

This is a SouthArk Master Syllabus. The course syllabus distributed by the instructor may include additional requirements, must be followed by the student in the given term, and is considered to supersede the Master Syllabus.

Course Number

SURG 1305

Course Title

Surgical Technology Practicum III

Course Description

This course is a continuation of Surgical Technology Practicums I and II with student advancing to a functional role in all subspecialty areas of the operating room.

College Mission

South Arkansas Community College promotes excellence in learning, teaching, and service; provides lifelong educational opportunities; and serves as a cultural, intellectual, and economic resource for the community.

College Wide Student Learner Outcomes

Critical Thinking

Responsibility

Communication

ACTS Course

Program Course Surgical Technology

ACTS Outcomes

Program Outcomes

1. Identifies, discusses, and evaluates (self) the duties of the Surgical Technologist in the scrub role, circulating role, and second assisting. [Cognitive – Knowledge, comprehension, and evaluation. Affective – Responding, receiving, and organization].
2. Identifies, discusses and diagrams key elements related to anatomy and physiology, microbiology, and the mechanisms of wound healing and wound complications, as it relates to surgical care.[Cognitive – Knowledge, comprehension, and analysis].
3. Identifies, discusses, and displays appropriate key elements of universal precautions and infection control measures. [Cognitive – Knowledge, comprehension, and application. Psychomotor – Utilizing imitation, manipulation following oral or written directions and finally precision (independent performance)].
4. Identifies safety hazards. Discusses and selects appropriate interventions regarding patient and environmental safety including specimen care, counts, electrical, radiation and laser precautions, CDC (Infection Control measures), latex allergy, and OSHA (PPE) requirements. [Cognitive – Knowledge, comprehension, and analysis].
5. Identifies, discusses, and prepares pharmacology medications and solutions used in surgery correctly and safely. [Cognitive- Knowledge, comprehension, and evaluation. Psychomotor – Utilizing imitation, manipulation following oral or written directions and finally precision independent performance.]
6. Identifies, discusses, and (self) evaluates the principles of surgical fundamentals such as aseptic technique, storage and handling of sterile supplies, sterilization, and disinfection efficiently and safely. [Cognitive– Knowledge, comprehension, and evaluation].
7. Identifies and selects appropriate equipment for assigned procedure setup. Organizes a comprehensive pre-case supply and equipment check including orthopedic equipment, dermatomes, tourniquets, suction units, endoscopes, microscopes, cryotherapy units, electrosurgical units, irrigation/aspiration units, laser equipment, monitors, and emergency equipment. [Cognitive–Knowledge. Psychomotor–Utilizing imitation, manipulation following oral or written directions, and finally precision independent performance.]
8. Identifies and selects appropriate action when confronted with equipment-related malfunctions or emergencies. Identifies and selects appropriate response to surgical complications and emergencies. Demonstrates appropriate response in lab or clinical setting. [Cognitive- Knowledge, comprehension, and evaluation. Psychomotor – precision as appropriate in the lab setting; manipulation following verbal instructions in the clinical setting].
9. Identifies basic step, discusses possible variations, and applies principles of surgical technique and planning to patients of all ages and physical conditions for a variety of procedures by formulating or modifying the patient's case plan. [Cognitive – Knowledge, comprehension, and application. Affective – Responding, receiving, and valuing].
10. Identifies procedural steps and demonstrates performance (independent) of patient care procedures correctly and safely such as skin preparation, positioning, draping, catheterization, vital signs, and cardiopulmonary

resuscitation. [Cognitive- Knowledge and application. Psychomotor – Utilizing imitation, manipulation following oral or written directions and finally precision (independent performance)].

11. Identifies, manipulates and manages instruments (classifications), sutures, needles, catheters, drains, surgical packing and dressings, and other types of specialty supplies and equipment with precision. [Cognitive – knowledge, application. Psychomotor -Utilizing imitation, manipulation following oral or written directions, and finally precision (independent performance)].
12. Demonstrates ability to progress from the ability to imitate basic scrub skills in the lab setting, manipulate case setup according to oral or written instructions.
 - A. The total number of cases a student must complete is 120.
 - B. Students are required to complete 30 cases in General Surgery; 20 which must be in the First Scrub Role. The remaining 10 cases may be performed in either the First or Second Scrub Role.
 - C. Students are required to complete 90 cases in various surgical specialties, excluding General Surgery; 60 must be performed in the First Scrub Role. The additional 30 cases may be performed in either the First or Second Scrub role.
 - i. 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 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.
 - ii. The remaining 30 surgical specialty cases may be performed in any surgical specialty either in the First or Second Scrub Role.
 - D. The surgical Technology program is required to verify through the surgical rotation documentation, a students' progression in First and Second Scrubbing surgical procedures of increased complexity as he/she moves towards entry-level graduate abilities.
 - E. 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 towards maximum number of Second Scrub Role cases.
 - i. Diagnostic endoscopy cases must be documented in the "Diagnostic Endoscopy", rather than by specialty.
 - ii. Vaginal delivery cases must be documented in the category of "Labor & Delivery" rather in the OB/GYN specialty.
 - F. Case experience in the Second Scrub Role is not mandatory.
 - G. Observation cases must be documented, but do not count towards the 120 required cases.
 - H. Counting Cases
 - i. Cases will be counted and documented according to surgical specialty (exception being diagnostic endoscopic cases) [Psychomotor – Utilizing imitation, manipulation following oral or written directions, and finally precision (independent performance) and articulation (ability to perform within a reasonable time frame and according to procedure). Note: (Cognitive and Affective aspects are integral aspects of the overall performance.)]
13. Demonstrate articulation (ability to perform procedure with competency) 90 cases in the First Scrub Role and 30 cases in the Second Scrub Role prior to graduation. Psychomotor – Utilizing imitation, manipulation following oral or written directions, and finally precision (independent performance) and articulation (ability to perform within a reasonable time frame and according to procedure). Note: (Cognitive and Affective aspects are integral to the overall performance).

Course Outcomes

CLO #	Course Outcomes	Unit Outcomes/ Competencies	ACTS	Program Outcomes	Critical Thinking	Communication	Responsibility	Assessment
CLO 1	Identifies and selects appropriate equipment for assigned procedure setup. Organizes a comprehensive pre-case supply and equipment check including orthopedic equipment, dermatomes, tourniquets, suction units, endoscopes, microscopes, cryotherapy units, electrosurgical units, irrigation/aspiration units, laser equipment, monitors, and emergency	1,2,3		7	CT1			Practicum III (SURG 1305)

	equipment. [Cognitive–Knowledge. Psychomotor–Utilizing imitation, manipulation following oral or written directions, and finally precision independent performance.]						
CLO 2	Identifies and selects appropriate action when confronted with equipment-related malfunctions or emergencies. Identifies and selects appropriate response to surgical complications and emergencies. Demonstrates appropriate response in lab or clinical setting. [Cognitive-Knowledge, comprehension, and evaluation. Psychomotor – precision as appropriate in the lab setting; manipulation following verbal instructions in the clinical setting.]	4,6,7,8	8	CT1			Practicum III (SURG 1305))
CLO 3	Identifies procedural steps and demonstrates performance (independent) of patient care procedures correctly and safely such as skin preparation, positioning, draping, catheterization, vital signs, and cardiopulmonary resuscitation. [Cognitive- Knowledge and application. Psychomotor – Utilizing imitation, manipulation following oral or written directions and finally precision (independent performance).]	1-8	10		C1		Practicum III (SURG 1305)
CLO 4	Identifies, manipulates and manages instruments (classifications), sutures, needles, catheters, drains, surgical packing and dressings, and other types of specialty supplies and equipment with precision. [Cognitive – knowledge, application. Psychomotor -Utilizing imitation, manipulation following oral or written directions, and finally precision (independent performance).]	1-8	11	CT1			Practicum III (SURG 1305)
CLO 5	Demonstrates ability to progress from the ability to imitate basic scrub skills in the lab setting, manipulate case setup according to oral or written instructions. [Psychomotor – Utilizing imitation, manipulation following oral or written directions, and finally precision (independent performance) and articulation (ability to perform within a reasonable time frame and according to procedure). Note: (Cognitive and Affective aspects are integral aspects of the overall performance.)]	1-8	12			R5	Practicum III (SURG 1305)
CLO 6	Demonstrate articulation (ability to perform procedure with competency) 90 cases in the First Scrub Role and 30 cases in the Second Scrub Role prior to graduation. Psychomotor – Utilizing imitation, manipulation following oral or written directions, and finally precision (independent performance) and articulation (ability to perform within a reasonable time frame and according to procedure). Note: (Cognitive and Affective aspects are integral to the overall performance).	1-8	13			R5	Practicum III (SURG 1305)

Unit Outcomes/ Competencies

Upon completion of this course, the student with at least 78% accuracy should through clinical performance:

1. Demonstrate advanced use of OR furniture/equipment
2. Demonstrate advanced level of competence in location of equipment, instruments, and supplies
3. Work independently in the Sterile Processing Unit and perform preparation for sterilization of instruments, supplies and equipment
4. Work independently under supervision with case preparation:
 - A. Preoperatively

- B. Intraoperatively
 - C. Postoperatively
5. Scrub on multiple operative procedures from Level 1, 2, and 3 Core Procedures List and Specialty List.
 6. Complete **2 Group Case Study** reports on assigned surgical procedures. Student will find guidelines for these assignments under Surgical Technology Practicum III's assignment tab on BlackBoard. These 2 reports are the major clinical written assignments for this course and will be calculated as a percentage of the overall Practicum III grade.
 7. Complete 8 Weekly BlackBoard quizzes containing 20 randomly selected multiple choice questions as well as a final 110 randomly selected multiple choice BlackBoard quiz.
 8. Demonstrates ability to progress from the ability to imitate basic scrub skills in the lab setting, manipulate case setup according to oral or written instructions.
 - A. The total number of cases a student must complete is 120.
 - B. Students are required to complete 30 cases in General Surgery; 20 which must be in the First Scrub Role. The remaining 10 cases may be performed in either the First or Second Scrub Role.
 - C. Students are required to complete 90 cases in various surgical specialties, excluding General Surgery; 60 must be performed in the First Scrub Role. The additional 30 cases may be performed in either the First or Second Scrub role.
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 - ii. The remaining 30 surgical specialty cases may be performed in any surgical specialty either in the First or Second Scrub Role.
 - D. The surgical Technology program is required to verify through the surgical rotation documentation, a students' progression in First and Second Scrubbing surgical procedures of increased complexity as he/she moves towards entry-level graduate abilities.
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 - F. Case experience in the Second Scrub Role is not mandatory.
 - G. Observation cases must be documented, but do not count towards the 120 required cases.
 - H. Counting Cases
 - i. Cases will be counted and documented according to surgical specialty (exception being diagnostic endoscopic cases)

Assessment Description(s)

Student will be evaluated through case studies, quizzes, exams, weekly evaluations and instructor evaluations. Student will be evaluated in the clinical setting based on skills performance.

Materials and Technological Requirements

Surgical Technology: Principles and Practice; Fuller; 6th edition; Elsevier

Surgical Technology for the Surgical Technologist; AST; 4th edition; Thomson-Delmar

Surgical Technology for the Surgical Technologist; Study Guide and Lab Manual to Accompany AST; 4th edition; Thomson-Delmar

Differentiating Surgical Equipment and Supplies; 5th edition; F.A. Davis

Surgical Instrumentation; Delmar

Surgical Instrumentation; Workbook to Accompany; Delmar

Flashcards for Differentiating Surgical Instruments; Colleen J. Rutherford, F.A. Davis Company (optional).

Davis's Drug Guide For Nurses; 13th edition; F.A. Davis Company (optional)

Mosby's Dictionary of Medicine, Nursing & Health Professions; Mosby; 9th edition; Elsevier (optional)

Class Attendance Policy

Students are expected to attend all classes in which they are enrolled. If a student is absent from a class session, it is the student's responsibility to make arrangements to complete or make up any work missed. No make-up work for missed classes will be allowed without the approval of the instructor. Students who enroll late must assume all responsibility for work missed. Classes not attended as a result of late enrollment may be counted toward excessive

absences. Students not attending the entire class period may be counted absent for that period. An instructor may drop students with a grade of "WE" if students have been absent for an excessive number of days. Warning letters will be sent to the students advising them of the consequences of nonattendance and urging them to contact their instructors immediately. Excessive absences are defined as follows:

Regular Semester

Courses which meet once a week	2 absences
Courses that meet twice per week	3 absences
Courses that meet four times per week	5 absences

Summer Session

Courses that meet four times per week in a five week session	3 absences
Courses which meet two evenings per week in a 10 week session	3 absences

Students enrolled in special programs or individualized instruction should contact their program director/instructor regarding specific attendance requirements for the program/course. Some of the selective-admission, health-science programs have specific criteria regarding attendance. Students are encouraged to refer to program policies in these matters.

Jury Duty/Military/Official School Function

Scheduled absences are those that occur due to college-related activities or as a result of summons to jury duty or military duty. Classes missed as a result of scheduled absences will not be counted as excessive absences if the instructor is notified and provided documentation prior to the absence(s). Make-up work for scheduled absences will be at the discretion of the instructor.

In all instances, documentation must be provided to the instructor within 24 hours of receipt. Documentation should come from an appropriate party on letterhead or other official stationery with a signature and contact information. Documentation should list the corresponding dates of the leave.

Medical leave

For medical-related absences, documentation must include written notice from the treating medical professional documenting time needed off related to medical reasons and time student may resume classes. The medical reason does not need to be listed on the documentation; the documentation must include only that there is a medical reason, the amount of time the student needs to be absent, and the time the student should be able to return to classes. Students who elect to work at home while on excused leave must meet with their instructors to make arrangements to do so. Working on coursework while on medical leave is not a requirement but can be requested by students. If students request that they be allowed to work at home while on an excused leave, the instructor will make every reasonable effort to ensure that the student is able to do so.

For students who have a medical condition necessitating time off or accommodation:

- 1) They may work at home on assignments if they choose to if on medical leave approved by a medical professional
- 2) Receive appropriate accommodations related to coursework (i.e., excused from labs with potentially harmful chemicals, have a larger desk, etc.)
- 3) Resume their studies where they left off once they return to classes
- 4) Be allowed to make up any missed work related to medical leave
- 5) Receive incompletes on their transcripts until coursework is completed, according to the incomplete grade contract.
- 6) Be given a reasonable time frame in which to complete missed coursework

Academic Honesty Policy

Students enrolled at South Arkansas Community College are expected at all times to uphold standards of integrity. Students are expected to perform honestly and to work in every way possible to eliminate academic dishonesty. Academic dishonesty includes cheating and plagiarism, which are defined as follows:

- Cheating is an attempt to deceive the instructor in his/her effort to evaluate fairly an academic exercise. Cheating includes copying another student's homework, class work, or required project (in whole or in part) and/or presenting another's work as the student's own. Cheating also includes giving, receiving, offering, and/or soliciting information on a quiz, test, or examination.
- Plagiarism is the copying of any published work such as books, magazines, audiovisual programs, electronic media, and films or copying the theme or manuscript of another student. It is plagiarism when one uses direct quotations without proper credit or when one uses the ideas of another without giving proper credit. When three or more consecutive words are borrowed, the borrowing should be recognized by the use of quotation marks and proper parenthetical and bibliographic notations.

If, upon investigation, the instructor determines that the student is guilty of cheating or plagiarism, the following penalties will apply:

- The student will receive a penalty of no less than a zero on the work in question.
- The instructor will submit a written report of the incident to the Vice President for Learning
- The Vice President for Learning will determine whether further disciplinary action will be taken.
- All decisions may be appealed for review through the college's Academic Appeals procedure.

Equal Opportunity-Affirmative Action Statement

South Arkansas Community College does not discriminate on the basis of age, race, color, creed, gender, religion, marital status, veteran's status, national origin, disability, or sexual orientation in making decisions regarding employment, student admission, or other functions, operations, or activities.

Library Services

Library Homepage: <http://southark.libguides.com/homepage> Library Contact: LibraryStaff@southark.edu or 870.864.7115

Procedures to Accommodate Students with Disabilities:

If you need reasonable accommodations because of a disability, please report this to the Vice President of Student Services with proper documentation. VPSS Contact: 870.875.7262

The Early Alert System

In an effort to ensure student retention and success, South Arkansas Community College employs an Early Alert System to identify and support at-risk students as soon as possible in a given semester. The intent of Early Alert is to provide this assistance while there is still time to address behaviors or issues that have the potential of preventing students from completing their courses and degree plans. Students referred through the Early Alert System will be required to work on a corrective action plan with their student advising coach and to include attendance accountability and mandatory academic tutoring either in the academic division or in the Testing and Learning Center (TLC).

Once the Student Advising Coach has met with the referred student, and again when the student has met the prescribed corrective actions, the coach will update the Early Alert System so that the instructor is kept informed of the progress in resolving issues.

Behavioral Review Team

At South Arkansas Community College (SouthArk), we are committed to proactive leadership in student wellbeing and campus safety. By focusing on prevention and early intervention with campus situations that involve any person experiencing distress or engaging in harmful or disruptive behaviors, the BRT will serve as the coordinating hub of existing resources to develop intervention and support strategies and offer case management. Students, faculty, staff, and campus guests are encouraged to report any person on campus who is a concern. BRT Contact: 870.875.7262 BRT@southark.edu

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