Surgical Procedure Log Book

Applicant’s Name: ________________________________
Directions for verifying surgical procedures in the Surgical Procedure Log book.

➢ Record the surgical procedures in which you have performed in the role of the first or second scrub or in the observation role (* definitions below).
  • Please note that the observation role does not count towards the 120 surgical procedures minimum requirement.

➢ Categorize each procedure by using a checkmark under one of the four listed headings. (Please see examples for each surgical specialty).

➢ Use Black Ballpoint pen.

➢ Use one line per procedure.

➢ Complete the date of procedure.

➢ Complete the Verification of Surgical Experience Form. Be sure to include the name and signature of your supervisor on the form as required.

*FIRST SCRUB ROLE
The AAD applicant surgical technologist shall perform the following duties during any given surgical procedure with proficiency. The following list is provided to identify the items that must be completed in order to document a case in the first scrub role. A surgical technologist not meeting the five criteria below cannot count the case in the first scrub role and the case must be documented in the second scrub role or observation role.

• Verify supplies and equipment needed for the surgical procedure.
• Set up the sterile field with instruments, supplies, equipment, medication(s) and solutions needed for the procedure.
• Perform counts with the circulator prior to the procedure and before the incision is closed.
• Pass instruments and supplies to the sterile surgical team members during the procedure.
• Maintain sterile technique as measured by recognized breaks in technique and demonstrate knowledge of how to correct with appropriate technique.
SECOND SCRUB ROLE
The second scrub role is defined as the surgical technologist who is at the sterile field who has not met all criteria for the first scrub role, but actively participates in the surgical procedure in its entirety by completing any of the following:

- Sponging
- Suctioning
- Cutting suture
- Holding retractors
- Manipulating endoscopic camera

OBSERVATION ROLE
The observation role is defined as the surgical technologist who is in the operating room performing roles that do not meet the criteria for the first or second scrub role. These observation cases are not to be included in the required case count, but must be documented by the program.
SURGICAL ROTATION CASE REQUIREMENTS

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<tr>
<th>Surgical Specialty</th>
<th>Total # of Cases Required</th>
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<th>Maximum # of Second Scrub Cases That Can be Applied Towards 120 Cases</th>
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¹ Diagnostic endoscopy cases may be applied toward the second scrub cases.
² 5 vaginal delivery cases may be applied toward the second scrub cases.
1. The total number of cases an AAD applicant must complete is 120 (minimum).

2. AAD applicants are required to complete 30 cases in General Surgery. Twenty of the cases must be in the First Scrub Role.

3. AAD applicants are required to complete 90 cases in various surgical specialties. Sixty of the cases must be in the First Scrub Role and evenly distributed between a minimum of 5 surgical specialties. However, 15 is the maximum number of cases that can be counted in any one surgical specialty.

4. The surgical technology program is required to verify through the surgical rotation documentation an AAD applicant’s progression in First and Second Scrubbing surgical procedures of increased complexity.

5. Diagnostic endoscopy cases and vaginal delivery cases are not mandatory. But up to 10 diagnostic endoscopic cases and 5 vaginal delivery cases can be counted towards maximum number of Second Scrub Role cases.

6. Included in the log book is a list of surgical procedures and the specialty which they are categorized under. The listing is not inclusive of all surgical procedures and is intended to provide guidance to the AAD applicant.

7. **Counting Cases**

   - Cases will be counted according to surgical specialty. Examples:
     - Trauma patient requires a splenectomy and repair of a LeFort I fracture. Two cases can be counted and documented since the splenectomy is general surgery specialty and repair of LeFort I is oral-maxillofacial surgical specialty.
     - Patient requires a breast biopsy followed by mastectomy. It is one pathology, breast cancer, and the specialty is general surgery; therefore it is counted and documented as one procedure – one case.
SURGICAL PROCEDURES
GENERAL

Content:
I. Appendectomy
   a. Open
   b. Laparoscopic

II. Breast procedures
    a. Breast biopsy
       1. Sentinel node biopsy
       2. Needle localization
    b. Modified radical mastectomy with axillary node dissection

III. Cholecystectomy
     a. Open
     b. Laparoscopic
     c. With cholangiogram

IV. Colon resection
    a. With colostomy
    b. Without colostomy

V. Gastrectomy
   a. With gastrostomy
   b. Without gastrostomy

VI. Hemmorhiodectomy

VII. Herniorrhaphy: Open and laparoscopic
     a. Incisional
     b. Inguinal
     c. Umbilical

VIII. Laparoscopic Nessen fundoplication

IX. Liver resection

X. Splenectomy
   a. Open
   b. Laparoscopic

XI. Thyroidectomy

XII. Pancreatoduodenectomy
     (Whipple Procedure)
SURGICAL PROCEDURES

OBSTETRIC & GYNECOLOGIC

Content:
I. Cervical
   a. Cervical biopsy
   b. Cervical cerclage (Shirodkar’s procedure)
   c. Dilation and curettage (D&C)
   d. Hysteroscopy

II. Uterine, ovarian, and fallopian tubes
   a. Uterine
      1. Cesarean section
      2. Endometrial ablation
      3. Hysterectomy
         a. Laparoscopic
         b. Robotic assisted
         c. Total abdominal
         d. Vaginal
      4. Myomectomy
      5. Uterine radiation seeding
   b. Ovarian
      1. Oophorectomy
   c. Fallopian tubes
      1. Ectopic pregnancy
      2. Salpingectomy
      3. Sterilization procedures
      4. Tuboplasty

III. External genitalia
   a. Labioplasty
   b. Perineal laceration
   c. Vulvectomy

IV. Vaginal
   a. Ablation of condylomata
   b. Marsupialization of Bartholin’s gland (cystectomy)

V. Pelvic
   a. Anterior and posterior repair (colporrhaphy)
   b. Diagnostic laparoscopy
   c. Total pelvic exenteration
   d. Wertheim procedure
SURGICAL PROCEDURES

GENITOURINARY

Content:

I. Kidney, ureter & bladder
   A. Kidney
      1. Nephrectomy
      2. Kidney transplant
      3. Wilm’s tumor excision (adrenalectomy)
   B. Ureter
      1. Ureteroscopy
      2. Ureteropyelithomy
   C. Bladder
      1. Cystoscopy
         a. TURBT
      2. Cystectomy with creation of ileal conduit
      3. Suspension (TVT/sling)

II. Prostate
    A. TURP
    B. Prostatectomy
       1. Laparoscopic with robot
       2. Suprapubic
    C. Prostate seeding

III. Penile
     A. Circumcision
     B. Epispadias repair
     C. Hypospadias repair
     D. Penile implant insertion
     E. Penectomy

IV. Testicular
    A. Hydrocelectomy
    B. Orchiopexy
    C. Orchiectomy
Surgical Procedures

Otorhinolaryngology

Content:

I. Ear
   A. Cochlear implant
   B. Mastoidectomy
   C. Myringotomy
   D. Stapedectomy
   E. Tympanoplasty

II. Nose
   A. Choanal atresia
   B. Endoscopic sinus surgery (FESS)
   C. Nasal antrostomy
   D. Nasal polypectomy
   E. Septoplasty
   F. Turbinectomy

III. Oral cavity and throat
   A. Laryngectomy
   B. Parotidectomy
   C. Radical neck dissection
      i. Glossectomy
      ii. Mandibulectomy
   D. Temporomandibular joint arthroplasty (TMJ)
   E. Tonsillectomy and adenoidectomy (T&A)
   F. Tracheotomy and tracheostomy
   G. Uvulopalatopharyngoplasty (UPPP)
SURGICAL PROCEDURES

ORTHOPEDIC

CONTENT:
I. Shoulder
   A. Acromioplasty
      1. Open
      2. Arthroscopic
   B. Arthroscopy
   C. Bankart procedure
      1. Open
      2. Arthroscopic
   D. Total arthroplasty

II. Radius
    A. ORIF
    B. External fixator

III. Hip
    A. Total arthroplasty
    B. ORIF

IV. Femur
    A. Femoral shaft fracture
       1. Rodding

V. Knee
    A. Arthroscopy
    B. Anterior cruciate ligament repair (ACL)
    C. Amputation
       1. Above-the-knee (A/K)
       2. Below-the-knee (B/K)
    D. Total arthroplasty

VI. Ankle and foot
    A. Achilles tendon repair
    B. Triple arthrodesis
    C. Bunionectomy
Surgical Procedures

Neurosurgery

Content:

I. Carpal tunnel release

II. Laminectomy
   A. Cervical
      1. Anterior
      2. Posterior
   B. Thoracic
   C. Lumbar
      1. Minimally invasive
      2. Spinal fixation

III. Craniotomy
   A. Aneurysm repair
   B. Cranioplasty
   C. Craniosynostosis repair

IV. Rhizotomy

V. Stereotactic procedures

VI. Transphenoidal hypophysectomy

VII. Ulnar nerve transposition

VIII. Ventriculoperitoneal shunt placement

IX. Ventriculoscopy
SURGICAL PROCEDURES

ORAL AND MAXILLOFACIAL

Content:
I. Maxillary and mandibular fractures
   A. ORIF
   B. Arch bar application

II. Cleft repair
    A. Lip
    B. Palate

III. Odontectomy
    A. Tooth extraction

IV. Maxillary fractures
    A. LeFort I
    B. LeFort II
    C. LeFort III

V. Frontal fractures
    A. ORIF orbital fracture
SURGICAL PROCEDURES

PLASTIC AND RECONSTRUCTIVE

Content:

I. Head and face
   A. Blepharoplasty
   B. Brow lift
   C. Cheiloplasty/palatoplasty
   D. Malar implants
   E. Mentoplasty
   F. Otoplasty
   G. Rhinoplasty
   H. Rhytidectomy

II. Breast
   A. Augmentation
   B. Mastopexy
   C. Mammoplasty
      1. Nipple reconstruction
      2. Transverse rectus abdominis musculocutaneous flap (TRAM)

III. Abdomen
   A. Abdominoplasty
   B. Suction lipectomy

IV. Superficial lesion/neoplasm

V. Skin grafts
   A. Full thickness skin graft (FTSG)
   B. Split thickness skin graft (STSG)
   C. Microvascular pedicle graft

VI. Scar revision

VII. Hand procedures
   A. Dupuytren’s contracture
   B. Traumatic injury repairs

VIII. Correction of congenital defects
   A. Radial dysplasia
   B. Release of polydactyly
   C. Release of syndactyly
SURGICAL PROCEDURES

OPHTHALMIC

Content:
I. Chalazion excision
II. Dacryocystorhinostomy
III. Entropion/ectropion repair
IV. Enucleation
V. Extracapsular cataract excision
VI. Iridectomy
VII. Keratoplasty
VIII. Laceration repairs
IX. Scleral buckle
X. Strabismus correction
   A. Recession and resection
XI. Vitrectomy
SURGICAL PROCEDURES

PERIPHERAL VASCULAR

Content:
I. Abdominal aortic aneurysm with graft insertion
II. Angioplasty
   1. Endograft placement
   2. Endostent insertion
III. Angioscopy
IV. AV shunts and bypass
   1. Aortofemoral bypass
   2. Arteriovenous fistula and shunt
   3. Femoropopliteal bypass
V. Carotid endarterectomy
VI. Embolectomy
VII. Vena cava device
VIII. Vein ligation and stripping
IX. Venous access device
SURGICAL PROCEDURES

CARDIOTHORACIC

CONTENT:
I. Thoracic
   A. Bronchoscopy
   B. Mediastinoscopy
      1. Lymph node biopsy
   C. Thoracoscopy
      1. Video assisted thoracoscopy
D. Thoracotomy
   1. Lobectomy
   2. Pneumonectomy
   3. Decortication of the lung
   4. Lung transplant
   5. Pectus excavatum repair
   6. Pulmonary embolectomy
E. Cardiothoracic
   1. Aortic/mitral valve replacement
   2. Atrial/ventricular septal defect repair
   3. Cardiac
      1. Closure of patent ductus arteriosus
      2. Coronary artery bypass graft (CABG)
         a. Intra-aortic balloon pump
         b. Minimally invasive direct – CABG (MID-CABG)
         c. Off pump CABG
         d. Ventricular assistive device (VAD) insertion
      3. Heart transplant
      4. Repair of coarctation of the aorta
      5. Tetralogy of Fallot repair
      6. Ventricular aneurysm repair
VERIFICATION OF SURGICAL EXPERIENCE

The following signature must be obtained to verify the first scrub or second scrub role experience as documented in the accompanying Surgical Procedure Log Book as stipulated by the Core Curriculum for Surgical Technology, 6th edition.

I, _____________________________________________ verify that

(Supervisor’s name)

______________________________________________ has completed

(Applicant’s name)

at least 120 surgical procedures with (a minimum of) 80 in the First Scrub role and 40 in the Second Scrub role as stipulated and documented in the Surgical Procedure Log Book.

Operating Room Supervisor's Signature ____________________________

Date __________________

Name and address of Facility _____________________________________________

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

Telephone: ___________________________________________________________

E-mail: _______________________________________________________________
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---NEIT Surgical Technology Procedure Log---

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