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SURGICAL TECHNOLOGIST

OFFICIAL JOURNAL OF THE ASSOCIATION OF SURGICAL TECHNOLOGISTS, INC.

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Managing
Sharps Injuries
in the Operating Room

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Preventing and Managing Sharps Injuries in the Operating Room

ANGELA ENOCHSON, CARLY SCHILLING

Sharps injuries not only result in high costs to the healthcare system, but also significant emotional costs to affected personnel. The Centers for Disease Control and Prevention (CDC) reports an estimated 385,000 sharps injuries in healthcare settings each year. However, at least half of these injuries go unreported. By understanding and following appropriate safety practices and protocols, surgical technologists can minimize their risk of sharps injury in the operating room.

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Connect with AST on LinkedIn and start growing your professional network!

We Need You: *Why You Should Run for Office*

JESSICA ELLIOTT, CST, RN, FAST, AST SECRETARY

BOARD MESSAGE

As another national conference approaches, so does another opportunity to run for AST leadership. Let me tell you the words I wish someone had said to me much earlier in my surgical technology career: **You should run for office.** For several years, I was active with my state assembly and on a national standing committee, denying even to myself what was in my heart — that I wanted to run for national office someday. It took me years to summon up the courage to do so. Like so many, I didn't think I had enough experience, or just didn't know enough. Surely, I wasn't qualified to run for AST national board! Thankfully, I was wrong!

I won't lie and say it is easy though. It takes courage to put yourself out there and run for election for a volunteer position on a board that serves all 50 states. In doing so, you open yourself up to scrutiny and pressure. Members will challenge you to take a stand on issues you may not have otherwise considered. However, simply starting a conversation, presenting new ideas, challenging the status quo, or asking powerful questions can often have an impact for the organization, regardless of the outcome of an election.

You are the difference makers for our organization. The membership of AST needs you to run for office. Your experiences are unique; your perspective is a strength, and your voice matters. With the knowledge you have in your profession, and the difference that you can make, there's no reason why you shouldn't consider running for office.

Although there are others to consider, here are a few reasons why you should run for office:

1. Consider the elected offices.

- The Board of Directors of the Association of Surgical Technologists is composed of the president, vice president, secretary, treasurer, and seven directors, all of whom are elected by the membership at the

annual national conference. The president, vice president and treasurer plus three directors are elected in odd-numbered years; the secretary and four directors are elected in even-numbered years.

- In some elected positions, candidates often run unopposed. This means your organization needs more leaders to step up and give the membership a choice.

2. You know your concerns.

- Whether you are practitioner or an educator, you know the issues that matter to surgical technologists. You know the struggles the profession is having and where the opportunities are for improvement.
- When you're involved in your organization, you know better what and who you need to involve in order to get things done.

3. Think volunteering and mentoring.

- Those serving our state assemblies and our national standing committees have been both mentors and mentees providing experience and innovative ideas. They have seen the impact ongoing policies and practices have on the surgical technology profession.
- As surgical professionals, you see the impact we make every day for our patients. You get to interact daily with the people who benefit from the work you are doing.

Whether you are already a declared candidate or are preparing to run from the floor, hats off to you! In a day and age where time and generosity are precious commodities, it is important to acknowledge those who agree to volunteer for these positions and who take time from their busy lives to strengthen the profession.

We need you. We need your expertise. Our members need your willingness to serve. AST needs your passion and your purpose to represent the membership, to be a voice.



AST EDUCATORS CONFERENCE

Save The Date!

Orlando –
February 16-17, 2024,
with the
Leadership Symposium
February 15



Registration opening fall 2023.
Stay tuned for more information!

APPLY FOR FAST

Interested in being considered for the highest honor of the profession? This prestigious honor began in 2006 as an opportunity to recognize those individuals who have upheld the highest professional, ethical and moral standards and traditions of the surgical technology profession, and whose professional activity has been devoted to the advancement of the profession toward improving the quality of surgical patient care.



Applications are available online and all applications are due by April 15.

Before You Apply: Make sure to thoroughly read the selection criteria and gather all documents and information that are needed to complete the application prior to starting. Please plan ahead and allow for enough time to complete the application. If you close out of your window or browser before hitting submit, you will lose any details you have entered. Once you click submit, it will be submitted to the FAST Selection Panel. All required information must be completed before you are allowed to submit.

Selection Criteria: To see if you meet the criteria to apply to become a FAST, visit www.ast.org – Members – Fellows of FAST – and click on the link selection criteria.

To apply for FAST, visit www.ast.org – Members – Fellows of FAST. You will need to use your login information to sign into your AST account. Then look for FAST and click on the application.

CONTINUING EDUCATION RESOURCES

EARNING CE

The vast majority of all CE credits processed by AST for CSTs for CSFAs are earned through one or more of the ways listed below. **None of these are subject to a processing fee.**

- AST Distance CE (journal tests or CE packages)
- Hospital in-services
- Live lectures at AST state assemblies, national conference and others, such as ACS Congress
- College Courses
- Healthcare Manufacturer's Events. AST accepts CE credits that are offered at in-person events that have been planned and are sponsored and advertised by healthcare manufacturers - referred to as commercial interest organizations (CIO). However, in order for the CE credits to be accepted by AST, the in-person program must be approved by AST and the program must be relevant to the practice of surgical technology or surgical first assisting. In-person events are stand-alone events, such as forums or hands-on workshops that are the sole responsibility of the CIO to plan and market as well as offer the CE credits, and are held at the location of the CIO's choice.

CE CREDIT FEES

These only apply to a very small percentage of credits earned through commercial providers due to the increased time and resources required to research and assess CE credits earned through those providers, particularly those CE credits offered by commercial businesses that contract with healthcare facilities, and now live events. There are no refunds given for AST online CE tests or CE credit packages.

Number of CE Credits	Processing Fee
* 1- 10	\$15
*11-20	\$30
*21-30	\$45
*31-40	\$60
*41-50	\$75
*51+	\$90

Members: See above for any additional fee for processing CE credits excluding AST tests.

Nonmembers: Nonmembers may be subject to a processing fee at the time of submission.

Money orders, personal checks, institutional checks, Visa, MasterCard and American Express are accepted. Checks payable to AST.

QUALIFYING CE CREDITS CHECKLIST

- ✓ Are all CE your credits earned while an AST member?
- ✓ Are all CE credits earned within your current certification cycle established by the NBSTSA?
- ✓ Are all your CE credits relevant to the medical-surgical practice of surgical technology and surgical assisting?
- ✓ Have you submitted a CE Reporting Form? CE credits will be returned without a CE Reporting Form.
- ✓ Did you list each educational activity on the CE Reporting Form?
- ✓ Did you submit proper documentation for each education activity listed on the CE Reporting Form? Keep originals of documentation and submit copies.
- ✓ Is any applicable fee enclosed?

3 WAYS TO SUBMIT YOUR CE CREDITS

- Mail to: AST, 6 West Dry Creek Circle, Ste 200, Littleton, CO 80120-8031
- Fax CE credits to: 303-694-9169 Do not mail credits that were previously faxed.
- Email scanned CE credits in PDF format to AST Member Services. Do not mail credits that were previously emailed.

WAYS TO EARN CE

State Assembly Meetings

State assemblies provide CE during meetings, as well as serving as the grassroots organization in regard to state legislative efforts. Announcements of state assembly meetings are published in *The Surgical Technologist*, on the states' websites, and the AST site, www.ast.org, under the State

Assembly tab. State assemblies also contact state members of upcoming meetings through email and mailings.

Submitting State Assembly CE Credits

- All state assemblies are required to complete the AST CE program approval prior to the date(s) of the meeting for the CE credits to be approved. The participant should verify that the meeting has been AST approved.
- The state assembly is required to provide a certificate of attendance to the participants even if "auto recorded."
- Member: Submit a copy of the certificate to AST for processing. The AST CE Reporting Form is not required to be submitted.
- Nonmember: Submit a copy of the certificate of attendance with the AST CE Reporting Form and \$400 non-member processing fee.

College Courses

College courses that are relevant to the medical-surgical practice of surgical technology or surgical first assisting can be submitted to AST for CE credits.

- College courses MUST be completed with a minimum grade of "C."
- The courses MUST be completed at an institution that is accredited by an organization recognized by the US Department of Education.
- Surgical first assistant college courses submitted for CE credits MUST be completed at a CAAHEP-accredited surgical first assistant program.
- General nursing and physician assistant college courses that are not specifically related to the medical-surgical practice of surgical technology or surgical first assisting will not be accepted for CE credits.
- Anatomy & physiology, microbiology, pathophysiology, and pharmacology must be advanced level college courses.

Determining the Number of CE Credits:

- College courses are awarded five CE credits for each semester hour completed. For example, a three-college-credit semester course: $3 \times 5 = 15$ CE credits.

Submitting College Courses for CE Credits

- Member and Nonmember: Submit an unofficial college transcript from the institution where the courses were completed with the AST CE Reporting Form – no exceptions.
- Nonmember: Include the \$400 nonmember processing fee.

Recommendation

- Provide a copy of the course descriptions from the

current edition of the college catalog with the AST CE Reporting Form and transcript(s).

- The descriptions assist in determining the relevancy of the course(s) to the medical surgical practice of surgical technology or surgical first assisting.

Healthcare Facility Sponsored In-Services

Healthcare facility sponsored in-services can be submitted to AST for CE credits as long as they are relevant to the medical-surgical practice of surgical technology or surgical first assisting. Employers are NOT required to submit healthcare facility in-services to AST for approval.

- AST accepts annual mandatory CE in-services relevant to the medical-surgical practice of surgical technology or surgical first assisting. For example, fire safety.
- Healthcare facility orientation is NOT accepted for CE credits.
- If the employer sponsors or provides funds for an employee(s) to attend a conference, forum, seminar, symposium, or workshop, or complete any other type of CE activity sponsored by an organization other than the healthcare facility, the program MUST be AST approved for the CE credits to count toward certification renewal.
- BLS, ACLS, and PALS are accepted for CE credits. Every 50-60 minutes of activity = 1 CE credit.
 - BLS includes CPR and automated external defibrillator (AED) training.
- CE credits are NOT awarded for on-the-job training, healthcare facility orientation, or work experience that the CST and CSFA completed as an employee of the healthcare facility providing the training.
 - Example: A CST is completing on-the-job training in learning the first scrub role to be a member of the healthcare facility's cardiovascular team. This training is distinct from attending healthcare facility sponsored in-services as described above.

Submitting In-Service CE Credits

- A healthcare facility certificate of attendance, official healthcare facility transcript, or sign-in sheet with an authorized signature (for example, a surgery department supervisor, clinical educator, or other individual authorized by the employer).
- The documentation must also include the name of the healthcare facility, indicate it is an in-service, title of in-service, date of in-service, number of CE credits,

and signature of the CST or CSFA attendee. The documentation must be submitted with the AST CE Reporting Form.

CALL FOR SPEAKERS

Interested in giving a clinical presentation or know someone who would? AST is actively accepting applications to present in webinars or at our national events. Interested? Complete our speaker package by visiting our website - ast.org - Educators - Speaker Application.



WRITE FOR US CALLING ALL WRITERS!



We are always looking for new CE authors and surgical procedures that detail the latest advancements in the surgical arena. We'll also help you every step of the way, AND you'll earn CE credits by writing a CE article that gets published! Here are some guidelines to kick start your way on becoming an author:

- An article submitted for CE must have a unique thesis or angle and be relevant to the surgical technology profession.
- The article must have a clear message and be accurate, thorough, and concise.
- It must be in a format that maintains the Journal's integrity of style.
- It must be an original topic (one that hasn't been published in the Journal recently).

Ready to get started? Email us at communications@ast.org.

MEMBER BENEFITS

Being a member of AST really does have its benefits! Not only are you part of the largest organization that is focusing on surgical technologists, but

- Automatic transfer of CE credits to the National Board of Surgical Technology and Surgical Assisting (NBSTSA).
- Automatic recording of CE credits earned through AST online offerings and earned at AST events such as the national conference.
- Submittal of CE credits at any time during your membership so you don't lose the valuable certificates of completion/attendance.
- Maintenance of your CE credit certificates for 5 years.
- Annual CE credit letter – a tally of how many credits you earned throughout the year.
- Low membership fee. AST has kept the low fee a priority while other associations have raised its membership fees.
- Cost savings when registering for AST events, such as the national conference and Educators Event.
- State-specific legislative efforts driven by AST National to further along the profession.
- Legislative updates and support for your state.
- Access to the Map of State Laws.
- Discounted CE opportunities that are offered by AST, including CE Credit Packages.
- Having a say when it comes to your state's assembly board. Active members get to vote for their state assembly Board of Directors.
- Communications including *The Surgical Technologist*, monthly e-newsletters, AST social media sites, including special professional groups on LinkedIn, Facebook and more.
- Leadership opportunities to serve on state assembly and national boards as well as state and national committees.
- Scholarship opportunities for students, educators and CSTs.
- The AST Career Center, where you can post your resume and obtain information on job openings.

DISCOUNTS

MEMBER-GET-A-MEMBER

Earn two or more months of FREE membership with the Member-Get-A-Member program. Recruit colleagues and

AST will extend your membership by the appropriate number of months. Here's how:

- Recruit a valid new member at the one-year membership rate of \$80.
- Make sure that each person you recruit provides AST with your name and your AST member number when filling out their application.
- After AST receives the recruited member's application, we will extend your membership by two months for each person you recruit.
- Recruit two members at the \$80-level, and we'll extend your membership by four months! The more people you recruit, the longer your membership gets extended.

Bonus membership months are not applicable to members who recruit themselves, students or retired/disabled members. No substitutions will be permitted. Your membership must be current to receive the bonus months. Potential members MUST supply your name and your AST member number in order for you to receive bonus membership months. If a person's membership has lapsed for more than a year, they are considered a new member.

Reach out to our Member Services team at 1-800-637-7433 for more information.

MILESTONES



Congratulations to the following state assemblies as they celebrate anniversaries this month! AST appreciates your hard work, dedication and all your years of service for making our state assemblies the backbone of this organization.

- Connecticut – 23 years
- Montana – 19 years
- North Dakota – 8 years

Students: Paving the Way

BRITTANY TOOTH, CST

STATE ASSEMBLY



As a profession, we hear over and over again how we need to invest in our state, in our education, and in ourselves. But who is investing in the future? Who is looking out at those surgical technology programs and aiding our future professionals? Often I believe we are

so wrapped up in what we thought we should have known when starting the profession that we forget to share what we do know so that those after us can hit the ground running in a profession that we all have a burning passion for.

From the operating room to our state assembly meetings, there is a multitude of avenues to support our student body and make a lasting impact. During our time with the students in the operating room, it is important to remember what it was like to walk into a room where everything is blue, and we can't touch it. Remember what it was like the first time you scrubbed for a real case and what you wish you knew. Often it isn't until we are in the operating room for the first time that all of that course work on which we spent so much time starts to make sense. Now remember how hard it was to learn when the person you were with only wanted you to stand still and do nothing. We have to share what we know in order to grow the professionals we want to see and work with.

As state assemblies, we have meetings every year. During these meetings, how many times are you hosting something specifically for your student assembly members that helps them where they are at in that moment while also engaging them in your state assembly? Provide a hands-on session to build confidence for their clinicals, expose them to specialty instrument sets or equipment that they may not get to see in the classroom, hold a scrub

This is your opportunity to be the change that you want to see in our profession. What you do now could impact not just one life but possibly an entire class ...

bowl competition to prepare them for their national certification exam, or just simply provide a platform where they can ask questions to those experienced professionals that could help them thrive in their education and career. State assembly workshops and business meetings provide a unique opportunity for students to make connections that could last a lifetime.

BB King once said, "Education is the most powerful weapon you can use to change the world." Our students are the future of our profession and leadership in our association. We need to take the time to focus on how to support their learning journey as it will benefit everyone on every level. Not only is it important to mentor our students for the safety of our patients, but we also need to invest in them as the future leaders of our state assemblies and the national association. We can all look back and wish we had known something at the beginning, maybe that was a better preceptor in the operating room or a board member from a state association. This is your opportunity to be the change that you want to see in our profession. What you do now could impact not just one life but possibly an entire class who will one day be out there, just like you, protecting our patients and spreading their knowledge into the future. Be the change - invest in your student body!

Connect to Opportunity

The LinkedIn logo is centered in a white rounded rectangle. It consists of the word "LinkedIn" in a blue sans-serif font, with the "in" part enclosed in a blue square. A registered trademark symbol (®) is located to the right of the square.

LinkedIn®

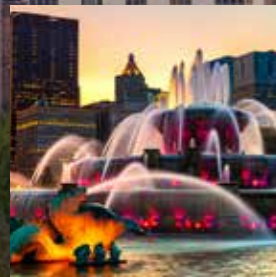
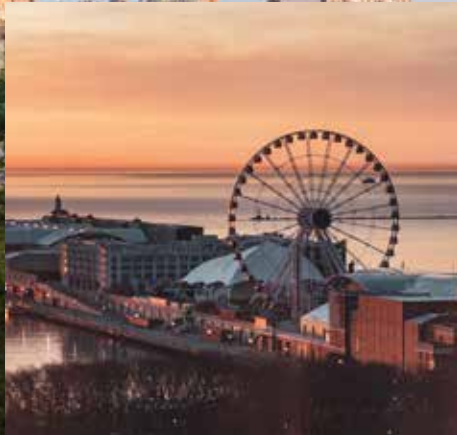


Build your professional presence and connect to AST.

CHICAGO

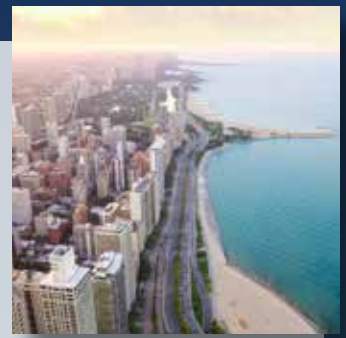
AST SURGICAL TECHNOLOGY CONFERENCE

MAY 25-27, 2023



CONFERENCE AGENDA

Register Now! www.ast.org



May 25, 2023

8:00 AM-9:45 AM	Opening Ceremony & Keynote Speaker (1CE)
10:15-10:50 AM	Business Session 1
11:00-11:50 AM	Digital Technology in Craniofacial Rehabilitation (1CE)
	Update on Corneal Transplantation (1CE)
12:00 PM-12:50 PM	Advancements in the Surgical Management of Uterine Fibroids (1CE)
	So, You Have an Idea for a New Surgical Medical Device? (1CE)
1:00 PM-1:50 PM	Advances and Outcomes of Robotic Assisted Total Knee Replacement (1CE)
	Medical Laser Safety (1CE)
2:00-5:00 PM	Exhibits
7:00-9:30 PM	Opening Night Party

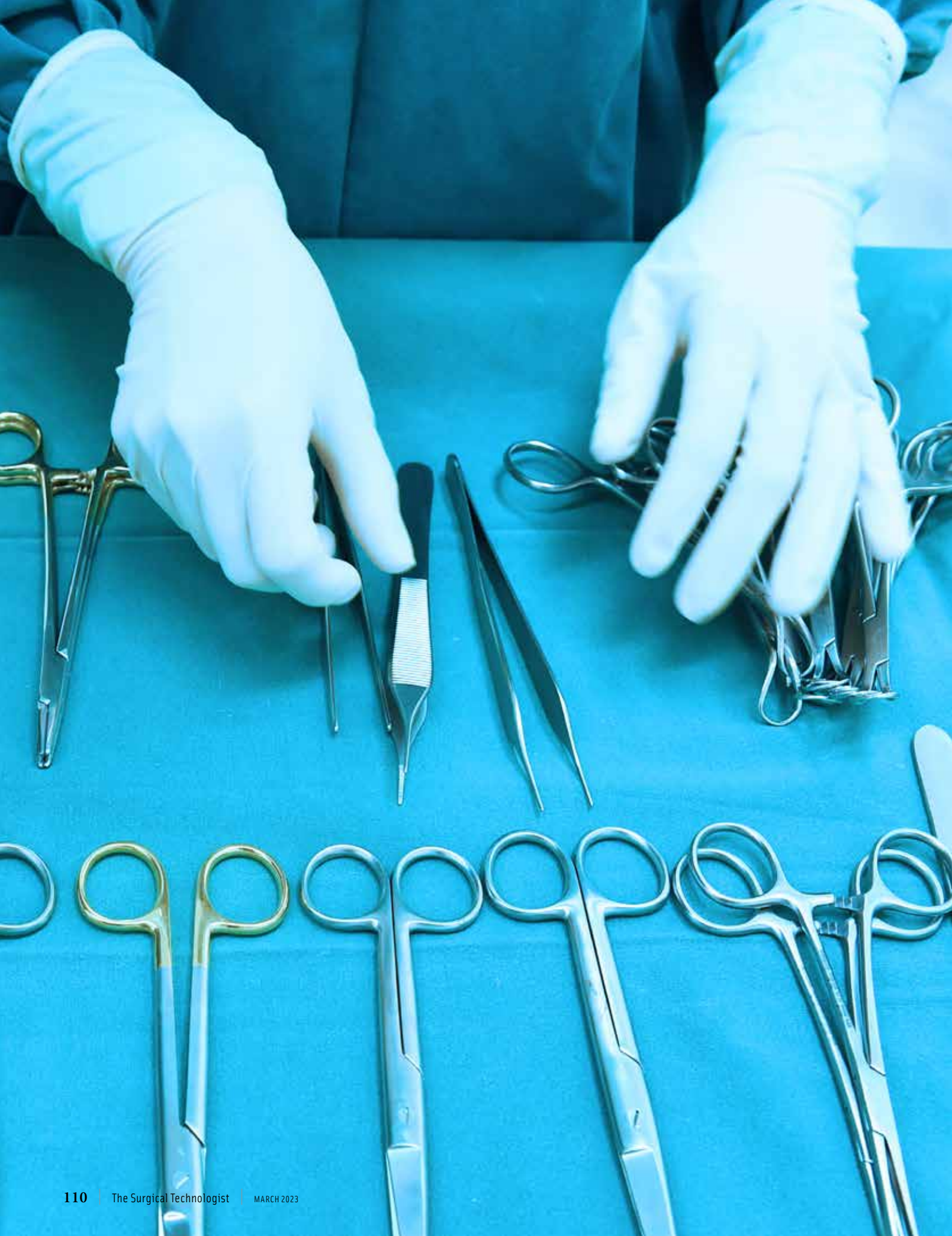
May 26, 2023

8:00 AM-12:00 PM	ASTSA Student Forum
8:00 AM-9:00 AM	Candidates Forum
9:00 AM-12:00 PM	Exhibits
12:00 PM-12:50 PM	Sialendoscopy - A Paradigm Shift in the Management of Salivary Gland Disease (1CE)
1:00 PM-5:00 PM	State Assembly Leadership Forum (4CE)
1:00 PM-1:50 PM	Advances in Congenital Cardiac Surgery (1CE)
2:00 PM-2:50 PM	Cardiac Xenotransplantation: Where Are We? (1CE)
3:00 PM-3:50 PM	TBA (1CE)
4:00 PM-4:50 PM	Legislative Updates (1CE)

May 27, 2023

10:00 AM-10:50 AM	Advances in Minimally Invasive Transanal Surgery (1CE)
	Updates in Reconstructive Ankle and Foot Surgery (1CE)
11:00 AM-11:50 AM	Lung Transplantation in COVID 19 for ARDS Lung Damage (1CE)
	Vascular Surgery (1CE)
12:00 PM-12:50 PM	Assisting in Challenging OB/GYN Cases (1CE)
	The Team: Building a Surgical Team for Complex Endovascular and Hybrid Procedures (1CE)
1:00 PM-1:50 PM	Adult Pectus Excavatum and Treatment Options (1CE)
	Updates on Treating Cerebrovascular Complications (1CE)
2:00 PM-2:50 PM	Updates on Surgical Treatments of Shoulder Injuries (1CE)
	Evolving Landscape of Healthcare - Redefining the Role of Healthcare Providers (1CE)
5:00 PM-6:30 PM	Closing Night Reception





Preventing and Managing Sharps Injuries in the Operating Room

ANGELA ENOCHSON, CARLY SCHILLING

In healthcare settings, sharps are any devices or equipment with sharp points or edges that can cause percutaneous injury by puncturing an individual's skin. In the operating room (OR), exposure to blood and other potentially infectious bodily fluids from contaminated sharps injuries represent an ever-present occupational health risk to surgical team members.

Sharps injuries not only result in high costs to the healthcare system, but also significant emotional costs to affected personnel. Fortunately, most of these injuries are preventable by using safer medical devices. For example, the Bone Mill+™ with automated tissue removal is an innovative device surgical technologists can use to help mitigate the risk of sharps exposure when performing the injury-prone task of bone cleaning and milling during autologous bone harvesting procedures.¹ By understanding and following appropriate safety practices and protocols, surgical technologists can minimize their risk of sharps injury in the operating room.

BACKGROUND

While the introduction of universal guidelines more than 30 years ago decreased the rate of injuries associated with sharps, they continue to occur.² The Centers for Disease Control and Prevention (CDC) reports an estimated 385,000 sharps injuries in healthcare settings each year. However, at least half of these injuries go unreported.³ The Exposure

LEARNING OBJECTIVES

- ▲ Understand the risk of occurrence and associated health risks of sharps injuries
- ▲ Recognize the barriers to adhering to safety practices
- ▲ Describe the factors present in the OR that may increase the risk of sharps injury
- ▲ Discuss prevention strategies to enhance sharps safety in the OR
- ▲ Describe how to manage a sharps injury

Prevention Information Network (EPINet) Report for Needlestick and Sharp Object Injuries for 2021 indicates that OR environments account for 37.4% of all sharps injuries, making it the highest area of risk in a hospital.⁴ Surveillance data from the state of Massachusetts found that surgical technologists sustain 25% of the sharps injuries in the OR, second only to physicians. These incidents mostly occurred during handling or passing equipment, cleanup, collisions with other colleagues, or were due to improper sharps disposal or procedure methods. Three out of four of the percutaneous injuries resulted from procedures involving suturing, cutting, and medicine administration. Of those injuries from devices used for cutting procedures, 85% were from scalpels; the remainder involved Bovie's, scissors, trocars, and other sharp devices.⁵

Most of these injuries result only in temporary pain and discomfort; however, they can potentially cause lifelong illness and disability. Bloodborne pathogens are microorganisms present in human blood or other potentially infectious material (OPIM) that can cause disease in humans. The transmission of bloodborne pathogens, including – but not limited to – hepatitis B virus (HBV), hepatitis C virus (HCV), and human immunodeficiency

Surgical teams may be resistant to changing their established routines and practices, making it difficult to implement new safety guidelines.

virus (HIV), from needlestick and other contaminated sharps injuries is a serious and ongoing concern, particularly with the increase in multi-drug resistant organisms.⁶ One study of general surgery patients in an urban academic hospital found that 38% of all procedures involved exposure to HBV, HCV, and/or HIV.⁷ Scalpel blade injuries are typically more dramatic than needlestick injuries, with the severity of injury bringing with it extra challenges.⁸

The cost of post-exposure management and treatment of a sharps injury varies and is estimated to range from \$71 to \$5,000 depending on potential pathogenic exposure.^{9,10} The direct and indirect costs borne by a healthcare facility may include:¹¹

- Initial and follow-up laboratory testing and treatment
- Post-exposure prophylaxis or vaccine
- Workers' compensation and rehabilitation
- Time spent reporting the injury
- Time and wages diverted to receiving and providing exposure-related care
- Lost productivity

There are also the emotional and psychological costs to the individual to consider, including the fear and anxiety stemming from the injury itself and the potential transmission of a serious disease.^{12,13}

BARRIERS TO SAFETY

There is legislation that mandates hospitals to provide safety devices and sharps injury prevention programs to minimize the risk of percutaneous injuries and requires healthcare workers to use safety-engineered sharps devices.¹⁴ However, regulations have not been universally effective in changing sharps injury prevention behavior in the surgical setting.¹⁵

Despite the evidence of potential harm and safety laws, many healthcare professionals, including surgical teams, continue to exhibit poor compliance with sharps injury mitigation strategies. Recent data from the International Safety Center indicates that less than 37% of healthcare personnel who sustained a sharps injury were using a device with a safety feature. Of those who did use a device with a safety feature, two-thirds had not activated the feature.¹⁶

There are several barriers that need to be addressed to successfully change behaviors and encourage consistent adherence to safety protocols to prevent sharps injuries – underreporting is one. Effective incident management requires accurate and timely reporting to understand current environments. Only some states require licensed healthcare facilities to report injuries to the state and more than half of sharps injuries are not reported. The considerable underreporting of sharps injuries in the OR is problematic to understanding the scope of the issue and increasing awareness. Fear of retaliation and the time and inconvenience stemming from reporting contribute to this problem.¹⁷

Resistance to change is another significant barrier. Surgical teams may be resistant to changing their established routines and practices, making it difficult to implement new safety guidelines. For example, some surgical team members resist double gloving because it is uncomfortable, or their tactile sensation is reduced.¹⁸ Surgeons may be reluctant to adopt the use of safety scalpels because they are not comfortable using them, feel they obstruct their vision of inci-

sion, or require an additional step.⁸

Misperception of risk also is an impediment to adopting safety measures. Members of the surgical team may have a false sense of security, assuming an injury will not happen “this time.” One survey found that despite two decades of ongoing education, staff still underestimated the risk of bloodborne pathogen transmission.¹⁹ A survey of surgeons found that most underestimate the risk of bloodborne pathogens and do not routinely use double gloves.²⁰

FACTORS THAT INCREASE THE RISK OF SHARPS INJURIES

The OR is a high-risk environment for percutaneous injuries and bloodborne pathogen exposure. The degree of risk to personnel is directly related to numerous factors inherent to perioperative work. During surgical procedures, surgeons, surgical technologists, RNs, and anesthesia personnel are exposed to large amounts of blood, bodily fluids, and tissue while working in close proximity and performing complex tasks, often over long periods and under intense time-pressure.^{5,21}

The routine handling of sharp instruments and devices further increases the chances of a percutaneous injury. Surgical technologists and other team members handle a variety of sharps devices and objects – such as rongeurs, scissors, scalpels, hypodermic needles, surgical curettes, and sharp pieces of bone.²² One example is manually cleaning bone for autologous bone grafts. In a study that compared the traditional manual process to an automated method during these procedures, half of the participants were observed to experience one or more glove punctures during manual bone cleaning. Notably, one-third of the study participants reported a previous sharps injury while cleaning bone.¹

According to the International Sharps Injury Prevention Society (ISIPS), “fatigue, rushing, inaccurately anticipating a surgeon’s movement or an unintended mishap passing instruments back and forth are the most common causes for many sharps injuries.”⁸

Additional factors that may contribute to an increased risk of sharps injuries include:

- **Distractions:** Events that cause distractions and disruptions during surgical procedures typically occur 11 to 12 times per hour.^{23,24} Equipment alarms, conversations, music, and door openings are all frequent distractions that can lead to a sharp injury by interfering with communications and concentration on critical tasks.²⁵⁻²⁷

- **Understaffing:** As of January 2022, 19-21% of hospitals in the U.S. reported critical staff shortages, with some states reporting as high as 52% of hospitals with critical staff shortages.²⁸ Understaffing during surgical procedures may be a contributor to sharps injury risk. Inadequate staffing puts additional stress and pressure on the surgical team and can lead to exhaustion and burnout, all of which can jeopardize worker safety in the OR.²⁹⁻³¹
- **Inexperience:** Hospitals are currently facing reduced availability of experienced and qualified skilled staff due to worker shortages and increased turnover. To meet the shortfall, organizations are onboarding more new and inexperienced healthcare workers. In the OR, this can create an imbalance of experienced versus inexperienced team members, which may introduce distractions and decrease overall adherence to safety protocols.³²

To get a first-hand account of the current challenges surgical technologists face in the OR, refer to the interview on page 114.

SAFETY PRACTICES TO PREVENT PERCUTANEOUS INJURIES IN THE OR

Surgical technologists can employ the following safety practices and techniques to minimize the risk of sharps injury and exposure to bloodborne pathogens in the OR:

Environment and OR setup

Maintain a Neutral Zone: The Neutral Zone is a designated area where sharp devices are placed and retrieved. Eliminating hand-to-hand transfer of sharps is a reliable way to reduce percutaneous injury and blood exposure.³³ Evidence has shown that approximately 50% of scalpel injuries can be prevented by using a hands-free passing technique.³⁴ A neutral zone area can be designated on the Mayo stand or as a tray used to pass a sharp device to and from the surgeon.

Use safety-engineered devices or safer alternatives: The CDC estimates between 62 and 88% of sharps injuries can be prevented by using safer medical devices.⁶ The requirement to provide and use devices with sharps injury prevention features is part of the OSHA blood-borne pathogen standard for health-care employers.³⁹ Whenever possible,

UNDERSTANDING THE CHALLENGES IN TODAY'S OR: AN INTERVIEW WITH A CERTIFIED SURGICAL TECHNOLOGIST

Tazmya, a CST in the operating room of a trauma center at a leading academic teaching hospital in the Mid-Atlantic region, shares some of the challenges she experiences working in today's healthcare environment and with preparing autologous bone during orthopedic surgeries.

Q: Tazmya, can you share your clinical experience working as a certified surgical technologist?

Tazmya: Sure! I have been part of the trauma surgical team for 26 years. The cases we see are mostly open blunt trauma and polytrauma injuries. For the past three years, I've been the clinical implant coordinator for the OR, which involves managing and securing medical implants and related instrumentation needed for surgical procedures.

Q: In recent years, what changes have you experienced that have impacted your job?

Tazmya: The two biggest challenges that have affected my job are staffing and supply bottlenecks.

Q: Is the staffing challenge you mention related to a shortage of skilled staff in the OR?

Tazmya: Definitely. In general, there's a dire need for more surgical techs and nurses in the hospitals in the region. In the last few years – particularly since the beginning of the COVID-19 pandemic – turnover has increased significantly. As an academic trauma center, it can be difficult to retain skilled staff. We train them fresh out of nursing or tech school, and after two years of experience, many venture out to earn premium pay at an agency or find a better work-life balance working in a non-emergent setting.

Q: How has the increased turnover affected the surgical team?

Tazmya: There is a level of frustration that stems from devoting the time and energy to train new staff just to have them leave after a relatively short period, so that's one thing. Plus, the turnover makes it difficult to be consistent with staffing the unit fully. To maintain the staffing needed to continue running the operating rooms, we've had to turn to agency staff, which now outnumber full-time employees. The emergent cases that present in a trauma center OR are varied and complex, requiring quick and outside-the-box thinking. Surgical techs who are more accustomed to elective procedures on relatively healthy patients sometimes struggle in this type of environment.

Q: How crucial is time management and efficiency for the surgical team, particularly in the face of staffing shortages?

Tazmya: Time management and efficiency are very crucial. We have multidisciplinary units working in collaboration to achieve the primary goal of delivering patient-centered care.

As a surgical tech, if supplies are backordered, there is a shortage of support staff, or central sterile processing (CSP) is not available to ensure the instruments are sterilized, I hit a roadblock. We don't want to cancel life-saving procedures, which means troubleshooting, getting on the phone, and taking the time to track down the needed resources. I'm pretty much on the go trying to work it all out as best I can with the allotted amount of time I have.

Q: With the abundance of new staff and training needs present in today's fast-paced OR environment, where time and safety are imperative, would you say it's advantageous to automate processes where feasible?

Tazmya: Oh, absolutely! However, it's important to avoid complete dependence on automation – there needs to be back-up systems and safety checks put into place.

Q: Shifting gears to orthopedic surgeries, specifically handling autologous bone for grafting procedures, can you speak to the surgical technologist's role in prepping autografts for transplantation?

Tazmya: So, autologous bone is bone harvested from the patient to repair or replace other bone tissue in their body. Spine procedures often require the removal of lamina bone, from which the scrub tech must scrape off the cancellous tissue to be milled down to an appropriate size for transplanting. Numerous instruments in the spine set can be used to pry off that good bone tissue, such as rongeurs, curettes and scissors. Sometimes the surgeon does other things with the patient, and the scrub tech has time to multitask and put all the cleaned bone into the bone mill. Back in the day, we'd have to mince up the bone with a rongeur manually – automated bone milling is much more efficient.

Q: What if you could automate the bone cleaning process much like the milling process?

Tazmya: That would be great. Many scrub techs have trouble differentiating between soft tissue and bone when it's mixed together, and they're trying to feel it while wearing two pairs of medical gloves. Because some parts of the bone are thinner than others, the tech has to second guess what is bone and what is not. Personally, I'd love to see a device that could automatically separate the soft tissue from the good bone that needs to be transplanted back to the patient.

Q: From your perspective, what are some of the pros and cons of manual cleaning and milling versus automated cleaning and milling autologous bone?

Tazmya: There are a couple of issues with manually cleaning and milling crunching bone. For one thing, blood causes the bone to become slippery. When that happens, the surgical tech is trying to hold this piece of bone with their non-dominant hand while using their dominant hand to gently pull apart the soft tissue. They usually use a poker or clamp to grip the bone as they try to scrape off the tissue with something sharp, like a periosteal knife blade. It gets tricky when the tech is doing this work on their Mayo stand or the back table while listening out for the surgeon for instructions to pass an instrument, which can distract the tech. If the tech can instead use an automated method, they can just put the bone into the grinder and continue to focus on assisting the surgical team.

Q: What are some safety concerns – particularly for inexperienced surgical techs – related to multitasking while using sharp tools and working in an environment with distractions?

Tazmya: There are several safety risks. For example, the bladed instrument can come off the bone and slice the tech's finger, or they're trying to handle the bone, and it slips out of their fingers. Another safety concern is a sharp blade or instrument puncturing through the sterile field on the Mayo stand or back table. Also, newer staff may not be proficient in spine procedures and need to ask questions, creating a distraction for the physician working in their surgical field.

Q: What impact does the amount of time it takes to manually clean autologous bone have on the OR team?

Tazmya: In the OR setting, the goal is to get in, take care of the patient safely, and get out. The surgical tech will do their best to ensure they get as much good bone as possible. A large spine case, however, can be daunting for new techs because they're not familiar with the procedure or the instruments. If they're working with an efficient surgeon trying to knock out five spines by three o'clock, they will struggle to keep up with processing the bone while assisting the surgeon. Efficiency is critical, and it's not helpful when the tech is still trying to clean and crush through bone as the team waits to put it back in the patient so they can finish the procedure and move on to the next case.

surgical technologists and other surgical team members should choose devices with sharps injury prevention features and either activate those safety features when in use or select safer alternatives, such as an automated device for bone processing.

Personal Protective Equipment

Double glove: The American College of Surgeon (ACS), the Association of Surgical Technologists (AST) and the Association of periOperative Registered Nurses (AORN), recommend the universal adoption of the double glove technique — wearing two pairs of gloves to provide a double layer of protection — during surgical procedures to reduce exposure to bodily fluids resulting from glove tears and sharps injuries.³⁵⁻³⁷ A 24-month study examining the effect of double-gloving with inner indicator gloves to detect glove tears or perforations during surgery found that double gloving alone may protect the skin from needle sticks because breaches were more likely to occur to the outer gloves than to the inner gloves.³⁸

Training

Follow OSHA safe work practices: The OSHA blood-borne pathogens standard mandates that healthcare personnel adhere to safe practices when sharp devices are being handled, including properly disposing of sharps, avoiding breaking, recapping or removing contaminated needles, and using a one-handed technique to recap a needle.³⁹

Stay up to date with education and training: Participation in safety training, competency evaluations, and continuing professional development is the key to stay informed and up to date on the risks related to percutaneous injuries, workplace safety protocols, best practices for preventing sharps injuries, and the proper use of safety techniques and safety-engineered devices. Education and training may help reduce the incidence of sharps injury, particularly in high-risk areas and when clinical practices change.⁴⁰

Participate in product safety evaluations: Although surgical technologists and nurses are at high-risk for sharps injuries and are typically injured by devices originally used by others during surgery, they often are not part of the decision on which sharps safety devices are available to use.⁴¹ By participating in product evaluation and selection, surgical technologists can advocate for the safety of the entire surgical team. It's important to choose comfortable

and easy-to-use devices that include clear instructions, do not interfere with work processes, and have safety features that can be engaged with one hand and are visibly indicated when activated.⁴²

MANAGING A SHARPS INJURY

If a member of the surgical team experiences a percutaneous injury, it should be treated as an urgent medical concern and potential blood-borne pathogen exposure. The affected individual should take the following steps:⁴³

- Wash the wound with soap under running water for at least 60 seconds.
- Pat dry and cover the wound.
- Report the injury to a supervisor immediately and seek medical treatment.
- If the medical provider determines there is a risk of exposure to a blood-borne pathogen, antibiotics, vaccination, or postexposure prophylaxis (PEP) may be recommended.
- After initial treatment of the injury, a follow-up blood test may be recommended.
- Follow the health-care facility's procedure for reporting the injury and potential exposure.

KEY TAKEAWAYS FOR SURGICAL TECHNOLOGISTS

Anyone handling scalpels, sutures, hypodermic needles, blood collection devices, or other sharps devices is at risk for a contaminated sharps injury. While regulatory requirements mandate that all healthcare personnel address sharps safety in the workplace, preventable injuries continue to occur and go unreported. In the OR, the risk of sharps injury is inherently higher than in any other healthcare setting. Percutaneous injuries result in significant medical risks and emotional costs to affected surgical team members as well as high costs to the healthcare system.

The OR environment presents unique barriers and factors that contribute to poor compliance with sharps injury mitigation strategies. There is plenty of evidence to guide safe practices to prevent these injuries in the OR; however, it is up to each individual to take steps to adhere to those practices consistently.

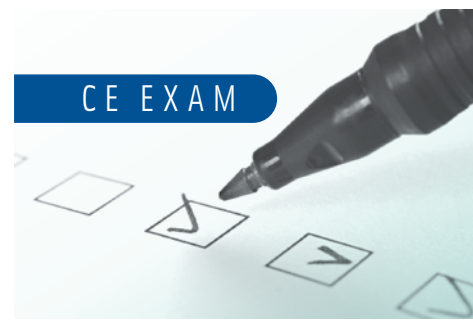
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REFERENCES

- 1 Stryker Bone Mill+ vs. Manual Processing study/survey, D0000220921
- 2 King, K. C., & Strony, R. (2022). *Needlestick*. National Center for Biotechnology Information. Retrieved January 12, 2023, from <https://pubmed.ncbi.nlm.nih.gov/29630199/>
- 3 Workbook for Designing, Implementing, and Evaluating a Sharps Injury Prevention Program. CDC. (n.d.). Retrieved January 12, 2023, from <https://www.cdc.gov/sharpsafety/resources.html>
- 4 EPINet Report for Needlestick and Sharp Object Injuries. International Safety Center. 2021. <https://internationalsafetycenter.org/exposure-reports/>
- 5 Sharps Injuries in the Operating Room, 2004. Mass.gov, Retrieved January 12, 2023, from <https://www.mass.gov/lists/needlesticks-sharps-injuries-among-massachusetts-hospital-workers#special-topic-reports-bloodborne-pathogens-and-needlestick-prevention>
- 6 Bloodborne Pathogens and Needlestick Prevention. OSHA. Retrieved January 12, 2023, from <https://www.osha.gov/bloodborne-pathogens>
- 7 Weiss, E. S., Makary, M. A., Wang, T., Syin, D., Pronovost, P. J., Chang, D., & Cornwell, E. E., 3rd (2005). Prevalence of blood-borne pathogens in an urban, university-based general surgical practice. *Annals of surgery*, 241(5), 803–809. <https://doi.org/10.1097/01.sla.0000161174.71460.1f>
- 8 Scalpel Safety – Protecting Patients and Clinicians. International Sharps Injury Prevention Society. April 23, 2019. <https://isips.org/scalpel-safety-protecting-patients-and-clinicians/>
- 9 O'Malley, E. M., Scott, R. D., 2nd, Gayle, J., Dekutoski, J., Foltzer, M., Lundstrom, T. S., Welbel, S., Chiarello, L. A., & Panlilio, A. L. (2007). Costs of management of occupational exposures to blood and body fluids. *Infection control and hospital epidemiology*, 28(7), 774–782. <https://doi.org/10.1086/518729>
- 10 Occupational Safety: Selected Cost and Benefit Implications of Needlestick Prevention Devices for Hospitals. GAO. (November 17, 2000). Retrieved January 12, 2023 from <https://www.gao.gov/products/gao-01-60r>
- 11 Mannocci, A., De Carli, G., Di Bari, V., Saule, R., Unim, B., Nicolotti, N., Carbonari, L., Puro, V., & La Torre, G. (2016). How Much do Needlestick Injuries Cost? A Systematic Review of the Economic Evaluations of Needlestick and Sharps Injuries Among Healthcare Personnel. *Infection control and hospital epidemiology*, 37(6), 635–646. <https://doi.org/10.1017/ice.2016.48>
- 12 Worthington, M. G., Ross, J. J., & Bergeron, E. K. (2006). Posttraumatic stress disorder after occupational HIV exposure: two cases and a literature review. *Infection control and hospital epidemiology*, 27(2), 215–217. <https://doi.org/10.1086/501155>
- 13 Sohn, J. W., Kim, B. G., Kim, S. H., & Han, C. (2006). Mental health of healthcare workers who experience needlestick and sharps injuries. *Journal of occupational health*, 48(6), 474–479. <https://doi.org/10.1539/joh.48.474>
- 14 H.R.5178 - 106th Congress (1999-2000): Needlestick Safety and Prevention Act. (2000, November 6). <https://www.congress.gov/bill/106th-congress/house-bill/5178>
- 15 Lakbala, P., Sobhani, G., Lakbala, M., Inaloo, K. D., & Mahmoodi, H. (2014). Sharps injuries in the operating room. *Environmental health and preventive medicine*, 19(5), 348–353. <https://doi.org/10.1007/s12199-014-0401-y>
- 16 International Safety Center. (2020). 2020 EPINet® *Blood Occupational Exposure Data* [Infographic]. <https://internationalsafetycenter.org/exposure-reports/>
- 17 Sharps Injuries. CDC. Retrieved January 13, 2023, from <https://www.cdc.gov/nora/councils/hcsa/stopsticks/sharpsinjuries.html>
- 18 Guglielmi, C.L., Spratt, D.G., Berguer, R., Alexander, S., Barnes, S. and Groah, L. (2010). A Call to Arms to Prevent Sharps Injuries in Our ORs. *AORN Journal*, 92: 387-392. <https://doi.org/10.1016/j.aorn.2010.08.005>
- 19 Slater, Karen & Whitby, Michael & Mclaws, ML. (2007). Prevention of needlestick injuries: The need for strategic marketing to address health care worker misperceptions. *American journal of infection control*. 35. 560-2. [10.1016/j.ajic.2006.12.007](https://doi.org/10.1016/j.ajic.2006.12.007)
- 20 Patterson, J. M., Novak, C. B., Mackinnon, S. E., & Patterson, G. A. (1998). Surgeons' concern and practices of protection against bloodborne pathogens. *Annals of surgery*, 228(2), 266–272. <https://doi.org/10.1097/00000658-199808000-00017>

- 21 Watt, A. M., Patkin, M., Sinnott, M. J., Black, R. J., & Maddern, G. J. (2008). Scalpel injuries in the operating theatre. *BMJ (Clinical research ed.)*, 336(7652), 1031. <https://doi.org/10.1136/bmj.39548.418009.80>
- 22 Jagger, J., Berguer, R., Phillips, E. K., Parker, G., & Gomaa, A. E. (2011). Increase in sharps injuries in surgical settings versus nonsurgical settings after passage of national needlestick legislation. *AORN Journal*, 93(3), 322–330. <https://doi.org/10.1016/j.aorn.2011.01.001>
- 23 Healey, A. N., Sevdalis, N., & Vincent, C. A. (2006). Measuring intra-operative interference from distraction and interruption observed in the operating theatre. *Ergonomics*, 49(5-6), 589–604. <https://doi.org/10.1080/00140130600568899>
- 24 Wiegmann, D. A., ElBardissi, A. W., Dearani, J. A., Daly, R. C., & Sundt, T. M., 3rd (2007). Disruptions in surgical flow and their relationship to surgical errors: an exploratory investigation. *Surgery*, 142(5), 658–665. <https://doi.org/10.1016/j.surg.2007.07.034>
- 25 Fritsch, M. H., Chacko, C. E., & Patterson, E. B. (2010). Operating room sound level hazards for patients and physicians. *Otology & neurotology: official publication of the American Otological Society, American Neurotology Society [and] European Academy of Otology and Neurotology*, 31(5), 715–721. <https://doi.org/10.1097/MAO.0b013e3181d8d717>
- 26 Schmid, F., Goepfert, M. S., Kuhnt, D., Eichhorn, V., Diedrichs, S., Reichensperner, H., Goetz, A. E., & Reuter, D. A. (2011). The wolf is crying in the operating room: patient monitor and anesthesia workstation alarming patterns during cardiac surgery. *Anesthesia and analgesia*, 112(1), 78–83. <https://doi.org/10.1213/ANE.0b013e3181fcc504>
- 27 Panahi, P., Stroh, M., Casper, D. S., Parvizi, J., & Austin, M. S. (2012). Operating room traffic is a major concern during total joint arthroplasty. *Clinical orthopaedics and related research*, 470(10), 2690–2694. <https://doi.org/10.1007/s11999-012-2252-4>
- 28 Mathias, Judy (January 2022). More than 19% of US hospitals critically understaffed. *OR Manager*. Retrieved January 13, 2023, from <https://www.ormanager.com/briefs/more-than-19-of-us-hospitals-critically-understaffed/>
- 29 Addressing Health Worker Burnout. (2022). Office of the U.S. Surgeon General. Retrieved January 13, 2023 from <https://www.hhs.gov/surgeongeneral/priorities/health-worker-burnout/index.html>
- 30 Hittle, B. M., Wong, I. S., Caruso, C. C., Managing Fatigue During Times of Crisis: Guidance for Nurses, Managers, and Other Healthcare Workers. (April 2, 2020). CDC. <https://blogs.cdc.gov/niosh-science-blog/2020/04/02/fatigue-crisis-hcw/>
- 31 Andel, S. A., Tedone, A. M., Shen, W., & Arvan, M. L. (2022). Safety implications of different forms of understaffing among nurses during the COVID-19 pandemic. *Journal of advanced nursing*, 78(1), 121–130. <https://doi.org/10.1111/jan.14952>
- 32 Tørring, B., Gittell, J.H., Laursen, M. et al. Communication and relationship dynamics in surgical teams in the operating room: an ethnographic study. *BMC Health Serv Res* 19, 528 (2019). <https://doi.org/10.1186/s12913-019-4362-0>
- 33 Neutral Zone: Transferring Sharps Safely. CDC. (n.d.). Retrieved January 14, 2023, from <https://www.cdc.gov/nora/councils/hcsa/stopsticks/newsletter.html>
- 34 Fuentes, Hector & Collier, James & Sinnott, Michael & Whitby, Michael. (2008). “Scalpel safety”: Modeling the effectiveness of different safety devices’ ability to reduce scalpel blade injuries. *International Journal of Risk and Safety in Medicine*. 20, 83-89. 10.3233/JRS-2008-0428.
- 35 Revised Statement on Sharps Safety. (2016). ACS. <https://www.facs.org/about-acsc/statements/international-safety-center-releases-consensus-sharps-safety/>
- 36 Childs, T. (2013), Use of Double Gloving to Reduce Surgical Personnel’s Risk of Exposure to Bloodborne Pathogens: An Integrative Review. *AORN Journal*, 98: 585-596.e6. <https://doi.org/10.1016/j.aorn.2013.10.004>
- 37 Standards of Practice for Gowning and Gloving. (2014). AST. https://www.ast.org/AboutUs/Surgical_Attire/
- 38 Korniewicz, D. and El-Masri, M. (2012), Exploring the Benefits of Double Gloving During Surgery. *AORN Journal*, 95: 328-336. <https://doi.org/10.1016/j.aorn.2011.04.027>
- 39 OSHA. (1970). *Occupational Safety and Health Standards: Bloodborne pathogens* (Standard No. 1910.1030). Retrieved January 14, 2023 from <https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.1030>
- 40 Cheetham, S., Ngo, H. T., Liira, J., & Liira, H. (2021). Education and training for preventing sharps injuries and splash exposures in healthcare workers. *The Cochrane database of systematic reviews*, 4(4), CD012060. <https://doi.org/10.1002/14651858.CD012060.pub2>
- 41 Jagger, J., Berguer, R., Phillips, E. K., Parker, G., Gomaa, A. E. (2010). Increase in Sharps Injuries in Surgical Settings Versus Nonsurgical Settings after Passage of National Needlestick Legislation. *Journal of the American College of Surgeons* 210(4):p 496-502. <https://pubmed.ncbi.nlm.nih.gov/20347743/>
- 42 Ford, J. L., & Phillips, P. (2008). How to evaluate sharp safety-engineered devices. *Nursing times*, 104(36), 42–45. <https://pubmed.ncbi.nlm.nih.gov/18822548/>
- 43 What to do following a sharps injury. (CDC). Retrieved January 16, 2023, from <https://www.cdc.gov/nora/councils/hcsa/stopsticks/whattodo.html>

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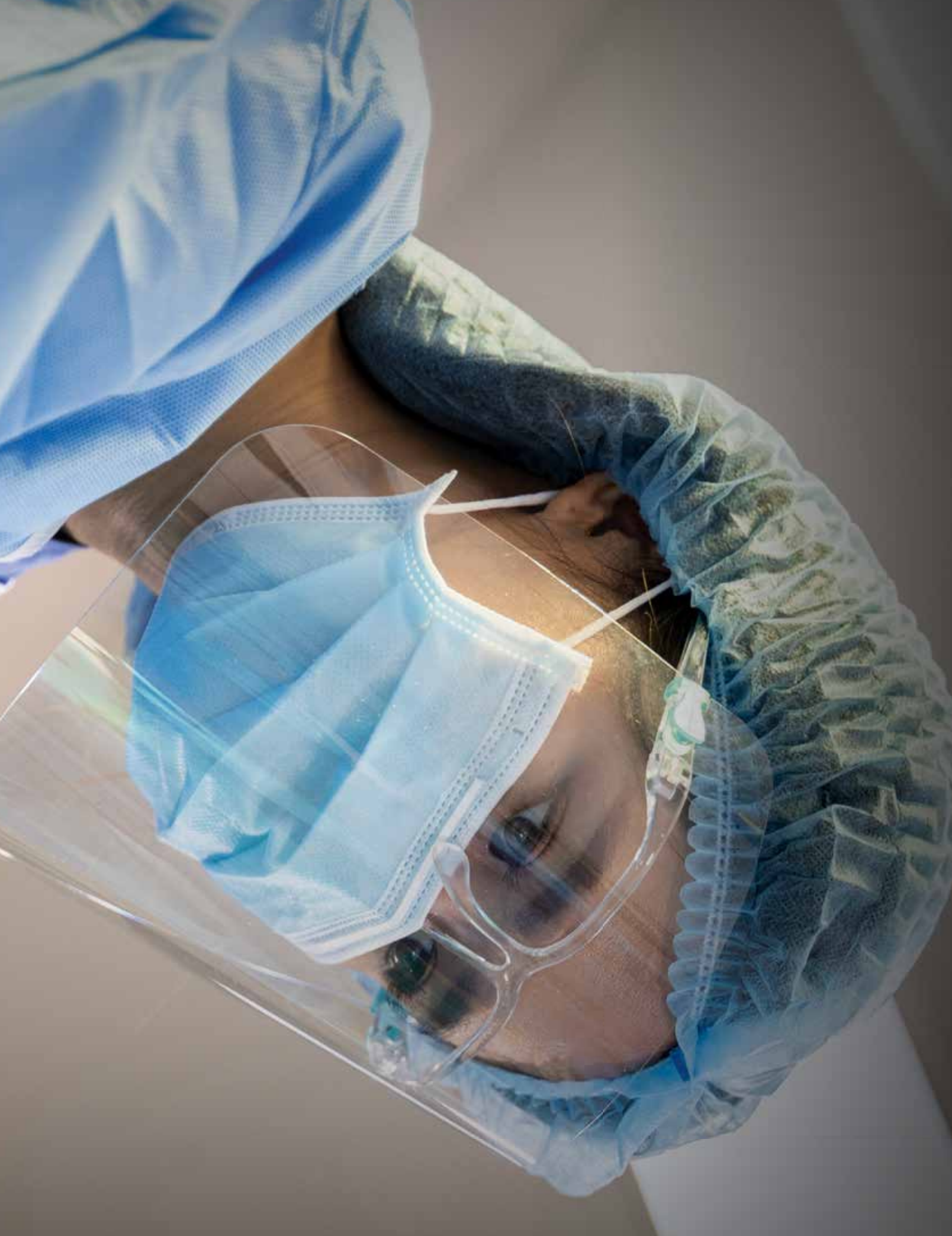
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A photograph of two surgeons in an operating room. They are wearing blue scrubs, blue bouffant caps, and clear face shields. The surgeon on the left is looking down, while the surgeon on the right is looking towards the camera. The background shows surgical equipment and a bright light source.

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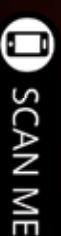
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2023 Candidates for National Office

PRESIDENT (VOTE FOR ONE)

KEVIN CRAYCRAFT, CST, FAST
BLUEGRASS COMMUNITY AND
TECHNICAL COLLEGE
LEXINGTON, KENTUCKY



AST INVOLVEMENT

■ **NATIONAL:** AST President, 2021-2023; AST Vice President, 2017-2021; AST Credentials Committee, Chair 2017-2018, 2015-2016; AST Policy and Procedures Committee, 2017-2019, 2016-2017; AST Board of Director, 2015-2017; Foundation for Surgical Technology, 2015-2017; AST Surgical Technology Community Outreach, 2016-2017; AST Education and Professional Standards Committee, 2007-2015, Chair 2014-2015.

■ **STATE:** Kentucky State Assembly Vice President, 2017-2019; Kentucky State Assembly President, 2015-2017; Kentucky State Assembly Director, 2014-2015.

CANDIDATE STATEMENT

I'm honored and grateful for the opportunity I have had to serve the members of AST and the amazing surgical technology and surgical assisting professions as your AST President the last 20 months. Our profession is dealing with various unprecedented challenges and with your support I would love to continue to serve and represent you as the president of the AST Board as we face what tomorrow will bring.

The current AST Board has worked diligently dealing with concerns and issues never seen by the AST Board. Each of these challenges have provided experiences that only strengthened my drive, desire, skills and abilities to be your president as we continue to face the obstacles presented by the current environment, including workforce shortages, on-the-job training, non-accredited programs and implementation of the associate degree.

My experience in a wide variety of leadership roles has given me the capabilities to successfully execute the role of president of AST Board. In each of these roles I have demonstrated dependability, accountability, and approachability. These characteristics define me as a leader while emphasizing respect, open discussion, teamwork and cooperation while at the same time bringing the energy that encourages a positive atmosphere and outcome.

This two-year term has provided irreplaceable knowledge, information and insights that are invaluable to making the day-to-day decisions regarding the profession and the future of the AST. As practitioners, and educators alike, we have dedicated ourselves to our patients and students as the world faces changes daily. The ongoing changes have led me to evaluate how we as surgical technologists and AST can serve patients, members, and the community. I strongly feel that your support would allow me to provide continuity of leadership, mentoring, organizational stability and forward thinking to the AST Board of Directors, standing committees, ad hoc committees and members alike.

The culmination of my past roles and experiences supplies me with an in-depth understanding of AST and its collaborative works with the Accreditation Review Council on Education in Surgical Technology and Surgical Assisting (ARC/STSA) and the National Board of Surgical Technology and Surgical Assisting (NBSTSA), which allows me to better represent your voices when discussing the future of surgical technology and surgical assisting.

Lastly, I would like to express that my enthusiasm, dedication, and integrity, will always be an integral part of my decision-making process. As your president, I will remain focused

on our ever-changing profession and work closely with the AST Board of Directors to continue to promote the growth of AST and the state assemblies while strongly supporting and promoting our legislative efforts that are crucial to protecting the profession and ensuring continued delivery of quality surgical patient care. We have all dedicated our lives to making a difference in the care of our patients and I would be honored to have your support as president on the AST Board of Directors in order to represent the profession, members of the AST and continue our mission to enhance quality patient care.

VICE PRESIDENT (VOTE FOR ONE)

PEGGY VARNADO, CST, CSFA, FAST
NORTH OAKS MEDICAL CENTER
HAMMOND, LOUISIANA



AST INVOLVEMENT

■ **NATIONAL:** AST Vice President, 2021-2023; AST Treasurer, 2019-2021, 2017-2019; AST Board of Director, 2015-2017; AST Sunshine Fund Committee Chair, 2019-2021; Foundation for Surgical Technology, 2015-2021, Chair, 2017-2018, 2019-2020.

■ **STATE:** Louisiana State Assembly Treasurer, 2019-2022, 2017-2019; Louisiana State Assembly Board of Director, 2014-2016, 2006-2008; Loui-

siana State Assembly President, 2011-2013; Louisiana State Assembly Vice President, 2009-2011, 2008-2009.

CANDIDATE STATEMENT

Hello, my name is Peggy Varnado, and I am asking for the honor to continue to serve the members of AST as I seek re-election to the office of vice president. The past eight years have been very rewarding, challenging, and enlightening, as I have served in the roles of vice president, treasurer and director. I have and will continue to serve with honesty, passion, and integrity, as I work with the president and my fellow board members to continue the progress and momentum of our profession and association.

As your vice president, I worked with the president to validate that the mission of AST – to enhance our profession in order to ensure quality surgical patient care – was carried out responsibly, by providing quality continuing education opportunities, fiduciary responsibility, and continued communications with our partner organizations. I continued to support the work of the Foundation for Surgical Technology and the Sunshine Fund, which provided ways for AST to give back to its members, support the students and educators of surgical technology, help to offset the expenses of those who served on medical missions, and to help bring our military members to conference. I led a joint committee, which consisted of members from the AST board of directors and the NBSTSA board of directors, to create a clear definition of the requirements for the live continuing education credits.

We have made great strides in advancing the profession over the past few years, and with the recent staff-

ing concerns we are facing across the country, as well as a few other educational issues, I will work with the president, the board of directors, and our partner organizations to help bring awareness to these issues and to find solutions and tools to bring to our places of employment, which promote awareness of the surgical technology profession, and the quality educational opportunities for the surgical technologist. As your vice president, I will continue to implement the strategic plan to help all these elements work together to ensure the highest level of patient care, working toward having a certified surgical technologist in every operating room.

Twenty-eight years ago, I entered the operating room for the very first time, full of nerves and excitement, but also full of intrigue and awe for what was happening in front of me. I loved every minute of it! Today I love it just as much, if not more. The nerves are gone, but the excitement, intrigue, and passion are still there. I love what I do and cannot imagine ever doing anything else. In the same regard, eight years ago I sat in my very first AST Board meeting. Again, there was excitement, nerves, and intrigue for the journey I was about to embark on. I am still as excited and passionate about serving the members of AST. I would be honored if you allow me to continue to serve as your vice president. Thank you.

TREASURER
(VOTE FOR ONE)

DAVID ALFARO, CST, FAST
AMERICAN CAREER COLLEGE
ONTARIO, CALIFORNIA



AST INVOLVEMENT

■ **NATIONAL:** AST Board of Director, 2021-2023, 2019-2021; AST Policy and Procedures 2021-2023; AST Military Advisory Committee, 2021-2023, 2010-2012; AST Education and Professional Standards Committee, 2014-2015.

■ **STATE:** California State Assembly Treasurer, 2021-2023, California State Assembly Board of Director, 2019-2021.

CANDIDATE STATEMENT

To my fellow CSTs, it will be an honor to be able to continue to serve as a member of the Board of Directors of AST as your treasurer. The way I see it, I will be able to continue to give back to the profession that helped me open many doors to progress and advance in my career. In my almost 30 years of experience serving in the US Navy, it taught me honor, courage and commitment. It showed me to do things practicing good morals and ethics; 26 of those 30 years as a Navy-trained surgical technologist.

As a retired Navy Chief my philosophy is guided towards servant leader-

ship, this is the leader whose main goal is to serve and help build a community, our community of surgical technologists. In my time in the US Navy, I had the opportunity to go through the ranks, earning respect, being trained in leadership and management. This is the character and qualities I bring to the AST Board of Directors.

I had the privilege of working within the surgical technology profession in different capacities – as a clinician, as a manager, administrator and now an educator – this vast experience has enhanced what I can bring to our association.

My involvement with AST at the national level has been as a director for the AST Board, the Military Affairs Committee helping with the recognition of our military members and also served in the Education and Professional Standards Committee. I have also been involved in the advancement of our profession by participating in education committees and serve as a site visitor for our programmatic accreditation institutions.

I will welcome the opportunity to continue serving on the board of directors and continuing paying forward to the profession that I love being a part of it every day.

DUSTIN CAIN, CST, FAST
NORTHSIDE HOSPITAL
ATLANTA, GEORGIA



AST INVOLVEMENT

■ **NATIONAL:** AST Treasurer, 2021-2023; AST Secretary, 2018-2021; AST Board of Director, 2016-2018; Foundation for Surgical Technology Committee, 2021-2023; AST Sunshine Fund Committee, 2021-2023; AST Budget and Finance Committee, 2021-2023; AST Bylaws, Resolutions and Parliamentary Procedures Committee, 2014-2016, Chair, 2014-2016.

■ **STATE:** Georgia State Assembly Treasurer, 2021-2023, 2015-2017; Georgia State Assembly President, 2017-2021; Georgia State Assembly Board of Director, 2014-2015.

CANDIDATE STATEMENT

It has been my honor to serve the membership of AST as treasurer for the past two years. I am now asking the membership to elect me to a second term. I will keep the opinions and concerns of the membership and the House of Delegates at heart before casting any vote. Most importantly, I will always vote in the surgical patient's best interest.

Fiscal responsibility has been my top priority as your treasurer. I can assure you that the AST Board of Directors is spending your member-

ship dollars in your best interest. I personally meet with the Director of Accounting at minimum twice per year to review all financial reports. AST completes an external audit every year, which is reviewed by the AST Board. I can attest to you as the treasurer of AST that there is no fraudulent or wasteful spending at AST. If re-elected treasurer, I will continue to monitor the budget and finances of AST with integrity.

In 2021, I said “It will be a great responsibility to return AST to its prior financial situation while still supporting our membership and ancillary projects.” This statement referred to the financial setbacks AST had during the COVID crisis in 2020. It is my honor to tell you that AST’s finances held strong, and we were able to meet all financial responsibilities without increasing membership dues or making major cuts in spending. I pledge to you that no matter the financial situation of AST, raising the membership dues will be the absolute last resort.

Outside of AST, my job title is the Coordinator of Quality and Education for Northside Hospital in Atlanta. This role has exposed me to all aspects of the surgical technology spectrum: education, certification, and hospital and educational accreditation. I work closely with the surgical technology programs in the area and provide clinical sites to their students. In my role, I also participate in quality improvement initiatives and root cause analysis evaluations. The skills I have gained in this role have strengthened my abilities to continue in a leadership role with AST. I am proud to say that I also work behind the Mayo stand taking care of our patients.

If you place your faith in me for another two years, I will continue to fulfill the duties of my office to the best of my abilities. I will be approachable, innovative, and honest. I will continue to support our partner organizations, standing committees, the state assemblies, and you, the membership. I seek your vote as a humble and grateful servant of this profession. Thank you for your consideration.

RACHEL CLARK, CST, CSFA, FAST
BAPTIST HEALTH-FORT SMITH
FORT SMITH, ARKANSAS



AST INVOLVEMENT

■ **NATIONAL:** AST Board of Director, 2018-2021, 2016-2018; AST Policy and Procedures Committee, 2019-2021; AST Surgical Technology Community Outreach, 2019-2021; AST State Assembly Leadership Committee, 2011-2015.

■ **STATE:** Arkansas State Assembly Board of Director, 2021-2023, 2020-2021; Arkansas State Assembly Treasurer, 2015-2019; Arkansas State Assembly President, 2009-2013; Arkansas State Assembly Vice President, 2005-2009.

CANDIDATE STATEMENT

Hello all! My name is Rachel Clark. I am seeking election of treasurer for

the AST BOD. I feel as if I am ready, capable, and knowledgeable enough to hold this position. I have been in the realm of the state assembly platform for many years now. I have held and termed out of all the positions in the state assembly of my state with one exception of secretary. I have also held a position of BOD on the AST for five years. Some of you know me, some of you don't but I encourage future conversations to rectify that. I would like to resume a position within the AST BOD as treasurer. If elected, I have a huge burden that I would like to go after with the other board officers.

My passion is to get a hold of the current travesty that is occurring not only in my own state but in others across the nation as well. The fact that we have worked so hard as a nation to get our profession recognized and the pay scales in an upward trend for our jobs will be all for naught if we cannot get a grip on what is happening in our own back yards.

Since the pandemic occurred, it opened up a gateway for unqualified persons to try to swoop in and monopolize upon the nationwide shortage of surgical technologists. I am currently trying to fight such nonsense as we speak in nearby hospitals. The hospitals need to be made adamantly aware of what they are trying to push forward. Hospitals that do not have the education provided to them in the human resource departments do not realize you cannot put someone off the streets into a six-week program provided in-house at a facility and teach them how to scrub. This is absolutely absurd, and I am overly bothered by it for many reasons.

Having said this, we have to put an immediate stop to this, and I believe

one of the ways to do that is by pushing our education and legislative efforts forward full throttle. Each state needs some state legislation in their court. I personally know how hard it is to get that at your capitol, but it takes a group of determined people to continue to press forward. We as a group can flip this nation if we unite ourselves together. I am looking forward to nationals in 2023, and I hope to see you there.

DIRECTOR (VOTE FOR THREE)

**KIMBERELY McDUFFIE, CST, EAST
NORTH CENTRAL TEXAS COLLEGE
GAINESVILLE, TEXAS**



AST INVOLVEMENT

- **NATIONAL:** AST State Assembly Leadership Committee, 2014-2020.
- **STATE:** Texas State Assembly President, 2015-2019; Texas State Assembly Vice President, 2013-2015; Texas State Assembly Treasurer, 2012-2013; Texas State Assembly Board of Director, 2009-2012.

CANDIDATE STATEMENT

Hello, my name is Kim McDuffie, and I am seeking a position as a Board of Director. I have been an active AST member since 2007. In the past 15 years I have served AST on the State Assembly Leadership Committee,

and as president and other positions on the Texas State Assembly. I believe being the best you can be and achieving goals that are set. I am passionate about surgical technology and promoting the profession by investing into the future of surgical technology through my students. I feel education is the key to continued success within our profession.

My passion for the profession was instilled in me through incredible mentors over the years. Through these mentors I have learned the importance of being active in a professional organization. I am a successful leader and work well within a team. I believe that success can be achieved by the effort that is put into it. I feel I have the experience, knowledge, and a desire to serve the members of AST to the best of my ability. If elected, I will continue to advocate for the profession by actively supporting the state assemblies and supporting all members.

I ask for your vote and appreciate the opportunity to serve you as a board of director. I look forward to seeing you in the Windy City.



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UPCOMING PROGRAMS



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ALABAMA STATE ASSEMBLY

Program Type: Annual Meeting/Elections
Date: March 11, 2023
Title: It Starts with Us
Location: Oak Mountain State Park, 200 Terrace Dr, Pelham, AL 35124
Contact: Jessica Sirmon, 4208 Idlewood Dr, Pensacola, FL, 32506, 850-525-5369, alabamaastinfo@gmail.com
CE Credits: 6

ALASKA STATE ASSEMBLY

Program Type: Annual Meeting/Elections
Date: April 15, 2023
Title: AST Spring Workshop & Elections
Location: Providence Alaska Medical Center, 3200 Providence Dr, Anchorage, AK 99508
Contact: Lovely Agustin, 3200 Providence Dr, Anchorage, AK 99508, 907-212-2614, arcelie_915@yahoo.com
CE Credits: 6 Live

ARKANSAS STATE ASSEMBLY

Program Type: Workshop
Date: April 15, 2023
Title: Springtacular: Going Through Changes
Location: Northwest Technical Institute, 709 S Old Missouri Road, Springdale, AR 72764
Contact: Ashley Smith, PO Box 15772, Little Rock, AR 72231, 479-420-6363, orthowife83@gmail.com
CE Credits: 6

CALIFORNIA STATE ASSEMBLY

Program Type: Webinar Workshop (Webinar approved for members only of the California State Assembly)
Date: April 15, 2023
Title: Realizing the Potential of Your Credential
Contact: Suzette Robinson, 602-578-9869, ca.sastateassembly@gmail.com
CE Credits: 1 Live

COLORADO/WYOMING STATE ASSEMBLY

Program Type: Onsite & Webinar Workshop (Webinar approved for members only of the Colorado/Wyoming State Assembly)
Date: April 15, 2023
Title: Spring Workshop
Location: TBD
Contact: Antoinette Trujillo, 8230 Watchmen Road, Fountain, CO 80817, 719-733-7076, information@coloradoast.com; ant-lee81@gmail.com
CE Credits: 4
Program Type: Annual Meeting/Elections
Date: September 16, 2023
Title: Annual Business Meeting & Workshop
Location: Denver
Contact: Antoinette Trujillo, 8230 Watchmen Road, Fountain, CO 80817, 719-733-7076, information@coloradoast.com; ant-lee81@gmail.com
CE Credits: 5

Program Type: Webinar Workshop (Webinar approved for members only of the Colorado/Wyoming State Assembly)
Date: November 4, 2023
Title: Fall Workshop
Contact: Antoinette Trujillo, 8230 Watchmen Road, Fountain, CO 80817, 719-733-7076, information@coloradoast.com; ant-lee81@gmail.com
CE Credits: 3

GEORGIA STATE ASSEMBLY

Program Type: Annual Meeting/Elections
Date: March 11, 2023
Title: Springtime in Savannah
Location: Savannah Technical College, 5717 White Bluff Road, Savannah, GA 31405
Contact: Erin Baggett, PO Box 216, Lawrenceville, GA 30046, 678-226-6943, gasawebmaster@gmail.com
CE Credits: 7 Live

Program Type: Workshop
Date: September 9, 2023
Title: Surgery Southern Style
Location: Albany Technical College, 1704 S Slappey Blvd, Albany, GA 31701
Contact: Erin Baggett, PO Box 216, Lawrenceville, GA 30046, 678-226-6943, gasawebmaster@gmail.com
CE Credits: 8

INDIANA STATE ASSEMBLY

Program Type: Annual Meeting/Elections
Date: March 3-4, 2023
Title: ISA Spring Conference 2023
Location: St. Joseph Regional Medical Center, Mishawaka, 5215 Holy Cross Pkwy, IN 46545
Contact: Corinda Maday, 1708 Campeau St, South Bend, IN 46617
CE Credits: 6

ILLINOIS STATE ASSEMBLY

Program Type: Annual Meeting/Elections
Date: March 11, 2023
Title: Annual Meeting, Elections, and Seminar
Location: Illinois Central College - Peoria Campus: Student Center, 5407 N University St, Peoria, IL 61635
Contact: Sonya Conton, PO Box 2254, Decatur, IL 62524, illinoisstateassembly@gmail.com
CE Credits: 7.5 Live

IOWA STATE ASSEMBLY

Program Type: Annual Meeting/Elections
Date: March 4, 2023
Title: Iowa State Assembly Spring 2023 Workshop and Delegate Elections
Location: Western Iowa Tech Community College, 4647 Stone Ave, Sioux City, IA 51106
Contact: Tim Danico, 319-540-6008, timothy-danico@uiowa.edu
CE Credits: 6 Live

KANSAS STATE ASSEMBLY

Program Type: Annual Meeting/Elections
Date: March 11, 2023
Title: Annual Business Meeting and Workshop
Location: WSU Tech, 213 N Mead St, Wichita, KS 67202
Contact: Logan Threet, 213 N Mead St, Wichita, KS 67202, 316-617-6718, lthreet@wsutech.edu
CE Credits: 6

KENTUCKY STATE ASSEMBLY

Program Type: Annual Meeting/Elections
Date: March 24-25, 2023
Title: Annual Business Meeting and Elections
Location: Embassy Suites, 501 S 4th St, Louisville, KY 40202
Contact: Aaron Morris, 270-977-6900, ksaofast@gmail.com
CE Credits: 8

LOUISIANA STATE ASSEMBLY

Program Type: Annual Meeting/Elections
Date: March 11, 2023
Title: 2023 Spring Workshop and Delegate Elections
Location: Our Lady of Lourdes – RMC, 4801 Ambassador Caffrey Pkwy, Lafayette, LA 70508
Contact: Cherlynn Geary, PO Box 60445, Lafayette, LA 70596, 225-800-6831, gearyc@mybrcc.edu
CE Credits: 6

MAINE STATE ASSEMBLY

Program Type: Webinar Workshop (Webinar approved for members only of the Maine State Assembly)
Date: March 11, 2023
Title: MESA Spring Symposium
Contact: Jeffrey Anderson, 6 Stillwater Dr, Westbrook, ME 04092, 207-838-9676, jef-fanderson1075@gmail.com
CE Credits: 4-5

MASSACHUSETTS STATE ASSEMBLY

Program Type: Annual Meeting/Elections
Date: April 29, 2023
Title: Precepting 101
Location: St. John Damascus Church, 300 W St, Dedham, MA 02026
Contact: Kristen Urbaneck, 187 Riverside Ave, Medford, MA 02155, 617-257-5384, rdsox805@yahoo.com
CE Credits: 4

MICHIGAN STATE ASSEMBLY

Program Type: Webinar Workshop (Webinar approved for members only of the Michigan State Assembly)
Date: April 22, 2023
Title: MSA-AST Spring 2023 Virtual Workshop
Contact: Renona Gauthier, 25917 E Huron River Dr, Flat Rock, MI 48134, 248-891-3989, michiganassemblyofast@gmail.com
CE Credits: 3

MINNESOTA STATE ASSEMBLY

Program Type: Workshop
Date: April 29, 2023
Title: MNSA 2023 In-Person Spring Workshop
Location: Cuyuna Regional Medical Center – Heartwood Campus, 500 Heartwood Dr, Crosby, MN 56441
Contact: Lori Molus, PO Box 163, Becker, MN 55308, 320-492-8747, mnast2016@outlook.com
CE Credits: 6

MISSOURI STATE ASSEMBLY

Program Type: Annual Meeting/Elections
Date: March 3-5, 2023
Title: Annual Spring Conference, Business Meeting and Elections
Location: Mercy Hospital Joplin, 100 Mercy Way, Joplin, MO 64804
Contact: JoDee Neef, 1992 Waterfront Dr N Apt B, Columbia, MO 65202, 573-808-0585, jodeeneef@gmail.com
CE Credits: 17 Live

MONTANA STATE ASSEMBLY

Program Type: Annual Meeting/Elections
Date: September 9, 2023
Title: Annual Business Meeting and Elections
Location: Kalispell Regional Medical Center, 310 Sunnyview Lane, Kalispell, MT 59901
Contact: Marsha Lyles, 310 Sunnyview Lane, Kalispell, MT 59901, 406-670-8376, mnmcst@yahoo.com
CE Credits: 6-7

NEBRASKA STATE ASSEMBLY

Program Type: Annual Meeting/Elections & Webinar (Webinar approved for members only of the Nebraska State Assembly)
Date: March 4, 2023
Title: 2023 NESA Winter Workshop and Annual Meeting
Location: CHI Health St. Elizabeth, 555 S 70th St, Lincoln, NE 68510
Contact: Nebraska State Assembly, PO Box 67034, Lincoln, NE 68506, 402-988-8099, nebraskastateassembly@gmail.com
CE Credits: 6 Live

NEW MEXICO STATE ASSEMBLY

Program Type: Annual Meeting/Elections
Date: March 11, 2023
Title: NM State Assembly Spring Conference and Annual Business Meeting
Location: UNM North Campus; Domenici Center Auditorium, 1001 Stanford Dr NE, Albuquerque, NM 87131
Contact: Ruth Borah, NM-AST, PO Box 66496, Albuquerque, NM 87193, 848-391-3661, ruth.kerrjusinski@gmail.com
CE Credits: 5

NORTH CAROLINA STATE ASSEMBLY

Program Type: Annual Meeting/Elections
Date: April 15, 2023
Title: Power of the Past | Force of the Future
Location: Cabarrus College of Health Sciences, 401 Medical Park Dr NE, Concord, NC 28025
Contact: Heather Hodges, PO Box 902, Mooresville, NC 28115, 704-223-5193, ncsaast@gmail.com
CE Credits: 7

OHIO STATE ASSEMBLY

Program Type: Annual Meeting/Elections
Date: March 17-19, 2023
Title: Be the Best You Can Be in 2023
Location: Nationwide Hotel and Conference Center, 100 Green Meadows Dr S, Lewis Center, OH 43035
Contact: Lenore Gregg, ohioast@gmail.com
CE Credits: 14 Live

OKLAHOMA STATE ASSEMBLY

Program Type: Annual Meeting/Elections
Date: March 25, 2023
Title: Spring Conference
Location: Canadian Valley Technology Center, 1701 S Czech Hall Road, Yukon, OK 73099
Contact: Miguel Agosto, 1800 Caribou Circle, Altus, OK 73521, 580-301-1648, oksaoftheast@gmail.com
CE Credits: 5

PENNSYLVANIA STATE ASSEMBLY

Program Type: Annual Meeting/Elections
Date: March 18, 2023
Title: Spring Annual Meeting
Location: Delaware County Community College, 901 S Media Line Road, Media, PA 19063
Contact: Michelle Muhammad, 306 Dague Farm Dr, Coatesville, PA 19320, 281-703-3593, mmcst19@gmail.com
CE Credits: 4

SOUTH CAROLINA STATE ASSEMBLY

Program Type: Annual Meeting/Elections
Date: March 4, 2023
Title: Spring Business Meeting
Location: Midlands Technical College, 1260 Lexington Dr, West Columbia, SC 29170
Contact: Katrina Williams, P.O. Box 10001, Dillon, SC 29536, 843-615-7454, katinawilliams89@yahoo.com
CE Credits: 9 Live

SOUTH DAKOTA STATE ASSEMBLY

Program Type: Workshop
Date: April 21-22, 2023
Title: SDSA Spring 2023 Conference
Location: Southeast Technical College, 2320 N Career Ave, Sioux Falls, SD 57107
Contact: Annie McGuire, 2320 N Career Ave, Sioux Falls, SD 57107, 605-203-3099, amcguire_57249@yahoo.com, annie.mcguire@southeasttech.edu
CE Credits: 9

TENNESSEE STATE ASSEMBLY

Program Type: Annual Meeting/Elections
Date: March 4-5, 2023
Title: TNA Spring Meeting at Erlanger
Location: Erlanger Hospital, 975 E 3rd St, Chattanooga, TN 37403
Contact: Ellen Wood, 1344 Copperstone Lane, Knoxville, TN 37922, 865-283-5901, ellenwoodtnast@gmail.com
CE Credits: 12

TEXAS STATE ASSEMBLY

Program Type: Annual Meeting/Elections
Date: March 4-5, 2023
Title: Best Little Workshop in Texas
Location: Radisson Hotel Fort Worth North-Fossil Creek, 2540 Meacham Blvd, Fort Worth, TX 76106
Contact: Jamie Lopez, 5217 Canadian Ave, Midland, TX 79707, 432-638-2269, djai-melopez@yahoo.com
CE Credits: 15 Live

UTAH STATE ASSEMBLY

Program Type: Annual Meeting/Elections
Date: March 11, 2023
Title: "March into Spring" Annual Business Meeting, Elections, and Workshop
Location: Utah Valley Hospital - Sorensen Education Center, 1034 N 500 W, Provo, UT 84604
Contact: Shauna Jackson, 1575 W 430 N, Lindon, UT 84042, 801-360-8882, shaunayjackson@gmail.com
CE Credits: 3

VIRGINIA STATE ASSEMBLY

Program Type: Annual Meeting/Elections
Date: March 18, 2023
Title: 2023 Spring Elections, Annual Business Meeting and Workshop
Location: Laurel Ridge Community College - Hazel Hall, 6480 College St, Warrenton, VA 20187
Contact: Lisa Day, 13284 Firefly Road, Culpeper, VA 22701, 540-422-9471, ldaycsfa@gmail.com
CE Credits: 5 Live

Program Type: Workshop
Date: October 7, 2023
Title: A Little Something about Pediatrics
Location: Children's Hospital of the King's Daughters, 2021 Concert Dr, Virginia Beach, VA 23456
Contact: Lisa Day, 540-422-9471, ldaycsfa@gmail.com
CE Credits: 6-7

WASHINGTON STATE ASSEMBLY

Program Type: Workshop
Date: March 11-12, 2023
Title: WSA Spring Conference
Location: Spokane Community College, 1810 N Greene St, Spokane, WA 99217
Contact: Irisvette Garcia, 425-591-1437, garcia.wsa@gmail.com
CE Credits: 10

WEST VIRGINIA STATE ASSEMBLY

Program Type: Workshop
Date: March 25, 2023
Title: Spring Workshop
Location: Mon Health Medical Center, 1200 J.D Anderson Dr, Morgantown, WV 26505
Contact: Meloney McRoberts, 106 Hidden Valley Road, Chapmanville, WV 25508, 304-784-2772, meloney.mcroberts@southernwv.edu
CE Credits: 6

WISCONSIN STATE ASSEMBLY

Program Type: Webinar Workshop (Webinar approved for members only of the Wisconsin State Assembly)
Date: March 25, 2023
Title: March to Learning
Contact: Ilea Cornelius, 920-660-3669, wisconsinast@gmail.com
CE Credits: 6

STATE ASSEMBLY ANNUAL BUSINESS MEETINGS

Members interested in the election of officers & the business issues of their state assembly should ensure their attendance at the following meetings.

ALABAMA

Pelham
March 11, 2023
Annual Meeting
2023 BOD Elections
& 2023 Delegate Elections

ALASKA

Anchorage
April 15, 2023
Annual Meeting
2023 BOD Elections
& 2023 Delegate Elections

COLORADO/WYOMING

Denver
September 16, 2023
Annual Meeting
2023 BOD Elections
& 2024 Delegate Elections

GEORGIA

Savannah
March 11, 2023
Annual Meeting
2023 BOD Elections
& 2023 Delegate Elections

INDIANA

Mishawaka
March 3-4, 2023
Annual Meeting
2023 BOD Elections
& 2023 Delegate Elections

ILLINOIS

Peoria
March 11, 2023
Annual Meeting
2023 BOD Elections
& 2023 Delegate Elections

IOWA

Sioux City
March 4, 2023
Annual Meeting
2023 BOD Elections
& 2023 Delegate Elections

KANSAS

Wichita
March 11, 2023
Annual Meeting
2021-2023 BOD Elections
& 2023 Delegate Elections

KENTUCKY

Louisville
March 24-25, 2023
Annual Meeting
2022-2023 BOD Elections
& 2023 Delegate Elections

LOUISIANA

Lafayette
March 11, 2023
Annual Meeting
2023 BOD Elections
& 2023 Delegate Elections

MASSACHUSETTS

Dedham
April 29, 2023
Annual Meeting
2023 BOD Elections
& 2023 Delegate Elections

MISSOURI

Joplin
March 3-5, 2023
Annual Meeting
2023 BOD Elections
& 2023 Delegate Elections

MONTANA

Kalispell
September 9, 2023
Annual Meeting
2022-2023 BOD Elections
& 2024 Delegate Elections

NEBRASKA

Lincoln
March 4, 2023
Annual Meeting
2023 BOD Elections
& 2023 Delegate Elections

NEW MEXICO

Albuquerque
March 11, 2023
Annual Meeting
2023 BOD Elections
& 2023 Delegate Elections

NORTH CAROLINA

Concord
April 15, 2023
Annual Meeting
2023 BOD Elections
& 2023 Delegate Elections

OHIO

Lewis Center
March 17-19, 2023
Annual Meeting
2022-2023 BOD Elections
& 2023 Delegate Elections

OKLAHOMA

Yukon
March 25, 2023
Annual Meeting
2023 BOD Elections
& 2023 Delegate Elections

PENNSYLVANIA

Media
March 18, 2023
Annual Meeting
2022-2023 BOD Elections
& 2023 Delegate Elections

SOUTH CAROLINA

West Columbia
March 4, 2023
Annual Meeting
2022-2023 BOD Elections
& 2023 Delegate Elections

TENNESSEE

Chattanooga
March 4-5, 2023
Annual Meeting
2023 BOD Elections
& 2023 Delegate Elections

TEXAS

Fort Worth
March 4-5, 2023
Annual Meeting
2023 BOD Elections
& 2023 Delegate Elections

VIRGINIA

Warrenton
March 18, 2023
Annual Meeting
2023 BOD Elections
& 2023 Delegate Elections

UTAH

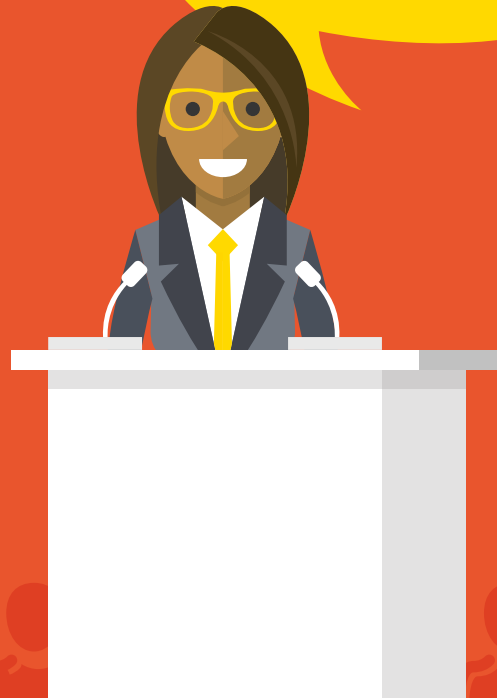
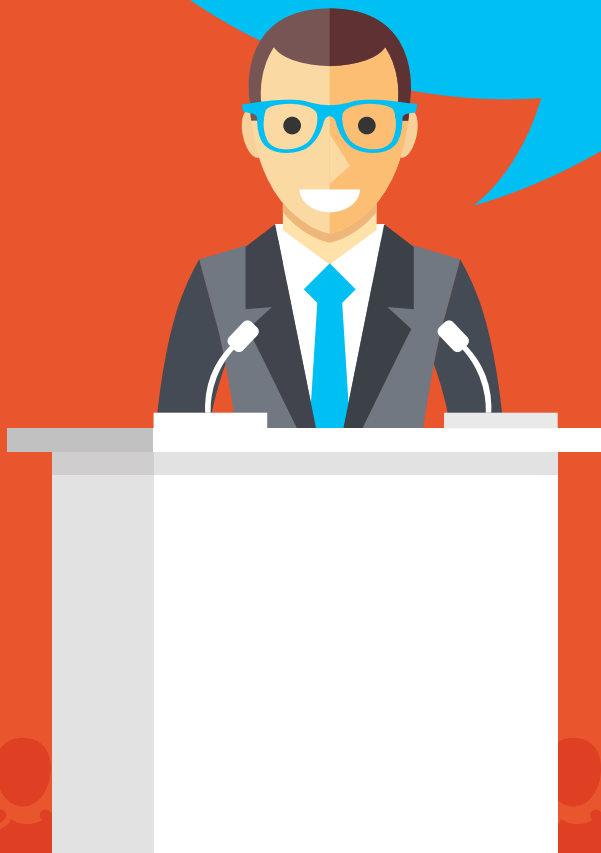
Provo
March 11, 2023
Annual Meeting
2023 BOD Elections
& 2023 Delegate Elections

Program Approvals: Submit the *State Assembly Program Date Request Form A1* no less than 120 days prior to the date(s) of the program for AST approval. The form must be received prior to first (1st) of the current month for program publication in the next month of the AST monthly journal *The Surgical Technologist*. The *Application for State Assembly CE Program Approval A2* must be received at least thirty (30) days prior to the date(s) of the program for continuing education credit approval. An application submitted post-program will not be accepted; no program is granted approval retroactively.

Contact stateassembly@ast.org or 800.637.7433, ext. 2547.

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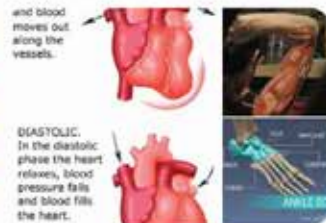
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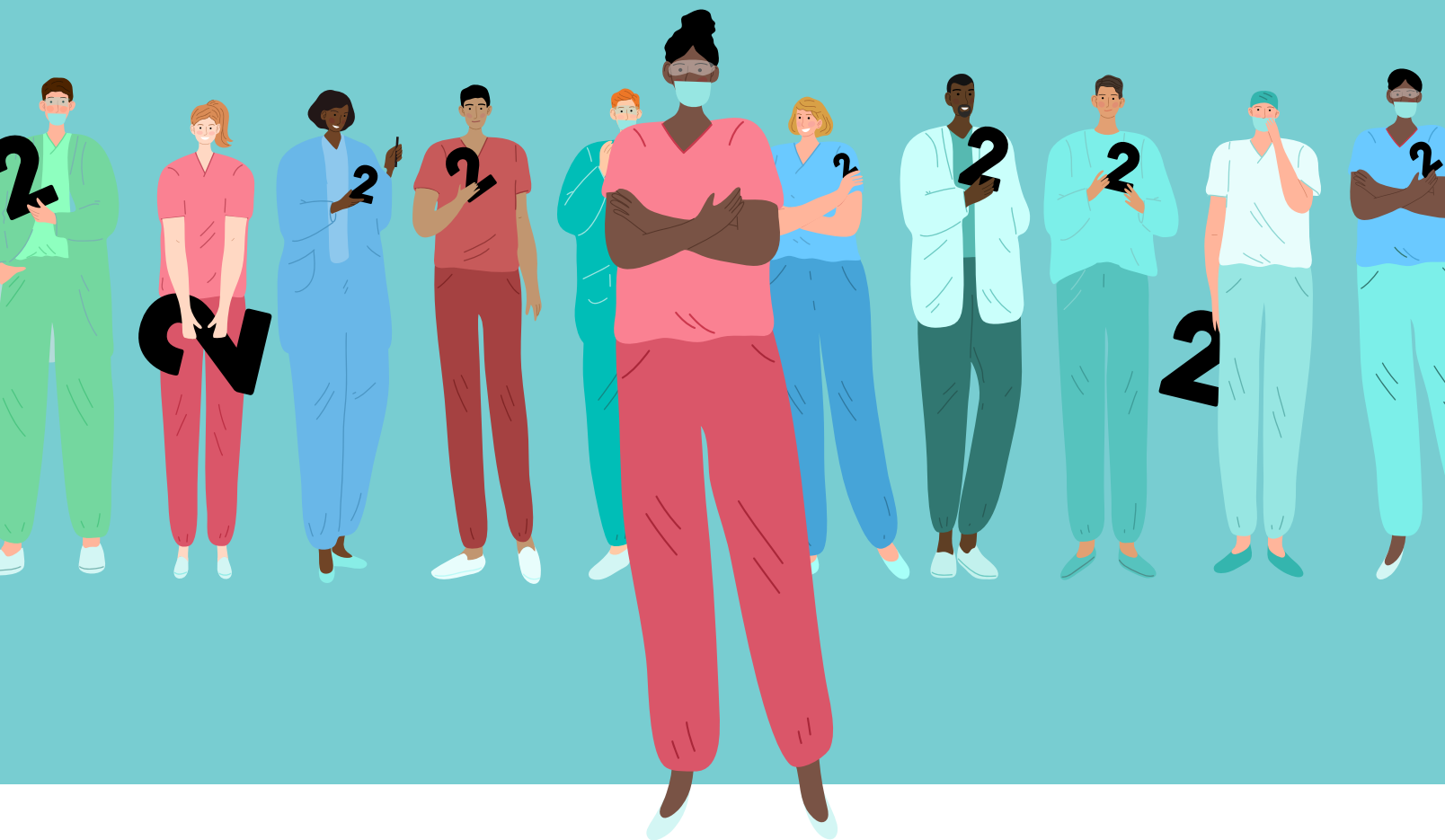


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