engaging in clinical activities or officially representing the Surgical Technology Program.
10. Shoes are to be closed toed nursing or tennis shoes of a neutral color. Nursing type clogs are permitted.
11. No gum chewing is permitted in the OR.
12. When functioning outside the official student role, students are not permitted to represent themselves as TCC surgical technology students. They cannot wear any identifiable part of the student uniform (e.g., student picture ID, clothing with TCC embroidery).

B. NON-COMPLIANCE WITH UNIFORM AND PROFESSIONAL APPEARANCE STANDARDS

If a student does not comply with the standards and requirements listed within this document, the clinical faculty can:

- a. Dismiss the student from the clinical area for the scheduled experience, OR
- b. Dismiss the student to home and suggest the student become compliant and then return to clinical.

Any missed clinical time related to this issue is counted as an absence.



HEALTH STATUS RELEASE

Student Name: _____

TCC ID#: _____

Release Date: _____

TULSA COMMUNITY COLLEGE
SURGICAL TECHNOLOGY
7505 W. 41ST ST.
TULSA, OK 74107

TCC Surgical Technology Program:

_____ is under my care for the following condition(s).

I have examined and assessed the above individual and certify that he/she can return to class and perform ALL clinical activities in a way that will not harm the student or compromise patient safety.

Licensed Healthcare Provider:

Signature: _____

Printed Name and Title: _____

Address: _____

Telephone Number: _____

STUDENT EXPOSURE FORM

1. Last Name, First Name, Middle Initial _____

2. TCC ID#: _____ 3. DOB: _____

4. Address _____

5. Phone #: _____ 6. Department _____

7. Campus/Clinical/Lab/Room#: _____

8. Current Course: _____

9. Date/Time/Place Exposure Occurred: _____

10. Route of Exposure (needle stick, bite, etc.) _____

11. Description of Exposure: _____

12. Description of job being performed at the time of exposure: _____

13. Identify blood/body fluid source (which lab/clinic/hospital/person did it come from?) _____

14. Action taken following the exposure: _____

15. Was protective equipment available? _____

16. List protective equipment worn (if not wearing PPE (Personnel Protective Equipment), why not?) _____

17. Treatment received and where: _____

18. Hepatitis B Vaccination Status:

_____ I have completed the Hepatitis B _____ I have taken one (1) injection of the series.
_____ I have taken two (2) injections of the series _____ I have not taken the Hepatitis B vaccine series.

19. Last date of tetanus booster: _____

Signature of Exposed Student

Date

Signature of Instructor

Date

Signature of Program Director

Date

INSTRUCTOR'S REPORT OF STUDENT EXPOSURE

1. Student's Name: _____

2. TCC ID #: _____

3. Place of Exposure: Metro _____ NEC _____ SEC _____ West _____

Other (i.e., lab, clinic, etc.): _____

4. Date of Exposure: _____ 5. Type of Exposure: _____

6. Description of the Exposure (how the exposure occurred and the exposed student's duties): _____

7. Describe the route of exposure and actions taken immediately thereafter: _____

8. Name of hospital, clinic, or doctor sent to for treatment: _____

9. Name(s) of witnesses to the exposure: _____

Signature of Instructor

Date

Signature of Program Director

Date

Post-Exposure Evaluation and Follow-Up for Students

Policy

1. The potentially exposed student must notify the supervising instructor and the employee health office if the exposure occurs in an off-campus health agency setting.
2. Students who have been potentially exposed, either on campus or in a clinical agency area, must complete a Student Exposure Form.
3. If the potential exposure occurred while the student was in an off-campus agency, that agency's forms must also be completed.

Procedure

1. Notify supervising instructor and report to the TCC Director of Risk Management or employee health office (if off campus).
2. Complete appropriate actions as determined by the type of exposure.
3. Complete appropriate exposure forms.

Guidelines for Immediate Medical Care

1. The student is responsible for medical and laboratory costs.
2. The source individual's blood will be tested as soon as possible. The student is responsible for medical costs related to this test if the facility will not pay for the test.

The results of the source individual's testing will be available to the student and the student will be informed of regulations concerning disclosure of the identity and infectious status of the source person. [OBJ]

PROGRAM POLICY AGREEMENT



PROGRAM POLICY ACKNOWLEDGEMENT & AGREEMENT

I acknowledge I have access to the:

TCC Clinical Handbook

The above documents are on the Allied Health Connections Blackboard site. I understand that I am accountable for reading and complying with all policies and procedures of the TCC Surgical Technology Program. It is my responsibility to ask for clarification regarding any policy or procedure I do not understand. I also understand that it is my responsibility to read new policies or procedures issued by the School of Health Sciences.

I understand that breach of any part of the Surgical Technology Student Handbook may result in counseling, probation, and/or dismissal from the Program, depending on my actions.

Print Name _____ TCC ID # _____

Signature _____ Date _____

THIS COPY IS TO BE SIGNED AND PLACED IN THE STUDENT'S PERMANENT FILE