Contents

Acknowledgement of Policies Requiring Signature ................................................................. 3
Child Abuse and the Mandated Reporter .................................................................................. 4
Health Insurance Coverage ........................................................................................................ 5
Computer Lab Usage .................................................................................................................. 6
Background Check Policy .......................................................................................................... 6
Criminal Convictions Policy ...................................................................................................... 7
Policy for the Prevention and Management of Substance Abuse ........................................... 7
Social Media Policy .................................................................................................................. 18
Welcome .................................................................................................................................. 20
University Values ..................................................................................................................... 20
Equal Opportunity/Affirmative Action Statement .................................................................... 20
Administration and Faculty ....................................................................................................... 21
Clinical Sites ............................................................................................................................. 22
The Surgical Technology Profession ......................................................................................... 23
Program Mission and Goals ....................................................................................................... 24
Surgical Rotation Case Requirements ........................................................................................ 25
Desired Outcomes of the Surgical Technology Program .......................................................... 26
First and Second Scrub Role and Observation ......................................................................... 26
University Learning Outcomes ................................................................................................. 27
Student Rights and Responsibilities .......................................................................................... 28
Clinical Standards ..................................................................................................................... 29
Program and Curriculum Information ....................................................................................... 36
Attendance Policy ..................................................................................................................... 37
Critical Incidents ......................................................................................................................... 39
Cancellations (Severe Weather) ................................................................................................. 40
Vacations/Holidays ..................................................................................................................... 40
Dress Code ................................................................................................................................ 40
Readmission Criteria and Procedure ......................................................................................... 42
Student Pregnancy ...................................................................................................................... 43
Clinical Education Agreement to Minimize Fetal Exposure .................................................... 45
Statement of Medical Options for the Pregnant Student .......................................................... 46
Insurance Coverage and Accidents ........................................................................................... 47
Communicable Disease Policy ................................................................. 47
Serious Illness and Disease Policy ......................................................... 48
HIV AND HBV ......................................................................................... 48
Accidental Exposure to Blood or Body Fluids ........................................ 49
Professional Conduct ........................................................................... 50
Unprofessional Conduct ........................................................................ 52
Removal from a Clinical Site ................................................................. 53
Grievance Procedures ........................................................................... 57
The Disciplinary Action ......................................................................... 60
Miscellaneous Policies .......................................................................... 60
Outstanding Clinician Award ............................................................... 61
Academic Award ................................................................................... 62
Forms ..................................................................................................... 62
Accident Report .................................................................................... 63
Critical Incident Record ......................................................................... 64
Agencies to Know .................................................................................. 66
Acknowledgement of Policies Requiring Signature

I have read the information contained in this Policy and Procedures Manual. I understand the information as it has been outlined and agree to abide.

Checking that I have read or been presented with each of the following policies/sections required and that by checking the box by each policy/section name, I acknowledge that I understand the information and requirements therein contained.

☐ Computer Lab Use (pg. 6)
☐ Background Check Policy (pg. 6)
☐ Criminal Convictions Policy (pg. 7)
☐ Exam Policy (pg. 17)
☐ Sign-In Policy (pg. 17)
☐ Cheating/Plagiarism Policy (pg. 17)
☐ Social Media Policy (pg. 18)
☐ Surgical Technology Clinical Standards (pg. 29)
☐ Attendance Policy (pg. 37)
☐ Professional Conduct Requirements (pg. 50)

☐ HIPAA Presentation

☐ Standard Precautions Statement

__________________________________________  ______________________________________
Student’s Printed Name                          Student’s Signature

_________________________  __________________________
Date                                    Student’s ID Number
Child Abuse and the Mandated Reporter

I state that I have viewed the presentation on “Child Abuse and Mandated Reporters”. I understand that as a healthcare worker, I am a mandated reporter. I state I have been given signs of child abuse to watch for and information concerning how and where to report all forms of child abuse.

With my signature below, I herewith make a commitment to this university, my instructors, my clinical site monitors, my assigned hospital site, the medical profession, and to myself to devote the attention and efforts necessary to complete this course of study.

_________________________________________  __________________________________________
Student’s Printed Name                  Student’s Signature

_________________________  __________________________
Date                       Student’s ID Number
Health Insurance Coverage

Surgical technology program students must be responsible for any financial coverage if injured in the clinical setting, as there is no worker’s compensation for students.

“All students admitted to the surgical technology program are expected to carry personal health insurance.”

☐ I am covered by health insurance with the following company/agency:

Name of Company

ID Number

Policy Holder’s Name

☐ I am not covered by health insurance, but will be responsible for any necessary personal health expenses.

Student ___________________________ Date ______________________
Computer Lab Usage

The Computer Labs are for your use in assisting you to become a better student and to complete your work with all the latest medical information. Use of the computers for non-academic purposes is strictly forbidden and will result in loss of network privileges.

Use of the computers for gaining access to sexually explicit materials will be cause for dismissal from UAFS. For further information, refer to the UAFS Student Handbook & Code of Conduct.

Background Check Policy

Purpose:
The University of Arkansas - Fort Smith College of Health Sciences is committed to producing graduates who go beyond academic excellence, who are productive, self-sufficient citizens of society, who are responsive to the global community and who maintain high ethical standards in their personal and professional lives. The attainment of this goal is facilitated by partnering with clinical agencies that consent to having faculty and students practice in their facilities. Students must therefore adhere to all agency policies, such as background checks. The purpose of this policy is to describe the terms and conditions under which background checks are conducted.

Policy:
A criminal background check is required of all students accepted into the University of Arkansas Fort Smith College of Health Sciences Imaging Sciences, Surgical Technology, Dental Hygiene and School of Nursing Programs. A third party vendor will conduct the background checks. The student will be responsible for all fees associated with any components of the background check process. All information will be treated as confidential but will be shared with the Imaging Sciences, Surgical Technology, Dental Hygiene or School of Nursing Executive Director and assigned agencies when requested and will be retained in the student’s health file.

Each clinical agency will independently determine if an adverse or negative outcome on the criminal background check will prohibit a student’s practice in their agency. Students unable to practice in clinical agencies because of an adverse or negative background check will be unable to complete program objectives, halting continued progression in the student’s program of study. Failure to complete the background check process prior to the Friday of the first week of class will result in the student’s inability to complete the program objectives and will therefore halt progression in the student’s program of study.

Students must comply with any additional background checks required by their licensing agency.

General Guidelines:
1. Immediately upon acceptance into a College of Health Sciences Program, the student must authorize the background check by completing the background authorization form provided by the vendor. This form is available to the student upon acceptance into their respective program. The student must also authorize the vendor to send a copy of the results of the background check to their Program Executive Director. Results must be received by the Friday before fall semester begins.
2. The following background checks shall be conducted by the vendor. Additional requests may be made by an agency.

Office of Inspector General
Sex and violent offender check Social Security Verification Current County of Residence

3. If a background check is returned with unfavorable results, the Executive Director will notify the student and the student’s assigned clinical agencies. The clinical agencies will determine if the student will be allowed to practice as a student in their clinical facility.

4. The student has the option to dispute any inaccurate information with the reporting agency, as a right of the Fair Credit Reporting Act. The student will not be able to complete the program objectives, halting their progression in the program of study, until the dispute is resolved.

5. If the background check is favorable, no further action will be taken.

6. All background check results will be retained in the student's file.

Criminal Convictions Policy

Persons who have been convicted of a crime may not be eligible to write national certification exam upon completion of this program. Graduates who become certified will still need to address the legal issue with potential employers. Many employers have policies concerning employees who have been convicted of a crime. Students convicted of a crime prior to or during the course of surgical technology education, must schedule an appointment with the Surgical Technology Executive Director. The Surgical Technology faculty strongly recommend honest admission of any criminal offenses prior to enrolling in this program as this may prohibit the student from obtaining employment post-graduation.

Policy for the Prevention and Management of Substance Abuse

Introduction:
The University of Arkansas – Fort Smith, College of Health Sciences (CHS) recognizes its responsibility to provide a healthy environment within which students may learn and prepare themselves to become members of the healthcare profession. We are committed to protecting the safety, health and welfare of faculty, staff, students, and people who come into contact with them during scheduled learning experiences. The CHS strictly prohibits the illicit use, possession, sale, conveyance, distribution and manufacture of illegal drugs, intoxicants, or controlled substances in any amount or in any manner and the abuse of non-prescription and prescription drugs.

Any CHS student, who is taking pain or other behavior-altering medications, must provide a medical release from the prescribing physician to the Program Executive Director. Any CHS student who exhibits behaviors (as identified in Appendix A) is subject to testing for cause.
Any CHS student who tests positive for illegal, controlled, or abuse-potential substances, and who cannot produce a valid and current prescription for the drug, will be subject to disciplinary action as specified in the Policy for the Prevention and Management of Substance Abuse.

Any CHS student who is aware that another CHS student is using or is in possession of illegal drugs, intoxicants, or controlled substances is obligated to report this information to a CHS faculty member immediately. It is the ethical responsibility of all to ensure that the integrity of the profession and the institution remain in good standing.

The intent of the Policy for the Prevention and Management of Substance Abuse is to identify chemically impaired students. The Policy also attempts to assist the student in the return to a competent and safe level of practice and to achieve his/her educational and professional goal. Emphasis is on deterrence, education, and reintegration. All aspects of the policy are to be conducted in good faith with compassion, dignity and confidentiality.

As a condition of enrollment, each student will sign a Release Form (Appendix B) agreeing to adhere to the Policy for the Prevention and Management of Substance Abuse. Failure to adhere to the conditions specified in this policy will result in dismissal from your CHS program. This Policy is in alignment with the UAFS Philosophy. See University Catalog for further information.

Substances- Substance-related disorders are listed in the Diagnostic and Statistical Manual of Mental Disorders, fourth edition, (DSM-IV). Substances of abuse are grouped into eleven classes: alcohol, amphetamines or similarly acting sympathomimetics, caffeine, cannabis, cocaine, hallucinogens, inhalants, nicotine, opioids, phencyclidine (PCP) or similarly acting arylcyclohexylamines and sedatives, hypnotics or anxiolytics. The CHS has the authority to change the panel of tests without notice to include other illegal substances as suggested by local and national reports or circumstances.

Testing Procedures
When Testing May Occur: The CHS will require a student to submit to drug testing under any or all of the following circumstances:

- Upon conditional admission to any CHS program beginning on or after January 1, 2012. Random testing as required by the clinical agencies.
- For cause (see Appendix A).
- As part of a substance abuse recovery program.

STUDENTS WHO REFUSE TESTING OR DO NOT SUBMIT TO TESTING IN THE 2 HOUR TIME FRAME WILL BE IMMEDIATELY DISMISSED FROM THE CHS PROGRAM.

The student is responsible for the cost of required drug screens, for MRO (Medical Review Officer) consultation, and/or split sample analysis. The student, if tested for cause, will be required to arrange for alternate mode of transportation (e.g., family or taxi) rather than self-transport.

Testing Facility: The CHS has identified Cooper Clinic (a SAMHSA2- approved laboratory) to perform testing utilizing the agency's policies. The clinic is located at 4300 Regions Park Circle (Appendix C). The CHS will use an MRO who will review and interpret test results and assure (by
telephone interview with each donor whose test is lab positive) that no test result is reported as positive unless there is evidence of unauthorized use of substances involved.

Sample Collection: The collection techniques will adhere to the guidelines in accordance with US Department of Transportation 49 CFR Part 40 following chain of custody protocol. An observed specimen will be collected by the designated lab. If warranted (testing for cause or random), the student will submit appropriate laboratory specimens, within a two-hour time frame, in accordance with the University of Arkansas – Fort Smith CHS Policy for the Prevention and Management of Substance Abuse. The Program Executive Director will be notified of the results within 48 hours.

Positive Results: Test results will be considered positive if substance levels, excluding caffeine and nicotine, meet or exceed established threshold values for both immuno assay screening and gc/ms confirmation studies, and the Medical Review Officer Verification interview verifies unauthorized use of the substance. Split samples are saved at the original lab and may be sent to another SAMHSA-2 approved lab for additional testing at the student’s expense. If any one laboratory is positive for substances classified in the DSM-IV, the decision will be immediate suspension from the program.

Confidentiality
All testing information, interviews, reports, statements and test results specifically related to the individual are confidential. The Program Executive Director or designee will receive drug test results from the lab, and only authorized persons will be allowed to review this information. Records will be maintained in a safe, locked cabinet and/or password protected electronic database. While the issues of testing are confidential within the university community, the information regarding substance abuse and rehabilitation may need to be shared with the licensing agency upon application for licensure. (Reference: Confidentiality issues forbid the CHS from disclosing drug/alcohol information about the student according to guidelines of US Department of Transportation 42 CRF Part 2).

Treatment, Referral, & Readmission
The outcome of a positive drug screen will constitute immediate suspension from the CHS program. The Program Executive Director will refer persons identified as having substance abuse problems for therapeutic counseling for substance withdrawal and rehabilitation.

A student will not be denied learning opportunities based on a history of substance abuse. The readmission process for a student who has previously tested positive for substance abuse will include:

Demonstrated attendance at AA, NA, or a treatment program of choice from a legitimate substance abuse counselor for a one year period of time. Evidence of participation must be presented to the CHS by the student. Acceptable evidence shall include: a written record with the date of each meeting, the name of each group attended, purpose of the meeting, and the signed initials of the chairperson of each group attended, plus any pertinent information.

Demonstration of at least one year of abstinence immediately prior to application through random drug screening, including drug of choice. Letters of reference from all employers and sponsor within the last year. A signed agreement to participate in monitoring by random drug
screening consistent with the policy of the CHS and the clinical agency where assigned client care. The student is required to pay for testing.

Abstinence from the use of controlled or abuse potential substances (and/or alcohol) except as prescribed by a licensed practitioner from whom medical attention is sought. The student shall inform all licensed practitioners who authorize prescriptions of controlled or abuse potential substances of student's dependency on controlled or abuse potential substances, and student shall cause all such licensed practitioners to submit a written report identifying the medication, dosage, and the date the medication was prescribed. The prescribing practitioners shall submit the report directly to the Program Executive Director or designee within ten (10) days of the date of the prescription.

If a student is readmitted to the surgical technology program and a positive test for substance abuse is found, the student will be dismissed from the program and will be ineligible to return. Furthermore, the student will be ineligible to receive a letter of good standing from the CHS program.

Readmission to any CHS program will constitute completing the regular admission process to begin any program and acceptance is determined in the same manner as all other students seeking admission.

Appeal Process:
An explanation of the Appeal Process can be found in the UAFS University Catalog at: http://issuu.com/ua_fort_smith/docs/2011_12_catalog?e=2010060/2120444#search

Testing For Cause
Any CHS student who demonstrates behavioral changes suspected to be related to the use of drugs, including but not limited to alcohol, will be subjected to testing. Student behaviors will be observed on campus, in the clinical agencies, and at program-related community activities. The faculty member’s decision to drug test for cause will be based on:

- Observable phenomena such as direct observation of drug use and/or physical symptoms or manifestations of being under the influence of a drug.
- Erratic behavior, slurred speech, staggered gait, flushed face, dilated/pinpoint pupils, wide mood swings, deterioration of work performance or other behaviors as listed in Appendix “A” of “The Policy for the Prevention and Management of Substance Abuse“.
- Information that a student has caused or contributed to an accident that resulted in client injury potentially requiring treatment by a licensed health care professional.
- Conviction by a court or being found guilty of a drug, alcohol or controlled substance charge.

Any student found guilty of criminal use of drug, alcohol, or controlled substance will be suspended from the CHS program.

Testing will be conducted using the following policy/procedure:
1. The faculty member will have an additional faculty member or staff confirm the student’s suspicious behavior.
2. The student will be required to leave the area. Accompanied by the faculty member and witness to a location ensuring privacy and confidentiality, a discussion of the situation will ensue. A decision as to whether or not to drug test will be made. The discussion and outcome of the discussion will be documented and forwarded to the Program’s Executive Director.
3. If warranted, the student will submit appropriate laboratory specimens, within a two-hour time frame, in accordance with the UAFS CHS Policy for the Prevention and Management of Substance Abuse and clinical agency policies. Failure to submit for testing within the two hour time frame will result in immediate dismissal from the CHS Program.
4. If the clinical agency initiates random or for cause drug screening, the student will follow clinical agency policy on suspected substance abuse.
5. The student will be suspended from all clinical activities until the case has been reviewed by the appropriate personnel or committees, as designated by the Program’s Executive Director or the Dean of the CHS.
6. If the laboratory test is negative for substances classified in the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV), the student will be allowed to return to class without penalty. Arrangement to make up missed work must be initiated by the student on the first day back to class or clinical (whichever comes first).
7. If any one laboratory test is positive for substances classified in the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV), the student will be immediately suspended from the CHS program.
8. Confidentiality will be maintained.
<table>
<thead>
<tr>
<th>Substance Abuse Behaviors</th>
<th>Alcohol</th>
<th>Drugs</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Academic &amp; Clinical Performance</strong></td>
<td>1. Frequently late and/or incomplete paperwork.</td>
<td>1. Frequently late and/or incomplete paperwork.</td>
</tr>
<tr>
<td></td>
<td>3. Lack of participation in group activities and class.</td>
<td>3. Lack of participation in group activities and class.</td>
</tr>
<tr>
<td></td>
<td>4. Fails multiple tests.</td>
<td>4. Fails multiple tests.</td>
</tr>
<tr>
<td><strong>Preferences in Assignment</strong></td>
<td>1. Transfers to less demanding or more independent or isolated assignments;</td>
<td>1. Prefers area with high usage of drug choice, decreased patient awareness and lack of supervision; i.e., intensive care unit, orthopedics, anesthesia, nursing homes, or busy surgical units.</td>
</tr>
<tr>
<td></td>
<td>2. Does not volunteer for additional or difficult assignments.</td>
<td>2. Volunteers for evening or night clinical rotations.</td>
</tr>
<tr>
<td><strong>Absenteeism</strong></td>
<td>1. Has frequent absences</td>
<td>1. Has frequent absences</td>
</tr>
<tr>
<td></td>
<td>2. Calls in last minute.</td>
<td>2. Calls in last minute.</td>
</tr>
<tr>
<td><strong>Time on Unit</strong></td>
<td>1. Arrives late.</td>
<td>1. Arrives early; leaves late; skips lunch and breaks; appears at unusual hours.</td>
</tr>
<tr>
<td></td>
<td>2. Departs early</td>
<td></td>
</tr>
<tr>
<td><strong>Disappearances</strong></td>
<td>1. Declines offer for meals or breaks with peers; eats on unit or eats alone.</td>
<td>1. Arrives early; leaves late; skips lunch and breaks; appears at unusual hours.</td>
</tr>
<tr>
<td><strong>Decreased Effectiveness</strong></td>
<td>1. Displays inconsistent or erratic performance.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2. Fails to meet deadlines or schedules.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>3. Staff complains about student not carrying share of patient assignment.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>4. Patients and families complain about student’s job performance.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>5. Decreasing ability to make quick judgments or to accomplish routine tasks.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>6. Requires more structure for assignments and activities</td>
<td></td>
</tr>
<tr>
<td></td>
<td>7. Experiences difficulty conceptualizing assignments.</td>
<td></td>
</tr>
<tr>
<td><strong>Charting and Reporting in Clinical Setting (Nursing only)</strong></td>
<td>1. Discrepancies are indicated between the patient’s and student’s reports.</td>
<td><strong>Same as Alcohol plus:</strong></td>
</tr>
<tr>
<td></td>
<td>2. Administers more medications than other students.</td>
<td>1. Charts as administered, but patients complain of incomplete relief from medications given.</td>
</tr>
<tr>
<td></td>
<td>3. Omits documenting interventions.</td>
<td>2. Records un-witnessed or excessive breakage, waste or loss.</td>
</tr>
<tr>
<td></td>
<td>4. Handwriting noticeably affected.</td>
<td>3. Signs out several PRN medications at one time; i.e., “I’m going to get all my pre-ops ready now.”</td>
</tr>
<tr>
<td></td>
<td>5. Makes illogical comments; increased errors or omissions.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>6. Fails to report accidents and to complete incident reports.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>7. Writes reports which differ from oral reports.</td>
<td></td>
</tr>
<tr>
<td>Alcohol</td>
<td>Drugs</td>
<td></td>
</tr>
<tr>
<td>---------</td>
<td>-------</td>
<td></td>
</tr>
<tr>
<td><strong>Appearance</strong></td>
<td>1. Always wears uniform with pockets, long sleeves, or sweater even in warmer weather.</td>
<td></td>
</tr>
<tr>
<td>1. Uses mouthwash or strong perfume to cover alcohol odor on breath and clothing.</td>
<td>2. Uses band aids on hands and arms.</td>
<td></td>
</tr>
<tr>
<td>2. Eyes are red, &quot;bloodshot,&quot; or bleary.</td>
<td>3. Pupils may be constricted (narcotics), or dilated (stimulants), although need to consider multi drug use.</td>
<td></td>
</tr>
<tr>
<td>3. Spider veins appear, especially around nose.</td>
<td>4. Runny eyes or nose with clear mucous drainage.</td>
<td></td>
</tr>
<tr>
<td>4. Face wrinkled, flushed, and puffy.</td>
<td>5. Malnourished, anorexic, signs of fluid and electrolyte imbalance (edema, dehydration).</td>
<td></td>
</tr>
<tr>
<td>5. Increasing carelessness about personal appearance.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Unkempt; hair lacks luster.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Avoids eye contact.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Appears older than age.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Easily fatigued.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Leathery skin.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Thin; fat in front with liver enlargement (weight slightly higher on frame than in obesity, which is in lower abdomen, hips and thighs).</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Signs of Withdrawal</strong></td>
<td>1. Abdominal muscle cramps.</td>
<td></td>
</tr>
<tr>
<td>2. Poor coordination, gait.</td>
<td>3. Irritable; restless manner.</td>
<td></td>
</tr>
<tr>
<td>3. Diaphoresis.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Headaches, especially in the morning or at the beginning of the shift.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Illness and Injury</strong></td>
<td>1. Requests drug of choice for frequent injuries which require medication or elective surgery.</td>
<td></td>
</tr>
<tr>
<td>1. Frequent minor illnesses; vague somatic complaints (flu, virus, backache, toothache).</td>
<td>2. Demonstrates low tolerance for pain and high tolerance for drugs.</td>
<td></td>
</tr>
<tr>
<td>2. Prone to accidents.</td>
<td>3. Experiences infections, abscesses or scar tissue from intravenous punctures.</td>
<td></td>
</tr>
<tr>
<td>4. Cirrhosis; liver malfunction.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Peripheral neuropathy.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Pancreatitis.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Common Characteristics</strong></td>
<td>1. Altered states of consciousness.</td>
<td></td>
</tr>
<tr>
<td>1. Demonstrates wide mood swings.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Experiences difficulty in all types of relationships.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Is irritable with staff, patients and family.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Blames others.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Lies; provides inconsistent information; rationalize and creates elaborate excuses for behavior.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
8. Changing to a younger age group; most often observed in ages 40-45.
9. Socializes only with persons who drink; alcohol becomes focus of all activities; becomes isolated.
10. Demonstrates alcohol tolerance.
11. Experience blackouts.
12. Drinks early in the day, before parties, alone, and sneaks drinks; sensitive to comments about drinking.
13. Uses coffee or cigarettes excessively.
14. Prone to auto accidents.
15. May have had driver’s license suspended or revoked.
16. Changing to 40-50 age group; most often observed in late 20’s age group.
17. Spends time alone and sleeping; restricted interests.
18. Preoccupied with obtaining and using drugs.

Source: Oklahoma Nurse Assistance Program
6414 No. Santa Fe, Ste. A
Oklahoma City, OK 73116
405-840-3478
Appendix B

Policy for the Prevention and Management of Substance Abuse

Release and Acceptance Form

I, ______________________________ have read and understand the Policy for the Prevention and Management of Substance Abuse for the University of Arkansas – Fort Smith College of Health Science. I understand that I am responsible for the cost of drug screens required due to cause, for MRO (Medical Review Officer) consultation, and/or split sample analysis. I understand, if I’m tested for cause, I am required to arrange for an alternate mode of transportation (e.g., family or taxi) rather than self-transport.

I agree that the lab used for drug testing is authorized by me to provide results of the test(s) to the CHS Program’s Executive Director. I agree to indemnify and hold the lab harmless from and against any and all liabilities of judgments arising out of any claim related to 1) compliance of the college with federal and state law and 2) the college’s interpretation, use and confidentiality of the test results, except when the lab is found to have acted negligently with respect to such matters.

I understand that an outcome of a positive drug screen will constitute immediate suspension from my CHS Program. Re-admittance to my program will follow the Program’s Readmission Criteria and Procedures Policy.

I understand that if I’m readmitted to the program and a positive test for substance abuse is found, I will be dismissed from the program and will be ineligible to return. Furthermore, I will be ineligible to receive a letter of good standing.

__________________________________  _______________________________________
Student Signature                                  Executive Director Signature

__________________________________  _______________________________________
Date                                  Date

Appendix C

15
Map to Testing Center
Directions Distance

There are 0.42 miles between your starting location and the beginning of your driving directions. Use maps to get from your starting location to the beginning of your route.

1. Start out going East on GRAND AVE. 0.09 miles
2. Take the I-540 W ramp. 0.24 miles
3. Merge onto I-540 W. 4.42 miles
4. Take the AR-255/ZERO ST. exit - exit number 11. 0.19 miles
5. Turn LEFT onto AR-255. 0.46 miles
6. Turn RIGHT onto Old Greenwood Road 0.1 miles
7. Turn LEFT onto Regions Park Drive
   facility will be on right 190 ft. Total
   Estimated Time: 8 minutes and Total
   Distance: 5.41 miles

ORIGIN: DESTINATION:
5210 Grand Ave Cooper Clinic Occupational Medicine
Fort Smith, AR 4300 Regions Park Circle
72904-7362 US Fort Smith, AR 72903
479-484-4665

Privacy Policy & Legal Notices: © 2002 MapQuest.com,
Inc. All rights reserved. http://www.mapfinder.com/
The Surgical Technology Program has adopted the following policies. Please read then sign and date page three (3). After signing, return the signature page to the Executive Director. This copy will be placed in your student file.

**Exam Policy**
I understand that the content of all examinations is confidential. I agree that I will not divulge any questions on any examination to any individual or entity. I understand that the unauthorized possession, reproduction, or disclosure of any examination questions before, during, or after the examination is in violation of university policy. A violation of this can result in disciplinary action by the educational institution including the denial of certification and/or completion of the program.

**Sign-in Policy**
In the event that students must “sign-in” to a class, lab or clinical setting, each student must sign his/her own name. It is unethical and in violation of policy to sign anyone else in for any reason, and to do so will result in disciplinary action. When signing in for class, lab or clinical after the designated time, it is your responsibility to note the time on the roll next to your name.

**Cheating/Plagiarism Policy**
Cheating in any form, including plagiarism (stealing and passing off, as one’s own, the words or ideas of another) is unethical and will result in disciplinary action in accordance with stated university policy. *(See UA Fort Smith Academic Catalog)* To assist another to cheat is equally unacceptable and can result in the same disciplinary actions.
Social Media Policy

**Purpose**
To communicate potential problems and liabilities associated with the use of the Internet and electronic communication systems.

**Definitions**
Electronic communication systems – websites or web-based services that users may join, view, and/or post information to, including but not limited to weblogs (blogs), internet chat rooms, online bulletin boards, and social networking sites including but not limited to Facebook, MySpace, Twitter, iTunes, YouTube, LinkedIn, and Flickr.

**Policy**
1. Individuals may not share confidential information in violation of HIPAA or FERPA related to UAFS business on electronic communication systems, including but not limited to, personnel actions, internal investigations, research material, or patient/student/faculty information. This includes sharing photos or partial information even when names of patients, students, faculty, or employees of clinical agencies are not used. This includes any activity that would cause UAFS to not be in compliance with state or federal law.

2. Individuals assume personal liability for information they post on electronic communication systems, including but not limited to personal commentary, medical advice, photographs, and videos. UAFS does not endorse or assume any liability for students’ personal communications.

3. Individuals should exercise appropriate discretion in sharing information, with the knowledge that such communications may be observed by patients, faculty, students and potential employers.

4. Individuals should not post defamatory information about others, activities or procedures at UAFS, other institutions, or clinical sites through which they rotate.

5. Individuals should not represent or imply that they are expressing the opinion of UAFS, other institutions, or clinical sites through which they rotate.

6. Individuals should not misrepresent their qualifications or post healthcare advice.

7. Since information posted on the Internet is public information, UAFS and other interested parties may review electronic communication systems for content regarding current students.

8. Employers, organizations, and individuals may monitor and share information they find posted on electronic communication systems.
9. If potentially inappropriate material has been posted on an electronic communication system, the person who discovered the material should discuss the finding with the Executive Director of Surgical Technology.

10. Disciplinary actions may occur in compliance with UAFS Surgical Technology Professional Conduct Policy. If an agency denies any student the right to complete time in their facility, it is an automatic dismissal from the UAFS Surgical Technology Program.
Welcome
To the
University of Arkansas Fort Smith
Surgical Technology Program

Congratulations on being selected to participate in the University of Arkansas Fort Smith Surgical Technology Program. The faculty and staff at UAFS expect that your progress through the program will provide the knowledge and skills necessary for you to perform competently in your chosen profession.

This manual is designed to serve as a guide to general information pertaining to the Surgical Technology Program’s policies and procedures. Please feel free to address questions or concerns you may have with the program faculty or clinical instructors.

Please read this manual carefully. You will be held accountable for all information related to you in this manual. After reading it, you must sign and return to the Executive Director by the end of the first week of school.

University Values

University of Arkansas – Fort Smith holds a set of core values based on the beliefs that we can and should be the best of learning organizations by centering our focus and efforts on the learner and by practicing and modeling integrity and ethical behavior, responsibility for results, service to our fellow citizens and the communities we serve, and cooperation and collaboration with others in the betterment of the world in which we live.

Equal Opportunity/Affirmative Action Statement

UA Fort Smith provides equal employment, admission, and educational opportunities without regard to race, color, gender, religion, age, or learning or physical disability.

UA Fort Smith does not discriminate on the basis of disability in admission, access to, treatment, or employment in its programs and activities.

It is the policy of UA Fort Smith that no student or staff member may sexually harass another. Any employee or student will be subject to disciplinary action for violation of this policy.

The director of Human Resources is responsible for the University’s compliance with Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990, and Title VII of the Civil Rights Act of 1964. The vice chancellor for student affairs is responsible for compliance with Title IX of the Education Amendments of 1972.
Administration and Faculty

Administration
Paul B. Beran, PhD
Chancellor

Georgia Hale, PhD
Provost and Vice-Chancellor for Academic Affairs

Carolyn Mosley, PhD, RN, CS, FAAN, ANEF
Dean and Professor, College of Health Sciences

Faculty
Sydney Fulbright, PhD, MSN, RN, CNOR
Executive Director/Associate Professor
Work: 479-788-7855

Ashley Dill, AAS, CST
Instructor
Work: 479-788-7151

Clinical Instructors
Tamara Morgan, AAS,CST

Tammy Schaefer, AAS,CST

Medical Director
Dr. Ron Knobloch
Clinical Sites

Sparks Medical Center – Van Buren
East Main & 20th Street
Van Buren, AR

Sparks Regional Medical Center
1001 Towson Avenue
Fort Smith, AR

Mercy Fort Smith
7301 Rogers Avenue
Fort Smith, AR

Executive Park Surgery Center
3314 South 70th Street
Fort Smith, AR

Mercy Clinic Orthopedics – River Valley
3501 W. E. Knight Drive
Fort Smith, AR

Johnson Dermatology Clinic
5921 Riley Park Drive
Fort Smith, AR
The Surgical Technology Profession

The curriculum of the University of Arkansas Fort Smith’s Surgical Technology Program was developed to ensure students are well trained and workplace ready for their chosen career. The program meets all accreditation standards of the Accreditation Review Council on Education in Surgical Technology and Surgical Assisting.

Certified Surgical Technologist
The Joint Commission on Accreditation of Healthcare Organizations defines surgical technologist in its Lexicon: Dictionary of Health Care Terms, Organizations, and Acronyms for the Era of Reform (O’ Leary, 1994, p. 767) as thus:

An allied professional who works closely with surgeons, anesthesiologists, registered nurses and other surgical personnel, delivering patient care and assuming appropriate responsibilities before, during, and after surgery.

Job Description
Professional competence requires that Surgical Technologists apply knowledge of anatomy, physiology, positioning, aseptic technique, organization, scope of practice, and patient care in the performance of their duties. They must also be able to communicate effectively with patients and other health professionals. Duties may include but are not limited to:

CST in the scrub role:
- Helps prepare the room and arrange supplies and instruments.
- Opens packs and instrument sets.
- Performs a surgical scrub.
- Dons gown and gloves and works within the sterile field.
- Prepares instruments and passes them during the procedure.
- Maintains the sterile field.
- Assists with other intraoperative tasks.

CST in the circular role:
- Helps position the patient.
- Performs preoperative skin preparation.
- Communicates between sterile and nonsterile areas.
- Opens sterile supplies onto the sterile field during the procedure.
- Assists with other tasks not requiring action within the sterile field.

Employment Characteristics:
Most Surgical Technologists are employed in hospitals and adjacent outpatient surgery centers. Positions are also open in physicians’ clinics, free-standing surgery centers, veterinary clinics, as a traveling tech, and as a private physician’s surgical technologist. Salaries and benefits vary according to experience, ability, and geographic location.
Program Mission and Goals

Mission Statement
The University Surgical Technology Program was accredited in 1980 to serve the needs of the community and surrounding area. The Surgical Technology Program and UA Fort Smith are committed to providing high quality education in the field of Surgical Technology; to prepare competent entry-level surgical technologists in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains; and to provide the health care consumer with highly competent and motivated practitioners.

Program Goal
To prepare competent entry-level technologists in the cognitive (knowledge), psychomotor (skills), and affective (behavioral) learning domains.

Program Learning Outcomes
Upon completion of the program, graduates will be able to:

1. Apply learned knowledge of human physiology and surgical anatomy in the perioperative setting.
2. Demonstrate knowledge of instrumentation and appropriate use in surgical procedures.
3. Apply knowledge of physiological, spiritual, and cultural diversity in the care of the perioperative patient.
4. Work cooperatively and become an integral member of the healthcare team.
5. Function in a professional, caring, and ethical manner when providing patient care.
## Surgical Rotation Case Requirements

<table>
<thead>
<tr>
<th>Specialty</th>
<th>Total # of Cases Required</th>
<th>Minimum # of First Scrub Cases Required</th>
<th>Maximum # of Second Scrub Cases That Can be Applied Towards 120 Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Surgery</td>
<td>30&lt;sup&gt;3&lt;/sup&gt;</td>
<td>20&lt;sup&gt;3&lt;/sup&gt;</td>
<td>10</td>
</tr>
<tr>
<td>Surgical Specialties</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cardiac</td>
<td>90&lt;sup&gt;3&lt;/sup&gt;</td>
<td>60&lt;sup&gt;3&lt;/sup&gt;</td>
<td>30</td>
</tr>
<tr>
<td>ENT Eye</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>GU Neuro</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ob-Gyn</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Oral/Maxillofacial</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Orthopedics</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Peripheral</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vascular Plastics</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Procurement/Transplant</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diagnostic Endoscopy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bronchoscopy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Colonoscopy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cystoscopy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>EGD ERCP</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Esophagoscopy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Laryngoscopy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Panendoscopy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sinoscopy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ureteroscopy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Labor &amp; Deliver</td>
<td></td>
<td></td>
<td>10 diagnostic endoscopy cases may be applied toward the second scrub cases. &lt;sup&gt;5&lt;/sup&gt;</td>
</tr>
<tr>
<td>Totals</td>
<td>120</td>
<td>80</td>
<td>40</td>
</tr>
</tbody>
</table>

<sup>5</sup> 5 vaginal delivery cases may be applied toward the second scrub cases.
Desired Outcomes of the Surgical Technology Program

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 he/she moves towards 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 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:

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 and Second Scrub Role and 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, medication(s) 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.

University Learning Outcomes

Analytical Skills

Goal: Students will use analytical/critical thinking skills to draw conclusions and/or solve problems.

Objectives:
1. Students will access and evaluate appropriate information through written and electronic means.
2. Students will think critically to reach viable solutions to a problem and assess and justify those solutions.

Communication Skills

Goal: Students will communicate proficiently.

Objectives:
1. Students will compose coherent documents appropriate to the intended audience.
2. Students will effectively communicate orally in a public setting.

Ethics

Goal: Students will model ethical-decision making processes.
Objectives:
1. Students will identify ethical dilemmas and affected parties.
2. Students will apply ethical frameworks to resolve a variety of ethical dilemmas.

Global and Cultural Perspectives

Goal: Students will reflect upon cultural differences and their implications for interacting with people from cultures other than their own.

Objectives:
1. Students will demonstrate the understanding or application of their discipline in a global environment.
2. Students will demonstrate how their discipline impacts or is impacted by those of different cultures.

Technological Skills

Goal: Students will use computerized tools to efficiently access, communicate, analyze, and evaluate electronic information.

Objectives:
1. Students will access information using technology.
2. Students will use technology to communicate effectively.
3. Students will use appropriate technology to analyze and evaluate data.

Quantitative Reasoning

Goal: Students will assign and use numbers, read and analyze data, create models, draw inferences, and support conclusions based on sound mathematical reasoning.

Objectives:
1. Students will apply appropriate mathematical models to solve problems.
2. Students will represent mathematical information symbolically, visually, numerically and verbally and will interpret models and data in order to draw inferences.
3. Students will recognize the limitations of quantitative analysis.

Student Rights and Responsibilities

UAFS will establish standards and regulations which will be designed to ensure unimpeded university functions and activities and to maximize the learning environment on campus.

Each student enrolling in the University assumes an obligation to conduct himself or herself in a manner compatible with the University’s functions as an educational institution. The goal of disciplinary proceedings, most of which will be conducted as administrative proceedings, will be to help a student avoid further inappropriate behavior and become a responsible member of the University community.
**UAFS Surgical Technology Program**

The Surgical Technology Program has established standards to ensure that all of its students graduate with a high level of competency and the ability to elevate the public image of the profession.

A. Clinical and Academic rights: A student will have the right to:

1. Be informed of the policies and procedures of the Program and its clinical affiliates.
2. Be informed of specific Surgical Technology course requirements.
3. Be evaluated objectively on the basis of his/her academic and/or clinical performance.
4. Experience competent instruction, in both the academic and clinical settings.
5. Expect protection against an instructor’s or clinical supervisor’s improper disclosure of a student’s views, beliefs, or other information which may be confidential in nature.
6. Expect protection, through established procedures, against prejudiced or capricious evaluation.

B. Student Academic and Clinical Responsibilities: A student will have the responsibility to:

1. Further inquire about program policies if he/she does not understand them or is in doubt about them.
2. Adhere to the policies and procedures of each clinical rotation he/she may be assigned to.
3. Pursue the proper grievance procedures as outlined in both the Surgical Technology Policy and Procedure Manual and UAFS Student Handbook if he/she believes his/her academic or clinical rights have been violated.
4. Complete all program course work and clinical assignments in the specific semester allotted, subject to time and facility constraints, and as outlined in the individual course syllabi.

**Clinical Standards**

Each student has the responsibility to achieve the learning objectives by the end of each semester and learn all he/she can beyond the objectives. Incomplete objectives will result in a failing grade. Clinical instructors and many of the hospital staff are available and willing to teach and answer questions.

Students will not be required to perform unassisted surgical procedures that exceed their educational or clinical experience. However, it is the philosophy of the program that if a student is ready to expand into an area of Surgical Technology, and the clinical instructor believes that the student is capable, the student may undertake more responsibility. Students are encouraged to learn procedures in the hospital as soon as they feel they are capable.

Clinical standards are developed to provide students with guidelines by which they are to govern their behavior while at the clinical site. Standards are closely linked to the clinical objectives set forth by the program. Students must keep in mind that it is a privilege to be allowed into an operating room and that privilege can be revoked at any time. Students are expected to be as
responsible and accountable as any hospital employee, demonstrating the utmost in professionalism. To insure this, the clinical student must adhere to the following standards:

**Attitude and Enthusiasm**

1. *Students must maintain an acceptable record of attendance*

   The clinical rotation is Monday and Wednesday, 6:30 a.m. until 2:30 p.m. and Friday, 6:30 a.m. until 12:00 p.m. with the exception of legal holidays observed by UAFS. Students must abide by the attendance policy as outlined in the *Policy and Procedure Manual*.

   Some clinical sites have varying hours of operation. Students must abide by clinical site requirements.

   Students must report to the clinical affiliate in a professional manner. This means not under the influence of drugs or alcohol, nor have them in possession. Nor shall students sleep during the assigned clinical hours.

   Gum chewing and eating are allowed only in designated areas.

   Cell phones in the clinical area are expressly forbidden and will result in a warning for first infraction and dismissal for the second. Preceptors at the clinical sites have authority to report infractions of rules to the faculty.

2. *Students must arrive at the clinical facility and conferences on time.*

   Students are expected to arrive 15 minutes before the regular operating room staff. Please be out of the dressing rooms before the staff arrives. You must be dressed and in your respective area no later than 6:40 a.m. Clinical sites have different starting times for shifts. You must abide by the rules for your clinical assignment.

3. *Students must return on time from breaks and leave as expected.*

   Restroom/coffee breaks are 10 minutes only. Remember that you are part of a team and if you take longer than necessary for your break, you are denying others an opportunity for break time. Please limit yourself accordingly. Leaving the clinical area for breaks is forbidden.

   Leaving the clinical site early, except when approved by the instructor, is prohibited. Leaving without permission will be grounds for dismissal.

4. *Students must notify the instructor and hospital surgery desk by 6:00 a.m. if they are expecting to be absent or late. You must also report your absence to your clinical site by calling. Numbers for each clinical site are to be kept on your person for quick referral.*

   *Mercy – call 479-314-6170, Sparks – call 479-441-5291*
These are also the emergency numbers to leave for day care or family members in case of emergencies. The persons answering will contact you or the faculty person in charge that day.

Students must treat their clinical rotation as if it were their job. **Those who fail to notify the instructor and hospital when absent or tardy will be dismissed from the program.** To report an absence to your clinical instructor you should email the reason for your absence to Sydney.Fulbright@uafs.edu or Ashley.Dill@uafs.edu before 6:00 am of the clinical day.

5. **Students must turn in completed OR experience reports on request of the instructor.**

OR experience reports are to be filled out completely and correctly.

6. **Students must demonstrate reliability and exhibit accountability to the staff.**

When a staff member requests a student carry out a task, the student must communicate to the rest of the team where he/she is going, how long he/she intends to be gone, and if an alternative plan of action needs to be implemented, should he/she take longer than expected. Good communication is the cornerstone of teamwork and those who fail to relay important information cause uneasiness and frustration in the rest of the staff. You cannot be too thorough in communicating to others on your team.

7. **Students must maintain a neat, clean, and well groomed appearance.**

Good health and hygiene are part of good aseptic technique. A student must be in good physical condition, meticulously clean, and as free from cuts and scrapes as possible. Showers are to be taken daily, preferably in the morning and during the day if one is splashed with blood or body fluids. No perfumes or bath gels at the clinical sites.

8. **Students must comply with hospital and program dress code and wear proper OR attire.**

You are expected to follow the Surgical Technology Program and hospital dress code when entering, inside, or leaving the hospital as outlined here.

Proper OR attire as outlined by AORN Standards and governed by hospital policy is required in the operating room. Students are to follow the standard of practice with regard to OR attire regardless of what they see staff or physicians doing. The operating room is a disciplined environment and human nature dictates that individuals will sometime start to relax the rules. Following suit only shows a lack of discipline. Do what you know is right.

Students are expected to follow protocol with regard to obtaining and returning scrub attire. Failure to return scrub attire to the hospital at the end of each day will be construed as theft and will lead to strict disciplinary action up to and including dismissal from the program.
9. **Students must show initiative and do what is expected without being told.**

   Students must make sure they know what is expected of them for that day. If an assignment has not been given to you, go to the head nurse to receive your assignment. It is rare, but if the head nurse does not make your assignment and there is no clinical instructor available, ask a tech if you can scrub with them and assign yourself to their room. Communicate where you will be and what you will be doing to the supervisor and head nurse or other appropriate staff.

10. **Students must show enthusiasm and actively seek out new learning experiences.**

   The more enthusiasm the student demonstrates toward learning, the more excited the staff will be to teach you. Bring your smile and cheerful disposition with you into every case no matter whether it is new and exciting or routine.

11. **Students must be poised, show patience, and exhibit calmness in difficult situations.**

   Some operating rooms are compelled to push for faster and faster turnover time. This may make you feel like an assembly line worker. Remember the patient is a person, somebody’s mother, father, sister, brother, etc. and should be given the same consideration and compassion as you would give one of your own family members in spite of the strict adherence to time constraints. Be careful not to refer to the patient as “the chole”, or “the appy”. They are people and this could be you some day. Treat the surgical patient as you would like to be treated. Comfort and assure the patient. Call the patient by name.

**Interpersonal Relationships**

12. **Students must maintain harmonious working relationships with the staff and their peers and demonstrate professionalism.**

   Professional behavior is the cornerstone to a long and prosperous career as a Surgical Technologist. Many times you will have to keep your feelings to yourself, accept individuals as they are, and be courteous when you do not feel the situation warrants it. Individuals who do not promote harmony are usually the cause of low morale and do not generally last long in the workplace. Gossiping is expressly forbidden. The student is not to assume anything or take matters into their own hands. Any situation that arises needs to be brought to the attention of the clinical instructor first. Confronting an employee or a faculty member in a nonprofessional manner is forbidden and will result in dismissal. It is vital that you follow the appropriate chain of command at all times. Discussion of school business with the hospital staff is not permitted.
   All doctors must be addressed with title “Doctor”. There are no exceptions. Be careful not to become too familiar with staff members or doctors.

13. **Students must demonstrate that they understand directives and follow instructions well.**
Confirm what you have heard and repeat it if necessary. Carry out assigned tasks and confirm their completion.

14. **Students must demonstrate that they can function as a part of a team, assisting others as necessary.**

Initiative, tempered with open communication, followed by seeing the task through to completion will demonstrate to other team members that you are reliable and can be trusted. Gaining the trust of the OR staff is paramount if you are going to be allowed to do more and more complex tasks or scrub on your own.

15. **Students must communicate effectively and exchange information tactfully.**

Any communication that is less than professional will not be tolerated. Foul language is forbidden.

16. **Students must accept criticism constructively and show a positive change in behavior.**

Do not take criticism personally. It is meant to help, not offend you. Use it to improve your skills or behavior and show the staff that you have the ability to change for the better. Individuals who demonstrate enthusiasm for learning are thought to be employable. Reacting to criticism in a less than respectful manner will result in dismissal.

17. **Students must demonstrate that they are trustworthy and that they can hold private information in confidence.**

Students must adhere to HIPAA requirements. Whether the private information is hospital, staff, or patient oriented, it is not to be discussed inappropriately. You have signed a confidentiality statement which you must abide by under law.

Your feelings about the hospital staff or doctors are not to be discussed with your classmates or outside the facility. Gossiping promotes discord and will not be tolerated.

18. **Students must show they are adaptable to change and that they can easily adjust to changes in routine.**

Show poise in adapting to new routines, set-ups, or personalities. Remember that you will be shown a variety of ways to do the same thing, all of them being “right”. We ask that you continue set-ups the way you are taught in lab. This will only help you to learn organization and multitasking.

Your instructor may offer “rotations” through different departments or all procedures may be done in the same department. Your instructor will assign rotations as appropriate. Demonstrate that you are flexible in adapting to the change.

19. **Students will be routinely evaluated by clinical instructors as well as being critiqued by hospital staff.**
Evaluations are one of the methods used in monitoring a student’s progress. These evaluations weigh heavily in the measure of a student’s progress. Progress must be measured and evaluated daily, weekly, and biweekly by the clinical instructor. It is the obligation of the student to turn in the required paperwork. Failure to turn in paperwork when due is a willful neglect of responsibility.

**Aseptic Techniques**

20. *Students must inspect sterile items before opening.*

21. *Students must follow hospital policy when scrubbing, gowning, and gloving.*

22. *Students must protect gloved hands when draping.*

23. *Students must help drape for the procedure satisfactorily.*

24. *Students must use principles of asepsis throughout the procedure.*

25. *Students must monitor the aseptic technique of the health team members.*

26. *Students must recognize and correct breaks in aseptic technique.*

27. *Students must remove their gown and gloves using the correct method.*

   Failure to carry out the requirements of hospital policy with regard to aseptic technique could be construed as lack of surgical conscience and may result in the dismissal of the student from the hospital site and from the program.

**Knowledge and Skill**

28. *Students must demonstrate knowledge of the indications for procedures.*

   If you don’t know the indications for a particular procedure, ask. It is as important to know why you are doing a procedure as it is how to do it.

29. *Students must utilize the doctor’s preference card in organizing sutures, instruments, and equipment for the procedure.*

   You may be asked to pull cases for the remainder of the day. Be thorough and complete. This is one way to begin to gain the trust of the staff. Show them you are responsible.

30. *Students must check to insure their case carts are complete.*

   Failure to adequately prepare for your cases may result in last minute rushing, or coming up short during the procedure. Do not rely on anyone else to insure readiness for your case. It is your responsibility.

31. *Students must demonstrate efficiency by insuring their set-up is neat and performed in a timely manner.*
You must strive to develop skill in your practice as a Surgical Technologist, but never sacrifice sterility for speed.

32. **Students must maintain a neat mayo stand and back table throughout their cases.**

Do not let debris accumulate on your field. Remember that someone may need to relieve you at a moment’s notice and they should be able to do so quickly and easily performing the appropriate counts in a timely and accurate manner. This cannot be done if the set up is a mess. Neatness narrows the margin for error.

33. **Students must demonstrate knowledge of the types and sizes of sutures and needles needed for each procedure.**

By reading the doctor’s preference card a student should be able to follow the surgeon’s suture routine.

34. **Students must demonstrate knowledge of the specialty instruments for their assigned procedures.**

35. **Students must demonstrate knowledge of the basic instruments for their assigned procedures.**

36. **Students must pass sutures, needles, and instruments to the surgeon correctly.**

37. **Students must adequately anticipate the needs of the surgeon.**

38. **Students must demonstrate comprehension of cases being performed by completing case reports accurately and turning them in when due.**

Failure to turn in case reports when due is a violation of clinical standards. Completion of case reports aids the student in comprehension of the case being performed as well as reinforcement and preparation for the next like procedures to be performed.

39. **Students must adhere to protocol for post conference by demonstration of knowledge of indications, anesthesia, anatomy and physiology, and follow-up for their assigned cases.**

Preparation is essential to the student in that they will be required to answer questions on various aspects of the case. To allow an increased understanding of the procedure being discussed by all, classmates or clinical instructors may pose questions.

40. **Students must maintain an accurate experience record.**

Experience records must be maintained and submitted to the instructor when requested. Students should get the proper authority to initial the cases on the record, as well as be able to document the record with case reports, evaluations, and post-surgical conference data.
Patient and Health Team Safety

41. Students must request counts at the appropriate times.

42. Students must count sponges, needles, and instruments according to hospital policy.

43. Students must identify and handle medications according to hospital policy.

44. Students must identify and handle specimens according to hospital policy.

45. Students must employ principles of electrosurgical safely.

46. Students must observe strict adherence to “Standard Precautions” by wearing barrier protective equipment, proper hand washing, and taking proper sharps precautions.

Failure to carry out the requirements of hospital policy with regard to safety could be construed as lack of surgical conscience and may result in the dismissal of the student from the hospital site and dismissal from the program.

Program and Curriculum Information

Degree Awarded
Associate of Applied Science Degree

Academic Standards
Surgical technology students must maintain a 2.0 (C average) cumulative grade point average. Students receiving a grade less than “C” in any course in the Surgical Technology curriculum, which does not carry the SURG prefix, will be required to repeat the course (or an acceptable alternative). If a student receives a grade lower than a “C” in the repeated course, he/she will be ineligible to apply for admission to the program.

Students receiving a grade of less than a “C” (75%) in any course with the SURG prefix will be dismissed from the Program.

Grading System

Didactical
Grades for regular university classes will be determined by the appropriate instructors and in conjunction with UAFS policy. The program instructional staff will determine grades for Surgical Technology classes.
UAFS Surgical Technology grading policy is:

100 – 93  A
92 – 84   B
83 – 75   C
Below 75  F

Clinical
Clinical instructors will determine clinical education grades. At the end of each clinical semester, all students will be scheduled for comprehensive competency evaluation developed by the program faculty.

Attendance Policy

Clinical
Absences of more than twelve hours total per semester from clinical will be grounds for dismissal from the class. If absent or tardy while scheduled in the clinical area, the student should call and tell the nurse in charge and e-mail the instructor before 6:00 a.m. Failure to report an absence or tardiness will result in dismissal. Tardiness of more than 10 minutes will count for 1 hour. More than 5 tardies/semester will result in student being dropped.

Didactic
Web enhancement for this course is available. To be successful in this course, the student should access the web portion of this course at least 3-4 times per week. Communication between student and instructor will take place via web mail among other methods of communication. Orientation to the web enhancement will take place on the first day of classes. Quizzes cannot be made up. All make-up work or tests are due the day the student returns to class. The student must contact the instructor to schedule the make-up exam or work. It is not the instructor’s responsibility to contact the student.

Student Performance Evaluation
A learning agreement is implied when a student enrolls in a course, i.e., the student agrees to learn or meet the objectives of the course. Campus and clinical laboratory experiences provide the student with opportunities to develop skill and judgment based on principles. Each student’s performance is individually evaluated on a continuing basis by the instructor. Students are expected to participate in classroom and clinical conference discussions and will be asked to present content relating to session objectives. WHETHER OR NOT PERFORMANCE IS SATISFACTORY OR UNSATISFACTORY IS DETERMINED BY THE INSTRUCTOR. The following are some examples of performance considered unsatisfactory:

1. Violating critical requirements.
2. Cheating, copying, or allowing another to cheat or copy.
3. Making a decision or failing to make a decision that could endanger a client.
4. Failing to maintain confidentiality of client information.
5. Failing to demonstrate adequate preparation for each lab experience.
6. Failing to demonstrate appropriate adult behavior conducive to classroom and clinical learning processes.
7. **Failing to maintain professional ethical conduct in all learning areas.**
8. Failing to validate a doctor’s or nurse’s orders.
9. **Failure to progress.**
10. **Failure to perform skills or follow instructions of the instructor/preceptor.**

Any student who has been previously dismissed from a program offered by the University for reasons other than failure to maintain satisfactory academic progress is not eligible for readmission to the University for a period of five years from the date of dismissal. The Records Office must be notified of the dismissal in writing and the dismissal noted in the student’s academic record. After five years, readmission may be considered based upon criteria deemed appropriate by the University. “UA Fort Smith Academic Catalog

**Competency Performance Policy**

A. Pre-Hospital Evaluation: You must score a minimum of 75% in order to pass and advance to hospital practice. This evaluation is to determine your readiness for safe patient care.

Each skill is based on demonstrated skill proficiency. Students must be able to correctly demonstrate all required components of each required skill. The skill must be performed satisfactorily within the timeframe designated by the faculty. After the first failed attempt of the pre-hospital evaluation, the student must meet with faculty and arrange a plan for remediation. After a second failed attempt to successfully complete the pre-hospital evaluation, the student must withdraw from both SUR courses.

B. On-Campus Skills Lab: Each skill is based on demonstrated skill proficiency. Students must be able to correctly demonstrate all required components of each required skill. The skill must be performed satisfactorily within the timeframe designated by the faculty. After the first failed attempt of the skill, the student must meet with the faculty and arrange a plan for remediation. After a second failed attempt to perform a skill, the student will outline a plan of action to be reviewed with the faculty and documented on a counseling record. Two faculty members will evaluate the student’s third attempt. If the third attempt is unsuccessful, the student will not be able to progress in the Surgical Technology Program and should withdraw from both SUR courses.

Any clinical hours missed due to remediation and re-testing will count toward the 12 hours of allowable absence from clinical.
Clinical Performance Policy

Clinical performance will be evaluated using the following rubric score:

- 4.0 = demonstrates skill 93 – 100%
- 3.0 = demonstrates skill 84 – 92%
- 2.0 = demonstrates skill 75 – 83%
- 0 = demonstrates skill 74% or less

A student whose clinical performance needs improvement will be counseled by the clinical instructor. A target date for achievement of satisfactory standing in the clinical area will be decided. *The student will be on probationary status until the target date and satisfactory standing is achieved.* If the student continues to demonstrate a weakness in the identified areas, the clinical performance will then be classified as unsatisfactory. A repetition of unsatisfactory performances will constitute failure to meet clinical performance standards. A student whose clinical performance is unsatisfactory will receive a letter grade of “F” regardless of his or her midterm or final theory grade in Surgical Technology.

Critical Incidents

A critical incident occurs anytime the student’s action places the patient or staff in actual or potential danger and the student should have known better; it indicates that the student is unprepared for clinical and / or has not retained previously learned knowledge or skills. After two critical incidents in one semester, the faculty will evaluate the student regarding continuation in the Surgical Technology Program. *If the incident places the student in danger and the student injury might impair patient care, this also will constitute a critical incident. A third critical incident will result in immediate dismissal from the program.*
Cancellations (Severe Weather)

When the University officially cancels classes due to snow or other severe conditions, the following procedures will be followed:

A. The students are also not required to attend classes that day. Occasionally, students can expect an extra class to be scheduled to make up for cancellations.

B. It is suggested that students sign up for the LionsAlert program to ensure earliest information.

Vacations/Holidays

Classes and clinicals are not scheduled during normal university holiday periods.

Dress Code

The student is expected to be neat in appearance with clean uniform and shoes. DAILY PERSONAL HYGIENE IS REQUIRED. This will include oral hygiene, daily bathing, and use of effective deodorant. Any deviation is considered improper uniform. If the student is not in the proper uniform, he/she will be sent home and time missed will not be made up. The following dress code is required for all students while at the clinical site.

Hospital Uniform

The student is required to wear khaki scrubs, solid pants and v-neck tops only, pressed and clean with white lab coat and white tennis shoes. The student is required to purchase a “Surgical Technology Student” patch from the UAFS bookstore. Pants may have one cargo pocket.

A. Tattoos must be covered at all times.
B. No visible passion marks or “hickeys”.
C. No long sleeve shirts under scrub top.
D. No open-toe or heel-less shoes.

On-Campus Labs and Classroom

A. No tube tops, midriff tops
B. No low-rider pants
C. No short shorts
D. No open toe shoes in lab

Underwear

All students are expected to wear underwear (no thongs) to clinical. Female students will wear bras.

Black or white short sleeve tee shirts only under scrubs.
Shoes
Shoes should be comfortable, clean, and in good repair for entering and leaving the clinical area. White tennis shoes are acceptable and should be worn with scrub suits. New, leather tennis shoes or nursing shoes (never worn) are required for the in-operative area. These will be taken to the hospital and left in the locker provided for Surgical Technology students.

Socks
White.

Hair
Hair must be clean, neatly arranged. Extreme hairstyles are inappropriate. Long hair must be secured by a hair clip or barrette at the nape of the neck. All hair must be tucked into cap. Conservative hair color is required.

Facial Hair
If a student chooses to have a beard or moustache, he is required to wear beard cover at all time in the clinical area. No exceptions.

Fingernails
Nails should not extend beyond the fingertips, and should be clean. Absolutely no polish or false fingernails.

Jewelry
Limited to a wedding band and one small stud earring in each ear. No necklaces, bracelets, or hoop earrings. Absolutely no tongue rings or other piercings in the clinical area.

Cosmetics and Perfumes
Facial cosmetics used in moderation are acceptable. In clinical settings, the use of cologne and perfumed bath soaps and powders are inappropriate.

Film Badges
All students will wear personal radiation monitoring in the form of film badges during ALL clinical training. When the film badge is worn, the following rules shall be observed:

1. Badges shall be worn on the left collar.
2. Badges shall be worn on the front of the wearer.
3. Badges shall be worn outside a protective apron.
4. Badges must be turned in to the clinical instructor in a timely manner, upon request monthly.

An overexposure of a film badge is considered presumptive evidence of exposure to the individual. An exposure of over 100mR per month (5 rems per year) will be documented and the student may be limited or delayed in their clinical education.

Excessive heat, moisture or radiation damages film badges. Common mistakes made in caring for film badges include leaving them in a car in the sunlight, placing them on hot surfaces, and washing them with uniforms. Such exposure to heat and moisture will completely invalidate the reading obtained for that month. Students are responsible for proper care of these badges.
Although the program provides the initial film badge, students losing or damaging their badges will be required to pay for a replacement.

**Name Badge**
UAFS photo identification name badges will be made during your first semester of the Surgical Technology Program. You will be responsible for purchasing the cover for the name badge. If for any reason the name badge is lost, the student should report this to a Program faculty who will instruct them as to what they will need to do. Students will wear their name badges during all clinical experiences.

**Classroom Attire**
As stated in the UAFS dress code, all students are expected to dress appropriately. For the profession we represent, this means no short shorts, tank tops, tube tops, spaghetti straps, or midriff tops. All students will wear shoes to class. Students who dress inappropriately in the class or lab areas will be sent home.

Final judgment on disputes concerning appropriateness of dress code violations will rest with the Executive Director.

**Readmission Criteria and Procedure**

**General Information**
A student who has withdrawn or received a grade of D or F in a Surgical Technology course may apply for readmission to the program. A student is limited to one re-enrollment into the program. If the student feels there are extenuating circumstances, he/she may request an exception be made. He/she must submit a letter to the Executive Director asking for special consideration.

Each person seeking readmission will be evaluated on a space available basis. A position is not guaranteed. Students re-entering the program are required to follow the sequential structure of the program in the time frame.

**Readmission Procedure**
A person interested in reentering the program should begin the enrollment process by having a conference with the advisor designated to advise Surgical Technology majors. The advisor will describe the re-admission procedure more fully and answer questions. The individual should then notify the advisor that he/she does request readmission. The advisor will then check the student’s file for eligibility for readmission and notify the program director.

**Readmission Requirements**
Readmission will be based on the following criteria:
Academic and clinical performance status at the time of withdrawal
Cumulative GPA at the time of readmission request
Status of any problems previously identified as interfering with learning
Interview with program faculty
Acceptance Procedure
The applicant for readmission will receive notification of acceptance or non-acceptance within two weeks of the program faculty’s decision.

Transfer Students
Transfer students will be considered individually. The appropriate advisor will evaluate the general education requirements, and the compatibility of the Surgical Technology curriculum will be evaluated by the program director. Transfer students are admitted on a space available basis.

Student Pregnancy

Students enrolled in the UAFS Surgical Technology Program are instructed in proper radiation safety precautions and personnel monitoring prior to being admitted to any ionizing radiation area. Students are required to abide by ALL radiation safety precautions. The importance of keeping exposure as low as practical through a combination of time, distance, and shielding is stressed.

Due to the number and variety of courses in the curriculum, and the importance of maintaining a rational schedule through the various assigned areas without interruption, students enrolled in this program are strongly encouraged NOT to become pregnant during the time of their schooling. However, STUDENTS WHO BELIEVE THEY MAY BE OR KNOW THEY ARE PREGNANT SHOULD NOTIFY THE EXECUTIVE DIRECTOR, IN WRITING, IMMEDIATELY. In the absence of this voluntary written disclosure, the student cannot be considered pregnant.

Upon confirmation of pregnancy the student will:
1. Submit a statement from her physician verifying pregnancy and expected due date. The statement should include the physician’s recommendation as to which of the following options would be advisable. If student is restricted from performing duties in the clinical area consistent with the learning experience, the student may be placed on medical leave for the remainder of the year and reapply for admission the following year.

   A. Withdrawal from the program
   B. Continued full-time status with limited rotations excluding portable and fluoroscopic procedures until she is past the first trimester of pregnancy.
   C. Continue with no modifications.

2. Submit in writing within 24 hours, her decision as to remaining in the program dependent on the above, or resigning from the program. If resignation is the choice, no other action is indicated.

3. Counsel with Surgical Technology Executive Director, regarding the nature of potential radiation injury associated with in utero exposure, the regulatory limits established by the NCRP, and the required preventive measures to be taken throughout the gestation period.

4. Wear two (2) personnel monitoring devices, one placed on the collar and one on the abdomen for fetal monitoring. Reading will be monitored closely.
5. At no time and for no reason will the pregnant student place herself in the primary beam of radiation.

6. Report to the Clinical Instructor or Executive Director if she feels that she is working in an unsafe area or under conditions she feels are detrimental to herself or the fetus.

7. Be withdrawn from all clinical courses for the remainder of her pregnancy, if she exceeds the maximum possible dose. This may constitute withdrawal from the program.

8. Be informed that all program requirements and absence policies will be equally enforced.
Clinical Education Agreement to Minimize Fetal Exposure

Between student ________________________ and UAFA Surgical Technology Program

Date Executive Director notified of student’s pregnancy ____________________________

Due Date: ____________________________ Estimated Conception Date:____________________

Cumulative exposure received from conception date to above date __________________________

Executive Director was notified of pregnancy in accordance with the Student Pregnancy policy, as outlined in the Surgical Technology Program Policy Guideline Manual. The student is also to receive counseling regarding possible harmful effects on the fetus.

Under these terms, the student has agreed to continue her Clinical Education at ________________________

_____________ hereafter referred to as the Clinical Site. The student has informed the Clinical Instructor and Department Director at the Clinical Site. The student has likewise been informed of the policies of the Clinical site regarding pregnant technologists/students.

The student program for minimizing fetal exposure will include:

1. Wearing a lead apron whenever the potential for exposure to ionizing radiation occurs.
2. If possible, removal from portable, fluoroscopic, and surgical procedures until she is past the first trimester of pregnancy.
3. Once beyond the first trimester of pregnancy, resumption of the procedures outlined in #2 may occur so long as:
   1. Distance from the X-ray source is maximized.
   2. A wrap-around lead apron is worn.
   3. Departmental policy does not preclude outlined procedures.
4. The UAFA Surgical Technology Program will provide a second film badge to be worn at the waist at all times.

Should the cumulative dose to this second badge exceed 50 mrem (0.5 mSv) in any one month period, the student will be removed from the clinical education site for one month. If the dose to this badge should exceed 500 mrem (5 mSv) in any one month, the student will be removed from clinical rotation for the remainder of the pregnancy.

The scientific guidelines for fetal dosage are published in the NCRP Report #91 and #107, and published by the United States Government.

This agreement releases the Clinical Site and UAFA from any liability in the event that there are any congenital abnormalities at the child’s birth.

Student: _______________________________ Date ________________

Clinical Instructor: ________________________ Date ________________

Executive Director: ________________________ Date ________________

I have counseled the above-named student regarding fetal dose and possible fetal injury due to excessive radiation.

Signature _______________________________ Date ________________
Statement of Medical Options for the Pregnant Student

Date: ________________

I have verified ________________’s pregnancy. Her expected due date is__________.

My recommendation is:

(Physician: please check one of the following options for this student)

_____ Withdrawal from the program

_____ Continued full-time status with limited rotations excluding portable and fluoroscopic procedures until she is past the first trimester of pregnancy.

Date this limitation ends: ________________

_____ Continue with no modifications

____________________________________  _____________
Signature                                      Date
Insurance Coverage and Accidents

A. Liability: The University maintains liability insurance for all students and staff while working in the clinical education site.

B. Health: Students are encouraged to carry their own health insurance. The university does not have health insurance available for students.

C. Worker’s Compensation: Students enrolled in the Surgical Technology Program are not employees of the clinical education site and are, therefore, NOT covered by the Worker’s Compensation Act.

D. Accidents: If a student is injured at the clinical site, he/she must notify the clinical instructor immediately. Students must fill out a written accident report as soon as possible following any accident or injury (see Forms sections). In addition, a clinical agency accident report form should be completed. Since forms vary in the different clinical agency sites, the administrative director and the executive director must be notified no matter how minor it may seem. Sending a copy of the accident report to the program director will satisfy this requirement. (Students are responsible for any expenses incurred as a result of injury. If the injury results in the student being unable to complete their shift, make-up time will be assessed).

E. Emergency Treatment: Hospital policy will prevail. All costs for any treatment received will be borne by the student.

Communicable Disease Policy

Students should use surgical gloves for all procedures in which there may be contact with body fluids (urine, blood, excretion, saliva, etc.). Most contacts will be on patients who have not yet been diagnosed, and therefore, the precautionary procedure of wearing gloves is most important. Students will use strict isolation technique if the patient has been diagnosed as having a contagious disease. Students must follow infection control procedures as outlined in the policy manual at the clinical site.

In addition to these precautions, all students are required to have completed the Hepatitis B vaccine series by the fall semester. This requirement is for the student’s protection and is a result of OSHA regulations. Facilities providing the vaccination will be discussed by the program faculty and related to the students. Students are required to either provide documentation of vaccination or sign an affidavit refusing the inoculation. This waiver form is located in the front of this manual.

If a student has been accidentally exposed to a communicable disease, he/she shall report it immediately to the clinical coordinator and the clinical instructor. Appropriate measures will be taken. The clinical instructor will prepare an Incident Report to be signed by the student. Each student is required to adhere to the Communicable Disease Policy at the clinical site to which they are assigned.
Serious Illness and Disease Policy

1. The student must inform the program faculty as soon as a serious illness or communicable disease is detected. A serious illness is considered to be any sickness that continues for more than 1(one) week. A communicable disease is any disease that can be transmitted from one person to another.

2. The longevity and seriousness of the illness is evaluated to determine if the student will be able to continue with the course of study.

3. After the student is released from the doctor’s care to return to school, a plan between the student and program faculty may be made for continuation of educational activities

HIV AND HBV

Human Immunodeficiency Virus and Hepatitis B
In order to reduce the possibility of exposure to Human Immunodeficiency Virus (HIV) and Hepatitis B Virus (HBV) to students, faculty, and patients, the Surgical Technology Program will adhere to the following policy. All students are required to be vaccinated for HBV and receive instructions on standard precautions and other preventive techniques for HIV.

Hepatitis B Virus - Vaccinations
Students in allied health programs and faculty involved in clinical courses must present to the Executive Director a health record that includes one of the following:

1. evidence of immunization against Hepatitis B;

2. evidence of receipt of at least two doses of the vaccine for Hepatitis B followed later with documentation that all three doses of the vaccine have been received within eight months of the first dose;

3. a confirmed prior illness with Hepatitis B;

    or

4. a signed “Hepatitis B Vaccine Waiver.”

One of the above must be presented to the Executive Director before the individual will be permitted to participate in clinically related learning experiences.

Guidelines for HIV Testing

A student who believes himself/herself to be at risk has an ethical responsibility to know his or her HIV status and therefore has an obligation to be tested for HIV antibody, HbeAg or HbsAg.

Testing will be voluntary, yet there may be circumstances in which the clinical agency may request testing. Confidentiality will be maintained.
Guidelines for Prevention and Management of HIV

Students will receive written and verbal information and instructions on standard precautions for blood borne pathogens in accordance with applicable CDC guidelines prior to any exposure to patients. Failure to use standard precautions may result in exposure to blood borne pathogens including Hepatitis B Virus (HBV) and Human Immunodeficiency Virus (HIV).

HIV Positive

If it is determined that a student is sero-positive for HIV and/or clinically demonstrating ARC (AIDS related complex) or AIDS, the student should meet with the Executive Director and an attending physician to determine the health care needs of the student and the progression in the program. Every case will be individually evaluated and confidentiality will be maintained. Every student enrolled in the program must meet all the objectives and adhere to the class and clinical attendance policy. Therefore, it will need to be determined that the HIV sero-positive student can meet course objectives, perform procedures and tasks, and take care of patients who could be a real threat to the students’ health. Also the possible threat the HIV sero-positive student could pose on patients must be considered. Some students may be counseled to pursue another career because of health risks.

HIV-Post Positive

Immediate antiseptic procedures should be followed after possible exposure.

If an accidental exposure occurs, faculty and students should follow the CDC guidelines for occupational exposure. If needle stick, test for HIV to establish seronegativity first, then retest at 6 weeks, 3 months, 6 months, and 1 year.

A significant occupational exposure is defined as:

1. A needle stick or cut caused by a needle or sharp that was actually or potentially contaminate with blood or body fluids.

2. A mucous membrane (i.e. splash to the eye or mouth) exposure to blood or body fluids.

3. A cutaneous exposure involving large amounts of blood or prolonged contact with blood - especially when the exposed skin was chapped, abraded, or afflicted with dermatitis

Accidental Exposure to Blood or Body Fluids

Exposure is defined as a percutaneous injury, contact of mucous membranes, or contact of non-intact skin with blood or other body fluids or tissues that may potentially contain bloodborne pathogens.

In the event of accidental exposure of students or faculty, the following steps are to be instituted:

1. Wound Care/First Aid:
   a. Clean wound with soap and water,
   b. Flush mucous membranes with water or normal saline solution,
   c. Other wound care as indicated.
2. The exposure will be documented on the incident form that is used by the agency in which the exposure occurred;

3. The completed incident report form will be submitted to the appropriate agency representative;

4. The person who is exposed to blood or body fluids will be referred for medical care and/or appropriate testing; however, the decision to obtain medical care or testing will rest solely with the person experiencing the exposure. The health care options available for students or faculty include, but are not limited to:
   a. The emergency or outpatient department of the agency in which the exposure occurred (at personal expense);
   b. The county health department;
   c. The private physician of the individual’s choice;
   d. Arkansas AIDS Foundation.

5. **IT IS VITAL THAT STUDENTS UNDERSTAND THAT THEY ARE RESPONSIBLE FINANCIALLY FOR ANY EXPENSES INCURRED IN THE COURSE OF TREATMENT OR TESTING. NEITHER UAFS NOR THE CLINICAL AGENCY WILL ASSUME ANY LIABILITY (FINANCIAL OR OTHERWISE) REGARDING THE EXPOSURE INCIDENT.**

6. If the exposed individual chooses to seek medical care and/or testing, all pre and post testing/counseling will be provided by the health care provider conducting the testing.

**Professional Conduct**

**Classroom**
Students are expected to perform on an adult level and be responsible for their own actions, successes, and failures. If a student disagrees with the instructor, he/she should ask questions in a non-challenging manner. Students should be seeking information in order to learn and understand and not to challenge the instructor’s authority.

Anyone caught cheating or falsifying information, whether on a test, assignment, clinical documentation, or written and/or verbal disclosures, will receive a zero for the test or assignment and immediately be placed on probation. Other intentional misrepresentations will be addressed on an individual basis with consequences dependent upon the severity of the infraction.

Students are expected to come to class and/or lab prepared for that day’s lesson. Preparedness includes reading the assigned material, preparing assignments on time, and bringing necessary books and materials to class or lab. Tardiness will not be tolerated. Habitual tardiness is a sign of a poor attitude. Tardy students disrupt the class and can interrupt the learning of other students.

**Clinical**
The clinical site reserves the right to refuse acceptance of any student who is involved in any activity not considered professional or conducive to proper patient care. Students are expected
to conduct themselves in a professional manner at all times. Undue conversation, excessive noise, dirty jokes, gossip, and loitering are unprofessional behaviors and should be avoided. Do not discuss personal problems with patients or staff. No personal telephone calls are to be made or received during clinical hours unless it is an emergency. Discussion of personal health history with the physicians is forbidden and will result in dismissal. The chain of command directs you to inform the instructor of any difficulties in working with a particular employee. We are guests at the healthcare facility and as such, must maintain a good working relationship with the facility and its employees. Informing an employee of a break in their sterile technique is acceptable but must be done in a professional and not accusatory manner. Do not chew gum while in clinicals.

Cell phones are expressly forbidden and will result in a warning for the first infraction and dismissal for the second. Preceptors at the clinical sites have the authority to report any infraction.

REMAIN BUSY! Take initiative to find something to do. Cleaning and stocking of the surgery rooms or filing are helpful jobs. Be courteous to your patients and all staff. Maintain a cooperative and uncomplaining attitude. Professional attitude and behavior are factors considered in recommendations for future employment. Do NOT compare one clinical site to another. Each facility is unique.

All hospital and clinical records are kept confidential. Any request for information concerning a patient should be referred to the clinical instructor. Do not discuss patients and their problems with anyone unless authorized by the clinical instructor. Professional conduct is to be demonstrated by all surgical technology students.

Each student is expected to:

1. Demonstrate responsibility and accountability for decisions and actions.
2. Apply knowledge of legal and ethical aspects in implementing patient care.
3. Seek guidance and assistance when personal limitations are reached.
4. Be responsive to constructive criticism and attempt to alter behavior.
5. Demonstrate punctuality for both classroom and clinical education.
6. Demonstrate preparedness for both classroom and clinical education.
7. Recognize the patient’s rights to privacy, confidentiality, and dignity.
8. Demonstrate self-direction and professional growth through exploration and utilization of available resources.
9. Demonstrate a positive attitude (verbally and nonverbally) in the clinical and academic setting.
10. Demonstrate preservation of health, welfare, and safety of patients, hospital staff, instructors, or other students and/or self.

Unprofessional Conduct

The following behaviors are considered unprofessional conduct and will place the student in the counseling pathway or dismissal from the program.

1. Cheating - dismissal
2. Unauthorized possession of an exam - dismissal
3. Plagiarism
4. Inaccurate recording, falsifying or altering of patient, agency, and/or personal records - dismissal
5. Illegal possession, sale or distribution of drugs or other wrongful conduct relating to drugs - dismissal
6. Possession of weapons on campus or clinical site - dismissal
7. Theft – dismissal
8. Charges and/or conviction of a felony – clinical sites will not allow entrance if you have been convicted.
9. Excessive tardiness or absenteeism
10. Violating the confidentiality of information or knowledge concerning the patient - dismissal
11. Use of profanity in clinical area
12. Repeated violation of the dress code
13. Any activity that would jeopardize the health, safety, and/or welfare of the patient, the hospital staff, instructor, other students, or self
14. Being under the influence of mind-altering drugs, use of illegal drugs, and/or the use of alcohol while in class or in the clinical area – dismissal after positive test
15. Misappropriation of supplies, equipment, and drugs - dismissal
16. Leaving a clinical assignment without properly advising appropriate personnel and instructor

17. Discriminating in the rendering of service as it relates to human rights and dignity of the individual

18. Committing an act that a reasonable and prudent student would not perform at his/her level in the program

19. Omitting an act that a reasonable and prudent student would be expected to perform at his/her level in the program

20. Failure to disclose errors to appropriate hospital personnel and clinical instructor - dismissal

21. Conduct detrimental to public interest

22. While caring for a patient, engaging in conduct with a patient that is sexual or may reasonably be interpreted as sexual, or in any verbal behavior that is seductive or sexually demeaning to a patient, or engaging in sexual exploitation of a patient - dismissal

23. Confrontational behavior toward a patient, hospital employee, fellow student, or faculty member

NOTE: Students in the Surgical Technology Program are subject to the academic and disciplinary rules and regulations of UAFS.

Removal from a Clinical Site

Students in the Surgical Technology Program are required to strive to do their best and to display the professional attitude necessary to promote a positive image of Surgical Technology to patients, fellow students, technologists, physicians, the University and the general public. However, if a student fails to abide by the policies and procedures of this manual, they have failed to promote a positive image of their would-be profession, and thus may become subject to probation and/or dismissal.

Removal from a Clinical Education Center

A student may be removed from a clinical education center at the request of the clinical instructor or the administrative director of the clinical agency. The request must be in writing and must contain the following items:

1. Objective reason(s) for the request.
2. Documentations of efforts to correct the situation.
3. The results of these efforts, and
4. Any other information supporting the request.

The following reason(s) may be considered as grounds for removal from the program:

1. The student has received two incident reports while at that clinical education center.
2. The student has demonstrated flagrant abuse of hospital policies and procedures.
3. Alcohol and drug abuse while at the clinical site.
4. Irreconcilable personality differences.
5. Chronic poor performance which may be characterized by an excessive repeat rate, failure to progress, poor listening and communication skills, and/or consistent failure to follow directions and departmental routines, excessive absences or tardiness to clinical or theory, inability to work harmoniously with the staff at the clinical facilities, or
6. Any other circumstances which demonstrate poor student performance overall.

**Probation Guidelines**
A student may be placed on probation if an infraction of any of the various manual policies occurs. An Unsatisfactory Performance Contract” (probation form) will be completed by the student, the Executive Director, and the Clinical Instructor (if applicable). (See the Forms section of this manual).

Probation will extend to the length of time the contract is drawn up for and/or the satisfaction of the conditions of the contract agreed upon by the parties above.

The following infractions will cause the student to be placed on probation:

1. The student receives less than a “C” in a course in the Surgical Technology curriculum not containing a SURG prefix.
Probation will extend one semester during which time the student must repeat the course (or its equivalent) and earn a “C” or better.

2. The student receives a student evaluation of less than 75%.  
Probation will extend until the re-check evaluation is completed. (Rechecks are not given on all evaluations).

3. A student is performing below standards in one or more areas of his/her training, both academically and clinically, which includes but is not limited to student’s clinical evaluations and annual student evaluations.  
Probation will be applied and extended at the discretion of the clinical coordinator and/or Executive Director.

4. Chronic poor performance in either the clinical or didactic aspects of a student’s education which may include:
   Failure to progress
   Poor communication skills
Unprofessional behavior

Probation will be applied and extended at the discretion of the clinical instructor and/or Executive Director.

**Dismissal Guidelines**

A student may be removed from the Program based on various infractions of policies outlined in the Surgical Technology Program Manual. The authority to dismiss a student from the program rests solely with the Executive Director.

The following infractions are grounds for removal from the Program:

1. **Academic Dishonesty:**
   This includes cheating, plagiarism, or any other attempts to use someone else’s work as one’s own. Any student guilty of this may also be subject to expulsion from the University.

2. The student receives a grade of less than a “C” in any course in the Surgical Technology Program with a SURG prefix.

3. A student is removed from a clinical agency at the written request of the Clinical Instructor or the Administrative Director due to unsatisfactory performance.

4. The failure to respect patient confidentiality.

5. Documented patient endangerment i.e. patient abandonment, practice outside scope, use of drugs.

6. The failure to earn a grade of “C” or better in a Surgical Technology curriculum course (not a SURG prefix) on the second attempt.

7. Any infraction resulting in expulsion from the University.

8. Excessive tardiness or absence from lecture or clinical.

9. Failure to progress.

10. Confronting a hospital employee, fellow classmate, or instructor in an unprofessional manner.

11. Failure to notify the instructor of absence or tardiness from the clinical site by 6:00 AM of the clinical day.

12. Leaving the clinical area (OR) without permission.
13. Any of the behaviors listed in the unprofessional conduct pages 52-53.

Grievance Procedures

If a student feels he/she has been unfairly treated or evaluated, he/she has the right to have the matter investigated further through informal and formal grievance procedures. Grievance procedures should not be requested frivolously and should be followed in the correct sequence outlined below.

**Informal Grievance**
Informal grievance procedures should usually be the first method employed to rectify any problems a student has specific to the Program.

The following general guidelines should be used by students and Program personnel when dealing with procedural problems:

1. If possible, address the problem at its source first. For example, if a misunderstanding arises between a student and another student, steps should be taken by one of the involved parties to rectify the situation independently without any further intervention. All problems with clinical staff should be taken to the clinical instructor first.

2. If no success is met employing Step #1 above, the student should take the problem to his/her Clinical Instructor, outlining the situation as objectively as possible. The Clinical Instructor will document and/or rectify the situation at his/her discretion.

3. If all of the above channels have been exhausted, the student can request a hearing with the Executive Director. At this level, all such hearings will be documented and kept in the student’s personal file at the University. In general, the Executive Director’s decision is final. If the student still is not satisfied, formal grievance procedures must be employed. (See Formal Grievances below).

**Formal Grievances**
Formal grievance procedures are to be used when informal procedures have been exhausted or are inappropriate. They are essentially the same procedures published in UAFS Student Handbook each year. The student filing a formal grievance must follow these procedures sequentially. The general guidelines are provided below; for further details, refer to the procedures outlined in the current year’s University general student handbook.

To begin formal grievance proceedings in the Surgical Technology Program, the student must submit a request for a formal hearing (in writing) to the Executive Director. This letter must contain the following items:

1. The specific alleged injury to the student.
2. The date(s) on which the alleged injury(ies) occurred.
3. Name(s) of person(s) involved.
4. Measures taken by the student to rectify the particular incident being grieved, and
5. Any other information which may be pertinent to the situation.

The Executive Director will review the formal request to determine its merit and to ensure that all other avenues have been exhausted by the student. An answer and/or decision will be issued to the student in writing. Copies of all correspondence will be maintained in the student’s program personal file.

If the student wishes to pursue the matter further, he/she is required to follow UAFS formal grievance proceedings, as outlined in the University’s Student Handbook. In general, these also require a written request to each individual in the “chain of command” within three working days of the last decision as summarized below:

1. Clinical Instructor
2. Surgical Technology Executive Director
3. Dean of Health Sciences
4. Provost

The following flow chart has been designed to summarize the normal process which should be followed when dealing with the problems in the Program.
Provost

Yes

No

Dean of Health Sciences

Yes

Solved – no further action

No

Executive Director

Yes

Dispute Solved – no further action

No

Clinical Instructor

Yes

Solved – no further action

Student with Grievance
The Disciplinary Action

All levels in the disciplinary action process are documented and kept in the student’s personal file.

1. Removal from Clinical Education Site
   Form: Written letter
   Required Signatures: Clinical Instructor or Administrative Director
   To: Executive Director
   Guidelines: Contained on Page 53 of this Manual
   Use: Clinical Performance Problems

2. Probation
   Form: Unsatisfactory Performance Contract
   Required Signature: Executive Director
   Clinical Instructor: If applicable
   Guidelines: Contained on Page 54
   Use: Clinical and Didactic Problems

3. Dismissal
   Form: Written report by Executive Director with supporting documents
   Required Signatures: Executive Director
   Guidelines: Contained on Page 55 of this handbook
   Use: Clinical and Didactic Problems

Miscellaneous Policies

Policy guidelines for the following issues are outlined in the University of Arkansas – Fort Smith Student Handbook & Code of Conduct and will be maintained by this program.

Policy

1. Intoxicants and Drugs (substance and abuse)  24
2. Deception, Fraud, and Misuse of Documents  21
3. Disregard for policies  22
4. Firearms  23
5. Property  21
6. Rights of Others  21
7. Sexual Harassment  26
Surgical Technology Program

Outstanding Clinician Award
Criteria and Procedure

The Surgical Technology faculty will select a student from the graduating class to receive the “Outstanding Clinician in Surgical Technology” Award. The recipient of this award will be presented a plaque during the pinning ceremony.

Criteria:

1. Grade Point average of 3.00 or above at time of the nominee selections.
2. Demonstration of leadership ability.
3. Demonstration of the application of theory to clinical practice.
4. Demonstration of the following professional characteristics:
   a. Attendance and punctuality
   b. Ability to work with others
   c. Enthusiasm for the practice of Surgical Technology
   d. Professional conduct and appearance

Procedure:

1. The selection will be made by majority vote of the clinical instructors and the Executive Director.
2. The recipient of this award will not be announced until the award ceremony.
Academic Award

The Academic Award will be presented to the graduating student that meets all the eligibility requirements set forth by the University. The recipient of the award will be presented a plaque during the award ceremony.

The recipient of this award will not be announced until the award ceremony.

Forms

All forms included in this section may be photocopied for use if the form is not immediately available at the Clinical Education Site. Please check to be sure each appropriate party receives a copy as indicated for those forms requiring distribution.
Surgical Technology Program
Accident Report

This report is to be used to record all details of an accident or mishap involving the student. This report should be completed immediately so that the circumstances surrounding the event will be documented accurately. After completion of this report a copy should be sent to the Executive Director. The clinical site’s administrative director and the executive director should be notified regardless of how minor it may be.

Date ____________________  Time ________________  Location ____________________

Description of the event:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

(If a patient was involved)

Patient’s name ____________________  Age __________

Hospital ID ____________________  Doctor __________

Actions taken and/or persons notified:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

This report was discussed with me:

Student Signature: ____________________  Date __________

Executive Director: ____________________  Date __________

Clinical Instructor: ____________________  Date __________

R:\Admininstrative\Counseling Forms\Clinical forms.doc
Critical Incident Record  
Surgical Technology

This form is used to record any occurrence identified by the instructor as constituting a critical incident.

<table>
<thead>
<tr>
<th>Student Name</th>
<th>Department</th>
<th>Today’s Date</th>
<th>Date of Occurrence</th>
</tr>
</thead>
</table>

Detailed description of critical incident:

Instructions given to student to correct action, including rationale:

<table>
<thead>
<tr>
<th>Action Taken</th>
<th>( ) Critical Incident</th>
<th>( ) Drop</th>
<th>Critical Incidents this semester:</th>
<th>Date of Drop:</th>
<th>Time:</th>
</tr>
</thead>
</table>

Failure to change behavior as indicated, or involvement in other situations requiring formal discussion, may result in actions including a drop or grade of “F” depending on the nature of the situation.

Date: Instructor’s Signature:

This document will be placed in my personal file. I understand that I have the right to make any comments or explanations on my behalf in the space below. My signature indicates I have read and understand the above description of the situation.

Student’s remarks:

Student’s signature: Date:
Surgical Technology Program
Statement of Medical Options Following Exposure to Body Fluids

Complete after exposure:

You have been exposed to blood or body fluids. Realizing that several diseases, including HIV and Hepatitis, are transmitted via blood and body fluids, we the faculty of the Surgical Technology Program, strongly recommend that you seek medical care. Medical care options include but are not limited to:

1. The emergency or outpatient department of the agency in which the exposure occurred (at personal expense).

2. The county health department.

3. The private physician of your choice.

4. The Arkansas AIDS Foundation or Ft. Smith Fights AIDS.

It is vital that you understand that YOU are responsible financially for any expenses incurred in the course of treatment or testing. Neither the University of Arkansas at Ft. Smith nor the clinical agency will assume any liability (financial or otherwise) regarding the exposure incident.

I have read the above and understand the options and financial responsibilities.

_________________________________________  ______________________________________
Signature                                                    Date

R:\Administrative\Counseling Forms\Clinical forms.doc
Agencies to Know

CAAHEP is the largest program accrediting body in the health sciences field. Your program is accredited by:

(1) CAAHEP
   1361 Park Street
   Clearwater, FL 33756
   Phone: 727-210-2350
   Fax: 727-210-2354

(2) ARC/STSA - Accreditation Review Council on Education in Surgical Technology and Surgical Assisting.
   6 W. Dry Creek Circle, Suite #110
   Littleton, CO 80120
   Phone: 303-694-9262
   Fax: 303-741-3655

The agency which certifies you as a practicing Surgical Technologist is the National Board of Surgical Technology and Surgical Assisting.

The National Board of Surgical Technology and Surgical Assisting
6 West Dry Creek Circle, Ste. 100
Littleton, Colorado 80120
Toll Free: 1-800-707-0057
Fax: 303-325-2536

Your professional organization is the Association of Surgical Technologists. You will need to become a student member of this organization during the fall semester. Cost is $40.00

Association of Surgical Technologists
6 West Dry Creek Circle
Littleton, Colorado 80120
Toll Free: 1-800-637-7433
Phone: 303-694-9169
Fax: 303-694-9169

Your university accrediting agency is the Higher Learning Commission of the North Central Association.

The Higher Learning Commission
30 North LaSalle Street, Suite 2400
Chicago, Illinois 60602-2504
Toll Free: 1-800-621-7440
Phone: 312-263-0456
Fax: 312-263-7462