

**Eastern Virginia Medical School  
Master of Surgical Assisting Program  
Student Handbook**

**Class of 2024**

## SCHOOL OF HEALTH PROFESSIONS

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## **WELCOME**

The information contained in this handbook is an extension of current institutional policies and procedures. The [EVMS Student Handbook](#) is accessible on-line. Since the implementation of the curriculum remains dynamic, and is subject to continuous review and improvement, the provisions listed are subject to change without notice.

Changes will be communicated to students and faculty through written and verbal communication.

Students are expected to be familiar with the policies provided in this handbook and are required to submit an acknowledgement that indicates receipt and review of this handbook.

## **BRIEF PROGRAM HISTORY**

Since 1981, Eastern Virginia Medical School, in association with area hospitals, has offered an educational program to prepare candidates for a career to assist surgeons in the performance of surgical procedures. Our nationally-accredited program consists of ten months of classroom instruction, followed by one year of clinical rotations. Graduates receive a Master of Surgical Assisting and are required to apply for the National Surgical Assistant Association Certification Exam. The Surgical Assistant Program is sponsored by the School of Health Professions and the Department of Surgery.

## **ACCREDITATION**

The Surgical Assistant Program is nationally accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) through November 2028.

Commission on Accreditation of Allied Health Education Programs  
25400 U.S Highway 19 North, Suite 158  
Clearwater, FL 33763

## **PURPOSE**

### **MISSION STATEMENT**

The Eastern Virginia Medical School's Masters in Surgical Assisting Program mission is to prepare skilled, qualified and competent individuals as surgical assistants.

This mission is actualized by:

- Providing dynamic education in a quality environment
- Recruiting highly academically prepared individuals
- Delivering the highest quality education
- Nurturing future educators and leaders of the profession

### **LEARNING DOMAINS**

Graduates of the EVMS Master of Surgical Assisting Program will be able to:

- Perform as a competent entry-level surgical assistant by demonstrating appropriate cognitive and psychomotor skills.
- Demonstrate a safe level of practice and knowledge in their role as a surgical assistant.
- Acquire an understanding of the ethical, legal, moral and medical values related to the patient and the operative team during the perioperative experience.
- Demonstrate safe practice techniques in regards to perioperative routines, patient positioning, exposure of the surgical field, hemostasis and emergency procedures.
- Demonstrate and integrate principles of surgical asepsis as part of the perioperative experience.
- Correlate the knowledge of advanced anatomy, physiology, pathophysiology, pharmacology and microbiology to their role as a surgical assistant.
- Correlate the elements, action and use of medications and anesthetic agents used during the perioperative experience.
- Apply knowledge and skills as a professional surgical assistant to address the biopsychosocial needs of the surgical patient.
- Demonstrate best educational and professional practices through training and mentoring of peers.

## **GOALS**

The goals for the Master of Surgical Assisting program are that students will:

- Demonstrate competency in operation room knowledge.
- Achieve the skills to effectively integrate practice-based learning for self-improvement.
- Develop effective interpersonal and communication skills.
- Demonstrate a high level of professionalism.
- Demonstrate a high level of clinical competency.

## **OBJECTIVES**

The core objectives of the Surgical Assistant program are to:

- Ensure that matriculated students acquire knowledge and skills through multiple didactic and experiential learning opportunities;
- Develop student's ability to effectively work with a multidisciplinary operating room team; and
- Develop habits which contribute to life-long learning.

## **SURGICAL ASSISTANT DEFINED**

The National Surgical Assistant Association (NSAA) defines a surgical assistant as:

*A trained medical professional who assists the surgeon in performing surgical procedures. This professional has an understanding of human anatomy at the advanced level; possesses surgical skills such as suturing and tying; understands how to properly use surgical instruments; recognizes how to position patients; and possesses the skills and training to evaluate the surgical patient to assure the best possible surgical outcome...the non-physician surgical assistant has advanced education and training and should pass the competency examination given by a recognized national organization before functioning in this capacity.*

## **PROFESSIONAL CODE OF ETHICS**

Students are encouraged to join the National Surgical Assistant Association (NSAA) in order to become knowledgeable about the advancement of the profession and to demonstrate support for the profession. The NSAA ascribes to the following Code that establishes clear and ethical parameters for Surgical Assistants. Should a NSAA member violate these regulations, his/her designation may be revoked for a specified period of time or result in expulsion from the NSAA. The following guidelines are required by the National Surgical Assistant Association (NSAA):

1. The Surgical Assistant (SA) should maintain a working relationship with all members of the operating room team and adjunct hospital personnel based on trust, honesty, confidence and respect.

2. The SA should seek input, be willing to accept praise as well as criticism and possess the ability to transform such criticism in a constructive manner.
3. The SA must be involved in “self” assessment and evaluation of each surgical procedure that he/she will be required to assist on. The process of formulating clear direction for best utilization of assistant skills should be mandatory for full benefit to patient, surgeon, and other members of the operative team.
4. The SA must keep abreast of new technology with respect to surgical intervention and its pertinence to patient management.
5. The SA must maintain a quality standard of continuing medical education, as described and set forth by NSAA standards.
6. The SA must be aware of the individual requirements or techniques of individual surgeons.
7. The SA must have adequate knowledge of basic sciences as required by his/her duties incidental to a particular surgical procedure.
8. The SA must be fully aware of his/her position with respect to maintenance of a sterile operative field, and have a working knowledge of the basic principles and concepts of sterilization and infection control.
9. The SA will possess a working knowledge of all operating room procedures with respect to attire, infection control, and be familiar with individual requirements and recommended practices of compliance.
10. The SA will accept responsibility for his/her integrity with respect to maintenance and compliance, to and of these policies. This will not only promote the individual assistant, but will be of best interest to NSAA.
11. The SA must have the ability to anticipate the needs of the surgeon, and other team members, with respect to the requirements of a particular surgical procedure
12. The SA must be able to demonstrate and maintain dexterity sufficient to successful completion of his/her assistant duties on that particular procedure.
13. The SA must maintain a professional attitude with respect to the dignity, privacy, and safety of the patient.
14. Most of all, the SA must possess the ability to only function within the limits of his/her ability, and within the description of duties provided by his/her employer.

## **CONFIDENTIALITY**

All students in the Surgical Assistant program are expected to respect patient confidentiality consistent with institutional and clinical site HIPPA policies and procedures. Patient information should only be discussed in the context of professional interaction with health care providers at the clinical site.

Additionally, the program seeks to develop a collegial atmosphere between students, faculty, and CSAs. Gossip is discouraged.

## **GRADUATION REQUIREMENTS**

Eligibility for graduation from the Surgical Assistant program requires the following:

- satisfactory completion of all first year coursework, inclusive of a 3.00 GPA;
- a grade of “PASS” for each clinical rotation;
- written documentation of any missed clinical time beyond discretionary leave, holiday, and sick days, if applicable;
- payment of all school debts; and
- receive recommendation from the Program Director and the Dean (such recommendation is performed at the EVMS General Faculty Meeting)

In instances when students are unable to complete their requirements prior to the graduation date of the program, the students' official graduation date will occur on the last day of fiscal year provided that it is anticipated that students will be able to complete the outstanding program requirements within the timeframe. Students who are unable to complete the program requirements before the start of the new fiscal year are subject to pay a prorated tuition fee and their graduation date will be determined by the Program.

**Participation in graduation and the program's Award and White Coat Ceremony are required.**

## **PROFESSIONAL ATTIRE**

Students are required to purchase a short white jacket for the Principles of Surgical Assisting I & II courses and for clinical experiences. They can be ordered through the EVMS Bookstore, which will have the specifications for the jacket's embroidery. White coats and professional attire are to be worn for all Educational Day events and special lectures. Scrubs should not be worn in the classroom, unless requested by the instructor.

## **PROGRAM HEALTH REQUIREMENTS**

Refer to the EVMS Institutional Student Handbook for policies relating to Occupational Health requirements and the protocol for Blood/Body Fluid Exposures. All SA students are required to successfully complete Bloodborne Pathogen Training during orientation and prior to beginning their formalized clinical rotations and complete yearly Respirator Fit-Testing.

## **TECHNOLOGY REQUIREMENTS**

Students matriculating at EVMS will be required to have a portable computer (laptop) in order to take full advantage of EVMS 2.0 and the technology incorporated in the new Education and Research Building. For additional information regarding the computer technology standards, you may visit the Network Center located in Lewis Hall.

[https://www.evms.edu/education/resources/computer\\_standards/](https://www.evms.edu/education/resources/computer_standards/)

## **TECHNICAL STANDARDS**

The Technical Standards listed in this site reflect five categorical areas — observation, communication, critical reasoning (intellectual), motor and sensory, behavioral/social — and represent minimum competency levels.

Students must attest that they meet these Technical Standards prior to or at the time of matriculation from the Surgical Assistant Program at EVMS. Students found to be in violation of Technical Standards are at risk for dismissal from the program. Each standard is defined and is followed by examples of indicators of minimum competence in that area.

Reasonable Accommodations: Eastern Virginia Medical School is committed to diversity and to attracting and educating students who will make the population of healthcare professionals' representative of the national population. We provide confidential and specialized disability support and are committed to excellence in accessibility; we encourage students with disabilities to disclose and seek accommodations. Students who, after review of the technical standards determine that they require accommodation(s) to fully engage in the program, should contact the Student Disability Services Department ([StudentDisability@EVMS.edu](mailto:StudentDisability@EVMS.edu)) to confidentially discuss their accommodations needs. Accommodations are never retroactive; therefore, timely requests are essential and encouraged.

## **1.0 Observation Skills Technical Standard**

- 1.01 Demonstrate sufficient attention and accuracy in observation skills (visual, auditory, and tactile) in the lecture hall, laboratory, and the operating room and or clinical settings.
- 1.02 Indicators include, but are not limited to, these examples:
  - a. Accurate identification of changes in color of fluids, skin, and culture media.
  - b. Accurate visualization and discrimination of text, numbers, patterns, graphic illustrations, and findings on X-ray and other imaging texts.

## **2.0 Communication Skills Technical Standard**

- 2.01 Demonstrate effective communication skills with health care professionals, and with people of varying cultures, ethnicities and personalities.
- 2.02 Indicators include, but are not limited to, these examples:
  - a. Clear, efficient, and intelligible articulation of verbal language.
  - b. Legible, efficient, and intelligible written English language.
  - c. Accurate and efficient English language reading skills.
  - d. Accurate and efficient expressive and receptive communication skills.
  - e. Ability to accurately follow oral and written directions.

## **3.0 Critical Reasoning Skills Technical Standard**

- 3.01 Demonstrate critical reasoning skills, including, but not limited to, intellectual, conceptual, integrative, and quantitative abilities.
- 3.02 Indicators include, but are not limited to, these examples:
  - a. Demonstrate ability to measure, calculate, reason, analyze, integrate, and synthesize information.
  - b. Demonstrate ability to acquire, retain, and apply new and learned information.

## **4.0 Motor And Sensory Function Technical Standard**

- 4.01 Demonstrate sufficient motor and sensory function to perform typical surgical assistant duties.
- 4.02 Indicators include, but are not limited to, these examples:

- a. Functional and sufficient sensory capacity (visual, auditory, and tactile) to use surgical tools and perform procedures.
- b. Execute motor movements that demonstrate safety and efficiency in the various learning settings, (i.e., classroom, laboratories, and clinical settings) including appropriate negotiation of self and patients in-patient care environments.
- c. Proper use of clinical instruments and devices for clinical intervention including, but not limited to, suturing needles, catheters, retractors, etc.
- e. Ability to lift over 50 lbs. with good body mechanics or 25-50 lbs. with improper body mechanics.
- f. Physical stamina sufficient to complete the rigorous course of didactic and clinical study, which may include prolonged periods of sitting, standing, rapid ambulation and/or wearing personal protective equipment, such as lead aprons, for extended periods of time.

## 5.0 Behavioral And Social Attributes Technical Standard

5.01 Demonstrate the behavioral and social attributes vital to participation in a professional program and service as a practicing professional surgical assistant.

5.02 Indicators include, but are not limited to, these examples:

- a. Possess the emotional health required for full utilization of mental faculties (judgment, orientation, affect, and cognition).
- b. Ability to develop mature and effective professional relationships with faculty, patients, the public, and other members of the health care team.
- c. Possess personal qualities that facilitate effective therapeutic interactions (compassion, empathy, integrity, honesty, benevolence, confidentiality).
- d. Demonstrate impartial motives, attitudes, and values in roles, functions, and relationships.
- e. Ability to monitor and react appropriately to one's own emotional needs and responses.
- f. Display appropriate flexibility and adaptability in the face of stress or uncertainty associated with clinical encounters and clinical environments.
- g. Compliance with standards, policies, and practices set forth in the [EVMS Student Handbook](#) and the SA Academic Student Handbook.

## **TIME TO COMPLETE DEGREE**

The Surgical Assistant Program is a 22-month residential academic program with 10 months didactic training and 12 months clinical training.

## **REGISTRATION**

Block registration for all phases of the program is managed by the program's administration.

## **GRADING POLICIES**

Faculty members are required to provide students with a syllabus on the first day of class. The syllabus outlines the standards of acceptable performance and the instructor's grading methodology.

Students must obtain a minimum **cumulative grade point average of 3.00 GPA** to remain in good academic standing in order to advance to the clinical year. A 3.00 GPA does not mean that students must receive an "A" or "B" in each class. Students may receive a "C", "B-", etc. However, at the end of year one of the program, the student's cumulative GPA must be a 3.00 or higher. This policy ensures that students receive adequate knowledge in the basic sciences and anatomy.

**Any student receiving a final grade lower than a B- in Anatomy may be required to repeat the course.** Surgical Assistant students are required to achieve 80% or greater of the anatomy course content. This content competency has been set for students to successfully complete clinical rotations.

Students who have a term GPA less than 3.00 will be advised of their status and maybe subject to academic warning or probation. Students with consecutive terms of GPA's less than 3.00 may be subjected to academic probation or dismissal. Student academic records will be reviewed by the MSA Academic Review Council for any/all disciplinary actions.

### **MSA ACADEMIC REVIEW COUNCIL:**

*The MSA Academic Review Council (MSA ARC) meets as needed to review any student academic status that may prevent advancement in program training. Students will be notified by mail and/or email of the council's decision.*

## SCALE

The grading scale may vary by individual courses and students must consult their course syllabus for the grading scale. However, letter grades are derived from the following point scale, which is institutionally accepted.

### INSTITUTION GRADE EQUIVALENTS

<b>Numeric Value</b>	<b>Letter Grade</b>	<b>Grade Point Average</b>
100-94	<b>A</b>	<b>4.00</b>
93-90	<b>A-</b>	<b>3.67</b>
89-87	<b>B+</b>	<b>3.33</b>
86-84	<b>B</b>	<b>3.00</b>
83-80	<b>B-</b>	<b>2.67</b>
79-77	<b>C+</b>	<b>2.33</b>
76-74	<b>C</b>	<b>2.00</b>
73-70	<b>C-</b>	<b>1.67</b>
69-67	<b>D+</b>	<b>1.33</b>
66-64	<b>D</b>	<b>1.00</b>
63-60	<b>D-</b>	<b>0.67</b>
Below 60	<b>F</b>	<b>0.00</b>

## GRADE CHANGES

If a student believes that he/she received an incorrect final course grade, the student should immediately contact the instructor to verify the error. The instructor will then inform the Program Director if the error should be officially changed.

## GRADE ROUNDING

The Master of Surgical Assisting Program follows the established School of Health Professions mathematical rules for rounding to the nearest whole number based on two decimal places apply. For example: a final grade of 93.45 or 93.50 would round to a 94 (A). A final grade of 93.44 would round to a 93 (A-).

## INCOMPLETE GRADES

A grade of "I" indicates assigned work or examinations that are incomplete. The "I" grade becomes an "F" if the required work is not completed by the deadline designated by the instructor or Program. The "I" grade may not be changed to a "W" under any circumstance.

## **ACADEMIC PROGRESS**

Students are required to maintain a 3.00 GPA (per semester and cumulative). **Students experiencing difficulty in any of their first-year classes should consult the course instructor immediately.** Students that receive a below passing grade on any exam must schedule a follow up meeting their course director within five (5) days after the release of examination grades. Each student should monitor his/her GPA in order to ensure the ability to meet graduation requirements. If a student does not meet the required overall 3.00 GPA upon completion of the first semester, provided the student did not fail a course the student will be placed on academic warning. Any student who fails a course during the first semester may be withdrawn/dismissed from the program.

## **STUDENT DISABILITY SERVICES**

EVMS is dedicated to providing reasonable accommodations to qualified students with a documented disability. The student must self-identify with the Office of Student Disability Services as having a disability to begin the accommodation process. It is in the best interest of the student to begin the accommodation process as soon as you are aware that you may need them, as accommodations are not retroactive. All students must be able to fulfill the academic and technical standards of their academic program with or without reasonable accommodations; however accommodations are made available to aid in fulfilling those standards, not to waive them. If you have, or believe you have, a disability for which you wish to request accommodations under the Americans with Disabilities Act or Section 504 of the Rehabilitation Act, you must contact the EVMS Disability Officer

[StudentDisability@EVMS.EDU](mailto:StudentDisability@EVMS.EDU)<<mailto:StudentDisability@EVMS.EDU>> .

For more information about the disability accommodations process, please visit:

[https://www.evms.edu/education/resources/disability\\_guide\\_for\\_students/](https://www.evms.edu/education/resources/disability_guide_for_students/)

## **DISMISSAL**

The Program Director evaluates students' GPA upon completion of each course and/or semester. If a student fails a course with a grade of C- or lower, the student may be withdrawn/dismissed from the program and upon recommendation of the Admission Review Council for readmission to restart the program during the next enrollment cycle.

If a student's grades indicate that he/she is mathematically unable to achieve an overall 3.00 GPA at any point during the student's enrollment, the student will be placed on academic probation.

Students on academic probation must raise their overall GPA to a 3.00 by the completion of the next semester or they will be withdrawn or dismissed from the program. The student is removed from academic probation when he/she attains the required overall 3.00 GPA.

The Program Director will send the student a written letter indicating when said student is removed from academic probation.

**If a student fails two or more courses within a semester, the student will be automatically dismissed from the program and ineligible for remediation.**

### **REMEDIATION**

Remediation is at the discretion of the Academic Review Council. Students who are allowed to remediate will receive an incomplete "I" for the course and be placed on an academic plan. The academic plan may include completion of course work at another institution, self-directed study and/or assessments by course faculty or program faculty to ensure satisfactory content knowledge by the student. Failure of remediation will result in the incomplete converting to an "F" or the grade that the student obtained in the course. The student may be administratively withdrawn from the program and allowed to re-enroll or dismissed from the program.

Students who are in remediation may not begin clinical rotations until he/she successfully completes the remediated course. The only exception is for students who meet the 3.00 GPA requirement but fail to achieve the 80% or greater on the anatomy course content requirement and not subjected to reenroll or repeat another course will be allowed to advance to clinical training. These students will be subjected to enroll in an approved anatomy course during the first term of the second year.

### **TRANSFER OF CREDITS**

Requests to transfer graduate credits from another accredited US or Canadian institution are considered on an individual basis after students are admitted to the MSA Program. Students requesting transfer credits must submit a copy of the syllabus for the course and a Transfer Approval Request Form.

Students requesting transfer of credits must submit their request between the time of program matriculation and no later than one full term prior to graduation from the Program.

All requests will be reviewed and are subject to the approval of the MSA Program Director, up to a maximum of nine (9) credit hours. Approved transfer grades are included on a MSA student's transcript; however, transfer grades are not included in GPA calculations.

### **READMISSIONS POLICY**

Students who withdraw and/or are dismissed from the program must file a written request to be readmitted into the program. The Program Director will review all requests and may consult with the program faculty regarding readmission determination.

## **ATTENDANCE**

Attendance during the didactic and clinical phases of the program are mandatory. Students are expected to be available from 6:45 AM – 5:00 PM Monday – Friday. **MSA-1s are required to attend all scheduled classes and workshops.** All preplanned absences must be approved by the course director(s) and/or Program Director. In the event that the student is absent, the student must send notification to the course director, as well as the program office. Specific course attendance requirements are outlined in each course syllabus.

## **ILLNESS**

**MSA-1s** are expected to notify their course director when they miss class due to illness. First-year students are expected to attend each class session. Students missing more than five (5) days in a row during the semester will need provide documentation of their extend absence to the Program Office.

**MSA-2s** are permitted six (6) sick days per clinical year (May – May). Students using more than these allotted days are required to make up this time. Students must submit written documentation to the Clinical Coordinator to verify that such time has been adequately made up. Students with three (3) or more absences, excluding school holidays, during any single rotation will be required to repeat the rotation if the time has not been made up during that rotation.

**MSA-2s** are expected to contact their site when calling out sick. Students are additionally expected to notify the Clinical Coordinator via email. **The Program Office will not call site preceptors to inform of a student's absence.** Students are to exercise personal responsibility.

## **DISCRETIONARY LEAVE POLICY**

**MSA-1s** are required to adhere to the class schedule, which identifies school holidays and breaks between semesters. Students are required to attend all courses as scheduled. MSA-1s may not miss more than five (5) days in a row during the semester. In the event extended leave time is needed the student must make a formal request to the Program Office for approval.

**MSA-2s** are provided 4 discretionary leave days per semester (Summer, Fall and Spring).

*\*Students requiring additional time off due to a personal matter must receive prior approval from the Clinical Coordinator. Such time must also be made up, consistent with the expectations previously described.*

**MSA-2s** are expected to submit a Discretionary Leave Form to the Clinical Coordinator two weeks in advance. Upon acceptance or denial, a copy will be emailed to the student. The

student will provide approval notification of leave to the Site Lead Preceptor. The original will be retained in the Program Office.

**MSA-2s** assigned to jury duty are expected to fulfill their obligation as a U.S. citizen. If a student is assigned to a lengthy court case, the time away from clinical rotations must be made up.

Students who must attend court that is unrelated to assigned jury duty must use their discretionary leave days.

### **LEAVE OF ABSENCE POLICY**

Students who are on an approved leave of absence are not considered to have withdrawn. If, however, the leave of absence is not approved or they fail to return from a leave of absence, they will be considered to have withdrawn.

A leave of absence may be granted in accordance with Federal Title IV Refund Regulations. A Request for a [Leave of Absence Form](#) must be completed and signed by the student. If however, due to unforeseen circumstances, a student is prevented from completing the Request Form, the institution may grant the student's request for a leave of absence with documentation as for the reason of its decision and then later collect the signed form from the student.

SA students should complete the form and present it to the program director. The program director shall review and sign the form, either approving or disapproving the request, and then forward the form to the Assistant Dean for Academic Affairs.

Only one leave of absence can be granted to a student in any 12-month period except as provided in the Federal Title IV Refund Regulations and a leave of absence cannot exceed 360 days for any 12-month period. At the end of the requested leave of absence, the student must return or is considered to have withdrawn for financial aid purposes. Please refer to EVMS Withdrawal Refund Policy.

Privileges granted to students on leave of absence are as follows:

1. The use of library and other learning resources
2. Attendance at and participation in classroom activities, excluding laboratories. A student may not participate in the professional skills program or sit in for examinations, and will not, under any circumstances, receive credit, including elective credit, for any work done while on leave of absence.

## **CURRICULUM**

### **Master of Surgical Assisting Credit Hours = 71**

Students enrolled in the 71-credit-hour Master of Surgical Assisting Program will complete 45 credits of didactic training and 24 credits of clinical year.

<b>Didactic Phase – 37 Credit Hours Semester 1 (August – December)</b>		
	<b>Course Name</b>	<b>Credit Hours</b>
MSA 502	Medical Terminology for Surgical Assisting	2
MSA 503	Surgical Microbiology w/lab	3
MSA 504	Advanced Topics of Surgical Assisting I	1
MSA 506	Operative Practices	2
MSA 510	Advanced Surgical Pharmacology	2
MSA 515	Surgical Physiology	4
MSA 517	Principles of Surgical Assisting I Lecture	2
MSA 518	Principles of Surgical Assisting I Lab	2
	<b>Total</b>	<b>18</b>
<b>Semester 2 (January-May)</b>		
MSA 505	Advanced Topics of Surgical Assisting II	1
MSA 507	Surgical Rounds	3
MSA 508	Clinical Anatomy for Health Professions	5
MSA 513	Minimally Invasive Surgery and Simulation Skills Lab	4
MSA 519	Principles of Surgical Assisting II Lecture	2
MSA 520	Principles of Surgical Assisting II Lab	2
MSA 521	Clinical Reasoning for SA	1
	<b>Total</b>	<b>18</b>

<b>Clinical Year – 35 Credit Hours (May – May)</b>		
<b>Clinical Year: Semester 1 (May – August)</b>		
<b>Course #</b>	<b>Course Name</b>	<b>Credit Hours</b>
MSA 700#'s	Surgical Clinical Rotations One and Two	6
MSA 602	Medical Ethics of Surgical Assisting	2
MSA 607	Leadership in Healthcare	1
	<b>Total</b>	<b>9</b>
<b>Clinical Year: Semester 2 (August - December)</b>		
<b>Course #</b>	<b>Course Name</b>	<b>Credit Hours</b>
MSA 700#'s	Surgical Clinical Rotations Three - Five	9
MSA 600	Specialty Topics – Trauma and Robotics	2
MSA 601	Business of Surgical Assisting Services	3
	<b>Total</b>	<b>14</b>
<b>Clinical Year: Semester 3 (January – May)</b>		
<b>Course #</b>	<b>Course Name</b>	<b>Credit Hours</b>
MSA 700#'s	Surgical Clinical Rotations Six - Eight	9
MSA 603	Capstone Project	3
	<b>Total</b>	<b>12</b>
	<b>Total Program Credit Hours</b>	<b>71</b>

## **BCLS TRAINING**

MSA-1s must successfully complete BCLS training prior to beginning their clinical year. BCLS training is available on campus by the Tidewater Center for Life Support. Students opting to take BCLS training at this center will be responsible for payment at the time of registration. Students are permitted to take this training at another venue (i.e., Red Cross). Such arrangements are to be made by the student. **All students must submit a copy of their certification card to the Office of Clinical Education and Recruitment prior to starting their second year as part of their clinical compliance requirements.**

## **ACLS TRAINING**

Students are strongly encouraged to take ACLS training prior to the end of their clinical rotations offered by the Tidewater Center for Life Support. If students choose to take this course, payment is expected at the time of registration.

## **WORK POLICY**

Student training activities during the clinical phase are educational focused. Students may not be substituted for hired personnel to staff rooms.

Student who participate in externships can only do so following their clinical training timeframes. Students are not permitted to leave their training sites before the end of the clinical day to participate in their externship.

Student who are invited to serve on call schedules/teams at unassigned sites must be invited by the Site Lead Preceptor and approved by the Program and Clinical Administration. Students may not be excused from their current training site to attend/participate in cases at the unassigned site.

Students may not to be excused prior to didactic and clinical training expected timeframes for outside work schedules.

Students may not be employed/work as a Surgical Assistant prior graduating from the program.

## **CLINICAL PHASE – YEAR 2 – SA-2**

Days and times of classes vary. Students are expected to be available from 6:45 AM – 5:00 PM Monday – Friday. All classes during the clinical year are conducted via Blackboard Learn.

**MSA-2s are required to report to their site by 6:45 a.m.** If sites require an earlier arrival time for participation in case assignments, attend staff meetings, etc., the student is expected to adhere to the rules of his/her assigned site.

Prior to completion of training, students are required to sit for the approved national certification exam. Additionally, the EVMS SA Program prepares students who may seek employment in states requiring licensure examination.

MSA2's are required to complete twelve (12) months, totaling approximately 1,500 hours, of clinical experience. Each clinical rotation lasts six (6) weeks. The MSA Program has currently over thirty (30) total clinical training sites for students. The hospital training venues include locations within the local Hampton Roads community, various healthcare systems throughout the Commonwealth of Virginia, as well as other hospital systems within the continental United States.

Some students may be assigned to one or more surgical sub-specialty rotations. The following sub-specialties are offered in this program:

- Vascular Surgery
- Plastic Surgery
- Cardiac Surgery
- Orthopedic Surgery
- OB/GYN Surgery

Students may not conduct more than four sub-specialty rotations and may not duplicate a sub-specialty rotation. The only exceptions are when a student is invited by the site, it is an externship requirement, the program receives a letter of employment intent, and/or the student receives approval to conduct an elective rotation during semester break or is a post-rotation conducted after the successful completion of the required eight rotations.

Student may conduct clinical rotations at other sites, but must coordinate their request directly with the Clinical Coordinator.

Surgery residents, medical students, and physician assistant students are present at many clinical sites. SA students must realize that surgery residents take priority in the assignment of operative cases. The SA site preceptor is expected to appropriately assign cases to the SA student, dependent on case level and student experience. SA students must realize that

an abundance of material can be learned from observation. Students are expected to maintain this attitude toward their clinical education.

Students are encouraged to actively pursue participation in cases, communicate with site preceptors regarding ways to improve performance, and read educational materials during periods of “down time.” Students are expected to be in their assigned room before the case begins and assist OR personnel before and after the case. Students are encouraged to observe difficult or rare cases, whether or not they are permitted to scrub.

Students must adhere to rotation site policy regarding start and end times for daily training. **Generally, MSA-2s should be relieved of their clinical duty by 3:00 p.m.** Students are required to stay with the case until excused by the assigned room preceptor (SA or surgeon). Students are allowed to excuse themselves from a case at 3:00pm even if relief is not provided. Students are not permitted to leave early for work or personal reasons, unless written permission from the Clinical Coordinator is previously obtained. These exceptions will be granted for rare occasions only. These requests will be reviewed on a case-by-case basis by the Clinical Coordinator and, when necessary, with the SA Advisory Committee. Students must contact the Clinical Coordinator to make such a request

Approved requests require that students make up “missed time.” Students are required to provide written documentation from his/her site preceptor that such time has been adequately made up. The absence of written documentation of this time may result in a student not graduating on time.

## **ACADEMIC PERFORMANCE STANDARDS AND EVALUATION**

MSA-2s must receive a “PASS” for **all** rotations in order to complete the program. Students’ clinical performance is assessed using a combination of targeted behavioral, psychomotor and clinical competencies relative to the supervised practice objectives and opportunities. Site preceptors complete performance evaluation forms on each student at the end of each rotation. **Site preceptors are strongly encouraged to review this evaluation with students on an individual basis.** Students must submit these forms to the Clinical Coordinator within a pre-specified time period. Students should retain copies of their evaluations for personal record-keeping..

Students who receive a grade “NON-PASS” in any rotation will be required to complete another six week rotation or remediate the non-pass rotation at the end of the clinical year,

preventing the student from a timely graduation. Upon successful completion of such a rotation, the student will then be given his/her certificate.

**Students who fail two rotations will be dismissed from the program. Students will be permitted to repeat only one rotation during the clinical training portion of the Program. Failure of the repeated rotation, or any subsequent rotation, will result in dismissal from the program.**

### **ACADEMIC PROBATION DURING CLINICAL TRAINING**

Students who “FAIL” a rotation and/or removed from Clinical Training will be immediately placed on academic probation and will be required to “PASS” two consecutive rotations and obtain “Satisfactory” scores on all Mid-Term Evaluations and Final Evaluations while on academic probation. Upon meeting these conditions, students will be removed from academic probation. A student on academic probation who does not achieve the fore mentioned conditions may be dismissed from the program.

Any student placed on academic probation during the clinical year, due a failed rotation, academic and/or non-academic reasons, may not participate in any sub-specialty rotations such as Cardiac, Neuro, private OB-GYN rotation, or any “away” rotations. Assignments to sub-specialty and “away” rotations will be reassigned to “local” general rotations.

### **REMEDICATION DURING CLINICAL TRAINING**

Students who are identified by Site Lead Preceptors, Clinical Coordinator, or other Program Staff as lacking appropriate skill level based on the expectations outlined in the **Guidelines for Clinical Rotations**; students who fail (receive non-pass) a clinical rotation; and students who receive two or more Mid-Term Evaluations with scores of less satisfactory will be removed from Clinical Training, be required to participate in a supervised clinical skills remediation program ranging from 3 to 12 weeks, and may be placed on academic probation. Upon satisfactory completion of the supervised clinical skills program, students may be permitted to return to Clinical Training. However, if students fail the supervised clinical skills program remediation program, they are subject to dismissal.

### **CASE REQUIREMENTS/PROCEDURE LOGS**

Students in our program complete on average 468 cases which surpasses the 140 cases stated in the *Core Curriculum for Surgical Assisting*. Students are expected to complete eight clinical rotations and participate at minimum 240 cases for successful completion of the program. Students are required to maintain electronic procedure log of all operative cases in which they are involved. All procedures in which the student actively participated or observed must be recorded via the Typhon electronic case system. **Note: Students may not count cases which they may have participated/observed during their pre-clinical didactic experience towards their clinical case requirements.** Prior to beginning the clinical year, students will be training in the procedures to access the electronic log system. Student must have access to a computer and ability to connect to the internet. Students are to maintain a portfolio to present their procedure logs to the Site Lead Preceptor at each clinical site. Students are to complete their logs within one week of completing each rotation. The Clinical Case Requirements for clinical training may be found on see pages 41-42. This table contains the minimum case requirements for General Surgery and the various Surgical

Specialties. If a deficiency in case type exposure is indicated, the Clinical Coordinator or designee works with the site preceptor(s) to direct the student's clinical experience to address these case deficiencies.

### **EDUCATION DAYS**

MSA-2s are **required** to attend scheduled lectures and professional development events. These events tend to occur on Fridays but may occur on other days of the week. Announcements of these lectures/events are generally made with two weeks' notice. However, some events may not allow for advance notification. But, students are still required to attend barring extraordinary circumstances. Students will be excused from their clinical sites for activities which occur in the mornings. Events during the week tend to be scheduled starting at 3:00 p.m. Students will be allowed to leave their sites early in order to arrive on time.

### **GUIDELINES FOR CLINICAL ROTATIONS**

Operative experiences are site dependent. Students must maintain frequent communication with their site preceptors to ensure knowledge of expectations and procedures. Overall, the following guidelines, approved by the EVMS SA Advisory Committee, provide students with a basic awareness of what is expected during each rotation.

#### **ROTATIONS 1 & 2**

Students will develop an enhanced understanding of:

- Job expectations
- Operating room dynamics
- Sterile technique
- Proper hand scrubbing techniques
- Gowning/gloving
- Common surgical procedures
- Various suture and when used
- Surgical anatomy
- Basic suturing techniques
- Basic positioning techniques
- Basic suture patterns
- Checking patient consent
- Instrumentation

Students are expected to observe and participate in:

- 1<sup>st</sup> and 2<sup>nd</sup> assist on various procedures
- Preparation of the OR
- Insert Foley catheters
- Basic suturing and tying
- Draping
- Positioning
- Dressing wounds
- Gather equipment and supplies
- Reading charts

#### **ROTATIONS 3, 4 & 5**

Students will develop an enhanced understanding of:

- Laparoscopic procedures
- Use of retractors and forceps
- Anticipating surgeons' next steps
- Familiarity with proper instrumentation

- Surgical anatomy
- Reading monitoring devices

**Students will observe and participate in:**

- Suturing and knot tying techniques, at a more advanced level
- 1<sup>st</sup> & 2<sup>nd</sup> assist on procedures, with opportunities to first assist on minor procedures, as deemed appropriate by site preceptors and/ or surgeons
- Application of tourniquets, splints, casts, and dressing materials
- Wound debridement and skin grafting
- Set up instrumentation for A-line, triple lumens, etc

**ROTATIONS 6, 7 & 8**

Students will be expected to consistently demonstrate adequate knowledge of:

- Basic and advanced suturing and knot tying techniques
- Instrumentation
- Surgical anatomy

**Students will be expected to consistently demonstrate an adequate ability to participate in the following activities at a level of experience commensurate of a beginning CSA:**

- 1<sup>st</sup> and 2<sup>nd</sup> assist on a variety of procedures, including laparoscopic procedures
- Troubleshooting of surgical equipment
- Demonstrate proficiency of basic and advanced:
  - Knot tying techniques
  - Suturing
  - Placing Foley catheters, A-line, dressings, casts, etc.
- Positioning and draping

**NOTE:**

During the final three rotations, MSA-2s are expected to demonstrate proficiency as they near the end of their clinical training. Students will be required to complete a Pre-Graduation Competency assessment during the fourth thru sixth rotation. Students are encouraged to seek additional help, as may be necessary, from site preceptors or other CSAs. The clinical year provides adequate time for student learning – make the most of this experience and actively seek assistance from others.

## **REQUESTS FOR VERIFICATION OF ENROLLMENT OR LETTERS OF SUPPORT**

Students seeking verification of enrollment, or requesting letters of support for scholarships, must submit a request in writing with specific information (name, address, organization, etc.) to the Office of Student Affairs. This request must specify the dates of the student's matriculation, to whom and where the letter should be sent and any other pertinent details.

Requests for references or recommendations must include permission to release information and whether the student waives the right to review the reference letter that is released from the Registrar's Office.

## **KEY PROGRAM CONTACT INFORMATION**

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## **MSA-1 CALENDAR CLASS 2024**

8/17-18/2022	Institutional Orientation
8/19/2022	MSA Program Orientation
8/22/2022	Fall Term Classes Begin
9/5/2022	Labor Day Break
11/21-25/2022	Thanksgiving Holiday
12/12-16/2022	Fall Term Exam Week
12/19/2022 – 1/8/2023	Winter Break
1/9/2023	Spring Semester Classes Begin
1/16/2023	Martin Luther King Day – Holiday
4/24–28/2023	Spring Term Exam Week
5/1-15/2023	Summer Break

*As of 7/11/2022  
Subject to change*

## **MSA-2 CALENDAR CLASS 2024**

5/15/2023	Summer Clinical Rotations begin
5/15/2023	Clinical Orientation
TBD	Intuitive daVinci Robotics Training
5/29/2023	Memorial Day
6/19/2023	Juneteenth/June 19
7/4/2023	Independence Day – Holiday (return to rotation 7/5)
8/7/2023	Fall Clinical Rotations begin
9/1 - 4/2023	Labor Day Break (return to rotation 9/5)
11/23 - 24/2023	Thanksgiving (return to rotation 11/27)
12/11/2023 – 1/1/2024	Winter Break
1/2/2024	Spring Clinical Rotations begin
1/15/2024	Martin Luther King Day – Holiday
5/3/2024	Last day of Clinical Rotations
5/17/2024	White Coat Ceremony
5/18/2024	Graduation Day

*As of 7/11/2022  
Subject to change*