



Surgical Technology Student Clinical Manual



CLINICAL GUIDELINES

Latex allergy can be a serious health problem. Latex is used frequently in the lab and clinical areas. If you have been diagnosed with a latex allergy, please bring a copy of the physician's report. All latex free supplies will be purchased by the student at the student's expense. The instructor will provide information about ordering these supplies.

You have purchased a health care insurance policy with your student fees. Read the information and be familiar with what it covers. Outside of this policy, any health expense is totally your responsibility. Clinical sites are not responsible for taking care of illness or injury.

MISCELLANEOUS INFORMATION:

- No food or drink will be allowed in the clinical area, classroom or lab at any time.
- No children will be allowed in the clinical area, classroom, lab, hallways or offices.
- Student ID badge **MUST** be worn at all times.
- Substantial evidence exists that smoking is unhealthy for those who smoke and for nonsmokers exposed to secondary smoke. In an effort to create a healthier environment for students, faculty and staff, all areas of Columbus Technical College are tobacco-free. Tobacco use is prohibited inside and outside all buildings, in parking lots and vehicles in the parking lots, and within any College vehicle or any vehicle operated by the College. This policy applies to all persons while on campus. No person may use tobacco products to include cigarettes, cigars, pipes, smokeless tobacco, or any form of tobacco products while on Columbus Technical College property, this includes clinical sites during class times
- Leave a copy of your schedule with your babysitter, spouse, family member, friend, or anyone who might need to contact you in case of an emergency. Include your Instructors pager/cell numbers **as you may not receive phone calls at your clinical sites**. We will be sure to get any messages to you. Instructor numbers are Mr. Sandy **706-761-6614** Mr. Philip Clark; **706-536-6402** hospital numbers are as follows:



St. Francis Hospital/Emory OR: 706-596-4411 ext 27509

Piedmont Midtown OR: 706-571-1570

Piedmont Northside OR: 706-494-2100

- Patient confidentiality is a **must!** You will **never** divulge the names of patients or discuss specific cases with other employees, family, friends, news media, etc.
- **Nutrition and rest:** You will be expected to eat breakfast each morning prior to arriving at the clinical site. Sufficient sleep is also important to be an effective team member.
- You are **not** allowed to have visitors at the clinical site or telephone calls unless it is an emergency. Please leave our numbers listed above as a point of contact for emergent or urgent contact needs
- Spend any "spare" time at the hospital (between cases etc.) wisely. **You should use this time to update your case notebook**, read preference cards, check supplies, research procedures, review storage and supply areas, etc. Wasting time or not being in your assigned area will be reflected in your grade. You are **not allowed to work on homework in the clinical area**. However, please keep homework in your bag or car; if OR schedule is slow you may be sent to the CTC library to work on homework.
- Cell phones and personal pagers, I-pads etc...are **not** allowed in the classroom, lab or clinical areas. If an interruption occurs related to such a device, the student will be asked to leave and an absence will be recorded for that time. **30 points will be deducted from employability if a cell phone is used in the hospital.**
- Columbus Technical College will enforce the weapon policy according to the Official Code of Georgia Annotated (O.C.G.A.). See the Weapon policy waiver page for the entire policy statement.
- The buildings at Columbus Technical College and the hospitals are **smoke free.** Please observe the *No Smoking* signs at entry doors. Smoking is not allowed on campus and is **not allowed at all in the clinical setting or in Columbus Technical College or hospital scrubs. This includes all forms of tobacco.**
- Inherent dangers exist on campus as well as in clinical areas. Remain aware of your surroundings and alert to dangerous situations to protect your personal safety.
- Gifts from students to preceptors, instructors and/or lab assistants are inappropriate. This includes food, holiday gifts, thank-you gifts, birthday gifts, etc. Any gifts given by students will be promptly returned.



*****PLEASE READ CAREFULLY*****

***** Any student who is asked to leave an assigned clinical area by a preceptor, director, supervisor, etc. for any reason, and as a result is not allowed to return to that clinical assignment, may be dropped from the program. The ability to succeed in the clinical area while dealing with varying responsibilities and personalities is indicative of future success in the professional arena. *** The instructor reserves the right to alter the schedule and/or the organization of the material to meet the needs of the majority of the class. *****



POST EXPOSURE PROCEDURE

Refer to Columbus Technical College's Exposure Control Plan, for *Post Exposure Follow Up Policy*.

The responsibilities and the procedure for the students and instructors to follow when a possible *Blood Borne Pathogen Exposure* has occurred during a clinical assignment are listed below. This procedure is for clinical areas at Piedmont Columbus Regional Midtown, Piedmont Columbus Regional Northside and St. Francis Hospital. Students at St. Francis Hospital will have expenses covered by the hospital and will not need to bill the insurance company.

DEFINITION OF EXPOSURE:

Any exposure during a clinical assignment that may place a student at risk of HIV and/or HBV infection defined as:

- Percutaneous injury- needle stick or cut
- Mucous membrane contact
- Skin contact when skin is chafed, abraded or dermatitis is present

With blood, tissue, or any other body fluids to which standard precautions apply:

- Semen, vaginal secretions, or body fluids with visible blood because these substances have been implicated in the transmission of HIV)
- Cerebrospinal fluid, synovial fluid, pleural fluid, peritoneal fluid, and amniotic fluid (because the risk of HIV transmission has not yet been determined) Laboratory specimens that contain HIV.

STUDENT RESPONSIBILITIES AND PROCEDURES:

1. Immediately wash affected area.
2. Notify instructor AND preceptor of the occurrence **IMMEDIATELY**.
3. Report the exposure to Infection Control personnel in the hospital.
4. Complete interview/advisement with the Infection Control office personnel and instructor
5. Complete occurrence/variance report as indicated by Infection Control personnel.
6. If advised to do so by the instructor and/or Infection Control personnel, report to the Emergency Room of the hospital where the incident occurred. Immediate care will be given. Student will need CTC picture ID card!



7. If preventative medication is advised by the Emergency Room Physician and Infection Control personnel, make an informed decision on whether or not to follow through with the advice.
8. Take a copy of the ER bill to the CTC Business Office and obtain an insurance claim form. Complete the student information section, attach a copy of the bill and give the form to the instructor.

INSTRUCTOR RESPONSIBILITIES AND PROCEDURES

1. Ensure that exposure site has been washed
2. Gather information concerning source risk from Infection Control personnel and participate in advisement session with student.
3. Complete the TCSG Accidental Exposure Form and the CTC Accident Report. (Make copy for Division Chairperson)
4. Accompany student to Emergency Room if necessary.
5. Inform student of results of source evaluation. Provide a copy of "Occupational Exposure to Blood Borne Pathogens" to the student, advise about any medical condition that requires further evaluation or treatment.
6. Complete the Instructor's portion of insurance claim form.
7. Retain copy of evaluations with student's medical records for one year after graduation, completion, or termination from CTC.

Note: The health insurance purchased by the student as a part of the Student Activities Fee will cover the Emergency Room fee and preventative care need as the result of an accidental exposure. This includes but is not limited to serums, medications, vaccines, and AZT.



CORE CURRICULUM FOR SURGICAL TECHNOLOGY, 6th edition Surgical rotation and case requirements

Goal Statement: The goal of the Surgical Rotation Case Requirements is to contribute to the development of a well-rounded, competent, entry-level surgical technologist. As stated in CAAHEP Standard II. Program Goals, C. Minimum Expectations: “To prepare competent entry-level surgical technologists in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains.”

Objectives:

I. The surgical technology program is required to verify through the surgical rotation documentation the students’ progression in the scrub role in surgical procedures of increased complexity as he/she moves towards entry-level graduate competency.

A. While it is understood that no program is able to control surgical case volume or the availability of various surgical specialties, it is the responsibility of the program to provide students with a diversified surgical rotation experience.

B. No information in this document prevents programs from exceeding the minimum established by the Surgical Rotation Case Requirements.

II. Students must complete a minimum of 120 cases as delineated below.

A. General Surgery cases

1. Students must complete a minimum of 30 cases in General Surgery; 20 which **must** be performed in the First Scrub Role. The remaining 10 cases may be performed in either the First or Second Scrub Role.

B. Specialty cases

1. Students must complete a minimum of 90 cases in various surgical specialties, excluding General Surgery; 60 which must be performed in the First Scrub Role. The additional 30 cases may be performed in either the First or Second Scrub Role.



a. A minimum of 60 surgical specialty cases must be performed in the First Scrub Role and distributed amongst a minimum of four surgical specialties.

(1) A minimum of 10 cases in the First Scrub Role must be completed in each of the required minimum of four surgical specialties (40 cases total required).

(2) The additional 20 cases in the First Scrub Role may be distributed amongst any one surgical specialty or multiple surgical specialties.

b. The remaining 30 surgical specialty cases may be performed in any surgical specialty either in the First or Second Scrub Role

C. Optional surgical specialties

I. Diagnostic endoscopy cases and vaginal delivery cases are not mandatory. However, up to 10 diagnostic endoscopic cases and 5 vaginal delivery cases can be counted toward the maximum number of Second Scrub Role cases.

a. Diagnostic endoscopy cases **must** be documented in the category of “Diagnostic Endoscopy”, rather than by specialty.

b. Vaginal delivery cases must be documented in the category of “Labor & Delivery” rather than in the OB/GYN specialty.

D. Case experience in the Second Scrub Role is not mandatory.

E. Observation cases must be documented, but do not count towards the 120 required cases.

F. Counting cases

1. Cases will be counted and documented according to surgical specialty (exception being diagnostic endoscopic cases; refer to II. C.1.a. above).

2. Examples of counting cases:

a. Trauma patient requires a splenectomy and repair of a Lefort I fracture. Two cases can be counted and documented since the splenectomy is general surgery specialty and repair of LeFort I is oral-maxillofacial surgical specialty.



b. Patient requires a breast biopsy followed by mastectomy. It is one pathology, breast cancer, and the specialty is general surgery; therefore, it is counted and documented as one procedure – one case.

c. Endoscopic cases that convert to an open case (e.g.: Laparoscopic Cholecystectomy converted to an Open Cholecystectomy) are counted and documented as one (1) procedure—one case.

Note: Students must annotate and document every case they complete on the appropriate specialty log sheet provided in the Student Clinical Manual. Each case documented in the log sheet must have a completed scrub sheet that is signed by the preceptor and student and verified by the instructor(S) before it is counted. Scrub sheets will be turned in weekly along with the Case Total sheet for evaluation. The cases will not be counted until verified by either the Clinical Coordinator and or the Program Director. The Case Total sheet will be a running tally of all cases by specialty area completed to that point, this will assist the clinical coordinator in tracking the student's Progress and guide the instructors in assigning the student to the appropriate types and numbers of cases to successfully obtain the case requirements for graduation. All cases will be verified by the Clinical Coordinator and Program Director and all clinical files will be kept in student's records

Clinical Progress Records will be conducted on a recurrent basis for all students a minimum of three times per clinical semester. Beginning, Midpoint and end. The Instructor(s) will observe each student and provide written and verbal feedback to the students. Areas that will be observed include, but are not limited to: sterile and aseptic technique, knowledge of the case being performed, set up of cases, anticipating needs of the Surgeon, and progression in degree of difficulty in cases scrubbed. The frequency of the Clinical progress form may increase if performance demonstrated needs improvement. Remediation will be conducted on a case by case basis. All clinical files. will be kept in the student's records



SURGICAL CATEGORY	Total # of cases Required	Minimum # of First Scrub Cases Required	Maximum # of Second Scrub Cases That Can be Applied Towards 120 cases.
General Surgery	30	20	10
Surgical Specialties: • Cardio-Thoracic • ENT • Eye • GU • Neuro • Ob-Gyn • Oral-Maxillo-facial • Orthopedics • Peripheral Vascular • Plastics • Procurement/Harvests	90	60	30
OPTIONAL: Diagnostic Endoscopy: • Bronchoscopy • Colonoscopy • Cystoscopy • EGD • ERCP • Esophagoscopy • Laryngoscopy • Panendoscopy • Ureteroscopy			10 diagnostic endoscopy cases may be applied only toward the second scrub role cases. • Refer to Objective II.C.
Optional: Labor & Delivery			5 Vaginal deliveries may be applied only toward the Second Scrub Role cases • Refer to Objective II.C.
Totals	120	80	40



FIRST AND SECOND SCRUB ROLE AND OBSERVATION

FIRST SCRUB ROLE

The student surgical technologist shall perform the following duties during any given surgical procedure with proficiency. The following list is provided to identify the items that must be completed in order to document a case in the First Scrub Role. A student not meeting the five criteria below cannot count the case in the First Scrub Role and the case must be documented in the Second Scrub Role or Observation Role.

- Verify supplies and equipment needed for the surgical procedure.
- Set up the sterile field with instruments, supplies, equipment, medication(s) and solutions needed for the procedure.
- Perform counts with the circulator prior to the procedure and before the incision is closed.
- Pass instruments and supplies to the sterile surgical team members during the procedure.
- Maintain sterile technique as measured by recognized breaks in technique and demonstrate knowledge of how to correct with appropriate technique.

SECOND SCRUB ROLE

The Second Scrub Role is defined as the student who is at the sterile field who has not met all criteria for the First Scrub Role, but actively participates in the surgical procedure by performing one or more of the following:

- Sponging
- Suctioning
- Cutting suture
- Holding retractors
- Manipulating endoscopic camera



OBSERVATION ROLE

The Observation Role is defined as the student who is in the operating room performing roles that do not meet the criteria for the First or Second Scrub Role. These observation cases are not to be included in the required case count, but must be documented by the program.

** Do not need background check, physical exam uniforms until after you are accepted in the program and begin the Summer Semester.

If you have any questions , please contact Carl Sandy at 706-225-0518 or csandy@columbustech.edu



General Surgery Log Sheet

<i>Date</i>	<i>Procedure</i>	<i>First Scrub Role</i>	<i>Second Scrub Role</i>	<i>Observation Role</i>
	<i>Total Cases</i>			

Instructor Signature: _____

Date: _____



General Surgery Log Sheet

Date	Procedure	First Scrub Role	Second Scrub Role	Observation Role
	Total Cases			

*Instructor Signature:*_____

*Date:*_____



ENT Log Sheet

Date	Procedure	First Scrub Role	Second Scrub Role	Observation Role
	Total Cases			

Instructor Signature: _____

Date: _____



Genitourinary Log Sheet

<i>Date</i>	<i>Procedure</i>	<i>First Scrub Role</i>	<i>Second Scrub Role</i>	<i>Observation Role</i>
	<i>Total Cases</i>			

Instructor Signature: _____

Date: _____



Neuro Log Sheet

Date	Procedure	First Scrub Role	Second Scrub Role	Observation Role
	Total Cases			

Instructor Signature: _____

Date: _____



OB-GYN Log Sheet

Date	Procedure	First Scrub Role	Second Scrub Role	Observation Role
	Total Cases			

Instructor Signature: _____

Date: _____



Ophthalmology Log Sheet

Date	Procedure	First Scrub Role	Second Scrub Role	Observation Role
	Total Cases			

Instructor Signature: _____

Date: _____



Oral-Maxillo-Facial Log Sheet

Date	Procedure	First Scrub Role	Second Scrub Role	Observation Role
	Total Cases			

Instructor Signature: _____

Date: _____



Orthopedics Log Sheet

Date	Procedure	First Scrub Role	Second Scrub Role	Observation Role
	Total Cases			

Instructor Signature: _____ *Date:* _____



Peripheral Vascular Log sheet

Date	Procedure	First Scrub Role	Second Scrub Role	Observation Role
	Total Cases			

*Instructor Signature:*_____

*Date:*_____



Plastics Log Sheet

Date	Procedure	First Scrub Role	Second Scrub Role	Observation Role
	Total Cases			

Instructor Signature: _____ *Date:* _____



Procurement/Harvest Log Sheet

Date	Procedure	First Scrub Role	Second Scrub Role	Observation Role
	Total Cases			

Instructor Signature: _____

Date: _____



WK # _____

Scrub Sheet

Name: _____

Dates ____/____/____ - ____/____/____ Scrubbed (FSR) _____ (SSR) _____ (Observe) _____

Service _____

Surgeon _____ Assistant _____

Scrub _____ Circulator _____

Anesthesia Provider _____ Type _____

Procedure _____

Definition _____

Student has documented this case in Log: yes, no; If “no” student needs to give explanation at the bottom of this sheet why it has not been documented in Log.

First Scrub Role

Student performed the following duties during any given surgical procedure with proficiency:

- ____ Check supplies and equipment needed for the surgical procedure.
- ____ Set up the sterile table with instruments, supplies, equipment, and medications/solutions for the procedure.
- ____ Perform appropriate counts with the circulator prior to the procedure and before the incision is closed.
- ____ Pass instruments and supplies to the sterile surgical team members.
- ____ Maintain the highest standard of sterile technique during the procedure, recognize breaks in technique and demonstrate knowledge of how to correct with appropriate technique.

Second Scrub Role

Student actively participated in the surgical procedure in its entirety by completing any of the following:

- ____ Sponging
- ____ Suctioning
- ____ Cutting suture
- ____ Holding retractors
- ____ Manipulating endoscopic Camera

Preceptor/Employee Signature: _____

Student Signature: _____

Instructor: _____



Competency Areas:

____ General Surgery ____ Cardio-Thoracic ____ ENT ____ GU ____ Neuro
____ OB-GYN ____ Oral-Maxillo-Facial ____ Orthopedics ____ PV ____ Plastics
____ Procurement/Harvest

SPECIAL EQUIPMENT/SUPPLIES-

INSTRUMENTATION (TRAYS) -

MAYO STAND SET-UP I

A large, empty rectangular box intended for a diagram or drawing of the Mayo Stand Set-Up I.

MAYO STAND SET-UP II

A large, empty rectangular box intended for a diagram or drawing of the Mayo Stand Set-Up II.

POSITION AND POSITIONING EQUIPMENT -

PREPPING-

DRAPING-

SUTURE – organ _____ peritoneum _____ fascia _____
muscle _____ sub-q _____ skin _____
other _____

DRESSINGS -



Case Total

Name:	FSR	SSR	Observe	Total
Gen				
ENT				
GU				
Ortho				
Neuro				
OB/GYN				
OPTHO				
PV/cv				
Plastics				
Endoscopy				
Other				

Student Signature: _____

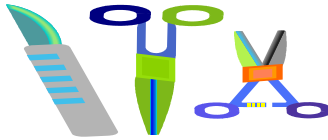
Instuctor Signature: _____

Date: _____



Student Clinical Sign-Out Sheet

Semester: _____



DATE	TIME	APPROVAL
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____



_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

***** This form must be turned in at the end of each Semester in order not to receive an Incomplete.**

***** Have your sign out sheet initialed by your preceptor or authorized employee each day.**

***** Bring this form with you every Monday to be initialed by your instructor.**



Clinical Progress Record

Student Name: _____

Date: _____

Case Observed: _____

Observations:

Feedback:

Instructor Signature: _____

Student Signature: _____



Student Clinical Evaluation SURG 2110

Student: _____

Instructor: _____

Date: _____

	<i>Never Meets Expectation</i>	<i>Below Expectation</i>	<i>Sometimes Meets Expectation</i>	<i>Meets Expectation</i>	<i>Exceeds Expectation</i>	<i>Always Exceeds Expectation</i>
Reliability	0	1	2	3	4	5
Attendance	0	1	2	3	4	5
Appropriate Attire	0	1	2	3	4	5
Attitude	0	1	2	3	4	5
Dependability	0	1	2	3	4	5
Initiative	0	1	2	3	4	5
Organization	0	1	2	3	4	5
Team Participation	0	1	2	3	4	5
Accountability	0	1	2	3	4	5
Scrub Technique	0	1	2	3	4	5
Donning Sterile Gown & Gloves	0	1	2	3	4	5
Gowning and Gloving another person	0	1	2	3	4	5
Prepping	0	1	2	3	4	5
Draping	0	1	2	3	4	5



Student Clinical Preceptor Evaluation
SURG 2120, SURG 2130 and SURG 2140

Student:_____ Clinical Site:_____ Date:_____

(Please evaluate the students using the following clinical areas and scoring system found on back of the sheet)

A) CLINICAL SKILLS: Student correctly demonstrates the following skills using proper aseptic technique.

SKILL/KNOWLEDGE	SCORE	COMMENTS
Surgical scrub		
Self-gowning and closed glove technique		
Draping of mayo stand		
Basic mayo setup		
Back table organization/ setup		
Gowning and gloving of surgeon		
Sponge, sharp, and needle counts		
Blade loading/ unloading passing scalpels		
Basic draping techniques		
Passing instruments to surgeon		
Loading /Unloading and passing needle holders		
Passing basic instruments to surgeon		
Proper handling of surgical specimens		
Proper medication labeling/handling		
Establishing sterile fields		
Pre-op case preparation delivering supplies/ instruments to sterile field/ scrubbed person		
Skin preparation		
Urinary Catheterization/straight or Foley		
Total		

B) KNOWLEDGE: Student displays appropriate knowledge level in the following.

KNOWLEDGE	SCORE	COMMENTS
Medical terminology and anatomy		
Aseptic techniques		
Basic instrumentation		
Surgical Procedures/ Technique		
Total		



C. EMPLOYABILITY: Student employability evidenced by

SKILL/KNOWLEDGE	SCORE	COMMENTS
Follows rules/ regulations of hospital OR safety and universal precautions		
Promptly reports absence/tardiness to OR		
Wears appropriate OR attire		
Promptly returns from breaks/ lunch to assigned areas follows through with assignments		
Accepts responsibility, responds to instructions suggestions		
Has a positive attitude and works well with others		
Effective team member in case preparation, post procedure clean-up and restocking supplies		
Promptly reports any break in aseptic technique on their part		
Total		

SCORING:

Excellent	9	Consistently beyond expected level
Very Good	8	Frequently beyond expected level
Satisfactory	7	Usually at expected level
Fair	6	Sometime at the expected level
Unsatisfactory	0	Less than acceptable
N/A		Not applicable

Evaluator/Preceptor: _____

Student: _____

Instructor: _____



SURGICAL TECHNOLOGY

ALL CLINICAL COURSES

EMPLOYABILITY

At the beginning of every clinical semester, each student has 100 points in the “Employability Category”. The designated point values listed below will be deducted for ***each*** violation during that semester. At the end of the semester, the remaining points in the employability category will count as 30% of the course grade.

Points Deducted:

Clinical Violations:

10	Failure to report to clinical as the result of an unexcused absence after 2 previous unexcused absences (refer to Health Studies Handbook for definition of <i>excused</i>)
10	Failure to make up missed clinical hours above 16 hours (excused or unexcused)
10	Failure to contact either the instructor or clinical site regarding <u>any</u> absence
5	Failure to be on time to clinical site, regardless of reason
10	Failure to report any absence or tardiness before 6:45 a.m. (must be reported to instructor and clinical unit)
10	Leaving the clinical site before designated time, regardless of reason, without notifying the instructor <u>and</u> preceptor
10	Failure to wear the proper uniform to and from the clinical site. (Clean ironed school scrubs with lab coat, and appropriate name and badge patch)
10	Failure to turn in <u>completed</u> clinical folder for the previous week on Monday morning at the beginning of class
50	Failure to observe <u>UNIVERSAL PRECAUTIONS!!</u> (Protective eye wear, gloves, and clothing when exposed to blood or body fluids; proper handling of sharps; proper confining and containing of blood and body fluids)
10-50	Failure to demonstrate appropriate professional or ethical behavior. (Incidents will be evaluated on an individual basis by the preceptor and instructor)



EMPLOYABILITY SCORE SHEET

Name: _____

Semester: _____

Violation Details and Date	Points Deducted	Signatures
	_____	_____ Instructor _____ Student

Violation Details and Date	Points Deducted	Signatures
	_____	_____ Instructor _____ Student

Violation Details and Date	Points Deducted	Signatures
	_____	_____ Instructor _____ Student



Surgical Technology Clinical
(SURG 2110, SURG 2120, SURG 2130 and SURG 2140)
Acknowledgement of Understanding Form

I, _____, have read the clinical guidelines and manual for
 Print Name
the Surgical Technology program.

The instructor has reviewed the clinical guidelines and manual with me as a class member.

Initial each of the following statements and sign and date below:

_____ I understand and agree to follow the rules as stated.

_____ I understand the attendance policy.

_____ I understand the evaluation procedures, grading requirements, textbooks required,
and reading assignments.

Student Signature

Date