Student Handbooks constitute Student Policy and are revised as needed. Please go to TCL.edu for updates.
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SECTION I: ACADEMIC INFORMATION

A. ACADEMIC ADVISEMENT
Each student in a Health Sciences Program is assigned a faculty advisor to assist in scheduling sequential courses in the curriculum. It is the responsibility of the student to schedule an appointment with his/her advisor during each registration period, including when the student is registering on-line. Any student who has problems that interfere with satisfactory attendance, progress, and performance is encouraged to meet with their advisor to discuss these issues. Every effort will be made to help the student resolve the problems.

B. ACADEMIC MISCONDUCT (See TCL student handbook and course Syllabi)

C. PROGRESSION: STANDARDS FOR ACADEMIC PROGRESS

The Health Sciences grading scale will be used to determine grades.

<table>
<thead>
<tr>
<th>Grade</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>A</td>
<td>90% - 100%</td>
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<tr>
<td>B</td>
<td>82% - 89%</td>
</tr>
<tr>
<td>C</td>
<td>75% - 81%</td>
</tr>
<tr>
<td>D</td>
<td>70% - 74%</td>
</tr>
<tr>
<td>F</td>
<td>0% - 69%</td>
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</tbody>
</table>

Grading Methodology. The final grade must be 75.000 or more in order to pass the course and progress in the program. Grades will not be rounded up. A final grade of less than 75.00 is not passing in any Health Science Program, and does not meet progress requirements.

Students absent from an examination or presentation will receive a “0” grade for the examination unless other arrangements are made with the individual instructor prior to the examination or presentation day or on the examination or presentation day before the test/presentation is scheduled to be given. Arrangements may be completed by telephone. If the instructor is not available, a message should be left on the instructor’s voice mail AND with another member of the faculty or administrative assistant. Messages sent by other students are unacceptable. The student is responsible for notifying the instructor for the reason of the absence. Make up quizzes and/or examinations may be offered, at the instructor’s discretion, during the final examination period. Additional options for make-up testing include reweighting the final examination. It is the responsibility of the student to contact the appropriate instructor to arrange to make up the examination. The instructor will decide the method of examination. Grades are posted within one week of administration of tests and examinations. Students with concerns or questions regarding grades awarded for a graded activity should contact the course faculty within one week of the grade being posted.

Students in the Health Sciences Programs are also subject to the additional standards detailed below.

1. All required courses taken prior to acceptance into a Health Sciences program must be completed with a “C” or better.
2. Program courses must be completed in the sequence outlined in the current TCL catalog. No co-requisite course may be delayed. A curriculum profile detailing required program courses in their sequence will be developed upon entry into the program. This profile must be adhered to; any deviation from the sequence may result in the student being withdrawn from the program.
3. Students are eligible to reenter a program only one time. Conditions for re-entry in program student handbooks must be met.
4. Students with two failures within their program of study are not eligible for re-entry.
5. Students are required to maintain an overall TCL 2.0 grade point average (GPA) in order to progress and to graduate.
6. Two failures within the discipline (MTH, NUR, PTH, RAD, and SUR) will result in the student being withdrawn from the program. See admission criteria.
7. All curriculum requirements must be met in order to successfully complete the program.
8. A no-call, no-show for any clinical experience will result in the student being withdrawn from their program.
9. All health forms, CPR, and health insurance requirements must be completed annually to participate in laboratory/clinical. In addition, a drug screen and background check are required upon entry into the program. It is the student’s responsibility to keep these requirements current and to submit the appropriate documentation to the Health Sciences office. Failure to do so will result in withdrawal from program.
10. A student will not be able to progress in the course sequence if:
   a. there is demonstration of a consistent pattern of negligence and/or unsafe clinical practice documented by the clinical instructor.
   b. there is professional negligence and/or verbal, physical or emotional abuse of a patient.
   c. there is a breach of professional standards of conduct. Such actions might include but are not limited to:
      1. failure to recognize the need for assistance when unprepared for clinical action.
      2. failure to take clinical action when such action is essential to the health and safety of the patient and is within the student’s scope of knowledge.
      3. attending clinical while under the influence of alcohol and/or drug(s). Use of substances that interfere with the judgment, mood, and/or motor coordination of health science students pose an unacceptable risk for patients, health care agencies, the College, and the faculty. Therefore, use of alcohol, illegal drugs or other substances and/or the misuse of legal therapeutic drugs by health science students while engaged in any portion of their educational experiences is strictly prohibited. Faculty members who suspect a violation of this TCL policy are required to take action. Students are required to be knowledgeable of and abide by this college policy.
      4. failure to manage one’s behavior in such a manner as to have an adverse effect on the relationship with a patient, significant other, clinical site, or colleague.
      5. deliberately giving inaccurate information or withholding pertinent information regarding clinical care.
      6. falsifying medical records
      7. performing clinical activities detrimental to the health and safety of the patient, outside the scope of knowledge/practice, or without appropriate supervision.
      8. failure to assume responsibility for completing clinical activities.
      9. breach of patient privacy or rights.
      10. failure to achieve satisfactory completion of clinical competencies designated for each program.
      11. failure to achieve a satisfactory laboratory/clinical evaluation

D. REQUIREMENTS FOR GRADUATION AND THE AWARD OF ASSOCIATE OF APPLIED SCIENCE DEGREE
   1. Completion of the Health Sciences, general education and science courses as required by the program
   2. Completion of each course with a minimum grade of “C” (2.0)
   3. TCL GPA 2.0 or greater
   4. Completion of the last two (2) semesters of Health Sciences courses at TCL
   5. Completion of all Health Sciences courses within 3 years of beginning the program (including SMART courses)
   6. Recommendation of the faculty

E. REQUIREMENTS FOR GRADUATION AND THE AWARD OF DIPLOMA OF HEALTH SCIENCE
   1. Completion of Health Sciences, general education and science courses as required by the program
   2. Completion of each course with a minimum grade of “C”
   3. TCL GPA 2.0 or greater
   4. Completion of the last two (2) semesters of Health Sciences clinical courses at TCL
   5. Completion of all Health Sciences courses within 2 years of beginning the program
   6. Recommendation of the faculty

F. REQUIREMENTS FOR GRADUATION AND THE AWARD OF CERTIFICATE OF HEALTH SCIENCE
   1. Completion of the Health Sciences courses, and science courses as required by the program
   2. Completion of each course with a minimum grade of “C” (2.0)
   3. TCL GPA 2.0 or greater
   4. Completion of all Health Sciences course at TCL
   5. Completion of all Health Sciences courses within 2 years of beginning the program
   6. Recommendation of the faculty
G. WITHDRAWAL FROM HEALTH SCIENCES PROGRAMS
The Withdrawal Policy of TCL will be followed as outlined in the current College Catalog. In addition, the requirements of Health Sciences Programs stipulate that once the student is in the course sequence, course withdrawal may result in withdrawal from the program. It is the student’s responsibility to assure that all paperwork is completed and submitted. If the student does not initiate course withdrawal with their academic advisor and instructor, the student will be considered an enrolled student in the course and receive the grade that was achieved while enrolled. It is the decision of the course coordinator whether to give a W or WF during the first 21 days of a semester. After that time, the grade earned to date will be awarded.

SECTION II: GENERAL STUDENT INFORMATION

1. All pagers, cell phones and other electronic devices that may disrupt the environment must be turned off during lecture and lab periods.
2. No pagers or phones are allowed in the clinical area. No exceptions will be made (See program handbook).
3. Basic calculators are allowed for quizzes/tests/exams. Palm pilots or other internet, recording, or messaging devices are not allowed during testing.
4. Clinical site assignments are subject to change and registration in a particular section does not guarantee a particular clinical slot.
5. Students may not attend clinical on any unit on which they are employed.

ATTENDANCE POLICY
(Consult the college catalog for details regarding the current college attendance policy.)

The faculty of the programs in Health Sciences has a responsibility to assure that all Health Sciences students have an adequate background of knowledge and skills. The faculty must insure that each student is able to utilize this knowledge and skill in a safe, professional manner in their clinical practice. Clinical courses are organized to provide knowledge of patient care and opportunities to apply this knowledge toward developing skills in the clinical laboratory.

A. Absence from an examination or other graded activity
Students absent from an examination or other graded activity will receive a “0” grade for the activity unless other arrangements are made with the individual instructor before the scheduled event. It is the responsibility of the student to contact the appropriate instructor to arrange to make up the examination. This arrangement may be done by telephone. If the instructor is not available, a message should be left with another member of the Health Sciences faculty and the Division of Health Sciences Administrative Specialist. The instructor will decide the time and method of make-up examinations on an individual basis. Messages sent by other students are not acceptable. The student is responsible for notifying the instructor of the reason for this absence.

B. Clinical Absence
In the event of unavoidable clinical absence, the student must follow the protocol outlined in the course materials. A medical excuse may be required. Make-up may be arranged at the discretion of the faculty. Absences from the clinical area may result in the student’s inability to demonstrate mastery of the clinical outcomes for a course. “No call, no show” for clinical is unprofessional conduct and the student will be withdrawn from the program.

C. Tardiness
Punctuality is an important element of professional behavior. Students are expected to arrive on time. The clock at the clinical agency/classroom/lab is used to determine tardiness. Should a pattern of tardiness develop, the problem will be handled by the instructor and may result in an unsatisfactory for the course, laboratory, or clinical.

D. Hazardous Weather
In the event of hazardous weather conditions, local radio, River, WYKZ, 98.7 FM and WBHC-FM, 92.1 in Hampton will announce information concerning school closings or delays beginning at 0600. Notice will also be posted on the college...
website: www.tcl.edu For clinical experiences, if TCL is closed, then clinical is automatically canceled. If TCL will be open and weather is a concern, clinical faculty will contact students. Students are highly encouraged to opt into the Emergency Text Message Alert System www.tcl.edu/textalert.asp

E. Jury Duty
Students who are called for jury duty should request to be excused from jury duty if the duty interferes with classroom, laboratory, or clinical experiences. Delay in this process may jeopardize the chances of the student being excused by the court. All missed classroom, laboratory/clinical experiences must be addressed with the Dean for the Division of Health Sciences and the course coordinator. The student is responsible for obtaining the missed classroom materials from the course coordinator.

FAMILY MEMBERS
Family members attending the program will not be allowed to participate in the same clinical rotations or campus lab groups.

EQUIPMENT
Students are frequently given assignments that require the use of equipment or computers without direct instructor supervision. Care of this equipment is essential and students are requested to leave the equipment in good repair. If problems arise during the use of equipment, it should be reported immediately to the instructor or division administrative specialist. Students may not remove equipment from the health sciences building.

BULLETIN BOARD INFORMATION
Student information bulletin boards are located in the Division of Health Sciences (Building 4) and on Blackboard. Students should check the designated bulletin board as required by the course syllabus for pertinent information. Students are responsible for information posted.

HEALTH SCIENCES COMPUTER LABS
The Health Sciences Programs tutorial computer lab is available for Health Sciences student use Monday - Friday from 8:30 am to 4:00 PM. This lab is for computer assisted instruction purposes for components of Health Sciences curricula. Course materials may not be printed from this lab. Students are requested to follow the instructions for the operation of the computers and for each program carefully.

*** Under no circumstances shall food and drink be permitted in the computer lab. ***

FINANCIAL AID
Students interested in securing financial aid should apply within published dates. For more information on eligibility and application procedures, inquire at the Financial Aid Office located in Coleman Hall, Building 2. Refer to the current TCL catalog.

GRADE REVIEW: Refer to current TCL College Catalog/TCL Student Handbook

CHANGE OF NAME, ADDRESS, EMAIL ADDRESS OR TELEPHONE NUMBER
Any change of name, address, email address or telephone number must be reported immediately to the Division of Health Sciences and TCL Student Records. The Division of Health Sciences will not be held responsible for failure of students to receive essential information if an incorrect address/e-mail is on file. All students are required to maintain a TCL e-mail account throughout their program.

PARKING
A. Campus Parking
Students must park in designated parking areas and obey all parking regulations as established by the College. Violations are punishable by fines, towing of vehicle at the owner’s expense and/or loss of driving privileges on campus. Speed limit signs are posted around the buildings and parking areas. Students who exceed these limits will be denied the privilege of bringing their vehicles on campus. Students who expect to operate a motor vehicle on campus must register the vehicle upon enrolling at TCL. For more information, contact the TCL Security office.
B. Clinical Facility Parking
Students are to park in areas specified by the facility. Students are NOT to park in areas designated for visitors to the facility or physicians. Students assigned to Beaufort Memorial Hospital may park in TCL student parking areas only.

TRANSPORTATION
In order to provide students with a varied and comprehensive clinical experience, various clinical and observational sites within an approximate 60-mile radius of Beaufort are utilized. Students are required to provide their own transportation to these sites. Students are encouraged to carpool.

TUITION/FEE PAYMENT
No student will be permitted to attend classes until tuition is paid. Students should refer to the current TCL catalog.

SECTION III: PROFESSIONAL CONDUCT

PRIVACY AND CONFIDENTIALITY
The Health Insurance Portability and Accountability Act of 1996 (HIPAA) was enacted to protect the privacy of all health information. It is the responsibility of the Health Sciences student to maintain the confidentiality of patient information. Under no circumstances should a student convey confidential information to anyone not involved in the care of the patient. Students are also expected to maintain professional confidentiality regarding other students, hospital/facility employees and physicians.

Confidential information includes but is not limited to:
A. the identity and addresses of individuals served and services they received;
B. the social and economic conditions or circumstances of any person served;
C. agency evaluation of information about a person or health facility;
D. medical data, including diagnosis and past history of disease or disability, concerning a person, and confidential facts pertaining to health facilities;
E. the identity of persons or institutions that furnished health services to a person;
F. information identified as confidential by appropriate federal and state authorities;
G. special care needs to be taken to preserve the dignity and confidentiality of patients, including those patients with infectious diseases or conditions.
H. the patient has the right to every consideration of his/her privacy concerning his/her own medical care. Case discussion, consultation, examination, and treatment are confidential and should be conducted discreetly.
I. the patient has the right to expect that all communications and records pertaining to his/her care should be treated as confidential. All patient information shall be regarded as confidential and available only to authorized users.

Breach of this policy may result in disciplinary action and/or termination from the program.

GUIDELINES FOR APPROPRIATE USE OF SOCIAL NETWORKING WEBSITES

1. Social networking websites provide unique opportunities for students to get to know one another, share experiences, and keep contact. As with any public forum, it is important that users of these sites are aware of the associated risks and act in a manner that does not embarrass the students, the Health Sciences Division, and The Technical College of the Lowcountry. It is also important to ensure patient information is not made publicly available. The Health Sciences Division has adopted the following guidelines to assist students in safely using these sites.

2. Personal Privacy
   A. We recommend setting your profiles on social networking sites so that only those individuals whom you have provided access may see your personal information.
   B. We recommend evaluating photos of yourself that are posted to these sites and “untagging” photos that depict you in what may be construed as compromising situations.
   C. Be sure you are aware of the security and privacy options available to you at any sites where you post personal information. Keep in mind that privacy settings are not impervious, and information can be shared willingly or unwillingly with others, even with “Friends Only” access.
3. Protection of Patient Information
   A. Comments made on social networking sites should be considered the same as if they were made in a public place in the hospital.
   B. HIPAA rules apply online, and students may be held criminally liable for comments that violate HIPAA.
   C. Remember that simply removing the name of a patient does not make them anonymous. Family members or friends of that patient or of other patients you are caring for may be able to determine to whom you are referring based on the context.

4. Professionalism
   A. Use of these sites can have legal ramifications. Comments made regarding care of patients or that portray you or a colleague in an unprofessional manner can be used in court or other disciplinary proceedings.
   B. Statements made under your profile are attributable to you and are treated as if you verbally made that statement in a public place.
   C. We recommend using discretion when choosing to log onto a social networking site at school. Keep in mind that the use of these sites during lecture, lab and clinical assignments is prohibited.
   D. Keep in mind that photographs and statements made are potentially viewable by future employers.
   E. Students may be subject to disciplinary actions within the College for comments that are unprofessional or violate patient privacy.
   F. Keep in mind you are representing The Technical College of the Lowcountry Health Sciences Division when you log on a site and make a comment or post a photograph.

CONVICTION OF A CRIME

Conviction of a crime (other than a minor traffic violation) may make a student ineligible to take the national certification or licensing examination(s) upon graduation or for application for licensure in South Carolina and other states. Early notification to the appropriate State Licensing/Credentialing Board is recommended.

Criminal conviction or pending criminal charges of any of the following will likely make the applicant ineligible to apply for licensure:
   A. crimes of violence (e.g., murder, manslaughter, criminal sexual assault, crimes involving the use of deadly force, assault and battery of a high and aggravated nature, assault and battery with intent to kill)
   B. crimes involving the distribution of illegal drugs.
   C. crimes that involve Moral Turpitude.

It is the responsibility of the applicant to contact the appropriate licensing board for clarification or advisement.

SECTION IV: DIVISION REQUIREMENTS

CPR CERTIFICATION

Students must have a current CPR certificate that includes adult, child, infant CPR, airway obstruction, and AED prior to beginning clinical courses. This certification must be kept current according to the expiration date of the card and maintained throughout the program. It is the student's responsibility to complete CPR certification. Students will not be permitted in the clinical area without current certification. The following courses are acceptable:
   a. American Heart Association Basic Life Support Health Care Provider
   b. Red Cross CPR for Professional Rescuers

HEALTH STATUS

All student health information is kept confidential.

1. Health Examination
   Students must have a Division of Health Sciences history and health examination form completed, along with required immunizations/testing, by a licensed health care provider by the designated date or upon request for re-entry into a Health Sciences program. Results of the history and health examination must conclude that the student is “mentally and physically able to participate in program activities to meet the desired program outcomes.” Students who do not submit a completed Division of Health Sciences history and health examination form by the designated date will not be permitted to continue in the program.

2. Drug Screen
   Urine and/or serum drug screens for illicit, mood altering, or non-prescribed substances are required prior to clinical experiences. Students with positive results will be excluded from the clinical setting and withdrawn from the program.
In addition to the initial screening that occurs prior to clinical experiences, students may be subject to testing per agency affiliation agreement and/or for cause, such as slurred speech, impaired physical coordination, inappropriate behavior, or pupillary changes. The suspected individual will be asked to have a drug screen done immediately, at his/her own expense, with a report sent to the Program Director within 24 hours. The student will be dismissed from all clinical activities until the issue is resolved. Failure to submit to the drug screen or attempting to tamper with the sample or the results will result in the student not being allowed to satisfy clinical objectives, therefore completion of the course and progression in the program will not occur.

3. Health Update
Prior to beginning the second year, Health Sciences students must complete a health update that includes TB skin testing/or chest x-ray and verification of other immunizations and health status. Failure to do so will prevent the student from continuing in the program.

4. Change in Health Status
Students must notify the Dean of the Division of Health Sciences of any changes in health status that occur following admission to the program i.e. pregnancy, injuries, major illnesses or surgery. Documentation from a health care provider verifying emotional and/or physical ability to carry out the normal activities of patient care will be required on the Changes in Health Status form in order for the student to continue in the Health Sciences program.

5. Pregnancy
Any student who is pregnant must have her health care provider complete the division Changes in Health Status form regarding her ability to perform all expected clinical functions fully, safely, and without jeopardizing the health and well-being of the student, fetus, or patient before registration each semester. In order to resume her class and clinical activities after delivery, the student must bring a written statement from her healthcare provider on the Changes in Health Status form. Students who do not bring these statements will not be permitted to continue their clinical experience. If a student does NOT declare her pregnancy, the Division of Health Sciences will assume that a pregnancy does NOT exist.

INSURANCE

a. Accident Insurance
All curriculum students are provided with accident insurance coverage. Students are covered to and from classes on campus and while engaged in an assigned TCL clinical activity. The student should obtain accident insurance information from the Vice President of Student and College Development Office prior to going for medical treatment. Should the situation not allow this, claims must be filed promptly upon return to campus and within ninety (90) days. Accident insurance information may be obtained from the Student and College Development Office. A student who is injured while in the clinical setting must immediately notify the instructor. The clinical instructor will arrange for the student to go to the emergency room. The student must take a copy of the emergency room record to the TCL Student and College Development Office the next scheduled class day, but not later than 90 days. The appropriate incident forms will be completed as indicated by the policy of the health care facility.

b. Health Insurance
Students enrolled in Health Sciences programs must obtain personal health/medical insurance and provide evidence of continuous coverage to participate in clinical experiences. Failure to maintain coverage will result in withdrawal from program. TCL and/or the clinical facility are not liable for illness that occurs while the student is in the clinical facility or academic setting. Health insurance information must be readily available in case of injury in the clinical area.

c. Malpractice Insurance
College students are covered by a college policy for a fee. The fee for the premiums is paid the beginning of each semester at the time of registration. No student will be permitted in the clinical area without this coverage. Re-entry students must confirm the correct major and that the proper fees are assessed.

STANDARD PRECAUTIONS (Refer to section V: Infectious Diseases)
All students are required to use standard precautions for all patient care activities. Additional precautions are indicated for care of some individuals.
SECTION V
INFECTIOUS DISEASES

CDC RECOMMENDATIONS

The Center for Disease Control (CDC) publishes guidelines for precautions for healthcare workers. Standard precautions reduce the risk of transmission of pathogens from recognized and unrecognized sources of infection. Standard Precautions shall be applied to all patients receiving care in health care facilities, regardless of their diagnosis or presumed infection status.

Standard Precautions apply to 1) blood; 2) all body fluids, secretions, and excretions except sweat, regardless of whether or not they contain visible blood; 3) non-intact skin; and 4) mucous membranes.

Standard Precautions involve the use of hand washing and protective barriers (such as gloves, gowns, aprons, masks, or protective eyewear) which can reduce the risk of exposure of health care workers to potentially infective materials. In addition, under Standard Precautions, it is recommended that all health care workers take precautions to prevent injuries caused by needles, scalpels, and other sharp instruments or devices.

Pregnant health care workers are not known to be at greater risk of contracting HIV infection than are health care workers who are not pregnant; however, if a health care worker develops HIV infection during pregnancy, the infant is at risk of infection resulting from perinatal transmission. Because of this risk, pregnant health care workers should be especially familiar with, and strictly adhere to, precautions to minimize the risk of HIV transmission.

GLOVING, GOWNING, MASKING, AND OTHER PROTECTIVE BARRIERS AS PART OF STANDARD PRECAUTIONS

All health care workers should routinely use appropriate barrier precautions to prevent skin and mucous membrane exposure during contact with any patient's blood or body fluids that require Standard Precautions.

Recommendations for the use of protective barriers are available at the CDC website www.cdc.gov

Gloves should be worn:
1. for touching blood and body fluids, mucous membranes, or non-intact skin of all patients, and
2. for handling items or surfaces soiled with blood or body fluids to which Standard Precautions apply.

Gloves should be changed after contact with each patient. Hands and other skin surfaces should be washed immediately or as soon as patient safety permits if contaminated with blood or body fluids requiring Standard Precautions. Hands should be washed immediately after gloves are removed.

Masks and protective eyewear or face shields should be worn by health care workers to prevent exposure of mucous membranes of the mouth, nose, and eyes during procedures that are likely to generate droplets of blood or body fluids. Gowns or aprons should be worn during procedures that are likely to generate splashes of blood or body fluids.

All health care workers should take precautions to prevent injuries caused by needles, scalpels, and other sharp instruments or devices during procedures; when cleaning used instruments; during disposal of used needles; and when handling sharp instruments after procedures. To prevent needle stick injuries, needles should not be recapped by hand, purposely bent or broken by hand, removed from disposable syringes, or otherwise manipulated by hand. After they are used, disposable syringes and needles, scalpel blades, and other sharp items should be placed in puncture-resistant containers for disposal. The puncture-resistant containers should be located as close as practical to the use area.
**REFUSAL TO CARE FOR PATIENTS**
Health care workers, including students, cannot be excused from caring for patients with AIDS or other infectious diseases on their own request. Health care workers or students who may be immunosuppressed or have a clinical condition which may confer an increased risk must provide a written recommendation from his/her healthcare provider to that effect.

**PREGNANT STUDENTS**
There is no evidence of increased risk to pregnant health care personnel themselves from caring for a patient with HIV infection. Many patients with AIDS excrete large amounts of cytomegalovirus (CMV) and infection with CMV during pregnancy may damage the fetus.

When hygienic precautions (appropriate hand washing, not kissing infants, etc.) are followed, the risk of acquiring infection through patient contact is low. Therefore, a practical approach to reducing the risk of infection with CMV is careful handwashing after all patient contacts and avoiding contact with areas or materials that are potentially infectious.

Nevertheless, contact by pregnant students with patients known to have AIDS and/or AIDS Related Complex will be minimized whenever possible.

**MANAGEMENT OF STUDENTS WITH HIV INFECTION**
Pre-admission or subsequent enrollment testing of students to detect AIDS, ARC, or HIV will not be done.

CDC Recommendations:
Investigations of HIV transmission from Health Care Workers (HCWs) to patients indicate that, when the HCWs adhere to recommended infection control procedures, the risk of transmitting HIV from an infected HCW to a patient is small.

These recommendations apply to all students, not just those with HIV infection.

A. Students must perform adequate hand washing before and after patient contact.
B. All students must wear gloves for direct contact with blood, body fluids, secretions, excretions, mucus membranes or non-intact skin of all patients.
C. Students who have exudative lesions or weeping dermatitis should refrain from direct patient care and from handling patient care equipment until condition resolves.
D. Students infected with HIV who perform exposure-prone procedures as identified by the clinical facilities must comply with the policy of the clinical facility.
E. Students infected with HIV should be counseled about the potential risk associated with taking care of patients with transmissible infections. The student's private physician should determine whether the individual can safely perform patient care duties and may suggest changes in clinical assignment.
F. If a patient is exposed to blood or body fluids of a student with HIV infection, the patient should be informed of the incident. The student will abide by the hospital and/or clinical policies in effect in this situation.
G. Extraordinary care will be taken to protect information regarding any student's health condition. In general, no specific or detailed information concerning complaints or diagnosis should be provided to faculty, administration, staff, other students, or even patients without the written consent of the affected student.

**MANAGEMENT of NEEDLESTICKS and ACCIDENTAL EXPOSURE**

1. The Policies and Procedures of the facility where the incident occurred will be followed.
2. During the follow-up period, the exposed student will be referred to their private physician or to a public health official for appropriate counseling.
3. Students may also be referred to the Office of Student Affairs for further assistance and paperwork processing.
SECTION VI: PROGRAM REQUIREMENTS

PROGRAM DESCRIPTION: MASSAGE THERAPY

This Massage Therapy Student Handbook serves to supplement the current TCL Catalog and Division of Health Sciences Student Handbook to provide additional guidance for students enrolled in the Massage Therapy Program. It constitutes Student Policy. It undergoes revision annually and as necessary. Review online at http://www.tcl.edu for updates.

TECHNICAL COLLEGE OF THE LOWCOUNTRY
New River Campus
100 Community College Drive
Bluffton, SC 29909

Mailing address:
921 Ribaut Road, P.O. Box 1288
Beaufort, SC 29901-1288
(843) 525-8324
1-800-768-8252
www.tcl.edu

MASSAGE THERAPY PROGRAM FACULTY AND STAFF

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Telephone</th>
<th>Office</th>
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</thead>
<tbody>
<tr>
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<td>Dean, Division of Health Sciences</td>
<td>525-8276</td>
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Massage Therapy is a branch of complementary health care that works to improve health and well-being through the manipulation of muscles and other soft tissues of the body. The goal of the TCL Massage Therapy program is to prepare students to function competently as professional entry-level massage therapists in a variety of settings. The philosophy of the program is to provide a holistic education allowing students to develop an innate understanding of the holistic practice of Massage Therapy.

The program is comprised of a 750 hour, three-semester (11 month), 31 credit hour curriculum recognized by the National Certification Board for Therapeutic Massage and Bodywork. A Certificate in Massage Therapy is awarded upon graduation. The TCL Massage Therapy Program is accredited by the Commission on Massage Therapy Accreditation (COMTA).

Successful completion of the Massage Therapy program, including coursework and supervised clinical practice, makes students eligible to take the following exams: National Certification Exam in Therapeutic Massage and Bodywork (NCETMB), and/or the Massage & Bodywork Licensing Examination (MBLEX), both approved to meet requirements for South Carolina State Licensure. The TCL Massage Therapy program meets or exceeds all instructional criteria for the NCETMB: At least 125 hours of instruction on the body’s systems (anatomy, physiology and kinesiology), at least 200 hours of massage and bodywork assessment, theory and application instruction, at least 40 hours of pathology, at least 10 hours of business and ethics instruction (minimum 6 hours in ethics), at least 125 hours of related instruction including supervised clinical practice and practicum (professional internship).

All program hours must be completed as in-class supervised instruction. By state law, the instructional hour will be identified as 50 minutes. One semester credit hour will be identified as 750 minutes of classroom instruction or equivalent laboratory time plus an exam period. By state guidelines, the credit ratio of laboratory/clinical practicum/internship: lecture is 3:1, meaning three contact hours of structured lab activity equals one credit hour; one contact hour of lecture equals one credit hour. Each year, the massage therapy class size is limited to 14 participants. Instructor to student ratio in clinical supervision is 1:7.

Revised 1/3/2013
All classes in the Massage Therapy program take place at the TCL New River campus. Lecture classes are scheduled in standard classrooms (see individual schedule for room listing following registration), and all clinical program activities are held in the Massage Therapy Lab, Room 221. All equipment (massage tables, massage chairs, bolsters, etc.) are supplied for use while students are enrolled, with ratio of students to equipment for all activities 2:1.

STANDARDS AND CODE OF ETHICS
The TCL Massage Therapy program adheres strictly to the professional standards of practice and code of ethics of the American Massage Therapy Association (AMTA). These principles and rules apply equally to students and faculty of the TCL Massage Therapy program. Any violation of professional ethical behavior by any student, faculty or staff member should be reported immediately to the Massage Therapy Program Director. Students may speak with their instructor, the Program Director, the Dean of the Division of Health Sciences or other college administrator with the expectation of confidentiality in receiving assistance, support and resolution of any ethical issue or concern. Students are required to maintain appropriate physical and interpersonal boundaries and uphold professional standards during all classroom and clinical activities, in keeping with their responsibilities to the profession, outlined in the Code of Ethics below. Prior to state licensure, students may not accept money or other gratuities for massage services.

Code of Ethics for Massage Therapists
This Code of Ethics is a summary statement of the standards of conduct that define ethical behavior for the massage therapist. Adherence to the Code is a prerequisite for admission to and continued membership in the American Massage Therapy Association (AMTA).

Principles of Ethics. The Principles of Ethics form the first part of the Code of Ethics. They are aspirational and inspirational model standards of exemplary professional conduct for all members of the association. These Principles should not be regarded as limitations or restrictions, but as goals for which members should constantly strive.

Massage therapists/practitioners shall:

1. Demonstrate commitment to provide the highest quality massage therapy/bodywork to those who seek their professional service.
2. Acknowledge the inherent worth and individuality of each person by not discriminating or behaving in any prejudicial manner with clients and/or colleagues.
3. Demonstrate professional excellence through regular self-assessment of strengths, limitations, and effectiveness by continued education and training.
4. Acknowledge the confidential nature of the professional relationship with clients and respect each client’s right to privacy within the constraints of the law.
5. Project a professional image and uphold the highest standards of professionalism.
6. Accept responsibility to do no harm to the physical, mental and emotional well-being of self, clients, and associates.

Rules of Ethics. The Rules of Ethics are mandatory and direct specific standards of minimally-acceptable professional conduct for all members of the association. The Rules of Ethics are enforceable for all association members, and any members who violate this Code shall be subject to disciplinary action.

Massage therapists/practitioners shall:

1. Conduct all business and professional activities within their scope of practice and all applicable legal and regulatory requirements.
2. Refrain from engaging in any sexual conduct or sexual activities involving their clients in the course of a massage therapy session.
3. Be truthful in advertising and marketing, and refrain from misrepresenting his or her services, charges for services, credentials, training, experience, ability or results.
4. Refrain from using AMTA membership, including the AMTA name, logo or other intellectual property, or the member’s position, in any way that is unauthorized, improper or misleading.
5. Refrain from engaging in any activity which would violate confidentiality commitments and/or proprietary rights of AMTA or any other person or organization.
REQUIREMENTS OF TRAINING FOR LICENSURE IN SOUTH CAROLINA

From Section 40-30-110, South Carolina Code of Laws, 1976, as amended by the Massage/Bodywork Practice Act, Act 387 of the 1996 General Assembly:

To be licensed as a massage therapist in South Carolina, a person must
1. be at least 18 years of age and have received a high school diploma or GED (high school graduate equivalency diploma);
2. have completed a course of supervised study of at least 500 classroom hours at an approved institution;
3. have received a passing grade on an approved examination such as the National Certification Examination

For additional information and/or for application for South Carolina state licensure, contact
SC Department of Labor, Licensing, and Regulation
Office of Business and Related Services
P.O. Box 11329 (803) 896-4490
Columbia, SC 29211-1329 www.llr.state.sc.us/POL/MassageTherapy

Requirements for training and standards of practice in other jurisdictions may vary.

NON-DESCRIPTIMINATION POLICY
The Technical College of the Lowcountry Massage Therapy program is committed to a policy of equal opportunity for all qualified applicants for admissions or employment without regard to race, gender, sexual orientation, national origin, age, religion, marital status, veteran status, disability, or political affiliation or belief.

FINANCIAL AID
Eligibility for financial aid is established by completion of the Free Application for Federal Student Aid (FAFSA) through the link on the Financial Aid webpage of the TCL website www.tcl.edu. Federal, State, and private Foundation sources of assistance are available as described in the TCL Catalog, pages 26-32.

By definition, Federal and State scholarships and grants are funds applied toward the educational costs of students who meet eligibility criteria and remain in good academic standing, which are not repaid by the student. Federally subsidized, unsubsidized, or private loans are obtained by the student or parents of dependent students, and must be repaid, subject to specific terms of repayment, including interest fees.

IMPORTANT: All students requesting funding through student loans are required to complete an annual Financial Literacy workshop. Contact Financial Aid or check the website for workshop dates.

CPR CERTIFICATION
Massage therapy students must have a current Adult Basic CPR certificate prior to beginning clinical courses. This certification must be kept current according to the expiration date of the card and maintained throughout the program. It is the student's responsibility to complete CPR certification. Students will not be permitted in the clinical area without current certification.

INSURANCE
Massage therapy students are not required to maintain personal health insurance coverage while enrolled. Information on student policies and rates are available and recommended, but not required to complete clinical activities of the program.

EDUCATIONAL OBJECTIVES
The curriculum content is designed to build knowledge, skill, and confidence in the student therapist:
1. Perform safe and effective massage therapy application
2. Demonstrate healthy body mechanics and self-care
3. Employ professional ethics and laws specific to the practice of massage therapy
4. Apply knowledge of human structure, function, and pathology
5. Provide massage therapy services to the public in clinical courses
6. Document clinical activities using proper medical terminology
7. Develop basic business planning and management skills
8. Integrate knowledge and skills needed to pass Massage and Bodywork Licensing Examination
CONTINUING EDUCATION FOR INSTRUCTORS
All Massage Therapy instructors must participate in continuing education in technical and instructional skills. This requirement may be satisfied with in-service or outside programs. Documentation must be provided.

MAKE-UP POLICY
Students in this science- and skills-based program are expected to attend all classes. Students who miss more than 10% of classes are subject to administrative withdrawal from the class. All assignments must be completed or the student will receive an “I” (Incomplete) in the class. Students are expected to turn in all assignments by the designated date. Students who are not able to be present for a lab evaluation or test MUST contact the instructor in advance to request an opportunity to reschedule or “make-up” the evaluation or test. “No-call/no-show” for an evaluation or an exam will result in a grade of “0.” There are no “make-up” activities equivalent to hours in the program. (For example, a student may not write a paper to “make-up” hours in a specific course.)

DRAPING PROCEDURES
Professional standards of draping are required and maintained at all times during the curriculum. Draping procedures are introduced and practiced in MTH 121 Principles of Massage I during Fall Semester, and required during all courses involving massage application.

Any student who does not observe appropriate draping technique and respect for physical and interpersonal boundaries will be immediately removed from the clinical activity. Behavior will be documented by the instructor, and discussed in private with student for appropriate resolution, including potential dismissal from the course and the program. In cases where the situation is resolved and the student is allowed to return to clinical activities, any deliberate or repeated inappropriate behavior following corrective instruction will result in dismissal from the program.

HYGIENE
Since the practice of massage therapy involves physical contact with fellow students during massage application courses and members of the public during clinical sessions, students are required to maintain professional standards of hygiene and grooming at all times. Daily showering/bathing, use of unscented deodorant, clean clothing, well-groomed haircut, and conservatively trimmed hair including mustache and beard, are required of all students at all times.

Smoking is discouraged while enrolled in the program, and if a student smokes, care must be taken to remove odors from linens, clothing, skin and hair. Because some students and clients may be sensitive to scent, grooming products used should be unscented, and colognes and perfumes should not be used. Chewing gum is not allowed, but breath mints are allowed and may be recommended due to close proximity of work with fellow students and clients. Nails must be trimmed short and filed.

Best practices of clinical hygiene and universal precautions including proper hand-washing, handling of linens, and cleaning of equipment will be employed during all class and clinical activities.

STUDENT DRESS CODE
Massage Therapy requires mobility of the practitioner while maintaining a modest and professional appearance. Therefore, TCL requires suitable student attire for classroom, clinics, and internships. Appropriate clothing includes:

1. Shirts with sleeves for classroom activities; scrubs are required for clinical sessions.
2. Slacks or shorts: slacks or scrub pants, loose enough to allow mobility; shorts of reasonable length and substantial material are allowed for classroom activities; shorts are not allowed for clinical activities
3. Undergarments are required; no clothing may expose any undergarments for male or female students
4. Closed-toe shoes and socks are required for labs and clinical sessions; clean tennis shoes are acceptable
5. No piercings filled with jewelry other than one small earring per ear are allowed in classroom or clinic, for both professional appearance and safety
6. Students agree to refrain from receiving any body piercing or tattooing while participating in program
7. No hats are to be worn in classroom or clinic
8. Students with long hair must tie hair back in braids, clips or ponytail for clinical sessions
9. Rings, watches and bracelets must be removed while giving massage
PROGRAM FACILITY
The Massage Therapy program is offered in its entirety at the TCL New River Campus in Bluffton, South Carolina. The campus currently comprises 32 acres of land, parking lot with capacity for 240 cars, and one 32,670 sq. ft. building providing classrooms, meeting rooms, administrative offices and student service offices. Rooms are comfortably arranged on two floors, with stair and elevator access.

The first floor contains lobby, main administrative office and bookstore, student services office, library/learning center, President's office, Assistant Vice President's office, three large standard classrooms, one auditorium-style classroom, one large meeting room, one small meeting room, two large industrial arts/multipurpose classrooms, and warming kitchen (refrigerator/microwave; no food preparation on-site).

The second floor contains biology lab, nursing lab, massage therapy lab, five shared divisional offices, TCL Foundation office, three large classrooms, and student lounge with vending area. The environment is enhanced by paintings, photographs and sculptures on loan from the State of South Carolina collection on display throughout the building. Adjacent to the parking area, the TCL New River Campus is the site of a 9-part, 20 kilowatt solar array, generating renewable power supplied to the local electrical grid. The TCL New River Campus opened in August, 2006.

Massage Therapy academic courses take place in lecture classrooms as designated on the individual student schedule. Massage application classes take place in the dedicated Massage Therapy Lab, Room 221. The Massage Therapy Program Director's office is adjacent to the lab. All lecture classrooms are equipped with modern audiovisual equipment, and selected courses (MTH 120 Introduction to Massage, Fall Semester, and MTH 124 Massage Business Application, Summer Semester) are scheduled in computer equipped classrooms (one PC per student) to enhance learning with online resources and enable special lessons (research literacy, resume preparation, etc.).

The Massage Therapy lab is dedicated to program activities and no other programs or courses are scheduled in that space. Massage tables are provided to allow two students to every workstation, with additional individual space provided for storage of student supplies and belongings. Heavy opaque curtains partition workstations for privacy in undressing and dressing.

MATERIALS LIST
Massage media (crèmes, lotions, oils) are supplied while students are enrolled. Students are required to purchase:

1. Fall Semester: MTH 120 lab kit; two twin sheet sets, white, basic percale. Students are required to bring sheets clean, folded, and ready to use for each class and clinical session
2. Spring Semester: Two additional twin sheet sets, white, basic percale. Students are required to bring sheets clean, folded, and ready to use for each class and clinical session
3. Scrubs (solid pants, solid or patterned top) to be worn during clinical sessions.
PROGRAM DESCRIPTION: NURSING

This Nursing Student Handbook serves to supplement the current TCL Catalog and Division of Health Sciences Student Handbook to provide additional guidance for students enrolled in the Nursing Program. It constitutes Student Policy. It undergoes revision annually and as necessary. Review online at http://www.tcl.edu for updates.

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Beaufort, SC 29902

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Beaufort, SC 29901-1288
(843) 525-8324
1-800-768-8252
www.tcl.edu

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National League for Nursing Accrediting Commission (NLNAC)  
3343 Peachtree Road, NE, Suite 500  
Atlanta, GA 30326

State Board of Nursing for South Carolina  
South Carolina Department of Labor, Licensing, and Regulation  
110 Centerview Drive  
Synergy Business Park, Kingstree Building  
P.O. Box 12367 Columbia, SC 29211
PROGRAM PHILOSOPHY

The philosophy of the nursing program is congruent with the mission of the Technical College of the Lowcountry (TCL). The nursing faculty serves the profession, community, and society. Both TCL and the nursing programs strive to create an atmosphere of excellence in teaching and learning. Within the college’s open atmosphere of shared values, the nursing program encourages creativity, innovation, and resourcefulness among its students and faculty. With these commitments, a positive, student-centered environment is created and individuals are empowered to learn and develop throughout their lifetimes.

Nursing is an art and a science distinguished by personalized and holistic care. The nursing process is the framework for the provision of care and promotion of health for people with varying capacities to function in society. The nurse uses critical thinking to promote health or death with dignity. Theory and research drive the science of nursing while caring embodies the art of nursing. Caring serves to protect and promote dignity and creates a climate of support, respectful of beliefs, cultural values and lifestyles. All people have the right to expect excellence in health care and to be treated with dignity, justice, and compassion.

Education is a lifelong, interactive process of teaching and learning. Teaching is a goal-directed, facilitative process that is based on the needs of the learners and used by both faculty and students. Learning is enhanced by an educational climate that fosters self-direction, self-esteem, and critical thinking. The learner is expected to be involved, responsible, and committed to ongoing and lifelong learning.

Nursing education uses biological, behavioral, and nursing sciences to provide students with the opportunities to meet their learning needs. It is the responsibility of the faculty to develop, implement, and evaluate the program of learning and to promote an environment that fosters mutual respect and the development of self-initiated personal and professional goals. At the completion of each level of the nursing programs, graduates are able to function safely and effectively as beginners within their scope of practice.

The faculty of the nursing program believes that nursing is an interactive, multi-leveled, differentiated discipline requiring collaboration across systems. Tenets of effective collaboration are shared planning, decision-making, and accountability with mutual respect. Each level of practice and education are connected and build, one upon the other, in skill and complexity. The faculty believes that facilitating the transition from one level to the next encourages individuals to continue their nursing education. Continued nursing education leads to improved nursing practice and ultimately contributes to the well-being of society.

Addendum
The Nursing program at the Technical College of the Lowcountry has adopted the National League for Nursing Accrediting Commission’s definition of distance learning. NLNAC (2008) defines distance education as “An educational process in which the majority of the instruction occurs when a student and instructor are not in the same place. Instruction may be synchronous or asynchronous. Distance education may employ correspondence study, audio, video, and/or computer technologies” (p. 49).

Original Copy Created 2/01, Original copy located E-Program Guide
Revised 12/02; 6/03
Reviewed 5/04; 5/08; 5/09; 5/10; 5/11
SECTION I: ACADEMIC INFORMATION

GRADING
Each laboratory/clinical rotation is graded as "satisfactory" or "unsatisfactory." Students must receive a "satisfactory" in laboratory/clinical in order to progress in the program sequence. An overall grade of "unsatisfactory" in laboratory/clinical will result in an overall grade of "F" for the course. Specifics related to each course are defined in the syllabus.

DISTANCE LEARNING
For nursing courses offered at New River, every effort is made to minimize students' travel to the Beaufort campus. However, there may be circumstances that require the student to attend an event on the Beaufort campus.

ON-LINE AND WEB-CENTRIC COURSES
Some nursing courses are offered on-line. All courses not offered on line have a web-centric component. It is the responsibility of the student to ensure that they have access to a computer with a web browser and internet connection. In addition, each student must arrange to attend a course orientation prior to beginning his or her first on-line or web-centric course.

ATI ACHIEVEMENT TESTING
Achievement tests are given throughout the program to assist in the evaluation of individual student progress and to support student success. ATI achievement tests required in a course and the due dates for completion are included in the course syllabus. Students who do not achieve required scores must meet with the course coordinator and complete prescribed remediation. The due date for completion of remediation, when required, is prior to the final exam. Failure to complete testing or required remediation by specified dates results in a grade of Incomplete ("I") for the course and non-progress in the nursing curriculum. Students having difficulty with either the tests or remediation components must speak personally with the course coordinator three (3) business days or more in advance of the published due dates.

COURSE EXAM PROCEDURES
The following guidelines are enforced during examinations given in the classroom.
1. All personal items [purses, book bags, etc.] must be placed at the front of the classroom before a test begins.
2. Students may use only basic, 4 function (add, subtract, multiply, divide) calculators.
   a. Calculators may not be shared between students for testing.
   b. No other electronic devices are permitted in the testing area, including cell phones and smart phones.
   c. There is a 10 point penalty on the test for any noise emitting from an electronic device.
3. If students must leave the room during a test, they must turn in the test as complete. They may not leave and return.
4. In general, 60 minutes are allotted for 50 item tests.
5. Variations in testing accommodations are made only based on written documentation from the TCL ADA Officer. It is the student’s responsibility to contact the course coordinator before each exam for testing arrangements.
6. Faculty does not answer questions about a test while it is being administered.
7. If a student wants to speak to the test proctor, the student must raise his/her hand and wait for the proctor to come to him/her. The student may not leave his/her seat.
8. Students record the last 6 digits of their college identification number on the answer [bubble] sheet.
9. Online testing occurs only at the testing center on the Beaufort campus.
10. Students who are tardy for an examination will take the examination in the remaining allotted time.

The following guidelines are enforced during test reviews after an examination is given in the classroom.
1. Tests may be reviewed with the entire class. All security measures applied during testing are utilized. In addition, students may not have writing devices during a test review.
2. Students may not take notes or use recording devices during test reviews.
3. Students with academic problems should be encouraged to schedule individual test reviews with a member of the teaching team.

STANDARDS FOR ACADEMIC PROGRESS
Students are expected to follow professional standards of conduct. Guidelines for these standards include the following:
3. Policies and Procedures of the Division of Health Sciences and college.
4. Policies and Procedures of the clinical health care facility including (but not limited to) HIPAA and Standard Precautions.
A student whose behavior does not conform to the professional standards of conduct may be required to leave the clinical setting. The student may be required to make-up the clinical day at the convenience of the faculty. A student may also be required to appear before a faculty committee for failure to conform to professional standards of conduct. A student whose behavior threatens or endangers the well-being of the patient will be terminated from the course and a grade of "F" will be issued. Students terminated for this reason may be reported to licensing/credentialing agencies.

**TESTING FOR NURSING ASSISTANT CERTIFICATION**

Nursing students are eligible to take the test for certified nursing assistant (CNA) after successful completion of NUR 102, Basic Nursing Skills.

**CONDITIONS FOR RE-ENTRY TO NURSING PROGRAMS**

Re-entry into the nursing program must be requested when a student withdraws from a nursing course, is unsuccessful in a nursing course, or steps out of the nursing program from a semester or longer. Students are eligible for re-entry into the nursing program one time only. Students seeking re-entry, must meet with their advisor, develop a plan for success, and complete a re-entry checklist. In consideration for progression/re-entry to the nursing program, first preference is given to residents of Beaufort, Hampton, Jasper, and Colleton counties. Second preference is given to residents of other South Carolina counties, and finally residents from other states. All re-entry decisions are contingent on space availability. All health status and background requirements must be current or updated.

**Criteria**

A. Re-entry into the nursing program is contingent on
   1. plan for success approved by health sciences advisor.
   2. re-entry checklist completed and signed by health sciences advisor.

B. Student who left a nursing program for academic reasons and has two WFs or failures in any level nursing course but who has not completed PN option (eligible for PN option only)
   1. has successfully completed NUR 155 & NUR 158.
   2. plan for success approved by health sciences advisor.
   3. re-entry checklist completed and signed by health sciences advisor.

C. Advanced Placement Licensed Practical Nursing students must maintain an active license in addition to meeting criteria outlined above.

**STUDENT EXPENSES ASSOCIATED WITH GRADUATION/PINNING/LICENSURE**

The following items are expenses the student may expect to incur related to completing their program of choice, beyond tuition and books.

**Graduation:** rental of cap and gown  
[A suggestion was make to list costs associated with these items.]

**Pinning:** white uniform; new shoes; invitations; nursing pin; nursing lamp; nursing cap

**Licensure:** CNA exam; NCLEX fee (PN and RN); licensing fee (PN and RN)

**Miscellaneous:** tuition and hotel fee for overnight stay during NCLEX review courses

**USE OF ELECTRONIC DEVICES**

No pagers, phones, or any other electronic devices are allowed in the clinical facility. Phones, electronic devices, and other internet recording or messaging devices are not allowed in the clinical area and are not allowed during testing.

**CLINICAL BREAKS**

Students are eligible for a fifteen-minute break during clinical experiences that are less than seven hours. Students are eligible for a thirty-minute break during clinical experiences that are greater than seven hours. Students must notify the instructor upon taking a break and returning from a break. It is the student’s responsibility to ensure patient needs are met during their absence.

**CLINICAL ROTATIONS**

Students explore learning opportunities at multiple clinical sites throughout the Lowcountry. Students engage in various clinical rotations in Beaufort, Jasper, and Colleton counties as assigned. Students are accountable for all eligibility requirements stated in the TCL catalogue.

**TARDINESS**

Arrival to class, clinical, and lab by the published time is an expectation for all students. Class, clinical, and lab times are measured by the clock in these teaching areas. Failure to attend class, clinical, and lab on time as measured by the clock in these areas may result in point reductions. See course syllabi for details.
E-MAIL
It is the student’s responsibility to establish and monitor a current TCL email address.

DISTANCE LEARNING
The student will be required to attend some courses at the Beaufort campus. Please refer to TCL catalogue for more information.

STUDENT HEALTH
It is the student’s responsibility to provide required health documentation and provide notification of health changes as appropriate.

DEFINITION OF STUDENT COMPLAINT
A complaint is an oral or written claim concerning an academic issue or a college occurrence initiated by a student alleging improper or arbitrary treatment. Disagreement with an administrative decision is not a complaint unless it alleges improper or arbitrary treatment.

UNIFORM POLICY
The patient’s first impression is primarily based on appearance. Patients have more confidence in a clinician who is well groomed and presents a professional appearance. Therefore, TCL Nursing Programs adhere to the following student uniform policy related to the clinical setting.

ALL STUDENTS
1. Name pins and TCL photo ID are to be worn on right upper front of shirt. In addition, a color ribbon-denoting year of program is worn on right upper front of shirt, opposite left pocket.
2. Students must be in required, properly fitting uniform and comply with all regulations of nursing program of study. White clinical lab coats with TCL patch on left sleeve may be worn to the hospital but must be removed during patient care activities. Scrub jackets are optional. If scrub jacket is worn it must be the same color as the uniform with a patch on the left sleeve and be worn with college name pin and TCL photo ID.
3. Student uniforms are to be worn for college scheduled clinical sessions. Students may wear the student uniform only during activity associated with the college program. It is recommended that uniforms not be worn in public places.
4. Uniforms must be clean, pressed and in good repair.
5. Undergarments are required, must provide appropriate coverage, and be color-coordinated with uniform or not visible.
6. Plain white leather shoes with white shoeaces as appropriate. No color logos and/or designs. Entire foot must be covered. No sandals, canvas, or open toe shoes.
7. Students should refer to the syllabus for appropriate dress for observational experiences.
8. Faculty in the clinical area has the final decision on attire.
9. Clinical facilities may have different uniform requirements than detailed in this policy.

FEMALES
1. First Year: Properly fitting white scrubs with college patch above front left pocket. Blue ribbon worn on right side opposite pocket. Tops must have jewel-style neckline. If V-neck tops are worn, a plain white, short-sleeved, or long sleeved crew or mock neck shirt is to be worn under scrub top. Plain, white stocking without designs. Plain white knee-highs or socks may be worn only with slacks. Uniform dress is to be knee length.
2. Second Year: Properly fitting white scrubs with college patch above front left pocket. Black ribbon worn on right side opposite pocket. Tops must have jacket-style neckline. If V-neck tops are worn, a plain white, short-sleeved, or long sleeved crew or mock neck shirt is to be worn under scrub top. Plain, white stocking without designs. Plain white knee-highs or socks may be worn only with slacks. Uniform dress is to be knee length.

MALES
2. First Year: Properly fitting white scrubs with college patch above front left pocket. Blue ribbon worn on right side opposite pocket. Tops must have crew-style neckline. If V-neck tops are worn, a plain white, short-sleeved, or long sleeved crew or mock neck shirt is to be worn under scrub top. Plain white socks without design.
3. Second Year: Properly fitting white scrubs with college patch above front pocket. Black ribbon worn on right side opposite pocket. Tops must have crew-style neckline. If V-neck tops are worn, a plain white, short-sleeved, or long sleeved crew or mock neck shirt is to be worn under scrub top. Plain white socks without design.

Name pins may be purchased from Uniforms for the Low Country, 1400-A Ribaut Rd., Port Royal, 843-524-9355 or Buff’s, 1507 Salem Rd., Beaufort, and 843-524-3600. Orders should be placed 3 weeks prior to start of clinical.
Pre-clinical planning & other hospital &/or agency experiences  Students may wear appropriate attire with a white clinical lab coat (with TCL patch on left sleeve) & name pin & TCL photo ID for these sessions. Sandals, jeans, shorts, halter-tops, sweat suits, (tops or bottoms), tank tops, leggings, denim or denim-like material are not appropriate attire. In addition, neckline of blouse, shirt, or dress must be conservative. Material may not be transparent. “Underwear brands” of shirts may not be worn.

Classroom and learning lab  Students may wear appropriate attire as described in the current college catalog and student handbook.

Equipment for the clinical experience
1. Name pin and TCL ID photo ID. TCL photo ID badges are obtained from the TCL Learning Resources Center.
2. Stethoscope
3. Wrist or pocket watch with second counting capability
4. Bandage scissors
5. Pen light
6. Black ballpoint pen
7. Note pad

HYGIENE

Since the practice of nursing involves close physical contact with patients, during clinical experiences students are required to maintain professional standards of hygiene and grooming at all times. Daily showering/bathing, use of unscented deodorant, clean clothing, well-groomed haircut, and conservatively trimmed hair including mustache and beard, are required of all students at all times. Because some students and patients may be sensitive to scent, grooming products used should be unscented and colognes and perfumes should not be used. Smoking is discouraged, and if a student smokes, care must be taken to remove odors from clothing, skin and hair.

Miscellaneous
1. Jewelry
   a. No jewelry may be worn other than a wedding band and watch. No necklaces, bracelets or additional rings.
   b. Students with pierced ear lobes may wear one pair of small plain posts. No loops or other decorations.
   c. No additional visible body jewelry may be worn in the clinical setting.
2. Tattoos or other forms of body art must be covered.
3. Hair
   a. Must be arranged in a style that keeps it secured and off the collar.
   b. Fasteners should be of neutral color. Bows or ornate fasteners are not appropriate.
4. For patient safety, fingernails must be of fingertip length, neatly trimmed, filed, and clean. Students may wear clear nail polish. Acrylic, gel, or silk wrap nails are not allowed.
5. No chewing gum in clinical settings.
6. Perfume or strong shave lotions are not appropriate and may not be worn in clinical settings.
7. Proper personal and oral hygiene are required.
8. Students must adhere to the smoking policy of the clinical facility.

SECTION II: PROGRAM INFORMATION

AMERICAN NURSES ASSOCIATION (ANA) CODE OF ETHICS (2001)
(Code of Ethics available at the ANA website.)

CORE PERFORMANCE STANDARDS FOR ADMISSION AND PROGRESSION
With reasonable accommodation, the student should be able to demonstrate the following abilities.
1. Critical thinking ability sufficient for clinical judgment (e.g. identifies cause-effect relationships in clinical situations, develop plan of care).
2. Interpersonal abilities sufficient to interact with individuals, families, and groups from a variety of social, emotional, cultural, and intellectual backgrounds (e.g. establishes rapport with others).
3. Communication abilities sufficient for interaction with others in verbal and written form.
4. Physical abilities sufficient to move from room to room and maneuver in small spaces (e.g. moves around in patient’s rooms, workspaces, and treatment areas, administers cardiopulmonary resuscitation procedures).
5. Gross and fine motor abilities sufficient to provide safe and effective care (e.g. calibrates and uses equipment; positions patients).
6. Auditory ability sufficient to monitor and assess health needs (e.g. hears monitor alarms, emergency signals, auscultatory
sounds and range of sounds necessary to assess patient health status, cries for help).

7. Visual ability sufficient for observation and assessment necessary to provide care (e.g. observes physical condition and reads monitors and patient information systems).

8. Tactile ability sufficient for physical assessment (e.g. performs palpation, functions of physical examination and/or those related to therapeutic interventions i.e. insertion of a catheter).

Note: Examples are not all inclusive.

(Adapted from Southern Council on Collegiate Education for Nursing Core Performance Standard for Admission and Progression, reapproved 2004)
PROGRAM OUTCOMES

The Philosophy of the nursing program at the Technical College of the Lowcountry, which reflects faculty beliefs, serves as the foundation for a program of study that builds in complexity and scope.
Six major concepts emerge from the philosophical beliefs. These concepts include professional behavior, communication, teaching and learning, caring, holism and clinical competence. Functional Health Patterns, along with the six major concepts, establish the organizing framework for the program of study, giving structure and direction for learning activities and objectives.

<table>
<thead>
<tr>
<th>Concept &amp; definition</th>
<th>Nursing Assistant, Level I</th>
<th>Practical Nurse, Level II</th>
<th>Associate Degree Nurse, Level III</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Professional Behavior</strong></td>
<td>Demonstrate professional behavior in accordance with the nursing assistant’s defined scope.</td>
<td>Demonstrate acceptance of the guiding principles of the nursing profession.</td>
<td>Demonstrate acceptance of responsibility for improving and contributing to the integrity of nursing practice.</td>
</tr>
<tr>
<td>Integrity, guided by legal and ethical principles, is the hallmark of professional behavior. Advocacy, leadership, autonomy, &amp; collaboration are professional behaviors practiced within a defined scope.</td>
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<tr>
<td><strong>Communication</strong></td>
<td>Use effective fundamental communication with individuals, families, and staff.</td>
<td>Use effective interpersonal communication with individuals, families and members of the health care team.</td>
<td>Select effective strategies for communication with individuals, families, structured groups and members of the health care team.</td>
</tr>
<tr>
<td>Communication is the exchange of messages that occurs between individuals. Communication is multimodal and enhances the continuum of helping relationships. The use of effective communication facilitates trust.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Teaching/Learning</strong></td>
<td>Assist with the identification of learning needs of individuals.</td>
<td>Teach individuals basic health care related to commonly occurring health problems with predictable outcomes. Teaching is based on established plans.</td>
<td>Develop basic teaching plans for individuals and support persons that focus on health promotion and management of acute and chronic health problems.</td>
</tr>
<tr>
<td>Teaching and learning are interactive processes. Recognizing that learning proceeds from simple to complex, these processes are goal directed and based on the learner's needs.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Caring</strong></td>
<td>Respect the human dignity of individuals and their support persons.</td>
<td>Provide compassionate, nurturing care.</td>
<td>Create caring and empathetic relationships.</td>
</tr>
<tr>
<td>Support, sharing and respect embody caring behaviors. The caring relationship is a cornerstone of nursing practice.</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td><strong>Holism</strong></td>
<td>Provide care with consideration of basic physical, emotional and cultural dimensions of the individual.</td>
<td>Provide care with consideration of basic physical, psychosocial, cultural, spiritual and developmental dimensions of the individual.</td>
<td>Provide therapeutic care for individuals and support persons. Develop individualized plans of care based on nursing theory and research.</td>
</tr>
<tr>
<td>Holism encompasses recognition of the development of individuals over time. A person’s physiological, psychosocial, and spiritual health is dynamic. Persons are complex individuals who function within culturally diverse areas of society.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Clinical Competence</strong></td>
<td>Safely and effectively perform prescribed nursing interventions.</td>
<td>Use current accepted standards of care to assist individuals and families-support persons to meet basic health needs.</td>
<td>Formulate therapeutic clinical decisions based on current accepted standards of care for individuals and families-support persons.</td>
</tr>
<tr>
<td>Clinical competence is the provision of safe and effective nursing care within a scope of practice. It is the product of theory, research, knowledge, and learned nursing skills based on evidence-based practice.</td>
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Scope of Practice – The SC CIC Project prepared a document titled *A Model for Differentiated Entry Level Nursing Practice by Educational Program Type* in 1998. This model addresses the PN and ADN scope of practice. The practice scope of nursing assistants is adapted from the NNAAP (National Nurse Aid Assessment Program skills identification). 12/19/01.
PROGRAM DESCRIPTION: PHYSICAL THERAPIST ASSISTANT

TECHNICAL COLLEGE OF THE LOWCOUNTRY
921 Ribaut Road

Mailing address: P.O. Box 1288
Beaufort, SC 29901-1288
(843) 525-8324
1-800-768-8252
www.tcl.edu

PHYSICAL THERAPIST ASSISTANT PROGRAM CONTACTS
(843) 525-8267

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Telephone</th>
<th>Office</th>
<th>E-Mail Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cindy Buchanan, PhD, PT</td>
<td>PTA Program Director</td>
<td>525-8230</td>
<td>1/228</td>
<td><a href="mailto:cbuchanan@tcl.edu">cbuchanan@tcl.edu</a></td>
</tr>
<tr>
<td>Jennifer Culbreth, PTA, BS</td>
<td>Instructor</td>
<td>525-5956</td>
<td>4/125</td>
<td><a href="mailto:jculbreth@tcl.edu">jculbreth@tcl.edu</a></td>
</tr>
<tr>
<td>Maggie O’Sullivan, MSN, RN</td>
<td>Academic Program Coordinator</td>
<td>525-8326</td>
<td>4/110</td>
<td><a href="mailto:mosullivan@tcl.edu">mosullivan@tcl.edu</a></td>
</tr>
<tr>
<td>Marge Sapp, MSN, APRN, BC</td>
<td>Dean, Health Sciences Division</td>
<td>525-8276</td>
<td>4/109</td>
<td><a href="mailto:msapp@tcl.edu">msapp@tcl.edu</a></td>
</tr>
<tr>
<td>Veronica Navarro</td>
<td>Administrative Assistant</td>
<td>470-8378</td>
<td>4/108</td>
<td><a href="mailto:vnavarro@tcl.edu">vnavarro@tcl.edu</a></td>
</tr>
<tr>
<td>Joseph Griffin</td>
<td>Administrative Support</td>
<td>525-8267</td>
<td>4/101</td>
<td><a href="mailto:jgriffin@tcl.edu">jgriffin@tcl.edu</a></td>
</tr>
</tbody>
</table>

Other Important Contact Information:

American Physical Therapy Association (APTA)
1111 North Fairfax Street
Alexandria, Virginia 22314-1488
703/684-APTA (2782) * 800/999-2782 * 703/683-6748 (TDD) 703/684-7343 (fax)

South Carolina Chapter of the American Physical Therapy Association (SCAPTA)
3581 Centre Circle, Suite 104
Fort Mill, South Carolina 29715
803/802-5450
815/371-1499 (fax)

State Board of Physical Therapy (South Carolina)
South Carolina Department of Labor, Licensing, and Regulation 110 Centerview Drive
Synergy Business Park, Kingstree Building
P. O. Box 11329
Columbia, SC 29211-1329
803/896-4655
803/896-4719 (fax)
Part II of The Physical Therapist Assistant Program Student Handbook serves to supplement the current College Catalog/Student Handbook and the Division of Health Sciences Handbook in order to provide additional guidance for students enrolled in the Physical Therapist Assistant Program at Technical College of the Lowcountry. It thus outlines policies specific to the Physical Therapist Assistant Student. It also provides a framework for student performance and behaviors. Students are expected to become familiar with the content of this handbook. Should a student have questions or concerns related to the content of this handbook, he or she should contact the Physical Therapist Assistant Program Director immediately for clarification and resolution. Students are required to sign a Student Handbook Agreement verifying that they have received, have read and have understood the contents of this handbook and that they agree to abide by the handbook during their tenure in the program (Please refer to Appendix C.). Students should however understand that as the PTA program continues to evolve, certain aspects of the program including but not limited to the curriculum plan, course work and clinical education may change. Students will be advised of such changes, but should also periodically check the TCL website for the latest updates.

Statement of Non-Discrimination

The Technical College of the Lowcountry is committed to a policy of equal opportunity for all qualified applicants for admissions or employment without regard to race, gender, national origin, age, religion, marital status, veteran status, disability, or political affiliation or belief. All programs, activities, rights and privileges generally accorded or made available are provided on a nondiscriminatory basis.

Americans with Disabilities Act

In accordance with the mission of the Technical College of the Lowcountry to provide quality affordable education to all citizens of the service area, the College complies with the requirements of the Americans with Disabilities (ADA). The President of the Technical College of the Lowcountry has appointed an ADA Coordinator and established an ADA committee to implement procedures in compliance with the Americans with Disabilities Act. The ADA contacts are: Director of Student Support Services (843-525-8228) and Vice President of Finance (843-525-8251).

The Technical College of the Lowcountry provides access, equal opportunity and reasonable accommodation in its services, programs, activities, education and employment for individuals with disabilities. To request disability accommodation, contact the counselor for students with disabilities at (843) 525-8228 during the first ten business days of the academic term.

Complaints

Concerns or complaints may arise that are outside the scope of the grievance procedure or that cannot be resolved by communication with the Technical College of the Lowcountry PTA Program faculty. Individuals may use the “Contact TCL” link on the TCL web page to file such concerns. Remarks submitted via the website are first read by a member of the TCL public relations department. The public relations department will forward the complaint to the appropriate personnel. Complaints against the PTA Program, are forwarded to the Health Sciences Division Dean, who then discusses the issue with the PTA Program Director. Once an investigation is completed, the PTA Program Director, the Division Dean and the Vice President for Academic Affairs review the findings and determine the appropriate course of action. Documentation regarding complaints is stored with the Program Director and the Dean.
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Appendix C  PTA Program Statistics
The Physical Therapist Assistant Program

Program Summary

The Physical Therapist Assistant (PTA) Program at Technical College of the Lowcountry (TCL) is a two-year, five semester program leading to an Associate Degree in Health Sciences. Course work in the Program consists of classes in general education, health-related sciences and professional course work. Formal clinical education courses are scheduled during the third, fourth, and fifth semesters.

Program Philosophy

The philosophy of the Physical Therapist Assistant (PTA) Program is congruent with the mission of the Technical College of the Lowcountry (TCL). The PTA Program faculty serves the profession, community and society. Both TCL and the PTA Program strive to create an atmosphere of excellence in teaching and learning. Within the college’s open atmosphere of shared values, the PTA Program encourages creativity, innovation, and resourcefulness among its students and faculty. With these commitments, a positive, student-centered environment is created and individuals are empowered to learn and develop throughout their lifetimes.

Physical therapy is at once both a science and an art. Only through a careful blending of these two components can optimal patient care be provided. For this reason, the PTA Program strives to instill clinical decision making and technical skills into a strong framework of ethics and compassion. Theory and research drive the science of physical therapy while caring serves to promote dignity and creates a climate of support that is respectful and accepting of each person’s beliefs, culture and lifestyles. With these values in mind, the PTA Program at TCL has been created to prepare individuals to come into the healthcare arena with confidence and competence as entry-level practitioners.

Physical therapy education uses biological, behavioral, and physical therapy sciences to provide students with the opportunities to meet their learning needs. It is the responsibility of the faculty to develop, implement, and evaluate the program and to promote an environment that fosters mutual respect and the development of self-initiated personal and professional goals. It is the responsibility of the student to be an active, committed partner in the educational process by critically examining information and reflecting upon concepts, beliefs, and ideas. Only through this partnership will both student and program outcomes be achieved.

Program Fundamentals

The mission of the Physical Therapist Assistant Program at Technical College of the Lowcountry is to provide the community with highly trained, competent Physical Therapist Assistants. To support this mission, the goal of the Physical Therapist Assistant Program is to provide a comprehensive curriculum to prepare the physical therapist assistant student with the knowledge and abilities necessary for entry-level practice and to provide eligibility to successfully sit for the National Physical Therapy Exam (NPTE) for Physical Therapist Assistants.

PTA Core Performance Skills

As part of your acceptance into the Physical Therapist Assistant Program it is important for students to understand that working as a PTA requires certain minimum functional abilities. Please review the list of skills on the following pages. If a student is unable to meet the required “Core Performance Skills” the student should consult with program faculty in order to determine, on a case by case basis, whether or not reasonable accommodations can be made that would permit the student to meet these “Core Performance Standards”.

Speech:
   a) Must be able to speak with clarity
   b) Must be able to communicate with clarity

Hearing:
   a) Must engage in conversation with patients, families, and other health professionals
Sight:
  a) Must be able to see to read and to have good depth perception with either natural or corrected vision

Lifting:
  a) Must always be able to lift weights up to 10 pounds in 100% of all job situations.
  b) Must frequently be able to lift weights between 25-50 pounds in 75% of all job situations.
  c) Must occasionally be able to lift weights of 50-100 pounds in 30% of all job situations.

Pushing/Pulling:
  a) Must always be able to push/pull weights of 10 pounds in 100% of all job situations.
  b) Must frequently be able to push/pull weights of 25-50 pounds in 75% of all job situations.
  c) Must occasionally be able to push/pull weight of 50-100 pounds in 30% of all job situations.

Mobility:
  a) Must be able to stand, move about the facility, bend, crawl, crouch, rotate the trunk, walk (forward, sideways and backward) and climb stairs with a handrail in 76-100% of all job situations

Balance:
  a) Must be able to maintain single limb support in both legs with eyes open for 30 seconds each in 30% of all job situations.
  b) Must be able to reach forward 6 to 8 inches in 2 leg standing without loss of balance in 30% of all job situations.

Movement Transitions:
  a) Must be able to perform the following movement transitions with ease on a daily basis supine to/from standing position supine to/from sitting position sitting to/from standing position kneeling on floor to/from standing position squatting to/from standing position.

Reaching:
  a) Must be able to reach overhead, in front of the body and down on a daily basis in 76-100% of all job positions.

Grasping:
  a) Must be able to grasp in an overhead position, in front of the body and down on a daily basis in 76-100% of all job positions.

Sitting:
  a) Must be able to sit for up to 15 minutes at a time on a daily basis in 30% of all job positions.

Fine Motor Control:
  a) Must have fine motor control of the wrist and hands with finger dexterity and tactile sensation in 76 to 100% of all jobs.

Coordination:
  a) Must have eye/hand and eye/hand/foot coordination in 76 to 100% of all job positions.

Allergies:
  a) Must have tolerance to latex in 76 to 100% of all job positions
Essential Cognitive/Mental Skills

Reasoning:
   a) Must be able to deal with abstract and concrete variables, define problems, collect data, establish facts, and draw valid conclusions
   b) Must be able to interpret instructions furnished in oral, written, diagrammatic, or schedule form
   c) Must be able to deal with problems varying from standard to unpredictable situations
   d) Must be able to carry out simple to complex writing and oral instructions
   e) Must be able to perform complex or varied tasks
   f) Must be able to carry out at least one or two step instructions
   g) Must be able to make generalizations, evaluations, or decisions without immediate supervision

Mathematics:
   a) Must be able to perform simple to complex mathematical skills including addition, subtraction, multiplication and division of whole numbers; fractions; calculation of time increments; and simple measurements

Reading:
   a) Must be able to comprehend medical records, manuals, journals, instruction in use and maintenance of equipment, safety rules and procedures and drawings.

Writing:
   a) Must prepare medical documentation, report summaries using the prescribed format and conforming to all rules of punctuation, spelling, grammar, diction and style

Perception:
   a) Must be able to comprehend forms in space and understand relationships of plane and solid objects; frequently described as the ability to “visualize” objects of two or three dimensions, or to think visually of geometric forms.
   b) Must be able to perceive pertinent detail in objects or in pictorial or graphic material; to make visual comparisons and discriminations and see slight differences in shapes and shadings of figures and widths and lengths of line.

Clerical:
   a) Must be able to perceive pertinent detail in verbal or tabular material; to observe differences in copy, to proof-read words and numbers, and to avoid perceptual errors in arithmetic computation.

Data:
   a) Must be able to manipulate date in the following ways:
      1. synthesis
      2. coordination
      3. analysis
      4. compilation
      5. computation
      6. copying
      7. comparison

Personal Traits:
   a) Must be able to comprehend and follow instructions
   b) Must be able to perform simple and repetitive tasks
   c) Must be able to maintain a work pace appropriate to a given work load
   d) Must be able to relate to other people beyond giving and receiving instructions
   e) Must be able to influence people
   f) Must be able to accept and carry out responsibility for direction, control and Planning
Program Outcomes

Graduates of the Physical Therapist Assistant Program are able to:

1. Work under the direction and supervision of a licensed physical therapist in an ethical, legal, safe, and effective manner.
2. Implement selected components and interventions in a Plan of Care developed by a licensed physical therapist.
3. Comprehend the scientific basis for the physical therapy treatment plans established by the licensed physical therapist.
4. Collaborate with the supervising licensed physical therapist regarding patient progress and goal achievement.
5. Utilize critical thinking and problem solving strategies within the knowledge and limits of practice to achieve patient outcomes as directed by the licensed physical therapist.
6. Interact with patients and families in a manner which provides the desired psychosocial support including the recognition of cultural, developmental and socioeconomic differences.
7. Communicate verbally and non-verbally with physical therapists and other health care professionals in a positive and effective manner.
8. Participate in teaching other health care providers, patients, families and community groups.
9. Demonstrate the professional behaviors that reflect a commitment to the profession of physical therapy.
10. Identify career development and lifelong learning opportunities.

Program Curriculum

The Physical Therapist Assistant (PTA) Program at Technical College of the Lowcountry (TCL) is a rigorous and challenging curriculum. The curriculum is designed as a progression of increasing complexity. Pre-requisites and co-requisites thus have been established for each technical course within the program. All PTA courses (indicated with the course abbreviation PTH) must be taken in the semester indicated below:

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<th>FALL SEMESTER</th>
<th>Lect</th>
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</tr>
<tr>
<td>PTH 275 Advanced Professional Preparation</td>
<td>1</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>*** *** Humanities Elective</td>
<td>3</td>
<td>0</td>
<td>3</td>
</tr>
</tbody>
</table>

**TOTAL PROGRAM CREDITS: 69**

### Standards for Progression and Graduation

In order for a student to receive endorsement for PTA licensure, the student must complete the last two semesters (25%) of PTA courses at TCL. Should the student believe he/she has extenuating circumstances that preclude meeting this policy; prior approval must be received from the Dean for the Division of Health Sciences and the Vice President for Academic Affairs at TCL.

1. All courses in the major of PTA must be completed within a three-year period from date of entry.
2. All courses must have prerequisites completed prior to progressing in the program. See the current college catalog and academic health science advisor.

### Re-entry into the PTA Program

In consideration for progression/re-entry to the PTA program, the first preference is to residents of Beaufort, Jasper, Hampton, and Colleton counties. The second preference is to residents of other South Carolina counties, and finally residents from other states. All re-entry decisions are contingent on space availability. All health status requirements must be current or updated.

Withdrawal from program based on:

<table>
<thead>
<tr>
<th>A. Student who left the PTA program for non-academic reasons</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Has GPA &gt; 2.0</td>
</tr>
<tr>
<td>2. Has not been out of program for &gt; 1 academic year</td>
</tr>
<tr>
<td>3. Must petition program director for re-entry.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Student who left the PTA program for academic reasons and has only one WF or failure in a PTH course</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Has GPA &gt; 2.0</td>
</tr>
<tr>
<td>2. Has not been out of program for &gt; 1 academic year</td>
</tr>
<tr>
<td>3. Must petition program director for re-entry.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Student who left the PTA program for academic reasons and has two WFs or failures in any level PTH course</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Not eligible for re-entry.</td>
</tr>
<tr>
<td>2. May re-apply to the program.</td>
</tr>
<tr>
<td>3. All PTA Program Acceptance Requirements must be met.</td>
</tr>
</tbody>
</table>

For re-entry, students must meet all Program admission requirements.

1. Each request for re-entry will be considered as a unique situation, taking individual circumstances and merit into consideration. No precedent will be set by the decision of the faculty.
2. A student petitioning for re-entry must be able to rotate through the approved clinical sites. The clinical facility utilized by the TCL program has the authority to deny a student the privilege of rotating through their facility. Rejection of a student by a clinical facility may result in denial of petition for re-entry.
3. Any student who has the course sequence interrupted for more than two semesters may be required to validate knowledge and skills as a condition for re-entry. This may be accomplished through testing or repeating previously completed courses.
4. A student is eligible for re-entry to the PTA Program one time only.

### Course Exam Procedures

The following guidelines are enforced during examinations given in the classroom.

1. All personal items [purses, book bags, etc.] must be placed at the front of the classroom or on the floor before a test begins.
2. Calculator may not be used. No electronic devices are allowed on the desk.
3. If a student must leave the room during a test, the test is turned in as complete prior to leaving. Students may not leave and return.
4. If a student wishes to speak with a proctor during an exam, he/she must raise his/her hand and wait for the proctor to approach. The proctor/faculty will not answer questions about the test while it is being administered.
5. Testing accommodations for students with learning disabilities can only be made based on written documentation from the TCL ADA Officer. It is the student’s responsibility to contact the ADA Officer (525-8219) to make an appointment for evaluation.
6. The proctor may institute additional testing procedures.
7. Students unable to attend a scheduled exam must notify the course coordinator prior to the exam administration.
8. In general, 60 minutes are allowed for 50 items tests.

**Laboratory Practice**

Many of the vital learning activities in the Physical Therapist Assistant Program will be conducted in the laboratory setting. In addition, review and practice time will be scheduled when requested. These sessions will be supervised by an on-site faculty member however the faculty member may not necessarily be in the lab during the entire review session. Rules regarding open lab sessions are as follows:

1. Students may not work alone in the laboratory.
2. Students are not allowed in the laboratory unless a faculty member is on-site.
3. Electrical equipment may not be used unless a faculty member is present in the lab.
4. Safety guidelines are to be followed at all times.
5. All equipment should be turned off, and the area cleaned after use.

Failure to comply with these rules may result in a student or students losing the privilege to utilize the laboratory without a faculty member present.

**Program Expenses**

Students are required to purchase the required text books for each course. Text for professional courses (PTH prefix) will total approximately $700 for the entire program. Students may also be required to purchase textbooks for general education courses. During the third, fourth, and fifth terms, students will be required to pay a fee for malpractice insurance.

**Graduation/Licensure Expenses**

The following items are expenses above and beyond tuition and books that students may expect to incur related to completing their program of choice

**Graduation:** Rental of cap and gown

**Licensure:** PTA NPTE examination fee; State licensing fee

**Miscellaneous:** If student chooses to complete an examination review course, related expenses may include registration fees and hotel fees for overnight stay during review course if applicable
Physical Therapist Assistant Professionalism

American Physical Therapy Association (APTA)

PTA students are encouraged to join the American Physical Therapy Association (APTA) as their first professional organization. The purpose of student involvement in the APTA is to assume responsibility for contributing to the profession of physical therapy in order to provide for the highest quality of health care and to aid in the development of his/her professional role and responsibilities as a healthcare provider.

Guidelines for Professional Conduct

Students are expected to follow professional standards of conduct when in the classroom, laboratory, and clinical settings. Guidelines for these standards are as follows:

2. American Physical Therapy Association (APTA) Standards of Ethical Conduct for the Physical Therapist Assistant. (See Appendix A)
3. Policies and Procedures of the Division of Health Sciences and TCL.
4. Policies and Procedures of the clinical facility (for clinical experiences and scheduled laboratory sessions within a clinical setting).

Professional Conduct in Patient Care Environns

When laboratory sessions are held in patient care environments, students are expected to present a neat, professional appearance and to comply with the dress code. Students demonstrating inappropriate behaviors in a patient care setting will be dismissed from the facility, undergo disciplinary procedures including possible dismissal from the program, and may be assessed grading penalties related to the behavior. During fulltime clinical experiences, students whose behavior does not conform to professional standards of conduct may be dismissed from the clinical setting. The student may be required to make-up clinical time missed under such circumstances at the convenience of the faculty and the clinical education site. A student whose behavior threatens or endangers the well being of the patient will be terminated from the course and a grade of "F" will be issued for the course.

Personal Appearance

It is extremely important to maintain a professional appearance when in a clinical setting. First impressions are primarily based on appearance. Patients have more confidence in a clinician who is well groomed and professionally dressed. It is equally important that students be appropriately attired for laboratory activities. Therefore PTA students are required to adhere to the following dress code:

Classroom Setting: Male students are to wear neutral colored slacks and a collared shirt with sleeves.
Female students are to wear slacks, skirts or capri length pants with a conservative top. Walking shorts are permissible during summer months. Jeans and tank tops are not acceptable. Clothing should not be transparent or see-through in any way.

Laboratory Activities: Shorts and a T-shirt are the required attire for laboratory activities. A sweatshirt or sweatpants may be worn over these if such clothing does not interfere with the laboratory activities. Clothing must allow access to various parts of the body during specified laboratory activities. Female students will thus wear a sports bra, bathing suit top or halter top under their shirt. Male students may be required to remove their shirt. Fingernails must be clean and no longer than 1/4 inch in length to allow students to practice techniques for the provision of physical therapy without risking damage to the skin of their laboratory partner. Failure to comply with the dress code will result in dismissal from the lab, resulting in an unexcused absence.
PTA Laboratory

Laboratory Partners

In the clinical setting, students will treat a wide variety of patients. To help prepare students for this diversity in clinical practice, students will be required to practice laboratory activities with all classmates.

PTA laboratory sessions are designed to recreate the clinical setting. It is thus important that each student in the laboratory setting be afforded the same courtesy, dignity and respect that would be provided to a patient receiving professional services. Lab sessions addressing specific areas of anatomy will require that the associated body parts be exposed. It is the obligation of each student to provide proper positioning and draping for his or her laboratory partner.

Photographs

Photographs of classmates may be taken during lab sessions if they do not disrupt the class. Any photographs taken during lab are for personal viewing only and may not be posted on any internet sites or other media outlets without written permission of the program director and all persons included in the photograph. Posting of photographs without such permission is grounds for dismissal from the program.
PTA Clinical Education Program

Overview of the TCL Clinical Education Program

Fulltime clinical education experiences are an integral and vital part of preparing PTA students for clinical practice. Clinical education allows students to integrate theories from the basic and clinical sciences with the patient care. At the same time, students involved in clinical education refine didactic skills, acquire knowledge and develop professional values. When engaged in fulltime clinical education, PTA students work with experienced physical therapists and physical therapist assistants who act as clinical instructors. To assist clinical instructors in their vital role, the PTA Program at TCL has developed a Clinical Instructor Manual that serves to guide the clinical education process. Copies of this manual are reviewed in pre-clinical education meetings prior to the onset of the fulltime clinical education experiences. Students are responsible for the information in the PTA Program Student Handbook. Please direct any questions regarding clinical education to the PTA Program’s Academic Coordinator of Clinical Education (ACCE).

The following is a listing of the Fulltime Clinical Education courses within the PTA curriculum:

<table>
<thead>
<tr>
<th>Course</th>
<th>Description</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>PTH 252: Clinical Practice</td>
<td>10 week, part-time Clinical Education</td>
<td>80</td>
</tr>
<tr>
<td>PTH 253: Clinical Practice II</td>
<td>4 weeks, full-time Clinical Education</td>
<td>160</td>
</tr>
<tr>
<td>PTH 266: Physical Therapy Practicum I</td>
<td>8 weeks, full-time Clinical Education</td>
<td>320</td>
</tr>
<tr>
<td><strong>Total Required Clinical Education Time:</strong></td>
<td></td>
<td><strong>560</strong></td>
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</tbody>
</table>

Specific dates for each clinical will be provided to students at the start of the appropriate semester.

Attendance

In the event of unavoidable clinical absence, the student must comply with the following protocol:

1. Students are required to follow the “call-out” procedures of the clinical facility to which they are assigned.
2. In addition, the student must telephone the ACCE or another PTA academic faculty member no later than 8 pm of the clinical day that will be missed.
3. Failure to follow these procedures will result in course failure. No call, no show” during a clinical assignment is unprofessional conduct and the student will be withdrawn from the program.

In the event of missed clinical hours, students will be required to make-up clinical education time as deemed appropriate by the CI and the ACCE. TCL academic faculty encourage any missed clinical education hours to be made-up whenever possible. Make-up hours are scheduled at the convenience of the clinical site and must be approved in advance by the ACCE.

Clinical Education Schedule

Students are expected to attend all scheduled clinical education hours. The specific hours of each clinical education experience will be determined by the clinical instructor. For many clinical sites, scheduled hours will include weekend and evening hours. The clinical instructor has the final authority when determining a student’s schedule for clinical education.

Assignment of Clinical Education Sites

In order to provide students with varied and comprehensive clinical education experiences, various clinical sites within a wide geographical area are utilized as part of clinical education. Although clinical education sites are typically local, in some cases students must be placed outside the local area due to the availability of appropriate clinical slots. In such cases, the student will be responsible for all transportation and living arrangements during the clinical. The ACCE will assign students to clinical facilities based on site availability and curricular needs. Student preferences for clinical sites will be considered during the assignment process. This does not guarantee that a student will be assigned to a requested facility. The final determination of clinical assignments is made by the ACCE. Students are not permitted to negotiate with clinical sites for placement. Should a student wish to have a clinical site added to the listing of available clinical sites, the student should make such a request in writing to the ACCE.

Family members attending the PTA program will not be assigned to the same clinical environment. In addition, students will not be assigned to the same clinical environment in which themselves or a family member is employed.
The ACCE will provide the clinical sites with student assignments and applicable student information prior to the scheduled start of a clinical education assignment. The student information packet will include the following items: a completed copy of the Student Data Sheet, copies of student performance evaluation forms (PTH 252 Clinical Performance Tool or PTA CPI), a copy of the appropriate syllabus, pertinent health records, drug screen and a completed background check.

**Conviction of a Crime**

Students in the PTA Program are required to have criminal background checks in order to complete clinical education assignments. Depending on the policies and procedures of the clinical site, conviction of a crime (other than a minor traffic violation) may make a student ineligible for scheduled clinical experiences. Students in the PTA program must be eligible to complete their clinical education at any available clinical education site.

**Clinical Site Visits by TCL PTA Faculty**

In addition to telephone communications, clinical site visits promote communication and interaction between the clinical education site and the TCL PTA Program. Clinical site visits can be made at anytime by the request of the clinical instructor, the CCCE or the student. For clinical sites within the TCL four-county service region, PTA faculty will make every effort to visit each student at least one time during each clinical education experience. Such visits will be scheduled at the convenience of the clinical facility. Faculty will document clinical site visits utilizing the *Faculty Clinical Site Visit Form*.

**Clinical Education Roles and Responsibilities**

Effective clinical education involves a cast of five key players: the patient, the student, the Clinical Instructor (CI), the Clinical Coordinator for Clinical Education (CCCE), and the Academic Coordinator of Clinical Education (ACCE). Each individual has responsibilities and obligations with regard to the delivery of appropriate patient care. The student, the CI, the CCCE and the ACCE, however also have responsibilities in preparing the student for ethical, legal, and safe entry-level patient care and professional skills. Integrating the responsibilities related to the student with those related to patient care can sometimes be a challenge for the CI. It is important to remember, however, that the CCCE and the ACCE have the responsibility to assist and support both the CI and the student such that both patient care and clinical education objectives can be successfully achieved.

The clinical education responsibilities of the ACCE, the CCCE, and the CI are quite involved and are listed as follows:

**The responsibilities of the ACCE are to:**

1. Establish relationships with clinical education sites and clinical education faculty.
2. Plan, implement and refine the clinical education components of the TCL PTA Program in collaboration with academic faculty, clinical education faculty, the TCL PTA Program’s Advisory Committee and students.
3. Facilitate communication between the clinical education sites and the TCL PTA Program before, during and after the clinical education experiences.
4. Maintain updated files related to each clinical education site including *Clinical Site Information Forms (CSIF)*, *Student Evaluations of the Clinical Education Experience* and other pertinent information. (*Memoranda of Agreement* are maintained by the PTA Program Director)
5. Maintain updated student files related to clinical education including completed clinical performance evaluations, student information, student contact sheets and other necessary student information.
6. Facilitate problem-solving interventions during clinical education experiences as indicated.
7. Coordinate student clinical education site assignments.
8. Assign student grades for clinical education experiences based on the feedback provided from the clinical instructors through the clinical performance evaluations.
10. Assist in professional development activities for clinical education faculty.
11. Participate in professional development activities to further develop skills as an ACCE.
12. Assign the academic grade for all clinical education courses per the course syllabus and the Health Sciences Division policy.
The responsibilities of the CCCE are to:

1. Administer his/her facility’s clinical education program in accordance with the policies and procedures of the specific facility.
2. Coordinate student assignments at the clinical education site.
3. Select qualified clinical instructors for each student assignment.
4. Ensure that students are oriented to the individual facility.
5. Facilitate communication between the clinical education sites and the PTA Program before, during and after the clinical education experiences.
6. Ensure completion of the Clinical Site Information Form (CSIF).
7. Distribute to the clinical instructors information related to the PTA Program.
8. Support the professional development of clinical instructors.
9. Assist the clinical instructor in developing, planning and evaluating student activities and performance.
10. Immediately communicate to the ACCE any concerns regarding student performance or behavior.
11. Seek assistance from the ACCE as needed.
12. Participate in professional development activities to further develop skills as a CCCE.

The responsibilities of the Clinical Instructor are to:

1. Provide effective clinical instruction for the PTA student.
2. Demonstrate and model ethical, legal, and competent physical therapy practice patterns.
3. Provide orientation to students regarding the facility including relevant policies, procedures and safety measures within the first few days of the clinical education experience.
4. Work with the student to outline objectives for the clinical education experience.
5. Provide feedback regarding student performance and behavior in a regular and appropriate manner that maintains student privacy within the clinical setting.
6. Ensure student competence in new techniques learned at the clinical facility.
7. Ensure that patients and families are informed when students are involved in patient care.
8. Perform mid-term and final assessments of student performance and behavior utilizing forms provided by the TCL PTA Program.
9. Seek assistance from the CCCE and the ACCE as needed.
10. Immediately communicate to the ACCE and CCCE any concerns regarding student performance or behavior.
11. Participate in professional development activities to further develop skills as a CI.

Of all the players in clinical education, it is the student who has the ultimate responsibility for insuring the success of his/her own clinical education experience. Students must present themselves to the clinical site each day ready and willing to learn. They must be open to constructive feedback and input from the CI. They must conduct themselves in an appropriate and professional manner at all times and be willing to stretch the limits of their abilities each and every day. They must also commit to preparing for each day of the clinical experience through study and review outside of the clinic setting. Perhaps most importantly, they must recognize that they are accountable for their own learning and development. In addition to these factors,

The responsibilities of the student are to:

1. Complete all necessary academic requirements leading up to the clinical education experience. Students not meeting these requirements as outlined in the PTA and TCL Student Handbooks will not be permitted to enroll in clinical education courses.
2. Complete all necessary pre-clinical education requirements as outlined in the course syllabus, and the PTA, Health Sciences Division, and TCL Student Handbooks.
3. Actively participate in the clinical site selection process.
4. Contact the clinical site to which they are assigned at least four (4) weeks prior to the start of the clinical education experience. With this initial contact, students should introduce themselves and request information from the clinical site regarding the clinical schedule, dress code, etc.
5. Provide clinical sites with any required information including but not limited to contact information, immunization and health status, proof of insurance, etc.
6. Participate in Criminal Background Checks as required by the clinical site.
7. Participate in any alcohol or drug screening processes required by the clinical site.
8. Comply with all polices and procedures of the clinical site including those related to smoking, phone use, dress code,
9. Attend all scheduled clinical education experiences as directed by the CI including any weekend or evening hours as assigned by the clinical education site. Students must be on time for all clinical education experiences. Tardiness will not be tolerated.

10. Adhere to the ethical standards of practice and conduct as outlined by: the South Carolina Physical Therapy Practice Act, the American Physical Therapy Association (APTA) Standards of Ethical Conduct for the Physical Therapist Assistant (See Appendix A), Policies and Procedures of the Division of Health Sciences and TCL, and the policies and procedures of clinical facilities.

11. Participate openly and honestly in self-assessment activities.

12. Complete all required assignments and clinical evaluation forms per the course syllabus.

**Student Accountability**

During clinical education experiences, each student is a representative of the TCL PTA Program. As such, students must comply with all TCL and PTA Program policies when participating in clinical education. In addition, when students are at a clinical site, they are responsible for abiding by all policies and procedures of that clinical site.

**Student Use of Downtime**

Students will find that most of their time in a clinical facility is spent in direct patient care or in activities that relate directly to patient care, such as documentation. Should students find themselves in the position of having downtime while at a clinical site, they should offer their time to assist the clinical instructor or other members of the physical therapy department. Should a student’s assistance not be needed at that particular time, the student should engage in professional development activities such as reading a professional journal, learning about a specific intervention technique or condition, or if permitted, observing another rehabilitation professional at work. Students should not be making personal phone calls from the clinic, engaging in idle chatter while at the clinic or performing any other non-professional tasks (such as reading the paper, reading non-professional magazines, filing nails, etc.) while at the clinical site.

**Student Dress Code and Personal Appearance**

When in the clinical setting, students’ apparel and grooming must conform to health, sanitation, and safety standards. Students thus must adhere to the following requirements unless otherwise directed by the faculty or clinical instructor:

1. The required clinic attire for students includes wearing the TCL photo ID badge or other student ID badge as required by the clinical facility. Students can obtain a TCL photo ID badge at the TCL Learning Resource Center.
2. Students must have with them a black ink pen and a notebook.
3. Students are to wear khaki, black or navy chino pants with a belt and a collared shirt with sleeves. Clothing should not be transparent or see-through in any way. Clothing must be clean and free of stains and wrinkles, and must be of a type that does not limit the ability to perform patient care activities. Shoes must be worn with socks and must have closed toes and flat heels. Rubber soles are recommended for comfort in the clinic. Hair must be maintained off the collar and away from the face. Ornate hair fasteners are not appropriate. Students with a beard or mustache must keep it neat, clean and well trimmed. Fingernails must be clean and no longer than 1/4 inch in length. Only clear or neutral colored nail polish is permitted and artificial nails of any type are not allowed. Jeans, mini-skirts, T-shirts, and shorts are not acceptable clinical attire.
4. If the clinical site requires, students will comply with the clinical site policy of wearing scrubs.
5. Only the following items of jewelry are permitted: wedding bands, medical identification bracelets, and small, plain stud earrings; other visible forms of body jewelry may not be worn in the clinical setting. A watch with a second hand must be worn.
6. Tattoos and other forms of body art must be covered.
7. The close physical contact that is necessary in the clinic requires consistent attention to personal hygiene. To prevent offending patients or lab partners, students should use deodorant and maintain proper oral hygiene at all times.
8. Perfume or strong after-shave lotions are not appropriate in clinical settings.
9. Gum chewing and tobacco chewing are not permitted in clinical settings.
10. Failure to comply with the dress code will result in dismissal from the clinical area resulting in an unexcused absence.
When in a clinical setting, if the dress code of the facility is more stringent than the guidelines set by TCL, students are expected to follow the dress code of the facility. If the TCL guidelines related to appearance are more stringent, then the TCL guidelines are to be followed.

**Evaluation of Student Clinical Performance**

For PTH 252, the CI will assess student clinical performance using the TCL PTH 252 Clinical Performance Tool. This tool focuses on assessment of basic data collection skills (goniometry, manual muscle testing, etc), application of select modalities, use of therapeutic exercise, and documentation as guided by the CI. For PTH 253 and PTH 266, student clinical performance is assessed by the Clinical Instructor as guided by the Physical Therapist Assistant Clinical Performance Instrument (PTA CPI). The American Physical Therapy Association (APTA) developed this document, which allows for an objective assessment of the student's skills as performed at the clinical site. With the PTA CPI, the CI formally assesses student performance at the midpoint of the clinical experience and again on the conclusion of the clinical experience. In addition to these formal assessment periods, the PTA CPI can also serve as a tool to guide feedback sessions with students. The completed PTA CPI is returned to the PTA Program Academic Coordinator of Clinical Education (ACCE) for review. Clinical instructors should be familiar with the PTA CPI prior to using the tool with students. In-servicing regarding the PTA CPI can be scheduled by contacting the TCL PTA Program academic faculty.

In addition to the clinical performance tools completed by clinical instructors, all students are required to submit to the PTA Program ACCE any assignments regarding their clinical experiences utilizing a format provided. Students must complete and submit all required clinical education paperwork per the course syllabus.

**TCL Criteria for Clinical Site Selection**

Clinical education sites for the TCL PTA Program are selected according to the following criteria:

1. A written, up-to-date Memorandum of Agreement (MOA) is on file.
2. The clinical facility demonstrates value for the role of clinical education in preparing physical therapy professionals for entry-level, competent practice.
3. Professionals at the clinical facility desire to participate in the PTA clinical education program.
4. The clinical site is able to meet student and program objectives for clinical education.
5. The clinical site is able to provide an active, stimulating environment that is conducive to student learning.
6. The clinical site is located within the school’s geographical area. Clinical sites in other regions may be considered according to the educational or personal needs of the student.
7. The clinical facility engages in the safe, legal, and ethical practice of physical therapy.
8. The clinical facility employs an adequate number of physical therapists/physical therapist assistants willing to serve as clinical instructors.
9. The facility has an adequate number and variety of patients available to ensure that student learning objectives are achieved.
10. The clinical facility has a designated CCCE responsible for coordinating assignments and activities for TCL PTA students.
11. The CCCE maintains an open dialogue with the TCL ACCE regarding clinical education issues, concerns or questions.
12. Staff members at the clinical facility engage in professional development activities to further develop personal and technical skills.

**TCL Criteria for Clinical Instructor Selection**

Clinical Instructors for the TCL PTA Program are chosen by the CCCE of a Clinical Education site based upon the following TCL criteria:

1. The CI must be a licensed physical therapist or physical therapist assistant.
2. The CI demonstrates a desire to participate in the PTA clinical education program.
3. Clinical instructors must have a minimum of one-year experience as a physical therapist or physical therapist assistant.
4. Clinical instructors should have completed any new employee orientation and probationary periods at the assigned clinical site.
5. The CI values the role of clinical education in preparing physical therapy professionals for entry-level, competent practice.
6. The CI engages in the safe, legal, and ethical practice of physical therapy.
7. The CI demonstrates effective clinical instruction skills.
8. The CI demonstrates effective communication skills.
9. The CI demonstrates the ability to effectively evaluate student performance.
10. The CI continually communicates with students regarding their clinical performance by providing students with information on their clinical skills, behaviors, professional conduct, etc.

11. The CI communicates with the ACCE and CCCE and will immediately communicate to the ACCE and CCCE any concerns regarding student performance or behavior.
12. The CI engages in professional development activities to further develop personal and technical skills. Each CI is encouraged to complete the Clinical Instructor Credentialing Program offered by the American Physical Therapy Association (APTA)

Clinical Facility Occurrence or Incident Reports

Should a TCL PTA student be involved in an incident that has potential professional liability or legal implications, the following procedures should be followed:

1. The student should immediately report the incident to his or her CI who will initiate the policies and procedures of the clinical education site with regard to such incidents.
2. The student must report the incident to the ACCE as soon as possible and provide the ACCE with written documentation related to the event. The TCL PTA Program academic faculty and the Health Sciences Division Dean will review the documentation.
3. Should a student receive any official document related to a compensable event, the student must immediately furnish a copy of the said document to the ACCE. The ACCE will provide copies of this document to the TCL PTA Program academic faculty and the Health Sciences Division Dean for review and necessary action regarding notification of the professional liability (malpractice insurance) carrier and other TCL personnel.

Procedures for Discontinuing a Clinical Education Experience

While it is the desire of the TCL faculty to work with the clinical site to remediate any issues or problems that occur in the clinic, it is sometimes necessary for a student to discontinue a clinical education experience. It is important that the following procedures be followed should a clinical education experience need to be discontinued:

1. If a student is unable to complete an assigned clinical education experience due to an unforeseen medical or significant family emergency, the student should contact the ACCE or other designated PTA Program faculty member immediately. The ACCE will work with the student and the clinical site to develop an individualized plan by which the student can attend to the medical or significant family emergency and then return to complete the clinical education experience. In some cases, the student may be required to complete the clinical education experience at another clinical site. Students should be aware that all clinical education courses must be successfully completed in order to continue in the PTA curriculum.
2. If a Clinical Instructor identifies serious or major concerns regarding student performance, behavior or conduct, it is important the CI take the following steps:
   a. The CI or the CCCE must contact the ACCE immediately. This is especially important for concerns and issues related to “Red Flag” items on the PTA CPI (Items 1-5) which address safety, conduct, respect, ethics, and legal issues.
   b. The ACCE and the TCL PTA Program academic faculty will consult with the CI and the CCCE and if possible, develop a comprehensive remedial plan to address learning needs of the student. Should it be indicated, the Department Director or other designated supervisory/administrative personnel from the clinical site may be asked to participate in developing the remedial plan. The student will then be informed of the plan and will sign a learning contract related to the remedial plan. The PTA academic faculty will assist the CI and the ACCE in implementing the remedial plan up to and including working one-on-one with the student. The ACCE will also meet individually with the student and counsel the student regarding the performance issues. The ACCE will document the counseling session using the PTA Program’s Student Counseling Form.
   c. Should the Clinical Instructor, CCCE and the ACCE determine that the student must be removed from the clinical site or if the CI is unwilling to allow the student to continue at the clinical site, the TCL PTA Program academic faculty will meet to determine an appropriate plan of action and will present such a plan to the Division of Health Sciences’ Admission-Progression and Graduation (APG) Committee for consideration and approval.
3. If a student has concerns regarding the safe, ethical or legal practice of a CI or clinical site, the student must contact the ACCE immediately. The ACCE will then investigate the student’s concerns. The PTA academic faculty and the Health Sciences Division Dean in collaboration with the ACCE will determine a course of action that is in the best interest of the student, the program, and the clinical site. In the event that it is deemed necessary to remove that student from the clinical site, the student will be reassigned to an appropriate clinical site in a timely manner. PTA Program faculty and the Health Sciences Division Dean will determine the specifics of a reassignment.
Safety

For a complete overview of campus security procedures refer to the TCL Student Handbook which available online at www.tcl.edu.

Laboratory Safety and Informed Consent

The purpose of laboratory-based clinical training in PTA education is to allow students to develop safe and competent performance in administering physical therapy measurement and intervention procedures before applying these techniques to patients in a clinic. Students in the PTA program thus participate in a variety of educational activities that require them to role play as a “therapist” and as a “patient”. Activities include, but are not limited to: treating and being treated with physical modalities (heat, light, water, sound, etc.); participation in physical activities such as lifting, carrying, falling, using crutches and wheelchairs; forms of physical exertion. Although carried out as a part of the typical coursework in a PTA program, participation in these activities may involve some degree of risk. It is the responsibility of each student to exercise common sense and judgment while engaged in learning activities. If for any reason a student is uncomfortable regarding the safety of an activity, it is the responsibility of that student to consult with an instructor prior to engaging in the activity. Students must sign the Laboratory Consent Form prior to participating in laboratory activities. A copy of this form is included in Appendix B of this handbook.

All laboratory equipment used for skill development must be used under the supervision, or with the approval of, PTA faculty members. PTA faculty members will check equipment safety prior to use in scheduled laboratory sessions. All equipment is to be inspected and necessary calibration performed on an as-needed basis (annually at minimum). All relevant operating instructions will be kept in the Equipment File.

The PTA Program maintains accessible Material Safety Data Sheets (MSDS) for all chemicals used within laboratory sessions. The MSDS is reviewed and updated annually.

General Safety Rules

1. Students should be aware of evacuation procedures and the location of fire extinguishers.
2. Hazardous conditions, broken equipment and defective tools should be reported to the instructor, the PTA Program Director, or the Division’s Administrative Assistant.
4. Never use chairs, carts, tables, counters, boxes, or other substitutes for ladders or work platforms.
5. Obtain operating instructions for all unfamiliar equipment. After use, put all equipment back in the proper place. Disconnect all electrical cords by grasping the plug and carefully disengaging.
6. Wipe up all spills immediately, regardless of who caused the spill. If unable to completely clean up the spill or if the floor remains slick after cleaning up the spill, report the area to the Division’s Administrative Assistant. She will then contact the appropriate personnel for the clean up.
7. The use of alcoholic beverages, narcotic drugs, or derivatives thereof on College property or at a college function is strictly prohibited.
8. If students are uncertain about any situation, they should consult with a faculty member before proceeding with an activity.

Serious Injury or Illness Procedures

In the event of a serious injury or illness requiring immediate, emergency medical attention while on campus, activate the Emergency system by dialing 9-911 from any College phone. After contacting 911, report the incident to Campus Security at 986-6971 or 812-4115. Please remember to dial 9 in order to obtain an outside line. If appropriate and the student has the background and training required, students should provide emergency first aid following universal precautions in handling body fluids including wearing of gloves and disposing of supplies properly. A small first aid kit is located in the Division’s Main Office on the first floor of the Health Sciences Building. Please refer to the TCL Student Handbook related to further requirements regarding accident reporting.

Physical Plant/Building Problems

For any building or physical plant problem, notify the Division’s Administrative Assistant and she will notify the appropriate personnel. This would include plumbing problems, spills, blown fuses or other electrical problems, heating/air conditioning malfunctioning, and ventilation problems.
Safety Procedures at Clinical Education Sites

When attending a scheduled clinical education experience or a field trip at a clinical site, students should follow the fire and other safety procedures of each clinical site. Such procedures will be reviewed with the student as part of the student orientation process. In the event of an emergency during a clinical education experience, the clinical facility will provide access to health care services through the facility’s emergency room or through the 911 system. In the event that a student requires health care services, the student assumes all financial responsibility for those services.
Appendix A

Preamble
The Standards of Ethical Conduct for the Physical Therapist Assistant (Standards of Ethical Conduct) delineate the ethical obligations of all physical therapist assistants as determined by the House of Delegates of the American Physical Therapy Association (APTA). The Standards of Ethical Conduct provide a foundation for conduct to which all physical therapist assistants shall adhere. Fundamental to the Standards of Ethical Conduct is the special obligation of physical therapist assistants to enable patients/clients to achieve greater independence, health and wellness, and enhanced quality of life.

No document that delineates ethical standards can address every situation. Physical therapist assistants are encouraged to seek additional advice or consultation in instances where the guidance of the Standards of Ethical Conduct may not be definitive.

Standards:

Standard #1: Physical therapist assistants shall respect the inherent dignity, and rights, of all individuals.

1A. Physical therapist assistants shall act in a respectful manner toward each person regardless of age, gender, race, nationality, religion, ethnicity, social or economic status, sexual orientation, health condition, or disability.

1B. Physical therapist assistants shall recognize their personal biases and shall not discriminate against others in the provision of physical therapy services.

Standard #2: Physical therapist assistants shall be trustworthy and compassionate in addressing the rights and needs of patients/clients.

2A. Physical therapist assistants shall act in the best interests of patients/clients over the interests of the physical therapist assistant.

2B. Physical therapist assistants shall provide physical therapy interventions with compassionate and caring behaviors that incorporate the individual and cultural differences of patients/clients.

2C. Physical therapist assistants shall provide patients/clients with information regarding the interventions they provide.

2D. Physical therapist assistants shall protect confidential patient/client information and, in collaboration with the physical therapist, may disclose confidential information to appropriate authorities only when allowed or as required by law.

Standard #3: Physical therapist assistants shall make sound decisions in collaboration with the physical therapist and within the boundaries established by laws and regulations.

3A. Physical therapist assistants shall make objective decisions in the patient’s/client’s best interest in all practice settings.

3B. Physical therapist assistants shall be guided by information about best practice regarding physical therapy interventions.

3C. Physical therapist assistants shall make decisions based upon their level of competence and consistent with patient/client values.
3D. Physical therapist assistants shall not engage in conflicts of interest that interfere with making sound decisions.

3E. Physical therapist assistants shall provide physical therapy services under the direction and supervision of a physical therapist and shall communicate with the physical therapist when patient/client status requires modifications to the established plan of care.

**Standard #4:** Physical therapist assistants shall demonstrate integrity in their relationships with patients/clients, families, colleagues, students, other healthcare providers, employers, payers, and the public.

4A. Physical therapist assistants shall provide truthful, accurate, and relevant information and shall not make misleading representations.

4B. Physical therapist assistants shall not exploit persons over whom they have supervisory, evaluative or other authority (e.g., patients/clients, students, supervisees, research participants, or employees).

4C. Physical therapist assistants shall discourage misconduct by healthcare professionals and report illegal or unethical acts to the relevant authority, when appropriate.

4D. Physical therapist assistants shall report suspected cases of abuse involving children or vulnerable adults to the supervising physical therapist and the appropriate authority, subject to law.

4E. Physical therapist assistants shall not engage in any sexual relationship with any of their patients/clients, supervisees, or students.

4F. Physical therapist assistants shall not harass anyone verbally, physically, emotionally, or sexually.

**Standard #5:** Physical therapist assistants shall fulfill their legal and ethical obligations.

5A. Physical therapist assistants shall comply with applicable local, state, and federal laws and regulations.

5B. Physical therapist assistants shall support the supervisory role of the physical therapist to ensure quality care and promote patient/client safety.

5C. Physical therapist assistants involved in research shall abide by accepted standards governing protection of research participants.

5D. Physical therapist assistants shall encourage colleagues with physical, psychological, or substance related impairments that may adversely impact their professional responsibilities to seek assistance or counsel.

5E. Physical therapist assistants who have knowledge that a colleague is unable to perform their professional responsibilities with reasonable skill and safety shall report this information to the appropriate authority.

**Standard #6:** Physical therapist assistants shall enhance their competence through the lifelong acquisition and refinement of knowledge, skills, and abilities.

6A. Physical therapist assistants shall achieve and maintain clinical competence.

6B. Physical therapist assistants shall engage in life-long learning consistent with changes in their roles and responsibilities and advances in the practice of physical therapy.

6C. Physical therapist assistants shall support practice environments that support career development and life-long learning.
**Standard #7:** Physical therapist assistants shall support organizational behaviors and business practices that benefit patients/clients and society.

7A. Physical therapist assistants shall promote work environments that support ethical and accountable decision-making.

7B. Physical therapist assistants shall not accept gifts or other considerations that influence or give an appearance of influencing their decisions.

7C. Physical therapist assistants shall fully disclose any financial interest they have in products or services that they recommend to patients/clients.

7D. Physical therapist assistants shall ensure that documentation for their interventions accurately reflects the nature and extent of the services provided.

7E. Physical therapist assistants shall refrain from employment arrangements, or other arrangements, that prevent physical therapist assistants from fulfilling ethical obligations to patients/clients.

**Standard #8:** Physical therapist assistants shall participate in efforts to meet the health needs of people locally, nationally, or globally.

8A. Physical therapist assistants shall support organizations that meet the health needs of people who are economically disadvantaged, uninsured, and underinsured.

8B. Physical therapist assistants shall advocate for people with impairments, activity limitations, participation restrictions, and disabilities in order to promote their participation in community and society.

8C. Physical therapist assistants shall be responsible stewards of healthcare resources by collaborating with physical therapists in order to avoid over-utilization or under-utilization of physical therapy services.

8D. Physical therapist assistants shall educate members of the public about the benefits of physical therapy.
Appendix B

Technical College of the Lowcountry
Physical Therapist Assistant Program
Student Consent Form

Name _____
(Please Print)

Phone _____

Address____

Student ID #

As a student in the Physical Therapist Assistant (PTA) Program, you will be participating in a variety of educational activities including, but not limited to, treating and being treated with physical modalities (heat, light, water, sound, etc.); participation in physical activities such as lifting, carrying, falling, using crutches and wheelchairs; and other forms of physical exertion. Although carried out as a part of normal coursework in the PTA program, participation in these activities may involve some degree of risk. It is each student’s responsibility to exercise common sense and judgment while engaged in learning activities. If you are for any reason uncomfortable regarding the safety of an activity, you are expected to consult with an Instructor prior to engaging in that activity.

I certify that I have read the above, and understand the hazards to be faced by program participants. Not withstanding said dangers, I freely and voluntarily accept such risks involved in such activities, and agree to hold Technical College of the Lowcountry and all of their officers, staff, and faculty free from liability in the event I suffer either personal or property injury or damage, because of, or in the course of, participating in program activities.

Signature (in ink) Date
## Appendix C

PTA Program Specific Statistics

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PROGRAM DESCRIPTION: RADIOLOGIC TECHNOLOGY

RADIOLOGIC TECHNOLOGY PROGRAM FACULTY AND STAFF

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<th>Name</th>
<th>Title</th>
<th>Telephone</th>
<th>Office</th>
</tr>
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<tbody>
<tr>
<td>John W. Eichinger, MSRS</td>
<td>Program Director/Instructor</td>
<td>470-8397</td>
<td>4/204</td>
</tr>
<tr>
<td>R.T. (R) (CT) (ARRT)</td>
<td></td>
<td></td>
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<tr>
<td>Glenn M Levicki, MRST</td>
<td>Clinical Coordinator/Instructor</td>
<td>470-8402</td>
<td>4/125</td>
</tr>
<tr>
<td>R.T. (R) (MR) (CT) (ARRT)</td>
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<tr>
<td>Maggie O’Sullivan, MSN, RN</td>
<td>Academic Program Coordinator</td>
<td>525-8326</td>
<td>4/110</td>
</tr>
<tr>
<td>Marge Sapp, MSN, APRN, BC</td>
<td>Dean, Division of Health Sciences</td>
<td>525-8276</td>
<td>4/109</td>
</tr>
<tr>
<td>Veronica Navarro</td>
<td>Administrative Assistant</td>
<td>470-8378</td>
<td>4/108</td>
</tr>
<tr>
<td>Joseph Griffin</td>
<td>Administrative Support</td>
<td>525-8267</td>
<td>4/115</td>
</tr>
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Forward

The admission of a student into the health field is in many ways the entrance into a world with customs and rules differing in many respects from those to which one is accustomed. The following outline of program requirements, ethical standards, policies and regulations are formulated as a guide for the Radiologic Technology student. It is the students’ responsibility to carefully study this Handbook to learn what is expected of them and what they can expect from the program.

This handbook is in addition to the current Technical College of the Lowcountry Student Handbook, and is in no way a substitute, as it will be referred to throughout and carries the same level of importance and responsibility.

It is the responsibility of the College to provide instruction and to advise and counsel students regarding program requirements, graduation, and requirements to take the national certification examination by the American Registry of Radiologic Technologists (ARRT). It is the student’s responsibility to see that these requirements are met. Failure to meet these requirements may result in termination of a student from the program or delay graduation and eligibility to take the ARRT certification examination.

Program policies must meet the requirements for accreditation at the professional, state, and institutional levels and the rights of students and faculty, individually and collectively, must be preserved.

Suggestions regarding policies may be offered in writing to the Radiologic Technology Program at any time. Because we adhere to lifelong learning, we continue to seek to improve the program and welcome input from students, clinical education sites, faculty and the advisory committee. It must be understood, that a policy change cannot be implemented immediately, as some may require approval by the College as well as by accrediting bodies.

THE PATIENT

Student technologists who render service to the patient should measure the propriety of their actions and decisions by the primary consideration of their effect on the patient’s health and welfare, demonstrating a spirit of kindness, patience, and understanding.

Student technologists are obliged to keep confidential any information concerning the patient.

Student technologists are responsible for the competent and efficient performance of radiographic procedures prescribed only by a
physician. They must not attempt to provide services for which they have not been properly educated.

Student technologists shall be discrete and tactful when dealing with the patient. They shall avoid all actions or statements, which in any way might be construed by the patient as criticism of the physician, or other professional concerned with the patient’s care. Student technologists will make no specific statements to the patient or anyone else concerning the patient’s diagnosis or prognosis.

Student technologists shall avoid all extraneous conversation of a personal nature in patient areas.

THE PHYSICIAN

Diagnosis and the prescription of radiographic procedures is the sole responsibility of the physician. Under no circumstances shall a student radiographer attempt to perform any of the functions of a physician or in any manner encroach on that portion of the practice of medicine.

Student technologists shall competently meet their responsibilities to all physicians with equal respect, interest, and courtesy.

V.1 CLINICAL ATTENDANCE POLICY*

Students are allowed one (1) clinical class absence each semester without penalty. Any clinical education class absence after the one (1) allotted will result in a five percent (5%) reduction in the final course grade for each occurrence. No make up time will be permitted. However, students are responsible for completing the required number of competencies as assigned.

*Students are encouraged to schedule appointments, etc. etc. on a scheduled day off if one is made available during the semester.

V.2 TARDINESS

The program considers three (3) tardies as excessive. Please note that when a student has three (3) tardies in any class, whether it is didactic or clinical, it will be considered one (1) full day absent, with all consequences involved. Leaving early from clinic or class will be included in the tardiness calculations.

V.3 HARASSMENT

If a student enrolled in the Radiologic Technology Program feels that their individual rights have been infringed upon, the student is encouraged to follow guidelines set forth in the college catalog. The student may wish to make an appointment to speak with the office of Student Services.

V.4 THE PUBLIC

Student technologists, as citizens, are obliged to understand and uphold the law of the land and perform the duties inherent to good citizenship. Students are expected to accept responsibilities where their knowledge will be of value and to support all constructive efforts on behalf of the public health and welfare.

Students are expected to participate in at least one community service project each year while enrolled in the program.

V.5 THE PROFESSION AND ASSOCIATES

V.5.1 In addition to applying the techniques of the Radiologic profession to the best of their ability, student technologists should constantly strive to perfect and gain knowledge and proficiency by keeping informed regarding professional matters, by reading pertinent literature, and by attending meetings, seminars, and other educational programs.

V.5.2 To promote advancement in the knowledge and practice of radiography, student technologists should contribute to the scientific progress of the profession and thus encourage and participate in research and investigation, and in educational programs that promote the welfare of the profession.

V.5.3 Student technologists should seek to attract to the profession, persons of good character and intellectual capacity and assist in their education.
V.5.4 Student technologists should accord colleagues respect and cooperation.

V.5.6 Student technologists should have an appreciation of the aims and ideals of related professions for the maintenance of harmonious relations with other professional groups and persons who contribute to cooperation and efficiency of work toward common goals of delivering quality patient care.

V.5.7 Student technologists must carefully guard against conflicts of professional interest and must not solicit or accept compensation in any form from a manufacturer or dealer for suggesting any particular product or service.

SEE
AMERICAN SOCIETY OF RADIOLOGIC TECHNOLOGISTS
CODE OF ETHICS, APPENDIX B

V.6 PATIENT’ RIGHTS

The American Hospital Association presents a Patient’s Bill of Rights with the expectation that observance of these rights will contribute to more effective patient care and greater satisfaction for patients, their physician, and the health care organization. Further, the Association presents these rights in the expectation that they will be supported by the health care organization on behalf of its patients, as an integral part of the healing process. It is recognized that a personal relationship between the physician and the patient is essential for the provision of proper medical care. The traditional physician-patient relationship takes on a new dimension when care is rendered within an organizational structure.

SEE
PATIENT BILL OF RIGHTS
APPENDIX C

TECHNICAL COLLEGE OF THE LOWCOUNTRY
RADIOLOGIC TECHNOLOGY PROGRAM

MISSION STATEMENT

While supporting the stated mission and goals of the college, the mission of the Radiologic Technology Program at the Technical College of the Lowcountry is to provide a comprehensive, competency-based curriculum, preparing students who will graduate with entry-level skills needed to perform quality radiologic procedures and provide the best care possible to patients.

PROGRAM GOALS

Students will perform as entry-level technologists

Students will demonstrate effective communication skills

Students will appreciate and demonstrate the value of professional growth and development.

The program will effectively meet the needs of the communities of interest

Students will demonstrate critical thinking and problem solving skills.

Students complete 6 semesters of combined academic study and clinical experience. The academic program includes professional and general education courses. All professional courses (RAD prefix) have listed course goals, objectives, and/or competencies, which must be satisfied before a student can progress. Students who complete the program will be awarded an Associate in Applied Science Radiologic Technology, and may be eligible to sit for the radiography examination for national certification given by the American Registry of Radiologic Technologists (A.R.R.T.)

The program is conducted in cooperation with hospitals, clinics, and physician practices located within the four county areas of Beaufort, Colleton, Jasper, and Hampton, South Carolina, served by the Technical College of the Lowcountry. An affiliation is also in place with Memorial Health University Medical Center of Savannah, Georgia. To meet educational goals, students can expect to
have clinical education class rotations at several designated clinical sites. Students can also expect clinical education classes/rotations that may involve afternoon and/or evening hours. Combined assigned clinical and academic hours cannot exceed forty (40) contact hours per week. The program runs for 6 consecutive semesters. Approximately 40% of the time is devoted to classroom and laboratory activities with the remainder in the clinical setting.

The program’s aim is to ensure that the patient is, and should remain, the student’s primary focus. While developing competent and professional radiographers who are proficient in all facets of entry-level radiologic technology, a further aim is to nurture pride in the profession of radiologic technology while encouraging continuing education and life long learning.

V. 7 PROGRESSION: STANDARD FOR ACADEMIC PROGRESS

Students in the Radiologic Technology Program are subject to the standards outlined in the current College catalog. Additional standards for academic progress in the Radiologic Technology Program are as follows:

1. All required prerequisite courses taken prior to acceptance into the Radiologic Technology Program must be completed in the sequence outlined in the current TCL catalog. No co-requisite course may be delayed. A grade of “C” or better is required in each course to progress in the Radiologic Technology Program sequence.
2. Students are required to maintain an overall 2.0 grade point average (GPA) in order to graduate.
3. English and mathematic competencies must be maintained throughout the curriculum.
4. A student will not be able to progress in the course sequence if:
   A. There is demonstration of a consistent pattern of negligence and/or unsafe clinical practice as documented in notes by the clinical instructor.
   B. There is a breach of professional standards of conduct
      Such actions might include but are not limited to:
      1) Failure to recognize the need for assistance when unprepared for clinical action.
      2) Failure to take clinical action when such action is essential to the health and safety of the patient and is within the student’s scope of knowledge.
      3) Attending clinical while under the influence of alcohol or drugs: Use of substances that interfere with the judgment, mood, and/or motor coordination of health science students poses an unacceptable risk for patients, health care agencies, the College, and the faculty. Therefore, use of alcohol, illegal drugs, or other substances and/or the misuse of legal therapeutic drugs by radiologic technology students while engaged in any portion of their educational experiences, is strictly prohibited. Faculty members who suspect a violation of this policy are required to take action. Students are required to be knowledgeable of and abide by this policy.
      4) Failure to manage one’s behavior that may have an adverse effect on the relationship with a patient, significant other or colleague.
      5) Lying or deliberately giving inaccurate information regarding clinical care.
      6) Performing clinical activities that are detrimental to the health and safety of the patient or outside the scope of knowledge/practice.
      7) Failure to assume responsibility for completing clinical activities.
      8) Breach of patient confidentiality/patients rights
      9) There is failure to achieve satisfactory completion of critical clinical competencies as designated by the program.
      10) There is failure to achieve a satisfactory laboratory/clinical evaluation
   C. There is professional negligence and/or verbal, physical or emotional abuse of a patient.

5. All curriculum requirements must be met in order to successfully complete the program.
6. All annual health, CPR, health insurance requirements, change in health status, or any additional drug screen and background checks, must be completed annually to participate in laboratory/clinical.
V. 8 VOLUNTARY CLINICAL ATTENDANCE / EMPLOYMENT AT A CLINIC SITE

A student may wish to voluntarily attend a clinic site on weekends/off times, but accumulation or banking of extra time will NOT occur. This voluntary time in clinic is solely an opportunity for the student to become familiar with a clinical area, as well as, routine radiographic procedures. The student must first notify the program faculty of the desire to attend clinic voluntarily. Approval of voluntary clinical attendance must come from the clinic site manager.

The student should wear appropriate dress as recommended by the clinic site when either volunteering or employed. The student must understand that they are not to be attired in a uniform, name or film badge that identifies them as a student at the Technical College of the Lowcountry. Uniform policy and procedure applies only to students in assigned clinical areas during scheduled TCL classes. The Technical College of the Lowcountry will not be responsible for students voluntarily attending a clinic site on his or her own time.

Students who gain employment by a designated clinical education site, in any job capacity, while enrolled in the Radiologic Technology program must notify the clinical coordinator in writing of such employment. It is the policy of the program that students not attend a clinical education class at a facility in which they are employed. Students may choose to take a leave of absence from their employer to meet the educational outcomes of the program. Violation of this policy may be cause for termination from the program. Students shall state truthful their credentials of professional education and experience to an employer.

Clinical competencies cannot be obtained during voluntary clinical attendance or while employed. Students must obtain clinical competencies during scheduled clinical education classes or at the direction of the program faculty.

V. 9 PREGNANCY (Specific to Radiologic Technology Students)

Due to the specific types of courses in the Radiologic Technology curriculum that require clinical assignments to meet the competency based clinical education requirement, students enrolled in the program are encouraged not to become pregnant during the educational program.

If during her course of education, a student becomes pregnant, she is strongly encouraged to declare her pregnancy to the Program Director. Revealing her pregnancy is not a requirement and is the decision of the student. The student may choose not to declare her pregnancy, in which case, the student will be treated as though she is not pregnant. Once a pregnancy is declared, the student also has the right to undeclare the pregnancy at any time. This is in accordance with federal and state law. Only by declaring the pregnancy, is the fetus subject to lower dose limits of 0.5 rem or 0.05rem in any one month.

If a decision is made to declare pregnancy, the student must do the following:
1. Submit a formal statement in writing to the Program Director
2. Receive counseling of radiation safety practices that are to be observed during the pregnancy. This counseling will come from the program faculty and documented in the student file.
3. Receive a fetal radiation dosimeter monitor that is to be worn at the waist level and under the lead apron where appropriate
4. Be subject to the fetus’ lower radiation dose limits for the duration of the pregnancy

The student in the Radiography Program at the Technical College of the Lowcountry must be aware of the following:
1. Only declared pregnancies are subject to the fetal lower dose limits
2. The program will assume that a pregnancy does NOT exist unless the Program Director is informed of the pregnancy in writing
3. Declared pregnant students have several options as they relate to the Radiologic Technology Program. If a pregnancy is declared, the program faculty will advise the student of the following options:
   A. The student may continue both the academic and clinical components of the program without modifications.
   B. The student may continue academic course work only. This option is the discretion of the faculty and will depend on the placement of the student within the program. Students, who choose this option and have the approval of the program director, will make up all clinical education prior to graduation and receiving their diploma. The maximum leave of absence within a twelve (12) month period is sixty (60) days.
   C. The student may choose to leave the program with possible re-entry at a time to be determined by the program director in consultation with the program faculty and compliance with policy of the Division of Health Sciences. The student may be required to begin the program again, depending on the student’s placement within the program.
Students needing to re-enter the program must follow the “Conditions for Re-entry to Health Sciences Programs” as stated above in Section I. Clinical remediation may be required if the absence has been considered substantial and/or if clinical skills need to be further enhanced.

V. 10 UNIFORM POLICY

The patient’s first impression is primarily based on appearance. Patients have more confidence in a clinician who is well groomed and presents a professional appearance. Therefore, TCL Radiologic Technology Program adheres to the following student uniform policy: (Subject to change at program discretion)

1. TCL Radiologic Technology Program uniform (TCL school patch on left sleeve)
2. White crew or mock neck shirt worn under uniform top. Short sleeve only unless otherwise permitted by program faculty.
3. White crew or mock should not be visible below uniform sleeves and should be tucked into scrub pants.
4. White laboratory coat (TCL school patch on left sleeve)
5. TCL School name badge, dosimeter and/or film badge
6. Clinical site name badge (if provided by the clinical site)
7. White leather laced tennis shoes (no sandals, clogs, crocs, or open toe shoes)
8. Shoes must be clean in appearance at all times
9. White socks
10. Watch with a second hand
11. Lead markers
12. Pocket guide to radiography (Mosby)

Miscellaneous
1. Jewelry
2. No jewelry may be worn other than a wedding band, a watch and professional pin. No necklaces, bracelets or additional rings. Students with pierced ear lobes may wear 1 pair of small plain posts. Loops or other decorations are considered inappropriate. No additional body jewelry may be worn in the clinical setting.
3. Hair is to be arranged in a style that keeps it secured and off the collar. Fasteners should be of neutral color. Bows or ornate fasteners are not appropriate.
4. For patient safety, fingernails must be of fingertip length, neatly trimmed and clean. Students may wear clear nail polish. Acrylic, gel, or silk wrap nails are not allowed.
5. All tattoos and other forms of body art must be covered
7. Perfume or strong shave lotions are not appropriate in clinical settings.
8. Proper personal and oral hygiene are required.
9. Students must adhere to the smoking policy of the clinical facility.

V. 11 PHILOSOPHY

The philosophy of the Radiologic Technology Program is congruent with the mission of the Technical College of the Lowcountry. The Radiologic Technology program serves the profession, community, and society. Both TCL and the Radiologic Technology Program strive to create an atmosphere of excellence in teaching and learning. Within the college’s open atmosphere of shared values, the Radiologic Technology Program encourages creativity, innovation and resourcefulness among its students and faculty. With these commitments, a positive student-centered environment is established, while individuals are empowered to learn and develop throughout their lifetimes.

At the completion of the Radiologic Technology Program, graduates are should be able to function safely and effectively as beginners within their scope of practice to perform quality radiologic procedures and provide quality care to patients.
V. 12 ATTENDANCE /COMMUNICATIONS (GENERAL)

V. 12.1 Attendance in the Radiologic Technology program courses is clearly defined. The status of students who may have long term absences will be evaluated by the faculty based upon how realistically a viable education can be provided under existing conditions. Conditions, which prevent students from participating in clinical and/or didactic education, may result in the student’s total withdrawal from the program.

V. 12.2 It is the students responsibility to notify the program if they are going to be absent from any class including clinical. The student must call and leave a voice message for the instructor as well as an email, prior to the start of class. If the class is a clinical assignment, the student must include the clinical education site they are attending in both the voice and email messages. Students do not need to contact the clinical education site. The faculty will notify the clinic site of any absences.

V. 12.3 Many course announcements and/or assignments will be sent to the student via their TCL email account. Student are required to check their email account at least once daily Sunday-Thursday.

V. 13 PROGRESS REPORTS/EVALUATIONS

The program maintains progress reports/evaluations of student academic and clinical education. Reports/evaluations will be reviewed with the student each semester.

V. 14 TEXTBOOKS

Students are responsible for purchasing the required texts.

V. 15 CLINICAL EDUCATION CLASS ROTATIONS

Students can expect, but not be limited to; clinical education class/rotations at all designated clinical education sites who have signed contractual agreements with the Technical College of the Lowcountry. Some clinical education class/rotations may involve afternoon and/or evening hours.

V.16 FIELD TRIPS/SCSRT

V. 16.1 Students may be required to attend or be involved in certain field trips, lectures, projects, and other special events scheduled outside of the normal classroom hours. Any such activity will be scheduled in advance with students notified of the time, date, and nature of the event.

V. 16.2 If extenuating circumstances prevent a student from attending an outside activity, a contract* will be made between the program and the student stating that an acceptable paper of at least 500 words, referenced, typed, double-spaced, will be due no later than 7 days from the last day of the event. Topics* for such papers must come from an area presented at the conference/meeting that was missed.

V. 16.3 Failure to comply with the conditions of the contract may lead to immediate dismissal from the program.

* At the discretion of the program

V.17 TRAVEL POLICY

V. 17.1 The student will adhere to the travel policy as published by the college as well as that of the program. The program requires strict adherence to the college and program travel policy. Failure to follow rules and guidelines as printed in the college catalog may lead to immediate dismissal form the program.

V. 18 CLINICAL BEHAVIOR

V.18.1 The student is expected to adhere to the standards of ethical and professional behavior as described in the ARRT/ASRT Code of Ethics

V. 18.2 Most radiology departments have areas where eating and drinking is permitted and where technologists and student
technologists may congregate when not busy. These activities must NEVER take place in the halls or patient areas.

V. 18.3 Students are to take advantage of every opportunity to participate in any radiographic examination performed at the clinical site regardless of whether the student has completed the competency requirement. Once competency has been completed, students are expected to perform examinations with indirect supervision to maintain a competency level. **Students are never to refuse to perform a radiographic examination because they do not need to prove competency.**

V.18.4 Students are responsible for obtaining the required number of competencies each semester, regardless of where they are participating in clinical rotation. Students are encouraged to participate in all examinations performed while in a clinical education setting. However, no competency can be completed until the student has successfully completed a simulated practical examination evaluated by program faculty. The student is required to follow the direct/indirect supervision policy as defined by the program.

V.18.5 Students are to utilize down time to become familiar with the radiographic equipment, department operations, and/or practicing of positioning procedures with fellow students or department staff if available.

V.18.6 Lunch breaks while in the clinical education classes are limited to thirty (30) minutes regardless of the clinical site policy.

V.18.7 Except in emergencies, personal phone calls should not be made or received in the radiology department.

V.18.8 Students are responsible to the supervising radiographer or their designee while in the clinic.

V.18.9 Students shall inform the supervising radiographer before leaving the department as participating and learning cannot take place if one cannot be found.

V.18.10 Students will assist in keeping the radiographic rooms clean and stocked with supplies and linens.

V.18.11 Clinical education classes are designed to give the student opportunities to learn and obtain required clinical competencies for progression in the program. In exceptionally rare occasions, students may “mock up” clinical competencies during the duration of the program. Final clinical competencies will not be done as “mock up”. Mock up competencies are at the discretion of the program faculty.

V.18.12 Students are required to maintain a clinical notebook and keep certain records throughout the program which will be evaluated as part of a students clinical grade.

**V. 19 PATIENT CARE AND SAFETY**

V.19.1 All patients MUST be correctly identified. (Consult patient’s hospital arm bracelet).

V.19.2 Address patients, their families and hospital personnel by their proper titles (Mr., Mrs., Miss, Dr.) an exception might be made for addressing children.

V.19.3 Always assist ALL patients on and off the radiographic table.

V.19.4 Do not embarrass patients by unnecessarily exposing their bodies. All patients must be properly robed and draped. Place a clean sheet on the table for each patient. Do not allow patients to leave the radiographic room in soiled gowns.

V.19.5 Each student must be familiar with the first aid supplies as well as the department emergency cart. In acute emergencies, students should solicit help as best they can and stay with the patient to aid him until help arrives. Students are expected to follow the protocol of the clinical education site in all emergency situations.

V.19.6 Notify the supervising radiographer immediately of any equipment malfunction. In the event the clinic site has published safety codes, each student will read the safety codes to become familiar with them. Please check with the supervising technologist regarding published safety codes.

V.19.7 **Radiographic Technology students are required to wash their hands before and after each patient.**
V.20 RADIATION BIO-HAZARD/ SAFETY PRACTICES/WORKPLACE HAZARDS

Each student must wear a TCL radiation-monitoring device. If a student reports to his/her clinical assignment without a CURRENT monitoring device, he/she must immediately leave the clinic site until he/she obtains his/her appropriate device. This will constitute an absence for the lost clinical education time.

Students will receive written notification if their current dose report (deep) exceeds 60mrem. A copy of this counseling report will be forwarded to the administrative director of the students assigned clinical education site and an additional copy kept in the students file. The student will be required to complete the Radiation Monitoring /Overexposure Documentation form. The form provides space for the student to document reasons for the over exposure. Consequences of an over exposure report could lengthen the students enrollment time and/or require the student to attend a radiation safety program at their expense.

A lab fee may be charged to the student each term for the purpose of purchasing radiation monitoring services. Monitoring badges are exchanged bi-monthly at the direction of the Program Director/ Radiation Safety Officer. Failure to return badges within 24 hours of notification (Monday-Friday) may result in a grade reduction for the clinical class that semester.

Radiation monitoring reports are maintained by the program and made available for the student to initial. If a student loses or damages a radiation-monitoring device, he/she must complete the radiation monitoring device incident report. Replacement costs are the responsibility of the student.

Doors to radiographic rooms are to remain closed when a patient is in the room to protect the passersby from radiation exposure. The student cannot make an exposure with anyone except the patient in the room unless it is necessary and only when protective apparel or other measures are taken. **Patients shall be provided with appropriate gonadal shielding. Collimation of the x-ray beam shall be to the size of the image receptor and smaller when possible. Students must always adhere to practices, which reduce radiation exposure to him/her and other personnel.** At no time is a student to remain in a radiographic room during a radiation exposure except during fluoroscopy procedures when appropriate radiation protection and monitoring equipment are worn. During mobile and surgical radiography examinations, a student is required to wear protective apparel and adhere to radiation safety practices.

Students should never be placed in a position of having to make an exposure when other personnel are holding patients without protective apparel. Any questionable practice must be reported to the clinic supervisor or program faculty immediately.

TCL currently does not have an energized laboratory and no darkroom facilities at the college campus. However, if a student notices any exposed electrical wires on the non-energized radiographic table or portable machine, the student is to notify the program director immediately. In the event the program director or other program faculty is not available, the student is to ask the division administrative assistant to call the director of plant operations immediately. If there is any fire or threat of fire, the student should activate/pull the nearest emergency alarm located at the closest building exit. All students should leave the area immediately. Students are prohibited from working with the classroom equipment until they are given an “all clear.” If any injury occurs while the student is present in the radiologic technology area, the student should contact a faculty member to escort them to the nearest emergency department.

V. 21 STUDENT SUPERVISION

In order to insure proper radiation safety practices for students and keeping in compliance with federal and state radiation protection laws, the student must adhere to the following.

V. 21. 1 All radiologic technology students enrolled at the Technical College of the Lowcountry must have direct supervision of a qualified practitioner while performing medical imaging procedures at all times until that student has achieved competency as determined by the program.

V.21.2 All radiologic technology students enrolled at the Technical College of the Lowcountry must have indirect supervision of a qualified practitioner while performing medical imaging procedures after that student has achieved competency as determined by the program.

V.21.3 All radiologic technology students enrolled at the Technical College of the Lowcountry must have direct supervision of a qualified practitioner when repeating unsatisfactory radiographs regardless of that student’s competency status.
V.21.4 Only supervising radiographers may assess images for diagnostic accuracy and “pass” images performed by the student technologists in the clinical setting. No student is to permanently modify, crop, zoom, or manipulate images in any way that might eliminate or alter the data originally collected for the image. Students will not be responsible for sending images to PACS.

V.22 JRCERT NON-COMPLIANCE POLICY

The Joint Review Committee on Education in Radiologic Technology (JRCERT) accredits the Radiologic Technology Program at the Technical College of the Lowcountry. The JRCERT has adopted the Standards for an Accredited Educational Program in Radiologic Sciences (STANDARDS) that are directed at the assessment of the program and student outcomes. The STANDARDS require a program to:

1. Articulate its purposes
2. Demonstrate that it has adequate human, financial, and physical resources
3. Effectively organized for the accomplishment of its purposes
4. Document its effectiveness in accomplishing its purposes
5. Provide assurance that it can continue to meet accreditation standards

A copy of the JRCERT STANDARDS is available in the Radiologic Technology classroom, Building 4, Room 210. The student has the right to assume that the program operates in compliance with the STANDARDS. If the student feels that the program is not in compliance, they should first seek to resolve the concern by speaking to the instructor, clinical coordinator, or program director. If the student is unable to resolve the concern, a written statement outlining the concerns should be presented to the Program Director. The Program Director will respond to the student within five (5) working days. If the student feels that a resolution has not been accomplished, the matter will be turned over to the Division Dean. The formal procedure for filing a concern will be followed as described in the Technical College of the Lowcountry Student Handbook. If the student still does not feel the matter has been resolved, they have the right to contact the JRCERT. A good faith effort by all parties should be made in an attempt to solve any concerns prior to the JRCERT being contacted. This is simply good policy and the JRCERT will expect that the above procedures have been exhausted before getting involved. In the event the program has allegations of non-compliance with the JRCERT STANDARDS, the Program Director will maintain records of such concerns and their resolutions.

Joint Review Committee on Education in Radiologic Technology
20 N. Wacker Drive, Suite 2850
Chicago, IL 60606-3182
312-704-5300 Fax 312-704-5304

V.23 STUDENT ORGANIZATION MEMBERSHIP

Students enrolled in the Radiologic Technology program will make up the membership of The Organization of Radiologic Technology Students at The Technical College of the Lowcountry (hereinafter referred to as “G.R.I.T.S.” = Great Radiographers in the South). G.R.I.T.S. is an organization of the Division of Health Sciences. The department of Student Services of the Technical College of the Lowcountry shall function as The Organization’s governing body. Students enrolled in the Radiologic Technology program will abide by the constitution and by-laws of The Organization.

V.24 SOUTH CAROLINA SOCIETY OF RADIOLOGIC TECHNOLOGY (SCSRT)

Students enrolled in the Radiologic Technology program at the Technical College of the Lowcountry are required to become members of the South Carolina Society of Radiologic Technologists (SCSRT). The SCSRT promotes professional development and lifelong learning for Radiologic Technologists as well as students in Radiologic Technology programs throughout the State of South Carolina. The society holds educational conferences and seminars periodically around South Carolina at reduced costs for members. Membership fees are the responsibility of the student. Application for membership will be distributed to TCL radiologic technology students at the beginning of the second semester. www.scsrt.org

V.25 AMERICAN SOCIETY OF RADIOLOGIC TECHNOLOGISTS (ASRT)

Students enrolled in the Radiologic Technology program at the Technical College of the Lowcountry upon entering the second year of the program are required to become members of the American Society of Radiologic Technologists (ASRT). The ASRT sets forth a vision to “be the premier professional association for the medical imaging and radiation therapy community through education, advocacy, and research.” The ASRT’s mission is to “advance the medical imaging and radiation therapy profession and to enhance the quality of patient care.” The Radiologic Technology Program Director and/or faculty must submit an enclosed letter
indicating the student status with application. Application for membership will be distributed to TCL radiologic technology students at the beginning of the fourth semester, www.asrt.org

V.26

APPENDIX A

AMERICAN REGISTRY OF RADIOLOGIC TECHNOLOGISTS (ARRT)
AMERICAN SOCIETY OF RADIOLOGIC TECHNOLOGISTS (ASRT)

The Code of Ethics forms the first part of the Standards of Ethics. The Code of Ethics shall serve as a guide by which Registered Technologists and Candidates may evaluate their professional conduct as it relates to patients, healthcare consumers, employers, colleagues, and other member of the healthcare team. The Code of Ethics is intended to assist Registered Technologists, Registered Radiologist Assistant, and Candidates in maintaining a high level of ethical conduct and in providing for protection, safety, and comfort of patients. The Code of Ethics is aspirational.

1. The radiologic technologist conducts herself or himself in a professional manner, responds to patient needs, and supports colleagues and associates in providing quality patient care.

2. The radiologic technologist acts to advance the principal objective of the professional to provide services to humanity with full respect for the dignity of mankind.

3. The radiologic technologist delivers patient care and service unrestricted by the concerns of personal attributes or the nature of the disease or illness, and without discrimination on the basis of sex, race, creed, religion, or socioeconomic status.

4. The radiologic technologist practices technology founded upon theoretical knowledge and concepts, uses equipment and accessories consistent with the purposes for which they were designed, and employs procedures and techniques appropriately.

5. The radiologic technologist assesses situations: exercises care, discretion, and judgment; assumes responsibility for professional decisions; and acts in the best interest of the patient.

6. The radiologic technologist acts as an agent through observation and communication to obtain pertinent information for the physician to aid in the diagnosis and treatment of the patient and recognizes that interpretation and diagnosis are outside the scope of practice for the profession.

7. The radiologic technologist uses equipment and accessories, employs techniques and procedures, performs services in accordance with an accepted standard of practice, and demonstrates expertise I minimizing radiation exposure to the patient, self, and other members of the healthcare team.

8. The radiologic technologist practices ethical conduct appropriate to the profession and protects the patient’s right to quality radiologic technology care.

9. The radiologic technologist respects confidence entrusted in the course of professional practice, respects the patient’s right to privacy, and reveals confidential information only as required by law or to protect the welfare of the individual or the community.

10. The radiologic technologist continually strives to improve knowledge and skills by participating in continuing education and professional activities, sharing knowledge with colleagues, and investigating new aspects of professional practice.

V.27

APPENDIX B

PATIENT BILL OF RIGHTS

*Students should be advised that federal legislation might indicate changes to the PATIENT BILL OF RIGHTS. The attached is the most current information available at time of print.

Effective health care requires collaboration between patients and physicians and other health care professionals. Open and honest communication, respect for personal and professional values, and sensitivity to differences are integral to optimal patient care. As
the setting for the provision of health services, hospitals must provide a foundation for understanding and respecting the rights and responsibilities of patients, their families, physicians, and other caregivers. Hospitals must ensure a health care ethic that respects the role of patients in decision making about treatment choices and other aspects of their care. Hospitals must be sensitive to cultural, racial, linguistic, religious, age, gender, and other differences as well as the needs of persons with disabilities.

**Bill of Rights**

A designated surrogate or proxy decision maker can exercise these rights on the patient’s behalf if the patient lacks decision-making capacity, is legally incompetent, or is a minor.

1. The patient has the right to considerate and respectful care.

2. The patient has the right to and is encouraged to obtain from physicians and other direct caregivers relevant, current, and understandable information concerning diagnosis, treatment, and prognosis.

Except in emergencies when the patient lacks decision-making capacity and the need for treatment is urgent, the patient is entitled to the opportunity to discuss and request information related to the specific procedures and/or treatments, the risks involved, the possible length of recuperation, and the medically reasonable alternatives and their accompanying risks and benefits.

Patients have the right to know the identity of physicians, nurses, and others involved in their care, as well as when those involved are students, residents, or other trainees. The patient also has the right to know the immediate and long-term financial implications of treatment choices, insofar as they are known.

3. The patient has the right to make decisions about the plan of care prior to and during the course of treatment and to refuse a recommended treatment or plan of care to the extent permitted by law and hospital policy and to be informed of the medical consequences of this action. In case of such refusal, the patient is entitled to other appropriate care and services that the hospital provides, or transfers to another hospital. The hospital should notify patients of any policy that might affect patient choices within the institution.

4. The patient has the right to have an advance directive (such as a living will, health care proxy, or durable power of attorney for health care) concerning treatment or designating a surrogate decision maker with the expectation that the hospital will honor the intent of that directive to the extent permitted by law and hospital policy.

Health care institutions must advise patients of their rights under state law and hospital policy to make informed medical choices, ask if the patient has an advance directive, and include that information in patient records. The patient has the right to timely information about hospital policy that may limit its ability to implement fully a legally valid advance directive.

5. The patient has the right to every consideration of privacy. Case discussion, consultation, examination, and treatment should be conducted so as to protect each patient’s privacy.

6. The patient has the right to expect that all communications and records pertaining to his/her care will be treated as confidential by the hospital, except in cases such as suspected abuse and public health hazards when reporting is permitted or required by law. The patient has the right to expect that the hospital will emphasize the confidentiality of this information when it releases it to any other parties entitled to review information in these records.

7. The patient has the right to review the records pertaining to his/her medical care to have the information explained or interpreted as necessary, except when restricted by law.

8. The patient has the right to expect that, within its capacity and policies, a hospital will make reasonable response to the request of a patient for appropriate and medically indicated care and services. The hospital must provide evaluation, service, and/or referral as indicated by the urgency of the case. When medically appropriate and legally permissible, or when a patient has so requested, a patient may be transferred to another facility. The institution to which the patient is to be transferred must first have accepted the patient for transfer. The patient must also have the benefit of complete information and explanation concerning the need for, risks, benefits, and alternatives to such a transfer.
9. The patient has the right to ask and be informed of the existence of business relationships among the hospital, educational institutions, other health care providers, or payers that may influence the patient’s treatment and care.

10. The patient has the right to consent to or decline to participate in proposed research studies or human experimentation affecting care and treatment or requiring direct patient involvement, and to have those studies fully explained prior to consent. A patient who declines to participate in research or experimentation is entitled to the most effective care that the hospital can otherwise provide.

11. The patient has the right to exceed reasonable continuity of care when appropriate and to be informed by physicians and other caregivers of available and realistic patient care options when hospital care is no longer appropriate.

The patient has the right to be informed of hospital policies and practices that relate to patient care, treatment, and responsibilities. The patient has the right to be informed of available resources for resolving disputes, grievances, and conflicts, such as ethics committees, patient representatives, or other mechanisms available in the institution. The patient has the right to be informed of the hospital’s charges for services and available payment options.

V.28 GROUNDS FOR DISMISSAL

The grounds for immediate dismissal from the Radiologic Technology Program at Technical College of the Lowcountry are listed below. I understand I can be dismissed from the program at any time during education for violations of any one of the grounds listed below as well as any of those listed throughout the Radiologic Technology student handbook.

V.28.1 Any grade in Radiography or other required courses below a 75.00.
V.28.2 Insubordination to faculty or clinical affiliate staff.
V.28.3 The conviction and/or known use of, distribution of, or possession of illegal drugs or controlled substances
V.28.4 The possession and/or use of alcoholic beverages before or during classroom or clinical experiences.
V.28.5 Unethical conduct; a violation of ASRT/ARRT/SCRQSA Code of Ethics.
V.28.6 Cheating in any course, which includes, but not limited to practical examinations.
V.28.7 If a clinical affiliate refuses to allow a student on hospital property for violations including but not limited to such as theft, misconduct, felony conviction, or poor performance, the student will not be allowed to continue.
V.28.8 Failure to abide by clinical education rotations, which may include scheduled rotations to all clinical education sites that are serviced by the Technical College of the Lowcountry
V.28.9 Failure to abide by clinical education rotations which may include scheduled afternoon and/or evening hours.
V.28.10 Falsification of clinical records.
V.28.11 No call, No show to clinical education classes.
V.28.12 Results of drug screens and/or background checks mandating that student cannot attend clinical education at a facility.

__________________________________
Signature

__________________________________
Date
RADIOLOGIC TECHNOLOGY STUDENT HANDBOOK AGREEMENT

I have read the Student Handbook for the Radiologic Technology Program at Technical College of the Lowcountry in its entirety. I understand its content and agree to abide by the policies and procedures set forth during my two-year, 6 semester educational period. The program reserves the right to alter policies, procedures and content.

________________________________________
Signature

________________________________________
Date

As a female student entering the Radiologic Program at Technical College of the Lowcountry, I have read the Radiation Protection/Pregnancy Policy in its entirety. I understand its content and agree to abide by said policy during my two-year, 6 semester educational period.

________________________________________
Signature

________________________________________
Date
PROGRAM DESCRIPTION: SURGICAL TECHNOLOGY

SECTION I: ACADEMIC INFORMATION

ACADEMIC ADVISEMENT

Each student in a Health Sciences Program is assigned a faculty advisor to assist in scheduling sequential courses in the curriculum. It is the responsibility of the student to schedule an appointment with his/her advisor during each priority registration period, including when the student is registering on-line. Any student who has problems that interfere with satisfactory attendance, progress, and performance is encouraged to meet with their advisor to discuss these issues. Every effort will be made to help the student resolve the problems.

ACADEMIC MISCONDUCT (See TCL Student Handbook)

PROGRESSION: STANDARDS FOR ACADEMIC PROGRESS

The Health Sciences grading scale will be used to determine grades.

- 90%-100% = A
- 82%-89% = B
- 75%-81% = C
- 70%-74% = D
- 0%-69% = F

Grading Methodology: A grade of “C” or better must be achieved in each curriculum course in order for a student to progress in their Health Science program. The final grade in Health Science must be 75.000 or more in order to pass the course and progress in the program. Grades will not be “rounded” up to the higher number. A final grade of less than 75.000 is not passing in any Health Science program, and does not meet progression requirements.

Students in the Health Sciences Programs are also subject to the additional standards detailed below.

1. All required course taken prior to acceptance into a Health Science program must be completed with a “C” or better.
2. Program courses must be completed in the sequence outlined in the current TCL catalog. No co-requisite course may be delayed. A curriculum profile detailing required program courses in their sequence will be developed upon entry into the program. This profile must be adhered to; any deviation from the sequence may result in the student being withdrawn from the program.
3. Students are required to maintain an overall TCL 2.0 grade point average (GPA) in order to progress and to graduate.
4. All curriculum requirements must be met in order to successfully complete the program.
5. A no-call, no-show for any clinical experience will result in the student eing withdrawn from their program.
6. All health forms, CPR, and health insurance requirements must be completed annually to participate in laboratory/clinical. In addition, a drug screen and background check is required upon entry into the program. It is the student’s responsibility to keep these requirements current and to submit the appropriate documentation to the Health Science office. Failure to do so will result in withdrawal from program.
7. A student will not be able to progress in the course sequence if:
   a. There is demonstration of a consistent pattern of negligence and/or unsafe clinical practice documented by the clinical instructor.
   b. There is professional negligence and/or verbal, physical or emotional abuse of a patient.
   c. There is a breach of professional standards of conduct. Such actions might include but are not limited to:
      1. Failure to recognize the need for assistance when unprepared for clinical action.
      2. Failure to take clinical action when such action is essential to the health and safety of the patient and is within the student’s scope of knowledge.
      3. Attending clinical while under the influence of alcohol or drug(s). Use of substances that interfere with the judgment, mood, and/or motor coordination of health science students pose an unacceptable risk for patients, health care agencies, the college, and the faculty. Therefore, use of alcohol, illegal drugs or other substance and/or the misuse of legal therapeutic drugs by health science students while engaged in any...
portion of their educational experiences is strictly prohibited. Faculty members who suspect a violation of this TCL policy are required to take action. Students are required to be knowledgeable of and abide by this college policy.

4. Failure to manage one’s behavior in such a manner as to have an adverse effect on the relationship with a patient, significant other or colleague.
5. Deliberately giving inaccurate information or withholding pertinent information regarding clinical care
6. Falsifying medical records
7. Performing clinical activities detrimental to the health and safety of the patient, outside the scope of knowledge/practice, or without appropriate supervision.
8. Failure to assume responsibility for completing clinical activities.
9. Breach of patient privacy or rights
10. Failure to achieve satisfactory completion of clinical competencies designated for each program.
11. Failure to achieve a satisfactory laboratory/clinical evaluation.

**REQUIREMENTS FOR GRADUATION AND THE AWARD OF ASSOCIATE OF HEALTH SCIENCE DEGREE**

1. Completion of the Health Sciences, general education and science courses as required by the program
2. Completion of each course with a minimum grade of “C” (2.0)
3. TCL GPA 2.0 or greater
4. Completion of the last two (2) semesters of Health Sciences courses at TCL
5. Completion of all Health Sciences courses within 3 years of beginning the program
6. Recommendation of the faculty

**REQUIREMENTS FOR GRADUATION AND THE AWARD OF DIPLOMA OF HEALTH SCIENCE**

1. COMPLETION OF Health Sciences, general education and science courses as required by the program
2. Completion of each course with a minimum grade of “C”
3. TCL GPA 2.0 or greater
4. Completion of the last two (2) semesters of Health Sciences clinical courses at TCL
5. Completion of all Health Sciences courses within 2 years of beginning the program
6. Recommendation of the faculty

**REQUIREMENTS FOR GRADUATION AND THE AWARD OF CERTIFICATE OF HEALTH SCIENCE**

1. Completion of the Health Sciences, general education and science courses as required by the program
2. Completion of each course with a minimum grade of “C”
3. TCL GPA of 2.0 or greater
4. Completion of the last two (2) semesters of Health Sciences courses at TCL
5. Completion of all Health Sciences courses within 2 years of beginning the program
6. Recommendation of the faculty

**WITHDRAWAL FROM HEALTH SCIENCES PROGRAMS**

The Withdrawal Policy of TCL will be followed as outlined in the current College Catalog. In addition, the requirements of the Health Sciences Programs stipulate that once the student is in the course sequence, course withdrawal may result in withdrawal from the program. It is the student’s responsibility to assure that all paperwork is completed and submitted. If the student does not initiate course withdrawal with their academic advisor and instructor, the student will be considered an enrolled student in the course and receive the grade that was achieved while enrolled. It is the decision of the course coordinator whether to give a “W” or “WF” during the first 21 days of the semester. After that time the grade earned to date will be awarded.
CONDITIONS FOR RE-ENTRY TO HEALTH SCIENCES PROGRAMS (See current college catalog)

1. For re-entry, students must meet all Health Science Program admission requirements.
2. Re-entry to a Health Science program will be determined by availability of space and by faculty committee review of the student’s status at the time of exit from a program.
3. Students seeking re-entry will be considered for re-entry into the curriculum at the point at which they left the program.
4. A student requesting re-entry must be able to rotate through the approved clinical sites. The clinical facility utilized by the TCL program has the authority to deny a student the privilege of rotating through their facility. Rejection of a student by a clinical facility may result in denial of re-entry.
5. All courses in the major of Health Sciences must be completed within a three year period from date of entry (two years for Diploma and Certificate programs).
6. Any student who has the course sequence interrupted for more than two semesters may be required to validate knowledge and skills as a condition for re-entry. This may be accomplished through testing or repeating previously completed courses.
7. Students seeking re-entry must make their request through the Division of Health Sciences Admission, Progression and Graduation Committee.
8. Students must update health work and repeat a background check and drug screen if they have been out for a semester or more.

SECTION II: GENERAL STUDENT INFORMATION

All pagers, cell phones and other electronic devices that may disrupt the classroom must be turned off during lecture and lab periods. No pagers or phones are allowed in the clinical area. No exceptions will be made. Basic calculators are allowed for quizzes/tests/exams. Palm pilots or other internet, recording, or messaging devices are not allowed during testing. Clinical site assignments are subject to change and registration in a particular section does not guarantee a particular clinical slot. Students may not attend clinical on any unit on which they are employed.

ATTENDANCE POLICY

The faculty of the programs in Health Sciences has a responsibility to assure that all Health Sciences students have an adequate background of knowledge and skills. The faculty must insure that each student is able to utilize this knowledge and skill in a safe, professional manner in their clinical practice. Clinical courses are organized to provide knowledge of patient care and opportunities to apply this knowledge toward developing skills in the clinical laboratory.

Consult the college catalog for details regarding the current college attendance policy.

I. Absence from an examination or other graded activity: Students absent from an examination or other graded activity will receive a “0” grade for the activity unless other arrangements are made with the individual instructor before the scheduled event. It is the responsibility of the student to contact the appropriate instructor to arrange to make up the examination. This arrangement may be done by telephone. If the instructor is not available, a message should be left with another member of the Health Sciences faculty and the Division of Health Sciences Administrative Specialist. The instructor will decide the time and method of make-up examinations on an individual basis. Messages sent by other students are not acceptable. The student is responsible for notifying the instructor of the reason for this absence.

II. Clinical absence: In the event of unavoidable clinical absence, the student must follow the protocol outlined in the course materials. A medical excuse may be required. Make-up may be arranged at the discretion of the faculty. Absences from the clinical area may result in the student’s inability to demonstrate master of the clinical outcomes for a course. “No call, no show” for clinical is unprofessional conduct and the student will be withdrawn from the program. (See program requirements).
TARDINESS

Punctuality is an important element of professional behavior. Students are expected to arrive on time. The clock at the clinical agency/classroom/lab is used to determine tardiness. Should a pattern of tardiness develop, the problem will be handled by the instructor and may result in an unsatisfactory for the course, laboratory, or clinical.

HAZARDOUS WEATHER

In the event of hazardous weather conditions, local radio, RIVER, WYKZ, 98.7 and WBHS-FM, 92.1 in Hampton will announce information concerning school closings or delays beginning at 0600. Notice will also be posted on the college website; www.tcl.edu. For clinical experiences, if TCL is closed, then clinical is automatically canceled. If TCL will be open on time or late and weather is a concern, clinical faculty will contact students.

JURY DUTY

Students who are call for jury duty should request to be excused from jury duty if the duty interferes with classroom, laboratory, or clinical experiences. Delay in this process may jeopardize the chances of the student being excused by the court. All missed classroom laboratory/clinical experiences must be addressed with the Dean for the Division of Health Sciences and the course coordinator in this situation. The student is responsible for obtaining the missed classroom materials from the course coordinator.

FAMILY MEMBERS

Family members attending the program will not be allowed to participate in the same clinical rotations.

EQUIPMENT

Students are frequently given assignments that require the use of equipment or computer without direct instructor supervision. Care of this equipment is essential and students are requested to leave the equipment in good repair. If problems arise during the use of equipment, it should be reported immediately to the instructor or division administrative specialist. Students may not remove equipment for the health sciences building.

BULLETIN BOARD INFORMATION

Student information bulletin boards are located in the Division of Health Sciences (Building 4) and on Blackboard. Students should check the designated bulletin board as required by the course syllabus for pertinent information. Students are responsible for information posted.

HEALTH SCIENCES COMPUTER LABS

The Health Science Programs tutorial-computer lab is available for health Sciences student use Monday – Friday from 8:30am to 4:00pm. This lab is for computer assisted instruction purposes for components of Health Sciences curricula. Course materials may not be printed from this lab. Students are requested to follow the instructions for the operation of the computers and for each program carefully.

*Under no circumstances shall food and drink be permitted in the computer lab.*

FINANCIAL AID

Students interested in securing financial aid should apply six weeks prior to registration. For more information on eligibility and application procedures, inquire at the Financial Aid office located in Coleman Hall, building 2. Refer to the current TCL catalog.
GRIEVANCE AND GRADE REVIEW

Refer to the current TCL College Catalog/TCL Student Handbook

CHANGE OF NAME, ADDRESS, EMAIL ADDRESS OR TELEPHONE NUMBER

Any change of name, address, email address or telephone number must be reported immediately to the Division of Health Sciences and TCL Student Records. The Division of Health Sciences will not be held responsible for failure of students to receive essential information if an incorrect address/e-mail is on file. All students are required to maintain a TCL e-mail account throughout their program.

PARKING

I. Campus Parking

Students must park in designated parking areas and obey all parking regulations as established by the College. Violations are punishable by fines, towing of vehicle at the owner’s expense and/or loss of driving privileges on campus. Speed limit signs are posted around the buildings and parking areas. Students who exceed these limits will be denied the privilege of bringing their vehicles on campus. Students who expect to operate a motor vehicle on campus must register the vehicle upon enrolling at TCL. For more information, contact the TCL Security office.

II. Clinical Facility Parking

Students are to park in areas specified by the facility. Students are NOT to park in areas designated for visitors to the facility or physicians. Students assigned to Beaufort Memorial Hospital may park in TCL student parking areas only.

TRANSPORTATION

In order to provide students with a varied and comprehensive clinical experience, various clinical and observational sites within an approximate 60-mile radius of Beaufort are utilized. Students are required to provide their own transportation to these sites. Students are encouraged to carpool to clinical sites.

TUITION/FEE PAYMENT

No student will be permitted to attend class until tuition is paid. Students should refer to the current TCL College catalog.

ASSOCIATION OF SURGICAL TECHNOLOGISTS MEMBERSHIP

Students are required to join the Association of Surgical Technologists (AST) as a “student” member. Students are responsible for the $45.00 membership fee to the Association of Surgical Technologists. Students will be referred to the AST website, www.ast.org for information regarding membership application. As a member of the AST the cost of taking the National Certification exam decreases from $290.00 to $190.00. A fee of $190.00 will be applied to the student’s tuition during the summer semester that will cover the cost of the students’ National Certification examination. Membership must be obtained by the end of spring semester.

SECTION III: PROFESSIONAL CONDUCT

PRIVACY AND CONFIDENTIALITY

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) was enacted to protect the privacy of all health information. It is the responsibility of the Health Sciences student to maintain the confidentiality of patient information. Under no circumstances should a student convey confidential information to anyone not involved in the care of the patient. Students are also expected to maintain professional confidentiality regarding other students, hospital/facility employees and physicians.

1. Confidential information included but is not limited to:
a) The identity and addresses of individuals served an services they received;
b) The social and economic conditions or circumstances of any person served;
c) Agency evaluation of information about a person or health facility
d) Medical data, including diagnosis and past history of disease or disability, concerning a person, and confidential facts pertaining to health facilities;
e) The identity of persons or institutions that furnished health services to a person;
f) Information identified as confidential by appropriated federal and state authorities

2. Special care needs to be taken to preserve the dignity and confidentiality of patients, including those patients with infectious diseases or conditions.
3. The patient has the right to every consideration of his/her privacy concerning his/her own medical care. Case discussion, consultation, examination, and treatment are confidential and should be conducted discreetly.
4. The patient has the right to expect that all communications and records pertaining to his/her care should be treated as confidential. All patient information shall be regarded as confidential and available only to authorized users.

**Breach of this policy may result in disciplinary action and/or termination from the program.**

**CONVICTION OF A CRIME**

Conviction of a crime (other than a minor traffic violation) may make a student ineligible to take the National Certification or Licensing Examination(s) upon graduation or application for licensure in South Carolina and other states. Early notification to the appropriate State Licensing/Credentialing Board is recommended.

Criminal conviction or pending criminal charges of any of the following will likely make applicant ineligible to apply for licensure.

1. Assault, crimes involving the use of deadly force, assault and crimes of violence (e.g., murder, manslaughter, criminal sexual battery of a high and aggravated nature, assault and battery with intent to kill)
2. Crimes involving the distribution of illegal drugs
3. Crimes that involve Moral Turpitude

It is the responsibility of the applicant to contact the appropriate licensing board for clarification or advisement.

**SECTION IV: DIVISION REQUIREMENTS**

**CPR CERTIFICATION**

Students must have a current CPR certificate that includes adult, child, infant CPR, airway obstruction, and AED prior to beginning clinical courses. This certification must be kept current according to the expiration date of the card and maintained throughout the program. It is the student’s responsibility to complete CPR certification. Students will not be permitted in the clinical area without current certification. The following courses are acceptable:

1. American Heart Association Basic Life Support Health Care Provider
2. Red Cross CPR for Professional Rescuers

**HEALTH STATUS**

All student health information is kept confidential.

1. **Health Examination**
   a. Students must have a Division of Health Sciences history and health examination form completed, along with required immunizations/testing, by a licensed health care provider prior to beginning clinical courses or upon request or re-entry into a Health Sciences program. Results of the history and health examination must conclude that the student is “mentally and physically able to participate in program activities to meet the desired program outcomes”. Students who do not submit a completed Division of Health Sciences history and health examination form by the designated date will not be permitted to continue in the course.
2. **Drug Screen**
   a. Urine and/or serum drug screens for illicit, mood altering, or non-prescribed substances are required prior to clinical experiences. Students with positive results will be excluded from the clinical setting and withdrawn from the program.

3. **Health Update**
   a. Prior to beginning the second year, Health Sciences students must complete a health update that includes TB skin testing/or chest x-ray and verification of other immunizations and health status. Failure to do so will prevent the student from continuing in the program.

4. **Change in Health Status**
   a. Students must notify the Dean for the Division of Health Sciences of any changes in health status that occur following admission to the program i.e. pregnancy, injuries, major illnesses or surgery. Documentation from a health care provider verifying emotional and/or physical ability to carry out the normal activities of patient care will be required on the *Changes in Health Status* form in order for the student to continue in the Health Sciences program.

5. **Pregnancy**
   a. Any student who is pregnant must have her health care provider complete the division *Changes in Health Status* form regarding her ability to perform all expected clinical functions fully, safely, and without jeopardizing the health and well-being of the student, fetus, or patient before registration each semester. In order to resume her class and clinical activities before the usual six-week period after delivery, the student must bring a written statement from their healthcare provider on the *Changes in Health Status* form. Students who do not bring these statements will not be permitted to continue their clinical experience. If a student does NOT declare her pregnancy, the Division of Health Sciences will assume that the pregnancy does NOT exist.

**INSURANCE**

1. **Accident Insurance**
   a. All curriculum students are provided with accident insurance coverage. Students are covered to and from classes on campus and while engaged in an assigned TCL clinical activity. In the event of an accident, the student should obtain accident insurance information from the Vice President of Student and College Development Office prior to going for medical treatment. Should the situation not allow this, claims must be filed promptly upon return to campus and within ninety (90) days. Accident insurance information may be obtained from the Student and College Development Office.

   b. A student who is injured while in the clinical setting must immediately notify the instructor. The clinical instructor will arrange for the student to go to the emergency room. The student must take a copy of the emergency room record to the TCL Student and College Development Office the next scheduled class day, but not later than 90 days. The appropriate incident forms will be completed as indicated by policy of the health care facility.

2. **Health Insurance**
   a. Students enrolled Health Sciences program must obtain personal health/medical insurance and provide evidence of continuous coverage to participate in clinical experiences. Failure to maintain coverage will result in withdrawal from program. TCL and/or the clinical facility are not liable for illness that occurs while the student is in the clinical facility or academic setting. Health insurance information must be readily available in the case of injury in the clinical area.

3. **Malpractice Insurance**
   a. College students are covered by a college policy. A student fee for the premiums is paid at the beginning of each semester at the time of registration. No student will be permitted in the clinical area without this coverage. Re-entry students must confirm the correct major and that the proper fees are assessed.

**STANDARD PRECAUTIONS (Refer to pages 74-75: Infectious Diseases)**

All students are required to use standard precautions for all patient care activities. Additional precautions are indicated for care of some individuals.
SECTION V: PROGRAM INFORMATION

TECHNICAL COLLEGE OF THE LOWCOUNTRY
SURGICAL TECHNOLOGY PROGRAM

The Surgical Technology Program is an integral part of the Technical College of the Lowcountry and holds with the philosophy and purposes of the College and the South Carolina Technical College System. It is a limited enrollment Allied Health Program, accepting a maximum of fifteen (15) new students each Fall.

MISSION STATEMENT

While supporting the stated mission and goals of the college, the mission of the Surgical Technology Program at the Technical College of the Lowcountry is to provide a comprehensive, competency-based curriculum, preparing students who will graduate with entry-level skills needed to perform as a competent Surgical Technologist and provide the best possible care to patients. Upon successful completion of the program, the graduate is eligible to take the National Certification Examination through the National Board of Surgical Technologist and Surgical Assistant (NBSTSA).

PROGRAM PHILOSOPHY

The Surgical Technology Department Faculty of the Technical College of the Lowcountry believes that:

Health is the state of optimum well being for man. Health is relative and constantly changing.

Due to this changing state, the Surgical Technologist practices in the unique role of restoring optimum health and alleviating suffering by aiding surgical intervention. In fulfilling this role, the Surgical Technologist works closely with the patient, surgeon, and other operating room professionals in the operative care of the surgical patient.

Surgical Technology practice is not limited to the physical setting of the operating room. It is also utilized in other health care areas and facilities. These areas and facilities include, but are not limited to Labor and Delivery, Emergency Room, Central/Sterile Processing, Ambulatory Surgical Facilities, and private physician’s offices.

The educational environment of the Surgical Technology Program at the Technology College of the Lowcountry considers individual differences which affect learning ability, and provides motivation to continue to learn and adapt in the changing surgical environment. The faculty believes an individual’s ability to learn is based on past experiences and personal potential, which permits leaning to occur at different rates and levels. Learning takes place most readily when material is covered in logical sequence and progresses in difficulty from simple to complex. Under the guidance of the faculty, the student should assume responsibility for much of their own learning.

The faculty believes that Surgical Technology education should reflect the student’s development of skills and theoretical knowledge essential for restoring optimum health and alleviating suffering in the operative setting.
PROGRAM GOALS

1. Students will perform as entry-level Surgical Technologists.
2. Students will demonstrate effective communication skills.
3. Students will appreciate and demonstrate the value of professional growth and development.
4. The program will effectively meet the needs of the communities of interest.
5. Students will demonstrate critical thinking and problem solving skills.
6. Select appropriate instruments, equipment, and supplies for various surgical procedures.
7. Create and maintain a sterile field utilizing basic care preparation and procedures.
8. Demonstrate sterile surgical techniques and the use of modern operating room technology.
9. Identify and demonstrate patient care concepts.
10. Summarize patient preparation for selected surgical procedures.
11. Maintain a high level of ethical and professional standards.
12. Prepare to sit for the national certification examination.

Students complete 3 semesters of combined academic, laboratory, and clinical experience. The academic program includes professional and general education courses. All professional courses (SUR prefix) have listed course goals, objectives, and/or competencies, which must be satisfied before a student can progress. Students who complete the program will be awarded with a diploma in Surgical Technology, and may be eligible to sit for the National Certification examination through the National Board of Surgical Technologist and Surgical Assistant (NBSTSA).

ACCREDITATION STATUS

The Technical College of the Lowcountry’s Surgical Technology Program has been accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP). 6 West Dry Creek Circle, Suite 210, Littleton, Colorado 80120-8031. (303)694-9262. The program is up for re-accreditation in 2011.

OUTCOMES/COMPETENCIES

Upon successful completion of the Surgical Technology Program, the graduate should be a professional who provides and participates in the coordination of patient care as a member of the surgical team by demonstrating knowledge of aseptic technique, surgical procedures, instrumentation, and will:

1. Demonstrate professionalism.
2. Participate as a team member.
3. Identify and measure quality.
4. Practice effective oral, written, and electronic communications.
5. Provide for patient and staff safety.
7. Practice aseptic technique.
8. Use equipment according to established policies and procedures.
9. Demonstrate proper use and care for instruments.
10. Prepare medications.
11. Participate in surgical procedures.
12. Handle instruments in an appropriate manner.
13. Practice sterile supply room procedures.
14. Perform associated duties of the Surgical Technologist at entry level in connection with all operative specialties.

PROFESSIONAL CONDUCT

The following characteristics are consistent with professional behavior and are expected at all times:

1. Refrains from loudness, profanity, sneering, rudeness, and sleeping in class or clinical.
2. Is truthful.
3. Listens receptively.
5. Assumes responsibility for course preparation and participation.
6. Approaches individual with kindness, gentleness, and helpfulness
7. Offers companionship without becoming involved in a non-therapeutic manner
8. Accepts constructive criticism
9. Is neat, clean and appropriately attired.
10. Is consistently punctual.
11. Accepts assignments and willingly assists others.
12. Recognizes and performs within own limitations.
13. Uses break time appropriately.
14. Uses correct spelling and grammar
15. Communicates in a medically professional manner.
16. Cooperates with agency policies.
17. Observes legal and ethical standards of practice.

INFECTIOUS DISEASES

CDC Recommendations
The Center for Disease Control (CDC) publishes guidelines for precautions for healthcare workers. Standard precautions reduce the risk of transmission of pathogens from recognized and unrecognized sources of infection. Standard Precautions shall be applied to all patients receiving care in hospitals, regardless of their diagnosis or presumed infection status. Standard Precautions apply to 1) blood; 2) all body fluids, secretions, and excretions except sweat, regardless of whether or not they contain visible blood; 3) non-intact skin; and 4) mucous membranes.

Standard Precautions involve the use of hand washing and protective barriers (such as gloves, gowns, aprons, masks, or protective eyewear) which can reduce the risk of exposure of health care workers to potentially infective materials. In addition, under Standard Precautions, it is recommended that all health care workers take precautions to prevent injuries caused by needles, scalpels, and other sharp instruments or devices.

Pregnant health care workers are not known to be at greater risk of contracting HIV infection than are health care workers who are not pregnant; however, if a health care worker develops HIV infection during pregnancy, the infant is at risk of infection resulting from perinatal transmission. Because of this risk, pregnant health care workers should be especially familiar with, and strictly adhere to, precautions to minimize the risk of HIV transmission.

Gloving, Gowning, Masking, and Other Protective Barriers as Part of Standard Precautions
All health care workers should routinely use appropriate barrier precautions to prevent skin and mucous membrane exposure during contact with any patient’s blood or body fluids that require Standard Precautions. Recommendations for the use of protective barriers are available at the CDC website www.cdc.gov.

Gloves should be worn:

1. for touching blood and body fluids, mucous membranes, or non-intact skin of all patients, and
2. for handling items or surfaces soiled with blood or body fluids to which Standard precautions apply.

Gloves should be changed after contact with each patient. Hands and other skin surfaces should be washed immediately or as soon as patient safety permits if contaminated with blood or body fluids requiring Standard Precautions. Hands should be washed immediately after gloves are removed.

Masks and protective eyewear or face shields should be worn by health care workers to prevent exposure of mucous membranes of the mouth, nose, and eyes during procedures that are likely to generate droplets of blood or body fluids requiring Standard Precautions. Gowns or aprons should be worn during procedures that are likely to generate splashes of blood or body fluids requiring Standard Precautions.

All health care workers should take precautions to prevent injuries caused by needles, scalpels, and other sharp instruments or devices during procedures; when cleaning used instruments; during disposal of used needles; and when handling sharp instruments after procedures. To prevent needle stick injuries, needles should not be recapped by hand, purposely bent or broken by hand, removed from disposable syringes, or otherwise manipulated by hand. After they are used, disposable syringes and needles, scalpel blades, and other sharp items should be placed in puncture-resistant containers for disposal. The puncture-resistant containers should be located as close as practical to the use area. All reusable needles should be placed in a puncture-resistant container for transport to the reprocessing area.
Confidentiality

Special care needs to be taken to preserve the dignity and confidentiality of patients, including those patients with infectious diseases or conditions. The patient has the right to every consideration of his/her privacy concerning his/her own medical care. Case discussion, consultation, examination, and treatment are confidential and should be conducted discreetly. The patient has the right to expect that all communications and records pertaining to his/her care should be treated as confidential. All patient information shall be regarded as confidential and available only to authorized users.

Refusal to Care for Patients

Health care workers, including students, can not be excused from caring for patients with AIDS or other infectious diseases on his/her own request. Health care workers or students who may be immunosuppressed or have a clinical condition which may confer an increased risk must provide a written recommendation from his/her healthcare provider to that effect.

Pregnant Students

There is no evidence of increased risk to pregnant health care personnel themselves from caring for a patient with HIV infection. Many patients with AIDS excrete large amounts of cytomegalovirus (CMV) and infection with CMV during pregnancy may damage the fetus. When hygienic precautions (appropriate hand washing, not kissing infants, etc.) are followed, the risk of acquiring infection through patient contact is low. Therefore, a practical approach to reducing the risk of infection with CMV is careful hand washing after all patient contacts and avoiding contact with areas or materials that are potentially ineffective. Nevertheless, contact by pregnant students with patients known to have AIDS and/or AIDS Related Complex will be minimized whenever possible.

Management of Students with HIV Infection

Pre-admission or subsequent enrollment testing of students to detect AIDS, ARC, or HIV or will not be done.

CDC Recommendations:

Investigations of HIV transmission from Health Care Workers (HCWs) to patients indicate that, when the HCWs adhere to recommended infection control procedures, the risk of transmitting HIV from an infected HCW to a patient is small. The following requirements apply to all students, not just those with HIV infection.

1. Students must perform adequate hand washing before and after patient contact.
2. All students must wear gloves for direct contact with blood, body fluids, secretions, excretions, mucus membranes or non-intact skin of all patients.
3. Students who have exudative lesions or weeping dermatitis should refrain from direct patient care and from handling patient care equipment until condition resolves.
4. Students infected with HIV who perform exposure-prone procedures as identified by the clinical facilities must comply with the policy of the clinical facility.
5. Students infected with HIV should be counseled about the potential risk associated with taking care of patients with transmissible infections. The student’s private physician should determine whether the individual can safely perform patient care duties and may suggest changes in clinical assignment.
6. If a patient is exposed to blood or body fluids of a student with HIV infection, the patient should be informed of the incident. The student will abide by the hospital and/or clinical policies in effect in this situation.
7. Extraordinary care will be taken to protect information regarding any student’s health condition. In general, no specific or detailed information concerning complaints or diagnosis should be provided to faculty, administration, staff, other students, or even patients without the written consent of the affected student.

Management of Needle Sticks and Accidental Exposure

1. The Policies and Procedures of the facility where the incident occurred will be followed.
2. During the follow-up period, the exposed student will be referred to their private physician or to a public health official for appropriate counseling.
SURGICAL TECHNOLOGY PROGRAM CLINICAL GUIDELINES AND ACTIVITIES

Surgical Laboratory Guidelines

a. Maintain professional conduct.

b. Be knowledgeable of the use of all equipment, supplies, and procedures before attempting use.

c. Check all equipment and supplies for proper function before use and report any malfunction or damage immediately.

d. Handle equipment properly and carefully to prevent damage or injury to yourself or others.

e. Clean and/or care for all equipment or supplies as instructed by your assigned instructor/preceptor.

f. Store all equipment and supplies in proper place.

g. Use the principles of correct body mechanics when lifting, pulling, or pushing.

h. Remove any hazardous objects or spills from floors or hallways immediately or notify your instructor/supervisor.

i. Minimize distractions to prevent accidents.

j. Never run in rooms or hallways.

k. Do not enter RESTRICTED/ISOLATED areas unless instructed to do so in the course of clinical activities.

l. When assigned to a restricted area, as with use of laser or x-ray, follow hospital policy regarding personal safety precautions.

m. Report fire to person in charge if immediate area and follow designated procedures.

n. Discuss any question concerning a procedure or equipment with faculty instructor.

o. Students are REQUIRED to wear instructor approved protective eyewear when participating as a member of the sterile surgical team.

p. Whenever accidents or errors occur, they should be reported immediately to the instructor, preceptor or supervisor. Clinical facility policies regarding reporting and documentation will be followed.

Smoking

The clinical facilities in use are non-smoking facilities, students are not permitted to leave the OR Department and building to smoke during breaks and lunch time (break times are usually 10-15 minutes and lunch is usually 30 minutes).

Uniform Policy

1. Clinical Setting

   a. Students must be in required uniform and comply with all regulations of Surgical Technology program of study. Teal scrubs, white clinical lab coats with college patch, name pins, and TCL photo ID may be worn to the hospital but must be removed during patient care activities. Scrub jackets are optional. If scrub jacket is worn it must be the same color as the uniform with a patch on the left sleeve and be worn with college name pin and TCL photo ID.

   b. Student uniforms are to be worn for college scheduled clinical sessions. Students may wear the student uniform only during activity associated with the college program. Uniforms are not to be worn in public places.

   c. Uniforms must be clean, pressed and in good repair. Plain white leather shoes with white shoelaces are appropriate. No color logos or designs. No sandals, clogs, or open toed shoes. White leather shoes with white shoelaces as appropriate.

   d. Faculty in the clinical area has the final decision on attire.

   e. Clinical facilities may have different uniform requirements than detailed in this policy.

   f. No jewelry may be worn.

   g. Tattoos or other forms of body art must be covered.

   h. Hair must be arranged in a style that keeps it secured and off the collar. Fasteners should be of neutral color. Bows or ornate fasteners are not appropriate.

   i. Proper personal and oral hygiene are required. Fingernails must be of fingertip length, neatly trimmed and clean. Nail polish, nail extensions, and false nails are not acceptable. All harbor bacteria and are potentially a patient hazard.

   j. Perfume or strong shave lotions are not appropriate in clinical settings.

   k. No communication devices will be allowed in the classroom or clinical facilities.
1. Proper attire in the operating room, while in a patient care situation, also includes appropriate OSHA approved eye protection.

**Clinical Evaluation Narrative**

The evaluation/grade for each course will be described in the course syllabus. Final evaluations for each of the four clinical rotations are based on identified competencies. Competencies and forms are included with the syllabus and calendar of each course. During each clinical rotation the student will be evaluated using four (4) different evaluation tools: 1) Weekly preceptor evaluations, 2) Clinical instructor evaluation, 3) Case card preparation forms, and 4) Final evaluation. In clinical areas where direct supervision by the instructor is not always feasible, special checklists, objectives, or forms are used.

**Clinical Experience Records**

Continuing and final evaluations of the student by the instructors is used to help with the development and performance of the student during clinical course rotations. This is an important part that enables the student to set goals and accomplish their objectives. Observational techniques assess behaviors such as performance of skills, work habits, attitudes, and integration of knowledge.

Clinical experience is critical to the success of the Surgical Technology student. In maintaining the criteria of a “standard” program, students must complete and log one hundred and twenty-five (125) scrubbed cases in the scrub role. The cases must be in the specialties of General, Gynecology, ENT, Urology, and Orthopedics. Absences not only detract from experience, but also from the total number of countable scrubs. The clinical case log will be submitted at the conclusion of the final clinical rotation and will be kept on file in the program director’s office for five (5) years.

The student will be allowed one excused absence during each clinical rotation. In the event of an absence, the student is required to call the clinical site at least 30 minutes prior to the start time of that day. If no one answers at the facility then the student must leave a message stating the time of the call and reason for not attending clinical on that particular day. In addition to calling the facility the student also required to call the clinical instructor and/or the program director. If there is no answer then a message is to be left with that individual. The student may also call the health science department administrative assistant at 843-525-8276 and leave a message stating the reason for not being able to attend clinical, the time of the call, student name and a contact phone number. Failure to do so will result in a “no-call, no-show” and is immediate grounds for dismissal from the program. Total number of absences cannot exceed 10% of the total hours of the class.

Each student will be required to maintain a clinical experience record – recording each surgical procedure for which they served as a team member (see copy attached). At the end of each section, students will transfer information from the clinical experience record to a Tally Sheet for a summary of all cases participated in during the program. **Note: Surgical Procedure Cards Are To Be Completed On Each Different Surgical Case.**

**Instructor Evaluation**

Students will be asked by the institution to evaluate instructors every semester. These evaluations are summarized by administration and results passed on to the Program Director for program and faculty improvement.

**Student Clinical Work Policy**

The program faculty neither encourages nor discourages students from working in clinical or surgical facilities, but reminds the student of the following conditions:

1. The student should be committed to the completion of the surgical technology program
2. Part time or full-time employment at a clinical affiliate is not a part of the educational program. This employment will not be considered an excuse for a student’s failure to comply with program expectations.
3. The student will not be excused to leave clinic early to allow them to clock-in at a clinical affiliate as an employee of that affiliate.
4. At no time during surgical technology program clinical hours may a student receive financial compensation from a clinical institution for performing surgical technology program related clinical training.
5. The student will not receive credit for surgical cases or clinical hours during the time they are on the payroll for a clinical affiliate.
6. The student will not be allowed to perform clinical examinations for competency or proficiency during the time they are on the payroll for a clinical affiliate.
7. The student will not be covered under the TCL liability insurance policy when working as a part-time or full-time employee of a clinical affiliate.
8. Surgical technology students will be supervised by a clinical setting preceptor at all times during clinical rotations and will not be substituted in place of staff by the clinical agency under any circumstances.
9. Any student who violates the student work policy will be investigated and may be dismissed from the program.
Job Description: Certified Surgical Technologist

Association of Surgical Technologists

Definition

Surgical technologists are allied health professionals and are an integral part of the team of medical practitioners providing surgical care to patients in a variety of settings. The surgical technologist works under medical supervision to facilitate the safe and effective conduct of invasive surgical procedures. This individual functions under the supervision of a surgeon to ensure the operating room environment is safe, that equipment functions properly, and that the operative procedure is conducted under conditions that maximize patient safety. Duties of the surgical technologist may be performed in operating rooms, ambulatory surgery centers, central supply, labor and delivery areas, cardiac catheterization laboratories, private physicians’ offices, and other areas where invasive procedures are performed.

Education

Surgical technologists are graduates of postsecondary education programs. This education may be obtained through multiple routes, including universities, community colleges, vocational technical schools, and hospital-based programs. Institutions that offer a curriculum for surgical technologies receive special accreditation from the Accreditation Review Committee on Education in Surgical Technology; this organization provides accreditation services under the auspices of the Commission on Accreditation of Allied Health Education Programs (CAAHEP). Completion of the national curriculum for education of surgical technologists may result in an individual earning an associate degree.

Credentials

Certification of entry-level knowledge is conferred by the Liaison Council on Certification for Surgical Technologists (LCC-ST), a separately incorporated affiliate of the Association of Surgical Technologists, Inc. The LCC-ST is solely responsible for all policy decisions regarding the certification of surgical technologists. Initial certification is based upon satisfactory performance on the national certifying examination. CSTs maintain their certification by accruing contact hours of approved continuing education in a consecutive 6-year period or by successfully retaking the certifying examination at the conclusion of the 6-year period.

Competency Statements

These competency statements support the motto of AST, the Patient First-Aeger Primo, by providing guidelines for safe and effective patient care. Patients, employers, and peers can be assured that the surgical technology practitioner who demonstrates these competencies will be performing at a level of excellence that will ensure quality patient care.

I. Demonstrates patient care concepts.
   A. Provides a safe, efficient, and supportive environment for the patient.
   B. Identifies the patient’s response to illness.
   C. Identifies the physical, spiritual, and psychological needs of the patient.
   D. Identifies the rights of health care consumers.
   E. Demonstrates the appropriate method of obtaining an informed consent.
   F. Verifies information on the patient’s chart.
   G. Verifies and records the preoperative condition of the patient.
   H. Implements principles of transportation of the surgical patient.
   I. Monitors the patient to identify deviations from expected responses.

II. Demonstrates the application of the principles of asepsis in a knowledgeable manner to provide optimum patient care.
   A. Identifies the principles of sterile technique and applies these techniques to each operative procedure.
   B. Demonstrates a surgical conscience at all times.
   C. Prepares items for sterilization.
   D. Monitors sterilization methods.
E. Sterilizes items.
F. Applies the correct techniques of disinfection and antisepsis.

III. Demonstrates basic surgical case preparation skills.

A. Applies knowledge of normal and pathological anatomy and physiology to individualize patient care.
B. Identifies the basic surgical instruments by type, function, and name.
C. Applies the methods of care and handling of surgical instruments.
D. Identifies and prepares basic sterile packs and trays.
E. Identifies common sponges and dressings and their use in specific surgical procedures.
F. Identifies major types of catheters, drains, tubes, and collecting mechanisms and their preparation and use in specific surgical procedures.
G. Identifies suture materials and stapling devices.
H. Selects and prepares the appropriate suture and stapling devices for specific operative procedures.
I. Applies the proper methods of handling of suture materials and stapling devices.
J. Identifies and selects the appropriate types of accessory equipment for specific surgical procedures.
K. Demonstrates care, handling, and assembly of accessory equipment.
L. Identifies and selects the appropriate specialty equipment for specific surgical procedures.
M. Demonstrates care, handling, and assembly of specialty equipment.
N. Selects appropriate draping materials for specific surgical procedures.
O. Applies draping materials for specific surgical procedures.
P. Identifies and reports to designated personnel conditions that may exist and could negatively affect the health, safety, and well-being of patients or personnel.

IV. Demonstrates creation and maintenance of the sterile field.

A. Assures the physical preparation of the operating room.
B. Verifies exposure to sterilization process and integrity of sterile packaging, and opens appropriate supplies.
C. Follows the appropriate dress code as dictated by hospital policy.
D. Selects and prepares supplies and instruments for the sterile field.
E. Counts all instruments, sponges, needles, and other items as dictated by hospital policy.

V. Demonstrates the role of the scrub person.

A. Follows principles of correct hand scrub.
B. Gowns and gloves self and others.
C. Passes correct instrumentation, supplies, and suture as needed by the surgeon.
D. Prepares medication and irrigating solutions as needed by the surgeon.
E. Maintains highest standard of sterile technique during operative procedure.
F. Follows established policy and procedure for all counts.
G. Initiates corrective action when counts are incorrect.
H. Anticipates emergency or unusual circumstances and initiates corrective actions.
I. Follows appropriate postoperative routines.
K. Displays dexterity in the use of required instrumentation.
L. Anticipates the needs of the surgeon in order to expedite the surgical procedure.
M. Demonstrates organization of work.

VI. Demonstrates the role of the circulator.

A. Selects and prepares supplies and equipment for the operative team.
B. Provides for the comfort and safety of the patient.
C. Assists anesthesia personnel as needed.
D. Applies appropriate equipment to the patient as requested by the surgeon.
E. Performs counts with the scrub person.
F. Anticipates the need for additional supplies during the operative procedure.
G. G. Operates all equipment as needed following all recommended practices and procedures.
H. Communicates and documents all information regarding the surgical procedures.
I. Follows appropriate postoperative routines.
J. Monitors and controls the surgical environment as indicated in policy and procedure.
K. Implements the proper principles of positioning of the surgical patient.
L. Prepares the operative site for surgery.
M. Prepares all specimens for laboratory analyst.
N. Applies thermoregulatory devices to the patient.
O. Demonstrates the preparation and use of appropriate hemostatic and blood replacement agents and devices.
P. Performs urinary catheterization and monitoring of urinary output.
Q. Identifies developing emergency situations, initiates appropriate action, and assists in the treatment of the patient.
R.Documents the intraoperative care of the patient.

VI. Demonstrates accountability as a health care professional.
   A. Respects the rights of the patient by maintaining confidentiality and privacy of the patient.
   B. Demonstrates the ability to use sound judgment in decision making.
   C. Demonstrates initiative in expanding knowledge.
   D. Recognizes the importance of teamwork, consideration, and cooperation within the operating room.
   E. Functions in an efficient and professional manner in all aspects of surgical care.
   F. Understands that each practitioner is individually responsible for his/her own actions.
   G. Recognizes legal and policy limits of individual responsibility.

**Job Knowledge**

1. Selects, assembles, and checks equipment for proper function, operation, and cleanliness, including correcting malfunctions.
2. Opens sterile supplies.
3. Checks and verifies patient chart for pertinent information, identifies patient, and transports patient to the operating room.
4. Transfers the patient to the operating room bed.
5. Assesses comfort and safety measures and provides emotional support the patient.
6. Respects patient’s inherent right to privacy, dignity, and confidentiality.
7. Assists anesthesia personnel.
8. Applies electrosurgical grounding pads, tourniquets, monitors, etc, before procedure begins.
9. Performs necessary preoperative procedures such as urinary catheterization.
10. Prepares patient’s skin prior to draping.
11. Performs appropriate counts with scrub person.
12. Mixes, labels, and conveys drugs/solutions to the scrub person and/or surgeon.
13. Anticipates additional supplies needed during the procedure.
14. Participates with anesthesia personnel in estimating the blood loss during the surgical procedure and obtains necessary replacement.
15. Maintains accurate records throughout the procedure.
17. Transport patient to post-anesthesia care unit.
18. Assist other members of the team with terminal cleaning of the operating room.
19. Assists in preparing the operating room for the next patient.
Job Description: The Assisting Surgical Technologist
Association of Surgical Technologists

Definition

The CST acting as an assistant to the surgeon during the operation does so under the direction and supervision of that surgeon and in accordance with hospital policy and appropriate laws and regulations.

The Association of Surgical Technologists, Inc., recognizes that the certified surgical technologist (CST) first assistant must have skills necessary to perform complex tasks that require more advanced specialized education and training (see the official job description for the surgical first assistant.)

Professional Relationships

The surgical technologist is clinically supervised by a physician, CST, nurse, or other designated individual. Many surgical technologists also supervise or instruct other surgical technologists and health professionals as assigned. The surgical technologist has daily contact with physicians, nurses, and other health professionals as well as frequent contact with patients. Surgical technologists work closely with physicians to assist during surgery, establish protocols, and perform special procedures.

Scrub Surgical Technologist

The CST acting as a scrub person handles the instruments, supplies, and equipment necessary during the surgical procedure. He/she has an understanding of the procedure being performed and anticipates the needs of the surgeon. He/she has the necessary knowledge and ability to ensure quality patient care during the operative procedure and is constantly on vigil for maintenance of the sterile field. Responsibilities include the following:

1. Checks supplies and equipment needed for surgical procedure.
2. Scrubs, gowns, and gloves.
3. Sets up sterile table with instruments, supplies, equipment, and medications/solutions needed for procedure.
4. Performs appropriate counts with circulator prior to the operation and before incision is closed.
5. Gowns and gloves surgeon and assistants.
6. Prepares sterile field including draping the patient and equipment.
7. Conveys instruments, supplies, and equipment to the surgeon during the operative procedure.
9. Mixes, labels, and dispenses drugs/solutions to the surgeon.
10. Maintains the highest standard of aseptic technique during the operative procedure.
11. Cleans and prepares instruments for terminal sterilization.
12. Assists other members of the operative team with terminal cleaning of the operating room.
13. Assists in preparing the operating for the next patient.

Circulating Surgical Technologist

The CST acting as a circulator supports the surgical team by obtaining appropriate supplies, instruments, and equipment necessary for the surgical procedure. He/she monitors conditions in the operating room and constantly assesses the needs of the patient and the surgical team. He/she documents the care given to the patient during the operative procedure. Responsibilities include the following:

1. Pharmacology; anesthetics, drugs, and solutions used in surgery.
2. Wound healing and wound complications
3. Sterilization, disinfection, and antisepsis
4. Principles of asepsis and sterile technique
5. Environmental safety (e.g., electrical hazards, radiation and laser precautions)
6. Preoperative preparation of patients: consents, appropriate attire, transportation, identification, etc.
7. Positioning of patients for anesthesia and for surgery
8. Preoperative skin preparation
9. Preparation and care of surgical supplies and equipment
10. Establishment and maintenance of a sterile field
11. Appropriate instrumentation, suturing materials, needles, prosthetic devices, and other supplies
12. Appropriate counts of sponges, needles, instruments, etc.
13. Handling of surgical specimens and body fluids
14. Drainage mechanisms and wound dressings
15. Complications of surgical procedures
16. Emergency procedures, including cardiopulmonary resuscitation
17. Legal, moral, and ethical responsibilities
18. Effective communications and interpersonal relationships
19. Cost-containment measures

**Surgical Knowledge**

1. General and rectal surgery
2. Obstetric and gynecologic surgery
3. Ophthalmic surgery
4. Ear, nose, and throat surgery
5. Oral surgery
6. Plastic and reconstructive surgery
7. Urologic surgery
8. Orthopedic surgery
9. Neurosurgery Thoracic surgery
10. Cardiovascular surgery
11. Peripheral vascular surgery
12. Transplant surgery
13. Procurement surgery

**Equipment Knowledge**

1. Sterilizers
2. Operating room tables
3. Surgical lights
4. Electrosurgical units
5. Suction apparatus
6. Special Abilities

The surgical technologist must have the ability to integrate an understanding of anatomy and physiology with the prescribed surgical procedure. The individual must possess excellent manual dexterity and react quickly to convey and receive instruments from the surgeon. Surgical technologist must be able to communicate effectively and to function efficiently and calmly in extremely stressful environments. The surgical technologist must understand the scheduled procedure and be able to anticipate the sequence of events and needs of the surgeon. Careful attention to detail is required to ensure maintenance of a sterile field and observance of accepted procedures designed to protect the patient. The surgical technologist must react quickly and calmly in emergency situations.
STANDARDS OF PRACTICE
Association of Surgical Technologists, 2004

Standard I

Teamwork is essential for perioperative patient care and is contingent upon Interpersonal skills.

Interpretative Statement

Good interpersonal skills and surgical conscience provide an atmosphere to enhance the job performance of the surgical technologist.

Criteria

1. Interpersonal skills are measured by observation of behavior.
2. Interpersonal relationships should be characterized by trust, honesty, confidence, and respect.
3. The ability to meet expectations and to function may be dependent upon communication with team members.
4. The surgical technologist practitioner recognizes limits of individual responsibility within framework of job description, while working toward mutual goals of the organization.
5. The surgical technologist practitioner adheres to the AST Code of Ethics at all times in relationship to all members of the health care team.
6. The surgical technologist practitioner develops a professional attitude that will promote responsibility as an individual and as a member of the health care team.

Standard II

Preoperative planning and preparation for surgical intervention are individualized to meet needs of each patient and his or her surgeon.

Interpretative Statement

The process of formulating in advance the direction the surgical technologist practitioner must follow in preparing for the surgical procedure involves the collection of data concerning the patient and the surgeon’s preferences for the procedure.

Criteria

1. The data collection may be accomplished through diversified means such as interview, review of records, assessment, or consultation with other members of the team.
2. Current health status deviations and/or problems are identified.
3. Preoperative diagnosis, common complications, and operative pathology relating to specific surgical procedures are understood through fundamental knowledge of basic sciences and procedures applicable to the surgeon’s plan for surgical intervention.
4. Surgical procedure manuals or cards that enumerate surgeon’s preference are current.

Standard III

The preparation of the surgical suite/clinical area and all supplies and equipment will ensure environmental safety for patients and personnel.
Interpretative Statement

Environmental safety and infection control are achieved by adhering to sound technical scientific principles and guidelines to minimize hazard.

Criteria

1. Wear required attire correctly.
2. Select and prepare necessary supplies and equipment.
3. Check all equipment for working order and report or correct unsafe conditions. Inspect emergency equipment and supplies for condition and quantity.
4. Assure physical preparation of clinical area, i.e., damp dust and place furniture.
5. Verify exposure to a sterilization process and integrity of sterile packaging. Open supplies aseptically.
6. Establish and maintain sterile field.
7. Identify and report to designated personnel conditions that may exist and could negatively affect the health, safety, and well being of personnel.
   a. Adhere to recommended isolation precautions.
   b. Check electrical, laser, and radiation equipment in the operating room.
8. Demonstrate correct body mechanics.
9. Comply with all policies, procedures, and recommended practices pertaining to the use, care and maintenance of supplies and equipment.
10. Identify principles and demonstrate techniques of disinfection, sterilization, and environmental control.

Standard IV

Application of basic and current knowledge is necessary for a proficient performance of assigned functions.

Interpretative Statement

Knowledge of and assistance with a surgical procedure are demonstrated by meeting the anticipated needs of the surgeon and other team members.

Criteria

1. Identify breaks in aseptic technique and correct and/or report same to the proper authority.
2. Display dexterity in the use of surgical instruments throughout the procedure.
3. Prepare and know the specific uses of all needed equipment and supplies, including solutions and drugs.
4. Continually maintain a neat and orderly sterile field as dictated by the sequence of the procedure.
5. Use economy in time, motion, and material in assisting the surgeon surgical team.
6. Differentiate between contaminated and clean/sterile areas.
7. Anticipate in counting procedures per established policy.
8. Appropriately prepare all specimens for laboratory analysis.
9. Identify unusual or emergency situations and use sound judgment in instituting established procedures to correct them in a calm and efficient manner.

Standard V

Each patient’s rights to privacy, dignity, safety, and comfort are respected and protected.
Interpretative Statement

Professional behavior of the surgical technologist practitioner reflects a surgical conscience that includes legal, ethical, and moral responsibilities to each individual patient. Every practitioner is accountable for his or her acts of commission and omission that contributed to outcomes of surgical intervention.

Criteria

1. The patient is transported, positioned, and restrained without bodily injury.
2. Every surgical technologist practitioner is morally and ethically responsible and legally accountable to patients for performance.
3. Physical, psychological, and spiritual needs of the patients are met.
4. The patient is respected as an individual.
5. The surgical technologist practitioner should be familiar with the Patient’s Bill of Rights and statutes governing allied health practice.
6. The patient is monitored to identify deviations from expected responses requiring immediate action.
7. Events must be factually documented and records legible.
8. Patients records are verified as complete.
9. Records verify that patient care has been rendered in accordance with policy and procedure.
10. The surgical technologist practitioner should recognize the limits of individual responsibility to self, profession, and employer.

Standard VI

Every patient is entitled to the same application of aseptic techniques within the physical facilities.

Interpretative Statement

The surgical suite/clinical area if restored to a safe environment for subsequent patient care following completion of a surgical procedure.
Graduation Requirements

I. Complete 50 semester hour credits distributed as follows:

A. REQUIRED MAJOR COURSES  

<table>
<thead>
<tr>
<th>Title</th>
<th>Course Name</th>
<th>Class</th>
<th>Lab</th>
<th>Credit</th>
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<tbody>
<tr>
<td>SUR</td>
<td>Introduction to Surgical Technology</td>
<td>3.0</td>
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<tr>
<td>SUR</td>
<td>Surgical Procedures I</td>
<td>2.0</td>
<td>6.0</td>
<td>4.0</td>
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<tr>
<td>SUR</td>
<td>Surgical Procedures II</td>
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<tr>
<td>SUR</td>
<td>Advanced Surgical Procedures</td>
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<td>3.0</td>
<td>2.0</td>
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<tr>
<td>SUR</td>
<td>Introduction to Surgical Practicum</td>
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<td>12.0</td>
<td>5.0</td>
</tr>
<tr>
<td>SUR</td>
<td>Surgical Practicum I</td>
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B. REQUIRED RELATED COURSES  

<table>
<thead>
<tr>
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<th>Course Name</th>
<th>Class</th>
<th>Lab</th>
<th>Credit</th>
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<tbody>
<tr>
<td>AHS</td>
<td>Biomedical Terminology</td>
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<tr>
<td>AHS</td>
<td>Basic Pharmacology</td>
<td>2.0</td>
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<tr>
<td>AHS</td>
<td>Procedures &amp; Practices in the Operating Room</td>
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<tr>
<td>BIO</td>
<td>Basic Anatomy &amp; Physiology</td>
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C. GENERAL EDUCATION REQUIREMENTS  

<table>
<thead>
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<th>Class</th>
<th>Lab</th>
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<tbody>
<tr>
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<tr>
<td>PSY</td>
<td>General Psychology</td>
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<tr>
<td>CPT</td>
<td>Introduction to Computers</td>
<td>3.0</td>
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<tr>
<td>CPT</td>
<td>Microcomputer Applications</td>
<td>3.0</td>
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</table>

II A Grade of C (C=2) or better in all courses within this curriculum, with a minimum cumulative grade average of 2.00 on all college work.

Major  30.0
Required Related Courses  11.0
General Education  09.0
50.0

CURRICULUM CODE: 15211  EFFECTIVE: 1/04
DATATEL CODE: DHS.SURG  REVISED: 5/09
## Recommended Semester Course Sequence

**TECHNICAL COLLEGE OF THE LOWCOUNTRY**  
**MODEL FOR SURGICAL TECHNOLOGY**

**CLUSTER:** Allied Health Technology  
**DEGREE:** Health Science Diploma

### FIRST YEAR - FALL SEMESTER

<table>
<thead>
<tr>
<th>Class</th>
<th>Lab</th>
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<tbody>
<tr>
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<td>Biomedical Terminology</td>
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<tr>
<td>AHS 121</td>
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<td>Basic Pharmacology</td>
</tr>
<tr>
<td>AHS 130</td>
<td>3.0</td>
<td>Procedures &amp; Practices in the Operating Room</td>
</tr>
<tr>
<td>BIO 112</td>
<td>4.0</td>
<td>Basic Anatomy &amp; Physiology</td>
</tr>
<tr>
<td>SUR 101</td>
<td>3.0</td>
<td>Intro to Surgical Technology</td>
</tr>
<tr>
<td>SUR 110</td>
<td>1.0</td>
<td>Intro to Surgical Practicum</td>
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</table>

Total Semester Credit Hours Required = 21.0

### FIRST YEAR - SPRING SEMESTER

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<td>English Composition I</td>
</tr>
<tr>
<td>PSY 201</td>
<td>3.0</td>
<td>General Psychology</td>
</tr>
<tr>
<td>SUR 103</td>
<td>2.0</td>
<td>Surgical Procedures I</td>
</tr>
<tr>
<td>SUR 104</td>
<td>2.0</td>
<td>Surgical Procedures II</td>
</tr>
<tr>
<td>SUR 106</td>
<td>1.0</td>
<td>Advanced Surgical Procedures</td>
</tr>
</tbody>
</table>

Select one of the following:  
- CPT 101 Introduction to Computers  
  3.0 0.0 3.0  
- CPT 170 Microcomputer Applications  
  3.0 0.0 3.0  
  **Total** 19.0

### FIRST YEAR - SUMMER SEMESTER

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<th>Class</th>
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<tr>
<td>SUR 112</td>
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<td>Surgical Practicum I</td>
</tr>
<tr>
<td>SUR 113</td>
<td>4.0</td>
<td>Advanced Surgical Practicum</td>
</tr>
</tbody>
</table>

Total Semester Credit Hours Required = 10.0

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**TOTAL SEMESTER CREDIT HOURS REQUIRED = 50**
The Pledge of the Surgical Technologist

I solemnly pledge to myself and those present to have a:

Strong surgical conscience, to

Understand the patient’s rights, to

Respect myself and team members, to be

Goal oriented, an

Inspiration to peers and those around me, to be

Compassionate, and ever watchful of

Aseptic technique, to be

Loyal to myself and my profession, exhibit

Trust in co-workers, maintain

Efficiency thorough continuing education, to have the

Courage to face any situation placed before me, to be

Honest,

Nonjudgmental,

Optimistic, and

Logical in my decisions, to be

Objective in self discipline, to provide

Guidance to those who follow in my footsteps, to have

Integrity,

Stamina of body and mind, and to

Treasure Life
CLINICAL CASE REQUIREMENTS

When instruction is provided in the basic, intermediate, and advanced procedures outlined in the curriculum, the learner should be able to apply that information to the understanding of the following related procedures. Clinical case requirements must meet the standard case requirements as outlined in the syllabus.

I. Core
   A. Endoscopic (minimally invasive)
      1. General Surgery
         a. Colonoscopy
         b. Endoscopic inguinal herniorrhaphy
         c. Endoscopic retrograde cholangiopancreatostomy (ERCP)
         d. Esophagogastroduodenoscopy (EGD)
         e. Esophagoscopy
         f. Laparoscopic appendectomy
         g. Laparoscopic cholecystectomy
         h. Sigmoidoscopy
      2. Obstetric and Gynecologic
         a. Colposcopy
         b. Hysteroscopy
         c. Laparoscopic assisted vaginal hysterectomy (LAVH)
         d. Laparoscopy
      3. Otorhinolaryngologic
         a. Microlaryngoscopy
         b. Sinuscopy
         c. Temporomandibular joint (TMJ) arthroscopy
         d. Ripple endoscopy (laryngoscopy, bronchoscopy and esophagoscopy)
      4. Genitourinary
         a. Cystoscopy
         b. Nephroscopy
         c. Ureteroscopy
      5. Orthopedic
         a. Knee arthroscopy
         b. Shoulder arthroscopy
   B. General Surgery
      1. Anoplasty
      2. Appendectomy
      3. Billroth I
      4. Billroth II
      5. Breast biopsy with needle localization
      6. Cholecystoduodenostomy
      7. Cholecystojjunostomy
      8. Choledochojunostomy
      9. Choledochojejunostomy
      10. Excision of gynecomastia
      11. Excision of lipoma
      12. Excision of Zenker’s diverticulum
      13. Exploratory laparotomy
      14. Femoral herniorrhaphy
15. Fissure/fistula repair
16. Gastrectomy
17. Gastrostomy
18. Ileostomy
19. Incision and drainage (I & D) of an abscess
20. Incisional herniorrhaphy
21. Insertion of infusion catheters/ports
22. Liver biopsy
23. Liver resection
24. Muscle biopsy
25. Pilonidal cystectomy
26. Rectal polypectomy
27. Roux-en-Y
28. Small bowel resection
29. Sphincterotomy
30. Spigelian herniorrhaphy
31. Umbilical herniorrhaphy
32. Ventral herniorrhaphy

C. Obstetric and Gynecologic
1. Ablation of condylomata
2. Bartholin cystectomy
3. Cerclage
4. Episiotomy repair
5. Loop electrosurgical excision procedure (LEEP)
6. Myomectomy
7. Oophorectomy
8. Ovarian cystectomy
9. Placement of radiation therapy device
10. Salpingectomy
11. Vainoplasty

D. Otorhinolaryngologic
1. Glossectomy
2. Mandibulectomy
3. Nasal antrostomy
4. Nasal polypectomy
5. Parathyroidectomy
6. Parotidectomy
7. Salivary duct stone excision/sialolithotomy
8. Sphenoidectomy
9. Stapedectomy
10. Turbinectomy

E. Genitourinary
1. Chordee repair
2. Circumcision
3. Epispadius repair
4. Hydrocelectomy
5. Meatoplasty
6. Orchidectomy
7. Perineal prostatectomy
8. Retropubic prostatectomy
9. Urethral meatotomy
10. Varicocelectomy
11. Vasectomy
F. Orthopedic
   1. Achilles tendon repair
   2. Bankart procedure
   3. Bristow procedure
   4. De Quervain’s contracture release
   5. Dupuytren’s contracture release
   6. Putti Platte procedure
   7. Total ankle arthroplasty
   8. Total elbow arthroplasty
   9. Total shoulder arthroplasty
  10. Ulnar nerve transposition

II. Specialty

A. Endoscopic (minimally invasive)
   1. Cardiothoracic
      a. Bronchoscopy
      b. Mediastinoscopy
      c. Thoracoscopy
   2. Peripheral vascular
      a. Angioscopy
   3. Neurosurgical
      a. Lumbar discoscopy
      b. Ventriculoscopy

B. Ophthalmic
   1. Anterior vitrectomy
   2. Chalazion excision
   3. Evisceration
   4. Exenteration
   5. Iridectomy
   6. Iridotomy
   7. Lacrimal duct probing
   8. Pterygium
   9. Trabeculoplasty/placement of drainage shunt

C. Oral and maxillofacial
   1. Arch bar application
   2. Dental extraction
   3. Dental implants
   4. Orthognathic procedure
   5. Zygomatic fracture management

D. Plastic and reconstructive
   1. Blepharoplasty
   2. Breast augmentation
   3. Breast reduction
   4. Cheiloplasty
   5. Dermabrasion
   6. Excision nevus/basal cell carcinoma/squamous cell carcinoma
   7. Mastopexy
   8. Mentoplasty
   9. Otoplasty
  10. Palatoplasty
  11. Rhinoplasty
  12. Scar revision
  13. Suction lipectomy
E. Cardiothoracic
1. Annuloplasty
2. Lobectomy
3. Lung biopsy
4. Mitral valve commissurotomy
5. Scalen node biopsy
6. Thoracoplasty
7. Thymectomy

F. Peripheral vascular
1. Angioplasty
2. Axillofemoral bypass
3. Embolectomy
4. Femorofemoral bypass
5. Vein ligation/stripping

G. Neurosurgical
1. Chorodotomy
2. Ulnar nerve transposition

H. Related pediatric congenital defects
1. Atrial/ventricular septal defects
2. Bladder extrophy
3. Branchial cleft cyst
4. Choanal atresia
5. Coarctation of the aorta
6. Craniosynostosis
7. Diaphragmatic hernia
8. Gastoschisis
9. Hirschsprung’s disease
10. Imperforate anus
11. Intussusceptions
12. Myelomeningocele
13. Omphalocele
14. Patent ductus arteriosus
15. Pectus excavatum
16. Pyloromyotomy
17. Syndactyism
18. Tetralogy of Fallot
19. Thyroglassal duct cyst
20. Tracheoesophageal fistula
21. Volvulus
22. Wilms’ tumor
STUDENT AGREEMENT

I, ____________________________________________________________, have received, read, and agree to abide by the policies and guidelines related to Surgical Technology.

DATE:_____________ SIGNATURE:________________________________________

MY HEALTH INSURANCE IS COVERED BY:

______________________________________________________________________________________________

(Please attach a copy of your Health Insurance card.)

HEALTH HAZARD WAIVER:

I, ____________________________________________, hereby acknowledge that I have been informed of the hazards associated with my training for Surgical Technology (infectious diseases, including Hepatitis-B and HIV, exposure to radiation, laser, sharp instruments, and blood) and relinquish all liabilities of the School and of the Training Affiliates, in the event that personal harm occurs.

DATE__________ STUDENT SIGNATURE:______________________________

INSTRUCTOR SIGNATURE:__________________________________________

NOTE: This Agreement will be placed in your file and kept for length of your training.