



# **Dartmouth-Hitchcock Workforce Readiness Institute**

***2018-2019 Student Handbook & Program Catalog***  
**First Edition**

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# D-H Workforce Readiness Institute Student Handbook and Program Catalog

## Dartmouth-Hitchcock Workforce Readiness Institute

### **WRI Mission Statement:**

*To build a sustainable workforce pipeline that supports the work and mission of D-H through the delivery of apprenticeship and professional training programs.*

The Dartmouth-Hitchcock (D-H) Workforce Readiness Institute (WRI) is thinking differently about how we identify a sustainable source of qualified and engaged workers who bring the skills, commitment and values we need to provide the best patient care. The WRI was created to deliver apprenticeship and professional training programs that provide workers with the knowledge and skills they need to enter into health care careers.

## WRI Admissions, Logistics and Records

### **Equal Opportunity / Non-Discrimination**

The WRI ensures it complies with D-H's Equal Employment Opportunity and Non-Discrimination Policy (Policy ID: 962) and all applicable federal, state, and local laws governing nondiscrimination during admissions. If an applicant with a disability (mental or physical) needs reasonable accommodations for any part of the application process, please contact the WRI at 603-653-3229.

### **Admission Requirements**

Please refer to the program of interest for details about the application and admission process.

All WRI trainees must comply with D-H's current Employment Requirements Policy - Employees, Covered Individuals, Job Applicants which includes pre-employment screening activities such as criminal background check, health assessment and drug test (Policy ID: 453), Substance Abuse and Drug-Free Workplace Policy (Policy ID: 476), and the Fitness for Duty Policy (Policy ID: 511).

It is at the discretion of each medical facility with which the WRI has a clinical site affiliation agreement, to implement a standard protocol regarding trainee admittance for educational purposes. Trainees should be aware that some medical facilities will require a drug screening on site prior to the clinical rotation or a random drug screening during the clinical rotation. Trainees should be prepared to abide by set protocols and incur any associated fees that may arise in the safety screening process to which the program's clinical site affiliates adhere.

## Schedule

### **Program Dates:**

Please refer to the program of interest for specific class start and end dates.

### **Class Cancellations:**

Students will be formally notified in writing via email if there is a cancellation of classes for any reason.

### **Recognized Holidays:**

Each year, the WRI will observe the following D-H system-wide recognized holidays:

- New Year's Day
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving Day
- Christmas Day

Please refer to the program of interest for specific breaks and schedule details.

## Identification and Replacement Badges

NH State Law requires health-care providers and others who come into direct contact with patients must wear identification that includes name, licensure status and staff position. All trainees are required to have their photo ID card in their possession at all times while on the premises. The photo ID badge shall be worn during all working hours.

- If a trainee loses, misplaces or damages their identification badge, it must be replaced as soon as possible.
- The trainee must report this loss or damage to their Instructor, Clinical Coordinator or Program Director immediately.
- The trainee will then put a request in to receive a replacement badge from DHSM Safety and Security.
- All assignments and/or time missed in class, lab or clinical as a result of the trainee not having identification must be made up before the course ends.

## Transportation

The trainee is responsible for all costs associated with their transportation to and from the program and all assigned clinical education sites. The program will not make any allowances for a trainee who is unable to be in a didactic or clinical course due to lack of transportation.

## Dismissal/Termination

A trainee is subject to dismissal from the WRI for reasons which include but are not limited to:

- Failure to pass didactic courses with the minimum average as determined by the course and/or program
- Failure to meet course requirements
- Breach of Confidentiality

- Cheating, plagiarizing or falsifying documents
- Unprofessional conduct
- Failure to comply with D-H's or WRI's policies
- Fitness for Duty – inability to perform safely all essential functions of the trainee role in a program

A trainee will be notified stating the reason for the dismissal. The trainee may file an appeal with the Program Leader/Director within seven calendar days that includes supporting documentation of why the dismissal should not be upheld. The Program Leader/Director will respond to the appeal within seven calendar days.

## Withdrawal

A trainee may cancel their Enrollment Agreement any time prior to midnight of the third business day after the date of signing it.

Any trainee expressing a desire to withdraw from the program after this time should discuss the situation with the Leader/Director of the program in which the trainee is enrolled prior to resigning or withdrawing. If, after this consultation, the trainee determines he or she is going to withdraw, the trainee must complete, sign and submit the WRI Withdrawal form to [wri@hitchcock.org](mailto:wri@hitchcock.org).

Any trainee who does not attend class or clinical for three consecutive days without contacting the Instructor or Leader/Director of their program will be considered withdrawn on the last day attended.

If a trainee withdraws due to circumstances of extreme hardship and they wish to reapply at a later date for completion it will be considered.

## Re-Entry

A trainee that has resigned or withdrawn in good standing with the program may re-enter the program, if it is within 1 year and if there is an available slot for that trainee. The trainee may be required to re-take classes based on an evaluation of a re-entry practicum, and will be subject to the policies, rates, schedule, etc. at the time of re-entry. Each case will be evaluated on an individual basis and the Program Leader/Director for the program in which the trainee is enrolled will make a final decision.

## Refund Policy

Trainees will receive a full refund of all monies paid within 30 days if:

- The trainee withdraws from the program or course on or before the first day of instruction, less any program-specific administration fees not to exceed \$150.  
*or*
- The school procured the trainee's enrollment as the result of any false representations in the written materials used by the school or in oral representations made by or on behalf of the school.

Trainees who withdraw or are dismissed from the program will receive a refund on tuition monies paid within 30 days, less any program-specific administrative fees not to exceed \$350, per the following refund schedule:

- On or before the last day of the second week of class: 100%

- During the first 50% of the instruction period: 50%
- After 50% of the instruction period: no refund

All efforts shall be made to refund prepaid amounts for any books, supplies or other charges from the school unless the trainee has consumed or used those items and they can no longer be used or sold to new trainees, or returned by the school to the supplier. This does not include any costs incurred by the trainee to purchase program-required materials such as books, supplies, etc.

Refunds for trainees receiving benefit from federal programs shall be in accordance with federal policy, rules and regulations.

Notice of withdrawal must be done in writing to the Leader/Director in which the trainee is enrolled.

## Probation

A student may be placed on probation for failure to satisfactorily achieve didactic and /or clinical objectives. These can include but are not limited to:

- Incomplete assignments
- Infractions of policies
- Cheating
- Inability to apply didactic knowledge to the clinical setting

Probation length will be determined by the behavior or didactic action plan created and the documented corrective action required. If a student is placed on probation the minimum time of probation will be 30 days. If during the probation period the actions are repeated the student may be dismissed from the program.

## Grievance

The WRI maintains an “open door” philosophy that encourages all trainees and staff to address necessary concerns with leadership.

If a trainee has a grievance, then the trainee should try and resolve the issue by discussing with the responsible person. If the trainee does not feel that the problem has been resolved then they should escalate, as necessary, in the following order:

- Course Instructor
- Program Leader/Director

If a trainee wants to further escalate their grievance, they may petition the Appeals Committee within seven days of a grievance discussion with the Program Leader/Director. The trainee must submit documentation containing written, objective statements, concerning their grievance which the Program Leader/Director will forward to the Appeals Committee for review. Members of the Appeals Committee include the Director of Surgical Services, WRI Administrator and selected staff. The decision of the Appeals Committee is final and will be given within seven days.

Upon exhausting all avenues of the grievance policy at the school, a student may contact the Office of Career School Licensing:

**Department of Education**

Office of Career School Licensing  
101 Pleasant Street  
Concord, NH 03301  
(603) 271-6443

If a Faculty member has a grievance, then they should try to resolve the issue by discussing with the responsible person. If the faculty member does not feel that the problem has been resolved then they should escalate, as necessary, in the following order:

- Program Director
- D-H WRI Administrator

At any point, the faculty member has the right to contact D-H Employee Relations for guidance: (603) 653-1570 or [Employee.Relations@Hitchcock.org](mailto:Employee.Relations@Hitchcock.org). Employee resources for Faculty members can be found on: <http://one.hitchcock.org/intranet/departments/employee-relations>

**Transfer of Credits**

WRI programs have limited transferability. All previous work and education experience will be reviewed and applied as applicable. Certificates and credit may not be portable if withdrawal takes place prior to completion/certification.

**Records**

Trainee information pertaining to admission, health, attendance, and grades for academic and clinical are recorded. The trainee records will be kept for five years, with the exception of transcripts and final certificates which will be kept permanently.

All trainee records, including academic and clinical, will be secured in a safe accessible locked storage location, which ensures the confidentiality of program records. A Certificate will be awarded as evidence of completion of the program. Any copies of the trainee's records or certificate required for taking any final certification/licensing exams will be provided.

**WRI Professional Conduct, Health and Safety****Patient Record Confidentiality Policy**

Trainees must comply with the D-H Privacy Group Statement on the Privacy and Confidentiality of Patient Information Policy (Policy ID: 7563), and sign the D-H Confidentiality Agreement prior to participation in the program, and any policy at a clinical affiliate site.

**Substance Abuse Policy**

Trainees must comply with D-H's current Substance Abuse and Drug-Free Workplace Policy (Policy ID: 476), and the Fitness for Duty Policy (Policy ID: 511).

## Cell Phone and Pager

The use of cellular phones is prohibited in the classroom, lab and clinical at all times. Trainees must turn off their cell phone and pager while attending their class, lab or clinical. The ringing of these devices disrupts the class and instruction being delivered. Phones can be placed on silent/vibrate mode if the instructor is notified ahead of time that there is a specific situation that may arise. Any infraction of this rule could result in a Behavior Warning.

## Trainee Professional Conduct Policy

- Trainees should adhere to all WRI Policies and Procedures and applicable program-specific Policies and Procedures.
- If a trainee has a concern with a particular course, he or she should first talk to the course instructor. If the concern is not resolved, the trainee should refer to the WRI's Grievance Policy.
- Trainees must conduct themselves in a professional manner at all times. Disrespectful or disruptive behavior will not be tolerated.
- Possession of drugs, alcohol, or weapons or any theft of property is grounds for dismissal.
- Information of a confidential nature learned in the courses of training is to remain confidential. Any failure to protect Patient Health Information is grounds for dismissal.
- Punctuality is a demonstration of professional behavior and all trainees are expected to be in class on time.
- Trainees should demonstrate responsibility and accountability in all aspects of the educational process.
- Trainees should demonstrate appropriate communication, interactions and behavior toward other trainees, faculty, and clinical staff.
- Trainees are not allowed to bring visitors to class or the clinical sites. This includes relatives, friends, acquaintances, and pets.
- Disruptive behavior such as inter-classmate chatting, the discussion of other classmate's grades or the abilities of another classmate could also result in a Behavior Warning.
- Demonstrate academic integrity.
- Plagiarism of any type is not tolerated and could lead to disciplinary measures up to and including dismissal.

## Program Expectations

- Meets standards/competencies for course completion. Completes all assignments
- Maintains classroom work area, equipment, and supplies in a manner conducive to efficiency and safety
- Participates fully in lecture, laboratory, cooperative learning activities, and clinical experiences
- Meets attendance requirements for class, laboratory, and clinical
- Maintains personal appearance and hygiene
- Complies with dress code

- Demonstrates effective written and oral communications
- Displays socially appropriate behaviors
- Demonstrates problem solving skills
- Travels to clinical sites (as required by program curriculum)
- Follows all procedures and policies of clinical sites
- Maintains patient/client confidentiality
- Follows the proper chain of command to resolve problems
- Meets technical standards (determination is made on an individual basis as to whether or not necessary accommodations or modifications can be made reasonably while assuring patient safety)

### Understanding Safety and Professionalism in Clinical Practice

Unsafe clinical practice shall be deemed to be behaviors demonstrated by the trainee which threaten or violate the physical, biological, or emotional safety of the patient assigned to his/her care.

The following are examples to serve as guidelines for the trainee's understanding of **unsafe clinical practices**. Examples are not inclusive:

- **PHYSICAL SAFETY**: unsafe behaviors: inappropriate use of side rails, wheelchairs, positioning straps and equipment, lack of proper protection of the patient which leads to falls, lacerations, burns, etc.
- **BIOLOGICAL SAFETY**: unsafe behaviors: fails to recognize errors in aseptic technique, attends clinical site while ill, performs technical actions without appropriate supervision, fails to seek help when needed, etc.
- **EMOTIONAL SAFETY**: unsafe behaviors: threatens patient, make patient feel fearful, provides patient with inappropriate or incorrect information, fails to seek help when needed, and demonstrates unstable emotional behaviors.

Unprofessional practice shall be deemed to be behaviors demonstrated by the trainee which are inappropriate to the trainee-instructor, trainee-personnel, or trainee patient-interactions which may be taken to be unsafe practice or to reflect negatively upon the Program or Instructor.

**Examples of unprofessional practice may include, but are not limited to, the following:** Verbal or non-verbal language, actions, or voice inflection which compromise rapport or working relations with patients, family members of patients, staff, physicians, or instructors which may compromise contractual agreements and/or working relations with clinical affiliates, or constitute violations of legal or ethical standards.

### Health Insurance Policy

Trainees who attend clinical training for academic course work are required to have health insurance coverage **prior** to participating in this part of the curriculum. Trainees are also required to have completed health screen documents prior to entering clinical.

## Accidents/Incidents

If the trainee is involved in any kind of accident or incident within the classroom or at the clinical site, the instructor and supervising clinical specialist, should be notified immediately. Hospital procedures should be followed with respect to Incident/Accident reports. A copy of all such reports should be given to the Program Director/Leader to be placed in the trainee's file.

## Student Employment / Remuneration Policy

The essential purpose of the clinical site is to provide an opportunity to utilize the skills in which the trainee was trained, at a pace and in an environment approximating the demands of an employment situation. All trainee activities associated with the curriculum, especially while students are completing clinical rotations or practicums, will be educational in nature. While in the training portion of a WRI program, WRI trainees will not be substituted for hired staff personnel within the clinical institution in the capacity of the role for which they are training.

## WRI Resources and Licensure

### Committees

Committees assist with program management, planning, and evaluation.

**Selection Committee:** Selection Committees for each program are responsible for selecting trainees for upcoming classes. Members may include the Program Director/Leader, Instructors, Workforce Readiness Institute staff, and selected D-H surgical, clinical or administrative staff.

**The Surgical Technology Program Advisory Committee:** This is an advisory committee to the Surgical Technology Program. The Program Advisory Committee meets twice a year. Members include sponsoring institution administration, current student, program graduate, practicing CST, physician, faculty member assigned to the program, an employer and public member. Final approval of any program material, management and planning decisions lie with Program management.

**Appeals Committee:** The Appeals Committee meet only when needed to review a student grievance. Members include the Director of Surgical Services, WRI Administrator and selected staff.

### Licensure/Ownership

Mary Hitchcock Memorial Hospital (MHMH), which is part of the Dartmouth-Hitchcock health system, maintains ownership and control of the D-H WRI. MHMH is accredited by the Joint Commission on Accreditation of Healthcare Organizations. The Dartmouth-Hitchcock Workforce Readiness Institute is licensed with the Office of Career School Licensing, New Hampshire Department of Education.

#### Workforce Readiness Institute:

Address: 30 Lafayette St.

Lebanon, NH 0376

Phone: (603) 653-3229

Website: [go.d-h.org/wri](http://go.d-h.org/wri)

**Dartmouth-Hitchcock Health:**

Address: 1 Medical Center Drive  
Lebanon, NH 03766

Phone: (603) 650-2500

Fax: (603) 650-8034 (TTY/TTD)

Website: <http://one.hitchcock.org/lebanon>

**Joint Commission on Accreditation of Healthcare Organizations:**

Address: One Renaissance Blvd  
Oakbrook Terrace, IL 60181

Phone: (630) 792-5000

Fax: (630) 792-5005

Website: <http://www.jointcommission.org>

**Contact Information****Workforce Readiness Institute:**

30 Lafayette St.

Lebanon, NH 03766

Email [WRI@Hitchcock.org](mailto:WRI@Hitchcock.org)

Sarah Currier, WRI Administrator

[Sarah.J.Currier@Hitchcock.org](mailto:Sarah.J.Currier@Hitchcock.org)

**Surgical Technology Program:**

[CST.Training@hitchcock.org](mailto:CST.Training@hitchcock.org)

Christina Russo (Nina) BS, CST, Program Director

Email [Christina.M.Russo@Hitchcock.org](mailto:Christina.M.Russo@Hitchcock.org)

**Pharmacy Technician and Medical Assistant Programs**

Jessica O'Connor, Administrator

Email [Jessica.W.O'Connor@hitchcock.org](mailto:Jessica.W.O'Connor@hitchcock.org)

**Ophthalmic Assistant Training Program**

Jennifer Locke, Administrator

Email [Jennifer.L.Locke@hithcock.org](mailto:Jennifer.L.Locke@hithcock.org)

## Medical Assistant Apprenticeship Program

### Program Overview and Class Schedule

#### PROGRAM OVERVIEW

Medical assistants (MAs) perform a variety of administrative and clinical tasks as an integral part of the clinical care team. They interact directly with patients under the supervision of a provider and/or nurse manager. While not an inclusive list, some of the many functions the MA will perform include: rooming patients and obtaining initial health histories, performing tests (i.e., EKGs, hearing/breathing tests, strep throat assays), assisting providers with procedures, performing venipuncture, administering immunizations, and documenting efficiently in the electronic medical record. The job is fast-paced, interesting, and rewarding with patient safety and customer service guiding each and every interaction.

The Medical Assistant Apprenticeship Program is composed of two components: an initial eleven-week pre-apprenticeship educational program (“training program”), followed by a 2,000 hour registered apprenticeship (“apprenticeship”). At the end of the 11 week training program apprentices will sit for the Certified Clinical Medical Assistant exam and upon passing will earn their Certified Clinical Medical Assistant (CCMA) credential.

This full time hands-on training program includes both classroom and clinical training. Classes offered during the program include Anatomy and Physiology, Medical Terminology, Pathophysiology, Pharmacology, Introduction to Healthcare, Healthcare Documentation, Healthcare Professional Communications, Healthcare Customer Service Skills, Medical Assistant Standards and Practices, and Clinical Medical Assisting Lab.

#### HOURS OF OPERATION AND SCHEDULE

Though times may vary, classroom hours will be Monday through Friday from 7:45am – 4:15pm. The instructor and Program Leader are available to the students when they are in the classroom and as needed after hours.

### Application Process and Admission Requirements

All interested applicants are invited to a mandatory information session. At the conclusion of the information session and candidate that would like to continue in the selection process can sign up to complete the role specific assessment test.

The application process includes:

- 1. Application package:**

- Resume
- Cover letter that outlines why you are interested in the Pharmacy Technician Apprenticeship Program and how it aligns with your future career goals
- Letter of reference – professional reference preferred

- 2. Participation in a structured interview process**

### 3. Pre-Requisites:

- Proof of Age; applicants must be 18 years or older on or before start date of class year
- High school diploma, HiSET or GED (Graduate Equivalence)

The Medical Assistant Apprenticeship Program Selection Committee will make decisions and inform all selected candidates. This is a competitive application process and completion of all admission requirements does not guarantee acceptance. If selected, it is the applicant's responsibility to acknowledge acceptance to confirm the spot.

## Program Costs

### TUITION:

There is no tuition paid by students for the Medical Assistant program as participants are hired as D-H employees at the outset of the program.

### TEXT BOOKS:

Text books are supplied by the program at no cost to students. Students may also choose to purchase additional learning materials during the program to supplement text books and any course material.

### PERSONAL SUPPLIES:

Apprentices are responsible for purchasing any personal supplies needed for the program, including but not limited to:

- **Footwear:** closed toe and heel shoes
- **Black Scrub Pants**

## Expected Behavior Standards

### ATTENDANCE POLICY:

The Medical Assistant Apprenticeship Program has established an attendance policy to facilitate the acquisition of the knowledge, skills and competency requirements of the program.

The Apprentice is required to follow the attendance policy, as outlined below:

- Regular class attendance is essential to proper academic progress and is expected. Satisfactory attendance is considered a vital part of each apprentice's performance. Absences could result in a lowered achievement rating and an undesirable record. Absences in excess of 3 days within the 11-week training program may cause the apprentice to be dismissed from the program. Such determinations will be made on an individual, case-by-case basis.
- Tardiness shall be defined as being late seven minutes or more to class, returning from breaks or leaving class early. Two tardy episodes are equivalent to one absence. If an apprentice is more than 30 minutes late, it is considered an absence.
- In an emergency, which causes an apprentice to be absent, it's the apprentice's responsibility to make arrangements with the instructor to complete missed work. The instructor will then decide, based on policy, if the apprentice should be permitted to make up missed work or, in the case of excessive absences, be referred to the D-H WRI Leadership for further action.

- If an apprentice is absent for any reason, he/she must call the instructor to report the absence prior to the class start. Failure to call in on a class/practicum day will result in an unexcused absence.

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#### DRESS CODE & PERSONAL HYGIENE:

Part of the D-H mission is to make patients and their families comfortable that they are being treated and/or helped by responsible and mature adults. Personal cleanliness and neatness of employees is essential due to contact with patients, visitors and other employees.

Occasionally, current fashion trends create an image that many patients and visitors may perceive as less than professional. Extreme hair color, certain tattoos, non-professional clothing and visible body piercing, other than earrings, can create such an impression and will be deemed to be inappropriate. Exceptions can be made at the department level for cultural, religious, health or other appropriate reasons.

Apprentices are expected to follow the dress code policy during all classroom and practicum components of the program.

- Apprentices are required to wear maroon scrub top and black scrub pants to class as the designated uniform while in the 11-week training program. Apprentices will receive two scrub tops at the start of the program.
- Closed toe and heel shoes are to be clean and in good repair
- D-H Identification Badge
- Clothing should be clean, neatly pressed (as appropriate), fit correctly with no spots, stains, tears or missing buttons
- Neat hair, beard & mustache – no fad colored hair
- Undergarments should not be visible. Lingerie which provide adequate support and a modest appearance should be worn at all times
- No hoods (hoodies, hooded sweaters, etc.)
- No facial/body piercing visible (except ears)
- Nails should be neatly trimmed, clean and not excessively long
- Excessive jewelry is inadvisable
- Light fragrance only

If an apprentice comes to class or his/her practicum site not dressed in appropriate attire the apprentice may be sent home to change. If the apprentice misses any course assignments, exams or time, the apprentice may be required to make these up.

### Apprentice Conferences

During the training program there is considerable communication needed between the Instructor, Program Leader and apprentices. Apprentices will be scheduled to meet one-on-one with the Program Leader regularly throughout the program to review program performance and discuss personal professional development topics. During the 11-week training program and the 2000 hour registered apprenticeship apprentices are evaluated on the following behavioral competencies. Apprentices who are having difficulties in the classroom or practicum setting may be required to meet with the Program Leader more often.

**Professional Competencies**

Category	Competency
Communication	Communicates professionally using appropriate language and tone
Professionalism	Earns others' trust and respect through consistent honesty and professionalism in all interactions
Initiative	Cooperates with and assists others
Flexibility/ Adaptability	Adapts to changing conditions or situations while maintaining safety and quality
Initiative	Demonstrates good judgment and knows when to ask for help or clarification
Professionalism	Demonstrates respect for others
Professionalism	Maintains a positive attitude
Professionalism	Accepts and applies constructive feedback
Professionalism	Demonstrates ability to be present and focused by not allowing personal life to distract from duties and expectations
Initiative	Follows instructions/directions
Initiative	Focus in team discussions/meetings
Initiative	Focus during independent work
Safety	Adheres to policies/rules/regulations and safety standards
Professionalism	Adheres to dress code standards
Timeliness	Maintains an acceptable attendance record, reports on time fully prepared and remain engaged and present throughout scheduled duties

**Medical Assistant Apprenticeship Program Curriculum**

Course Titles	Didactic	Supervised Lab	Internship	Total Instructional Clock Hours
Medical Terminology	45			45
Anatomy & Physiology	45			45
Pathophysiology	45			45
Foundations of Pharmacology	45			45
Customer Service	34			34
Clinical Medical Assisting	60			60
Clinical Medical Assisting Lab	30	30		60
Clinical Medical Assisting Practicum	45	15	40	100
<b>Total</b>	<b>349</b>	<b>45</b>	<b>40</b>	<b>434</b>

## Ophthalmic Assistant Training Program

### Program Overview and Class Schedule

#### PROGRAM OVERVIEW:

The Ophthalmic Assistant (OA) training program is designed to give students the knowledge and skills they need to embark upon a career in Ophthalmology. An OA works alongside eye doctors, ophthalmologists or optometrists, to provide patient care. OAs ensure providers have accurate and complete information that helps them diagnose and treat patients. Successful OAs are detail oriented, have strong communication skills and are committed to providing exceptional patient care.

The OA program is 13 weeks long and the curriculum includes classroom instruction, skills training, and practicum. Graduates are eligible to sit for the JCAHPO Certified Ophthalmic Assistant Exam (COA), the certifying body of allied health professionals in ophthalmology, after their first 500 hours of work. This training opens an advanced career pathway and opportunities to pursue additional trainings as a Certified Ophthalmic Technician (COT) or Certified Ophthalmic Medical Technician (COMT), among others.

#### HOURS OF OPERATION AND SCHEDULE:

Though times may vary, classroom hours will typically be Monday through Friday from 07:30 – 04:30. The instructor is available to the students when they are in the classroom and as needed after hours.

*Program dates have not been established for the 2019 calendar year.*

### Application Process and Admission Requirements

The application process includes:

**1. Application package:**

- A completed program application
- Resume
- Cover letter that outlines why you are interested in the Ophthalmic Assistant Training Program and how it aligns with your future career goals
- Two professional letters of reference

**2. Participation in a structured interview process**

**3. Pre-Requisites:**

- Proof of Age; applicants must be 18 years or older on or before start date of class year
- High school diploma, HiSET or GED (Graduate Equivalence)

The OA Training Program Selection Committee will make decisions and inform all selected candidates. This is a competitive application process and completion of all admission requirements does not guarantee acceptance. If selected, it is the applicant's responsibility to acknowledge acceptance to confirm the spot.

## Program Costs

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### TUITION:

Tuition for the OA Training Program is \$3,500.00. Please see the Withdrawal and Refund Policies for additional information about eligible tuition refunds and applicable fees.

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### TEXT BOOKS:

Text books are supplied by the program at no cost to students. Students may also choose to purchase additional learning materials during the program to supplement text books and any course material.

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### PERSONAL SUPPLIES:

Trainees are responsible for purchasing any personal supplies needed for the program.

## Expected Behavior Standards

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### ATTENDANCE POLICY:

The OA Training Program has established an attendance policy to facilitate the acquisition of the knowledge, skills and competency requirements of the program.

Trainees are required to follow the attendance policy, as outlined below:

- Regular class attendance is essential to proper academic progress and is expected. Satisfactory attendance is considered a vital part of each trainee's performance. Absences could result in a lowered achievement rating and an undesirable record. Absences in excess of 3 days within the 13-week training program may cause the trainee to be dismissed from the program. Such determinations will be made on an individual, case-by-case basis.
  - Tardiness shall be defined as being late seven minutes or more to class, returning from breaks or leaving class early. Two tardy episodes are equivalent to one absence. If a trainee is more than 30 minutes late, it is considered an absence.
  - In an emergency, which causes a trainee to be absent, it's the trainee's responsibility to make arrangements with the instructor to complete missed work. The instructor will then decide, based on policy, if the trainee should be permitted to make up missed work or, in the case of excessive absences, be referred to the D-H WRI Leadership for further action.
  - If a trainee is absent for any reason, he/she must call the instructor to report the absence prior to the class start. Failure to call in on a class/practicum day will result in an unexcused absence.
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### DRESS CODE & PERSONAL HYGIENE:

Part of the D-H mission is to make patients and their families comfortable that they are being treated and/or helped by responsible and mature adults. Personal cleanliness and neatness of employees is essential due to contact with patients, visitors and other employees.

Occasionally, current fashion trends create an image that many patients and visitors may perceive as less than professional. Extreme hair color, certain tattoos, non-professional clothing and visible body piercing, other than earrings, can create such an impression and will be deemed to be inappropriate. Exceptions can be made at the department level for cultural, religious, health or other appropriate reasons.

Trainees are expected to follow the dress code policy during all classroom and practicum components of the program.

- Business Casual attire
- Footwear includes closed toe and heel shoes, and socks or hose.
- D-H Identification Badge
- Clothing should be clean, neatly pressed (as appropriate), fit correctly with no spots, stains, tears or missing buttons
- Neat hair, beard & mustache – no fad colored hair
- Undergarments should not be visible. Lingerie which provide adequate support and a modest appearance should be worn at all times
- No facial/body piercing visible (except ears)
- Nails should be neatly trimmed, clean and not excessively long
- Excessive jewelry is inadvisable
- Light fragrance only

If a trainee comes to class or his/her practicum site not dressed in appropriate attire the trainee may be sent home to change. If the trainee misses any course assignments, exams or time, the trainee may be required to make these up.

## Academic Requirements

### DIDACTIC AND CLINICAL SKILLS: GRADING POLICY

The didactic component of the course is graded based on a letter grade. For the clinical skills component of courses, trainees will be marked off on successful completion of skills on skills check-off sheets. It is the trainee's responsibility to schedule additional practice time with an instructor if the skill(s) is (are) not mastered during clinical hours. The clinical skills component is graded based on a practical exam. The clinical skills score is then averaged in with the final course grade for the class.

The D-H Ophthalmic Assistant Program has adopted the following grading policy guidelines:

#### **Clinical Skills Practical:**

Clinical skills practical exam will take place during finals week and be on a pass/ fail basis. The pass rate for the clinical skills practical exam is 80%. Student must pass the five core skills components of the practical exam.

#### **Didactic:**

1. Grades for courses will be determined using the following numerical scale:
  - 100 – 92      A
  - 91 – 83      B
  - 82 – 75      C
  - 74 – 65      D
  - 64 – 0      F

*(Failing: trainee may not progress without repeating course)*

Trainees will be graded according to their performance in final exam.

- Final Written Exam      50%
- Final Practical Exam    50%  
100%

Trainees must make a final grade of 80% or better to be successful in this course.

### Ophthalmic Assistant Training Program Curriculum

Method of Instruction	Topics:
Classroom Instruction & Skills Training	<ul style="list-style-type: none"> <li>⇒ Working in Ophthalmology:               <ul style="list-style-type: none"> <li>• Role of Ophthalmologic Assistant</li> <li>• Certification Required</li> <li>• Job expectations</li> </ul> </li> <li>⇒ Overview of the Ophthalmic Exam:               <ul style="list-style-type: none"> <li>• Needs of provider</li> <li>• Time allotment</li> <li>• Priority of tasks</li> <li>• Types of exams</li> <li>• Special testing</li> <li>• Testing components of exam</li> <li>• Navigating patient encounters</li> </ul> </li> <li>⇒ Anatomy and physiology of the eye and related body systems</li> <li>⇒ Take medical history</li> <li>⇒ Basic eye testing and measuring</li> <li>⇒ Diagnostic test procedures and equipment operation</li> <li>⇒ Ophthalmic and surgical equipment maintenance</li> <li>⇒ Ophthalmic Surgeries by subspecialty, including minor surgery and laser surgery</li> <li>⇒ Optics, Retinoscopy and Refraction</li> <li>⇒ Systemic Diseases and the Eye</li> <li>⇒ Electronic Medical Record training</li> </ul>
Practicum	<ul style="list-style-type: none"> <li>⇒ Overview of all clinic equipment and the contents of exam rooms</li> <li>⇒ Keratometry</li> <li>⇒ Slitlamp</li> <li>⇒ Applanation Tonometry</li> <li>⇒ Humphrey Visual Field</li> <li>⇒ Observation of Photography, B-scan and Optical Coherence Tomography</li> <li>⇒ Special Testing:               <ul style="list-style-type: none"> <li>⇒ Brightness Acuity Testing, Potential Acuity Meter, color, w4D, Schirmer's, Maddox Rod, Stereo, Teller Cards</li> </ul> </li> <li>⇒ Observation of A-scan</li> <li>⇒ Daily practice of all skills, experience in all sub-specialties</li> <li>⇒ Perform exams on their own with mentorship of a senior tech</li> </ul>

## Pharmacy Technician Apprenticeship Program

### Program Overview and Class Schedule

#### PROGRAM OVERVIEW

Pharmacy Technicians (PTs) work collaboratively with Pharmacists, Nurses, Doctors, insurers and other members to support a positive patient experience. The Pharmacy Technician Apprenticeship Program is composed of two components: an initial nine-week pre-apprenticeship educational program (“training program”), followed by a 2,000 hour registered apprenticeship (“apprenticeship”). At the end of the 9 week training program apprentices will sit for the Pharmacy Technician Certification Board (PTCB) exam and upon passing will earn their Certified Pharmacy Technician (CPhT) credential.

This full time hands-on training program includes both classroom and outpatient pharmacy training. Courses offered include Healthcare Professional Communication, Processing and Handling of Medications and Medication Orders, Procurement, Billing, Reimbursement, and Patient & Medication Safety.

#### HOURS OF OPERATION AND SCHEDULE

Though times may vary, classroom hours will be Monday through Friday from 07:45 – 04:45. The instructor and Program Leader are available to the students when they are in the classroom and as needed after hours. Apprentices will be provided their 4-week Practicum schedule during Program Enrollment.

### Application Process and Admission Requirements

All interested applicants are invited to a mandatory information session. At the conclusion of the information session and candidate that would like to continue in the selection process can sign up to complete the role specific assessment test.

The application process includes:

**4. Application package:**

- Resume
- Cover letter that outlines why you are interested in the Pharmacy Technician Apprenticeship Program and how it aligns with your future career goals
- Letter of reference – professional reference preferred

**5. Participation in a structured interview process**

**6. Pre-Requisites:**

- Proof of Age; applicants must be 18 years or older on or before start date of class year
- High school diploma, HiSET or GED (Graduate Equivalence)

The Pharmacy Technician Apprenticeship Program Selection Committee will make decisions and inform all selected candidates. This is a competitive application process and completion of all admission requirements does not guarantee acceptance. If selected, it is the applicant’s responsibility to acknowledge acceptance to confirm the spot.

## Program Costs

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### TUITION

There is no tuition paid by students for the Pharmacy Technician program as participants are hired as D-H employees at the outset of the program.

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### TEXT BOOKS

Text books are supplied by the program at no cost to students. Students may also choose to purchase additional learning materials during the program to supplement text books and any course material.

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### PERSONAL SUPPLIES

Apprentices are responsible for purchasing any personal supplies needed for the program.

## Expected Behavior Standards

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### ATTENDANCE POLICY:

The Pharmacy Technician Apprenticeship Program has established an attendance policy to facilitate the acquisition of the knowledge, skills and competency requirements of the program.

The Apprentice is required to follow the attendance policy, as outlined below:

- Regular class attendance is essential to proper academic progress and is expected. Satisfactory attendance is considered a vital part of each apprentice's performance. Absences could result in a lowered achievement rating and an undesirable record. Absences in excess of 3 days within the 9-week training program may cause the apprentice to be dismissed from the program. Such determinations will be made on an individual, case-by-case basis.
  - Tardiness shall be defined as being late seven minutes or more to class, returning from breaks or leaving class early. Two tardy episodes are equivalent to one absence. If an apprentice is more than 30 minutes late, it is considered an absence.
  - In an emergency, which causes an apprentice to be absent, it's the apprentice's responsibility to make arrangements with the instructor to complete missed work. The instructor will then decide, based on policy, if the apprentice should be permitted to make up missed work or, in the case of excessive absences, be referred to the D-H WRI Leadership for further action.
  - If an apprentice is absent for any reason, he/she must call the instructor to report the absence prior to the class start. Failure to call in on a class/practicum day will result in an unexcused absence.
- 

### DRESS CODE & PERSONAL HYGIENE:

Part of the D-H mission is to make patients and their families comfortable that they are being treated and/or helped by responsible and mature adults. Personal cleanliness and neatness of employees is essential due to contact with patients, visitors and other employees.

Occasionally, current fashion trends create an image that many patients and visitors may perceive as less than professional. Extreme hair color, certain tattoos, non-professional clothing and visible body piercing, other than earrings, can create such an impression and will be deemed to be inappropriate.

Exceptions can be made at the department level for cultural, religious, health or other appropriate reasons.

Apprentices are expected to follow the dress code policy during all classroom and practicum components of the program.

- Business Casual attire
- Shoes are to be clean and in good repair - No flip flops or sports sandals are permitted
- D-H Identification Badge
- Clothing should be clean, neatly pressed (as appropriate), fit correctly with no spots, stains, tears or missing buttons
- Neat hair, beard & mustache – no fad colored hair
- Undergarments should not be visible. Lingerie which provide adequate support and a modest appearance should be worn at all times
- No hoods (hoodies, hooded sweaters, etc.)
- No facial/body piercing visible (except ears)
- Nails should be neatly trimmed, clean and not excessively long
- Excessive jewelry is inadvisable
- Light fragrance only

If an apprentice comes to class or his/her practicum site not dressed in appropriate attire the apprentice may be sent home to change. If the apprentice misses any course assignments, exams or time, the apprentice may be required to make these up.

## Apprentice Conferences

During the training program there is considerable communication needed between the Instructor, Program Leader and apprentices. Each week apprentices will be scheduled to meet one-on-one with the Program Leader to discuss the previous weeks' performance. During the 9-week training program and the 2000 hour registered apprenticeship apprentices are evaluated on the following behavioral competencies. Apprentices who are having difficulties in the classroom or practicum setting may be required to meet with the Program Leader more often.

Category	Competency
Communication	Communicates professionally using appropriate language and tone
Professionalism	Earns others' trust and respect through consistent honesty and professionalism in all interactions
Initiative	Cooperates with and assists others
Flexibility/ Adaptability	Adapts to changing conditions or situations while maintaining safety and quality
Initiative	Demonstrates good judgment and knows when to ask for help or clarification
Professionalism	Demonstrates respect for others
Professionalism	Maintains a positive attitude
Professionalism	Accepts and applies constructive feedback

Professionalism	Demonstrates ability to be present and focused by not allowing personal life to distract from duties and expectations
Initiative	Follows instructions/directions
Initiative	Focus in team discussions/meetings
Initiative	Focus during independent work
Safety	Adheres to policies/rules/regulations and safety standards
Professionalism	Adheres to dress code standards
Timeliness	Maintains an acceptable attendance record, reports on time fully prepared and remain engaged and present throughout scheduled duties

### Pharmacy Technician Apprenticeship Program Curriculum

Course Titles	Didactic	Supervised Lab	Externship	Total Instructional Clock Hours
Intro to Healthcare	34	0	0	34
Pharmacology	45	0	0	45
Essential Communication for the Healthcare Professional	34	0	0	34
Pharmacy Technician Practices & Procedures	45	0	0	45
Pharmacy Technician Practices & Procedures LAB	19	30	0	49
Pharmacy Calculations	45	0	0	45
Pharmacy Technician Practicum	30	15	106	151
<b>Total</b>	<b>252</b>	<b>45</b>	<b>106</b>	<b>403</b>

## Surgical Technology Program

The Surgical Technology Program is accredited by the Commission on the Accreditation of Allied Health Education Programs (CAAHEP). Trainees who successfully graduate from the program are eligible to sit for the National Board of Surgical Technology and Surgical Assisting (NBSTSA) Certification Exam.

### Mission, Program Overview and Goals

#### MISSION STATEMENT

The mission of the Surgical Technology Program is to provide didactic and clinical instruction that will allow trainees to perform as competent, entry-level Surgical Technologists; and to fill the need for Surgical Technologists in local and regional communities.

#### PROGRAM OVERVIEW

Consistent with the mission and educational values of Dartmouth-Hitchcock (D-H), the D-H Surgical Technology Program is dedicated to offering quality education in a positive, safe and supportive environment, which facilitates competent surgical technology professionals to meet the needs of the community. The Surgical Technology curriculum is based upon the core curriculum of the Association of Surgical Technology (AST) and the role of the Surgical Technologist.

The eleven month Surgical Technology Certificate Program is designed to prepare competent, entry-level Surgical Technologists in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains for career opportunities in the surgical field and includes a general education component which complements the comprehensive skills-based specialty training.

The Surgical Technologists works closely with the surgeon, anesthesiologist, nurse anesthetist, and registered nurse to deliver integral patient care before, during, and after surgery. Participants in the program will learn the proper application of sterile surgical techniques and modern operating room technology to provide optimum patient care. Classroom theory and laboratory hands-on training is supplemented with clinical experiences to make for a comprehensive curriculum of study.

Surgical Technologists, also called scrubs and surgical or operating room technicians, assist in surgical operations under the supervision of surgeons, registered nurses, or other surgical personnel. Surgical Technologists are members of operating room teams, which most commonly include surgeons, anesthesiologists, and circulating nurses. Before an operation, Surgical Technologists help prepare the operating room by setting up surgical instruments and equipment, sterile drapes, and sterile solutions. They assemble both sterile and non-sterile equipment, as well as adjust and check it to ensure it is working properly. Technologists also get patients ready for surgery by washing, shaving, and disinfecting incision sites. They transport patients to the operating room, help position them on the operating table, and cover them with sterile surgical “drapes.” Technologists also observe patients’ vital signs, check charts, and assist the surgical team with putting on sterile gowns and gloves.

During surgery, Technologists pass instruments and other sterile supplies to surgeons and surgeon assistants. They may hold retractors, cut sutures, and help count sponges, needles, supplies, and instruments. Surgical Technologists help prepare, care for, and dispose of specimens taken for laboratory analysis and help apply dressings. Some operate sterilizers, lights, or suction machines, and help operate diagnostic equipment.

Surgical Technology is a helping and caring profession which provides specific services to patients who have individual needs and who are worthy of respect at all times. Education is a continual process which leads to development of an individual to his/her fullest potential. The educational process is a combination of shared responsibility between the learner and the educator. Each trainee must develop the ability to make independent judgments within the limits of his/her responsibilities and scope of practice. The program's curriculum must also keep abreast of current concepts and practices within the standards of the profession. The D-H Surgical Technology Program will focus on professionalism and quality patient care.

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## CONCEPTUAL FRAMEWORK

The Certificate program in Surgical Technology is designed to provide the student with the knowledge, clinical skills, psychological and sociological values necessary for the entry-level Surgical Technologists to utilize and apply. The curriculum design is based on the core curriculum in which major concepts of Surgical Technology form the foundation. Clarity is given to the major concept through sub-concepts as they relate to the practice of surgical technology and are integrated throughout the curriculum and include: assessment, reactive intervention, communication skills, critical thinking and professionalism.

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## PROGRAM GOALS AND OBJECTIVES

Upon completion of the program, the trainee should be able to:

- Integrate the Surgical Technology knowledge base in cognitive, affective and psychomotor domains; demonstrate skills following established criteria, protocols and objectives in the cognitive, affective and psychomotor domains
- Function safely, effectively and efficiently and exhibit ethical behavior in a Surgical Technologist role
- Apply basic scientific principles related to anatomy, physiology and pathophysiology for safe transfer, positioning, prepping and draping of surgical patients
- Describe actions and uses of anesthetic and pharmacological agents in the care of surgical patients
- Apply knowledge of interpersonal skills and communications relative to procedures and protocols from a Surgical Technologist's perspective when working with patients, patients' significant others, colleagues and other members of a healthcare team, as well as other members of the community
- Apply principles of asepsis in an operating room setting
- Demonstrate appropriate use and care of basic and specialty instruments and supplies
- Describe the essential working aspects of a successful Surgical Technologist
- Recognize the importance of confidentiality when dealing with surgical patients
- Develop a familiarity with commonly used surgical instruments and define instruments used for various procedures
- Analyze and adapt to the ever-changing operating room environment
- Analyze the departure from classroom theory to on-the-job training in the operating room
- Perform practical proficiency in the surgical arena with an understanding of the basic procedures involved with surgical operations
- Demonstrate the ability to perform in a healthcare environment meeting OSHA specifications
- Articulate effective communication and decision-making skills for successful performance in the surgical environment
- Respond with the knowledge of personal and medical ethics into the surgical arena;

- Apply, establish and maintain high standards of aseptic technique
- Apply Surgical Technology functions within the healthcare arena by providing clinical and administrative skills in a surgical setting
- Compose and Coordinate a successful job search

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## FACULTY GOALS

- To prepare trainees to function safely, effectively, and efficiently as Surgical Technologists, and to exhibit ethical behavior
- To instill in trainees the concept of personal responsibility and accountability for their actions in the operating room while functioning as a part of the healthcare team (*Affective*)
- To instruct trainees and refine their practice in the necessary manipulative skills that will enable them to function as Surgical Technologists (*Psychomotor*)
- To provide trainees with a foundation of basic science and various subject matters unique to the operating room to allow them to utilize critical thinking skills in variable circumstances (*Cognitive*)

The program is designed to accept a maximum of ten trainees per year, with one start per year. In a two-year time frame, there could be a maximum of one class with a total of 10 trainees who would be enrolled in various stages in the program.

## Hours of Operation and Schedule

Though times may vary, classroom hours will be Monday through Friday from 08:00 – 04:00. The Program Director and Clinical Coordinator are available to the students when they are in the classroom and specific hours that will be posted each quarter outside of classroom time.

When the students are in Clinical the hours are 07:00 – 3:30 with the expectation that the students arrive one-half hour earlier to prepare for the day. If a case runs over the expected end time the student may choose to stay and complete the case; the Clinical Coordinator must be notified that a student is staying beyond hours.

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## CLASS SCHEDULE

### Anticipated 2018-2019 Schedule:

- **First Quarter:** 09/24/2018-12/14/2018
- **Second Quarter:** 01/02/2019-03/20/2019
- **Third Quarter:** 03/25/2019-06/05/2019
- **Fourth Quarter:** 06/10/2019-08/23/2019

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## EXAM SCHEDULE

Mid-term exams take place approximately half way through each quarter. Final exams take place the last week of each quarter.

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## BREAK SCHEDULE

In addition to recognized WRI holidays, the following breaks will be observed:

**Anticipated 2018-2019 Program Breaks:**

- **Thanksgiving Break:** Thursday, November 22 through Friday, November 23 2018
- **Winter Break:** Monday, December 17, 2018 through Tuesday, January 2, 2019
- **Spring Break:** Thursday, March 21, 2019 through Friday, March 22, 2019
- **Summer Break:** Thursday, June 6 2019 through Friday, June 7, 2019

**Application Process and Admission Requirements**

The application process takes place in the spring for matriculation in September of the same year. Applicants will be notified via email that their application packet was received and if it was completed as required. Completed applications must be sent to the Surgical Technology Program: [cst.training@hitchcock.org](mailto:cst.training@hitchcock.org)

The application process includes:

**1. Application package:**

- Application fee of \$20.00
- Current resume or Curriculum Vitae
- Statement of Interest, minimum of 500 words
- Two Letters of reference (at least one must be professional, current or previous manager is strongly encouraged)
- Official College transcripts

**2. Participation in a structured interview process****3. Pre-Requisites:**

- Proof of Age: applicants must be 18 years or older on or before start date of class year
- High school diploma, HiSET or GED (Graduate Equivalence)
- College-level Anatomy & Physiology I with a passing grade of C or higher
- College-level Medical Terminology with a passing grade of C or higher
- Basic Life Support Certification

The Surgical Technology Program Selection Committee will make decisions and admit up to 10 individuals per year. This is a competitive application process and completion of all admission requirements does not guarantee acceptance. If selected, it is the applicant's responsibility to acknowledge acceptance to confirm the spot.

**Additional Pre-Admission Requirements:**

Prior to matriculation, students who have been accepted to the Surgical Technology Program must complete some additional steps, including:

- Successful fulfillment of pre-requisites listed above
- Proof of Health Insurance
- 6 hours of shadowing at the Dartmouth-Hitchcock Main Operating Rooms
- Completed D-H Pre-Employment/Person of Interest screening, which includes a criminal background check and clearance by Occupational Medicine for physical fitness for duty and required immunizations.

**Note:** current D-H employees who are selected for sponsorship in a paid training role must have completed their annual attestation from date of hire and, submit a Transfer form to

Occupational Medicine for clearance of physical fitness for duty and required immunizations prior to the start of the program.

## Program Costs

### TUITION

Tuition for the 11-month Surgical Technology Program is \$8,000.00. Please see the Withdrawal and Refund Policies for additional information about eligible tuition refunds and applicable fees.

### TEXT BOOKS

The estimated cost of purchasing books is \$ 1,205.00. Students may also choose to purchase additional learning materials during the program to supplement text books and any course material.

**Note:** the text books listed below need to be purchased directly from Cengage to ensure you receive the bundle price and online access.

Book Name	Approx. Pricing
Mintap with 5th Edition Surgical Technology for the Surgical Technologist	\$250.00
Fundamentals of A&P 4th Edition by Donald C. Rizzo	\$127.00
Learning Lab for A&P	\$98.00
Medical Terminology for Health Professionals 8th Edition	\$140.00
Microbiology for the Surgical Technologists by Rodriquez **	\$175.00
<b>Elsevier/Evolve</b>	
Pharmacology for Surgical Technologist 3rd Edition can be bought used ISBN 978-1-4377-1002-1 **	\$70.00
<b>Other:</b> (Note: many of the books below can purchased used on Amazon)	
Tabors Medical Dictionary	\$25.00
Pocket Guide to the Operating Room ISBN 978-0-8036-1226-6 **	\$45.00
Pearson's Surgical Technology Exam Review ISBN 978-0-13-500048-9	\$90.00
Surgical Mayo Setups ISBN 978-1-111-13818-9	\$113.00
Surgical Instrumentation an Interactive Approach by Renee Nemitz ISBN 9781-4557-0719	\$72.00
<b>Total Book Costs</b>	<b>\$1,205.00</b>

\*\* Pocket Guide to the Operating Room, Microbiology for the Surgical Tech, and Pharmacology for the Surgical Technologist 3rd Ed (or 4th available) will not be required text until 2nd quarter, January 2019.

### PERSONAL SUPPLIES

Trainees are responsible for purchasing any personal supplies needed for the program, including but not limited to:

- **Footwear:** only plain closed toe and heel shoes (shoes cannot have multiple colors and large insignias), and socks or hose are permitted. The cost can vary per personal preference, with an estimated range of \$25-\$100
- **Two Program Polo Shirts:** ordered through the Program Director with an estimated cost of \$30.
- **Black Scrub Pants:** estimated cost of \$20.
- **Classroom Supplies:** including items such as notebooks, pens/highlighters/markers, note/flash cards, etc. These costs vary per personal preference, with an estimated range of \$25-\$100.
- **Laptop Computer:** cost varies per personal preference, with an estimated range of \$200-\$1500.

## Expected Behavior & Technical Standards of the Surgical Technologist

### CODE OF ETHICS

The Association of Surgical Technologists Code of Ethics is:

- To maintain the highest standards of patient care.
- To hold, in confidence, with respect to the patient's beliefs, all personal matters.
- To respect and protect the patient's legal and moral right to quality patient care.
- To not knowingly cause injury or any injustice to those entrusted to our care.
- To work with fellow technologists and other professional health groups to promote harmony and unity for better patient care.
- To always follow the principles of asepsis.
- To maintain the highest degree of efficiency through continuing education.
- To maintain and practice surgical technology willingly with pride and dignity.
- To report any unethical conduct or practice to the proper authority.
- To adhere to the CODE of ETHICS at all times in relationship to all members of the health care team.

The Association of Surgical Technologists (AST) is the professional organization nationally recognized by practicing surgical technologists in the United States. More information about the profession of surgical technology and the AST can be found at: <http://www.ast.org/>

Association of Surgical Technologists

6 West Dry Creek Circle

Littleton, CO 80120

Phone

(800) 637-7433

(303) 694-9130

(303) 694-9169 Fax

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## NO FOOD OR BEVERAGES IN LAB POLICY

The Surgical Technologist program wants the educational process for the trainee to be a quality process, which means that the lab needs to be as distraction free as possible. Therefore, the program follows the Operating Room policies **NO FOOD OR BEVERAGES IN THE LAB POLICY**.

- The trainee **cannot** bring food or beverages (including water) into the lab.
- If a trainee does bring food or beverages into the lab, the trainee will be told to remove it immediately. Subsequent incidents could result in administrative action (i.e., behavior warning, behavior probation and program dismissal).

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## EXPECTED BEHAVIOR AND STANDARDS

Surgical Technology is a practice of discipline with cognitive, sensory, affective, and psychomotor performance requirements. Patient safety is dependent on the trainee's ability to meet the following Behavioral and Technical Standards. These standards are a part of each course in the training program.

Standards	Behaviors
<b>Critical Thinking</b>	<ul style="list-style-type: none"> <li>• Coping ability sufficient for clinical judgment</li> <li>• Identify cause-effect relationships in clinical situations</li> <li>• Display good coping mechanisms</li> <li>• Ability to make fast decisions in stressful situations in a professional manner</li> </ul>
<b>Interpersonal Skills</b>	<ul style="list-style-type: none"> <li>• Sufficient to interact with individuals and groups from a variety of social, emotional, cultural, and intellectual backgrounds</li> <li>• Establish rapport with patients and colleagues</li> <li>• Consider the patient as a person and not a procedure</li> </ul>
<b>Communication</b>	<ul style="list-style-type: none"> <li>• Abilities sufficient for interaction with others in verbal and written form</li> <li>• Explain procedures to colleagues</li> <li>• Initiate surgeon preferences</li> </ul>
<b>Mobility</b>	<ul style="list-style-type: none"> <li>• Sufficient to move from room to room and within the operating room to be able to lift heavy objects</li> <li>• Stand at operating room table during a case</li> <li>• Move around in the operating room with ease</li> </ul>
<b>Gross and Fine Motor Skills</b>	<ul style="list-style-type: none"> <li>• Sufficient to provide safe and effective care</li> <li>• Position patients</li> <li>• Pass surgical instruments</li> <li>• Use equipment</li> </ul>
<b>Auditory Ability</b>	<ul style="list-style-type: none"> <li>• Sufficient to assess needs</li> <li>• Hear emergency alarms</li> <li>• Accurately hear instructions in a noisy environment</li> <li>• Sufficient hearing and vision to see and hear patient signs and symptoms, see needles and sutures and hear softly spoken words</li> </ul>
<b>Visual Ability</b>	<ul style="list-style-type: none"> <li>• Sufficient for observation and assessment necessary to maintain a surgical field</li> <li>• Differentiate colors on the surgical field</li> </ul>
<b>Manipulative /</b>	<ul style="list-style-type: none"> <li>• Sufficient to feel for assessment of task being performed</li> </ul>

<b>tactile skills</b>	<ul style="list-style-type: none"> <li>• Turn dials</li> <li>• Press keyboard</li> <li>• Operate special equipment</li> <li>• Feel temperature changes</li> <li>• Handle small sutures</li> <li>• Strong eye-hand coordination</li> </ul>
<b>Strength / Stamina</b>	<ul style="list-style-type: none"> <li>• Sufficient to provide patient care and related responsibilities for extended periods of time</li> <li>• Adapt to shift (8-12 hours)</li> <li>• Lift without restriction from a standing position</li> <li>• Stand for long periods of time</li> <li>• Administer cardiopulmonary resuscitation</li> <li>• Ability to perform physical work (lifting, standing, walking)</li> <li>• Tolerance to cold conditions</li> <li>• Tolerance of body odors during surgery</li> </ul>
<b>Conscientious</b>	<ul style="list-style-type: none"> <li>• Not sacrificing principles of self-accountability</li> <li>• A surgical conscience is the awareness of the importance of applying knowledge to ensure quality in practice</li> </ul>
<b>Ethical</b>	<ul style="list-style-type: none"> <li>• Utilize ethical principles, moral values, and professional codes as a basis for making decisions and solving problems</li> </ul>

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#### REQUIRED PHYSICAL SKILLS OF A SURGICAL TECHNOLOGY STUDENT

Due to the physical demands and potential hazards associated with the program, trainees are encouraged to discuss any health-related concerns or changes with their medical provider regarding program participation.

- Able to stand, bend, stoop, and/or sit for long periods of time in one location with minimum breaks
- Able to lift a minimum of 25 pounds
- Able to refrain from nourishment/restroom breaks for periods up to 6 hours
- Demonstrate sufficient ability to load fine (11-0) suture onto needles and needle holders with/without corrective lenses and while wearing safety glasses.
- Demonstrate sufficient peripheral vision to anticipate and function while in the sterile surgical environment.
- Hear and understand muffled communication without visualization of the communicator's mouth/lips and within 20 feet.
- Hear activation/warning signals on equipment.
- Able to detect odors sufficient to maintain environmental safety and patient needs.
- Manipulate instruments, supplies, and equipment with speed, dexterity, and good eye-hand coordination.
- Ambulate/move around without assistive devices.
- Able to assist with and/or lift, move, position, and manipulate the patient who is unconscious with or without assistive devices.

- Communicate and understand fluent English both verbally and in writing.
- To be free of reportable communicable diseases and chemical abuse.
- Able to demonstrate immunity (natural or artificial) to Rubella, Rubeola, Tuberculosis, and Hepatitis B, H1N1, Influenza, or be vaccinated against these diseases, or willing to sign a waiver of release of liability regarding these diseases.
- Possess short and long-term memory sufficient to perform tasks such as, but not limited to, mentally tracking surgical supplies and performing anticipation skills intraoperatively.
- Able to make appropriate judgment decisions.
- Demonstrate the use of positive coping skills under stress.
- Able to maintain personal health and personal hygiene in accordance with the established guidelines of the healthcare institutions assigned.
- Demonstrate calm and effective responses especially in emergency situations.
- Exhibit positive interpersonal skills during patient, staff, and faculty interactions.

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#### EXPOSURE INCIDENT DEFINITION AND REPORTING

Occupational Exposure is defined as a reasonably anticipated skin, eye, mucous membrane, or parenteral contact (i.e., needle stick) with blood or other potentially infectious materials that may result from the performance of an employee's/trainee's duties.

Should an exposure incident occur in the classroom or during a trainee's clinical, the trainee should follow the Bloodborne Pathogen Exposure Procedure (Procedure ID: 2320) or the required process at an affiliated clinical site.

Trainees in clinical will also be required to report the incident to the Clinical Coordinator.

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#### EXPOSURE TO BLOOD BORNE PATHOGENS & COMMUNICABLE DISEASES

The Surgical Technology Program has developed a policy to limit the trainee's occupational exposure to blood and other potentially infectious materials to minimize the risk of the transmission of blood borne pathogens or communicable diseases.

Training: Basic information regarding blood borne pathogens and universal precautions will be provided to all trainees in the Surgical Technology Program

Universal Precautions to prevent the acquisition of infection by the trainee:

- Hands must be washed between every direct patient contact
- Non sterile gloves must be used if contact with blood, body fluids, secretions or excretions are anticipated
- Gloves must be changed between patients
- Gown and facial protection must be worn when doing procedures which may cause splatter & aerosolization of body fluids
- Disposable needles & syringes should be placed in rigid puncture resistant containers. To prevent needle stick injuries, needles should not be recapped, bent, or broken before disposal

- In all cases, safety needles should be used

Didactic training in the classroom or at a Clinical site necessitates the use of real patients and real patient specimens, which could result in an occupational exposure to blood and other potentially infectious materials. That exposure could result in the transmission of blood borne pathogens or communicable diseases. Exposure associated tasks for Surgical Technologist Trainees include:

- Surgical procedures
- Patient hygiene/elimination
- Environmental/equipment cleaning
- Specimen collection
- Specimen transport
- Waste/linens management

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## HEPATITIS B IMMUNIZATION POLICY

### **Hepatitis B Information**

Hepatitis B is a serious disease caused by a virus that attacks the liver. The hepatitis B virus may cause lifelong infection, cirrhosis (scarring) of the liver, liver cancer, liver failure, and death. Workers who have direct contact with human or primate blood and blood products are at risk for exposure to hepatitis B virus.

### **Hepatitis B Vaccine**

Hepatitis B vaccine provides immunization against all hepatitis B, but not against hepatitis A or C. The vaccine utilizes the non-infectious portion of the B virus and is produced in yeast cells. It is produced without the use of human blood or blood products.

A full course of immunization requires 3 doses of the vaccine to be given at specific intervals over a 6-month period. Most healthy people who receive the full course will develop a protective antibody against hepatitis B virus. The duration of protection of hepatitis B vaccine is unknown at this time. However post-vaccination antibody testing can detect this and one additional series of hepatitis B vaccination can sometimes generate immunity.

Due to the potential occupational exposure to blood or other potentially infectious materials trainees may be at risk of acquiring a hepatitis B virus (HBV) infection. The Surgical Technology Program highly recommends that all trainees undergo hepatitis B vaccination; however this is not a requirement for the program.

For more information, please see the Influenza and Other Immunization Requirements and Exemption Policy - Employees, Covered Individuals (Policy ID: 174).

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## ATTENDANCE POLICY:

The Surgical Technology Program has established an attendance policy to facilitate the acquisition of the knowledge, skills and competency requirements of the program. Trainees must be in attendance in class to learn. The Trainee is required to follow the Surgical Technology Program's attendance policy, as outlined below:

- Regular class attendance is essential to proper academic progress and is expected. Satisfactory attendance is considered to be a vital part of each trainee's performance. Absences could result in a lowered achievement rating and an undesirable record.

Absences in excess of 3 days per quarter, for any subject, may cause the trainee to be withdrawn from that course. Such determinations will be made on an individual, case-by-case basis. Excessive absences will also result in the following administrative actions: academic warning, probation, removal of placement privileges, or trainee suspension.

- Tardiness shall be defined as being late seven minutes or more to class or leaving class early. Two tardy episodes are equivalent to one absence. If a student is more than 30 minutes late, it is considered an absence. 3 absences are grounds for dismissal from the class.
- Trainees in Clinical courses must attend all clinical hours. Any trainee absent from clinical training may be allowed to make-up the missed hours only at the discretion of the Program and/or clinical site. Failure to complete all necessary clinical hours could result in a failing grade for the Clinical course.
- In an emergency, which causes a trainee to be absent, it's the trainee's responsibility to make arrangements with the instructor to complete missed work. The instructor will then decide, based on policy, if the trainee should be permitted to make up missed work or, in the case of excessive absences, be referred to the administration for further action.
- If a trainee is absent for any reason, he/she must call the instructor to report the absence prior to the class start. If the absence occurs on a clinical day, the trainee is to notify the clinical faculty member prior to the clinical rotation. Failure to call in on a class/clinical day will result in an unexcused absence. An absence from a clinical day will only be considered excused if the trainee can provide verifiable documentation.
- Attendance will make up a percentage of the final grade in each core course.

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#### CLINICAL ATTENDANCE POLICY:

Clinical experience is critical to the educational success of the surgical technology student. In order to be eligible to graduate, a student must have completed at a minimum 120 surgical cases. Being absent, or leaving clinical early can only detract from the student's education and make it more difficult to achieve the required number of cases.

In the clinical courses, a student is allowed 1 absence for that particular semester's clinical course. A student who has more than 1 unexcused absence will lose 5 points off their total clinical grade (>1 unexcused absence = 5 points off for each absence). A student may have an excused absence, but only after obtaining clinical faculty permission in writing at least 2 days prior to the scheduled absence. Students who are absent for tardy due to unforeseen circumstances will be handled on a case by case basis by course faculty and the Program Director. A student with 2 or more excused absences will lose 5 points off their final grade for each occurrence and have a clinical academic warning due to risk of failure. It is the responsibility of the student to call the clinical facility if they are going to be absent. **Failure to notify the facility prior to 7:00am will be a no call no show and will result in 5 points off the students' final grade per occurrence.**

Being late for clinical is unprofessional and places an undue burden on the clinical site. For the surgical technology program, tardiness is defined as being late 7 minutes or more past the clinical start time (6:30 am). Being 30 minutes late counts as an absence. For the program 2 late episodes counts as 1 unexcused absence (2 tardies = 1 unexcused absence). **The student must notify their assigned clinical**

**area that they will be late. Failure to do so will result in a loss of 5 points from their final clinical grade for each occurrence.**

Leaving clinical early for any reason jeopardizes being successful. Any student requiring an excused early dismissal must submit a written request and obtain permission from clinical faculty at least 2 days prior.

A student who requests an early dismissal for a not-excused reason (sudden illness, personal appointment, etc.) must notify the charge nurse at the assigned clinical facility immediately and call the clinical instructor to inform them of the emergency. You must speak directly to the clinical instructor, leaving a voicemail or texting is not acceptable.

In the event of excessive absences, each absence will carry a five (5) point overall course grade deduction. Three or more absences from clinical will result in immediate dismissal from clinical and an F for the class.

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#### DRESS CODE & PERSONAL HYGIENE:

The personal appearance of Surgical Technology trainees affects the image that is projected to patients, staff members, and others. The D-H Surgical Technology Program believes that it is very important to present oneself in a way that promotes a positive image of the Surgical Technology Program and the Perioperative Services Department. The Surgical Technology Program has developed a trainee dress code that will help the trainee develop a professional look and demeanor. Trainees are expected to follow the dress code policy during all classroom, laboratory, and clinical components of the program.

- Trainees are required to wear green scrubs to class as the designated scrub outfit. The trainees will receive a scrub set each day upon classes starting. When going to Clinical rotations the trainees will change into the OR blue scrubs for the day. At the end of the day the trainee can get the next day's green scrubs for class.
- The trainee's footwear includes plain closed toe and heel shoes (shoes cannot have multiple colors and large insignias), and socks or hose.
- The trainee's uniform must always be clean and neat.
- If a trainee needs to wear additional clothing in the classroom/laboratory, i.e. a t-shirt, etc., it is to be worn under the scrub top and tucked in. Outside jackets or sweatshirts cannot be worn over the trainee's scrubs. In colder weather an OR jacket is permitted.
- The trainee's hair must be clean. Hair is to be appropriately arranged and if long, away from the face. Large ornaments, ornate clasps, and ribbons are not to be worn while in uniform. During laboratory exercises all hair must be covered or contained within the scrub cap.
- All trainees must maintain appropriate personal hygiene. Make-up should be in moderation. Beards and /or mustaches, if worn, must be neatly trimmed and clean. Hospital or agency policy must be adhered to also. The application of perfume, hair spray, and after shave locations must be kept to a minimum. Any type of artificial eyelashes is prohibited.
- If a trainee comes to class or his/her clinical site not dressed in the proper uniform, the trainee may be sent home to change. If the trainee misses any course assignments, exams or time, the trainee may be required to make these up.

- While in clinical rotations, trainees must follow the dress code expectations of the clinical site.
- Fingernails are to be short and clean. Nail polish and artificial nails are NOT to be worn. The use of perfumes or cologne is prohibited while on clinicals.
- Jewelry is not allowed except for small plain stud earrings.

## Surgical Technology Curriculum Overview

The Certificate in Surgical Technology is designed to prepare graduates for career opportunities in the surgical field and includes a general education component which complements the comprehensive skills-based specialty training. Classroom theory and laboratory hands-on training is supplemented with clinical experiences to make for a comprehensive curriculum of study.

Upon successful completion of this program, trainees should be able to exhibit practical proficiency in the surgical arena with an understanding of the basic procedures involved with surgical operations; describe the essential working aspects of a successful Surgical Technologist; demonstrate the ability to perform in a healthcare environment meeting OSHA specifications; recognize the importance of confidentiality when dealing with surgical patients; analyze the departure from classroom theory to on-the-job training in the operating room; develop effective communication and decision-making skills for successful performance in the surgical environment; integrate knowledge of personal and medical ethics into the surgical arena; develop a familiarity with commonly used surgical instruments; establish and maintain high standards of aseptic technique; analyze and adapt to the ever-changing operating room environment; function in the healthcare arena by providing clinical and administrative skills in a surgical setting; and coordinate a successful job search. Graduates are prepared for employment as Surgical Technologists.

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## PROGRAM INSTRUCTION

Instructional activity is in alignment with CAAHEP requirements. The 11 month program is divided into 3 components; didactic, lab, and clinical student experiences (clinical). The didactic portion of the program is 695 hours which covers the foundation courses as well as the surgical procedure components for the specific surgeries. The lab hours reflect over 200 hours of practicing the skills taught and demonstrated to the students for them to achieve proficiency before going to the clinical setting. The Clinical setting demands over 600 hours to demonstrate their acquired skills in a professional operating room setting, this includes the professional behaviors to be successful.

The students are under direct supervision of the operating room team. Instruction is given by all members, but the student will report to a designated preceptor. The students will receive feedback from their preceptors on a day-to-day rotation, weekly evaluations by the department, midterm by the instructors, and final evaluations from all areas. The students will perform a weekly self-evaluation to determine areas of strength and weaknesses. The Clinical Coordinator is available during the hours of clinical for any concerns that may need to be addressed or remediation if necessary.

## Academic Requirements

Students are required to maintain a 75% average during the program and must maintain this average until completion. If this requirement is not met the student is subject to dismissal from the program. The

student will be placed on academic probation if their GPA is less than 75% with a remediation action plan in place to assist the student in achieving the 75% GPA. The action plan will have milestones for the student and resources to help them be successful.

Students are also required to pass a practicum each quarter to ensure they are prepared for the next quarter's competencies. To meet the program clinical case requirements for the "**AST Core Curriculum for Surgical Technology 6<sup>th</sup> edition**" during externship, the student must complete 120 scrubbed cases.

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#### THEORY AND LAB: GRADING POLICY

The theory component of the course is graded based on a letter grade. For the lab component of courses, trainees will be marked off on successful completion of skills on skills check-off sheets. It is the trainee's responsibility to schedule additional practice time with an instructor if the skill(s) is (are) not mastered during lab hours. The skills lab component is graded based on a lab practical exam, and lab reports at the end of each applicable course. The lab score is then averaged in with the final course grade for the class.

The D-H Surgical Technology Program has adopted the following grading policy guidelines:

##### Lab Practical:

Final lab practical will take place during finals week and be on a pass/ fail basis. Trainees must pass in order to proceed to the next semester.

##### Theory:

2. Grades for **SUR** and **AHS** courses will be determined using the following numerical scale:

- 100 – 92      A
- 91 – 83      B
- 82 – 75      C
- 74 – 65      D
- 64 – 0      F

(*Failing*: trainee may not progress without repeating course)

(Final grades/scores are calculated according to the 0.50 rule or greater example: 74.50 = 75.00  
83.20 = 83.00, 83.45 does not round up)

Trainees will be graded according to their performance in class quizzes, examinations, and final exam.

- Quizzes      15%
- Section tests      40%
- Midterm Exam      20%
- Final Exam      25%
- 100%

Trainees must make a final grade of 75% or better to be successful in this course.

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#### EXTRA CREDIT:

At times during the course, extra credit projects will be made available. Trainees who complete these assignments will have the extra credit points applied to their lowest test grades. Extra credit points are not calculated in the weighting of the grades.

### MIDTERM EVALUATION:

At the midterm portion of the course, trainees whose scores are below 75% will be given a midterm warning. This will be presented to the trainee by the Program Director. The trainee will receive notification via email to their Dartmouth-Hitchcock email account. Trainees who receive a midterm warning are advised to contact the faculty to discuss methods of remediation.

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### MAKE-UP POLICY:

The intensive nature of the course does not allow for any scheduled make-up of lecture material. It is suggested that if you know you will miss a particular lecture, you should contact the instructor beforehand and request to be given the work. Also, a trainee can contact another classmate for assistance. In the event a trainee knows they will miss a scheduled exam, they must notify the instructor in writing or email at least 2 academic days before and request a make-up exam. **Make-up exams** are allowed only upon written permission of the Director, consistent with any applicable D-H policy that may relate to the reason for the make-up exam. Make-up exams will not be given for such excuses as oversleeping, traffic, unable to find a parking space, etc. Emergency exceptions will be handled on an individual basis. Trainees who fail to follow the policy on make-up exams will result in a grade of 0 on that exam. Trainees who consistently request multiple make-up exams/tests/practicals (>2 per course) will have an automatic 10 points deducted from that make-up grade. To be eligible to make up an exam, the trainee must present written documentation of the reason for absence. Arrangements for missed exams must be made on the first class day the trainee is present following the exam. Missed exams may not be made up during normally scheduled class.

**Exams missed due to unexcused absence may not be made up. Daily quizzes may not be made up. It is YOUR responsibility to schedule a make-up time with the Instructor. NO EXCEPTIONS.**

Work in Lab Manuals will be graded on a regular basis.

Daily tasks will be assigned which are due by the end of the class meeting each day. These tasks do not fall under the Make-up policy.

In the event a trainee needs to leave the class early, do so at either an assigned break or at a time when it will not disturb the class. If an exam or quiz is finished before the allotted time, the trainee may leave the classroom but should not reenter or cause a disturbance to the remaining trainees.

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### COURSE REQUIREMENTS:

- **Tests:** There will be 3 scheduled section tests.
- **Quizzes:** There will be a minimum 3 unscheduled quizzes.
- **Midterm Exam:** The Midterm Exam will cover the lecture and reading material discussed up to the date of the exam.
- **Final Exam:** The final exam will be comprehensive and cover all lecture and reading material.
- **Class Participation:** This class requires that all trainees are prepared before class to discuss the assigned readings in an informed manner. Trainees deemed not prepared for class may be asked to leave.
- **Extra Credit:** Extra credit assignments are optional.

- **Workbook Exercises:** Each topic of the course has a corresponding section in the AST workbook. Trainees are responsible for completing those sections on their own as a way of supporting the readings, and lectures. Trainee desiring clarification on these exercises can contact the faculty.
- **Final Exam:** The last week of the term is designated as a final exam week. A final examination schedule is published each term. The date and time of the final exam is published in the course lecture schedule.

## Clinical Requirements and Grading

Clinical is an extension of the classroom. Clinical includes assisting team members with daily preoperative, perioperative and postoperative duties of a surgical technologist trainee while under the supervision of a staff surgical technologist and registered nurse. Trainees are oriented to a surgical suite and the daily routine of the facility. They initially observe surgical procedures and then begin to second scrub minor procedures. As their Clinical progresses, they move into the first scrub position for minor procedures and then second scrub major cases. This routine continues until they are first scrubbing most procedures when appropriate.

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### ELIGIBILITY FOR CLINICAL:

- Trainee must have GPA of C average or better.
- Trainee must have completed any pre-placement screening requirements by the clinical site.
- Trainee must have current certificates (i.e. HIV/AIDS, CPR).
- Trainee must be in good standing with the Program.
- Proof of health insurance.
- Trainees are subject to the rules and regulations, including but not limited to drug testing, of any facilities where they may seek to perform a clinical rotation.

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### CLINICAL HOURS:

The total number of hours for clinical is 660.5 hours and 120 Cases. Clinical hours are usually accrued 9 hours per day at a hospital or surgery center. However, clinical times may vary based on site availability and hospital shift schedules. Trainees are required to attend all clinical hours. Clinical hours may be made-up *only* at the discretion of the instructor and/or clinical site with valid verifiable documentation of absence. Any trainee who does not complete all clinical hours may fail the clinical component of the class.

Lunch is thirty minutes long. Due to the nature of scrubbing surgical cases, lunch is scheduled according to the availability of relief personnel and the status of the case. Lunch will be taken as recommended by your clinical instructor or preceptor. Two fifteen minute breaks are usually allowed during the day. Check with the clinical preceptor.

Many assignments may be completed earlier than the allotted time, thus leaving the trainee free time. This “free time” is still part of the total hours allotted to the clinical and must be utilized constructively. There will be more than ample scholastic work that could be studied or reviewed, case reports that require research, etc. Additionally, time could be spent in the department assisting with cleaning, restocking, pulling cases and work in sterile supply. All trainees are encouraged to use free time to their own discretion with the instructor informed beforehand. Those wandering around appearing “un-busy”

will be assigned additional projects by an instructor and could receive a reduction in the final course grade.

Trainees will not leave a clinical practicum under any circumstances without the explicit permission of their designated preceptor/supervisor.

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## CLINICAL CASE REQUIREMENTS

Students are also required to pass a practicum each quarter to ensure they are prepared for the next quarter's competencies. To meet the program clinical case requirements for the "***AST Core Curriculum for Surgical Technology 6<sup>th</sup> edition***" during externship, the student must complete 120 scrubbed cases.

<b>Surgical Rotation Case Requirements</b>			
<b>Surgical Specialty</b>	<b>Total # of Cases Required</b>	<b>Minimum # of First Scrub Cases required</b>	<b>Maximum # of Second Scrub Cases that can be Applied Towards 120 Cases</b>
<b>General Surgery</b>	30	20	10
<b>Surgical Specialties</b> <ul style="list-style-type: none"> <li>• Cardiothoracic (CT)</li> <li>• ENT</li> <li>• EYE</li> <li>• GU</li> <li>• Neuro</li> <li>• Ob-Gyn</li> <li>• Oral/Maxillofacial (OM)</li> <li>• Peripheral vascular (PV)</li> <li>• Plastics (PI)</li> <li>• Procurement/ Transplant (Trans)</li> </ul>	90	60	30
<b>Diagnostic Endoscopy</b> <ul style="list-style-type: none"> <li>• Bronchoscopy</li> <li>• Colonoscopy</li> <li>• Cystoscopy</li> <li>• EGD</li> <li>• ERCP</li> <li>• Esophagoscopy</li> <li>• Laryngoscopy</li> <li>• Panendoscopy</li> <li>• Sinoscopy</li> <li>• Ureteroscopy</li> </ul>			10 diagnostic endoscopy cases may be applied toward the second scrub cases

<b>Labor &amp; Delivery</b>			5 vaginal delivery cases may be applied toward the second scrub cases
<b>Totals</b>	<b>120</b>	<b>80</b>	<b>40</b>

### Surgical Rotation Case Requirements 6<sup>TH</sup> Edition

1. The total number of cases the student must complete is 120.
2. Students are required to complete 30 cases in General Surgery. Twenty of the cases must be in the First Scrub Role.
3. Students are required to complete 90 cases in various surgical specialties. Sixty of the cases must be in the First Scrub Role and evenly distributed between a minimum of 4 surgical specialties. Note: 15 is the maximum number of cases that can be counted in any one surgical specialty.
4. The surgical technology program is required to verify through the surgical rotation documentation the student's progression in First and Second Scrubbing surgical procedures of increased complexity as he/she moves towards entry-level graduate abilities.
5. Diagnostic endoscopy cases and vaginal delivery cases are not mandatory. Note: up to 10 diagnostic endoscopic cases and 5 vaginal delivery cases can be counted towards maximum number of Second Scrub Role cases.
6. Observation cases must be **documented**, but do not count towards the 120 required cases.
7. Cases will be counted according to surgical specialty. Examples:
  - Trauma patient requires a splenectomy and repair of a LeFort I fracture. Two cases can be counted and documented since the splenectomy is general surgery specialty and repair of LeFort I is oral/maxillofacial surgical specialty.
  - Patient requires a breast biopsy followed by mastectomy. It is one pathology, breast cancer, and the specialty is general surgery: therefore, it is counted and documented as one procedure- one case.

#### First Scrub

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

A student not meeting the five (5) criteria cannot count the case as a first scrub role and the case must be documented in the second scrub role or observation role.

#### Second Scrub

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

1. Sponging
2. Suctioning
3. Cutting suture

4. Holding retractors
5. Manipulating endoscopic camera

### **Observation Role**

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

Each week you will be given a copy of your case log spread sheet which will allow you to stay informed with your current cases. Only cases that have a preceptor evaluation form, completed and signed by the preceptor, will be logged on the spreadsheet. It is strongly encouraged that the student brings this log to clinical as this tool will allow the student to know what they need for cases in the event their assigned room gets done early or their case is cancelled so they can go into another room.

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### **CLINICAL COMPENSATION:**

Clinical courses are offered by D-H as part of the program. All trainee activities associated with the curriculum, especially while students are completing clinical rotations, will be educational in nature. Trainees will not be substituted for hired staff personnel within the clinical institution in the capacity of a surgical technologist.

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### **REQUIREMENTS FOR PASSING A CLINICAL COURSE:**

- Maintain documentation of proper attendance and completion of all clinical hours at all clinical sites. This includes being on time and properly attired. Trainee must keep all original copies and at the conclusion of clinical give the originals to the clinical instructor.
- Maintain documentation of all cases scrubbed at all clinical facilities. Clinical case log sheets must be maintained and submitted to the clinical instructor each week. Remember that there is a minimum number and specific number of type of case required to graduate. Each trainee must keep a duplicate copy of the case logs for their personal record.
- Maintain documentation of all Procedure Evaluation Forms (including Central Processing).
- Turning in any complete assignment on the dates specified (i.e. clinical case reports).
- Attending any conferences scheduled by the instructor.
- Following the policies of the Surgical Technology Program at D-H

**Note:** Failure to meet any of these requirements will result in the assignment of an Unsatisfactory or Failing grade.

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### **GRADING**

#### **Weighted Grading:**

Daily Evaluation Tools:	40%
Mid-term Clinical (Skills) Evaluation:	12.5%
Final Clinical (Skills) Evaluation:	12.5%
First Case of the Day:	5%
Clue Sheets:	20%
<u>Semester Case Log:</u>	<u>10%</u>
	<b>100%</b>

**Grading Scale:**

92 – 100	A
84 – 91	B
75 – 83	C
65 – 74	D
65/Below	F

Students must maintain a 75% (C) or higher in order to successfully pass the semester.

**Trainee Conferences**

Because of the varied demands of the practice of Surgical Technology, the Program requires considerable communication between the instructors and trainees. Feedback comes in the form of grades, practical exams, clinical instruction, and trainee conferences. There are two types of trainee conferences: (1) the first type is a weekly clinical conference in which the trainee and instructor will discuss the previous weeks' clinical performance. Trainees who are having difficulties in the clinical setting may be required to meet with the Clinical Coordinator more often. (2) The second type of trainee conference is for a trainee experiencing academic, attendance, or other difficulties. These conferences are scheduled with the Program Director and/or instructor and an action plan will be implemented.

**Graduation Requirements**

Students are required to complete all courses with a 75% or higher in all academic and clinical requirements contained within the program curriculum/syllabus in the order outlined. Each course is a prerequisite for subsequent course except the first quarter which will require departmental approval. The goals and objectives of the program correlate with the current 6<sup>th</sup> Edition of the Core Curriculum for Surgical technology.

Once the curriculum and clinical requirements have been fulfilled, trainees are required to take, and pass, the Surgical Technologist and Surgical Assisting (NBSTSA) Secure Exam.

**Probation**

A student may be placed on probation for failure to satisfactorily achieve didactic and /or clinical objectives. These can include but are not limited to:

- Incomplete assignments
- Infractions of policies
- Cheating
- Inability to apply didactic knowledge to the clinical setting

Probation length will be determined by the behavior or didactic action plan created and the documented corrective action required. If a student is placed on probation the minimum time of probation will be 30 days. If during the probation period the actions are repeated the student may be dismissed from the program.

**Rates of Student Success**

**2017-2018 Program Outcomes:**

- Retention: 90%
- NBSTSA Exam pass rate: 100%
- Job Placement: 100%

**Job Availability/Job Placement**

The program offers the students instruction in writing and creating a portfolio, completing a job application, and preparing for an interview. The program will post openings as they are received. The hospital will communicate any job openings as they are opened up for applications. The program will also direct the students to the website for links to the AST website for openings. D-H does not guarantee any student employment upon graduation from the program.

**D-H Surgical Technology Certificate Program Quarter Schedule and Class Descriptions**

A minimum GPA of 75% is required for the progression to the next Surgical Technology course in the program required sequence.

Course Number/Name	Course Hours		
	Theory/classroom	Lab	Clinical
<b>Quarter 1</b>			
AHS 100 Medical Terminology	40		
AHS 200 A&P I	54		
SUR 101 Introduction to Surgical Technology and the Environment	60		
SUR 102 Perioperative Patient Care and Aseptic Technique	82		
SUR 103 Perioperative Patient Care and Aseptic Technique Lab		160	
<b>Quarter 2</b>			
AHS 300 A&P II	52		
SUR 200 Microbiology	46		
SUR 201 Surgical Procedures I (with lab)	63	78	
SUR 202 Clinical			184
<b>Quarter 3</b>			
SUR 300 Pharmacology	38		
SUR 301 Surgical Procedures II	110		
SUR 302 Clinical			256
<b>Quarter 4</b>			
SUR 400 Professional Success Development	18		
SUR 401 CST Review	44		
SUR 402 Surgical Specialties III	88		
SUR 403 Clinical			248

<b>Total Hours</b>	<b>695</b>	<b>238</b>	<b>688</b>
<b>Program Total hours</b>	<b>1621</b>		

### ***AHS 100 Medical Terminology***

**Course Hours: 40**

**Course Description:**

A study of prefixes, roots, and suffixes is undertaken as an approach to understanding medical vocabulary. Medical specialties, operative terms, and medical record words are included. Also included is medical terminology that applies to body systems. Pronunciation and spelling is also emphasized.

### ***AHS 200 Anatomy and Physiology I***

**Course Hours: 54 Hours**

**Course Description:**

This course focuses on the study of the structure and function of the human body. Topics include the cells and tissues, integumentary, skeletal, muscular, and nervous systems, and the special senses.

### ***SUR 101 Introduction to Surgical Technology***

**Course Hours: 60 Hours**

**Course Description:**

This course prepares trainees to apply knowledge of professional Surgical Technologist responsibilities and relations, interpersonal relationships, and communication skills. Emphasis is placed on creating and maintaining a safe operating environment. This course also prepares trainees to apply knowledge of surgical complications. The use of lasers in surgery is also covered. Recognize members of the surgical team and their roles; Compare and contrast the various roles of the Surgical Technologist; Summarize the different health care facilities; Classify hospital departments and their relationship to surgical services; Identify and demonstrate principles of communication in the surgical setting; Relate awareness of aseptic principles to the Surgical Technologist's role in the care of the surgical patient's; Identify the legal, ethical, and moral issues in the surgical environment; Identify the documents that are needed in a patient's medical records for surgery; Analyze major concepts inherent in professional practice law; Interpret the legal responsibilities of the Surgical Technologist and other surgical team members; Recognize the needs of the surgical patient; Demonstrates awareness that all surgical patients have a right to the highest standards and practices in asepsis; Distinguish and assess the physical, spiritual, and psychological needs of a patient; Distinguish and assess cultural and religious influences on the surgical patient; Compare and contrast the surgical care considerations for pediatric patients and patients who are obese, diabetic, pregnant, immuno-compromised, disabled, geriatric, or experiencing trauma; Recognize the hazards to the patient and staff in the operating room; Indicate cleaning procedures, traffic patterns, and routines required in the operative environment; Describe the layout of a typical operating room; Identify standard operating room furnishings and their purposes; Recognize the working environment of the OR; Discuss information management and HIPAA; Recognize basic components of a computer system; Apply electrical safety precautions; Interpret terms related to physics; Interpret the basic concepts of robotics; and Work cooperatively with others in a professional manner. All-Hazards preparation, and biomedical sciences. Upon completion, trainees should be able to apply theoretical knowledge of the course topics to the operative environment. Demonstrate all aseptic techniques and safety precautions in as it apply to patient care; Discuss and demonstrate preoperative patient transportation and routine; Demonstrate the ability to safely position surgical patients and identify positioning devices; Identify and demonstrate the concept of professionalism as it applies to the

Surgical Technologist; Discuss and define the use of Thermoregulatory devices and the different circumstances in which they will be used; Discuss and identify emergency situations in the OR as they relate to the Surgical Technologist; Work cooperatively with others in a professional manner.

### ***SUR 102 Perioperative Patient Care and Aseptic Technique***

**Course Hours: 82 Hours**

**Course Description:**

This course provides theoretical knowledge for the application of essential operative skills during the perioperative phase. This course prepares trainees to apply knowledge of the principles of aseptic technique, scrubbing, gowning, gloving, sterilization, and disinfecting. Emphasis is placed on operating room sanitation, scrubbing, gowning, gloving, and instrument identification. The trainee will be able to define and analyze the application of surgical conscious; Identify the principles and procedures related to the disinfection and sterilization process; Demonstrate competency related to the practice of sterile technique; Demonstrate competency in the procedures relating to wrapping and packaging of surgical instruments and supplies; Demonstrate the performance of the surgical hand scrub, self-gowning and gloving, gowning and gloving of team members, and proper gown/glove removal; Demonstrate the competency of opening sterile supplies; and Work cooperatively with others in a professional manner. This course prepares trainees to apply knowledge of the principles of aseptic technique, scrubbing, gowning, gloving, sterilization, and disinfecting. Emphasis is placed on operating room sanitation, scrubbing, gowning, gloving, and instrument identification.

### ***SUR 103 Perioperative Patient Care and Aseptic Technique Lab***

**Course Hours: 160 Hours**

**Course Description:**

This course provides theoretical knowledge for the application of essential operative skills during the perioperative phase. Topics include surgical asepsis, sterilization/disinfection, and perioperative patient care. Upon completion, trainees should be able to demonstrate the principles and practices of aseptic technique, sterile attire, basic case preparation, and other skills. This course prepares trainees to apply knowledge of the principles of aseptic technique, scrubbing, gowning, gloving, sterilization, and disinfecting. Emphasis is placed on operating room sanitation, scrubbing, gowning, and gloving, and instrumentation. The theory component of the course is graded based on a letter grade. For the lab component of courses, trainees will be marked off on successful completion of skills on skills check-off sheets. It is the trainee's responsibility to schedule additional practice time with an instructor if the skill(s) is (are) not mastered during lab hours. The skills lab component is graded based on a lab practical exam, and lab reports at the end of each applicable course. The lab score is then averaged in with the final course grade for the class.

### ***AHS 300 Anatomy and Physiology II***

**Course Hours: 52 Hours**

**Course Description:**

This course focuses on the study of the structure, function, and dysfunction of the digestive, respiratory, circulatory, urinary, endocrine, and male and female reproductive systems.

### ***SUR 200 Microbiology***

**Course Hours: 46 Hours****Course Description:**

This course prepares trainees to apply knowledge of micro-organisms, viruses, hepatitis, and HIV/AIDS as related to the Surgical Technologist's role in patient care. Emphasis is placed on the causes and the prevention of human diseases. Identify terms related to microbiology with their correct definitions; Define the causes, and prevention of human disease; Identify and select factors influencing the occurrence of infection; Describe means of controlling the transmission of infections; and work cooperatively with others in a professional manner.

***SUR 201 Surgical Procedures I*****Course Hours 63 Hours****Course Description:**

This course provides an introduction to selected basic and intermediate surgical specialties: general surgery, gastrointestinal, obstetrical/gynecology, and urology. Emphasis is placed on related surgical anatomy, pathology, and procedures that enhance theoretical and clinical knowledge of patient care, instrumentation, supplies, and equipment.

This course prepares trainees to apply knowledge of anatomy and physiology and the surgical instrumentation used during general, laparoscopic, obstetric, gynecological, genitourinary, and gastrointestinal surgical procedures. Define general terminology and abbreviations associated with specific surgical procedures; Discuss the relationship between instrumentation, equipment, and supplies and quality patient care in the operating room; Demonstrate techniques of opening and preparing supplies and instruments needed for any operative procedure with the maintenance of sterile technique at all times; Demonstrate the proper technique for preparing supplies and instruments on a sterile field; demonstrate and explain the procedure for counting instruments, sponges, needles, and other items on the sterile field; and work cooperatively with others in a professional manner.

***SUR 201 Surgical Procedures I Lab*****Course Hours: 78 Hours****Course Description:**

This course provides an introduction to selected basic and intermediate surgical specialties: general surgery, gastrointestinal, obstetrical/gynecology, and urology. Emphasis is placed on related surgical anatomy, pathology, and procedures that enhance theoretical and clinical knowledge of patient care, instrumentation, supplies, and equipment. The theory component of the course is graded based on a letter grade. For the lab component of courses, trainees will be marked off on successful completion of skills on skills check-off sheets. It is the trainee's responsibility to schedule additional practice time with an instructor if the skill(s) is (are) not mastered during lab hours. The skills lab component is graded based on a lab practical exam, and lab reports at the end of each applicable course. The lab score is then averaged in with the final course grade for the class.

***SUR 202 Clinical*****Course Hours: 184 Hours****Course Description:**

This course provides clinical experience with a variety of perioperative assignments to build skills learned in SUR 201. Emphasis is placed on the scrub and circulating roles of the Surgical Technologist including aseptic technique and basic case preparation for select surgical procedures. Upon completion,

trainees should be able to prepare, assist with, and dismantle surgical cases in both the scrub and circulating roles.

### ***SUR 300 Pharmacology***

**Course Hours: 38 Hours**

**Course Description:**

This course introduces the trainee to the most common categories of medication used in the operating room. The trainee gains an understanding of medications used in the surgical setting, on the surgical field, anesthetic agents and their complications. Demonstrate cricoid pressure; Identify the different categories of medications; List and describe the six rights of medication administration; Understand the Surgical Technologist's role and responsibilities in intra-operative medication administration; Understand the Surgical Technologist's role in management of anesthetic complications; Understand the Surgical Technologist's responsibility with the anesthetized patient; and work cooperatively with others in a professional manner.

### ***SUR 301 Surgical Procedures II***

**Course Hours: 110 Hours**

**Course Description:**

This course provides an introduction to selected basic and intermediate surgical specialties: ENT, maxillofacial, and plastic/reconstructive ophthalmology and Neurology. Emphasis is placed on related surgical anatomy, pathology, and procedures that enhance theoretical and clinical knowledge of patient care, instrumentation, supplies, and equipment.

This course is designed to introduce trainees to the generally required surgical techniques involved in ophthalmology, otorhinolaryngology, oral and maxillofacial, plastic, and reconstructive surgeries. Describe the anatomy, pathology, and related terminology of each system or organ that prompts surgical intervention; Describe diagnostic procedures required for surgical intervention for each surgical specialty; Identify the names and uses of special equipment required for each surgical specialty; Identify surgical instrumentation pertaining to specific surgical cases; Demonstrate a surgical procedure for each specialty; Identify any specific variations related to the preoperative and intra-operative care of various surgical patients; and work cooperatively with others in a professional manner.

### ***SUR 302 Clinical***

**Course Hours: 256 Hours**

**Course Description:**

This course provides clinical experience with a variety of perioperative assignments to build skills learned in SUR 201. Emphasis is placed on the scrub and circulating roles of the Surgical Technologist including aseptic technique and basic case preparation for select surgical procedures.

### ***SUR 400 Professional Success and Development***

**Course Hours: 18 Hours**

**Course Description:**

This course covers theoretical knowledge required for extension of the Surgical Technologist role. Emphasis is placed on advanced practice in complex surgical specialties, educational methodologies, and managerial skills. Upon completion, trainees should be able to assume leadership and educator roles in a specific specialty. This course also provides job-seeking skills and an overview of theoretical knowledge in preparation for certification. Topics include test taking strategies, resume preparation, and interviewing techniques.

***SUR 401 CST Review*****Course Hours: 44 Hours****Course Description:**

This course provides an overview of theoretical knowledge in preparation for certification. Topics include test taking strategies, and practice tests for the certification exam. Upon completion, trainees should be able to identify strengths and weaknesses in preparation for certification.

***SUR 402 Surgical Specialties III*****Course Hours: 88 Hours****Course Description:**

The course provides a comprehensive study of intermediate and advanced surgical specialties that trainees are exposed to in the third clinical rotation; orthopedics, peripheral-vascular, thoracic, cardiothoracic, pediatric, and trauma. Emphasis is placed on related surgical anatomy, pathology, and procedures that enhance theoretical knowledge of patient care, instrumentation, supplies, and equipment. Upon completion, trainees should be able to correlate, integrate, and apply theoretical knowledge of the course topics to the clinical Operative environment.

This course is designed to introduce trainees to the generally required surgical techniques involved in orthopedic, cardiothoracic, peripheral vascular surgeries, Trauma, and Pediatrics. Describe the pathology and related terminology of each system or organ that prompts surgical intervention; Identify the names and uses of special equipment required for these various surgical procedures; Demonstrate the purpose and expected outcomes of these various procedures; Identify any specific variations related to the preoperative, intra-operative and post-operative care of various surgical patients; and Work cooperatively with others in a professional manner.

***SUR 403 Clinical*****Course Hours: 248 Hours****Course Description:**

The course provides a comprehensive study of intermediate and advanced surgical specialties that trainees are exposed to in the third clinical rotation; orthopedics, peripheral-vascular, thoracic, cardiothoracic, pediatric, and trauma. Emphasis is placed on related surgical anatomy, pathology, and procedures that enhance theoretical knowledge of patient care, instrumentation, supplies, and equipment.

***Surgical Technology Courses/Skills Labs***

The theory component of the course is graded based on a letter grade. For the lab component of courses, trainees will be marked off on successful completion of skills on skills check-off sheets. It is the trainee's responsibility to schedule additional practice time with an instructor if the skill(s) is (are) not mastered during lab hours. The skills lab component is graded based on a lab practical exam, and lab reports at the end of each applicable course. The lab score is then averaged in with the final course grade for the class.