

June 11, 2015

Diane Jackson, APRN (Chair)
Members, 407 Technical Review Committee
c/o Matt Gelvin
Administrator, Credentialing Review Program
Department of Health and Human Services
Licensure Unit
P.O. Box 95026
Lincoln, NE 68509-5026

Dear Ms. Jackson and Members of the Committee:

The Association of Surgical Technologists (AST) is a national professional organization consisting of over 37,000 members and represents the interests of nearly 70,000 certified practitioners nationwide, including over 1,000 practitioners in Nebraska. AST respectfully submits the following comments regarding the scope of practice of surgical technologists submitted by the Applicant to the 407 Technical Review Committee as set forth in Attachments 4 and 5 to the Committee's Minutes dated May 27, 2015. AST is appreciative of the time and effort the Committee has expended in evaluating the issues of licensure of surgical assistants and registration of surgical technologists. Such regulatory oversight is both appropriate to the profession and crucial to assuring competency in the operating room in the interests of surgical patient safety for the citizens of Nebraska. AST submits these comments in the interest of achieving the most accurate and comprehensive definition of these surgical healthcare professionals.

As the Committee is aware, surgical technologists play a critical role not only in guaranteeing that surgeries proceed efficiently and effectively but also in assuring that surgical patients are protected from surgical site infections and other preventable adverse events and that hospitals do not incur unnecessary costs resulting therefrom. All aspects of the tasks and functions of a surgical technologist are consequently important to the performance of that practitioner's job.

A review of the committee's draft job description of a surgical technologist reveals several misperceptions and inaccuracies in defining the role of the surgical technologist. As a threshold matter, the committee's delineation of the jobs of Surgical Technologist ("Scrub Tech") and "Certified Surgical Technologist" set forth in Attachment 4 do not exist, either in law or surgical practice. Today, in Nebraska, a surgical technologist – whether certified or not – performs all the

tasks and functions listed in those two columns in Attachment 4. There exists no such distinction (between uncertified or certified) in any facility, anywhere. The differentiation of tasks and functions in the surgical technologist job description relates either to a clinical ladder or expanded scope based on expertise, or the differentiation between various accountabilities. For example, the assistant circulator tasks of the surgical technologist occur entirely outside the sterile field.

Making such distinctions between uncertified surgical technologists and Certified Surgical Technologist would disrupt time-honored practice in hospitals and ambulatory surgical centers in Nebraska, and would be similar to adopting a limited scope for unlicensed nurses or unlicensed physicians and an expanded scope for licensed practitioners. To reiterate, in Nebraska hospitals and ambulatory surgical centers, and in medical facilities nationwide, the job descriptions for uncertified surgical technologists and Certified Surgical Technologists are the same; and both uncertified and certified practitioners perform all these tasks at some point during a their surgery shift. To require otherwise, as the Attachments suggest, would require hospitals hire additional personnel to perform the tasks and functions that a single surgical technologist now performs in the operating room.

Moreover, even if the surgical technologist job description set forth in Attachment 4 were accurate, the scope of practice proposed by the Committee in Attachment 5 does not capture the breadth of functions customarily and routinely performed by these practitioners. AST respectfully submits that the activities listed on page 5 of Attachment be corrected to include all the activities currently identified as tasks and functions of the “Surgical Technologist” and “Certified Surgical Technologist” on pages 1-2 of Attachment 4.

Surgical Technologists Hold Retractors and Cut Sutures

The Committee’s statement that Nebraska law does not allow surgical technologists to hold retractors or to cut suture is erroneous. Holding retractors and cutting suture are fundamental technical – not medical—tasks in the role of the surgical technologist. The surgical technologist is the professional in the sterile field who holds retractors. The surgical technologist is the professional who prepares and cuts sutures. These two functions are carried out by surgical technologists in every operating room in the state (in fact, in every state) in every surgery. There is no prohibition in Nebraska that states surgical technologists may not hold retractors or cut suture. AST recognizes, and recommends the Committee appropriately recognize, that cutting sutures to assist the surgeon or surgical assistant is not suturing (which the Nebraska Department of Health and Human Services asserts is the practice of medicine), and holding a retractor (that has already been placed by the surgeon or the surgical assistant) is not manipulating that instrument. There is no prohibition in Nebraska, or elsewhere, that limits these two essential surgical technologist functions. Moreover, to do so would necessitate employment of an additional practitioner in the operating room to perform those two functions, as the surgeon and/or surgical assistant cannot simultaneously suture and cut suture materials, or hold the retractor and continue the surgical procedure.

Surgical Technology Tasks Should Not Be Included in Surgical Assistant Scope of Practice

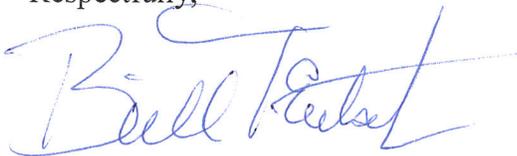
The proposed surgical assistant scope of practice set forth in Attachment 5, entitled *Surgical Suite Occupations Scopes of Practice, Proposed Registry & Exemptions*, erroneously includes surgical *technology* tasks.

Attachment 5, *Surgical Suite Occupations Scopes of Practice, Proposed Registry & Exemptions*, includes positioning the patient, preparing and draping the patient, providing visualization to the operative site and applying appropriate wound dressings in the surgical assistant job description. Surgical technologists assist in positioning the patient, preparing and draping the patient, providing visualization of the operative site and applying appropriate wound dressings.

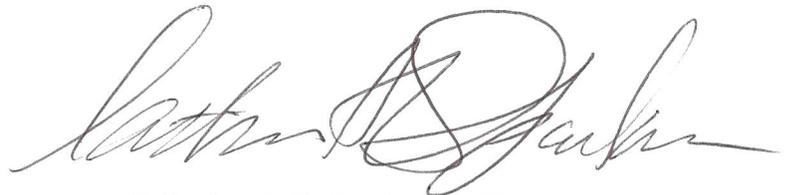
Including these tasks in the surgical assistant license and scope of practice would prevent surgical technologists from performing these functions. Currently, surgical technologists are present for every surgery, beginning to end, but surgical assistants are only present for complex surgeries, as identified by the American College of Surgeons. Including surgical technologist tasks in the surgical assistant job description would have the effect of both preventing surgical technologists from performing routine tasks that are historically and currently part of their job as well as forcing hospitals and ambulatory surgical centers to hire surgical assistants for every surgery. Positioning the patient, preparing and draping the patient, providing visualization of the operative site and applying appropriate wound dressings should not be included in the surgical assistant job description.

In conclusion, the full complement of tasks and functions of surgical technologists must be appropriately identified in their job description in order to continue the safe, efficient, effective and competent jobs surgical technologists perform in all surgeries in Nebraska. None of these tasks and functions has ever been declared the practice of medicine, either in Nebraska or elsewhere. To do otherwise would fly directly in the face of current hospital procedure and would require hiring additional individuals to perform various tasks in the same surgical procedure, resulting in increased costs, unnecessary duplication, clinical inefficiencies, and surgical patient risk.

Respectfully,



Bill Teutsch, CAE, FASAHP
CEO/Executive Director
Association of Surgical Technologists



Catherine A.G. Sparkman, JD
Director, Government and Public Affairs
Association of Surgical Technologists