



Health Sciences
Surgical Technology
Surgical Assisting Program

Dear Prospective Student:

Thank you for your interest in the Surgical Assisting Program at Gulf Coast Community College. Our program is fully accredited and meets all criteria necessary for students to sit for the national examination. As of 2011, and upon successful completion of all requirements, the student will be board certified to use the title "Certified Surgical First Assistant (CSFA)" from the NBSTSA (National Board of Surgical Technology and Surgical Assisting).

The traditional, campus-based core course format is an intensive two-year, full-time program for those with no surgical technology experience. The recommended Summer and Fall prerequisites, **prior to the January Core Program Start Date**, are listed in the attached Curriculum Plan. Applications should be submitted as early as possible as date is considered in the selection process. Those who already possess certification as a Surgical Technologist (CST) will receive up to 38 external credits and join the class in the 2nd year. The CST cohort is offered online with a one week lab in June each year. Transcripts can be evaluated for appropriate substitutions or options. Students may apply after the deadline provided there is space available in the program.

There are two options. You can choose to complete the Advanced Technical Diploma option with 59 credits, or the Associate in Applied Science degree option with 74 credits. You need to declare your major when you apply.

Please read everything in the attached application packet, or visit our website at <http://surgttech.gulfcoast.edu> to learn about our program, student responsibilities, and the job classification of Surgical Assistant. Additional information regarding this career can be found at www.surgicalassistant.org, the official website of the Association of Surgical Assistants. If you decide that becoming a Surgical Assistant is for you, then begin the process by applying to the program and following the attached sep-by-step instructions.

If you have any questions, please feel free to call or e-mail Shannon Smith at 1-800-311-3685, ext. 5881 or ssmith@gulfcoast.edu; or call Craig Wise at (850) 913-3311, toll free at 1-800-311-3685 ext. 3311; or Libby McNaron at (850) 873-3551. We look forward to working with you.

Sincerely,

A handwritten signature in black ink that reads "Libby McNaron".

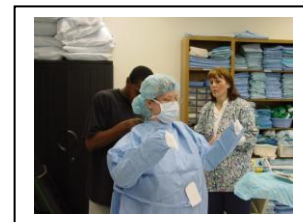
Libby McNaron, RN, CST, CNOR, BSN, MS
Surgical Services Coordinator
rev.01/11



Student Checklist

Surgical Assisting

Application Responsibilities



Apply to the College:

- ___ **Step 1. Complete a general Admission Application to Gulf Coast Community College.** Application is available at the Office of Admissions or online at www.gulfcoast.edu. Click "Prospective Students" tab for online applications. Follow instructions posted online, or contact lmcnaron@gulfcoast.edu for step-by-step instructions.
- ___ **Step 2. Pay the \$20 college application fee. If this is not paid, you cannot get registered for courses.** (Failure to pay the application fee at the time of submission can result in your ineligibility for program consideration.)
- ___ **Step 3. Request OFFICIAL transcripts that show attainment of high school diploma or equivalent (GED), and have them sent to Admissions Office of Gulf Coast Community College. If you have an accredited advanced degree that will transfer to GCCC, you do not need your high school/GED transcripts. Evidence of high school graduation must be on file to exit the program successfully.** Forms are available in the Admissions Office, online, or at the end of this application packet.
- ___ **Step 4.** If you have attended any other colleges or schools, **request that OFFICIAL transcripts be sent to the Admissions Office of Gulf Coast Community College from all schools and colleges attended.** Forms are available in the Admissions Office or at the end of this application packet. Grade point average (GPA) of 2.0 or greater (on a 4.0 system) is required for all school, college, and/or university coursework attempted. A GPA less than 2.0 may be acceptable, but the student will be admitted on probation. Higher grade point averages will be given greater consideration in selection process.
- ___ **Step 5.** Applicants must **take the entrance examinations:** College Placement Tests (CPT—ask for Arithmetic, Language, and Reading). Minimum CPT scores: Reading 77, Language 77, and Arithmetic 47. Those who score less than minimum may still apply and be considered for admission, but must retest and achieve the required scores prior to graduation.

Note: AAS applicants may have higher required scores for English ENC 1101 (83 Reading and 83 Language), and Algebra graduation minimum (72 CPT, satisfactory "C" in Fundamentals of Algebra MAT 0024, or higher level Math course).

- If you wish to study prior to taking the exam, you may go online to purchase a CPT study guide (for Reading, Language, and Math) at a commercial bookstore, or you may download a study guide from www.studyguidezone.com/pdfs/tabeteststudyguide.pdf. We can also e-mail you a free copy. Call (850) 769-1551, ext. 2899 to hear the CPT testing schedules at GCC, which are subject to change.
- **Note: Students with an Associate Degree or higher may be exempt from taking the CPT tests. When applying to the program, if you have a Bachelor's Degree, any course substitutions must be made using an External Credit Evaluation form.**
- The CPT exams are required to register for Anatomy courses. The exams can be taken at any Florida educational facility (college) and scores transferred to Gulf Coast Community College.
- Note: if you are having scores transferred, they must be officially transferred from their testing center to our testing center so they can be entered into your record. Call (850)769-1551 ext. 3856 or 3533 for the GCCC Testing Center.

NEXT - Apply to the Program:

- ___ **Step 6. Submit Surgical Assisting application forms** in person, or by mail to GCCC Health Sciences; Attn. Libby McNaron, 5230 W. Highway 98, Panama City, Florida 32401; or by e-mail to lmcnaron@gulfcoast.edu; or by fax to (850)747-3246 attn. Libby McNaron, **and include:**
- ___ **1. Completed Application Form (For CST's applying, please attaché copy of your certificate)**
 - ___ **2. Signed Duties Acknowledgement Form**
 - ___ **3. Completed Student Planning Guide**
 - ___ **4. Submit proof of age** - 18 years or older prior to April 30th of class year, e.g., Driver's License, etc.
- ___ **Step 7. Begin Financial Aid** and seek assistance, as needed. Go to www.gulfcoast.edu and click on "Financial Assistance" tab. A handout with instructions is available from Libby McNaron, or on the website at <http://surgtech.gulfcoast.edu>

- ___ **Step 8. Request that 2 people you know complete the Personal Reference forms (included) and mail to GCCC Health Sciences, Attn. Libby McNaron, 5230 W. Highway 98, Panama City, Florida 32401. Refer1ences can be from a pastor, family friends, former teachers, or current/past employers.**

Register for Courses

Prerequisites:

- ___ **Step 9. Schedule initial advising meeting** with Instructor, Shannon Smith, ssmith@gulfcoast.edu, Director, Libby McNaron, lmcnaron@gulfcoast.edu, or call our Health Sciences Advisor, Craig Wise, at (850) 913-3311 **to evaluate transcripts** for possible course substitution, and/or **enroll** in recommended prerequisites, if not already completed. (See the attached Curriculum Plan.)

- ___ **Step 10. Submit the following forms to enroll in the prerequisite classes HSC1000 and HSC1000L, Orientation to Perioperative Services and Lab. These are needed for visiting the clinical sites. Forms are available from the program Instructors.** NOTE: CST Students will follow the facilities clinical requirements for working with their mentor surgeon as part of their clinical practicum requirements.

___ **Mandatory PPD or TB skin test, or Declination form with current chest x-ray results**

___ **Immunizations form completed and signed by a physician**

___ **Latex Allergy Screening forms** (If you are paying a physician, go ahead and get your physical exam at the same time to prevent a double charge. If you are going to the Health Department, then you can delay the physical exam until January.)

___ **Satisfactory fingerprint/criminal background check *which must be done through GCCC.***

There may be a possible drug screen according to individual clinical requirements.

- ___ **Step 11. Pay for the courses that you're registered for. You can pay online through OASIS at http://www.gulfcoast.edu/tuition_fees/default.htm, or call the Business Office (850-769-1551, ext. 3534) and pay with a credit card.**

Preparation for Class

- ___ **Step 12. Go to www.nbstsa.org to review job descriptions, certification requirements, and other links to find out more about the job.** Watch surgery on television, and do personal research on the Internet about the profession. Review information packets given to you, so that you are fully informed about the class. Be sure this is something you are interested in, and that it will meet your personal and financial needs.

- ___ **Step 13. Student will be offered an Orientation meeting.** This Orientation meeting will provide information on what to expect during the course, and what the Instructor expects from the student. If selected, you are encouraged to attend the Orientation meeting, so that you will be prepared for class start date. Family members are invited and encouraged to complete this Orientation class with the student.

Admission to the core Surgical Technology classes in January

- ___ **Step 14. Applicants with the highest composite scores (test scores, GPA, etc.) will be conditionally accepted into the Core class and asked to **complete the requirements for admission to the Surgical Assisting Program.**** In the event the number of qualified applicants exceeds the number of class positions, an interview will be scheduled.

- ___ **Step 15. Schedule meeting with Instructor** to discuss the program and obtain the conditional acceptance packet.

- ___ **Step 16. During the semester prior to January Core Class start date:**

___ Complete the Admissions Career and Advising Form

___ Submit copy of current CPR card (American Heart Association, EMS Safety, or American Red Cross)

Note: Expiration date must not occur during the entire length of the program.

___ Submit a completed physical examination and Immunizations forms signed by a physician

___ Documentation of meeting, or plan to achieve, the testing requirements to graduate

***Deadline to apply is April 1st. (Note: Applications are accepted after the deadline.)
Consideration for selection will be based upon space availability in the program.
Core Classes begin January each year - Enroll in recommended prerequisites by May / Fall Semester.***

**GULF COAST COMMUNITY COLLEGE
HEALTH SCIENCES DIVISION
5230 West U.S. Highway 98
Panama City, FL 32401-1058
(850) 913-3311
(850) 747-3246 - fax
1-800-311-3685 ext. 3551 or 3311**

**APPLICATION FOR ADMISSION
SURGICAL ASSISTING PROGRAM**

Indicate your choice of program: _____ ATD - Advanced Technical Diploma
 _____ AAS - Associate of Applied Science (add'l. Gen Ed courses required)

Applications will be considered after the deadline provided space is available.
 Answer all questions; please TYPE or PRINT (please use black ink).

Name _____
 First Middle Last Maiden Name

Male Female E-mail _____

Home Address _____
 Street and No. City State County Zip

Permanent Mailing Address (if different from above) _____

Social Security # _____ GCCC Student ID # _____ Phone: (____) _____

Business Phone: Area Code: (____) _____ Permanent Phone#: (____) _____
 Phone number where a message can be left at any time.

EDUCATION
Official Transcript(s) must be received by the Office of Admissions and Records.
 All schools and colleges attended must be listed for the application to be complete.

Name of School	Location of School	From Month/ Year	To Month/ Year	Did you Receive Diploma? Degree? Certificate?	What was your Major/Minor?
High School or GED:					
College or University:					
College or University:					

	Type	Issued by which State / Agency	License No.	Date
Professional Licenses	_____	_____	_____	_____
or Certifications	_____	_____	_____	_____

For CST applicants, please attach a copy of your certification verification from AST website, or a copy of your card showing that you are currently certified.

CONTACT INFORMATION FOR EMERGENCIES AND FOLLOW UP

Please provide information about two people who will always know where to locate you.

	Name	Mailing Address	Telephone Number
1.	_____	_____	_____
2.	_____	_____	_____

WORK EXPERIENCE AND / OR VOLUNTEER EXPERIENCE LAST 3 YEARS

EMPLOYER: _____
Address _____ Telephone No. _____ Ext. _____
 Street and No. City State
Supervisor's Name _____ Title _____
Dates employed: From _____ To _____ Nature of Your Job Duties _____
 Mo./Yr. Mo./Yr.
Reason for Leaving _____ Full-Time _____ Part-Time _____

EMPLOYER: _____
Address _____ Telephone No. _____ Ext. _____
 Street and No. City State
Supervisor's Name _____ Title _____
Dates employed: From _____ To _____ Nature of Your Job Duties _____
 Mo./Yr. Mo./Yr.
Reason for Leaving _____ Full-Time _____ Part-Time _____

PLEASE READ AND SIGN THE FOLLOWING

I hereby certify that the information contained in this application is true and complete to the best of my knowledge. I understand that any misrepresentation or falsification of information is cause for denial of admission from the College. I understand that illegal use, possession, and/or misuse of drugs are reasons for immediate dismissal from any of the programs in the Health Sciences Division. I understand that background checks and drug screening tests are routinely used at most healthcare facilities for employment purposes. I understand that fingerprinting and criminal background checks are a requirement for enrollment due to requirement at the clinical agencies. It is possible to graduate from a program and obtain certification, but be denied some employment options due to an unfavorable current background check or drug screen. In compliance with clinical requirements, I understand that I may be subject to drug screening. The school does not guarantee employment at any facility. *I understand that I must meet all requirements for graduation.* We offer this information contained in this statement and the application packet so that you can make an informed decision concerning making application to our program.

Signature of Applicant _____
Date _____

RETURN APPLICATION TO:
Gulf Coast Community College
Attn. Surgical Services Department
Health Sciences Division
5230 W. U.S. Highway 98
Panama City, FL 32401-1058

IN CASE OF EMERGENCY NOTIFY:			
Name _____			
Address _____			

City	State	Zip	
Phone (____) _____			

Student Planning Guide

Please complete and submit this form with your application packet. As an Instructor, I want to be sure that you have been fully informed and understand the career field that you have chosen, so that you can be successful in the completion of this program. Question No. 8 is optional, but the information should be accessible to discuss during the first week of class. If you have any difficulty completing this form, **you can find the answers in the application packet.** For further information, go to either our website <http://surgtech.gulfcoast.edu> , or the professional organizations listed in this packet. If you still have questions, e-mail lmcnaron@gulfcoast.edu, or call Libby McNaron at (850) 873-3551 for assistance.

1. Describe what a Surgical Assistant does during their work day.
2. Describe what job positions are available to a Certified Surgical First Assistant (CSFA, as of 2011). Where does a Surgical Assistant go to work? What are the opportunities?
3. Describe the working conditions that you can expect. What is call?
4. Describe what you can expect to earn as a Surgical First Assistant.

Per Hour _____ Per Year _____ Call pay if hospital setting? _____
 In Florida or locally? Do you want to travel? What about other areas of the country?

5. What are the hazards of the work?
6. Why do you want to enroll in this program? Why do you want to be a Surgical Assistant?
7. What are my goals? 2 years from now: _____
 10 years from now: _____

8. Our goal is to help you plan for all of the things you will need to be successful. For information, go online to the Surgical Assisting website, or e-mail us for the steps to apply for financial aid. You do not have to fill in this section, but you do need to plan for these resources to be successful with as little stress as possible.

Family support:

Transportation:

Tuition:

Living expenses/ Bill management:

Time Management: (We have filled in the time we know that you need to be successful.)

	Low -High	
Homework	<u>2</u> - <u>3</u>	hours
Class	<u>4</u> - <u>8</u>	hours
Sleep	<u>6</u> - <u>8</u>	hours
Exercise/Time for Self	<u>1/2</u> - <u>1</u>	hours
Family/Significant Other Time	_____	hours
Eating	_____	hours
Bathing	_____	hours
Traveling to and from school	_____	hours
Responsibilities (work/chores/bills)	_____	hours
Total Time	_____	hours

Time Available = 24 Hours

Surgical Assistant

Duties Acknowledgement Form



Duties and Responsibilities:

A surgical assistant is a healthcare professional whose primary responsibility is to maintain the sterile field, understand the procedure being performed, anticipate the needs of the surgeon, maintain a current knowledge base, maintain quality patient care during the operative procedure, and maintain constant vigilance regarding the adherence of aseptic technique by all members of the surgical team. They handle the instruments, supplies, and equipment necessary before, during, and after the surgical procedure. In addition to the technical aspects of the profession, the technologist must always be aware of the patient's condition and needs.

Special Qualifications:

In addition to minimum requirements for Reading, Language and Math, the student must unassisted:

1. Demonstrate ability to comprehend and interpret written material; be able to make appropriate judgment decisions.
2. Follow written and oral/verbal instructions in English. Possess short-term and long-term memory sufficient to perform tasks such as, but not limited to, mentally tracking surgical supplies; performing anticipation skills during the operation.
3. Synthesize information from written material and apply the knowledge to various situations.
4. Demonstrate the use of positive coping skills during patient, staff, and faculty interactions.

Psychomotor Qualifications:

1. Vision – normal, corrected. Demonstrate sufficient visual ability enough to load a fine (10-0) suture onto needles and needle holders, with/without corrective lenses and while wearing safety glasses. Demonstrate sufficient peripheral vision to anticipate and function while in the sterile surgical environment.
2. Hearing – normal, corrected, or aid able. Hear and understand muffled communication without visualization of the communicator's mouth/lips and within 20 feet. Hear activation/warning signals on equipment.
3. Smell – able to detect odors sufficient to maintain environmental safety and patient needs.
4. Touch – normal tactile sensitivity. Manipulate instruments, supplies, and equipment with speed, dexterity, and good eye-hand coordination.

Physical Qualifications:

1. Able to stand, bend, stoop, and/or sit for long periods of time in one location with minimum/no breaks.
2. Able to lift a minimum of 20 pounds.
3. Able to refrain from nourishment or restroom breaks for periods up to 6 hours.
4. Ambulate/move around without assistive devices.
5. Able to assist with and/or lift, move, position, and manipulate the patient who is unconscious with or without assistive devices if called upon.
6. Successfully complete a CPR for Healthcare Providers certification course.

Communication Qualifications:

1. The ability to interact and verbally communicate with others. Demonstrate positive interpersonal skills during patient, staff, and faculty interactions.
2. Demonstrate calm and effective responses, especially in emergency situations.
3. Knowledge of basic written, grammar, and spelling skills.
4. Ability to communicate and understand fluent English both verbally and in writing.

I have read the above and feel that it is within my ability to carry out the duties, responsibilities, and qualifications of a Surgical Assistant. I do _____ do not _____ (check one) have any problem in meeting the above technical requirements. In the event that I am selected for the program, I understand that a TB skin test must be completed or CXR done and results submitted; a Medical Examination form from a personal physician (Health Status) and a completed/updated Immunization form must be submitted.

SIGNATURE

DATE

Sign and attach this form to the application submitted to the Health Sciences Division.

SURGICAL ASSISTING PROGRAM
Curriculum Plan for Advanced Technical Degree with AAS Option

Semester	Course Number	Course	College Credit Summary
Summer Prerequisites	BSC2085	Anatomy & Physiology I	3
	BSC2085L	Anatomy & Physiology I Lab	1
	OST1257	Medical Terminology	2
Fall Prerequisites	BSC2086	Anatomy & Physiology II	3
	BSC2086L	Anatomy & Physiology II Lab	1
	HSC2520	Microbiology for Perioperative Services	3
	HSC1000	Orientation to Perioperative Services	3
	HSC1000L	Orientation to Perioperative Services Lab	1
AS Option Gen Education Requirements	ENC1101	English Composition I	3
	SYG 2000	Principles of Sociology	3
	Humanities	Biomedical Ethics - recommended	3
	CGS1570	Microcomputer Applications (Recommended for those with little to no computer experience.)	Recommended
AAS Specialty Options		6 College Credits from Option I, II, or III	3
		Areas of Specialization include Education, Management, Sales	3
		TOTAL HOURS	17 cc for ATD or 32 for AAS option
Spring	STS1302	Introduction to Surgical Technology	6
	STS1302L	Introduction to Surgical Tech Lab /Clinical	2
	STS1340	Pharmacology and Anesthesia	3
	STS1340L	Pharmacology and Anesthesia Lab	1
	STS1310	Surgical Techniques and Procedures for the Surgical Assistant	6
	STS1310L	Surgical Techniques and Procedures for the Surg Asst. Lab	3
		SEMESTER TOTALS	21
Summer (those with CST begin here)	STS 2301C	Advanced Surgical Anatomy and Pathophysiology	2
	STS 2330	Principles of Surgical Assisting	3
	STS 2330L	Principles of Surgical Assisting Lab/Clinical	4
		SEMESTER TOTALS	9
Fall	STS 2331	Core Surgical Procedures I	3
	STS 2370	Surgical Assisting Clinical I	3
Spring	STS 2332	Specialty Surgical Procedures II	3
	STS 2371	Surgical Assisting Clinical II	3
		SEMESTER TOTALS	12
		GRAND TOTALS	59 ATD 74 AAS

Association Information :

National Association of Surgical Technology and Surgical Assisting

Website: www.nbtsa.org

- Annual Convention with education in May of each year
- Monthly journal with contact hours to maintain certification
- Sets certification requirements, provides continuing education contact hours, tracks member contact hours, and organizes state assembly committees to lobby for surgical technologists



2010-2011 FEE SCHEDULE***

(Tuition below is for basic Certificate; for AS, add in additional Gen Ed fees.)

	<u>In-State</u>	<u>Out-of-State</u>
ENROLLMENT FEES:		
TABE Tests	No Fee	No Fee
CPT Examination	\$ 5.00	\$ 5.00
GCCC - application fee (new students)	\$ 20.00	\$ 20.00
TEXTBOOK FEES:		
Textbooks, list provided (approximate)		
Required texts	\$ 560.00	\$ 560.00
Optional texts		
ASSOCIATION DUES:		
Association Surgical Technologist	\$ 45.00	\$ 45.00
TUITION FEES (see current College Catalog):		
Summer Term I (6 college credits)	\$ 550.38 (\$91.73 credit hr.)	\$ 2,000.16 (\$333.36 credit hr.)
Fall Term I (11 college credits)	\$ 1,009.03	\$ 3,666.96
Spring Term I (23 college credits)	\$ 2,109.79	\$ 7,667.28
Summer Term II (9 college credits)	\$ 825.57	\$ 3,000.24
Fall Term II (6 college credits - ATD)	\$ 550.38	\$ 2,000.16
Spring Term II (6 college credits- ATD)	\$ 550.38	\$ 2,000.16
(Plus any AS credits)		
LAB FEES:		
(Includes: Student Liability/Accident Insurance)		
Fall Term I	\$ 55.00	\$ 55.00
Spring Term I	\$ 190.00	\$ 190.00
Summer Term	\$ 436.00	\$ 436.00
Fall Term II	\$ 18.00	\$ 18.00
Spring II Term	\$ 245.00	\$ 245.00
GRADUATION COSTS:		
Graduation Pin/Invitations (Optional)	\$ 65.00	\$ 65.00
Certification Exam	\$ 190.00	\$ 190.00
SCRUBS/LAB COAT / GCCC PATCH	\$ 100.00	\$ 100.00
STUDENT CLUB	\$ 10.00	\$ 10.00
<u>Total Program Fees (approx.)</u>	<u>\$7,534.53</u>	<u>\$22,273.96</u>

Fee schedule includes approximate fees for the entire program. Fees are subject to change without notice – see current information available in the Admissions Office. Anyone requiring financial aid must initiate arrangements with the Financial Aid office. Refund policy is outlined in the current Gulf Coast Community College catalog. The certification examination application will be completed as part of the required graduation exercises.

Note: Additional expenses required include the prerequisites, background check, the physical (medical) examination by your physician of choice, immunizations if necessary, a white mid-thigh to knee length lab coat, 2 sets of approved scrubs, one GCCC patch for lab coat, comfortable shoes (much standing), and physician shirt (gift to surgeon when you follow him for the day). If you already have a lab coat and comfortable enclosed white shoes (may have a splash of color - no open backs, canvas, or cloth sections due to sharps hazards), they will be sufficient. Leather is preferred to prevent accidental sharps injury. Additional purchases may be offered, but are not required such as a school shirt, etc.

Textbooks may be purchased at any bookstore or through the school. Required textbooks must be purchased prior to the first day of class. Textbooks, which are issued as reference guides, must be returned in good condition without writing or defacement. The student must replace reference guides that are defaced or written on.

*** Fees listed above are currently accurate, but subject to change without notice due to price changes from the other requirements, manufacturer, or provider.

**Gulf Coast Community College
Surgical Assisting Program
Health Sciences Building
Third Floor – Room 326**



SURGICAL TECHNOLOGY

Surgical Assisting is a rewarding career opportunity. In this program of study, students are taught the technical skills necessary to become employed as a Surgical Assistant.

Surgical Assistants are allied health professionals who are an integral part of the team of medical practitioners providing surgical care in a variety of settings. This individual works under the supervision of a surgeon to facilitate the safe and effective conduct of invasive surgical procedures. A surgical assistant possesses expertise in the theory and application of sterile and aseptic technique and combines the knowledge of human anatomy, surgical procedures, and implementation tools and technologies to facilitate a physician's performance of invasive therapeutic and diagnostic procedures.

Surgical Assistants have the primary responsibility for maintaining the sterile field, understanding the procedure being performed, anticipating the needs of the surgeon, maintaining knowledge base, maintaining quality patient care during the operative procedure, and being constantly vigilant that all members of the team adhere to aseptic technique. They handle the instruments, supplies, and equipment necessary during the surgical procedure.

CAREER OUTLOOK AND OPPORTUNITIES

Career possibilities include being a Staff First Assistant in the Operating Room, Labor and Delivery, Outpatient Surgery, for a physician, or self-employed. Other opportunities include becoming a chief technologist, central sterile manager, materials manager, surgery scheduler, clinical preceptor, or educator. Associated careers include medical sales representatives, office manager, tissue/organ procurement and transplantation technician, research or veterinary assistant, or becoming a laser or endoscopic technician. The Surgical Assistant may choose to pursue a college education to become a physician assistant or surgeon. Other doors may be opened in the health care field as outlined by the Association of Surgical Technologists brochures.

ACCREDITATIONS

Gulf Coast Community College is accredited by the Southern Association of Colleges and Schools Commission on Colleges, 1866 Southern Lane, Decatur, Georgia 30033-4097, phone 1-404-679-4500, fax 1-404-679-4558; and accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) to provide a non-degree program of *Surgical Technology*; 1361 Park Street, Clearwater, Florida 33756, e-mail caahep@mcs.net, <http://www.caahep.org>, phone 1-727-210-2350, fax 727-210-2354.

Gulf Coast Community College is currently seeking accreditation for the surgical assist program.

AFFILIATIONS

Gulf Coast Community College is affiliated with Bay Medical Center, Gulf Coast Medical Center, The Eye Center of North Florida, Northwest Florida Surgery Center, Panama City Surgery Center, and the Sacred Heart Hospital on the Emerald Coast (Destin). Affiliations are necessary to complete the clinical components of the program.

STUDENT TIME COMMITMENT

This course is a full time intense course of study and requires many hours of homework and practice to be successful. Students should plan to be in classroom, lab, or clinical a minimum of the hours posted in the schedule for that course. Additional practice lab time may be necessary for some skills performance. Clinical assignments begin at approximately 6:15 a.m. Additional clinical call assignments are made for weekday evenings and some weekends during the last semester. The clinical preparation, practice lab time, course assignments, and study time/homework outside the scheduled hours must also be considered an additional time commitment due to the intense training of the program. The amount of preparation time and homework varies according to the needs of the individual but is usually 2-3 hours every day for the average student during the entire course. We look forward to helping you along this path of discovery to a new successful career.

CALL EXPERIENCE

Call experience begins on an individual basis once competency is determined satisfactory in basic scrub skills, but not prior to 3 months. Call experience includes hours designated as "On Site". During these hours, the student is required to be on site either scrubbing cases that are in progress or performing other assigned tasks. Other hours designated as "On Call" indicate that student will be available via phone, cell phone, or beeper to respond within 20 minutes to the assigned clinical site. Clinical rotation and call assignments will be distributed prior to the beginning of clinical experiences with the call experiences beginning with Clinical. All call experiences must be completed.

NAILS

Fingernails should be kept clean, short (1/4 inch), and healthy. Polish, if used, must be of a light color, not be chipped, and should be changed a minimum of every four days. Artificial nails are not to be worn as they have a higher variety and amount of pathogenic bacteria and fungus grown, both before and after hand washing. Failure to follow this policy will result in the student not being allowed to scrub in the clinical setting. If the student has open lesions or breaks in integrity, the student will not be allowed to scrub until healed. The clinical setting policy will be followed. Some facilities do not allow nail polish. It is the student's responsibility to be alert to the policy and prepare for that clinical setting.

TEXTBOOKS (Books in BOLD type below are mandatory.)

For a list of textbooks, see the course Syllabus, or visit the Bookstore for the current editions and titles. **For those CSTs entering the program in 2nd year, you will need access to many of the texts used in previous semesters.** See Instructor for recommendations.

HSC2520	Microbiology for Periop Serv	Microbiology with Diseases by Body System 2nd ed. Bauman; Pearson. ISBN 978-0-321-52341-0
HSC1000	Orientation to Health Sciences	Fullers Surgical Technology Principles/Practices ISBN: 978-1-4160-6035-2, and workbook Suggested: Taber's Cyclopedic Medical Dictionary; current Edition; F.A. Davis
HSC1000L	Orientation to H.S. Lab	Suggested: Surgical Instruments Flashcards, Spectrum Surg Instruments 1-800-444-5644. Item # 10-0227
STS1302	Introduction to Surgical Tech	Surgical Technology for the Surgical Technologist; Delmar; 2007 ed. ISBN 1-401-83848 Study Guide to Accompany Surgical Technologist; Delmar; 2007 ed. ISBN 1-401-83849-9
STS1302L	Intro to Surgical Tech Lab	Suggested: Differentiating Surgical Instruments; Rutherford; F.A. Davis ISBN 0-8036-1224-9 OR
STS1340	Pharmacology & Anesthesia	Pharmacology for the Surg Tech, 2nd ed. ; Snyder and Keegan; Saunders; ISBN 1-4160-2457-3 Pharmacology for the Surg Tech, 2nd ed., Study Guide; Snyder and Keegan; ISBN 1-4160-2459-X
STS1310	Surgical Tech & Procedures	Suggested: Surgical Technology for the Surgical Technologist; Delmar; 2004 ed., ISBN 1-4018-3848-0 Suggested: Study Guide to Accompany Surgical Technologist; Delmar; 2004 ed., ISBN 1-4018-3849-9
STS1310L	Surg Tech & Procedures Lab	Suggested: Surgical Mayo Setups (2003); Delmar Learning; Alhoff & Hinton; ISBN 1-4018-1123-4 Alexander's Care of the Patient in Surgery; 13th ed.; ISBN ISBN0323-03927-8; Mosby (Evolve resources)
STS 2301C	Advanced A&P	Suggested: Diseases of Human Body, 4th ed., Tampo & Lewis, FA DAVIS. ISBN 978-0-8036-1245-7 Suggested: Operative Anatomy, 3rd ed., Scott-Conner & Dawson; Lippincott. ISBN978-0-7817-6539-8
STS 2330	Principles of Surg Assisting	Suggested: Surgical Procedure Notebook by Grant Wilson from Association of Surgical Technologist AST.org.
STS 2330L	Principles of SA Clinical	Pocket Guide to Operating Room; 3rd ed., Goldman, Davis 2008, or newest ed. ISBN 10-8036-1226-5

Financial Aid Information

Step One

Apply for Financial Aid – You **must** complete the PELL Grant application (FAFSA).
See website for instructions.
Must be completed every January.

Approved? Congratulations!

Next steps:

1. Financial Aid office
2. Begin registration
3. Proceed to "Other Options" below for other assistance, as needed.

Denied?

Have your circumstances changed?

Classes starting or need assistance while waiting for answer?

See your Financial Aid Assistant about an emergency loan or a deferment.

Yes

File an Appeal based on current financial circumstances.
Then proceed to "Other Options".

No

Proceed to "Other Options" below.
Figure how much you need; include your living expenses.

Apply for Student Loans:

1. Choose a lender and complete the Stafford Loan request form.
2. Complete the Entrance Counseling and Promissory Note form on the GCCC Financial Aid homepage.

Special Funds:

1. Are you the first generation college enrollee? (Are your parents college graduates? If not, you may qualify.)
2. Are you a returning student? Over 35? Call Denise Murks (850) 769-1551 ext. 3835.

Workforce Training Center:

Once you have completed your prerequisites and are accepted into an approved program, investigate training options at the GCCC Workforce Training Center, (850) 872-3853.

Grants to apply for:

1. FL Student Assistant Grant
2. GCCC Foundation Scholarship

Visit the Career Center:

Search and receive help for available local and national scholarships; call 850-872-3855.

Other Options:

1. Are you a **Veteran**? For help, call (850) 769-1551 ext. 3210.
2. Do you qualify for tuition reimbursement at your place of work?
3. Are you already in a program? See your Instructor for any available program-related scholarships.

Financial Decision Tree

1. Always ... the first step is to apply online for the Pell Grant. All other financial aid applications utilize same information.
2. If you have any questions, call Financial Aid at (850) 769-1551 ext. 3845 or 1-800-311-3685 ext. 3845.
3. Congratulations, you are making a wise decision. We look forward to helping you reach your goal.

For more information you can go to the financial aid website
http://www.gulfcoast.edu/finance_assist/default.htm



APPLICATION INSTRUCTIONS FOR THE COLLEGE

**Admissions Office
Gulf Coast Community College
5230 West Hwy 98
Panama City, Florida 32401
850-872-3892**



HOW TO APPLY TO THE COLLEGE ONLINE

1. Go to http://www.gulfcoast.edu/admissions/online_application.htm
2. Complete the online College application, or hard copy, and select **NON-DEGREE SEEKING STUDENT**.
3. Be sure to **enter the desired term for enrollment as the current term**, or else you will not be able to register without going through the Admissions Office.
4. For new students, a default PIN number (month/year of birth, i.e., 0587) is assigned when the student applies to GCCC.
5. The next day, notify the Program Coordinator that you have submitted your College application. It usually takes 24 hours to process the online application and enter it into our system. Submit a completed Program application, and then we will be able to register you for your first semester.
6. When your College application has been processed and you have registered for a course, you are ready to access the OASIS database. You will be required to change your default birth month/year PIN to a unique 4-digit PIN of your choosing. You can access Oasis:
 - a. to pay your application fee of \$20
 - b. to pay registration fees for classes
 - c. to check grades
 - d. to upgrade your personal information
 - e. to confirm your GCCC e-mail address
7. To register for certain classes, testing must be completed and your \$20 application fee paid. Be sure to take the CPT, PERT, or TABE exams as indicated in the Program application.
8. Request copies of your transcripts from all high schools and all colleges attended. If you completed the GED, there is a request form for that, too.

HOW TO APPLY TO THE COLLEGE VIA HARD COPY

1. Print the copy of the College application at:
<http://www.gulfcoast.edu/admissions/forms/Admissions%20Application.pdf>
2. Follow directions on the College application.
3. Mail the completed application to the Admissions Office with your payment, as instructed on the form.
4. You must pay the \$20 application fee before you can get registered for any courses. You can attach payment to the application, or you can go online and pay via OASIS after the application is entered.

The architect of your destiny is yourself.



CRIMINAL BACKGROUND CHECKS

Gulf Coast Community College (GCCC) students who are granted conditional acceptance into a Health Sciences program must receive a satisfactory criminal background check prior to final acceptance into the program to attend local clinical sites. The background check will be scheduled and performed at the discretion of the Division of Health Sciences at GCCC. Information and instructions on how to complete the background check will be sent by the program coordinator.

Criminal background checks performed through other agencies will not be accepted. The student must also be aware that clinical agencies may require an additional background check prior to clinical access. It is possible to graduate from a program at GCCC but be denied the opportunity for licensure because of an unfavorable background check.

An applicant must consider how his / her personal history may affect the ability to meet clinical requirements, sit for various licensure exams, and ultimately gain employment. Most healthcare boards in the State of Florida make decisions about licensure on an individual basis. You may visit the Florida Department of Health website (www.doh.state.fl.us) for more information regarding licensure. We offer this information so that you can make an informed decision regarding your future.

Please read the following information carefully:

Any student who has been found guilty of, regardless of adjudication, or entered a plea of nolo contendere, or guilty to, any offense under the provision of 456.0635 (see below) may be **disqualified** from admission to any Health Sciences program. In addition to these specific convictions, there are other crimes which may disqualify applicants from entering into the Health Sciences programs and / or clinical rotations.

456.0635 (2) Medicaid fraud; disqualification for license, certificate, or registration

Each board within the jurisdiction of the department, or the department if there is no board, shall refuse to admit a candidate to any examination and refuse to issue or renew a license, certificate, or registration to any applicant if the candidate or applicant or any principal, officer, agent, managing employee, or affiliated person of the applicant, has been:

- (a) Convicted of, or entered a plea of guilty or nolo contendere to, regardless of adjudication, a felony under chapter 409, chapter 817, chapter 893, 21 U.S.C. ss. 801-970, or 42 U.S.C. ss. 1395-1396, unless the sentence and any subsequent period of probation for such conviction or pleas ended more than 15 years prior to the date of the application;
- (b) Terminated for cause from the Florida Medicaid program pursuant to s. 409.913, unless the applicant has been in good standing with the Florida Medicaid program for the most recent 5 years;
- (c) Terminated for cause, pursuant to the appeals procedures established by the state or Federal Government, from any other state Medicaid program or the federal Medicare program, unless the applicant has been in good standing with a state Medicaid program or the federal Medicare program for the most recent 5 years and the termination occurred at least 20 years prior to the date of the application.

Request for Official Florida GED Diploma and/or Transcript

PLEASE READ THIS SECTION CAREFULLY BEFORE COMPLETING YOUR REQUEST FORM.

Do not use this form to request a diploma or transcript if you earned a GED from another state. The following items must accompany this request form. Failure to include these items may result in your request being returned.

1. Mail **\$6** for **each** transcript or diploma.
2. An appropriate sized **envelope addressed to where you want us to mail** the document:
A **diploma** (certificate) requires **\$1.22 cents postage** on a **10x13** envelope.
****A transcript** (scores) requires **First Class postage** on a **business size** envelope.
If you order both documents, and they are being sent to the same address, send only a 10x13 envelope.
3. **Money order** or **cashier's check** made payable to the **Florida Department of Education**.
Personal checks or cash are NOT accepted.

Please remember, the GED office is not allowed to send certificate or scores by FAX.

This form should **NOT** be used to request a copy of a diploma or transcript if the student earned a standard or adult high school diploma from a Florida public high school. Please contact the school board office in the county where the person graduated.

Examinee Information

Name _____
Last First MI Suffix (Jr., Sr., etc)

Social Security # _____ - _____ - _____ Date of Birth _____ / _____ / _____

Name at time of testing (if different) _____
(If you are requesting that your name be changed on your GED record, you must submit legal documentation to support the change, i.e., marriage license, divorce decree, or court order).

Mailing Address (current) _____ Daytime Phone (_____) _____ - _____

Indicate the **YEAR** you took the test? _____ Diploma Number (if known) _____
(if current year, please give **DATE** of testing)

Indicate the **COUNTY** or **CITY** where you tested? _____

Indicate address where document is to be mailed. (This should be the same as your enclosed envelope.)

Name: _____ Daytime Phone: (_____) _____ - _____

Mailing Address: _____

Payment Required:

_____ Transcripts (scores) X \$6.00 = \$ _____

_____ Diplomas X \$6.00 = \$ _____

Total Payment Enclosed : (**Cashier's check or money order ONLY**) \$ _____

Signature _____

Date _____

MAIL REQUEST FORM TO:
GED Testing Office
Florida Department of Education
325 West Gaines Street, Room 634
Tallahassee, Florida 32399-0400

FOR ADDITIONAL ASSISTANCE, CALL:
(850) 245-0449
1-877-352-4331 (toll-free, Florida only)

TRANSCRIPT REQUEST FORM

FOR HIGH SCHOOL, VOCATIONAL SCHOOL,
COLLEGE, OR UNIVERSITY TRANSCRIPTS

**FORM FOR TRANSCRIPTS THAT NEED TO BE
SENT TO GULF COAST COMMUNITY COLLEGE**

Please complete and take or mail this form to the school(s) you have attended. Transcripts are required from each school that you have attended (high school and college, etc.) for admission to Gulf Coast Community College.

TO: _____
Name of School Attended

I am applying for admissions to **Gulf Coast Community College**. In order to complete my admission process, I need an **official transcript** for which I agree to pay if there is any charge, sent to the address below.

I attended from _____ to _____

Last Name: _____ First: _____ Middle: _____

Maiden Name: _____ Date of Birth: _____ Social Security Number: _____ - _____ - _____

I attended under the name of: _____

PLEASE SEND TO:

**GULF COAST COMMUNITY COLLEGE
OFFICE OF ADMISSIONS AND RECORDS
5230 WEST HIGHWAY 98
PANAMA CITY, FLORIDA 32401-1058**

Student Signature: _____ Today's Date: _____

Telephone Number () _____ - _____

Address: _____ Apt. # _____

City: _____ State: _____ Zip Code: _____ - _____

Gulf Coast Community College
Personal Reference Form – Surgical Services/Health Science Program

COMPLETED BY STUDENT: I, _____ give permission to _____ to fill out this personal reference for me. I appreciate their candor and understand that this form is confidential. However, Under Federal law entitled the “Family Educational Rights and Privacy Act of 1974”, students are given the right to inspect their records including recommendation forms. I do not waive my rights to review the content of this form. I do release them from any liability regarding their completion of this form. I have supplied the person completing this form with a stamped addressed envelope to the following address: Gulf Coast Community College, Attn: HEALTH SCIENCES PROGRAM SURGICAL SERVICES, 5230 West Highway 98, Panama City, Florida 32401.

Applicant’s Signature _____ **Date** _____

Completed by person authorized to complete Reference:

1. How long have you known this applicant and in what capacity? _____
 How well do you know the applicant? ___Very Well ___Fairly Well ___Slightly
2. In the healthcare field, healthcare personnel have access to confidential information from charts and files and are required to handle drugs and controlled substances. With this in mind, do you place full confidence in the applicant's integrity? YES _____ NO _____ If no, please explain why: _____
3. Would you allow this individual to provide healthcare for you or your family if you were ill? YES _____ NO _____ If no, please explain why: _____
4. To your knowledge, is there anything that might interfere with or limit the success of this applicant in the healthcare field? _____
5. How do you perceive this person reacting when placed in a stressful situation or working under pressure?
 Circle one: Wise Sensible Irrational Impractical Hysterical Other _____
6. Please indicate whether or not you recommend this applicant as being suitable to enter the Healthcare program.
 Circle one: RECOMMEND WITH ENTHUSIASM RECOMMEND
 RECOMMEND WITH RESERVATIONS DO NOT RECOMMEND

Please check or write in the spaces to indicate the traits that best describes the applicant:

	<i>Above Average</i>	<i>Average</i>	<i>Below Average</i>	<i>No Basis to Judge Applicant</i>
Communication skills, clarity				
Cooperation, team player, ability to get along with others				
Courtesy				
Dependability or Reliability				
Helpful to others, motivated				
Honesty				
Initiative				
Leadership ability				
Maturity, Emotional Stability, Coping, (response to conflict)				
Neatness , Appearance (tidy, clean)				
Organized				
Perseverance, Stamina				
Promptness (responsiveness)				
Quality of Work, Accuracy				
Quantity of Work				
Responsibility				
Seeks Help when needed				
Sound Decision Making				

Signature of Person Completing Reference: _____
Position/Title: _____
Address: _____
Phone Number: _____

Gulf Coast Community College
Personal Reference Form – Surgical Services/Health Science Program

COMPLETED BY STUDENT: I, _____ give permission to _____ to fill out this personal reference for me. I appreciate their candor and understand that this form is confidential. However, Under Federal law entitled the "Family Educational Rights and Privacy Act of 1974", students are given the right to inspect their records including recommendation forms. I _____do _____do not waive my rights to review the content of this form. I do release them from any liability regarding their completion of this form. I have supplied the person completing this form with a stamped addressed envelope to the following address: Gulf Coast Community College, Attn: HEALTH SCIENCES PROGRAM SURGICAL SERVICES, 5230 West Highway 98, Panama City, Florida 32401.

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Organized				
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Promptness (responsiveness)				
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Quantity of Work				
Responsibility				
Seeks Help when needed				
Sound Decision Making				

Signature of Person Completing Reference: _____
Position/Title: _____
Address: _____
Phone Number: _____