

Health Science Application Checklist of Required Items

Checklist of Required Items
Surgical Technology

Required Items (*To be submitted in order*)

Completed Checklist of Required Items (Use as Cove	r Sheet for packet)	COMPLETE this checklist and include it
Copy of CASAS test scores (if applicable) or Official T AS Degree or higher, from an approved, accredited l Institution. Documentation of other literacy test exe	J.S. Educational	as the cover sheet for your application packet. ENTIRE application packet must be completed, and ALL fees paid, prior
Signed and dated Instructor Interview/Admission Se	minar FAQ & Notes	to the start of the program. Application packet is considered incomplete unless
Signed and dated Essential Job Functions		ALL required items are turned in. DO NOT
 Copy of TEAS test scores (must be 56%, or higher) fr for off-site testers, only official scores will be accept accepted. Official Transcript of standard High School Diploma of citizens should use an Official Equivalency and Certificate the High School Diploma requirement. No phomatic Signed and dated Distance Education Agreement Signed and dated Criminal Background Check & Drug Copy of Paid Respires for E7 Eigens Prints Level 2 Respires 	or GED, Non-U.S. fied Degree to stocopies accepted. g Screen Disclaimer	attempt to mail, email or fax any paperwork from this packet to Pinellas Technical College (none will be accepted). SUBMIT completed application packet to Student Services during regular office hours. Contact program counselor Jeromy Johnson for all admission questions
Copy of Paid Receipts for EZ FingerPrints Level 2 Bac	_	johnsonjer@pcsb.org or (727)893-2500
Panel Drug Screening (must be completed no more than 30	days prior to official first day	ext 2392
of class). Completed Program Application		
Signed and dated Health Screening for Health Scient (Proof of Immunization) form and Documentation or results/immunizations.		
Signed and dated Vaccination & Testing Acknowledge	gment	
Signed and dated Medical Insurance Proof of Covera and copy of Medical Insurance Card (front & back)		
Signed and dated Notification of Exposure	(PLEASE PRINT)	
Signed and dated Confidentiality Statement	Applicant Name	
	Email	
	Telephone	
		responsibility for accuracy and confirmation of or to submission (PTC staff will not check packets
Optional Items	Y	
Other Official (Postsecondary) Transcripts being submitted; PTC first, followed by any others	Applicant Signature	
Copies of current Health Related Certifications (CNA, CPR, First Aid, Health CORE, etc.)	Date	
(CIVA, CPK, FIISt AIU, HEAITH COKE, etc.)		(ST SP)
		(31 31)



Health Science Application Program Application: Surgical Technology

Applicant Information (PLEASE PRINT)

Full Name									
	Las	t		F	irst		M.I.	Date	
Address	Address			a+ /1 lm i+4		City		Chata	
				ot/Unit#		City		State	Zip
SSN (Last 4 digits)				mail _					
Telephone (Home) _			<i>(</i> N	1obile) ₋			(Work)	
Gender Male	e Fen	nale Ag	e	DOI	В				
Race Whit	e, Non-Hispan	ic Black, N	on-Hispanic	His	panic	Asian Ameri	can Indian/Alaska	n Native Multiracial	
Emergency Contact	(Name & Telep	nhone)							
Are you a citizen of	the United Sta	ites?	YES	NO	If not, pro	ovide Country of O	rigin		
Are you a military ve	eteran?		YES	NO	If yes, list	Branch of Service			
Have you previously	applied for th	ne Surgical Tech	nology Progr	ram at P	TC?	YES	NO		
If yes, Date Applied	l	Ca	mpus				_		
Educational Bac	kground								
Highest Level of Edu		HS Diploma/GE	D A	A/AS	BA/BS	MA/MS	PhD		
Major in College (or	nrogram of co	oncentration)							
				TABE		MONE	DERLIC	READI	
TEAS Date	Date	ASAS	Date	IADE		Date	DERLIC	Date	
Score	Scores		Scores	L/F	G/E/SS	Scores	Norm LF	Results	%
	Reading		Reading			Verbal		Reading Recall	
	Math		Math Language			Quantitative		Technical Competency Technical Knowledge	
			0 0			J		Personal Attributes	
List any medical and	or health car	e training/educ	ation below.	NOTE: I	f you are a	CNA, include a cop	y of your license i	n your application packet.	
TYPE OF TRAINING		DATES	SCHOOL					LENGTH	
Work Experience	e								
List your last three y		experience belov	w (with <i>MO</i> S	ST RECEN	IT/CURREN	T employment first	t)		
JOB TITLE		DATES	BUSINESS	NAME				REASON FOR LEAVING	
Transfer/PTC Re	e-entry Stu	dent Reques	t						
If applicable, check	-	-		n reques	t:				
I am requesting	g Advanced St	anding to enter	a Surgical Te	echnolog	gy class			t, for previously complete	
•	•	ously completed						gical Technology program	
		ork completed, a d, as part of my				curriculum.	d i agree that i wi	Il complete all assignment	is required of the
training.			J		o,				
Disclaimer									
I certify that my ans		•		-	_				
misrepresentation,	or omission of	tacts, is an acce	eptable reaso	on for de	enial into th	e program.			
x									
		Applicant Signa	ture					Date	_



Pinellas Technical College follows the mandated literacy testing as required by the Florida Department of Education*

Students take the *CASAS* for *Reading* and *Math* skills assessment. The tests are free, and the test scores are valid for two years.

- The entire testing session may take between 2 ½ 4 hours to complete. For some, completion of the CASAS tests may require two, or more, testing sessions.
- Photo ID required to enter the building and to test
- No Backpacks, Large Bags or Electronic Devices**
- Arrive 30 minutes before testing time for processing
- Test sessions begin promptly

Testing Schedule

ST. PETERSBURG CAMPUS

901 34th St S, St. Petersburg, FL 33711

Seating availability is first-come, first-served, basis

Monday - Friday 8:00AM-11:00AM

Monday and Wednesday 2:30PM-4:00PM

(Note: No Friday Testing during Summer Term)

Test Prep Resources

CASAS www.casas.org (free sample test items)

www.studyguidezone.com/TABE/ (study resources)

* Test exemptions may apply (e.g., having earned an Associate Degree, or higher,

from an accredited U.S. college); speak with PTC Counselor for more information.

** Pinellas Technical College is not responsible for student's lost or missing items



Instructor Interview/Admission Seminar FAQ & Notes

Instructor Interviews

and/or Admission Seminars are provided at Pinellas Technical College because

we want you to be successful in your chosen technical program.

Instructors are generally available to meet incoming students (in scheduled interviews) and answer questions about their specific program. The purpose of both the interview, and admission seminar, is to provide you with additional information about the program. Please ask as many questions as you wish; some common topics are listed below.

Interview/Admission Seminar FAQ

- What is the length of the program and what will I be required to learn?
- What is the cost of books, tools, and materials and when will they be needed?
- How are the classes taught (lecture, demonstrations, hands-on experiences)?
- What will be expected of me while in the program?
- What, and where, are the job opportunities in this technical field?
- Do you assist with job placement?
- What is the starting pay? What is the range of earnings?
- Is there a final examination, certification, or licensing required to be employed in this field?
- What is the graduation rate for this program?

(PLEASE PRINT)	
Applicant Name	
Instructor	

Schedule an Instructor Interview

For these programs, please contact the program instructor:

Surgical Technician (SP)
Jennifer Lowe, Instructor
loweje@pcsb.org

Attend an Admission Seminar

For these programs, refer to the Cover Sheet & Program Overview of this Health Science Application Packet for schedule (and whether attendance is mandatory or optional):

Central Sterile Processing Technology (SP)

Emergency Medical Technician (SP) Practical Nursing (SP) Surgical Technology (SP)

N		
IV	otes	Ĺ

Counselor Comments	
Counselor Signature x	
Instructor Comments	
Instructor Signature v	Data



Essential Job Functions

Surgical Technology

Basic Skills [Minimum Qualifying Test Scale Scores (SS)]

CASAS — (Comprehensive Adult Student Assessment Systems)
Reading: 249 (11th Grade Equivalent) & Math: 245 (11th Grade Equivalent)

Basic Skills

- CASAS (Minimum qualifying scores)
 - Reading 249 (11th Grade Equivalent)
 - Math 245 (11th Grade Equivalent)

Health & Safety Requirements

 Must be able to adjust to additional body covering (gown, gloves, hat, mask, eye protection, shoe covers, lead apron, and orthopedic hood for the duration of surgical procedures as stated by the dress code and OSHA requirements

Mental/Cognitive Factors

- Visually monitor the sterile field at all times with unlimited bilateral central and peripheral vision and depth perception
- Be able to hear, comprehend and respond appropriately to verbal commands in English from a masked individual and able to communicate verbally and in writing
- Able to perceive, process, and respond accurately, quickly, and efficiently to situations of an anticipated or emergency nature
- Able to recall previously learned material in a timely and organized manner
- Able to function calmly and efficiently with proper decorum in a fast-paced, stress-producing environment

People Skills

 Work with an assigned team for the duration of cases and/or shift of work

Physical Requirements

- Ability to stand for duration of a surgical procedure
- Using fingers or hands to grasp, move, or assemble very small and very large and heavy objects, instruments, and equipment
- Make fast, simple, repeated movements of fingers, hands, and wrists
- React quickly using hands, fingers, or feet
- Use muscles to lift, pull, or carry heavy objects; lift up to forty pounds and push up to fifty pounds
- Use abdominal and lower back muscles to support the body for long periods of time without getting tired
- Hold the arm and hand in one position or hold the hand steady while moving the arm
- Use hands to handle, control, or feel objects, tools, or controls

Technical Skills

• Operation of computer, intercom, and paging systems

Tools and Equipment

 Operate: Electro surgical unit, pneumonic/battery operated equipment, fiber-optic equipment, audiovisual equipment, operating room light, operating room tables and stretchers

Working Conditions

- Must be able to work in a confined space
- Exposed to noxious gasses and other materials
- Adapt to controlled room temperatures as to patient condition
- Standing on wet and hard floors
- Exposed to controlled and sometimes limited lighting

I have read and understand the Essential Job Functions above.	
Applicant Name (PLEASE PRINT)	
Applicant Signature x	Date



Test of Essential Academic Skills (TEAS) at PTC

The TEAS assesses 4 areas essential to academic success:

Reading, Mathematics, English and Language Usage, and Science. The TEAS is comprised of 170 questions related to medical technology. Test attempts are timed and permit about 3.5 hours to complete.

To be eligible to apply for the *Practical Nursing*, *Dental Assisting*, or *Surgical Technology* programs students must score at least 56%. *Note:* The TEAS may be taken only four (4) times within a 12-month period. A 30-day waiting period is required between test attempts.

Test Fee \$70.00 (each attempt); must be pre-paid at the PTC Bookstore (keep receipt for test session admittance).

PRIOR to taking the TEAS, first-time testers MUST create an online account with ATI (Assessment Technologies Institute):

- 1. Visit www.atitesting.com : Select Create Account
- 2. Sign In Info: Provide Info
 - Username, Password, Email, Security Questions, Personal Info, etc.
 - Institution: Select most appropriate choice
 - o Pinellas Tech College Clearwater
 - Pinellas Tech College St. Petersburg
 - o Pinellas Tech College AH
 - Student/Employer ID, Credentials, Expected Graduation: Leave blank
 - Non-Degree Seeking: Check
 - Demographic Info: Provide Info; Subscription Updates/Notes: Provide choice
 - User Terms & Conditions
 - Yes, I agree: Select (to complete online registration)
- 3. **Print completed ATI Registration page**(with Username/ID and Password; required for testing)

Test Prep Resources Test preparation is strongly encouraged before taking this comprehensive test. Several computer-based practice assessments and study manuals are available for free and for fee.

Some resources include:

- mometrix.com/academy/teas-test-study-guide/ (Test prep, free)
- teaspracticetest.com (Practice test, free)
- test-guide.com/free-teas-practice-tests.html (Test prep, free)
- purplemath.com (Math courses, fee)
- atitesting.com (Test maker's site; test prep, study manual, fee)

TEAS PTC Testing Lab Schedule

Monday- Friday 8:00am & 10:00am

Monday & Wednesday 2:30pm

Verify availability of testing lab, for desired test date, at www.myptc.edu. Prepayment does not guarantee a seat. Please arrive 30 minutes before your scheduled testing time to comply with campus sign-in procedure. Testing space is limited.

Late arrivals will not be permitted to test. Testers requiring special accommodations must schedule at least 48 hours in advance (provide documentation of disability when scheduling).

BRING these REQUIRED ITEMS for admittance into TEAS Test Session:

- TEAS PTC Receipt (paid, pink copy)
- Photo ID (with your signature)
- Printed ATI Registration page (with Username/ID and Password)

Other TEAS Testing Sites exist (with additional steps and transfer fees); for more information visit myptc.edu



Distance Education Agreement Surgical Technology

As a student entering the Surgical Technology program at Pinellas Technical College, _____ understand, and agree to, the following items: Student Name (PLEASE PRINT) • This is a hybrid-online program and the delivery mode of curriculum is NOT presented in a traditional lecture format. • Although the curriculum is extensively online, I am required to attend class to complete the necessary work. There will be distance learning days during the first two (2) terms; this will allow for me to complete and submit work from home. These distance learning days will be determined by the instructor. Fewer distance learning days will be offered as I progress through the program; this will allow for more hands-on/lab skills. If I fall behind in my work, distance learning days will NOT continue to be an option. If I am unsuccessful with the online program, to continue my studies, I may need to re-enroll in the traditional program instead. If I am a VA student, I am NOT allowed to take ANY distance learning days. Student Signature x ______ Date _____ Instructor Signature x _____ Date _____



Background Check & Drug Screening Information & Disclaimer

By law, criminal background checks and drug screenings are required for employment in the health care industry and to take licensing exams for the medical professions.

Disqualifying offenses may be a history of felony and/or misdemeanor convictions or substance abuse. It is your responsibility as a program applicant/participant to understand all disqualifying offenses that may impact your ability to become employed in the health care field or enroll/remain in a health care program at an educational institution.

Additional information can be found online on Florida Department of Health websites:

• Nursing/CNA student inquiries > https://floridasnursing.gov/certified-nursing-assistant-faqs/background/

I fully understand that, as a prospective student applying to a Health Science program at Pinellas Technical College,

- If my background check reveals any disqualifying offenses or the drug screening indicates a positive result, I will not be allowed to enter the program to which I am applying and I may be withdrawn, if I have already started.
 - If the withdrawal/dismissal occurs within the first 50 hours, I will receive a refund as allowed according to school policy.
 - o If the withdrawal/dismissal occurs after the first 50 hours, I will not be entitled to a refund.
- Passing the background check and drug screening does not guarantee certification, or registration, in the field I have chosen.
- The Level 2 Background Check and 10-Panel Drug Screening are specific to my enrollment at Pinellas Technical College as a student. Should there be any interruption in my enrollment re-screenings will be required prior to re-enrollment.

I acknowledge that I have read and understand the above disclaimer and information.

Student Name (PLEASE PRINT)		
Student Signature	Date	

Fingerprinting Process Information & Steps

Background Checks for Health Science/Clinical Education Programs must be completed no more than 30 days from the class start date. *EZ FingerPrints* is PTC's official provider for fingerprinting and background checks. Fingerprinting is conducted on-site, at their location (walk-in, or by appointment).

At EZ FingerPrints, you must:

- Present EZ FingerPrints with your valid Driver's License
- Present EZ FingerPrints with your Social Security Card
- Identify yourself as a Pinellas Technical College student, applying for a Health Science/Clinical Education program (You do not need to know ORI, or OCA, code numbers)

Fingerprints are scanned electronically using an ink-free process. Once scanned, the fingerprints are sent electronically to the *Florida Department of Law Enforcement FDLE* (which forwards them to the appropriate governing agency, i.e. *AHCA* or *DCF*); no mailing is necessary. Depending on the agency, the entire fingerprinting process requires approximately 7-14 days to receive the results.

PTC cannot determine if previous offenses will, or will not, clear the background check.

The results will be sent directly to the Pinellas County School Board Administration Building (you will be contacted only if there is a problem).

EZ FingerPrints 1725 East Bay Drive, Suite D Largo, FL 33771

(Lakeside Professional Center)

- Mon Fri | 8:30 am 6:00 pm

 Walk-in (Please Call First)
 - Appointment: 727.479.0805 or https://ezfingerprints.com/
- _

<u>Instructions for *Individual*</u> using EZ Fingerprints:

- Complete **SECTION 1** below
- Make an Appointment, OR Walk-In (no appointment needed)
 - Appointments: Call 727.479.0805 or visit https://ezfingerprints.com/
- Walk-Ins: Call 727.479.0805
 and let them know you are coming

- Go to EZ Fingerprints:
 1725 East Bay Drive,
 Suite D, Largo, Florida, 33771
 Monday Friday | 8:30 am 6:00 pm
- Bring the following with you:
 - Completed Request Form/Receipt (below)
 - o Your valid Driver's License
 - Your Social Security Card

Instructions for Referring Company (if applicable):

Give this completed request form/receipt to individual to be fingerprinted

Health Services Student Fingerprin	Request Form	/Receipt	
SECTION 1 (Completed by individual)			
Individual Name (PLEASE PRINT)			
Reason for Screen: Employment Vo	lunteer Other		
What Company is this screening for? VEC	HS – PINELLAS COUN	TY SCHOOL BOARD	
_			
SECTION 3 (FOR EZ FINGERPRINTS USE ONLY)			
TCN #	R#		
Payment Method (Circle One): Check	ash Credit Car	d	
Screen Date	Pend for Payment	Submission Date	
EZFP Rep Signature x			

10-Panel Drug Screenings are required for all students that are *accepted* into these PTC Programs and must be completed no more than 30 days prior to the first day of class: *Central Sterile Processing, Dental Assisting, Emergency Medical Technician, Practical Nursing* and *Surgical Technology*.

- This Drug Screening utilizes a urine sample and, in order to be valid, the screening must be completed within 30 days of the program's start date. Students are issued a "Screening ID Number" at the time the lab sample is collected. Results are typically provided within 24 48 hours.
- The results of this Drug Screening are valid only for the purposes of applying to a Medical/Health Science program at Pinellas Technical College.
- Students who fail the Drug Screening are automatically withdrawn from the program and not permitted to seek enrollment again for one entire fee term, or until the next start date, whichever is sooner.
- Students who withdraw (and seek to re-enter a program) must resubmit and clear a new Drug Screening at the time of Re-Admission, within 30 days of the new start date.

Local Providers*:

Concentra - St. Petersburg

3745 33rd St N, Suite A St. Petersburg, FL 33713 727.231-0154

Office Hours: Monday – Friday (7:30 am – 5:00 pm)

10-Panel Drug Screening \$82.00**

(Cost for PTC Students)

EZ FingerPrints – Largo

1725 East Bay Dr, Suite D Largo, FL 33771 727.479.0805

Office Hours: Monday – Friday (9:00 am – 5:00 pm)

10-Panel Drug Screening \$55.00**

(Cost for PTC Students)

FYI: 10-Panel Drug Screenings

test for evidence of illicit drug classes including:

- Amphetamines
- Barbiturates
- Benzodiazepines
- Cocaine
- Marijuana (THC)
- Phencyclidine (PCP)
- Methadone
- Methamphetamine
- Opiates
- Oxycodone

^{*} Important: Students are welcome to use other providers for their 10-Panel Drug Screening; note however that only Official Results will be accepted by PTC (and used for Admissions purposes). Costs for Drug Screenings vary based on each lab's fee scale; therefore applicants are encouraged to check pricing beforehand.

^{**} Student Cost: Specify that the screening is for admission into Medical Programs at PTC (Pinellas Technical College)



Health Screening for Health Science Education Proof of Immunization (1 of 2)

PINELLAS COUNTY SCHOOLS HEALTH SCREENING FOR HEALTH SCIENCE EDUCATION

Student Name (Print)		

Students enrolling in a Health Science Education Program with a clinical component must have the items identified for their hea. Ith program completed prior to the class start date except TB screening requirement as stated below. Students recognized to be non-immune to any of the diseases must seek appropriate medical attention before entering the class.

ATTACH THIS COMPLETED FORM TO OFFICIAL DOCUMENTATION, INCLUDING LAB REPORTS, BEFORE PAYING TUITION, STARTING CLASS, AND/OR CLINICAL EXPERIENCE.

Your Health Program (one from list below)

HEALTH PROGRAM REQUIREMENTS*	ТВ	Rubella	Rubeola	Varicella	Tetanus	Diphtheria	Pertussis	Нер В	Neg Drug
Allied Health Assistant (Phlebotomy)	Х	Х	Х	Х	Х	Х	Х	Х	Х
Central Sterile Processing	х	x	x	х	х	x	х	Х	х
Dental Aide	Х					X	Х	Х	
Dental Assistant	х				х	X	х	Х	х
Emergency Medical Technician	Х	x	X	Х	х	X	х	Х	X
Health Career II	Х	x	х	х	X	X	Х	X	
Health Unit Coordinator	Х	X	X	Х	х	X	Х	Х	
Home Health Aide	Х								
Medical Assistant	Х	x	x	х	х	X	Х	Х	X
Nursing Assistant	Х	х	x	Х	х	X	Х	Х	Х
Patient Care Technician	Х	X	X	Х	х	X	х	Х	Х
Pharmacy Technician	Х	x	X	х	х	X	х	Х	X
Practical Nursing	Х	x	X	Х	x	X	х	Х	X
Surgical Technician	х	x	x	x	x	x	X	x	x

^{*}Depending on requirements of clinical site.

I. TUBERCULOSIS

- A. 2 TB skin tests (Mantoux), 1 within past year and 1 within 30 days prior to dinical experience. OR
- B. 2 TB skin tests (Mantoux), 1 week apart 30 days prior to clinical experience, OR
- C. negative chest x-ray within 30 days of clinical experience, OR
- D. taking or have completed a prescribed medication OR
- E. documentation of negative IGRA blood test

II. RUBELLA (German measles)

If under 40 years of age:

- A. positive Rubella serology, OR
- B. immunization with live vaccine since January 1, 1980, OR
- C. 2 immunizations with live vaccine after 12 months of age

If over 40 years of age:

- D. positive Rubella serology, OR
- E. Measles, Mumps, Rubella (MMR) vaccine after 1970

III. RUBEOLA (10 day measles)

- A born prior to 1957, OR
- B. positive Rubeola serology, OR
- C. immunization with live vaccine since January 1, 1980, OR
- D. 2 immunizations with live vaccine after 12 months of age

IV. VARICELLA (Chickenpox)

- A. 1 vaccine, if administered under age 13, OR
- B. 2 vaccines, 4-8 weeks apart, if administered 13 years of age or older, OR
- C. positive Varicella serology (allow 2 months for blood testing process)

Varicella titer is a blood test for antibodies to Chickenpox. We are finding that even if a student had Chickenpox, he may not have the antibodies to protect him from the disease as an adult. The blood test is necessary if students cannot document the 2 vaccines. If the test comes back negative then the student must have the 2 vaccinations prior to entering a clinical area. You may obtain further information from the web site: CDC.GOV. Click on V-Varicella. Please allow two months prior to clinicals to begin the blood test ting process.

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Health Screening for Health Science Education Proof of Immunization (2 of 2)

v	TE	ТΔ	ALI I	10

within last 10 years

VI. DIPHTHERIA

within last 10 years

VII. PERTUSSIS

within last 10 years

VIII. HEPATITIS B VACCINE (Dental Assisting applicants are required to complete Injection #1 by class start date and Injections #2 and #3 by external clinical component.)

Some clinical facilities for the other health programs will require the Hepatitis B V accine series before your externship. Therefore, you will not be able to complete your program without completing the HBV series.

- A. injections #1, #2, #3, OR
- B. titer

IX . NEGATIVE DRUG TEST

within 30 days prior to class start date

I,	hereby grant my licensed physician and /or the physician /laborat se this information to the Pinellas County Schools.
Student Name (Printed)	Date

OWI-662-HSA-ST-



Vaccination & Testing Acknowledgment Proof of Immunization

I understand that, completion of clinical experiences in health care facilities is a requirement for full program completion of Health Occupations Education Programs at Pinellas Technical College.

I understand that the health care facilities implement requirements for entry to the facility and participation in clinical experiences where my interaction with patients is required. Among these requirements are proof of vaccinations and testing for infectious diseases.

I understand that it will be my responsibility to provide the required documentation of the mandated vaccinations and proof of infectious diseases testing as dictated by the health care facility.

I understand that I am responsible for all costs incurred for any immunizations and/or testing.

I understand that not providing the required documentation as mentioned above, could result in my inability to complete all requirements of the health occupations training program and not be eligible for a Certificate of Program Completion from Pinellas Technical College.

I acknowledge that I have read and understand the information above and have had the opportunity to ask related questions.

Student Name (PLEASE PRINT)	 	
Student Signature x	Date	



Medical Insurance Proof of Coverage

School Board of Pinellas County, Florida Pinellas Technical College Health Science Programs

Verification of Medical Insurance (PLEASE PRINT) ______, verify that I am enrolled in a Health Science Program through Pinellas Technical College. I fully understand that clinical sites and facilities require students to have their own medical insurance to participate in the clinical assignment(s). I also understand that clinical hours are required for Health Science program completion and that, without clinical hours, I cannot complete the program. Should the need arise for medical care due to an accident or other injury or loss, while participating in my regularly scheduled theory or clinical learning activity, my medical expenses will be covered by: (CHECK APPROPRIATE SECTION(S) & PROVIDE INFORMATION BELOW) 1 Medical Insurance Policy Insurance Company _____ Policy Number ______ Effective Date _____ Expiration Date _____ 2 Medicaid, Medicare, or Department of Veterans Affairs, etc. Insurance Company _____ Policy Number ______ Effective Date Expiration Date * I am aware that, if I am enrolled in the program beyond my policy's expiration date, I must purchase another policy.

I understand that, in the event my insurance policy does not cover my complete loss or damages, I agree to be personally responsible for such uncovered injury, loss, or damages I sustain while participating in my regularly scheduled theory or clinical learning activity.

I further understand that I am not entitled to any benefits, or workers compensation, in the event of any injury occurring on the premises of the class/clinical learning experience.

I acknowledge that I have read and understand the contents of this entire form, and have selected the appropriate insurance option(s) above for my situation.

Student Name (PLEASE PRINT)			
-			
Student Signature x	Date		

Note: Staple Proof of Insurance (Copy of Medical Insurance Card, front & back) to this form and return it with your Application Packet.

The School Board of Pinellas County, Florida, prohibits any and all forms of discrimination and harassment based on race, color, sex, religion, national origin, marital status, age, sexual orientation or disability in any of its programs, services or activities.



Notification of Exposure Pinellas Technical College

I understand that, as a student at Pinellas Technical College in the *Central Sterile Processing, Dental Assisting, Emergency Medical Technician,* or *Surgical Technology* programs, I may come in contact with toxic chemicals, infectious organisms, and communicable diseases.

In addition, I understand that I am to be tested, treated or vaccinated against any condition warranted according to the clinical experience facility and the Pinellas County Schools immunization requirements policy (*Health Screening for Health Science Education*).

I accept full responsibility for:

- All costs incurred for any testing/immunizations.
- Time missed from school as a result of testing, immunizations or exposure.

I also understand that it is my responsibility to:

- Wear and/or use the following protective clothing and/or gear when carrying out my clinical duties: gloves, face masks/shields, lab coats, goggles, disposable gowns, fluid resistant clothing, head coverings, shoe coverings, lead aprons and laser goggles.
- Follow proper safety procedures as required by OSHA and the facilities.

I acknowledge that I have read and understand the above exposure notice and safety procedures.

Student Name (PLEASE PRINT)	
Student Signature x	Date



Confidentiality Statement Pinellas Technical College

The Health Science programs at Pinellas Technical College expect their students to represent the school in a manner that reflects high standards of personal integrity, education and service to patients.

I understand that, as a student in the *Central Sterile Processing, Dental Assisting, Emergency Medical Technician, Medical Coder/Biller*, or *Surgical Technology* program, I will conduct myself according to the highest ethical standards. Underlying principles are based on common courtesy and ethical/moral behavior. These are essential for me to grow professionally and to receive the desired trust and respect of all members of the health care profession.

I agree to the following items:

- I will not discuss patients, or any identifying data, in public settings such as cafeterias, elevators, hallways, over the phone, with family or friends, with other patients, or where patients might overhear me.
- Discussion of my patient should only occur in approved settings, such as, giving or taking reports or in clinical conference.
- I will use patient initials in all discussions and on written documents.
- I will destroy all notes and computer-generated papers after completing my daily assignment.
- To protect the integrity of the medical record I will not photocopy material from the medical record.
- If there are concerns about patient confidentiality, I will check with my instructor to obtain guidance.

I acknowledge that I have read and understand the confidentiality statement and procedures above.

Student Name (PLEASE PRINT)			
Student Signature x	Date		



Health Science Application Packet

Program Overview (1 of 2)
Surgical Technology

Surgical Technology

Mission

The mission of this program is to provide training for employment in the surgical area of the health care industry. The surgical technologist works under the supervision of surgical and nursing personnel to facilitate the safe and effective administration of invasive procedures.

Length 1,330 Hours

Program (H170211) consists of a planned sequence of courses

- Central Supply Assistant Course STS0015 (210 hours) Consists of theory and application of central services
 departmental organization and function; basic anatomy, physiology, microbiology and chemistry related to
 central service activities; quality assurance; infection control and isolation techniques, principles of safety;
 principles, methods and controls of sterilization processes; cleaning, processing packaging, distributing,
 and storing.
- **Surgical Technologist, 1 of 3** Course STS0010 (343 hours) This course provides the student with an introduction to anatomy and basic physiology, microbiology, the biomedical sciences, and pharmacology.
- Surgical Technologist, 2 of 3 Course STS0011 (343 hours) This course provides an introduction to operating room theory with a practical application of the skills to be performed by the surgical technologist; principles and concepts of aseptic technique and their relation to the surgical suite; proper use of instrumentation, sutures, needles, and surgical counts; all other techniques associated with the surgical technologist's role; and a review of anatomy and the various specialties.
- **Surgical Technologist, 3 of 3** Course STS0012 (344 hours) This course includes legal and ethical responsibilities; clinical application; and a continuation of the study of anatomy and specialty areas.
- **Note:** This program is unable to accommodate students who wish to participate in clinicals at sites other than those approved for use locally. Only day hours are available. Schedule will vary during clinical experience hours; see the instructor, or counselor, for more information.

Special Admission Requirements

A High School Diploma, or a GED, is required for this program. Other, specific health occupations admission guidelines (immunizations, drug screening, background check, etc.) are listed in this application packet. Students enrolled in the program must be 18 years of age at the time of graduation from the program.



Health Science Application Packet

Program Overview (2 of 2)
Surgical Technology

Surgical Technology Distance Education

Course curriculum is delivered online in a classroom setting with *limited* distance education offered off-campus. The program does not use a lecture-only format; demonstrations and occasional lectures supplement the online curriculum. This program has a distance learning option of one day a week, as determined by the instructor, for the first 234 hours (includes the *Basic Healthcare Worker* and the *Central Supply Assistant* theory portion). Once the *Central Supply Assistant* clinical is complete, the instructor may assign off-campus days during the remainder of the program. Distance education is NOT available to students receiving VA benefits.

Articulation Agreement(s)

• Pinellas County Schools Centers for Wellness and Medical Professions

Program Accreditation

Pinellas Technical College is accredited by the Council of Occupational Education (COE)

Industry Certification(s)

- After completion of course HSC003, and course STS0015, students are eligible to sit for the Certified Sterile Processing and Distribution Technician (CSPDT) exam
- After graduation, students are eligible to sit for the National Center for Competency Testing (NCCT) exam to become a Tech in Surgery Certified (TS-C).

Related Resources

 The National Board of Surgical Technology and Surgical Assisting (formerly known as the Liaison Council on Certification for the Surgical Technologist) – www.nbstsa.org