Surgical Technology Program

Student Handbook

Policies and Procedures

Revised 2017 Hoyt
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**Student Responsibility Statement**

Surgical Technology students are responsible for reading the contents of this handbook and adhering to the policies and procedures. Any information contained herein is subject to modification, deletion, and change. Any changes in the program or policy will be communicated to the student via the student’s City Colleges of Chicago (CCC) email address, written correspondence, and Blackboard postings.

This handbook is a supplement to, and not a replacement for, the City Colleges of Chicago Student Academic Policy Manual and the City Colleges of Chicago Student Policy Manual. This handbook does not include all the policies and procedures that need to be adhered to at the various clinical affiliates.

I have read and understand the requirements of this handbook.

__________________________________________________________________________  ____________

Student Name                                                                                          Date

You will be expected to have read this handbook prior to the Surgical Technology Orientation. Please highlight any sections that you have additional questions on so they can be addressed at the orientation.
Malcolm X College History
The first of the City Colleges of Chicago, the institution was founded in 1911 as Crane Junior College. The college served as a first-generation immigrant community and was housed in Crane High School. In 1933 the college was closed due to the Great Depression. The college reopened the following year and was operated by the Board of Education until 1967. At the request of students and community residents, Crane Junior College was renamed Malcolm X Community College in 1969. In January of 2016, the college moved to its current location at 1900 West Jackson.

Malcolm X College holds accreditation from the Commission on Institutions of Higher Education of the North Central Association of Colleges and Schools.

Equal Opportunity/Antidiscrimination Policy
The City Colleges of Chicago is strongly committed to ensuring that its learning and working environments are free of discrimination and harassment, including sexual harassment. City Colleges of Chicago will take action to stop discrimination or harassment, remedy discrimination or harassment and prevent recurrence of discrimination or harassment. The Board of Trustees of the City Colleges of Chicago (“CCC”) prohibits unlawful discrimination or harassment with respect to hire, terms and conditions of employment, continued employment, admissions, or participation in Board programs, services, or activities (regardless of whether such programs, services or activities occur on CCC property) on the basis of race, color, national origin, ethnicity, sex, age, religion, citizenship status, sexual orientation including gender identity, marital status, pregnancy, order of protection status, disability, genetic information, military status, or status as a member of any other protected class under federal, state, or city law.1

Prohibited harassment under this policy includes: using racial or ethnic slurs, making religious, ethnic, or gender specific jokes, distributing offensive cartoons or figures, spreading sexual rumors, and other conduct which interferes with the individual's work or academic performance or creates an intimidating, hostile, or offensive working or learning environment.2

Sexual harassment

Program History
The Surgical Technology Program at Malcolm X College began in September of 1993 under the auspices of the Cardiopulmonary Practitioners Institute. It was traditionally offered under the Continuing Education Division. The program ultimately moved to the credit division of the college in 1999, and the curriculum was institutionally revised and approved by the Accreditation of Review Council on Education for Surgical Technology and Surgical Assisting (ARC-STSA). The program is accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP).

Malcolm X College is the only City College in Chicago that offers the Associate of Applied Science in Surgical Technology.

Program Mission Statement
Malcolm X College Surgical Technology Program's mission is consistent with the mission of the City Colleges of Chicago. It strives to empower each individual to be all that he/she can be by focusing on being a learner centered institution. The program provides educational opportunities to individuals who desire a career in the operating room. The Surgical Technology Program at Malcolm X College prepares students to assume entry-level positions as members of a healthcare surgical team. Employment
opportunities are available in hospitals and in surgical centers as surgical technologists. The surgical technologist assists with surgical procedures and provides the surgeon with instruments, sutures, sponges, and other equipment necessary to accomplish the procedures.

At the conclusion of the program, students are prepared to utilize the knowledge and skills acquired to become an entry-level Certified Surgical Technologist.

**Program Accreditation**

The program is currently under probationary status and will be re viewed in November, 2017. The program remains accredited while under probationary status.

The program is accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) upon recommendation by the Accreditation of Review Council on Education for Surgical Technology and Surgical Assisting (ARC-STSA). Upon successful completion of the program the graduate will obtain an "Associate in Applied Science Degree in Surgical Technology." The graduate is eligible to receive the title of Certified Surgical Technologist (CST) after successful completion of the National Board of Surgical Technology and Surgical Assisting (NBSTSA) national certification exam.

**Program Personnel**

Program Director  
Patricia Hoyt, CST, BGS

Faculty  
Rhesa Scott, CST, BA

**Program Outcomes**

The Accreditation Review Council on Education in Surgical Technology and Surgical Assisting (ARC-STSA) has established the following thresholds for accreditation:

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Threshold</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Graduation Rate</td>
<td>70% for all graduates</td>
</tr>
<tr>
<td>CST™ Exam Participation</td>
<td>100% for all graduates</td>
</tr>
<tr>
<td>CST™ Pass Rate</td>
<td>70% for all graduates</td>
</tr>
<tr>
<td>Graduate Job Placement</td>
<td>80% for all graduates</td>
</tr>
<tr>
<td>Employer Survey Return Rate</td>
<td>50% for all surveys sent to employers</td>
</tr>
<tr>
<td>Employer Satisfaction Rate</td>
<td>85% for all employers who return the survey</td>
</tr>
<tr>
<td>Graduate Survey Return Rate</td>
<td>50% for all surveys sent to graduates</td>
</tr>
<tr>
<td>Graduate Satisfaction</td>
<td>85% for all graduates who return the survey</td>
</tr>
</tbody>
</table>

* *CST™ as administered by the National Board of Surgical Technology and Surgical Assisting
**Occupational Overview**
Surgical Technologists are allied health professionals who assist with surgical care of patients. They are experts in the area of aseptic technique and they function under the direct supervision of the surgeon. Their job responsibilities include, but are not limited to, scrubbing, gowning and gloving self and surgical team, establishment of the sterile field, verification of instrument and miscellaneous counts and the maintenance of the sterile field and the sterility of personnel and supplies during the pre, intra and post operational phases of surgery.

The Accreditation Review Committee on Education in Surgical Technology describes the Surgical Technologists as:

“... Possess[ing] expertise in the theory and application of sterile and aseptic technique and combines the knowledge of human anatomy, surgical procedures, and implementation tools and technologies to facilitate a physician’s performance of invasive therapeutic and diagnostic procedures.”

Please check the Department of Labor for statistics on current wages and future employment opportunities.


**Association of Surgical Technologists Code of Ethics**
(Adopted by the AST Board of Directors, 1985)

1. To maintain the highest standards of professional conduct and patient care.
2. To hold in confidence, with respect to patient’s beliefs, all personal matters.
3. To respect and protect the patient’s legal and moral right to quality patient care.
4. To not knowingly cause injury or any injustice to those entrusted to our care.
5. To work with fellow technologists and other professional health groups to promote harmony and unity for better patient care.
6. To always follow the principles of asepsis.
7. To maintain a high degree of efficiency through continuing education.
8. To maintain and practice surgical technology willingly, with pride and dignity.
9. To report any unethical conduct or practice to the proper authority.
10. To adhere to the Code of Ethics at all times in relationship to all members of the health care team.

**Admission Requirements**

1. Completion of all program prerequisites
2. Meet the minimum GPA requirement
3. Submit a complete application to the Surgical Technology program before deadline
4. Submit to a background check and drug screen
5. Conduct a personal interview with program personnel
**Background Check**

Illinois statute prohibits healthcare employees from knowingly hiring, employing or retaining any individuals who have been convicted of various criminal offenses in a position with duties involving direct patient care. Also prohibited is hiring these same individuals in positions that provides access to the medical, financial, or living quarters of a patient (225 ILCS 46.25).

Surgical Technology students must submit to a Criminal Background check, at their own expense, prior to program admission, annually and as needed. Students may not be able to participate in clinical experiences based on information obtained as a result of the criminal background information. If a clinical placement is not able to be obtained this will lead a failure in the clinical course which will result in the dismissal of the student from the Surgical Technology program.

**Health Insurance**

Proof of health insurance must be submitted prior to clinical courses. Students may not be able to participate in clinical experiences if they do not maintain health insurance. If a clinical placement is not able to be obtained this will lead a failure in the clinical course which will result in the dismissal of the student from the Surgical Technology program.

**Transfer Students**

The program does not accept credits from other Surgical Technology Programs. Students interested in attending this program must enroll from the beginning of the curriculum.

**Program Readmission**

1. Any student who exited the program may apply for readmission *within one year* of exiting the program. A student must meet the requirements for admission to the program at the time reinstatement is sought. Students are allowed only two attempts for successful completion of the ST program. A student’s reinstatement will be contingent on the following:

2. The student must meet all program admission requirements at the time reinstatement is sought.

3. There is available space in the program at the time of reinstatement request.

4. If a student is found by the Program Director and/or faculty to not to qualify for specified reasons, the student will not be readmitted into the program.

5. Students who are dismissed for unprofessional behavior/conduct or a clinical violation/incident will not be readmitted to the ST program. This also includes, but is not limited to, any violations of ST program policies and/or the following CCC Policies:
   a. Academic Integrity
   b. Equal Opportunity in Employment (EEO), Programs, Services, Activities
   c. Smoke, Drug and Alcohol Free Campus
   d. Safety and Security
   e. Responsible Computer Usage

The student who wish to be readmitted into the program must also:

1. Re-apply to the program as a new student would, with a letter stating the reason(s) for not being successful the last time and which outlines their plan to meet their future educational goals.
2. Student seeking re-admission into the program must follow the college policy on audits (see college catalogue). During their first semester after readmission, the readmitted student will be placed in audit status for any Surgical Technology course that was previously passed.
3. Must attend 98% of the classroom lectures
4. Must attend 98% of the lab sessions
5. Must take and pass any written, oral, and/or lab test administered
6. Must pass the course in order to progress through the program
7. A clinical readmission applicant must pass a lab practicum assessment. If the assessment results in a failing grade, the applicant must be placed in the precluding lab practicum and receive a passing grade to be placed in clinical rotations.
**Associates in Applied Science Degree Curriculum**

**Program Prerequisites**

*Biology*
- BIOLOGY 120 Terminology for Medical Careers (recommended)
- Or
  - HeaPro 102
  - BIOLOGY 121 Biology I
  - BIOLOGY 226 Human Structure and Function I

*English*
- ENGLISH 101 Composition

**Program Core Requirements**

The following courses are separated into 2 years as follows:

**First Year**
- First Semester: Biology 227, Business 284, Surgical Technology 111, 112 & 113;
- Second Semester: Surgical Technology 114, 115 & 116;
- Summer Term: Social Science 101 OR Social Science 102, then, Surgical Technology 117 & 200;

**Second Year**
- Third Semester: Sociology 201, Speech 101, Surgical Technology 211 & 212;
- Fourth Semester: Psychology 201 & Surgical Technology 213
**Associates in Applied Science Degree Curriculum**

**Surgical Technology Program**

### Pre-requisite and co-requisite courses

<table>
<thead>
<tr>
<th>Title</th>
<th>CH</th>
</tr>
</thead>
<tbody>
<tr>
<td>ENG 101  Composition</td>
<td>3</td>
</tr>
<tr>
<td>BIO 120  Terminology for Medical Careers</td>
<td>3</td>
</tr>
<tr>
<td>BIO 121  General Biology</td>
<td>4</td>
</tr>
<tr>
<td>BIO 226  Human Structure &amp; Function I</td>
<td>4</td>
</tr>
<tr>
<td>BIO 227  Human Structure &amp; Function II</td>
<td>4</td>
</tr>
</tbody>
</table>

**Total Pre-requisite Courses** 18

### Surgical Technology Core

<table>
<thead>
<tr>
<th>Title</th>
<th>CH</th>
</tr>
</thead>
<tbody>
<tr>
<td>SURGTC 111  Intro to Surgical Technology</td>
<td>3</td>
</tr>
<tr>
<td>SURGTC 112  Preparation for Surgery</td>
<td>4</td>
</tr>
<tr>
<td>SURGTC 113  Special Patient Care</td>
<td>3</td>
</tr>
<tr>
<td>SURGTC 114  Surgical Intervention I</td>
<td>4</td>
</tr>
<tr>
<td>SURGTC 115  Surgical Intervention II</td>
<td>4</td>
</tr>
<tr>
<td>SURGTC 116  Surgical Intervention III</td>
<td>4</td>
</tr>
<tr>
<td>SURGTC 117  Surgical Pharmacology</td>
<td>2</td>
</tr>
<tr>
<td>SURGTC 200  Application of Aseptic Technique</td>
<td>3</td>
</tr>
<tr>
<td>SURGTC 211  Surgical Intervention IV</td>
<td>2</td>
</tr>
<tr>
<td>SURGTC 212  Clinical Practicum I</td>
<td>5</td>
</tr>
<tr>
<td>SURGTC 213  Clinical Practicum II</td>
<td>8</td>
</tr>
</tbody>
</table>

**Total Core Courses** 42

### General Education

<table>
<thead>
<tr>
<th>Title</th>
<th>CH</th>
</tr>
</thead>
<tbody>
<tr>
<td>SOC 201  Introduction to the Study of Society</td>
<td>3</td>
</tr>
<tr>
<td>or</td>
<td></td>
</tr>
<tr>
<td>SOC SCI 101  Introduction to Social Science</td>
<td>3</td>
</tr>
<tr>
<td>PSYCH 201  General Psychology</td>
<td>3</td>
</tr>
<tr>
<td>SPEECH 0101  Fundamentals of Speech Communications</td>
<td>3</td>
</tr>
<tr>
<td>BUSINES 0284  Business Communications</td>
<td>3</td>
</tr>
</tbody>
</table>

**Total General Education Courses** 12

Please note program curriculum is currently under review and is subject to change.
**Essential Functions**
Surgical Technology students and professionals should be able to perform these essential functions or with reasonable accommodations, such as the help of compensatory techniques and/or assistive devices, be able to demonstrate the ability to become proficient in these essential functions. The failure of an ST to perform an essential function can result in the student committing an act of negligence or harm to a patient. Therefore, an inability to perform any standard may result in the inability of the student to complete clinical course performance objectives which would then lead to a failure in the course and program termination.

**Essential Functions Required of Students for Progression in Surgical Technology**
Students should be able to perform these essential functions or with reasonable accommodations, such as the help of compensatory techniques and/or assistive devices, be able to demonstrate ability to become proficient in these essential functions.

<table>
<thead>
<tr>
<th>Essential Function</th>
<th>Technical Standard</th>
<th>Some Examples of Necessary Activities (Not all inclusive)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Critical Thinking</td>
<td>Critical thinking ability sufficient for clinical judgment</td>
<td>Ability to identify cause-effect relationships in clinical situations: evaluate patient or instrument responses; synthesize data; draw sound conclusions.</td>
</tr>
<tr>
<td>Interpersonal Skills</td>
<td>Interpersonal abilities sufficient to interact with individuals, families, and groups from a variety of social, emotional, cultural and intellectual backgrounds.</td>
<td>Ability to establish rapport with patients and colleagues. Use therapeutic communication (attending, clarifying, coaching, facilitating, and teaching. Function (consult, negotiate, share) as a part of a team.</td>
</tr>
<tr>
<td>Communication Ability</td>
<td>Communication abilities sufficient for effective interaction with others in spoken and written English.</td>
<td>Ability to explain treatment procedures; initiate health teaching; document and interpret instructions. Listen attentively. In an emergency two-way communication cannot be impaired due to patient safety.</td>
</tr>
<tr>
<td>Physical Endurance</td>
<td>Remain continuously on task for several hours while standing, sitting, moving, lifting and/or bending.</td>
<td>Ability to manually resuscitate patients in emergency situations or stand/walk for extended periods of time. Turn, position, and transfer patients. Must be able to lift 25 lbs. standing erect, using only upper body strength for at least 30 seconds.</td>
</tr>
<tr>
<td>Mobility</td>
<td>Physical abilities sufficient to move from room to room and maneuver in small spaces while maintaining environmental and patient safety; full range of motion; manual and finger dexterity; and hand-eye coordination.</td>
<td>Ability to move around in work area and treatment areas. Position oneself in environment to render care without obstructing the position of other team members or equipment. Assembling and passing instruments in the surgical field of operation.</td>
</tr>
<tr>
<td>Motor Skills</td>
<td>Gross and fine motor skills sufficient to provide safe patient care and operate equipment.</td>
<td>Ability to use equipment and instruments with necessary dexterity.</td>
</tr>
<tr>
<td>Hearing Acuity</td>
<td>Auditory ability sufficient to monitor and assess health needs.</td>
<td>Ability to detect alarms, emergency signals, muffled voices, auscultatory sounds and cries for help.</td>
</tr>
</tbody>
</table>
Visual Ability

Normal or corrected visual ability sufficient to discriminate between subtle changes in density (black and grey) or a color at low light. Ability to see micro instrumentation and supplies.

Ability to observe patient responses, secretions, color. Read thermometer, chart, computer screen, digital printouts, labels and gauges. Ability to manipulate suture materials the size of a human eyelash.

Tactile Ability

Tactile ability sufficient for physical assessment.

Ability to perform palpation, functions of physical examination and/or those related to therapeutic intervention.

Olfactory Ability

Olfactory senses (smell) sufficient for maintaining environmental and patient safety.

Ability to distinguish smells which are contributory to assessing and/or maintaining the patient’s health status or environmental safety.

Professional Attitude and Demeanor

Ability to present professional appearance and implement measures to maintain one’s own physical and mental health and emotional stability.

Ability to work under stressful conditions. Be exposed to communicable diseases and contaminated body fluids. React calmly in emergency situations. Demonstrate flexibility. Show concern for others. Be dependable.

Libby McNaron, 2015

Adapted from Red Alert: The Americans with Disabilities Act - Implications for Nursing Education (March ’93) 11/96

Student Conduct

Surgical Technology Program students are expected to conduct themselves in a manner which respects the rights of others and will not violate the mission, vision, and values of the City Colleges of Chicago (CCC). Misconduct will result in disciplinary action which may lead to dismissal from the ST program. Violations include but are not limited to:

1. Disrespectful behavior to Faculty, Staff, Administration, and/or any person, including but not limited to patient, surgeon, preceptor or nurse, or any person interacted with at any clinical site.
   a. Elevating voice
   b. Argumentative
   c. Profanity or any inappropriate language expressed verbally or via email
   d. Dissemination of negative written or social media correspondences
   e. Defamation of character
2. Physical and/or verbal abuse, threats, intimidation, harassment, and other misconduct that threatens or endangers the health or safety of any person.
3. Possession of weapons, ammunition, and/or explosives
4. Obstruction or disruption of teaching, research, administration, and/or disciplinary proceedings
5. Dishonesty, stealing, or forgery

Classroom Dress Code

Students must be in program specific color scrubs for all Surgical Technology classes. A knee length laboratory coat may be worn over the scrubs. No undershirts may be visible under scrubs. Only closed heel and closed toe shoes may be worn. Hair must be neat and pulled off of shoulders. Makeup should be moderate. No artificial nails or nail covering of any kind may be worn. No jewelry may be worn in laboratory classes. Scrub tops should remain tucked. No hats are to be worn during class or lab.
**Mobile Device and Computer Responsibilities**

Professional behavior and proper technology etiquette should be observed at all times when using cell phones, iPads, iPods, mobile devices, laptops, or other electronic devices in both the classroom and clinical sites. Students must adhere to the following:

1. **Cell phones and mobile devices must be turned off completely during clinical experiences and are not to be brought into the operating room.** Utilize mobile devices only in designated areas and only when on a designated break. Any violation will result in the student being dismissed for the day receiving an unexcused absence. A second violation may result in dismissal from the clinical rotation resulting in a course failure to which the clinical rotation is attached.

2. **No photos of patients or patient information may be taken by students.** Any violation will result in dismissal from the clinical rotation resulting in a course failure to which the clinical rotation is attached. Students who violate patient privacy will be subject to HIPAA infractions of the clinical site.

3. Use of facility computers for personal use is prohibited.

4. You must protect the confidentiality of patient information at all times in accordance with HIPAA.

**Social Media**

Students are not to post confidential or proprietary information about City Colleges of Chicago or its students, faculty, and staff. Students are prohibited from posting, publishing, or distributing any class or course material (including exams, quizzes, notes, PowerPoint presentations, handouts, or recordings) without written permission from the instructor. It is never appropriate to post photos or information about a patient (HIPAA). Social network postings may be subject to disciplinary action up to and including dismissal from the Surgical Technology Program.

**Attendance Policies**

Students are expected to attend all classes in which they are enrolled. Absence and tardiness contribute to academic failure, and interfere with the instructional process. Absences and late arrivals will be recorded. The course instructor can best judge the effect of any absence on the progress of a student. It is the instructor's prerogative to report excessive absences, to recommend withdrawal or to drop a student from the course when, in the instructor's judgment, such problems, seriously interfere with learning. Absences due to illness or participation in a college sponsored activity are extenuating circumstances and may affect the instructor’s decision. (College Catalogue)

All personal appointments and obligations must be met during unassigned class hours.

**Clinical Guidelines and Policies**

Students must be able to provide direct patient care without restrictions. Students will be required to lift patients, stand in one place continuously for periods of time from three to five hours, and to stay on task without taking breaks for several continuous hours. Additionally, the clinical experience may place the student in stressful situations as they undertake responsibilities and duties that have a major impact on patients and their family lives. Students must be able to demonstrate rational and appropriate professional behavior under these potential stressful situations.
Only day and late afternoon clinical assignments may be available. Clinical assignments are designated by the Program Director in consultation with Faculty and Clinical Instructors. Students must be available to accept clinical assignments at any location within the city of Chicago and surrounding suburbs. Transportation, to and from clinical sites, are the responsibility of the student. Students can be placed up to 50 miles from the school. Students cannot be utilized as staff or paid by their clinical site during clinical rotations. **Refusal to accept a clinical rotation assignment for any reason will result in dismissal from the program.**

**Health and Clinical Requirements**

Failure to comply with providing required and updated medical requirements as informed will result in a clinical absence. If a clinical absence occurs as a result of medical noncompliance the clinical absence no make-up opportunity will be provided. Please see “Clinical Attendance Policy”. Each student is required to submit an up-to-date health record. The health requirements are necessary to meet the expectations of each clinical agency. Changes in student health status warrant medical clearance to ensure safety in the clinical setting. The list of health requirements may not be inclusive due to varying agency requirements so a student may have to submit requested documentation, which may not be listed. It is the responsibility of the student to ensure that the college receives all information. Students are required to keep copies of all information submitted.

Students must provide proof of health insurance. All students are covered under a student accidental health plan (SAHP) but our encouraged to have additional healthcare insurance that can ensure the appropriate level of coverage should they get injured. SAHP will cover some but maybe not all of the costs.

**Health Requirements**

All students entering the surgical technology program must continuously meet all health and safety requirements to maintain enrollment. Requirements, though not limited to, are as follows:

1. All students enrolled in surgical technology courses must meet and maintain all health and safety requirements.
   a. Students will meet these requirements by providing a completed and signed Medical Compliance Checklist with required documentation
2. If students do not provide documentation of health compliance the students will not be registered and/or allowed to continue with surgical technology courses.
3. A physician’s note or other documentation will not negate the health and safety documentation requirements as patient safety is paramount.
4. If a student incurs an illness, injury, or other health limitations, both the clinical agency and the Surgical Technology Program policies must be upheld.
   a. The Surgical Technology Program Director or faculty member and/or clinical representatives will determine a student’s ability to perform required functions regardless of a physician’s approval for return.
5. Students who are not physically fit to perform their student surgical technologist duties in a safe manner or require utilization of assistive devices, such as crutches, braces or boots, and casts of any type that would prevent them from adhering to the principles of asepsis or in being able to scrub in will not be allowed to participate in clinical experiences; therefore, the student will have to withdraw from the course.
6. Upon the student’s clearance from their medical doctor, the student can be reinstated into the surgical technology program and can be allowed to retake the course by following the procedures for readmission. Note: Surgical Technology courses are only offered once a year.

**Vaccinations/Titers**

Surgical Technology students are required to have and maintain record of immunization and vaccinations.

1. Titers are required to verify immunity.
   - a. Measles
   - b. Mumps
   - c. Rubella
   - d. Varicella
   - e. Hepatitis B

2. Two-step PPD skin test or QuantiFERON Gold, or chest x-ray is required to verify student tested negative for tuberculosis (TB).

3. Tetanus diphtheria vaccination/booster received within previous nine years.

4. Current season’s Influenza vaccination

**Nine Panel Drug Screen**

All clinical affiliates and the Surgical Technology program are drug free environments. The Surgical Technology program enforces a zero tolerance policy with regards to student impairment from drugs or alcohol at the clinical site or any City Colleges of Chicago/ST facility and institution. Students who fail to comply or are tested positive for drugs will be immediately dismissed from the program.

Students are required to obtain a 9-Panel substance abuse drug screening, at their own expense, as indicated:

1. At admission
2. As required by clinical facilities

**Healthcare Provider Basic Life Support (BLS)**

A student must possess a valid Healthcare Provider Basic Life Support (BLS) certification from the American Heart Association prior to enrollment in clinical courses. No lapse in certification is allowed; therefore, renewal of Healthcare Provider BLS certification must be completed prior to the expiration date on the BLS card. If a student fails to comply with this requirement they will not be allowed to report to clinical. If clinical is missed due to an expired BLS card the student will not be provided a clinical make-up opportunity. Please review clinical attendance policy.

**Clinical Dress Code**

No tank tops, very short skirts, shorts, or other clothing and /or attire that may be construed as unethical, immoral or unprofessional, may be worn when reporting to clinical sites. Scrubs will be provided by the clinical site. The student must follow the facility procedures for obtaining and returning scrubs. No scrubs may be taken home or worn in transit to and from the clinical site. Removing scrubs from a clinical site is considered theft and may result in expulsion from the program. No visible undergarments or undershirts may show while wearing the scrubs.
Only closed heel and closed toe shoes are to be worn. Students must wear booties in clean areas or have hospital dedicated shoes. Hair must be neat and tied back and makeup should be moderate (no extreme colors) No jewelry of any kind may be worn. No nail polish, nail wraps or artificial nails of any kind may be worn. No false eyelashes are to be worn. Caps and masks are to be worn as required. A hooded covering must be worn over facial hair on the neck and sides of face including beards, goatees, or long stubble. A knee length lab coat or cover gown must be worn over scrubs outside of the operating room.

No food or drink, not even water, may be brought into the operating room. Check with your clinical site regarding an appropriate place to store a packed lunch. **Cell phones, or other electronic devices, may not be brought into the operating room.** Leave valuable items at home. The City Colleges of Chicago is not responsible for any goods lost or stolen from clinical sites.

**Personal Protective Equipment Policy**

Personal protective equipment must be worn when exposure to blood and body fluids is anticipated. All blood and body fluids are to be treated as if infectious. All students must wear protective eyewear while scrubbing. Lead vests, gowns and/or aprons and a thyroid shield must be worn during cases involving radiography or radiation exposure. Any student found not in compliance with student or clinical agency PPE policies will be dismissed from clinical for the day, which will count as an unexcused absence.

**Clinical Attendance Policy**

Students are required to call 60 minutes prior to their assigned start time when absent or late for any reason. No call, no shows are unacceptable and grounds for dismissal from clinical rotation and/or the program. Even though consideration may be given to extenuating circumstances, there are no excused absences. **Excessive leaving early, tardiness, and absences that exceed two occurrences while on clinical rotation may result in dismissal from the program.**

Students are only allowed to miss two (2) clinical days per rotation, per semester (16) weeks and (8) weeks in the summer semester. The student is only allowed to have 2 (two) absence days (days meaning Tuesday, Wednesday, Thursday or Friday) per clinical rotation. Each day stands on its own.

a. An absence is defined by not being physically present, no matter the reason.

b. If you were present and left the premise for any reason other than illness, family emergency (mother, father, sister, brother, child or children) you will be considered absent and will not receive credit for that day.

If for any reason a student will miss more than the allotted time, there must be documentation to that fact. The following are acceptable reasons that a student may exceed the 2 allotted absent days:

1. Death in the immediate family: the student must contact the Program Director to make arrangements for their absence

2. Mandatory court appearance or incarceration: if a student has broken the law and must appear in court, documentation from the Court system must be provided. If the infraction is against a minor
of the adult parent or legal guardian, documentation from the Court system must also be provided.

3. Delivery or adoption of a child: students anticipating their partner giving birth or an adoption into their immediate family may be excused for a period of up to one week. Prior notice of four months should be given to the Program Director.

4. Maternity leave: Pregnant students must notify the Program Director and must sign a form releasing the college of any and all responsibilities of fetal abnormalities or demise. Medical clearance from a physician is required for a return to clinical rotations after the delivery of a child.

5. Illness of self, parent, or minor of the adult parent or legal guardian, includes contagious diseases such as Shingles, Chicken Pox, Small Pox, Hepatitis, HIV, AIDS, Meningitis, Bronchitis, vehicle accident, loss of limb or disfigurement, hospitalization. Legal and/or medical documentation may be required.

In the event of an absence, the student is to notify the clinical site one hour before the start of the scheduled start time. First, contact the clinical site. Please notify the supervisor or charge nurse of your absence and obtain their name. After this, call the clinical instructor from the program faculty to inform them of your absence and the name of the person you notified at the clinical site.

All clinical time missed will be made up at the discretion/convenience of the clinical site and faculty instructor. The student will not be allowed to miss class, laboratory or another clinical rotation in order to make up this day. The missed day must be coordinated with the Director of Clinical Education and the clinical site. An expected absence, such as jury duty, must also be coordinated with the clinical instructor and Director of Clinical Education prior to the absence. Students unable to achieve the student learning objectives of the clinical course due to absences will not successfully complete the rotation or the clinical course.

If a student is removed or dismissed from the clinical site by the clinical supervisor, clinical educator, or college clinical coordinator (depending on the circumstance) he/she may be terminated from the program or required to complete remediation on campus in the lab for a period of 2-4 weeks before accepting another assignment. However, the college or program is not required to find additional clinical sites for a student that demonstrates poor performance (attendance, skills, poor attitude or lack of professionalism, and poor performance). The student may be terminated from the program for failure to perform or demonstrate acceptable clinical performance. If the student is offered a second rotation site after completing lab remediation, the next occurrence will result in immediate dismissal from the program.

Each student is required to meet with the Clinical Coordinator or Program Director on a weekly basis while on rotation. This meeting will be held on campus; the day and time is to be determined. Each week students are required to bring and turn in all completed paperwork and case logs during this meeting. Failure to complete case logs and required forms may result in removal from the clinical site or program termination. Forgery or fraud related to case logs or any clinical paperwork is grounds for immediate program termination.
Visitation at clinical sites by the Clinical Coordinator and/or Program Director will occur. The Clinical Coordinator and/or Program Director will be at the site to observe the student, as well as talk to the preceptors and staff.

SURGICAL ROTATION CASE REQUIREMENTS

The goal of the Surgical Rotation Case Requirements is to contribute to the development of a well-rounded, competent, entry-level surgical technologist.

Objectives:
I. The surgical technology program is required to verify through the surgical rotation documentation the students’ progression in the scrub role in surgical procedures of increased complexity as he/she moves towards entry-level graduate competency.
II. Students must complete a minimum of 120 cases as delineated below.
   A. General Surgery cases
      1. Students must complete a minimum of 30 cases in General Surgery; 20 which must be performed in the First Scrub Role. The remaining 10 cases may be performed in either the First or Second Scrub Role.
   B. Specialty cases
      1. Students must complete a minimum of 90 cases in various surgical specialties, excluding General Surgery; 60 which must be performed in the First Scrub Role. The additional 30 cases may be performed in either the First or Second Scrub Role.
         a. A minimum of 60 surgical specialty cases must be performed in the First Scrub Role and distributed amongst a minimum of four surgical specialties.
            (1) A minimum of 10 cases in the First Scrub Role must be completed in each of the required minimum of four surgical specialties (40 cases total required).
            (2) The additional 20 cases in the First Scrub Role may be distributed amongst any one surgical specialty or multiple surgical specialties.
         b. The remaining 30 surgical specialty cases may be performed in any surgical specialty either in the First or Second Scrub Role.
   C. Optional surgical specialties
      1. Diagnostic endoscopy cases and vaginal delivery cases are not mandatory. However, up to 10 diagnostic endoscopic cases and 5 vaginal delivery cases can be counted toward the maximum number of Second Scrub Role cases.
         a. Diagnostic endoscopy cases must be documented in the category of "Diagnostic Endoscopy", rather than by specialty.
         b. Vaginal delivery cases must be documented in the category of "Labor & Delivery" rather than in the OB/GYN specialty.
   D. Case experience in the Second Scrub Role is not mandatory.
   E. Observation cases must be documented, but do not count towards the 120 required cases.
F. Counting cases

1. Cases will be counted and documented according to surgical specialty (exception being diagnostic endoscopic cases; refer to II. C.I.a. above).

2. Examples of counting cases
   a. Trauma patient requires a splenectomy and repair of a LeFort I fracture. Two cases can be counted and documented since the splenectomy is general surgery specialty and repair of LeFort I is oral-maxillofacial surgical specialty.
   b. Patient requires a breast biopsy followed by mastectomy. It is one pathology, breast cancer, and the specialty is general surgery; therefore, it is counted and documented as one procedure - one case.
   c. Endoscopic cases that convert to an open case (e.g.: Laparoscopic Cholecystectomy converted to an Open Cholecystectomy) are counted and documented as one (l) procedure--one case.

G. Definition of roles

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

2. Second Scrub Role
   a. 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 by performing one or more of the following:
      1. Sponging
      2. Suctioning
      3. Cutting suture
      4. Holding retractors
      5. Manipulating endoscopic camera

3. Observation Role
   a. 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.

**Program Progress and Completion**

**Evaluation**
Students are expected to complete a program and clinical site evaluation at the end of the program. This information will be used to improve the quality of education.

Evaluation of student performance
1. Quizzes, Exams, Mid-Term, Final.
2. Completion of assignments.
3. Didactic and clinical absences, tardiness.
4. Successful completion of laboratory competency objectives.
5. Successful completion of clinical performance objectives.
6. Successful completion of clinical case requirements.
7. Exit Exam and National Certification Exam

**Unsatisfactory Performance**
If a student’s performance in any didactic or clinical course is below the acceptable competence level, the faculty and the Program Director will counsel the student. Written evaluation of academic progress is done at midterm and final. All students must maintain a grade of “C” or better in Surgical Technology classes and must pass Biology 227 with a grade of “C” or better the fall semester of their first year, if they have not done so already. If a student’s performance in any given area at the clinical site is below the acceptable competence level, the clinical instructor and the Program Director will counsel the student.

Every attempt is made to resolve all violations of program and/or clinical agency rules. If the clinical instructor or a clinical agency representative terminates the student from the clinical site, the program does not have any responsibility for reassigning a student to another site during that rotation. Termination from the clinical site is tantamount to failure of the current clinical course. Subsequently, the student cannot enroll in the next semester’s course and must withdraw from the program.

**Program Completion**
The program consists of two full years, including a summer semester. Each Surgical Technology course is only offered once a year. Students are considered as having completed all program requirements when they have achieved a grade of “C” or better in all courses listed in the Surgical Technology curriculum (both program core courses and general education courses), have completed clinical case requirements according to current ARC-STA standards, have completed a program exit exam and have taken the national certification exam. **It is the student’s responsibility to regularly audit their clinical case log and their progress toward their degree to ensure that they are on track to graduate on time.**
National Certification Exam Eligibility
ARC-STA standards require a 100% participation rate in certification exams therefore, all Surgical Technology students who have passed the program exit exam and completed clinical case requirements must sit for the national certification exam administered by the National Board of Surgical Technology and Surgical Assisting (NBSTSA) as part of program completion. The program will arrange for On-Campus Web Based Testing and submit student qualifications to the NBSTSA. The student is responsible for payment of exam fees and providing items required for the exam application.

Program Termination Process
The violation of any previously mentioned program policies or an occurrence that falls under the CCC Standards of Conduct (see college Catalogue) may result in an administrative withdrawal of the student from Surgical Technology classes and the program. Unsatisfactory performance, or a grade below “C”, in any Surgical Technology course or Biology 227 will also result in program termination.

STEP 1
Meeting with the student, faculty member or clinical instructor, and Program Director

STEP 2 (If Necessary)
Meeting with the student, faculty member or clinical instructor, Program Director and Associate Dean and/or the Dean of Careers Program

Student Grievance Procedure
The program’s policy covers Academic, Non Academic and Clinical Education complaints, grievances and any and all misconduct while in didactic or laboratory classes and in clinical rotations.

Academic Complaints
Grades
Honesty/Integrity
Plagiarism/Cheating, etc

Non-Academic Complaints
Stealing
Intent to Defraud
Unprofessional conduct with MXC faculty/staff
Insubordination
Physical/Verbal abuse (student-student or student-CCC District employee)
Possession of Weapons, etc.

Clinical Complaints
Excessive absenteeism, tardiness
Unprofessional conduct with patients
Unprofessional conduct with clinical agency staff, etc.
Any act that puts the patient or staff in any danger
Insubordination
STEP 1
Any student having a complaint with an instructor, fellow student, clinical instructor or clinical supervisor may file for conference time with the program director within three business days of the initial occurrence.

STEP 2
If, after the conference with the program director, the student does not feel that there is an appropriate resolution to his/her oral complaint he/she may file a written complaint with the Associate Dean of Career Programs within fourteen business days of the oral conference.

STEP 3
Within three business days of the submission of the written complaint a meeting will be scheduled with the faculty member, clinical instructor, etc., to hear the student’s grievance. A response to the written complaint will be given to all parties involved within fourteen business days of the meeting.

STEP 4
If the student remains dissatisfied with the response from the program director, he/she may file a subsequent complaint within three business days with the Dean of Career Programs or Dean of Student Services or his/her designee. A response will be given in fourteen business days from receipt of complaint.

FINAL STEP 5
If the student remains dissatisfied with the response from the Dean of Career Programs and/or Dean of Students Services, he/she may file a subsequent complaint within three business days with the Vice President of the College within fourteen business days. The Vice President by his/her discretion may refer the student to the college’s disciplinary committee (depending on the nature of the complaint), or to the college President for final resolution. A written response will be given in fourteen business days from receipt of complaint.

Non-Academic Formal Complaint Filing Procedure

The Complaint/Compliment Management System is an online portal, whereby City Colleges of Chicago students, faculty, and community members can submit a formal complaint.

Once on the system, the individual is required to select the appropriate category and provide supporting documents. Once the complaint is submitted, a notification is sent to the arbiter and a copy of the complaint and confirmation of receipt is sent to the filer.

A response will be received within in five business days. A response may include, but is not limited to, a request for further information, a suggested resolution, or a final disposition.

All complaints are tracked from initial submission to final disposition and archived within Complaints/Compliments System.