

METC Surgical Technologist Program

Clinical Training Requirements

1. Clinical (Phase II) Outcome Objectives and expectations for Student Role

Student will perform the entry level duties of an operating room specialist including scrub, assistant circulator, workroom, and central material skills to your facility.

Specifically, students will:

- Successfully perform the processes required for patient movement to and from the Operating Room as appropriate to facility.
- Demonstrate appropriate safety, infection control and aseptic practice actions to prevent or reduce potential hazards, including nosocomial infection, to patient, self and other staff.
- Demonstrate safe and proper handling of medications and solutions onto the sterile field.
- Select and use the appropriate supplies, instruments and equipment for surgical cases in accordance with the manufacturer's recommendations and facility policy.
- Demonstrate the ability to create and maintain a sterile field while assisting the surgical team during procedures, including the surgical hand/arm scrub, gowning and gloving self and others, assisting with draping, and appropriately setting up the back table.
- Perform the duties of the assistant circulator in accordance with facility standards.
- Successfully prepare surgical specimens to be passed off the sterile field to the circulator.
- Demonstrate safely and efficiently maintaining sponge, needle, sharp and instrument counts in accordance with facility policy.
- Produce surgical case worksheets on the first 50 unique surgical procedures scrubbed, according to requirements and rubric in the Medical Education and Training (METC) Surgical Technology Clinical Book (to be graded by METC Staff instructors).

2. Narrative Description of Student Role as First, Second Scrub, & Observation

FIRST SCRUB ROLE

The student surgical technologist shall perform the following duties during any given surgical procedure with proficiency. The following list is provided to identify the items that must be completed in order to document a case in the first scrub role. A student not meeting the five criteria below cannot count the

case in the first scrub role and the case must be documented in the second scrub role or observation role.

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

SECOND SCRUB ROLE

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

- Sponging
- Suctioning
- Cutting suture
- Holding retractors
- Manipulating endoscopic camera

OBSERVATION ROLE

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

3. Surgical Rotation Case Requirements

Surgical Specialty	Total # of Cases Required	Minimum # of First Scrub Cases Required	Maximum # of Second Scrub Cases that can be applied towards 120 cases
General Surgery	30 ²	20 ²	10
Surgical Specialties: <ul style="list-style-type: none"> • Cardiothoracic • ENT • Ophthalmology • Genitourinary • Neuro • OB-GYN • Oral/Maxillofacial • Orthopedics • Peripheral vascular • Plastics • Procurement/Transplant 	90 ³	60 ³	30

Diagnostic Endoscopy: <ul style="list-style-type: none"> • Bronchoscopy • Colonoscopy • Cystoscopy • EGD • ERCP • Esophagoscopy • Laryngoscopy • Panendoscopy • Sinoscopy • Ureteroscopy 			10 diagnostic endoscopy cases may be applied toward the second scrub cases. ⁵
Labor & Delivery			5 vaginal delivery cases may be applied toward the second scrub cases. ⁵
Totals	120 ^{1,7}	80	40

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 5 surgical specialties. However, 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 students' progression in First and Second Scrubbing surgical procedures of increased complexity as they move toward entry-level graduate abilities.
5. Diagnostic endoscopy cases and vaginal delivery cases are not mandatory. But up to 10 diagnostic endoscopic cases and 5 vaginal delivery cases can be counted towards the maximum number of Second Scrub Role cases.
6. Observation cases must be documented, but do not count towards the 120 required cases.
7. Counting Cases – Cases will be counted according to surgical specialty. Examples:
 - a. Trauma patient requires a splenectomy and a repair of a LeFort I fracture. Two cases can be counted and documented since the splenectomy is general surgery specialty and repair of LeFort I is oral-maxillofacial surgical specialty.
 - b. Patient requires a breast biopsy followed by mastectomy. It is one pathology, breast cancer, and the specialty is general surgery; therefore, it is counted and documented as one procedure – one case.