Virginia Western Community College

SUR 296: Onsite Training in Surgical Technology

Spring 2024
Total = 5 Credits

Instructor Information

Name:	Morgan Boyd BAS, CST Surgical Technology Program Head
Office Location:	VWCC Campus – H117A RUC Campus - 1st Floor, Room # 105
Contact Info:	mboyd@virginiawestern.edu **Office:** 540-857-6819 **Cell:** 804-357-2412
Name:	Brandi Thomason, MHA, CST Assistant Professor, Surgical Technology Clinical Director
Office Location:	VWCC Campus – H117D RUC Campus - 1st Floor, Room # 106
Contact Info:	bthomason@virginiawestern.edu **Office:** 540-985-9814 **Cell:** 540-589-0301
Office Hours:	By Appointment

Communication: Email is the preferred method for all official communication cell phone may be utilized

Students: Use your Official VWCC email account and the Inbox features within Canvas for all course communication with the instructor.

SUR 296 – Onsite Training in Surgical Technology

Course Description

Provides continued study and extensive clinical experience in all surgical specialties. Emphasis is on clinical practice thereby further enhancing theoretical and practical knowledge of select procedures, surgical instrumentation, supplies and equipment. The scrub and circulating roles of the surgical technologist including aseptic technique and case preparation for select surgical procedures continue to be emphasized. This is the third and final clinical course.

Course Prerequisites/Corequisites

Prerequisite: SURT 201, SURT 111C *Prerequisite courses are from RUC plan of study

Co-requisites: SUR 295, SUR 250

Program Competencies

1) Communicate effectively utilizing spoken, written, and technical skills with patients, physicians, and coworkers.

2) Demonstrate behavior that corresponds with an ethical and legal standard of the profession, adhering to their scope of practice, with honesty and moral integrity required to uphold patient care standards.

3) Demonstrate self-direction, accountability, and responsibility for maintaining surgical competency by pursing personal and professional development.

4) Demonstrates the application of the principles of asepsis and surgical conscience in a knowledgeable manner that provides optimal patient care in the perioperative setting.

5) Integrate knowledge and incorporate learned competencies for the delivery of patient care as an entry-level surgical technologist during basic surgical procedures.

6) Recognizes the importance of professionalism through membership in professional organizations, thereby earning the title of Certified Surgical Technologist (CST) and understands the necessity of life-long learning as a contribution to society.

7) Integrate knowledge of human anatomy, pathophysiology, and surgical procedural steps, to anticipate the surgical team's needs.

Course Learning Objectives

| Course Learning Objectives/Learning Outcomes – Upon completion of the course, students will be able to:	Meets Competency Number
Demonstrate mastery of all basic skills necessary to function as an entry level surgical technologist	#4 and #5
Demonstrate mastery of all preoperative skills and activities	#4 and #5
Demonstrate mastery of all intraoperative skills and activities	#4 and #5
Demonstrate mastery of all postoperative skills and activities	#4 and #5
Demonstrate knowledge of anatomy, aseptic technique, infection control principles, as well as all aspects necessary for the delivery of optimal patient care	#1, #2, #3, #4, #5, #6
Demonstrates personal and professional growth within the profession of a certified surgical technologist	#1 #3 #6

Learning Resources

❏ Surgical Technology for the Surgical Technologist: A Positive Care Approach
  Cengage, ISBN: 978-1-305-95641-4
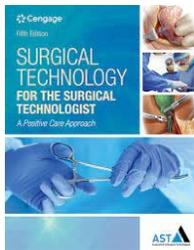
❏ Pocket Guide to the Operating Room
  ISBN: 978-0-803668393

❏ Surgical Instrumentation, An Interactive Approach
  ISBN: 978-0-323-77693-6
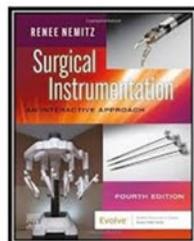
Technology Resources

o Call to Reset My VWCC Password: 540-857-7354 or contact helpdesk@virginiawestern.edu

o VWCC

Online Resourceshttps://www.virginiawestern.edu/iet-services/student-tutorials-training/

o Zoom: Help Guide (Links to an external site.)

o Download MS Office software for free: https://resources.vccs.edu/Links to an external site.

*Information can also be found under the *Student Resources and General VWCC Information and Policies* tab on Canvas. This tab can be located within the *Start Here* module

❏ Students must have consistent access to a reliable computer and Internet including a Chrome Internet browser. Download Google Chrome from the VWCC Online Resources links above.

❏ Online students must be able to troubleshoot basic technical issues with their computers and other technology. Additionally, students need to have a headset or built-in microphone as well as a webcam in order to complete the required Studio video assignments.

❏ Supported Operating Systems for Canvas include macOS and Microsoft Windows. Please note Chromebooks are **not** fully compatible with external tools in Canvas. Items such as Studio and book publisher materials should be accessed on the supported operating system as listed above.

❏ To better understand and troubleshoot technology needs for this class, review the Technology Support module located on the homepage of your Canvas course. My VCCS login credentials are required to view the technology resources in Canvas.

Method of Evaluation

Method of Evaluation	Quantity	Total Points	Percent of Grade
Clinical Evaluation # 1	1 Evaluation 200 points	200	20%
Clinical Evaluation # 2	1 Evaluation 250 points	250	25%
Clinical Evaluation # 3	1 Evaluation 300 points	300	30%
Clinical Hours	50 points	50	3%
Weekly Procedure Journal	10 Weekly Assignments 10 points each	100	12%
Critical Thinking Project	1 Assignment 100 points	100	10%
Totals		**1000**	**100%**

Students will be assigned the following final letter grades, based on calculations coming from the course assessment section above.

Grading Scale

Percentage	Points	How do I calculate my grade?
A = 93.00 – 100%	A=930 to 1000 points	Total number of points I have in the course right now: 770
B = 85.00 – 92.99	B = 850 to 929.9 points	Total number of points I can receive in the course: 1000
C = 77.00 – 84.99	C = 770 to 849.9 points	Calculate: Divide 770 into 1000 (770/1000) = 77% C
D = 69.00 – 76.99	D = 690 to 769.9 points	
F = below 69%	F = 0 to 698.9 points	This calculation gives your current % in the course

Last Day Drop & Receive Refund is Friday, February 2, 2024**

Last Day to Withdraw without Grade Penalty is Wednesday, March 27, 2024**

College Policies

Faculty and students are responsible for being familiar with Academic Support Services and Student Policies as outlined in the Student Handbook and Academic Catalog. This information is also linked on the syllabus page for this class inside of Canvas- General VWCC Information and Policies

Academic Integrity

❏ **Academic integrity & collaboration:**

▪ Student's Rights and Responsibilities regarding the student conduct can be found in the link provided. This link provides examples of misconduct, as well as information on student sanctions, academic appeals, and the associated policies for each.

Accessibility

❏ **Accommodations for students with disabilities.**

❏ If you believe you qualify for class accommodations, please contact a Disability Services to establish eligibility for obtaining an accommodations letter. Provide me a copy of the letter as early in the semester as possible and note that a new letter is required every semester.

Wellness ❏ Statement on student wellness

❏ As a student, you may experience a range of challenges that can interfere with learning. If wellness concerns or stressful life events diminish your academic performance and/or reduce your ability to participate in daily activities, consider contacting the Wellness Advocate who is on campus.

VWCC Services Contact List:

❏ Campus Police: Call: 540-857-7979 or visit https://www.virginiawestern.edu/police/

❏ Brown Library

❏ Connecting Students to Academic Success: Online tutoring can be accessed through the Academic Success webpage

- This information can be found in the [Learning Resources and Tutoring](#) tab in Canvas. The Learning Resources and Tutoring tab is within the *Student Resources and General VWCC Information and Policies* tab located in the *Start Here* module.
-

Clinical Requirements:

1. **Clinical Experience Record/Clinical Hours:** Clinical experience records are the responsibility of the clinical student. Every case must be documented on the forms provided and maintained using the Trajecsys Clinical Tracking System. It is the student's responsibility to include student name, clinical site, semester, date, procedure, specialty, surgeon and their role during the clinical experience.

   Students are required to "clock in" and "clock out" and record their completed cases on Trajecsys at the end of each clinical day. **All clinical logs must be completed before your first SUR class on Monday.**

   A **1-point** deduction per day from the clinical hour points will be incurred for late occurrences. **No exceptions.**

2. **Surgical Skills Checklist:** The Surgical Skills Checklist is an evaluation tool that is completed by your preceptor every case that you are scrubbed in. Trajecsys tracking system is used to keep track of how many cases you first or second scrubbed, and what tasks you performed during the case. You will enter the basic procedure information and your preceptor will verify and confirm these entries; comments may be made based on the student's performance on completed tasks. Surgical Skills Checklists must be appropriately initialed by your preceptor, and without the appropriate signature, they will not be considered valid. It is the responsibility of the student to record cases with pertinent details in their moleskin to avoid confusion.

3. **Clinical Evaluations:** During the semester, there will be three clinical evaluations performed by your clinical instructor based on direct observation, and preceptor feedback summarizing your overall performance. You will be provided a written explanation of your performance as well as a grade. These written evaluations will be reviewed, signed, and dated by you and your instructor to verify that all has been explained. Verbal feedback will be given to students daily when your instructor is on site. Deficiencies or dangerous practice will be addressed immediately as they are identified. Students may receive a Critical Failure based on their actions, as illustrated in the Clinical Evaluation Template.

4. **Clinical Case Prep Cards:** The case prep cards will be completed on the day/evening PRIOR to your scheduled clinical day and based on your assignment for the following day. The purpose of these cards is to research and prepare for the upcoming surgical procedures. **All cards must be handwritten and submitted by 9 pm on the day/evening PRIOR to your scheduled clinical day.**

5. **Weekly Procedure Journals:** The student will be required to complete one (1) weekly procedure card journal per week on the procedure assigned by the instructor based on cases performed within the clinical week. Procedures will be assigned no later than Friday at 9:30 a.m. and are due to be submitted on Canvas no later than 11:59 p.m. on Sunday. The format and instructions will be posted on Canvas under the assignments tab.

6. **Critical Thinking Project:**
    Students will be assigned a course project to be completed over the spring semester. For the assigned project, students are to use a variety of scholarly references and critical thinking skills to demonstrate the understanding of the subject matter and how it pertains to the role of the CST. Detailed assignment instructions will be provided to the student during the first week of the course.

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

Diagram A: *Surgical Case Requirements*

The numbers shown below reflect the minimum case requirements and surgical specialties.
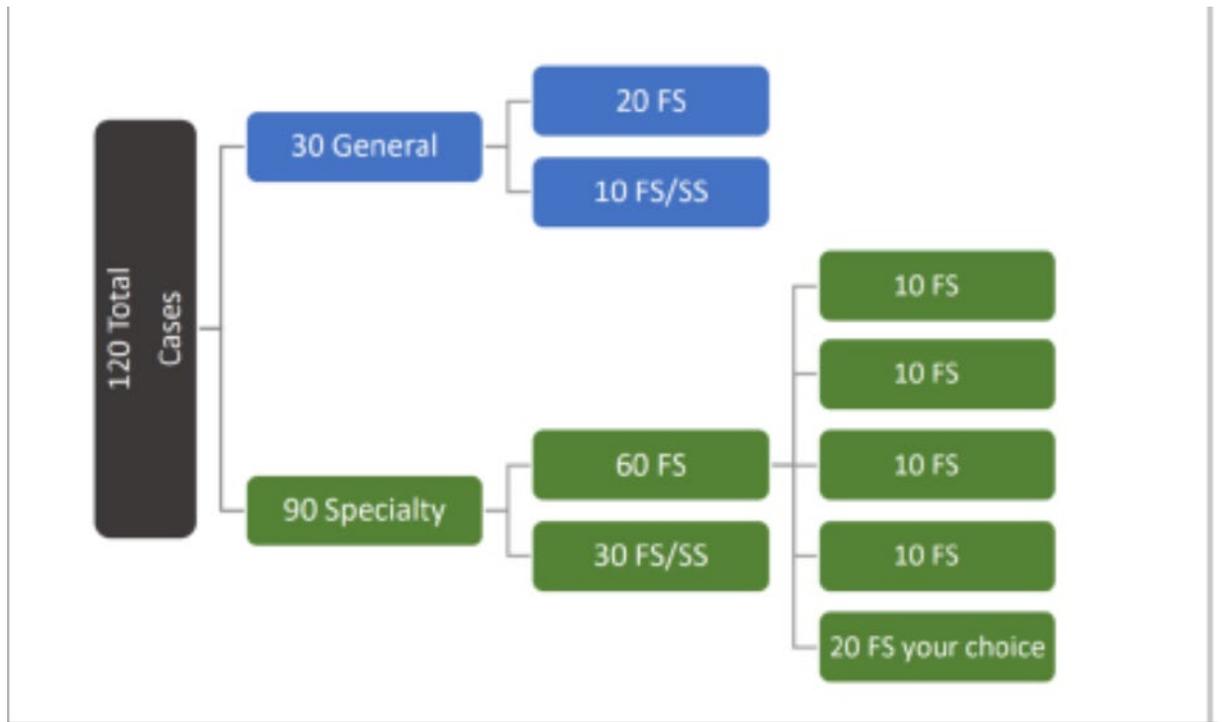
Objectives: The learner will:

1. Describe the purpose of the observation role.
2. Develop professional competency by performing in the scrub role during an arranged clinical experience.
3. Evaluate the development of professionalism throughout clinical experiences using various methods.
4. Utilize sufficient documentation for verifying cases and roles performed.
5. Demonstrate procedural proficiency by completing a minimum of 120 surgical cases.

Content:

I.   Role definitions
    A.   First Scrub Role (FS)
        1.   To document a case in the FS role, the student shall perform the following duties during any given surgical procedure with proficiency:
            a)   Verify supplies and equipment
            b)   Set up the sterile field
                1)   Instruments
                2)   Medication
                3)   Supplies
            c)   Perform required operative counts
                1)   AST guidelines[1]
                2)   Facility policy
            d)   Pass instruments and supplies
                1)   Anticipate needs
            e)   Maintain sterile technique
                1)   Recognize sterility breaks
                2)   Correct sterility breaks
                3)   Document as needed

> [1]AST Guidelines for Best Practice can be found on the AST website. www.ast.org

    B.   Second Scrub Role (SS)
        1.   The SS role is defined as a student who has not met all criteria for the FS role but actively participates in the surgical procedure in its entirety by completing any of the following:
            a)   Assistance with diagnostic endoscopy
            b)   Assistance with vaginal delivery
            c)   Cutting suture
            d)   Providing camera assistance
            e)   Retracting
            f)   Sponging
            g)   Suctioning

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

II. **Case requirements** – A student must complete a minimum of 120 cases as delineated below: (*refer to diagram A*)

    A. **General surgery**

        1. A student must complete a minimum of 30 cases in General Surgery.

            a) 20 of these cases must be performed in the FS role.

            b) The remaining 10 cases may be performed in either the FS or SS role.

    B. **Specialty surgery**

        1. A student must complete a minimum of 90 cases in various surgical specialties, excluding General Surgery.

            a) A minimum of 60 cases must be performed in the FS role and distributed amongst a minimum of four surgical specialties.

                1) A minimum of ten cases in four different specialties must be completed in the FS role (40 cases total).

                2) The additional 20 cases in the FS role may be distributed amongst any one surgical specialty or multiple surgical specialties.

            b) The remaining 30 cases may be performed in any surgical specialty in either the FS or SS role.

        2. Surgical specialties (excluding General Surgery)

            a) Cardiothoracic

            b) Genitourinary

            c) Neurologic

            d) Obstetric and gynecologic

            e) Orthopedic

            f) Otorhinolaryngologic

            g) Ophthalmologic

            h) Oral Maxillofacial

            i) Peripheral vascular

            j) Plastics and reconstructive

            k) Procurement and transplant

> [2]Programs should contact their accrediting agencies for additional clarification.
> www.arcstsa.org

III. Counting cases

    A.   Cases may be counted according to surgical specialty[2]
           as defined in the core curriculum.

           1. One pathology is counted as one procedure.

> **Example:** *A 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 and one case.*

           2. Counting more than one case on the same patient.

> **Example:** *A trauma patient requires a splenectomy and repair of a LeFort I fracture. Two cases can be counted and documented since the splenectomy is general surgery, and the LeFort I repair is an oralmaxillofacial surgical specialty.*

> **Example:** *A procedure that requires different set-ups and includes different specialties may be counted as separate cases. A mastectomy procedure (general surgery) followed with immediate reconstruction or augmentation (plastics and reconstruction) are counted as separate*

           3. Diagnostic vs. operative endoscopy cases

                a)   An endoscopy classified as a semi-critical procedure is considered a diagnostic case.

                b)   An endoscopy classified as a critical procedure is considered an operative case.

                c)   Diagnostic and operative cases will be counted according to specialty.

                d)   Diagnostic cases are counted in the SS role up to a total of ten of the required 120 cases.

> **Example**: *A cystoscopy is a diagnostic procedure. If an adjunct procedure is performed, it is considered operative; therefore, a cystoscopy with ureteral stent placement is an operative procedure.*

    B.   Vaginal delivery cases are counted in the SS role of the OB/GYN specialty, up to a total of five of the required 120.

IV. Documentation[2*]

    A.   Case performed
    B.   Role performed
    C.   Performance evaluations
    D.   Verification by program director

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

Other Course Information

Attendance Policy:
This course is 5 credits, in this practicum course you will be expected to spend 5 hours per week in independent learning which includes completion of Trajecsys, case study, case prep cards, and weekly journals. In addition, 27 hours per week that will be spent in direct instruction in the operating room, students will work towards the <u>minimum</u> of 120 surgical procedures categorized by the ARC/STSA for graduation.

Any student missing more than <u>24 hours/3days</u> of clinical time in SUR 296 may result in course failure. The student will be advised of the failure at that point and a write up will be issued. Instructor discretion will prevail in the event of unforeseen emergencies that result in student absences.

If a clinical absence or late arrival becomes necessary, it is the student's responsibility to **speak with the Clinical Coordinator** of the absence by 5:30 am on the clinical day. "Calling-in" is **mandatory. <u>Notifying the instructor of a tardy or absence via text message is not permissible.</u>**

Failure to call and inform the instructor of the absence or lateness prior to the start of the student's assigned time is considered a "No Call, No Show" and will result in suspension for the subsequent clinical day, that goes towards the total number of absences allowed. Thus, a "No Call, No Show" will result in two (2) clinical absences. In addition to suspension, the student will receive written notification that will be signed by all parties and kept in the students 'permanent file. In terms of clinical evaluation, a "No Call, No Show" could result in a "Critical failure" on the next scheduled clinical evaluation. Please refer to the Clinical Requirements section for information. Further action will be taken should a student fail to follow proper "Calling In" protocol on subsequent absences. Instructor discretion will prevail in the event of unforeseen emergencies.

Students not providing proper notification (calling the Clinical Coordinator prior to the student's assigned time) and **arriving late** (1 hour or more) for a clinical experience will NOT be permitted to attend clinical for that day; thus, resulting in an absence. A pattern of late clinical arrival (more than 3 times in the semester) is the equivalent to one (1) absence and will count towards the allotted three (3) absences for each student. There will be no opportunity to make up the missed clinical hours.

Students having a health records violation will not be allowed to attend any clinical experience until the student has been cleared. The student must be cleared **by 5:00pm the day before the next scheduled clinical day to attend. It is the responsibility of the student to keep track of all health records needs/deadlines. Any clinical days missed due to health records violations will go towards the total number of absences allowed.**

The student is expected to make the Surgical Technology Program a priority over a work schedule or other obligations. Each student is held accountable for all material covered in the clinical setting. When absence from the clinical setting becomes necessary, it is the responsibility of the student to discuss this with the Clinical Coordinator prior to the absence. Absences beyond the allotted three (3) per semester from a clinical rotation may result in the student being removed from the partnering clinical facilities for the remainder of the semester.

Late Work Policy
Late assignments are generally not accepted. The instructor reserves the right to accept late work on an individual basis for extenuating circumstances. The instructor must be contacted, and you must speak to him/her directly prior to the due date/time to discuss any emergency preventing the on-time completion of an assignment. In the event late work is accepted, there will be a total of 5 points subtracted from the grade for each day after the due date up to 3 days; any work not submitted 3 days past the due date will be given a zero "0". Late assignments received without prior permission will receive a grade of zero "0".

Workload Expectations
In this practicum course, you will be expected to spend 5 hours per week in independent learning which includes completion of Trajecsys, clinical logs, case prep cards, etc. In addition, 27 hours per week will be spent in direct instruction in the operating room.

Dress Code for Class
Surgical scrubs with VWCC logo, gray jacket and student I.D. badge are to be worn to the clinical site. Scrubs should be neat, clean, and professional-looking. Students who report for clinical dressed in improper or unprofessional attire (to include nail polish/jewelry) will be dismissed from the site by the faculty. This action is likely to result in a grade penalty as described in the syllabus for each course.

VWCC Cell Phone and Pager in the Classroom Policy
To maintain an uninterrupted flow of instruction in the classroom/lab, students will refrain from the use of cell phones or mobile devices during class. Students will not answer cell phones nor conduct phone conversations during classroom instruction. Students are expected to leave the classroom if the need to take a call arises.

NOTE: To maintain the delivery of safe and optimal patient care, as well as uninterrupted flow of instruction in the clinical setting, students **WILL BE PERMITTED TO USE THEIR CELL PHONE FOR TRAJECSYS ONLY! ALL devices must be turned to an "off" position and they are to be left in the lockers during clinical hours** unless being used for tracking purposes only. Instructors may be paged overhead if needed. If any student fails to adhere to this rule, they will be dismissed from the clinical site by the instructor.

Communication

The instructors and Program Director are available by phone, email and through office hours each week to assist you with questions or concerns. Use of office hours is encouraged as we offer immediate attention. For email correspondence, please allow at least 24 hours for a reply. More urgent matters should be handled by phone, or in person. If emailing on the weekend, you may not get a reply within 24 hours.

Inclement Weather Policies and Closing/Delay Schedule

- **Access the complete policy on inclement weather closings/delays**.
- Chart for determining class start and end times on a delayed opening schedule. Simply locate the time for your class under the column titled "regular class schedule" to determine start and end times on a delayed opening. Click here then scroll to Delayed Opening Class Schedule.
- If the college is closed, there will be no clinical
- A decision regarding the cancellation of a clinical day will be made no later than 5:30am

Topical Outline
Please refer to the Canvas Course SUR 296 for detailed assignments and due dates

Week Of	Content	Assignments/ Due Dates
Tues/Wed/Thurs [1/16 – 1/18] Week 1	Syllabus & Clinical Expectation Review **Hospital Tours TBA**	**Syllabus Acknowledgement** ***Case Study Assigned***
Tues/Wed/Thurs [1/23 – 1/25] Week 2	**Clinical Site Rotation:** Tuesday/Wednesday/Thursday 6:15 a.m. – 3:15 p.m.	Journal # 1 due on Canvas no later than 11:59 p.m. on **Sunday, January 28th**
Tues/Wed/Thurs [1/30 – 2/1] Week 3	**Clinical Site Rotation:** Tuesday/Wednesday/Thursday 6:15 a.m. – 3:15 p.m.	Journal # 2 due on Canvas no later than 11:59 p.m. on **Sunday, February 4th**
Tues/Wed/Thurs [2/6 – 2/8] Week 4	**Clinical Site Rotation:** Tuesday/Wednesday/Thursday 6:15 a.m. – 3:15 p.m.	Journal # 3 due on Canvas no later than 11:59 p.m. on **Sunday, February 11th**
Tues/Wed/Thurs [2/13 – 2/15] Week 5	**Clinical Site Rotation:** Tuesday/Wednesday/Thursday 6:15 a.m. – 3:15 p.m.	Journal # 4 due on Canvas no later than 11:59 p.m. on **Sunday, February 18th** Clinical Evaluation # 1

Tues/Wed/Thurs **[2/20 – 2/22]** **Week 6**	**Clinical Site Rotation:** Tuesday/Wednesday/Thursday 6:15 a.m. – 3:15 p.m.	Journal # 5 due on Canvas no later than 11:59 p.m. on **Sunday, February 25th**
Tues/Wed/Thurs **[2/27 – 2/29]** **Week 7**	**Clinical Site Rotation:** Tuesday/Wednesday/Thursday 6:15 a.m. – 3:15 p.m.	Journal # 6 due on Canvas no later than 11:59 p.m. on **Sunday, March 3rd**
Tues/Wed/Thurs **[3/5 – 3/7]** **Week 8**	****New Clinical Site Assignment**** **Clinical Site Rotation:** Tuesday/Wednesday/Thursday 6:15 a.m. – 3:15 p.m.	Journal # 7 due on Canvas no later than 11:59 p.m. on **Sunday, March 10th**
Tues/Wed/Thurs **[3/12 – 3/14]** **Week 9**	**Spring Break**	**Spring Break**
Tues/Wed/Thurs **[3/19 – 3/21]** **Week 10**	Tuesday/Wednesday/Thursday 6:15 a.m. – 3:15 p.m.	Journal # 8 due on Canvas no later than 11:59 p.m. on **Sunday, March 24th**
Tues/Wed/Thurs **[3/26 – 3/28]** **Week 11**	**Clinical Site Rotation:** Tuesday/Wednesday/Thursday 6:15 a.m. – 3:15 p.m.	Journal # 9 due on Canvas no later than 11:59 p.m. on **Sunday, March 31st**
Tues/Wed/Thurs **[4/2 – 4/4]** **Week 12**	**Clinical Site Rotation:** Tuesday/Wednesday/Thursday 6:15 a.m. – 3:15 p.m.	Journal # 10 due on Canvas no later than 11:59 p.m. on **Sunday, April 7th** Clinical Evaluation # 2

Tues/Wed/Thurs **[4/9 – 4/11]** **Week 13**	**Clinical Site Rotation:** Tuesday/Wednesday/Thursday 6:15 a.m. – 3:15 p.m.	**<u>Semester Clinical Project due on Canvas no later than 11:59 p.m. on Sunday, April 14th</u>**
Tues/Wed/Thurs **[4/16 – 4/18]** **Week 14**	**<u>Clinical Site Rotation:</u>** <u>Tuesday/Wednesday/Thursday</u> <u>6:15 a.m. – 3:15 p.m.</u>	
Tues/Wed/Thurs **[4/23 – 4/25]** **Week 15**	**Clinical Site Rotation:** <u>Tuesday/Wednesday/Thursday</u> 6:15 a.m. – 3:15 p.m.	
Tues/Wed/Thurs **[4/30 – 5/2]** **Week 16**	**Clinical Site Rotation:** <u>Tuesday</u> 6:15 a.m. – 3:15 p.m. <u>Wednesday/Thursday</u> VWCC *Full Attendance Required*	**Clinical Evaluation # 3**

Revised: 12/20/2024

Academic Dates

❏ Link to the website where academic calendar and exam schedule can be found
Academic Calendar and Exam Schedule

Subject to Change

❏ This syllabus and the accompanying schedule are subject to change. Any revisions to these documents will be posted in Canvas and an email and announcement will be sent notifying you of the revisions.

ADA Statement (PDF)

Title IX Statement (PDF)