Prepared By: The Professional Staff of the Health Regulation Committee

BILL: CS/SB 362

INTRODUCER: Health Regulation Committee and Senators Lynn and Garcia

SUBJECT: Surgical Technology

DATE: February 16, 2012   REVISED:

	ANALYST	STAFF DIRECTOR	REFERENCE		ACTION
1.	Davlantes	Stovall	HR	**Fav/CS**	
2.			BC		
3.					
4.					
5.					
6.					

Please see Section VIII. for Additional Information:

A. COMMITTEE SUBSTITUTE..... [X] Statement of Substantial Changes
B. AMENDMENTS....................... [ ] Technical amendments were recommended
                                     [ ] Amendments were recommended
                                     [ ] Significant amendments were recommended

I.   Summary:

The bill provides a definition for surgical technologist and requires hospitals, ambulatory surgical centers, and mobile surgical facilities to hire surgical technologists who fulfill certain educational and national certification requirements, with some exceptions.

This bill amends s. 395.0191, F.S.

II.   Present Situation:

Role of Surgical Technologists

Surgical technologists, also called scrubs or operating room technicians,[1] work under the supervision of surgeons to ensure that the operating room environment is safe, that equipment functions properly, and that the operative procedure is conducted under conditions that maximize patient safety. Surgical technologists are trained in aseptic technique and combine the knowledge of human anatomy, surgical procedures, and implementation tools and technologies to facilitate a

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[1] United States Department of Labor, Bureau of Labor Statistics, *Occupational Outlook Handbook, 2010-11 Edition: Surgical Technologists*, available at: http://www.bls.gov/oco/ocos106.htm (last visited on November 10, 2011).

physician's performance of invasive therapeutic and diagnostic procedures.[2] Currently, no statutes or rules are in place to regulate the practice of surgical technology in Florida.

The Association of Surgical Technology (AST) is the oldest and most recognized professional organization for surgical technologists and surgical assistants. The AST was established in 1969 by members of the American College of Surgeons, the American Hospital Association, and the Association of Perioperative Registered Nurses to ensure that surgical technologists and surgical assistants have the knowledge and skills to administer patient care of the highest quality. Some of the AST's duties include creating and administering national certification procedures for surgical technologists, providing continuing education for such certification, working with national accrediting committees to establish standards for training programs, and advocating the interests of surgical technologists to government entities.[3]

The AST has published national guidelines for the scope of practice of surgical technologists.[4] It designates three different categories of technologist, each with different functions. A scrub technologist maintains sterility and handles necessary instruments, supplies, and equipment during a surgical procedure. A circulating technologist assists the circulating nurse in obtaining additional instruments, supplies, and equipment during the procedure. A second assisting technologist maintains sterility and assists the surgeon and the surgeon's first assistant during the procedure. More detailed duties are as follows:

- Scrub technologist
  - Check supplies and equipment needed for the surgical procedure.
  - Scrub, gown, and glove.
  - Set up the sterile table with instruments, supplies, equipment, and medications needed for the procedure.
  - Perform appropriate counts with the circulator prior to the operation and before the incision is closed.
  - Gown and glove the surgeon and assistants.
  - Help in draping the sterile field.
  - Pass instruments to the surgeon during the procedure.
  - Prepare sterile dressings.
  - Clean and prepare instruments for terminal sterilization.
  - Assist other members of the surgical team with terminal cleaning of the operating room.
  - Assist in preparing the operating room for the next patient.
- Circulating technologist
  - Obtain appropriate sterile and unsterile items needed for the procedure.
  - Open sterile supplies.
  - Check the patient's chart, identify the patient, verify the surgery to be performed with consent forms, and bring the patient to the assigned operating room.
  - Transfer the patient to the operating table.
  - Assess the patient's comfort and safety and provide verbal and tactile reassurance.
  - Assist anesthesia personnel.

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[2] AST, *Job Description: Surgical Technologist*, available at: http://www.ast.org/professionals/documents/2009_Surgical_Technologist_Job_Description_10.6_Final.pdf (last visited on November 10, 2011).

[3] AST, *About Us,* available at : http://www.ast.org/aboutus/about_ast.aspx (last visited on November 10, 2011).

[4] *Supra* fn. 2.

- o Position the patient, using appropriate equipment.
- o Apply electrosurgical grounding pads, tourniquets, monitors, etc., before the procedure begins.
- o Prepare the patient's skin prior to draping by the surgical team.
- o Perform appropriate counts with the scrub nurse or technologist prior to the operation and before the incision is closed.
- o Anticipate additional supplies needed during the procedure.
- o Keep accurate records throughout the procedure.
- o Properly care for specimens.
- o Secure dressings after incision closure.
- o Help transport the patient to the recovery room.
- o Assist in cleaning the operating room and in preparing for the next patient.
- Second assisting technologist
  - o Hold retractors or instruments as directed by the surgeon.
  - o Sponge or suction the operative site.
  - o Apply electrocautery to clamps on bleeding blood vessels.
  - o Cut suture material as directed by the surgeon.
  - o Connect drains to suction apparatus.
  - o Apply dressings to the closed wound.

Education and Certification

Surgical technologists must have a high school degree or equivalent and complete a training program accredited by the Commission on Accreditation of Allied Health Education Programs or the Accrediting Bureau of Health Education Schools. The training program includes classroom education in anatomy, microbiology, pharmacology, ethics, medical terminology, and other topics as well as supervised clinical experience. Surgical technologist training lasts from 9-24 months and culminates in a certificate, diploma, or associate's degree.

Professional certification is not required for employment as a surgical technologist, although most employers prefer to hire only certified individuals. Professional certification is available through the AST as a Certified Surgical Technologist (CST).[5] Requirements for CST designation include graduation from an accredited surgical technology program (with special exceptions for military-trained technologists), payment of fees, and passage of an examination offered by the National Board of Surgical Technology and Surgical Assisting (NBSTSA).[6] CST certification is valid for 4 years; to renew, an individual must either retake and pass the NBSTSA examination required for initial certification or complete 60 hours of continuing education. A renewal fee is also required.[7]

National certification may also be obtained from the National Center for Competency Testing (NCCT),[8] which awards the "Tech in Surgery-Certified (NCCT)" designation. Applicants must

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[5] *Supra* fn. 1.
[6] NBSTSA, *CST Examinations*, available at: http://nbstsa.org/examinations-cst.html (last visited on November 10, 2011).
[7] NBSTSA, *Renewal Options,* available at: http://nbstsa.org/renewal/index.html (last visited on November 10, 2011).
[8] The NCCT is an independent entity which provides competency examinations and certifications for a variety of allied health professions, including medical assistants, phlebotomy technicians, patient care technicians, surgical technologists, and

graduate from an NCCT-approved surgical technology program, complete required practical experience, and pass the organization's certification exam. Applicants who did not graduate from an approved surgical technology program may also qualify for certification if they have accrued some amount of practical experience, which varies depending on the situation. Passage of the examination and payment of fees is still required, however.[9] NCCT certification must be renewed annually by completing 14 hours of continuing education and paying a recertification fee.[10]

Currently, there are approximately 4,800 surgical technologists employed in Florida. Of these, 3,450 are CSTs, and a few dozen hold the Tech in Surgery-Certified (NCCT) designation.[11]

III.   Effect of Proposed Changes:

Section 1 amends s. 395.0191, F.S., to require each licensed hospital, ambulatory surgical center, and mobile surgical facility to establish policies and procedures for the employment of surgical technologists. A definition of "surgical technologist" is also given.

Each licensed facility may only consider for such employment a person who has successfully completed a surgical technologist training program accredited by the Accrediting Bureau of Health Education Schools or the Commission on Accreditation of Allied Health Education Programs and holds certification as a surgical technologist from an organization recognized by the National Commission for Certifying Agencies (such certification must be maintained throughout employment at the facility. Licensed facilities may continue to employ persons who do not meet these requirements but were working as surgical technologists on October 1, 2012. Licensed practitioners subject to ch. 456, F.S., or students may also be used as surgical technologists if they are appropriately trained and only perform duties within their scope of practice.

Section 2 provides an effective date of October 1, 2012.

IV.   Constitutional Issues:

A.   Municipality/County Mandates Restrictions:

The provisions of this CS have no impact on municipalities and the counties under the requirements of Article VII, Section 18 of the Florida Constitution.

B.   Public Records/Open Meetings Issues:

The provisions of the CS have no impact on public records or open meetings issues under the requirements of Article I, Section 24(a) and (b) of the Florida Constitution.

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medical office assistants. It is not a professional organization. (Source: NCCT, *National Center for Competency Testing* (*NCCT),* http://www.ncctinc.com/General/, last visited November 10, 2011).
[9] NCCT, *Certification Information*, available at: http://www.ncctinc.com/Certifications/ (last visited on November 10, 2011).
[10] NCCT, *Recertification/CE*, available at http://www.ncctinc.com/CE/ (last visited on November 10, 2011).
[11] Email correspondence with the Florida State Assembly of the Association of Surgical Technologists. A copy of this correspondence is on file with the Senate Health Regulation Committee.

C.   Trust Funds Restrictions:

The provisions of this CS have no impact on the trust fund restrictions under the requirements of Article III, Subsection 19(f) of the Florida Constitution.

V.   Fiscal Impact Statement:

A.   Tax/Fee Issues:

None.

B.   Private Sector Impact:

Surgical technologists who do not meet any of the eligibility requirements in this bill will be unable to practice in Florida.

C.   Government Sector Impact:

None.[12]

VI.   Technical Deficiencies:

None.

VII.   Related Issues:

None.

VIII.   Additional Information:

A.   Committee Substitute – Statement of Substantial Changes:
(Summarizing differences between the Committee Substitute and the prior version of the bill.)

CS by Health Regulation on February 16, 2012:
The CS provides a definition for surgical technologist and requires hospitals, ambulatory surgical centers, and mobile surgical facilities to hire surgical technologists who fulfill certain educational and national certification requirements, with some exceptions.

B.   Amendments:

None.

This Senate Bill Analysis does not reflect the intent or official position of the bill's introducer or the Florida Senate.

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[12] Per correspondence with the Department of Health. A copy of the email is on file with the Senate Health Regulation Committee.