

ADDING GUIDELINES TO THE CLASSROOM

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SURGICAL ATTIRE

- Posting lab expectations on the first day makes communication clear and manageable!
- These same expectations can be added to program handbooks
 - Helpful for policy adaption at clinical facilities
- Use AST Surgical Attire Guidelines so your students can prepare prior to entering your lab
- Guidelines for Wearing of Jewelry & Use of Eye Protection can also be introduced here.
- Have measurable standards by adding it to your weekly lab evaluation, this makes it clear for your instructors as well.

Lab Policies.docx - Word

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LAB POLICIES

- You may only attend the lab section for which you are assigned. All other requests must go through Lab Instructors.
- Attendance is vital to this program; please refer to the attendance policy. Missing Lab will result in missed points for weekly evaluations.
- Proper attire is required; you will not be admitted in street clothes—scrubs only! Appropriate shoes with leather uppers are recommended to prevent injury. Please also reference program dress code and AST Surgical Attire Guidelines. No visible jewelry is permitted (again, handbook and AST Jewelry Guidelines).
- This lab is run like an operating room; upon entering you will be held to those standards. All students must complete all Bloodborne Pathogen Training with proof of certification prior to working in the lab.
- Please communicate in a professional manner to peers and Instructors. Poor communication will result in the enforcement of ZERO TOLERANCE policy.
- No cell phones or pagers during class time, unless emergent and with Instructor permission.
- Please come to class prepared for content and activities.

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Surgical Attire

EVALUATION EXAMPLE #1

Weekly Lab Evaluation

Possible Points: 20

Name: _____ **Week:** _____

Category	Acceptable 2	Needs Improvement 1	Unacceptable 0	Total Points
Attendance <ul style="list-style-type: none"> • Arrives on time • Remains for entire lab period • Arrives from break on time • Other 				
Attire <ul style="list-style-type: none"> • Appropriate clothing • Appropriate shoes • Appropriate PPE • Appropriate hygiene • Appropriate nails, jewelry, scents, etc. • Other 				
Hand Wash <ul style="list-style-type: none"> • proper health care hand wash • Other 				
Attitude				

← Measurable Follow-up!

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EVALUATION EXAMPLE #2

Weekly Student Evaluation.doc [Compatibility Mode] - Word

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SUR 2210 Surgical Technology Lab I
Weekly Evaluation of Student per Instructor

Name: _____ Date: _____

Guidelines for use:

- Check mark indicates, that the student meets expectations consistently, requiring infrequent prompting
- Zero indicates, that the student exhibits deficiencies and needs improvement; requires frequent prompting

1. Accountability/Professionalism

- ___ a. Student demonstrates punctuality
- ___ b. Student is in proper OR attire
- ___ c. Communication skills (verbal & non-verbal) are respectful and encouraging
- ___ d. Demonstrates and maintains control in high stress situations
- ___ e. Recognizes and evaluates personal strengths and weaknesses
- ___ f. Accepts guidance/direction from instructor

2. Relationships with others/Teamwork

- ___ a. Strives to maintain compatible relationships with positive attitude toward classmates
- ___ b. Works with classmates and responds to their direction in positive and cooperative manner
- ___ c. Seeks out additional assistance when learning a new skill

Measurable Follow-up

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ASEPTIC TECHNIQUE

- Some guidelines may seem long, and not feasible to post- by taking out the applicable excerpts we don't leave behind our valuable resource!
- Students get more familiar with how to find professional resources after they graduate
- Students are able to share in a community of consistency for a more global practice
- AST Surgical Scrub, Hand Hygiene, and Handwashing looks awesome laminated over the scrub sink!

POSTER EXAMPLE #1

on the surface.

(6) If footwear is specifically designated for use in the surgery department and worn without shoe covers, the footwear must not be work outside the department.

Standard of Practice II
The surgical scrub should be performed by all members who will be donning a sterile gown and gloves.

1. The surgical scrub, when properly performed, reduces the skin flora from the fingernails, hands and forearms of the surgical population to an irreducible minimum; and slow the regrowth and contribute to reducing the risk of a SSI.⁹
2. Surgical hand antisepsis should be accomplished using either an antimicrobial soap or an alcohol-based solution with cumulative, persistent antimicrobial activity before donning the sterile gown and gloves.⁹

Standard of Practice III
The members of the sterile surgical team should complete the pre-scrub activities in preparation to performing the surgical scrub.

1. The fingernails should be kept clean, not extend beyond the fingertips and

A poster of just this section can help students understand rationale for the skill

8.50 x 11.00 in

POSTER EXAMPLE #2

The image shows a screenshot of a web browser displaying a PDF document. The browser's address bar shows the URL: http://www.ast.org/uploadedFiles/Main_Site/Content/About_Us/Standard_Surgical_Attire_Surgical_Scrub.pdf. The document content includes a section header and a list of guidelines. A semi-transparent grey callout box is overlaid on the right side of the text, containing the text: "This Guideline can easily be posted by the sink!".

Standard of Practice III
The members of the sterile surgical team should complete the pre-scrub activities in preparation to performing the surgical scrub.

1. The fingernails should be kept clean, not extend beyond the fingertips and artificial nails should not be worn.
 - A. Fingernails that are long and extend beyond the fingertips can puncture the gloves placing the patient at risk of SSI from exposure to the transient and resident skin flora.⁸ Additionally, long fingernails can cause injury to the patient for injury when the surgical team member is providing care to the patient, eg aiding the patient in moving from the stretcher to the operating table, patient positioning, etc.
 - B. The subungual has been identified as harboring the highest concentration of microorganisms as compared to the skin of the hands and forearms. Debris should be removed from the subungual area with the use of a sterile, plastic single-use, disposable nail cleaner that is usually provided with the scrub brush package. Reusable nail cleaners are not recommended. Orangewood sticks should not be used to clean the

8.50 x 11.00 in

EVALUATION EXAMPLE #3

SUR 2210 SURGICAL TECHNOLOGY LAB I FINAL PRACTICAL.doc [Compatibility Mode] - Word

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**SUR 2210 SURGICAL TECHNOLOGY LAB I
FINAL PRACTICAL**

P/F	PERFECT	1ST ERROR/REDO
___ Operating Room Attire & PPE	20	16
___ Perform a Basic Hand Wash	20	16
___ Damp Dust and Organize the OR	20	16
___ Prepare for a Surgical Case	20	16
___ Open Back Table Cover	20	16
___ Open a Basin Set	20	16
___ Open Wrapped Instrument Set /	20	16

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Making it measurable and having students be accountable...

If we don't measure it.. Our signs just gather dust!

EVALUATION EXAMPLE #4

Kick it up a notch! Use the Guidelines to help YOU and your student with clear performance evaluation criteria

Focus: Perform a basic hand wash

Objective: Perform a basic hand wash (fingers to 2 inches above the wrist)

Content: Use the scrub sink, soap, and paper toweling

Standards: **Time:** 3 minutes to complete
Accuracy: Complete with a maximum of one error (with correction) per competency

PERFORMANCE EVALUATION CHECKLIST

Evaluation	Redo	Acceptable
1. Student is able to state purpose of a basic hand wash		
2. Student is able to state circumstances when a hand wash is necessary		
3. Inspects hands and wrists for cuts, abrasions, etc.		
4. Turns on water and sets water temperature		
5. Wets hands and wrists		
6. Applies soap		
7. Lather		

ASEPTIC TECHNIQUE- GOWNING

Association of Surgical Te... x http://www.a..._Gloving.pdf x http://www.a...al_Scrub.pdf x +

www.ast.org/uploadedFiles/Main_Site/Content/About_Us/Standard_Gowning_and_Gloving.pdf

Standard of Practice I

All sterile surgical team members are required to don a sterile surgical gown prior to entering the sterile field to aid in preventing surgical site contamination.

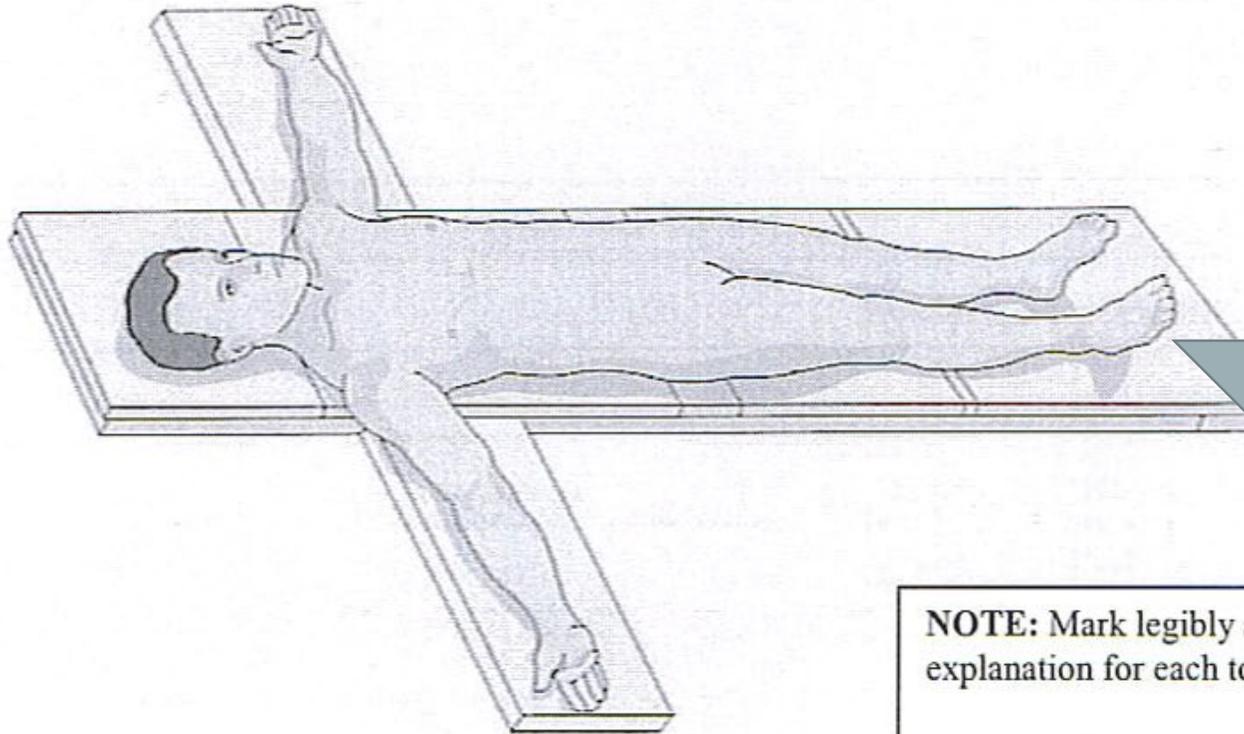
1. Gowns are required to be worn according to Standard of Practice I to provide a barrier between the patient and sterile surgical team members and to prevent and body fluid contamination of the surgical wound. The gown also protects the team member from the patient's blood and body fluids.
2. Gowns are sterile in the front from mid-chest level to the ankle or waist level.
 - A. If a surgical team member requires a standing position, the gown should be positioned prior to the team member taking position. The team member should avoid changing levels or moving to a new position at the sterile field.
 - B. If the surgeon is seated for the surgical procedure, the entire surgical team should be seated and remain seated for the entire procedure, avoiding changing levels.
3. The gowns are sterile from two inches above the elbow to the cuff seam. The axillary region is not considered a sterile area.
4. The back of the gown is not considered sterile, because it cannot be observed by the sterile team member.

Use a gown to place on a large surface (or pin to a cork board) for students to draw the actual sterile perimeters on!

LOTS OF ASEPTIC TECHNIQUE

- With so many Guidelines for professional practice being hands-on, we can still find ways to be creative with our old lectures! (Not all ideas have to be for the lab;)
- A fun desk activity for Skin Prep can include a handout of an anatomical model that student can color prep boundaries on.
 - Kick it up a notch!- have students then label all areas of the body with possible prep solution choices.
 - Next- have them draw placement of EKG leads, grounding pads, thermometers, IV's, blood pressure cuffs, and positioning devices
 - Get a large photo made to make this a group activity- have a copy of the guideline for students to work from

Case Study



Be sure to use a text box for all of the different labels you want provided!

NOTE: Mark legibly and provide explanation for each to receive credit.

DISINFECTION AND STERILIZATION

- Don't have money for an industrial size autoclave? No sweat... lol, so punny

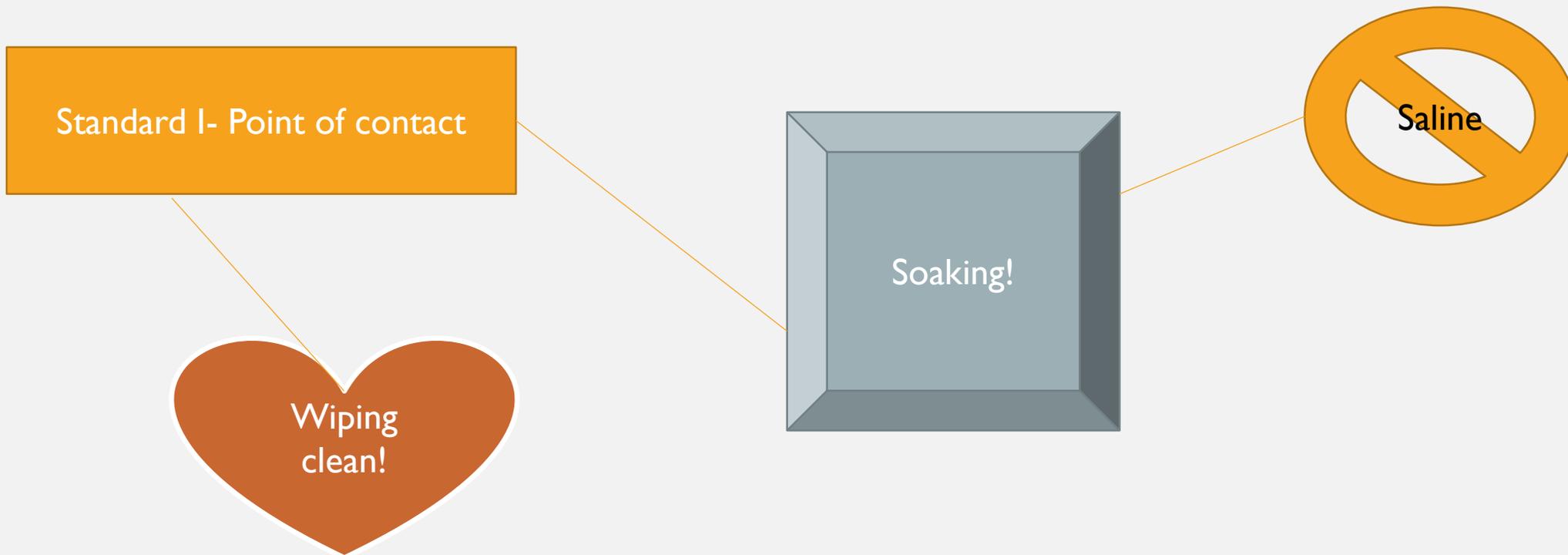


It's time to get creative! Have each student pick a different washer or sterilization machine to replicate a central processing department for a day!

On the due day, have each student 'train' the group on their appliance

DISINFECTION AND STERILIZATION

- Feeling like incorporating some technology? Use Lucid Charts by Google to have students diagram a 'day in the life of an instrument'



PACKAGING MATERIALS

- What's wrong with a workshop? If we don't use an extra large box for earrings.. than it's a good thing we have other sizes.
- By using recycled packaging (possibly recycled instrument wrappers donated from affiliated clinical sites) wrappers, and peel packages, you can use a table of supplies for students to chose best practice using the AST Guidelines for Packaging! (Like the holidays right in your classroom;)



ADDITIONAL IDEAS - LAB

- Make a copy of the principles of asepsis and perform a full demonstration of each principle!

The Principles of Aseptic Technique

1. When in doubt, throw it out!
2. Sterile gowns are only sterile on the front. The boundaries are from nipple line to table level and from gloved hands to 2" above the elbow. (See Fig. 15-1)
3. Sterile tables are considered sterile only at table level. (See Fig. 15-2)
4. Non-sterile members never lean or reach over sterile fields. They do not pass between 2 sterile fields.
5. Sterile liquids in bottles with an edge/lip which has been protected by a sterile cap, may be delivered directly from the bottle into a sterile container on the field.
6. The edge of any sterile drape, wrapper or covering is considered unsterile (1" margin). As a sterile package is opened, the edges are considered unsterile.
7. The sterile field is created as close as possible to the time of use and is monitored throughout.
8. Sterile areas are continuously kept in view.
9. Sterile personnel remain in close proximity of the sterile field. The do not pass between 2 unsterile fields
10. Sterile personnel must pass each other front to front or back to back. (See Fig. 15-10)
11. Movement and talking are kept to a minimum during surgery.
12. Moisture carries bacteria from non-sterile to sterile surfaces (strike-through)

ADDITIONAL IDEAS- CLINICAL

Have students research
AST Guidelines

Students will first research and read the following assigned Guidelines (from the AST website) that pertain to Surgical Practice. Please next, fill in what principle of asepsis the Guideline follows. Finally, each student will choose 3 guidelines they have witnessed being performed 'improperly', give the example with a list of corrections or suggestions on how to improve clinical practice or create more awareness.

Have them compare real world
practice with principles

Aseptic Technique Guidelines	Aseptic Principle	Real World Example w/Correction
Items dropped on floor		
Underside of Mayo		
Bowel Technique		
Urinary Catheterization		
Scrubbing		
Laundering		
Jewelry		
Eyewear		
Creating Field		
Drapes		
Skin Prep		
Specimens		
breaking down field		
Gowning & Gloving		
Monitoring Sterility		

Have students present their
findings and offer possible
prevention or solution ideas

SHARE OUT!

- **What creative ways have you found to use the **AST Guidelines** as a teaching tool?**
 - *Which application area have you found to be successful? Didactic, Lab, or Clinical*
 - *Was it a graded component, or an activity?*
 - *Did the students find value in the assignment for current or future practice?*