The Surgical Technology certificate is a **full-time, 3-semester** program, which meets Monday through Wednesday during the day in the spring semester, two 8-hour days per week for six weeks in the summer and Monday through Thursday during the day and/or evening in the fall semester. Note: Hours and days are subject to change according to scheduling needs.

**Prerequisites**
- **Nursing 151** - Body Systems Survey for Health Professionals or Anatomy (BIO210) or Physiology (BIO220).
- **Nursing 155** – Basic Medical Terminology
- **Pharmacology 100** – Basic Pharmacology.
  **Please note:** the prerequisite for PHAR100 is MATH20 or qualification through the Math Competency Exam.

**Career Opportunities**
Surgical technologists are allied health professionals, who are an integral part of the team of medical practitioners providing surgical care to patients in a variety of settings. The surgical technologist works under the supervision of a surgeon to ensure that the operating room environment is safe, the equipment functions properly, and the operative procedure is conducted under conditions that maximize patient safety.

The Surgical Technology Program will prepare individuals to work primarily in the operating room. Employment opportunities are also available in surgical centers, labor and delivery rooms, cast rooms, emergency departments, ambulatory care areas and central supply departments. According to the Association of Surgical Technologists, the average salary for surgical technologists in the State of California is $35,000 - $40,000 annually.

**Certificate/Associate Degree**
Upon completion of the program, students will earn a 38-unit certificate in surgical technology. Students may receive a 60-unit associate degree upon completion of additional general education course and other requirements as listed in the college catalog. Students are discouraged from working full-time while enrolled in this program.

To be eligible for the MiraCosta College Surgical Technology Program applicants must be 17 years of age or older and have the following:
- Official transcripts of high school graduation OR an official transcript of a bachelor’s or associate degree from an accredited college (transcript request from is available in packet) OR official score report for GED or High School Proficiency Examination. If you are not a high school graduate, or do not have a record of GED, your application will be considered incomplete. Foreign transcripts must be evaluated by [http://www.iervf.org/](http://www.iervf.org/) to show U.S. equivalency of 12th grade education. The Admissions & Records Office does not validate foreign transcripts;
- Official transcripts of prerequisite courses;
- American Heart Association Healthcare Provider BLS with AED CPR card;
- MCC Surgical Technology Physical examination form;
- TB clearance; and
- Proof of the following immunizations:
  - Tetanus/diptheria (every 10 years)
  - Mumps – 2 doses or titer
  - Measles (Rubeola) - 2 doses or titer
  - German Measles (Rubella) – 2 doses or titer
  - Chicken Pox (Varicella zoster) - 2 doses or titer
  - Hepatitis B (at least 1 dose of the 3-dose series completed) or titer or signed waiver

**ALL nursing students in ALL programs will be required to complete the background check and urine drug screen BEFORE BEGINNING THE NURSING PROGRAMS IN SAN DIEGO - THIS IS A HOSPITAL/HEALTH CARE AGENCY REQUIREMENT.** Students will be given the information to obtain these requirements at the orientation and advisement. Background Check - American Data Bank (ADB) [http://sdnsebackground.com/](http://sdnsebackground.com/)

**Application Process**
Applications are accepted on an on-going basis and students will be added to the established list. Complete applications packets must be submitted in person to the Allied Health Secretary in Bldg. T420. **Please call 760 795-6796 if you wish to make an appointment prior to submission.**
Students on the wait list are responsible for insuring that their applications are kept current. Any student on the wait list whose packet is not up to date will be removed from the wait list and will need to reapply.

**Expenses**
Students who are California residents should plan to spend approximately $1,800.00 for tuition, fees, supplies, uniforms, books, a background screening test, and test fees. Since the clinical portion of the program may be offered at hospitals and clinical facilities in North San Diego, Riverside and Orange Counties, students must have reliable transportation to these sites and should budget for these expenses. Scholarships and loans are available for qualified students. Contact the Financial Aid Office for further details.

**Contact:** Call the information line at (760) 795-6842 to request information be mailed to you. Eligibility requirements, application process, and application packets are also available on the web at [www.miracosta.edu/Instruction/Surgicaltechnology/index.htm](http://www.miracosta.edu/Instruction/Surgicaltechnology/index.htm) and in the Admission & Records office.

**Courses listed in this flyer are subject to change. Please check requirements with the department chair or MiraCosta College counselor. MiraCosta College is committed to providing equal education not limited to, race, color, religion, national origin, gender, marital or parental status, disability, age, sexual orientation or status as a Vietnam-era veteran. Individuals with verifiable disabilities may be accommodated with advance notice. Rev.09/12**
MIRACOSTA COLLEGE SURGICAL TECHNOLOGY PROGRAM
CHECK OFF LIST

NAME________________________________________________________STUDENT ID NO. ________________
LAST FIRST MIDDLE

ADDRESS _____________________________________________________________________________________
NUMBER AND STREET    CITY/STATE   ZIP

PHONE _________________________________________EMAIL _________________________________________

EMERG. PHONE_________________________________NAME/RELATIONSHIP_________________________________

Application Packet Check Off List:

☐ Proof of high school graduation by official high school transcript or GED OR High School Proficiency Examination results OR transcript of Bachelor’s or Associate’s degree from U.S. school. (Foreign transcripts must be evaluated by an MCC approved evaluation agency to show U.S. equivalency.)

☐ Official Transcripts of Prerequisites with passing grade of “C” or better. A Preliminary Report of Semester Grades form with the college seal will be accepted at time of application, but must be followed up with an official transcript when available.

☐ CPR card – American Heart Association Health Care Provider BLS with AED designation.

☐ Proof of TB Clearance or a negative Chest X-Ray with annual review of symptoms form completed thereafter.

☐ MCC Surgical Technology Physical Examination Form (completed within 1 year prior to enrollment in the Surgical Technician Program)

☐ Proof of the Following Immunizations:
  ☐ Tetanus/diphtheria – TDAP (every 10 years)
  ☐ Mumps – 2 doses or titer
  ☐ Measles (Rubeola) - 2 doses or titer
  ☐ German Measles (Rubella) – 2 doses or titer
  ☐ Chicken Pox (Varicella zoster) - 2 doses or titer
  ☐ Hepatitis B (at least 1 dose of the 3-dose series completed) or titer or signed waiver

FOR OFFICIAL USE ONLY:

I AM CURRENTLY ON THE WAIT LIST TO ATTEND THE SPRING 20_____ SEMESTER OF THE SURGICAL TECHNICIAN PROGRAM.

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Date</th>
<th>Renew/Exp Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>AHA CPR BLS w/AED</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TB or Chest XRay (renew annually)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physical (completed within 1 year prior to enrollment into the program)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The requirements listed above must be kept current in order for my application for the Surgical Technician Program to remain active. Failure to do so will result in being removed from the waiting list.

REC’D BY: ____________________________________________
Date    Time

Applicants Signature: ____________________________________________
Student’s/Patient’s Name: ___________________________ Date of Birth: ____________

Date of this physical examination: ________________________

Medical History
Do you have or have had in the past:

<table>
<thead>
<tr>
<th>Condition</th>
<th>Yes</th>
<th>No</th>
<th>If yes, please explain</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seizures or neurological disorder(s)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Eye, ear, nose or throat disorder(s)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diabetes, thyroid or other endocrine disorder(s)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Muscle, bone or joint disorder(s)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Asthma or respiratory disorder(s)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Heart or circulation disorder(s)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Skin disorder</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gastrointestinal disorder(s)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Psychiatric disorder(s)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Previous Hospitalizations or Surgical History (date and reason):
________________________________________________________________________________________
________________________________________________________________________________________

Current Medications: ______________________________________________________________________

Negative T.B. is required. Please submit lab results.

Is patient currently pregnant? □ Yes □ No

Allergies: ______________________________________________________________________________

Physical Examination This is a physical evaluation for occupational ability and is not to be interpreted as a diagnostic medical examination. The Essential Functions Required of Surgical Technician Students (page 2) must accompany this form.

Height: ______ Weight: ______ B/P ________ P ________
Ears, nose, and throat: ____________________________________________
Neck: ____________________________________ Lymph Nodes: ________________________________
Skin: ___________________________________________________________________________________
Heart: ____________________________________ Lungs: ________________________________
Abdomen: _______________________________________________________________________________
Extremities: ____________________________________________________________________________
Neurological: __________________________________________________________________________

Can this student perform the essential motor and sensory functions (see page 2 of form) required of nursing students? □ Yes □ No If no, please explain on reverse side.

Physician’s Signature: ____________________________________________________________________ Date

Name typed or printed: ____________________________________________________________________
Address: ________________________________________________________________________________
ESSENTIAL FUNCTIONS
REQUIRED OF SURGICAL TECHNICIAN STUDENTS

MOTOR CAPABILITY:
1. Move from room to room and maneuver in small places.
2. Transfer patients who may require physical assistance.
3. Guard and assist patients with ambulation.
4. Lift and carry up to 50 pounds and exert up to 100 pounds force for push/pull.
5. Squat, bend/stoop, reach above shoulder level, kneel, use standing balance, and climb stairs.
6. Use hands repetitively; use manual dexterity.
7. Adjust, apply, and clean therapeutic equipment.
8. Perform CPR
9. Travel to and from academic and clinical sites.
10. In the average clinical day, students sit 1-2 hours; stand 6-7 hours, travel 1-2 hours.

SENSORY CAPABILITY:
1. Coordinate verbal and manual instruction.
2. Assess a patient 10 feet away to observe patients posture and response to treatment.
3. Respond to a timer, alarm, or cries for help.
4. Monitor vital signs.
5. Auditory, visual, and tactile ability sufficient to assess patient status and perform treatments (Example: color changes in skin, hear heart and lung sounds.

COMMUNICATION ABILITY:
1. Communicate effectively in English with patients, families, and other health care providers, both verbally and in writing (Example: explain treatment procedures, teach patient and families, document in charts).
2. Effectively adapt communication for intended audience.
3. Interact and establish rapport with individuals, families, and groups from a variety of social, emotional, cultural and intellectual backgrounds.
4. Assume the role of a health care team member.
5. Function effectively under supervision.
6. Sensitivity to and understanding of the needs of the patient as well as other members of the surgical team, with a strong desire to help others and make a valuable contribution to society.
7. Stable temperament and strong sense of responsibility.

PROBLEM SOLVING ABILITY:
1. Function effectively under stress.
2. Respond effectively to emergencies and keep attention focused.
3. Adhere to infection control procedures.
4. Demonstrate problem-solving skill in patient care (measure, calculate, reason, prioritize, synthesize data).
5. Use sound judgment and safety precautions.
6. Address problems or questions to the appropriate person at the appropriate time.
7. Organize and prioritize tasks in stressful and emergency situations.
8. Follow policies and procedures required by clinical and academic settings.
9. Ability to work quickly and accurately with a commitment to detail and focused attention.

WORKING CONDITIONS:
1. The Operating Room is a brightly lit, relatively quiet and temperature controlled environment.
2. Frequent exposure to communicable diseases, unpleasant sights, odors, and hazardous materials.
3. Most surgical procedures are carried out during the day and a 40-hour workweek is common. The Surgical Technician may be required to work the evening or night shift, weekends, holidays, and periodically take "call" (be available to work on short notice in case of emergency).