

ABSA SURGICAL ASSISTANT SCOPE OF PRACTICE

35+ Years of Excellence to the Surgical Community



American Board of Surgical Assistants
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Role of an ABSA Certified Surgical Assistant

The ABSA surgical assistant designation is: Surgical Assistant – Certified (SA-C).

Surgical Assisting involves active participation of a trained individual who is capable and able to assist the surgeon in completing a surgical procedure, safely and expeditiously. A surgical assistant functions in the role of a second physician, at the operating table.

We acknowledge that the role and function of a surgical assistant is to assist the surgeon in the performance of a surgical procedure.

It is understood and acknowledged that certification as a surgical assistant through the ABSA does not allow for any independent performance of any medical or surgical procedures, within the United States of America or its territories.

Anyone found guilty of “Practicing Medicine Without a License,” in the United States of America or its territories, either by court trial or plea agreement, will lose their certification and never be eligible to certify with the ABSA again.

Certification as a Surgical Assistant-Certified (SA-C) by the American Board of Surgical Assistants does not convey blanket certification or authorization as a surgical technologist (Surgical scrub / scrub tech or scrub nurse). Surgical assistants and surgical technologists are two separate and distinct positions each having separate training, certifications and designations.

American Board of Surgical Assistant Code of Ethics

As an ABSA Surgical Assistant–Certified (SA-C) ...

I pledge to pursue and uphold the highest attainable ethical standards.

I will place the physical and psychological well-being of my patients above all else.

I will continue to improve my medical knowledge and surgical skills.

I will conduct myself in a manner that is honest and above reproach, always, especially when dealing with my patients, colleagues, and medical staff.

I will assist my colleagues when requested and will seek their guidance when my own abilities are in doubt.

Finally, I will support and strive to advance the objectives and goals of the surgical profession and specifically those of the **American Board of Surgical Assistants**

American College of Surgeons (ACS) Definition

The first assistant in a surgical operation should be a trained individual who is able to participate in and actively assist the surgeon in completing the operation safely and expeditiously by helping to provide exposure, maintain hemostasis, and serve other technical functions. The qualifications of the person in this role may vary with the nature of the operation, the surgical specialty, and the type of hospital or ambulatory surgical facility.

The American College of Surgeons supports the concept that, ideally, the first assistant at the operating table should be a qualified surgeon or a resident in an approved surgical training program. Residents who have appropriate levels of training should be provided with opportunities to assist and participate in operations. If such assistants are unavailable, other physicians who are experienced in assisting may participate.

It may be necessary to have nonphysicians serve as first assistants. Surgeon assistants (SAs) or physician assistants (PAs) with additional surgical training should meet national standards and be credentialed by the appropriate local authority. These individuals are not authorized to operate independently. Formal application for appointment to a hospital as a SA or PA should include the following qualifications and credentials:

- Specification of which surgeon the applicant will assist and what duties that will be performed.
- Indication of which surgeon will be responsible for the supervision and performance of the SA or PA.
- Review and approval of the application by the hospital board.
- Registered nurses with specialized training may function as first assistants. If such a situation should occur, the size of the operating room team should not be reduced; the nurse assistant should not simultaneously function as the scrub nurse and instrument nurse when serving as the first assistant. Nurse assistant practice privileges should be granted based upon the hospital board's review and approval of credentials. Registered nurses who act as first assistants must not have responsibility beyond the level defined in their state nursing practice act.

Surgeons are encouraged to participate in the training of allied health personnel. Such individuals perform their duties under the supervision of the surgeon.

U.S. Bureau of Labor Statistics, Standard Occupational Classification

U.S. Bureau of Labor Statistics, Standard Occupational Classification (2018) 29-9093 Surgical Assistants

Assist in operations, under the supervision of surgeons. May, in accordance with state laws, help surgeons to make incisions and close surgical sites, manipulate or remove tissues, implant surgical devices or drains, suction the surgical site, place catheters, clamp or cauterize vessels or tissue, and apply dressings to surgical site. Excludes “Registered Nurses” (29-1141) and “Surgical Technologists” (29-2055).

Essential Functions and Knowledge

These are essential functions; however, they may not be all inclusive or limited by the guidelines and or directions of the primary surgeon or medical facility.

The ABSA Surgical Assistant - Certified (SA-C) is responsible to the primary surgeon on the surgical procedure.

1. Identify and access patient information.
2. Assist in proper patient positioning & padding, per surgeon preference.
3. Properly identify and place radiological studies.
4. Placement of pneumatic tourniquet.
5. Assist anesthesia as needed.
6. Urinary catheter placement.
7. Prepping of the surgical site.
8. Drapes patient within surgeon's guidelines.
9. Assists in maintaining hemostasis, as directed by the surgeon.
10. Assist in retracting tissues per surgeon's directive.
11. Use of electrocautery both monopolar and bipolar devices.
12. Clamp, ligation and cutting of tissue, per surgeon's directive.
13. Insertion of trocars, as directed by the surgeon.
14. Use of appropriate suturing and or stapling devices.
15. Assist in placement and suturing of surgical drains.
16. Closure of all wound layers (fascia, subcutaneous and skin) as per surgeon's directive.
17. Prepare various grafts, as directed by the surgeon.
18. Assists in Laparoscopic & Endoscopic surgical procedures with camera and instrumentation.
19. Assists in General surgical procedures.
20. Assists in Gynecological surgical procedures.
21. Assists in Neurological surgical procedures.
22. Assists in Vascular surgical procedures.
23. Assist in Cardio-thoracic surgical procedures.
24. Assists in Orthopedic surgical procedures both open or arthroscopic.
25. Assists in Plastic/Reconstructive surgical procedures.
26. Assists in ENT surgical procedures.
27. Assists in Robotic surgical procedures.
28. Assists with CPR of patient, during a cardiac arrest.
29. Maintains and updates knowledge of surgical instrumentation and equipment.
30. Maintain an extensive knowledge of anatomy and physiology.
31. Must be able to gown and glove self, using open or closed gloving technique.
32. Demonstrate knowledge of aseptic technique in relation to the procedure and the operating field.
33. Demonstrate knowledge of OSHA and HIPAA policies and procedures.

Other Responsibilities

1. Understanding and familiarization with upcoming procedures.
2. Performs other related duties, as determined by the primary surgeon.
3. Work independently and/or codependently with the primary surgeon or their designee.
4. Maintains established company/ hospital policies, procedures, directives, quality assurance, safety, environmental and infection control standards, appropriate to this position.
5. Demonstrates an understanding of and models the mission and core values of the ABSA through behavior and attitude.
6. May take call after assigned working hours to assist attending surgeons in urgent or emergency surgical procedures.
7. Continue to improve medical knowledge and surgical skills through continuing medical education.

Physical, Mental, Environmental Requirements

In all cases of physical requirements, appropriate reasonable accommodations should and will be considered, whenever possible, to allow position incumbent to accomplish identified essential functions in an alternate manner.

Physical Ability to walk or stand for up to 80% of work time, and to push /pull equipment weighing up to approximately 40 pounds for up to 20% of work time.

Mental Position is stressful due to the nature of the work itself, due to dealing with others on the job, and irregular hours.

Environment Position involves exposures to blood and body fluids, and all areas of patient care. Also exposed to cool temperatures, hazardous equipment, fumes / odors and noise.