The relationship between team members in the perioperative arena is critical to establishing a culture of safety and respect. As association leaders, our goal is to foster that critical relationship outside of the operating room as well. The recent article appearing in the December issue of AST was the product of frustrations extending over many years spent in defining relationships and finding common ground. We believe it is in the best interest of the patient to understand the reality of today’s positions and celebrate our accomplishments in this journey rather than focusing on our differences. We know that subtle differences will always exist between our associations.

AORN and AST have a shared history in recognizing the importance of certification and continuing education as a means to ensure our members deliver care that is informed and current. Recognizing our common interests, we achieved approval for surgical technologists to receive contact hour credit for attending AORN Congress and they will reciprocate by applying for RN contact hour at the AST annual conference. We view this as a first step in sharing resources to offer the broadest range of educational opportunities possible. In a shrinking economy, this vision is vital.

AORN’s position on education and certification is clear:

AORN addresses its support for the education and certification of surgical technologists in several position statements.

The AORN Position Statement on Allied Health Care Providers and Support Personnel in the Perioperative Practice Setting (1) states:

Allied health care providers should be graduates of accredited education programs and/or have successfully completed a national specialty certification process. Allied health care providers in the perioperative setting include, but are not limited to.............

- surgical technologists.

Support personnel should have the appropriate education and documented competency required to perform the defined role functions.

In this statement, surgical technologists are defined as allied health care providers and not as support personnel. Surgical technologists are defined as members of the surgical team who:

Possess expertise in the theory and application of sterile and aseptic technique and combine the knowledge of human anatomy, surgical procedures, and implementation tools and technologies to facilitate a physician’s performance of invasive, therapeutic, and diagnostic procedures. Surgical technologists can achieve certification.
AORN also supports certification for surgical technologists. In regard to requirements for entry into practice, AORN’s position statement states:

Entry into practice for a surgical technologist should be graduation from an accredited surgical technology program. (2)

Certification of surgical technologists is not considered by AORN to be requisite for entry into practice, but that does not mean AORN opposes the concept. AORN values certification for perioperative nurses and defines it as an integral part of career development. Therefore, it is consistent that we support certification for surgical technologists. For nurses, certification is voluntary and is considered an indication of exemplary practice. Certification is not required for entry into practice, nor is it required as a condition of employment in the operating room.

This difference in philosophy regarding certification does not reduce the value of the process – excellence in practice. What is important is that we have a mutual goal of providing safe patient care to the surgical patient. This, above all else, must be the driving force for each of us professionally and for our associations.

Sincerely,
Susan Banschbach RN MSN
AORN President


2. AORN Position Statement on Orientation of the Surgical Technologist to the Perioperative Setting (approved by the AORN House of Delegates, Washington DC, 2006)
   http://www.aorn.org/PracticeResources/AORNPositionStatements/Position_OrientationOfTheSurgicalTechnologist/ accessed 2/7/09.