

**DEPARTMENT OF SURGERY
ALLIED HEALTH ACTIVITY CHECKSHEET**

NON-PHYSICIAN SURGICAL ASSIST

Name: _____ New appointment Reappointment
Please Print Name privileges approved through _____

- RN FIRST ASSIST** **CERTIFIED FIRST ASSIST** **CERTIFIED SURGICAL ASSIST**
 CERTIFIED RNFA **Independent** **Associated with** _____

Req	App	Functions
✓	✓	ROUTINE FUNCTIONS
		Assist with positioning and patient preparation
		Assist with or drape surgical field
		Incise tissue
		Provide surgical field exposure
		Assist with maintaining a dry surgical field
		Clamp, cauterize and/or ligate bleeders
		Assist with the identification of anatomical structures
		Assist with or perform wound closure
		SPECIAL PROCEDURES
		Documentation of training/expertise must be provided. Observation required. Refer to attached criteria. Limited to RNFAs only.
		Date Unobserved
		Vein harvesting (RFNA only)
		Endoscopic vein harvesting (RNFA only)
		OTHER (please specify)

I understand that I am required to follow John C. Lincoln Hospital – Deer Valley policy regarding scrubs and gowns for surgical procedures, and will utilize surgical instrumentation for the purpose they were intended.

Signature - Requesting Non-Physician Surgical Assist _____
Date

Collaborating/Sponsoring Physician – As sponsoring physician of the applicant, I understand it is my responsibility to ensure that the applicant abides by the Medical Staff Bylaws, Rules and Regulations, and/or any policies and procedures established by the Hospital, and practices within the scope of his/her privileges.

Name of Collaborating/Sponsoring Physician (Please Print) _____
Date

Signature of Collaborating/Sponsoring Physician _____
Specialty of Collaborating/Sponsoring Physician

APPROVED BY:	DATE
Credentials Committee Chairman/Designee	
Department of Surgery Chairman/Designee	

Date: _____ Date: _____ Date: _____
Credentials approval Medical Executive approval Board of Directors approval

DEPARTMENT OF SURGERY
ALLIED HEALTH PROFESSIONAL
PRACTICE GUIDELINES – POSITION SUMMARY
NON-PHYSICIAN SURGICAL ASSISTANTS
Certified RNFA - RN First Assist – Certified First Assist – Certified Surgical Assist

DEFINITION

A First Assist is an individual, other than a physician, capable of actively assisting the surgeon in the performance of approved surgical procedures, who works under the direct supervision of and by the request of the operating surgeon.

The First Assist must be able to facilitate, expedite and participate in surgical procedures, lending technical input. A First Assist may be one of the following:

1. Registered Nurse First Assistant (RNFA);
2. Certified Surgical Assist (CSA); or
3. Certified First Assist (CFA)

QUALIFICATIONS

A. Completion of a recognized program* which provides knowledge of related didactic and clinical skills.

Asepsis and sterile technique	Infection control
Anatomy and physiology	Operative technique
Surgical instrumentation and its appropriate use	Sutures and suturing technique
BCLS (CPR)	Electrosurgical safety
Draping procedures and technique	Positioning and body alignment

* These programs may include, but are not limited to:
AORN First assistant certification program
BOMEX Physician Assistant certification
Surgical Assistant collegiate program.

B. In lieu of a recognized program, certification by one of the following:
American Board of Surgical Assistants
National Surgical Assistant Association
Association of Surgical Technologists (First assistant exam)

C. Proof of current and continuous malpractice insurance in the amount of \$1,000,000 minimum.

CRITERIA FOR VEIN HARVESTING – Limited to RNFAs only

1. Attendance at an approved course for vein harvesting, with certificate of proof of course completion;
OR
Written documentation of direct supervision and direct instruction of ten (10) cases
2. **OBSERVATION REQUIREMENT:** Once approved, three (3) cases must be observed by the surgeon of record.

CRITERIA FOR ENDOSCOPIC VEIN HARVESTING – Limited to RNFAs only

1. Unobserved vein harvesting privileges **AND** Attendance at an approved course for endoscopic vein harvesting, with certificate of proof of course completion
2. **OBSERVATION REQUIREMENT:** Once approved, three (3) endoscopic cases must be observed by the surgeon of record.