

# CABARRUS COLLEGE *of* HEALTH SCIENCES

## Surgical Technology



## 2025-2026 Program Handbook

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## GREETINGS FROM THE PROGRAM CHAIR

Welcome to the Surgical Technology Program at Cabarrus College of Health Sciences! You are about to begin an exciting journey filled with new experiences, hands-on learning, and meaningful challenges that will prepare you for a rewarding career in the operating room.

Surgical technologists play a vital role on the surgical team, working alongside surgeons, registered nurses, and anesthesiologists to ensure patients receive the highest quality care during surgical procedures. Our program is designed to provide you with comprehensive training and real-world experience to help you develop the skills and confidence needed to thrive in this critical role.

At Cabarrus College, we are committed to your success. The Surgical Technology Program continually evaluates and enhances our curriculum to align with both student needs and the evolving demands of the healthcare system. It is your responsibility to meet the program's objectives and complete all requirements in preparation for the national certification exam administered by the National Board of Surgical Technology and Surgical Assisting (NBSTSA).

We are proud that our program is accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP), based on the recommendation of the Accreditation Review Council on Education in Surgical Technology and Surgical Assisting (ARC/STSA). This accreditation ensures that our program meets the highest standards of quality and rigor in surgical technology education.

To support your success, the Surgical Technology Student Handbook has been created as a valuable reference for program-specific policies and procedures. Please review it carefully and keep it accessible throughout your time in the program. In addition, you are expected to adhere to the policies outlined in the Cabarrus College of Health Sciences Catalog and Student Handbook.

On behalf of the entire Surgical Technology faculty, I want to express how excited we are to have you with us. We are confident in your potential and look forward to supporting you every step of the way. Thank you for choosing Cabarrus College—we are honored to be part of your journey toward becoming a surgical technologist.

Sincerely,  
Michelle

**Michelle Payne MAEd, CST, FAST**

*Associate Professor*

*School of Surgical Technology, Program Chair*

*Cabarrus Health Sciences Institute, Chair*

*National Board of Surgical Technology and Surgical Assisting, President*

## **Program Mission**

The Mission of the Surgical Technology program of Cabarrus College is to prepare competent entry-level surgical technologists who are competent in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains to enter the profession.

## **Program Goals**

- Provide opportunities for application of theoretical concepts and cognitive skills as well as for the development of optimal affective and psychomotor abilities needed to meet current industry standards.
- Meet or exceed the criteria set forth in the current Standards and Guidelines for successful completion of the Certification Test administered by the National Board of Surgical Technology and Surgical Assisting
- Provide clinical experience that builds upon classroom instruction in the basic sciences, patient care, aseptic techniques and surgical procedures to prepare students to become an integral part of a surgical team.
- Prepare students for successful placement into entry level positions in the field of surgical technology
- Integrate the principles of professional patient centered care into the perioperative practice.

## **Program Student Learning Outcomes**

- Demonstrate the application of anatomy and physiology concepts to meet current industry standards in the surgical setting.
- Demonstrate aseptic technique and a sound surgical conscience when performing surgical procedures in the health care setting.
- Apply knowledge of AST Core Curriculum by completing and passing the CST examination
- Apply knowledge gained in the clinical experience and build upon classroom instruction to become an integral part of the surgical team
- Display entry level competencies while functioning in the field of surgical technology.
- Analyze the communication process and its relationship to patient centered care
- Facilitate optimal surgical patient outcome by communicating effectively with a multidisciplinary team

## **Certification Eligibility**

Graduates of the Associate of Science in Surgical Technology program at Cabarrus College of Health Sciences are eligible to take the Certified Surgical Technologist (CST) examination administered by the National Board of Surgical Technology and Surgical Assisting (NBSTSA) upon successful completion of all program requirements.

This two-year program includes comprehensive instruction in surgical core courses and general education, designed to prepare students for entry-level employment as surgical technologists and to meet the eligibility requirements for national certification.

## **Accreditation Information**

The Surgical Technology program is accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) upon the recommendation of the Accreditation Review Council on Education in Surgical Technology and Surgical Assisting (ARC/STSA).

Commission on Accreditation of Allied Health Education Programs

25400 U.S. Highway 19 North, Suite 158 Clearwater, FL 33763 Phone: 727-210-2350; Fax: 727-210-2354

The Accreditation Review Council on Education in Surgical Technology and Surgical Assisting

19751 E. Mainstreet, Suite 339, Parker, CO 80138

Phone: 303-694-9262

## Associate Degree Curriculum

### Fall

SRG 111 Introduction to Surgery 4/0/0 = 4 \*\*  
SRG 115 Fundamental Perioperative Techniques 3/10/2 = 7 \*\*  
BIO 100 Medical Terminology 1/0/0 = 1\*\*  
BIO 210 Human Anatomy & Physiology I 3/3/0 = 4 \*\*

### Spring

ENG 101 English Composition I 3/0/0 = 3  
BIO 220 Human Anatomy & Physiology II 3/3/0 = 4 \*\*  
SRG 121 Surgical Procedures 4/0/0 = 4 \*\*  
SRG 125 Surgical Clinical I 0/0/18 = 6 \*\*

### Summer

SRG 131 Surgical Procedures 3/0/0 = 3 \*\*  
SRG 135 Surgical Clinical II 0/0/24 = 3 \*\*

### Fall

SOC 101 Introduction to Sociology 3/0/0 = 3  
BIO 190 Principles of Microbiology 3/3/0 = 4 \*\*  
PSY 101 General Psychology 3/0/3  
MAT Elective 3/0/0 = 3  
SRG 215 Advanced Clinical Practice 0/0/9 = 3 \*\*

### Spring

COM 201 Communication in Business and Professional Life 3/0/0 = 3  
HUM Elective 3/0/0 = 3  
SRG 221 Surgical Capstone 2/0/0 = 2 \*\*  
SRG 225 Specialty Clinical Practice 0/0/12 = 4 \*\*  
SRG 231 Professional Preparation 1/0/0 = 1 \*\*

\*0/0/0 = class hours per week/ lab hours per week/ Clinical Hours = total credit hours awarded.

68 total credits = 18 Gen Eds / 37 SRG major credits / 13 Science Major Credits

\*\* Major Course

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### General Education Electives

Humanities/Fine Arts	Math
ENG 210 World Literature	MAT 143 Quantitative Literacy
	MAT 171 Pre-calculus Algebra
HUM 220 Music Appreciation	MAT 201 Introductory Statistics
REL 210 World Religions	

## SURGICAL ROTATION CASE REQUIREMENT

Surgical Specialty	Total # of Cases Required	Min # of First Scrub Cases Required	MAX # of Second Scrub Cases That Can be Applied Towards 120 Cases
General surgery	30	20	10
Surgical Specialties: <ul style="list-style-type: none"> <li>• Cardiothoracic</li> <li>• Genitourinary</li> <li>• Neurologic</li> <li>• Ob/gyn</li> <li>• Orthopedic</li> <li>• ENT</li> <li>• Ophthalmologic</li> <li>• Oral Maxillofacial</li> <li>• Peripheral vascular</li> <li>• Plastics and reconstructive</li> <li>• Procurement and transplant</li> </ul>	90	60	30
Diagnostic Endoscopy: <ul style="list-style-type: none"> <li>• Bronchoscopy</li> <li>• Colonoscopy</li> <li>• Cystoscopy</li> <li>• EGD / ERCP</li> <li>• Esophagoscopy</li> <li>• Laryngoscopy</li> <li>• Ureteroscopy</li> </ul>			10 diagnostic endoscopy cases may be applied <b>only</b> toward the Second Scrub Role cases.
Labor & Delivery			5 vaginal delivery cases may be applied <b>only</b> toward the Second Scrub Role cases.
<b>Totals</b>	<b>120</b>	<b>80</b>	<b>40</b>

**Content:****I. Role definitions****A. First Scrub Role (FS)**

1. To document a case in the FS role, the student shall perform the following duties during any given surgical procedure with proficiency:

- a) Verify supplies and equipment
- b) Set up the sterile field
  - 1) Instruments
  - 2) Medication
  - 3) Supplies
- c) Perform required operative counts
  - 1) AST guidelines
  - 2) Facility policy
- d) Pass instruments and supplies
  - 1) Anticipate needs
- e) Maintain sterile technique
  - 1) Recognize sterility breaks
  - 2) Correct sterility breaks
  - 3) Document as needed

**B. Second Scrub Role (SS)**

1. The SS role is defined as a student who has not met all criteria for the FS role but actively participates in the surgical procedure in its entirety by completing any of the following:

- a) Assistance with diagnostic endoscopy
- b) Assistance with vaginal delivery
- c) Cutting suture
- d) Providing camera assistance
- e) Retracting
- f) Sponging
- g) Suctioning

**C. Observation Role (O)**

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

**II. Case requirements – A student must complete a minimum of 120 cases as delineated below:****A. General surgery**

- 1. A student must complete a minimum of 30 cases in General Surgery.
  - a) 20 of these cases must be performed in the FS role.
  - b) The remaining 10 cases may be performed in either the FS or SS role.

**B. Specialty surgery**

- 1. A student must complete a minimum of 90 cases in various surgical specialties, excluding General Surgery.
  - a) A minimum of 60 cases must be performed in the FS role and distributed amongst a minimum of four surgical specialties.
    - 1) A minimum of ten cases in four different specialties must be completed in the FS role (40 cases total).
    - 2) The additional 20 cases in the FS role may be distributed amongst any one surgical specialty or multiple surgical specialties.
  - b) The remaining 30 cases may be performed in any surgical specialty in either the FS or SS role.
- 2. Surgical specialties (excluding General Surgery)
  - a) Cardiothoracic

- b) Genitourinary
- c) Neurologic
- d) Obstetric and gynecologic
- e) Orthopedic
- f) Otorhinolaryngologic
- g) Ophthalmologic
- h) Oral Maxillofacial
- i) Peripheral vascular
- j) Plastics and reconstructive
- k) Procurement and transplant

### III. Counting cases

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

1. One pathology is counted as one procedure.

*Example: A patient requires a breast biopsy followed by mastectomy. It is one pathology, breast cancer, and the specialty is general surgery; therefore, it is counted and documented as one procedure and one case.*

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

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

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

3. Diagnostic vs. operative endoscopy cases

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

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

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

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

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

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



## TECHNICAL STANDARDS FOR SURGICAL TECHNOLOGY

Technical Standards	Definition	Examples
Critical Thinking	Abilities sufficient to solve problems	<ul style="list-style-type: none"> <li>• Anticipation of operative sequence</li> <li>• Makes instant, sound clinical decisions</li> <li>• Responds appropriately to emergent situations</li> </ul>
Interpersonal Interactions	Ability to interact with individuals and groups from various backgrounds	Provides consistent perioperative care without ANY form of discrimination
Communication	Ability to interact with others both verbally and in written form	<ul style="list-style-type: none"> <li>• Clearly articulates with all perioperative team members</li> <li>• Comprehends perioperative team directives</li> <li>• Accurately records activities both on paper and in the clinical tracking management platform</li> </ul>
Coping	Ability to manage challenging situations	<ul style="list-style-type: none"> <li>• Maintains emotional composure despite challenges</li> <li>• Performs in the face of difficult circumstances</li> </ul>
Mobility and Motor Skills	Ability to move without restriction in one's environment	<ul style="list-style-type: none"> <li>• Stands 8-12 hours</li> <li>• Navigates confined spaces with ease</li> <li>• Possesses a heightened sense of physical awareness</li> <li>• Lifts and transfers a minimum of 50 pounds</li> <li>• Prepares and assembles sharps, power tools, and complex instrument systems</li> </ul>
Auditory	Possess auditory ability to monitor and assess the perioperative needs of the patient	<ul style="list-style-type: none"> <li>• Hears and responds appropriately to low-pitched verbal directives</li> </ul>
Visual	Possess visual ability to monitor and assess the perioperative needs of the patient	<ul style="list-style-type: none"> <li>• Differentiates between suture strands smaller than an eyelash</li> <li>• Distinguishes increments on medication syringes</li> <li>• Visualizes surgeon hand signals</li> </ul>
Tactile	Possess ability to physically monitor and assess perioperative needs of the patient	<ul style="list-style-type: none"> <li>• Detects a breach in surgical gloves and/or drapes</li> <li>• Handles sharps, power tools and complex instrument systems without injuring self or others</li> </ul>
Environmental	Possess ability to tolerate environmental stressors	<ul style="list-style-type: none"> <li>• Endures hot and/or cold temperatures without a physical response</li> <li>• Willingness to practice safety measures as taught to avoid harmful substance exposure</li> </ul>
Emotional/Behavioral	Possess self-control and a stable temperament	<ul style="list-style-type: none"> <li>• Assumes responsibility for own actions without becoming defensive</li> <li>• Does not react to provocative situations and/or personalities</li> </ul>

*\* Students are expected to meet technical standards reflective of the surgical environment to complete the surgical technology program. Proficient demonstration of these standards is required throughout a student's tenure in this program. Reasonable accommodations will be made for qualified individuals with a documented disability, unless doing so would alter critical foundational training or pose a threat to the safety of the student and/or surgical patient under their care.*

## OCCUPATIONAL HAZARDS OF SURGICAL TECHNOLOGY

Occupational Hazards	Definition	Examples
Biological	Exposure to infectious body fluids and tissues	<ul style="list-style-type: none"> <li>• Handling of bodily fluids and tissues for analysis</li> <li>• Aerosolized pathogen exposure if mask and/or eye protection removed</li> </ul>
Hazardous Chemicals	Exposure to hazardous and nonhazardous chemicals	<ul style="list-style-type: none"> <li>• Handling of chemicals (formaldehyde) for specimen analysis</li> <li>• Handling of chemicals (bone cement, etc.) required for patient care</li> </ul>
Noxious Gases and Fumes	Exposure to noxious gases and fumes	<ul style="list-style-type: none"> <li>• Aerosolized noxious gas, electrocautery plume and laser plume exposure</li> </ul>
Electrical	Management and handling of electrical equipment used during surgical procedures	<ul style="list-style-type: none"> <li>• Inspection of equipment prior to patient use</li> <li>• Safety checks prior to patient use</li> <li>• Application of safety measures (ex. lead apron)</li> </ul>
Environmental	Standing, lifting, moving, positioning, transferring, and systems assembly/handling	<ul style="list-style-type: none"> <li>• Prolonged standing (over 8 hours) without breaks</li> <li>• Lifting a minimum of 50 pounds</li> <li>• Preparation of complex instrument systems</li> <li>• Positioning of surgical furniture and equipment</li> </ul>
Physical	Exposure to bright lights, loud noises, and temperature fluctuations	<ul style="list-style-type: none"> <li>• Work conducted under surgical lighting</li> <li>• Noise from surgical equipment</li> <li>• Endurance of hot/cold temperatures without physical response</li> </ul>
Manual Tasks/Ergonomics	Repetitive manual tasks and navigation in confined space	<ul style="list-style-type: none"> <li>• Persistent handwashing</li> <li>• Transitioning from nonsterile to sterile</li> <li>• Preparation and handling of surgical equipment/instrumentation/supplies</li> <li>• Navigation of confined spaces with ease</li> <li>• Heightened awareness of surroundings</li> </ul>
Auditory	Reception of low-pitched verbal directives requiring an immediate response	<ul style="list-style-type: none"> <li>• Detection of and reaction to, verbal directives from surgical team members</li> <li>• Detection of and reaction to, equipment alarms</li> </ul>
Visual	Continuous management of patient/surgical team needs and policing of environmental asepsis (sterility) and sharps safety	<ul style="list-style-type: none"> <li>• Immediate detection of environmental or surgical team member breaches in asepsis</li> <li>• Immediate handling of breaches in sterility</li> <li>• Differentiates between “hair-gauged” suture strands</li> <li>• Distinguishes increments on medication syringes</li> <li>• Visualization of surgeon hand signals</li> </ul>
Tactile	Sensing of physical touch, texture and temperature variations	<ul style="list-style-type: none"> <li>• Detection of sharps puncture(s)</li> <li>• Detection of slippery verses sticky</li> <li>• Detection of hot verses cold</li> </ul>
People	Collaboration with a variety of personalities and care of a diverse patient population	<ul style="list-style-type: none"> <li>• Maintenance of a stable temperament</li> <li>• Nonreactive to provocative and challenging situations</li> <li>• Provision of care to a diverse patient population</li> </ul>

*\*Students are trained in safety measures aimed at prevention of injury to oneself and/or others. Application of this training on the student's part is critical in the prevention of inadvertent injury.*

## Academic and Clinical Policies

### Academic Minors:

An academic minor is a series of courses outside of one's declared major curriculum which complements the student's major. The minor typically is a subset of course work from one or more disciplines, with all credits earned at an upper course level. The credit hours required for the minor depend on the degree level as indicated in the table below. At least 50% of the credit hours for the minor must be taken at Cabarrus College.

Degree Level	Minimum Credit Hours to Earn a Minor	Minimum Number of Courses to Earn a Minor	Upper Level of Courses to Constitute a Minor
Bachelor's Degree	15	5	300 level or above
Associate's Degree	12	4	200 level or above

A student must declare the minor at least one semester prior to completing all major requirements. A student initiates the request for a minor by completing the Declaration of Academic Minor form and meeting with their advisor and the Office of Financial Aid. The student submits the completed form to the Office of Student Records and Information Management before enrolling in courses for the minor. Progression within the minor follows the same requirements as for the major (refer to Academic Progression section). Students who wish to change their minor must contact the Associate Dean, Student Affairs and Enrollment Management for approval. Completion of the minor is recorded on the student's transcript.

### Academic Progression:

All undergraduate students must:

- Register and enroll in course work every fall and spring semester (and summer sessions for some degree programs) until program completion.
- Meet and maintain current health and enrollment requirements as specified by the College and clinical agencies.
- Maintain a current, unrestricted license or appropriate certification if enrolled in a program requiring such license or certification.
- Satisfactorily complete all prerequisite courses before enrolling in subsequent courses.
- Earn at least a score of 80 as a final grade in each clinical program prefixed course.
  - A clinical program prefixed course is defined as a course with a prefix specific to a clinical program (ex: NSG, OTA, MED, SRG, CPM, RSP, CAT, MRI, and MIS).
- Earn a minimum score of 70 as a final grade in each of the courses which do not have a clinical program prefix in order to progress. This includes courses with the following prefixes: BIO, CHW, ENG, HSL, PSY, SOC, etc.
- Maintain a cumulative grade point average of "C" (2.0) or higher in diploma, associate degree, and baccalaureate programs, except in Interdisciplinary Health Studies wherein a student must maintain a cumulative grade point average of "B" (3.0) or higher if intending to progress into the Master's in Occupational Therapy program.
- Complete Level II Fieldwork within one year of the required academic coursework if enrolled in the Occupational Therapy Assistant program.

## **College Wide Grading Scale:** *(Standard across all courses)*

A = 93-100	C = 73-76
A- = 90-92	C- = 70-72
B+ = 87-89	D+ = 67-69
B = 83-86	D = 63-66
B- = 80-82	D- = 60-62
C+ = 77-79	F = less than 60

## **Attendance Requirements:**

The Cabarrus College faculty expect students to consistently attend and participate in all academic courses in which they are registered. Attendance refers to all required on-campus classes, laboratory sessions, clinical/fieldwork and related experiences, as well as active participation in distance education activities as outlined in the course syllabi. Specific course attendance requirements are left to the discretion of the instructor of record including determining the need for make-up days due to personal illness or other extenuating circumstances. Absences interfere with the student receiving the full benefit of the educational experience and therefore should only occur in emergency situations such as personal illness, family illness, or death of a close family member.

Clinical absences include time missed in lab and clinical areas as well as seminars, clinical conferences, skills practice/checkoffs or any other required clinical activities. If a student misses more than the allotted number of hours of scheduled lab hours or clinical experiences, the student will receive a failing clinical grade and will not be able to progress to the next level.

Students are expected to attend each clinical and lab for the full scheduled time. If an emergency occurs, the student must obtain a written excuse and provide it to the instructor on the following clinical/lab day. Excused absences will allow the student to receive credit for completed make-up assignments. Make up assignments will be provided at the discretion of the instructor. Any absences without a written excuse will result in a zero for all correlating assignments and missing hours.

In the event of personal illness, family illness or emergency, students are expected to:

- Contact the faculty and the clinical site at least 1 hour prior to the start of the experience.
- Provide Doctors Work/School Release Form upon return from absence.
- Obtain make up assignments upon return from the absence

Complete make-up assignment or time promptly.

In order to meet academic attendance expectations, all students must have access to the internet, a telephone, Cabarrus College email, the Learning Management System email, and as applicable, transportation services. All students are expected to keep their contact information up to date in Sonis and check their College email account, personal phone, and the College website for announcements concerning College closings, delays or rescheduling due to inclement weather, faculty absences, and facility closing or other emergencies impacting student attendance.

Students who stop attending a course at any time without officially dropping the course will be considered enrolled. The student will receive the grade earned in the course and will be responsible for full tuition payment.

## **Course Withdrawal:**

Students are expected to actively engage in their courses by attending class, lab, or clinical meetings and by completing all assigned learning activities (assignments, quizzes, papers, etc.). Failure to routinely complete assignments or attend class/lab/clinical per syllabus requirements, may place students in jeopardy of being administratively withdrawn. Although attendance taking is not required by the College, course faculty maintain the right to administratively withdraw a student from their respective course(s) for failure to comply with academic requirements including, but not limited to:

- Failure to attend classes for a consecutive time period (for instance, missing 12.5% of the course which equates to 6 consecutive hours in a 3-credit hour course).
- Missing an excessive amount of scheduled class time (for instance, 25% of the course which equates to missing a total of 12 non-consecutive hours in a 3-credit hour course).
- Failure to maintain an online presence as expected for the course. Students administratively withdrawn after the 80% completion point will be assigned a failing grade. The official determination date and the official withdrawal date is the date the College initiates the withdrawal process.

## **Health and Pregnancy:**

The Surgical Technology Program has determined the necessity for students to enter the Surgical Technology program in a healthy state. All students must be in compliance with health policies as required by Cabarrus College of Health Sciences. It is the student's responsibility to provide the College with evidence of the following:

a) consent for background check, b) health insurance coverage, c) current, verifiable immunizations (some required annually), d) completed physical and emotional health assessment form, e) fingerprint clearance, f) negative 12-panel drug screen, and g) current CPR certification.

Pregnancy is not viewed as a disability or hindrance to completing the Surgical Technology program. The faculty, however, recognizes that pregnancy requires certain considerations pertaining to the general welfare of the expectant mother and the unborn child. In order to promote the well being of the pregnant student and to assist her, the faculty has established the following guidelines for the pregnant student:

- Notify the Program Chair as soon as determination of pregnancy is made.
- Notify the Program Chair of any limitation and/or complication that the pregnancy may be imposing. A statement from the obstetrician must be submitted giving permission to continue the course of study in the program and specify any limitations.
- Comply with all guidelines specified by the faculty concerning radiation and nitrous oxide exposure.

## **Volunteer Hours:**

Students must complete 15 hours of volunteer/community service to progress in the program. A list of appropriate agencies was provided in orientation to the college. Once you have completed the required hours and recorded the hours in the Pro Bono Report in Sonis, you may submit the community service form to the Course Coordinator. Hours must be completed, recorded in Sonis in the Pro Bono Report and the form submitted to the instructor by Monday of **week 15** in the semester.

The following table provides a guide for the minimum number of hours for volunteer service-learning activities based on major programs.

PROGRAM	VOLUNTEER HOURS	REPORT DEADLINE
Associate degree programs	5 hours per Fall and Spring semesters	Monday of week 15

Approval of your volunteer community service agencies is not necessary since you will select an agency from the list of agencies that have agreed to work with Cabarrus College, however, you are responsible for communicating, in writing, your planned volunteer community service activity, prior to the experience, to your academic advisor. We encourage volunteer activities in your home community and church, however, activities at agencies not approved will not count towards volunteer community service hours at Cabarrus College.

### **Class Participation:**

You are expected to take an active part in all course activities. Class/Lab discussion and role-playing are an integral part of the learning experience. Reviewing course resources and materials before class/lab time is mandatory to ensure you are fully prepared for each session.

Students are encouraged to ask questions relevant to material presented. Students are encouraged to use other resources outside of those provided, including, but not limited to their classmates, tutoring, texts or the Internet, to further their understanding.

Students are expected to be alert and attentive during class. Extraneous conversations with other students during lecture, lab, or clinical, are disrespectful to the class as a whole and to the instructor. Participating in extraneous conversation will result in the student receiving a warning and eventually being asked to leave for failure to comply.

### **E-Mail Correspondence Statement:**

Email is a valuable communication tool for issues in this course associated with information and notifications (schedule changes, making appointments, notification of assignments, etc.). When there is a need to resolve differences regarding performance evaluation, grading, or other academic issues communication should be via a scheduled meeting between the faculty and student.

**As a general rule, the instructor will respond to student communications within 48 hours.**

### **Academic Integrity:**

Adherence to high principles of academic integrity is vital to the academic function of the College. All members of the College community bear a responsibility for upholding academic integrity standards which are based upon honesty. Any breach of academic honesty should be regarded as a serious offense. Each student has an obligation to know, understand, and act upon those standards and expectations, including reporting to College officials witnessed acts or knowledge of academic misconduct. Failing to report witnessed acts or knowledge of academic misconduct may be considered a violation of student academic integrity. All students, faculty, and staff are expected to help maintain academic integrity at the College by refusing to participate in, or tolerate, any dishonesty.

### **Academic Dishonesty:**

Academic dishonesty violates the College value of integrity designed to promote trust of our

graduates within the healthcare community and undermines the learning process. Violations include any actions which attempt to promote or enhance the academic standing of any student by dishonest means. This section describes various ways in which the principles of academic integrity can be violated, however neither the types of violations nor the lists of examples are exclusive.

**I. Plagiarism:** Plagiarism is the use of another person's words, ideas, or results without giving that person appropriate credit. To avoid plagiarism, every direct quotation must be identified by quotation marks or appropriate indentation and both direct quotation and paraphrasing must be cited properly according to the accepted format for the particular discipline or as required by the instructor in a course. Some common examples of plagiarism are:

- A. Copying word for word (i.e. quoting directly) from an oral, printed, or electronic source without proper attribution.
- B. Paraphrasing without proper attribution, i.e., presenting in one's own words another person's written words or ideas as if they were one's own.
- C. Submitting a purchased or downloaded term paper or other materials to satisfy a course requirement.
- D. Incorporating into one's work graphs, drawings, photographs, diagrams, tables, spreadsheets, computer programs, or other non-textual material from other sources without proper attribution of credit.

**II. Cheating:** Cheating is the use of inappropriate or prohibited materials, information, sources, or aids in any academic exercise. Cheating also includes submitting papers, research results and reports, analyses, etc. as one's own work when they were, in fact, prepared by others. Some common examples are:

- A. Receiving research, programming, data collection, or analytical assistance from others or working with another student on an assignment where such help is not permitted.
- B. Copying another student's work or answers on a quiz or examination.
- C. Using or possessing books, notes, calculators, cell phones, or other prohibited devices or materials during a quiz or examination.
- D. Submitting the same work or major portions thereof to satisfy the requirements of more than one course without permission from the instructors involved.
- E. Preprogramming a calculator or other electronic device to contain answers, formulas, or other unauthorized information for use during a quiz or examination.
- F. Acquiring a copy of an examination from an unauthorized source prior to the examination.
- G. Having a substitute take an examination in one's place.
- H. Submitting as one's own work a term paper or other assignment prepared by someone else.

**III. Fabrication:** Fabrication is the invention or falsification of sources, citations, data, or results, and recording or reporting them in any academic exercise. Some examples are:

- A. Citing a source that does not exist.
- B. Making up or falsifying evidence or data or other source materials.
- C. Falsifying or presenting fictional patient information as real to fulfill requirements for work assigned by individual faculty members or clinical preceptors.
- D. Falsifying research papers or reports by selectively omitting or altering data that do not support one's conclusions or claimed experimental precision.

**IV. Facilitation of Dishonesty:** Facilitation of dishonesty is knowingly or negligently allowing one's work to be used by other students without prior approval of the instructor or otherwise aiding others in committing violations of academic integrity. A student who intentionally facilitates a violation of academic integrity can be considered to be as culpable as the student who receives the impermissible assistance, even the facilitator does not benefit personally from the violation. Some examples are:

- A. Collaborating before a quiz or examination to develop methods of exchanging information.

- B. Knowingly allowing others to copy answers to work on a quiz or examination or assisting others to do so.
- C. Distributing an examination from an unauthorized source prior to the examination.
- D. Distributing or selling a term paper to other students.
- E. Taking an examination for another student.

**V. Academic Sabotage:** Academic sabotage is deliberately impeding the academic progress of others.

Some examples are:

- A. Intentionally destroying or obstructing another student's work.
- B. Stealing or defacing books, journals, or other library or College materials.
- C. Altering computer files that contain data, reports or assignments belonging to another student.
- D. Removing posted or reserve material or otherwise preventing other students' access to it.

**VI. Violation of Research or Professional Ethics:** Violations in this category include both violations of the code of ethics specific to a particular profession and violations of more generally applicable ethical requirements for the acquisition, analysis, and reporting of research data and the preparation and submission of scholarly work for publication. Some examples are:

- A. Violating a canon of the ethical or professional code of the profession for which a student is preparing.
- B. Using unethical or improper means of acquiring, analyzing, or reporting data in a senior thesis project, a master's or doctoral research project, grant-funded research, or research submitted for publication.
- C. Misuse of grant or institutional funds.
- D. Violating professional ethics in performing one's duties as a Teaching Assistant, Graduate Assistant, or Guided Student Study Leader.

**VII. Violations Involving Potentially Criminal Activity:** Violations in this category include theft, fraud, forgery, or distribution of ill-gotten materials committed as part of an act of academic dishonesty. Some examples are:

- A. Stealing an examination from a faculty member's or College office or from electronic files.
- B. Selling or distributing a stolen examination.
- C. Forging a change-of-grade form.
- D. Falsifying a College transcript.

**VIII. Sanctions:**

When a faculty member believes a student in their course has engaged in academic dishonesty, the faculty member will inform the student of the allegation with the goal of maintaining an environment that supports integrity and learning, keeping in mind the confidential nature of the matter. The faculty member will consult with their supervisor and/or administration to plan consequences for any violations. Sanctions will depend upon the level of violation. Examples of sanctions include yet are not limited to earning a 0 grade on the assignment, earning an F for the course, probation, suspension, and/or dismissal from the program and/or College. If a student does not agree with the allegation and or consequence, the faculty member will refer the student to the Academic Appeals Policy.

## **Patient Privacy (HIPPA)**

Students are expected at all times to protect patient information and are bound by the Health Insurance Portability & Accountability Act (HIPAA) of 1996. The HIPAA Privacy Rule was effective in April 2003. This act serves to regulate the use and disclosure of Protected Health Information (PHI)



What is PHI and how is it used?

- PHI is any information that can be used separately or in conjunction with other information to identify an individual.
- PHI may include but is not limited to:
  - o Name
  - o Date of birth
  - o Social security number
  - o Medical records number
  - o Admission and discharge dates
  - o Health plan beneficiary numbers
  - o Full facial photography or *comparable images*
  - o Any combination of information which may be used together to identify a patient
- PHI is used to identify patients in the healthcare setting and should only be accessed for the care, treatment, and billing of patient care. Healthcare worker, including students, should access no more information than they “need to know” in order to provide safe and competent care to assigned patients.
- Unattended PHI is a possible breach and must be reported.

ALL students are expected and required to safeguard ALL patient information in ALL settings, whether you are at the College, in clinical experiences, or home. And, simply leaving out the patient’s name does not guarantee that person’s privacy.

What are the consequences of violating HIPAA?

- Negative evaluation in the clinical component of a course
- Dismissal from the clinical program
- Dismissal from Cabarrus College of Health Sciences
- Fines up to \$50,000
- Up to one-year imprisonment

What about Social Media?

- Social media helps individuals stay connected with others and to depict experiences.
- Technology can be a benefit or a risk depending on how it is used.
- Information about patient care situations must NOT be discussed online. Just because a patient’s name, address, phone #, DOB, etc. is not used on a social network is no guarantee the individual cannot be identified by the information provided.
- Best practice is to let social media be about your social life.

### **Student ID Badge Statement:**

Identification (ID) badges must be worn above the waist with picture and name visible at all times while on campus and at clinical agencies by Cabarrus College of Health Sciences faculty, staff and students. The student ID badge is required for college and clinical site access/entry.

### **Disability Services Statement:**

Students with a physical or mental impairment (a disability for which you believe will require accommodations, assistance with coursework or testing) that substantially limits one or more major life activities as defined under the ADA/504, should contact the Coordinator, Advising and Student Success at 704-403-1616. Please note that students with disabilities must present current and complete documentation to be considered for receipt of accommodations.

### **Food and Drink in the Academic Areas:**

Beverages and food will be permitted in the classrooms. No food or beverages are permitted in the skills, computer, or science labs due to the hazards and nature of the activities in these settings. Spills must be cleaned immediately. Faculty members have the authority to revoke food and drinks in the classroom.

### **Electronic Devices:**

The use of electronic devices (e.g., cellular phones, smartwatches, tablets) during clinical and/or lab sessions is prohibited, as it disrupts the teaching and learning environment.

Additionally, cellular phones are not allowed in patient care areas due to potential interference with electronic monitoring equipment. However, students may use an electronic device in designated non-patient care areas for the sole purpose of documenting clinical cases in **Platinum Planner**. This must be done discreetly and in accordance with site-specific policies and faculty guidance.

In the event of an emergency, messages should be directed to the clinical site and/or the clinical instructor. Failure to comply with this policy may result in dismissal from the clinical site and an unexcused absence.

After-hours calls or text messages to Surgical Technology instructors are reserved **ONLY** for reporting absences or true emergencies.

## **Clinical Course Guidelines**

Prioritizing clinical documentation and necessary immunizations is essential upon entering the program. All mandated immunizations, essential documents, and CPR certification must be uploaded into EXXAT and My Clinical Exchange. Please note that failure to comply with these requirements may result in the student being unable to attend clinical sites. Additionally, please have your resume ready for submission during the first week of class.

### **Clinical Evaluations:**

Evaluations will be performed by clinical preceptors, faculty and the student. Faculty will meet with the student to discuss and/or review concerns that require attention as part of their evaluation process. The Clinical Preceptor Evaluation of Student Performance tool is provided each clinical day to the student's assigned preceptor for completion and case verification. These evaluations will also be utilized to identify strengths and weaknesses aimed at the development of strategies that promote strengthening areas of weakness and maintaining the areas of strength. **If the student falls below acceptable criteria for two consecutive weeks, the student will be placed on Clinical Probation** (see Probation Policy). Instructors maintain the right to ask preceptors to fill out evaluations as needed to verify what is being observed.

### **Preceptor Evaluations:**

Students will have the opportunity to evaluate their preceptors and assigned clinical facility. An evaluation must be completed at the end of *each clinical day*. Each student is required to submit an evaluation of the clinical preceptor with whom they spent the most time during that day.

### **Case Logs (Platinum Planner):**

Students are required to accurately document all clinical cases daily using Platinum Planner, the program's official electronic case tracking system. Case logs must be entered promptly at the end of each clinical day and submitted electronically for review and approval.

Each student is responsible for completing a minimum of 120 surgical cases, as defined by the AST 7th Edition Core Curriculum for Surgical Technology (refer to pages 6–8 of this handbook).

Case documentation must reflect accurate procedure types, roles, and categories in accordance with program and accreditation standards. Clinical faculty will verify and approve all entries in Platinum Planner to ensure accuracy and compliance. Failure to complete and submit case logs as required may result in disciplinary action and/or affect program progression.

### **Clinical Case Studies and Feedback:**

Students will submit a weekly case study on a procedure they have participated in. This assignment is an opportunity for the student to demonstrate both their practical knowledge from the clinical experience as well as their ability to reflect on their role within the surgical team. Clinical faculty will grade case studies and provide feedback on strengths and weaknesses to ensure on-going progression which includes refinement of skills and clinical understanding.

### **Assignment of Clinical Experience Policy and Procedure:**

Clinical assignments will be made based on the number of students, the availability of spaces at each clinical affiliate (site), and the needs of the clinical site. Travel can be up to **75** minutes away from the college address. Students are responsible for providing their own transportation to and from an assigned clinical site. Clinical assignments will be arranged by the clinical coordinator in collaboration with the clinical affiliate leadership. Students will be rotated to multiple clinical sites (3-4) in any given semester to ensure exposure to a variety of surgical specialties. Students must sign and submit, the Clinical Travel Acknowledgement form on page 23 of this publication, prior to beginning the clinical experience, which includes field trips and observations.

If an issue arises at a clinical site, the student **MUST** promptly contact the instructor and allow them to liaise with the clinical site for resolution. Under **NO** circumstances should the student attempt to address issues with the clinical site staff or leadership directly. Failure to comply and/or failure to contact the instructor, will result in the student receiving zeros for all daily clinical assignments (evaluations, case log, and case study). Additional measures may be taken in accordance with college policy.

If a student is asked to leave a clinical site by clinical site staff for **ANY** reason, they must promptly inform their instructor. Faculty will collaborate with the student to address the situation and determine the appropriate course of action. Pending resolution, the student will receive zeros for all clinical assignments. In the event a student is not allowed to return to a clinical site, an alternative placement will be attempted by faculty. It should be noted that alternative placement may not be possible. Additionally, the student will receive zeros for their clinical assignments for the rest of the clinical rotation at the facility and may not be allowed to return to the site.

It is imperative for students to uphold professional conduct standards and promptly communicate any challenges they encounter during their clinical experiences. If removed from a clinical site for violations of Cabarrus College policy, further disciplinary action can occur.

### **Preceptor Guidelines:**

The role of the preceptor is to help the student bridge the gap between the reality of the workplace and the idealism of the academic environment without compromising professional ideals. Open and honest communications will establish a positive learning environment. The preceptor should:

- Collaborate with the student to develop learning experiences congruent with the student's goals and objectives
- Provide specific and effective ongoing feedback to the student through verbal and written communication.
- Communicate with the faculty on student progress and the nature of his/her overall learning experience.

The student must:

- Fully participate in ALL clinical activities.
- Arrive at least thirty minutes prior to the start of the clinical experience so that he/she can be dressed out in surgical attire and in their assigned operating room on time.
- Collaborate with the preceptor on their progress and areas needing improvement.
- Be receptive to constructive criticism.

### **Student Work Policy:**

All student activities associated with the curriculum—particularly during clinical rotations—must be educational in nature. Students will not be used as substitutes for employed staff in the role of a surgical technologist.

To maintain transparency and uphold the integrity of the student role, Surgical Technology students are required to clearly write “Student” on the whiteboard in each operating room and verbally communicate their student status to all members of the surgical team.

### **Probation Policy:**

Probation may be implemented for, but not limited to the following behaviors:

- Academic dishonesty
- Unsatisfactory lab case management performance (as witnessed by faculty) or clinical performance (based on clinical preceptor evaluations)
- Persistent punctuality and/or clinical attendance issues
- Inability to maintain physical/mental health required to provide safe patient care
- Any behavior deemed unethical, disrespectful, unprofessional, and/or provocative
- Unsafe practice that compromises patient safety (based on clinical site notification and/or clinical preceptor evaluations and/or as witnessed by faculty)
- Unsafe practice that compromises student or faculty safety (based on clinical site notification and/or clinical preceptor evaluations and/or as witnessed by faculty)
- Refusal to participate in a surgical procedure
- Any behavior/action that can compromise program or college clinical affiliations
- Any violation of the college code of conduct
- Violation of ANY programmatic and/or clinical site policy.
- Failure to comply with all terms outlined in the probation conference report

A student may only be on probation for no more than two weeks before administrative withdrawal actions will take place.

## Dress Code for Lab and Clinical Areas:

Students are to adhere to the dress code of the facility to which they are assigned.

- The ID badge is required for clinical entry. The ID badge MUST be clearly visible and worn above the waist.
- Students will practice daily hygienic measures and present themselves in a clean, wrinkle-free uniform (see surgical technology program uniform below).
- Students will purchase OR designated shoes. These shoes are for OR use ONLY. The OR shoes MUST be new, waterproof, solid in design (no holes), and have both a closed toe and closed heel.
- Student will be in proper Surgical Technology black scrubs going to and from clinical areas including lab classes.
- All clothing MUST be business casual when representing the ST program and will be free of profanity, slanderous language, or inflammatory causes when in roles outside of the college.
- Jewelry must not be worn
- Body piercings and tattoos must be covered.
- Heavy make-up must not be worn.
- False eyelashes or eye lash extensions are prohibited.
- Perfume, cologne and/or strong scents are prohibited.
- Offensive odors are prohibited (ex. from pets or smoking).
- Nails must be natural (NOT artificial), clean, short, and without polish.
- Facial hair must be short, trimmed and covered by a surgical mask and/or beard cover.
- Any clinical site dress code stipulation that is not listed here.

*Failure to abide by the dress code will at a minimum, result in an unexcused absence.*

## Surgical Technology Uniform Criteria:

The Cabarrus College of Health Sciences, Surgical Technology program uniform consists of a pair of black surgical scrubs (top and bottom) and college ID. When the student is in the laboratory setting, the student will be in their program uniform. When entering and exiting the clinical setting, the student will be in their program uniform. To ensure student and public safety, it is **mandatory** for the student to wear their student ID badge where it is visible and above their waist during all lab and/or clinical experiences. OR designated shoes will be transported in a bag to and from the assigned clinical site for OR use ONLY; they are not to be worn ANYWHERE else. Upon arrival to the assigned clinical site surgical department, the student will change into hospital issued scrubs, their OR designated shoes and the appropriate PPE (personal protective equipment).

## Surgical Technology Student Club

### Purpose

The Surgical Technology Student Association (STSA) is open to all students enrolled in the Surgical Technology program. This organization was established to promote professional growth and interest in the field of surgical technology. STSA provides opportunities for students to engage with guest speakers, participate in equipment demonstrations, and explore continuing education focused on the latest advancements in surgical technology.

### Officer Responsibilities and Elections

To ensure effective student leadership, STSA members elect officers each academic year. These roles allow students to take an active part in shaping the club's direction and projects. Officer positions include:

- **President** – Leads the organization and oversees all club activities
  - Organizes and leads club activities
  - Serves as the STSA representative at Student Government Association (SGA) meetings
- **Vice President** – Supports the President and manages communication efforts
  - Steps in for the President as needed
  - Submits regular updates or articles about the STSA to the college newsletter and/or social media
- **Secretary/Treasurer** – Maintains accurate records
  - Records official meeting minutes and submits them to the SGA at the end of the academic year to maintain funding eligibility
  - Manages all fundraising income and expenses to be reported to the college

### Meeting Requirements

STSA holds regular monthly meetings, which provide time for planning, collaboration, and updates. These meetings:

- Are scheduled outside of class hours to encourage full participation
- Must be approved and supervised by a faculty advisor or the Program Chair
- Require agendas to be submitted for approval at least one week in advance

### Decision-Making Process

To ensure alignment with program goals and institutional guidelines, all STSA decisions—including event planning, fundraising, and expenditures—must be reviewed and approved by the Program Chair or faculty advisor prior to implementation.

### Membership

STSA membership is automatically extended to all students enrolled in the Surgical Technology program. This inclusive approach ensures that every student has a voice and opportunity to participate in shaping their educational and professional development.

- **Active participation** in club meetings, events, and fundraising efforts is strongly encouraged.
- **Students who opt not to participate** will not be eligible to receive any benefits—such as funding support—generated through STSA-sponsored fundraising activities.
- **SGA representation** is required at all SGA meetings to maintain the club's recognition and eligibility for grants or support.

# CABARRUS COLLEGE

of

## HEALTH SCIENCES

### Student Clinical Travel Acknowledgement

I, \_\_\_\_\_, am enrolled as a full- or part-time student at Cabarrus College of Health Sciences (*“the College”*) and acknowledge that I will be participating in off-campus travel for the purposes of class, field trips and clinical education (*“educational activities”*).

I, \_\_\_\_\_, understand that I will be required to travel to clinical sites that, measured from the campus of the College, could be as far away as 75 miles (one way).

In consideration of being allowed to participate in these educational activities, I knowingly and voluntarily:

- Acknowledge that despite safety precautions, the College cannot guarantee my safety. The College is not legally responsible for my personal safety or the safety of my property while traveling to and from these educational events in my personal vehicle.
- Understand that any medical expenses, property loss, or other personal expenditures that result during travel to and from these educational activities are to be borne by me, the student.
- Acknowledge that I will be driving my own personal vehicle to and from these educational activities and that the College’s insurance does not cover me or my vehicle.
- Understand that the College cannot be responsible for assuring the safety and reliability of such private transportation or driver, nor for any non-sponsored activities and travel that I choose to participate in before, during or after the educational activity. I therefore accept the risks and responsibilities associated with such private vehicle travel and activities.

I knowingly and voluntarily assume all risks associated with travel to and from educational activities and release the College, its employees, and affiliating or parent organizations from all responsibility or liability for personal injury, emotional injury, death, or property damage sustained by me during or because of my travel to and from educational activities.

Student Name:

### Acknowledgment Signatures

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Guardian if Minor (under 18) Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Program Chair Signature: \_\_\_\_\_

Date: \_\_\_\_\_

# CABARRUS COLLEGE of HEALTH SCIENCES

## **Surgical Technology Program Handbook Acknowledgment**

I, \_\_\_\_\_, attest that I have received a copy of the current Surgical Technology Program Handbook. I have read and understand the rules, policies, and procedures outlined in the handbook.

I have had the opportunity to ask questions and receive clarification regarding the contents, and I agree to abide by the rules, policies, and procedures as presented and explained to me.

I understand that the handbook is subject to revision. Any changes will be provided in writing and will become effective upon notification.

Furthermore, I acknowledge that failure to comply with the rules, policies, and procedures may result in disciplinary action, including probation, suspension, or dismissal from Cabarrus College of Health Sciences.

### **Acknowledgment Signatures**

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Academic Advisor Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Program Chair Signature: \_\_\_\_\_

Date: \_\_\_\_\_