

Washtenaw Community College
Surgical Technology (APST)
Fall 2018 Entry (2018-19 Academic Year)
Application Deadline: Friday, May 4, 2018 (or until all accepted and/or alternate seats are filled)
PROGRAM APPLICATION AND REQUIREMENTS CHECKLIST

WCC Student ID: _____ Date: _____
Last Name: _____ First Name: _____ Middle Name: _____
Former/Previous Names: _____
*Street Address: _____ Apt: _____
City: _____ State: _____ Zip: _____ County: _____
Home Phone: (____) _____ Cell Phone: (____) _____ Work Phone: (____) _____
WCC Email/netID: _____ Other Email: _____

*The contact information provided above MUST match WCC's records. You can confirm and/or change your contact information at any time by logging into your *WCC Gateway* account and clicking on *MyWCC* and then *Personal Information*. Your address MUST match your current "Basic" address on record. (Your "Mailing" address is NOT sufficient for residency verification.)

Program Description

A surgical technologist (ST) serves the patient's interest primarily by providing assistance to the surgeon. The surgical technologist's primary task during an operative procedure is to anticipate the perioperative needs of the surgeon and surgical patient. Students in this program must be well grounded in the basic sciences, especially anatomy, microbiology, and pathophysiology. The surgical technologist contributes to global patient care by serving as a team member who monitors the surgical environment.

The Washtenaw Community College Surgical Technology Program is accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP). Accreditation assures that that program meets or exceeds national standards regarding the quality of the program.

Important Information

The requirements below are based on the academic year stated on the top of this document. Prerequisite and program requirements along with WCC's point system and scales are reviewed annually and subject to change. Students are expected to meet the prerequisite and program requirements of the catalog term for the semester in which they **first begin** the program.

Admission Process

WCC has a competitive admission process. Applicants are required to meet all admission criteria and will be ranked based on a point system. The best qualified applicants will be selected for admission to the program. Details regarding WCC's **Admission to High Demand Programs** policy including priority levels can be found on WCC's website at <http://www.wccnet.edu/trustees/policies/2005/>. Details regarding WCC's point scales that are used to calculate points can be found on WCC's Enrollment Steps for Health and Second Tier Program Students website at <http://www.wccnet.edu/studentconnection/admissions/health-second-program/>.

Applying to the Program

Each year, approximately 20 students are accepted to the program for a Fall semester start. A formal application to the program is required after the student has been accepted to the school. Completed applications can be submitted anytime during the application window. Students are encouraged to complete required support courses prior to beginning the program. This is a full-time program and no part-time option is available.

Requirements After Acceptance

Upon notification of acceptance to the program, students must purchase an account from a college-designated vendor to obtain a criminal background check and to track their health records. The criminal background check and health records must be submitted to the designated vendor before attending the mandatory program orientation session. Specific information on the college-designated vendor will be included in the program acceptance letter.

Extenuating Application Process

If there are not enough applicants to fill all accepted and/or alternate seats in the program by the initial application deadline, the application will remain available on the website after this deadline until all seats are filled. Once all seats are filled, the application will be removed from the website and applications will no longer be accepted for the current admission cycle.

If the application remains available on the website after the initial application deadline, students who anticipate meeting all program admission requirements by the end of the Spring/Summer 2018 semester are encouraged to submit an incomplete application to be considered for an accepted and/or alternate seat on a conditional basis. Students submitting an incomplete application after the initial application deadline will be considered for a seat based on the date the application was received by the Health and Second Tier Admissions Office. If multiple applications are submitted in a day, applicants will be chosen based on a lottery for their position. Please contact the Health and Second Tier Admissions Office for clarification of this process.

Transcripts

Only official transcripts will be evaluated for transfer credit and applied towards your application. If course work (including prerequisites, support courses, and/or other applicable admission requirements/criteria) was completed at multiple institutions, an official transcript must be **received** from each institution. Incoming official transcripts must have appropriate signatures and/or official college seals. **Transcripts must be sent directly to WCC from an issuing institution or sealed if issued to the student.** Official transcripts are not needed for course work completed at WCC. Foreign high school transcripts will **not** be used for validation of course work when high school course work is applicable. For additional details regarding transfer credit and credit for prior learning (including foreign education, portfolio review, AP, CLEP, articulation, military, etc.) please visit WCC's website at <http://www.wccnet.edu/services/transferreresources/credittowcc/>.

Course Clarification

All defined courses plus substitutions that are approved by the department prior to the application deadline will be used to meet prerequisite and/or support course requirements. If a course is not clearly stated on your transcript and/or the course cannot be determined an equivalent based on the course description, you must provide a course syllabus for further review by the application deadline. If two (2) or more transfer courses are completed to meet the equivalent of one (1) of WCC's required prerequisite or support courses, students **must** meet the minimum grade requirement in **each** course. **Grades will not be averaged.** WCC is **not** responsible for your application being delayed due to lack of clarification or approval of a substitution.

Required Checklist

All of the requirements below **must** be successfully completed **before** submitting an application to the program. All prerequisite courses must be successfully completed with grades posted to your transcript and all required forms and supporting documentation needs to be submitted with your application. **This includes all necessary official transcripts unless previously submitted and received by WCC's Records Office.** WCC transcripts are not required.

___ 1. **Admission to WCC**

An admission application to the school can be submitted on WCC's website at www.wccnet.edu/apply.

___ 2. **Program Prerequisite Courses**

___ a. **MTH 125 (Everyday College Math) or MTH 160 (Basic Statistics) or MTH 176 (College Algebra) or any Academic Math Level 4 or higher level course with a minimum grade of C/2.0.** Students with an **Academic Math Level 3 may apply.**

- *Level I Prereqs (MTH 125, 160): Academic Reading and Writing Levels of 6; Academic Math Level of 3*
- *Level I Prereqs (MTH 176): Academic Reading and Writing Levels of 6; Academic Math Level of 4*

___ Course Completed: _____ School: _____

*Academic Math Levels 1-3 expire to level 0 **two years** after the calculation date (the date of COMPASS testing, the date the student's WCC Math Level was established based on an outside assessment, or based on successful course completion). Math Levels 4-7 do not expire. **Students should meet with an advisor/counselor to discuss the timing of math courses.**

- b. **HSC 101 (Healthcare Terminology) or HSC 124 (Medical Terminology) with a minimum grade of B-12.7**
 - *Level I Prereqs (HSC 101 & 124): Academic Reading and Writing Levels of 6*

___ Course Completed: _____ School: _____
- c. **BIO 111 (Anatomy and Physiology – Normal Structure and Function) with a minimum grade of B-12.7**
 - *Level I Prereqs (BIO 111): Academic Reading and Writing Levels of 6; high school chemistry or CEM 101 and high school biology or BIO 101 or BIO 102 or BIO 161 or BIO 162; minimum grade C/2.0 in all BIO, CEM, and high school requirements*

___ Course Completed: _____ School: _____

3. **Minimum Cumulative College GPA of 2.7**
The total cumulative GPA of all schools that provide a required program prerequisite course will be included in the calculation.

4. **Verification of High School Diploma or GED (prior to clinical courses)***
 I meet this requirement and I have included a copy of my GED, High School Equivalency Certificate, high school diploma, or high school transcript with posted graduation date.
 I am expecting to graduate from a high school or GED program prior to my clinical courses in Fall 2019 (4th semester) and I will submit verification upon completion to the Program Director**.

***Completion of college courses and/or college degree DOES NOT meet this requirement.** If your high school is located outside the United States, verification must be in the English language. If a translation is done, it must be completed through a translation company.

**If verification of high school diploma or GED is not submitted to the Program Director prior to Fall 2019 (4th semester), you will not be eligible to continue in the program.

5. **18 Years of Age (prior to clinical courses)**
Students must be 18 years old prior to starting clinical courses in Fall 2019 (4th semester).
 Must include a copy of your **Driver's License, State ID Card, Passport, or Birth Certificate.**

6. **Program Application and Requirements Checklist (this form)**

7. **Communication Acknowledgement Form**

8. **Additional Information Form**

9. **Abilities Statement**

10. **Residency Verification**
For more information on WCC's policies and procedures regarding residency or to learn of additional documentation that can be submitted to verify residency, please visit WCC's website at www.wccnet.edu/residency. **The student's residency status may be updated accordingly based on the documentation submitted.**
 Must include a copy of the front and back of your **Driver's License or State ID Card.**

Optional Checklist

The items below **are not required to apply** to the program. However, by successfully completing and/or meeting these items by the application deadline, you can earn additional points which could give you a more competitive edge. **Please remember official transcripts must be submitted to verify these requirements unless previously submitted and received by WCC's Records Office. WCC transcripts are not required.**

___ 1. **Support Courses**

Please indicate the course(s) you have completed below. Students should consult with an advisor/counselor regarding the selection of elective credit.

___ a. **Speech Elective (Any General Education Approved Course) with a minimum grade of C/2.0**

- *Level I Prereqs (all COM courses): Academic Reading and Writing Levels of 6*

___ Course Completed: _____ School: _____

___ b. **ENG 111 (Composition I) or ENG 226 (Composition II) with a minimum grade of C/2.0**

- *Level I Prereqs (ENG 111): Academic Reading and Writing Levels of 6*
- *Level I Prereqs (ENG 226): Academic Reading and Writing Levels of 6; ENG 111 minimum grade C/2.0*

___ Course Completed: _____ School: _____

___ c. **BIO 237 (Microbiology) with a minimum grade of C/2.0**

- *Level I Prereqs (BIO 237): Academic Reading and Writing Levels of 6; BIO 101, BIO 111, BIO 161, or BIO 162 minimum grade C/2.0*

___ Course Completed: _____ School: _____

___ d. **HSC 131 (CPR/AED for the Professional Rescuer and First Aid) with a minimum grade of C/2.0**

___ Course Completed: _____ School: _____

___ e. **Social and Behavioral Science Elective (Any General Education Approved Course) with a minimum grade of C/2.0**

___ Course Completed: _____ School: _____

___ f. **PHL 244 (Ethical and Legal Issues in Health Care) with a minimum grade of C/2.0**

- *Level I Prereqs (PHL 244): Academic Reading and Writing Levels of 6*

___ Course Completed: _____ School: _____

___ 2. **Veteran Status**

___ Submit form DD-214 to verify status.

___ 3. **Associate Degree or Higher Degree from an Accredited U.S. College or University**

___ Graduation Date: _____ Degree: _____ School: _____

___ 4. **Alternate Candidate Status**

Students who made alternate candidate status and did not make admission to the program based on a previous application will be awarded additional points. Students will only be awarded points for this status under WCC's competitive admission process and not the old waitlist process.

___ Previous Alternate Candidate Semester(s): _____

Entrance Requirements

1. Mandatory attendance at the new student orientation session upon acceptance into the program. Students who do not make admission but are given alternate candidate status will be required to attend orientation to be eligible to move to accepted status if a seat becomes available.
2. Upon acceptance, students are required to submit health records, undergo drug screening and criminal background check using the college-designated vendor. The health records below must be completed and submitted to the vendor prior to orientation. Detailed information will be provided in the official acceptance letters. **Please DO NOT complete the requirements below until AFTER you have been provided with the necessary details. (Documentation submitted with you application will not be reviewed.)**
 - a. Submit a completed Report of Medical History form (physical examination by licensed physician)
 - b. Submit proof of a negative TB skin test (and chest x-ray if indicated)

- c. Submit proof of a current vaccination record (you may be asked to update vaccines)
 - d. Submit proof of a current Flu vaccine
 - e. Submit proof of current health insurance (health insurance must remain active throughout the entire program)
3. Students who fail to comply or meet the above requirements will forfeit their seat in the program.

Continuing Eligibility Requirements

- 1. Additional criminal background checks may be conducted at any time during the program. Students may be required to have drug testing as well as additional criminal background checks and/or fingerprinting prior to the start of a clinical sequence as requested by specific clinical facilities. Failure to receive an acceptable drug test and/or criminal background/fingerprinting check at any time, will result in dismissal from the program.
- 2. Students will be required to attend a hospital orientation session prior to starting their clinical rotation.
- 3. Students will be required to submit health records annually while in the program and must complete any other health requirements as designated by the clinical sites.
- 4. Students will be required to purchase special uniforms and supplies throughout the duration of the program.
- 5. Students will be required to demonstrate that they have maintained competency in all skills taught throughout their progression through the program. Failure to demonstrate continued competency will result in dismissal from the program.
- 6. All Surgical Technology (SUR) courses must be completed with a minimum grade of C+/2.3 and all support courses to the program must be completed with a minimum grade of C/2.0 unless otherwise specified.
- 7. Students must have reliable transportation to clinical education sites, which may require a commute of up to one hour.
- 8. Students who are dismissed from the program may not be eligible to reapply to the program.

Students with questions or concerns regarding WCC's competitive admission process or submitting an application to the program should contact the Health and Second Tier Admissions Office.

Program applications along with all documentation needed to verify completion of requirements can be mailed to the address below or submitted to Student Connection located on the 2nd floor of the Student Center Building (SC 203).

Health and Second Tier Admissions Office
Washtenaw Community College
4800 E Huron River Dr
Ann Arbor, MI 48105

I have successfully completed all required checklist items and I have included all documentation needed to verify these requirements.

Printed Name: _____

Student ID: _____

Signature: _____

Date: _____

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COMMUNICATION ACKNOWLEDGEMENT FORM

WCC sends **all communications** regarding a student's Health and Second Tier Admissions Application Status, beginning with the application process through the admission process, directly to the WCC student email address **ONLY**. Therefore, it is extremely important that students check their WCC student email on a regular basis so they do not jeopardize their status. WCC assumes that any information sent to a student's WCC email has been received and reviewed by the student. Please complete this form to confirm acknowledgement of this information.

Please **carefully read** the statements below and **initial EACH ONE** to confirm you understand and acknowledge:

- _____ 1. I understand that from this point on, all future communication regarding my status will be sent directly to my **WCC student email address ONLY**.
- _____ 2. I agree to check my student email on a regular basis and review all information sent by the Health and Second Tier Admissions Office so I do not jeopardize my status.
- _____ 3. I understand that even though all communication will be sent to my student email address, WCC will occasionally send communications by mail.
- _____ 4. I understand that if my address on record is inactivated due to returned mail by the Post Office, WCC will inform me through my student email and I will be given a deadline by which I must update my address in order to maintain my status.
- _____ 5. I understand that if WCC is unable to contact me regarding my status and/or I fail to call/respond to any contacts made by the Health and Second Tier Admissions Office regarding my status, **my application will be closed**.
- _____ 6. I agree to keep all my contact information updated and current in the College system (including addresses, emails, and phone numbers). I understand that my contact information can be updated at any time through my *WCC Gateway* account by clicking on *MyWCC* and then *Personal Information*. Or, I may update this information at Student Connection located on the 2nd floor of the Student Center Building or by calling (734) 973-3543.

I have read, understand, and initialed **all** of the above statements.

Printed Name: _____ Student ID: _____

Signature: _____ Date: _____

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ADDITIONAL INFORMATION FORM

The additional information below is important and pertains to the program. **Please carefully read the statements below and initial each one to show you understand them.**

- _____ 1. I understand admission to this program is based on WCC's *Admission to High Demand Programs* policy.
- _____ a. I have read the ***Admission to High Demand Programs*** policy on WCC's website at <http://www.wccnet.edu/trustees/policies/2005/>.
- _____ b. I have reviewed the competitive admission process ***Point Scales for All Programs*** on WCC's Enrollment Steps for Health and Second Tier Program Students website at <http://www.wccnet.edu/studentconnection/admissions/health-second-program/>.
- _____ c. I have had all my questions and/or concerns pertaining to WCC's competitive admission process answered by the Health and Second Tier Admissions Office.
- _____ 2. I understand admission requirements/criteria and program requirements (including courses, minimum grade, and GPA requirements) along with WCC's point system and scales are reviewed annually and subject to change.
- _____ a. I understand I am expected to meet all admission requirements/criteria for the semester(s) for which I apply, and if offered admission, I must meet all program requirements based on the catalog term of when I first begin the program.
- _____ 3. I understand students are sent an email upon receipt of their program application as confirmation their application was received. However, I understand that it may take anywhere from 2 weeks to 8 months before my application will be reviewed and processed depending on the time of year and the number of health applications submitted at that given time. And, that applications are reviewed in the order they are received with consideration to all health program application deadlines and class determination dates.
- _____ a. I understand that after my application is reviewed, and if it is determined that I meet all minimum admission requirements to be considered for admission to the program during this admission cycle, I will be notified by email. However, I understand that all optional items completed to earn additional points towards my application will not be reviewed or processed until after the application deadline.
- _____ 4. I understand that after WCC has reviewed and processed all applications for this cycle, the class will be determined and the communications below will be sent depending on my status.
- _____ a. I understand that if accepted or given alternate candidate status in the program, I will be sent an official letter by email and mail. And, in this letter/email, I will be notified of the date, time, and location of the mandatory orientation session along with other important deadlines and dates. In addition, I will be provided with details regarding the purchase of an account through a college-designated vendor for obtaining criminal background checks and submitting and tracking health records for maintaining my status in the program.
- _____ i. I understand an alternate candidate should be prepared to take the place of any accepted student who is unable to start the program. And, to be eligible to move into the program if a seat becomes available, I must maintain my alternate status by meeting the requirements outlined in my official letter/email. I understand that if I maintain my status, I will remain an alternate for this admission cycle through the start of the semester. And, if a seat opens in the meantime, I will be accepted and informed by email.

_____ ii. I understand as an alternate candidate, if I am **not** offered admission to the program prior to the start of the semester or I do not meet requirements needed to maintain my status, **my application will be closed**.

_____ b. I understand that if I am **not** accepted or given alternate candidate status in the program, I will be notified by email. And, at that time, my application will remain open through the start of the semester. I understand that in the event that the alternate candidate list is exhausted, there is a chance I will be called into the program. However, I understand **my application will be closed** after the semester begins.

_____ i. I understand WCC strongly recommends that I meet with the Health Programs Counselor for advising to discuss ways to make my application more competitive.

_____ 5. I understand that program applications are semester specific and only valid for the semester for which I applied. And, that if my application is closed for any reason and I wish to be reconsidered for admission to the program, I must meet current admission requirements and submit a new program application.

_____ 6. I understand that if I am accepted to the program without verification of high school diploma or GED, I must submit verification upon graduation to the program director prior to the 4th semester in the program or I will be dismissed.

I have read and initialed all statements listed above showing I understand them.

Printed Name: _____

Student ID: _____

Signature: _____

Date: _____

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ABILITIES STATEMENT

Admission into the Surgical Technology program is contingent upon students declaring that they have specific physical and cognitive abilities. These requirements are detailed below. WCC reserves the right to request that students successfully demonstrate the specific physical and cognitive abilities related to the program.

Abilities Necessary for Attainment of Core Competencies in the Surgical Technology Program

The student MUST be able to:

1. Speak clearly in order to communicate with patients, families, health care team members, peers, and faculty.
2. Stand and walk for six (6) to ten (10) hours per day.
3. Bend, squat, and kneel.
4. Possess sufficient strength to push/pull objects more than fifty (50) pounds and to transfer objects of more than one-hundred (100) pounds.
5. Perform CPR, i.e. move above patient to compress chest and manually ventilate patient.
6. Work with arms fully extended overhead.
7. Possess manual dexterity, i.e. use hands for grasping, pushing, pulling, and other fine motor manipulation, including legible writing and typing.
8. Demonstrate eye-hand coordination and arm-hand steadiness for manipulation of equipment, i.e. syringes, procedures.
9. Possess tactile ability to differentiate changes in sensation as part of the patient assessment.
10. Possess auditory acuity to note slight changes in the patient's condition, i.e. lung sounds, bowel sounds, vital signs, etc.
11. Possess auditory acuity to hear patient's calls for assistance without facing the patient.
12. Possess auditory acuity to interpret various equipment signals and alarms and use the telephone.
13. Possess visual acuity to read and distinguish colors, to read handwritten orders and other handwritten or printed patient data, i.e. medical records, medication labels.
14. Possess visual acuity to clearly see and read electronic monitors, syringes, and scales in order to correctly interpret data.
15. Concentrate on details with moderate amount of interruptions, such as patient requests, IV pumps/alarms, calculating drug dosages, etc.
16. Attend to tasks/functions for periods up to sixty (60) minutes in length and to attend to tasks/functions for periods exceeding sixty (60) minutes in length.
17. Possess sufficient emotional control to exercise independent judgment and discretion to ensure patient safety.
18. Understand and relate to specific ideas, concepts, and theories generated and simultaneously discussed.
19. Remember tasks and assignments given to self and others over both short and long periods of time.

I have read these statements and believe I meet the above requirements.

Printed Name: _____

Student ID: _____

Signature: _____

Date: _____

Washtenaw Community College
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COURSE SEQUENCE

The Surgical Technology (SUR) courses will span over five (5) semesters and are sequential and complemented with required support courses, which fulfill the general education associate degree requirements at WCC. Students are encouraged to take all support courses (*) before they begin the program. Support courses (*) may be taken prior to the scheduled semester, but **no later than** the scheduled semester below. All Surgical Technology (SUR) courses must be taken in the scheduled semester below. This is a full-time program and no part-time option is available.

Students should meet with an advisor/counselor to discuss the timing and selection of prerequisite and support courses.

Support courses (*) must be successfully completed with a minimum grade of C/2.0 and Surgical Technology (SUR) courses must be successfully completed with a minimum grade of C+/2.3 unless otherwise specified. (All grades are based on a 4.0 GPA scale)

Major/Area Requirements (Prerequisites Required to Apply to Program)		9-12 credits
HSC 101 or	Healthcare Terminology	
HSC 124	Medical Terminology	1-3 credits
BIO 111	Anatomy and Physiology – Normal Structure and Function	5 credits
MTH 125 or	Everyday College Math	
MTH 160 or	Basic Statistics	
MTH 176 or	College Algebra	
	Any Math Level <u>4</u> or Higher Level Course	3-4 credits
Semester 1 (Fall)		16-17 credits
<i>Elective(s)</i>	<i>Speech (any general education approved course)*</i>	<i>3 credits</i>
ENG 111 or	Composition I	
ENG 226	Composition II*	3-4 credits
BIO 237	Microbiology*	4 credits
SUR 101	Introduction to Sterile Processing	6 credits
Semester 2 (Winter)		12 credits
SUR 110	Introduction to Surgical Technology/Surgical Patient	5 credits
SUR 170	Surgical Pharmacology	2 credits
SUR 180	Surgical Procedures I	3 credits
SUR 181	Surgical Procedures I Lab	2 credits
Semester 3 (Spring/Summer)		3 credits
HSC 131	CPR/AED for the Professional Rescuer and First Aid*	1 credit
SUR 270	Biomedical Sciences and Minimally Invasive Surgery	2 credits
Semester 4 (Fall)		10 credits
<i>Elective(s)</i>	<i>Social and Behavioral Science (any general education approved course)*</i>	<i>3 credits</i>
<i>Elective(s)</i>	<i>Elective(s) to reach a minimum 60 credits*</i>	<i>1 credit</i>
SUR 210	Surgical Procedures II	3 credits
SUR 211	Surgical Procedures II Lab	2 credits
SUR 231	Clinical Education I	1 credit
Semester 5 (Winter)		10 credits
PHL 244	Ethical and Legal Issues in Health Care*	3 credits
SUR 241	Clinical Education II	4 credits
SUR 250	Surgical Technology Seminar	3 credits
TOTAL CREDITS REQUIRED FOR PROGRAM		60-64 CREDITS

*These courses may be taken before admission to program. (It is strongly advised that students complete the general education courses before entering the program). Students can transfer for substitute equivalent general education courses required for the program. Contact the program advisor for approval.

NOTE: Students who are planning to transfer to a 4-year university should follow the Michigan Transfer Agreement (MTA). See an academic advisor for more information.

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ESTIMATED COSTS

Tuition rates and fees listed below are estimates based on the 2017-2018 academic year and are only valid through the Spring/Summer 2018 semester. If a change is made in the tuition rates and/or fees for any future semester, these changes would go into effect beginning in the fall semester of each year. To view the current tuition rates and fees, please visit WCC's website at www.wccnet.edu/tuition. All fees below are estimates and subject to change.

TUITION & COLLEGE FEES (includes \$7 enrollment/technology fee per credit hour)	COST
60 – 64 credits @ \$102 (<i>in-district rates</i>)	\$6,120 - \$6,528
60 – 64 credits @ \$165 (<i>out-district rates</i>)	\$9,900 - \$10,560
60 – 64 credits @ \$221 (<i>out-state rates</i>)	\$13,260 - \$14,144
60 – 64 credits @ \$255 (<i>international rates</i>)	\$15,300 - \$16,320
Contact Hour Fee (labs & clinicals)	\$1200
Mandatory Fees Red Cross CPR Card (HSC 131) = \$35	\$35
Graduation Fee (cap & gown)	\$45

PROGRAM FEES	COST
Physical Exam (including lab tests & immunizations)	\$150 - \$250
Required Text Books & Course Packs	\$900
Optional Books	\$200
Uniform Costs	\$250
WCC Patches/Name Badges	\$10
AST Membership, NBSTSA Practice Exam Fee, & National Exam Fee (Gold Bundle)	\$250
Vendor Fee for Background Checks & Healthcare Data Background Check = \$46; Collecting & Monitoring Health Records = \$35	\$81

ADDITIONAL COSTS TO CONSIDER	COST
Student Health Insurance	
Transportation to and from campus and clinical sites	
Parking fees for clinical sites	
Lunches at clinical sites	
Supplies: notebooks, paper, pens, pencils, calculator, etc...	
Childcare	

TOTAL COSTS* (tuition & college fees + program fees based on residency status)	COST
In-District Residents	\$9,241 - \$9,749
Out-District Residents	\$13,021 - \$13,781
Out-State Residents	\$16,381 - \$17,365
International Residents	\$18,421 - \$19,541

*Total cost does not include "Additional Costs to Consider".

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CONTACT INFORMATION AND ACCREDITATIONS

Accreditation and helpful contact information is provide below.

Health Programs at WCC

Website: <http://health.wccnet.edu>

Health and Second Tier Admissions

Phone: (734) 973-3596 or (734) 477-8998

Email: healthadmissions@wccnet.edu

Website:

<http://www.wccnet.edu/studentconnection/admissions/health-second-program/>

Student Connection

Phone: (734) 973-3543

Email: studrec@wccnet.edu

Transcript Evaluation

Phone: (734) 973-3590 or (734) 477-8969

Email: transcripteval@wccnet.edu

Website: www.wccnet.edu/transfer

Financial Aid

Phone: (734) 973-3523

Email: finaid@wccnet.edu

Counseling

(Advising **before** admission to the program)

Phone: (734) 677-5102

WCC Campus Map & Driving Directions

Website: www.wccnet.edu/about-us/visiting

WCC Room Locator

Website: www.wccnet.edu/about-us/room-locator

Regular Office Hours (Student Services)

Monday - Thursday: 8:00am – 7:00pm

Friday: 8:00am – 5:00pm

Saturday: 9:00am – 1:00pm

Elizabeth Connors

Surgical Technology Program Director

Phone: (734) 477-8956

Email: econnors@wccnet.edu

Sue Travis

Health Programs Counselor

(Advising **after** admission to the program)

Phone: (734) 973-3358 – by appointment only

Email: stravis@wccnet.edu

Commission on Accreditation of Allied Health Education Programs (CAAHEP)

(Program Accreditation)

25400 U.S. Highway 19 North, Suite 158

Clearwater, FL 33763

Phone: (727) 210-2350

Website: www.caahep.org

The Higher Learning Commission of the North Central Association

(Institution Accreditation)

230 N LaSalle St, Ste 7-500

Chicago, IL 60604

Phone: (312) 263-0456

Website: www.ncahlc.org