

NAME: \_\_\_\_\_

I.D.# \_\_\_\_\_

**2011-12**  
**R.N. FIRST SURGICAL ASSISTANT**  
**Certificate**

**PLEASE NOTE: Only Registered Nurses can be accepted into this program!**

This program is designed for employed registered nurses with a minimum of two years of current acute care setting operating room experience. It provides further training that enables them to competently assist the surgeon during surgical procedures requiring an assistant. Note: Contact the Dean of Health Professions for additional enrollment requirements at (708) 709-3766.

**PROGRAM REQUIREMENTS (6 credits)**

\_\_\_\_\_ RN 100 3 cr RN First Assistant (Prereq. Professional registered nurse, current license, and current CNOR and 2 years surgical nursing experience OR eligible for CNOR certification at end of courses; sponsoring surgeon and letter of recommendation from employer).

\_\_\_\_\_ RN 101 3 cr RN First Assistant Internship (Prereq. RN 100)

\_\_\_\_\_ Attained a minimum grade point average of 2.0 in the courses identified in this certificate program.

\_\_\_\_\_ **Current cumulative GPA:** \_\_\_\_\_

\_\_\_\_\_ Completed a minimum of one-half of the credit hours required as a student at PSC.

\_\_\_\_\_ Filed a **Graduation Petition Form** with the Office of Enrollment Services.

\_\_\_\_\_ **Deadline for filing:** October 1 for Winter, March 1 for Spring, July 1 for Summer. (December, May & August candidates may choose to participate in the annual May Commencement Ceremony. Deadline to apply for ceremony is March 1<sup>st</sup>)

Credits	Credits	Credits	Credits
Required: 6	Completed: _____	In Progress: _____	Needed: _____

Advised By: \_\_\_\_\_

Date: \_\_\_\_\_

*SIGNATURE: Counselor or Advisor or Faculty Advisor*

**This is an UNOFFICIAL evaluation. Official Evaluations must be requested in the Office of Enrollment Services**

**IMPORTANT PSC GRADUATION POLICIES**

1. If the degree or certificate requirements are changed during your continuous attendance, you may elect to satisfy either the new requirements or the ones in force when you enrolled.
2. If you withdraw from Prairie State College for either a fall or spring semester, you must satisfy requirements in force at the time you re-enroll.
3. **Requests for COURSE SUBSTITUTIONS** in the program must be directed to the Program Coordinator. A Course Substitution Form must be signed by the Program Coordinator and submitted to the Office of Enrollment Services at least one semester prior to graduation.
4. Petitions for alteration of other graduation requirements must be submitted on a Student Appeal Form at least one semester prior to graduation.

**DIVISION OF HEALTH PROFESSIONS**

<b>Dept Chair:</b>	Kathleen Malic	Room 2229	(708) 709-3530	<a href="mailto:kmalic@prairiestate.edu">kmalic@prairiestate.edu</a>
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