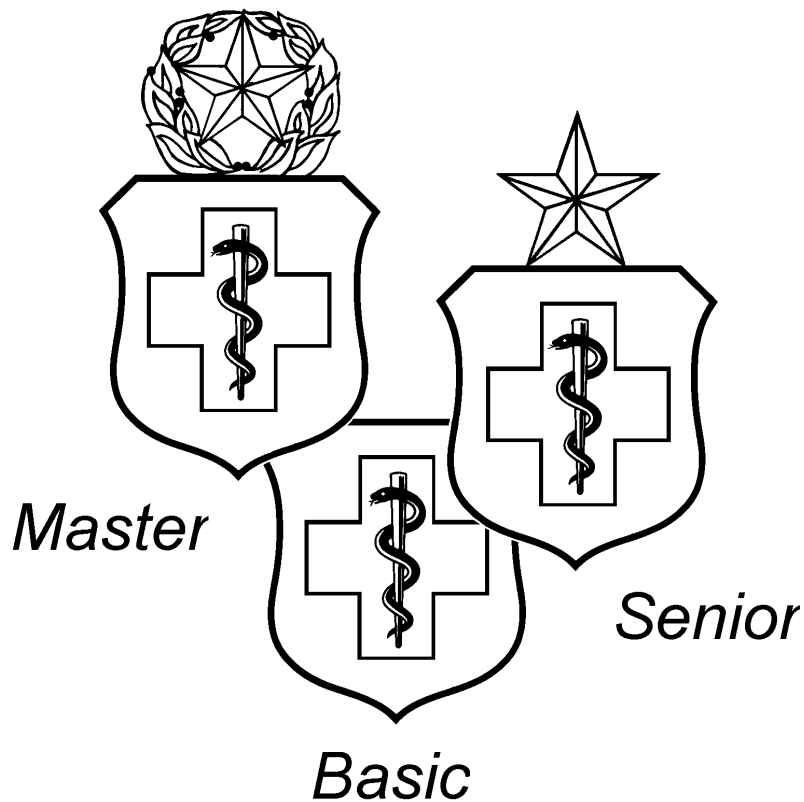


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SURGICAL SERVICE SPECIALTY

GASTROENTEROLOGY



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QTP 4N1X1-08
SURGICAL SERVICE SPECIALTY GASTROENTEROLOGY TECHNICIAN
Volume 08: Gastroenterology

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INTRODUCTION

1. This qualification training package (QTP) was developed to make a training aid available that will assist Surgical Services Technicians to develop technical skills essential to performing specialized tasks. The tasks are broken down into teachable elements that help the trainer guide the trainee into becoming proficient with the task. The QTP will also aid the task certifier when evaluating trainees for task certification.
2. As a trainer, go through each module (lesson) and identify which QTP tasks are appropriate for the trainee's duty position, and then determine the order in which you want the trainee to learn about each subject area. Direct the trainee to review the training references to better understand the objective of each module. Go through the steps in the task performance with the trainee and allow for enough time to learn each step; some objectives may take more time than others. Remember, the objective of the QTP is to ensure the trainee can perform each task thoroughly. When the trainee receives enough training and is ready to be evaluated on an objective, follow the evaluation instructions. Use the performance checklist as you evaluate each objective. If the trainee successfully accomplishes the objective, document appropriately in the individual's training record. If the trainee does not accomplish the objective, review the areas needing more training until the objective is met. Conduct a feedback with the trainee on each module. After the trainer has ensured and documented that the trainee is qualified to perform the task, a certifier should evaluate the trainee.
3. The goal of the developers of this QTP is to publish a useful document for trainers and trainees that will meet Air Force needs under the concepts outlined in the Career Field Education and Training Plan (CFETP). We value your expertise in meeting this goal. If you find discrepancies in this QTP, or have suggestions for its improvement, or if you have suggestions for other areas that may benefit from a QTP, please let us know about them by contacting the below individual:

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ASSISTING WITH COLONOSCOPY/HOT BIOPSY OR POLYPECTOMY

SUBJECT AREA:	Gastroenterology.
TASK(s):	Assist with colonoscopy/hot biopsy or snare polypectomy
CFETP/STS REFERENCE(s):	Pertinent AF Form 797
EQUIPMENT REQUIRED:	Colonoscope, Light source, suction source, 10% formalin jars, biopsy forceps/Snares, lubricant jelly, 4x8 gauze pads, suction polyp trap, oxygen supply, water bottle, sterile water, ECG monitor available, pulse oximeter, blood pressure cuff or monitor, gloves, face shield, disposable gown
TRAINING REFERENCE(s):	Lippincott Manual of Nursing Practice, (current edition); Gastrointestinal Diseases, Volume I and II, (current edition); Gastroenterology Assistant, (current edition); Manual of Gastrointestinal Procedures, (current edition).
REMARKS/NOTES:	**Notify physician if patient is currently on anticoagulation therapy, aspirin, or non-steroidal anti-inflammatory drugs. During the procedure, monitor the patient's clinical status, especially rate and depth of respiration. Positively encourage the patient with a soft voice, gentle touching, and by repositioning the patient comfortably. Relay any concern to the physician about the clinical status of the patient immediately.
OBJECTIVE:	The trainee will successfully demonstrate without error the performance aspects of assisting with colonoscopy/hot biopsy or snare polypectomy.

EVALUATION INSTRUCTIONS:

1. This QTP should be evaluated during actual performance of the tasks.
2. Since this task involves direct patient care, ensure the trainee understands the process, knows inherent risk factors, and is closely supervised during the evaluation. **The evaluator will STOP the procedure immediately and correct the trainee if performance may compromise patient safety.** Ensure the trainee dons all personal protective equipment (PPE) required by current standards/precautions.
3. The trainee must satisfactorily perform all parts of the task *without assistance*.
4. Use the appropriate checklist when evaluating the task to ensure all steps of the task are accomplished.
5. Document competency upon satisfactory completion of the evaluation. Initial evaluation should be documented in the Specialty Training Standard (STS) of the trainee's CFETP. All recurring evaluation should be documented using AF Form 1098, *Special Task Certification and Recurring Training*, or using an approved substitute record.

ASSISTING WITH COLONOSCOPY/HOT BIOPSY OR POLYPECTOMY

PERFORMANCE CHECKLIST

<i>Assist with Colonoscopy/Hot Biopsy or Snare Polypectomy</i>	SAT	UNSAT
PREPARATORY PHASE		
1. Identify patient, explain procedure and validate written consent		
2. Verify pre-procedure bowel preparation		
3. Obtain appropriate colonoscope (pediatric or adult)		
4. Insert air/water and suction buttons/lubricate with oil as needed		
5. Connect scope to light source and processor		
6. Turn equipment on (processor/light source/VCR/printer)		
7. Connect water bottle and suction		
PERFORMANCE PHASE		
1. Wash hands. Don PPE.		
2. Turn scope light on/white balance color scheme		
3. Split photograph screen		
4. Input patient demographics		
5. Perform preoperation inspection		
6. Set up emergency equipment		
7. Set up supplies/equipment for standard special procedures		
a. Hot or Cold tissue biopsy		
b. Snare polypectomy		
c. Heater probe/gold probe electrocautery		
d. Schlerotherapy		
e. Balloon dilatation		
8. Position patient in left lateral recumbent position/drape appropriately		
9. Assist physician as necessary		
10. Monitor patient as required for conscious sedation		
11. Pre-clean and sterilize/high-level disinfect colonoscope		
12. Disinfect bed/work area prior to next patient		
13. Verify post-procedure discharge instructions were given		
ASSIST WITH HOT BIOPSY OR SNARE POLYPECTOMY		
1. Set up electrosurgical generator (i.e. Endostat, Valleylab or equivalent)		
2. Attach grounding pad to patient		
3. Connect active cord to hot biopsy forceps or snare device		
4. Select generator settings as directed by physician/IAW manufacturers instruction		
5. Perform biopsy or polypectomy as directed by physician		
6. Process specimens for pathology		
1. Be sure the patient is not dizzy (commonly occurs with manipulation or temperature change in the EAC) and has no pain.		
2. Run irrigation solution through the suction tip to prevent clogging.		
FINAL RESULTS/NOTES: If the patient experiences pain or bleeding, evaluation by the credentialed provider is indicated.		

FEEDBACK: Using this checklist as a source of information, discuss the trainee's performance indicating strengths, weaknesses, suggested improvements, etc.

ASSISTING WITH RIGID OR FLEXIBLE SIGMOIDOSCOPE

SUBJECT AREA:	Gastroenterology.
TASK(s):	Assist with rigid or flexible sigmoidoscope.
CFETP/STS REFERENCE(s):	Pertinent AF Form 797.
EQUIPMENT REQUIRED:	Sigmoidoscope, Light source, suction source, 10% formalin jars, biopsy forceps/snare, lubricant jelly, 4x8 gauze pads, suction polyp trap, oxygen supply, gloves, face shield, disposable gown.
TRAINING REFERENCE(s):	Lippincott Manual of Nursing Practice, (current edition); Gastrointestinal Diseases, Volume I and II, (current edition); Gastroenterology Assistant, (current edition); Manual of Gastrointestinal Procedures, (current edition).
REMARKS/NOTES:	**Notify physician if patient is currently on anticoagulation therapy, aspirin, or non-steroidal anti-inflammatory drugs. During the procedure, monitor the patient's clinical status, especially rate and depth of respiration. Positively encourage the patient with a soft voice, gentle touching, and by repositioning the patient comfortably. Relay any concern to the physician about the clinical status of the patient immediately.
OBJECTIVE:	The trainee will successfully demonstrate without error the setup/performance aspects of assisting with rigid or flexible sigmoidoscope

EVALUATION INSTRUCTIONS:

1. This QTP should be evaluated during actual performance of the tasks.
2. Since this task involves direct patient care, ensure the trainee understands the process, knows inherent risk factors, and is closely supervised during the evaluation. **The evaluator will STOP the procedure immediately and correct the trainee if performance may compromise patient safety.** Ensure the trainee dons all personal protective equipment (PPE) required by current standards/precautions and follows applicable radiation safety guidelines.
3. The trainee must satisfactorily perform all parts of the task with 100% accuracy, *without assistance*.
4. Use the appropriate checklist when evaluating the task to ensure all steps of the task are accomplished.
5. Document competency upon satisfactory completion of the evaluation. Initial evaluation should be documented in the Specialty Training Standard (STS) of the trainee's CFETP. All recurring evaluation should be documented using AF Form 1098, *Special Task Certification and Recurring Training*, or using an approved substitute record.

ASSISTING WITH RIGID OR FLEXIBLE SIGMOIDOSCOPE

PERFORMANCE CHECKLIST

<i>ASSISTING WITH RIGID OR FLEXIBLE SIGMOIDOSCOPE</i>	SAT	UNSAT
PREPARATORY PHASE		
ASSIST WITH RIGID SIGMOIDOSCOPY		
1. Identify patient, explain procedure and validate written consent		
2. Administer cleansing enemas (if not already self-administered)		
3. Don protective attire		
4. Obtain rigid sigmoidoscope		
5. Attach light source as applicable		
6. Set up supplies for cold biopsy		
7. Position patient in left lateral recumbent position/drape appropriately		
8. Assist physician with procedure as needed		
9. Verify post-procedure discharge instructions were given		
ASSIST WITH FLEXIBLE SIGMOIDOSCOPY		
1. Identify patient, explain procedure, and validate written consent		
2. Administer cleansing enemas (if not already self-administered)		
3. Don protective attire		
4. Obtain clean flexible sigmoidoscope (will vary with manufacturer)		
5. Attach appropriate air/water & suction buttons		
6. Insert umbilicus into jack on light source/connect processor adaptor		
7. Attach water bottle and suction		
8. Turn on accessory equipment (processor/light source/VCR/printer)		
9. Perform preparation inspection/white balance/split screen		
10. Input patient data as local software dictates (i.e. Endospeak)		
11. Position patient in left lateral recumbent position/drape appropriately		
12. Assist physician with procedure as needed		
13. Monitor patient for possible complications		
14. Preclean and sterilize/high-level disinfect endoscope		
15. Disinfect bed/work area prior to next patient		
FINAL RESULTS/NOTES: If the patient experiences pain or bleeding evaluation by the credentialed provider is indicated.		

FEEDBACK: Using this checklist as a source of information, discuss the trainee's performance indicating

PERFORM MANUAL PRECLEANING OF ENDOSCOPE

SUBJECT AREA:	Gastroenterology.
TASK(s):	Perform manual pre-cleaning of endoscope.
CFETP/STS REFERENCE(s):	Pertinent AF Form 797.
EQUIPMENT REQUIRED:	Leakage tester, enzymatic detergent, channel cleaning brush, 30 cc syringe.
TRAINING REFERENCE(s):	<p>Guidelines for the use of high-level disinfectants and sterilants for reprocessing of flexible gastrointestinal endoscopes, Society of Gastrointestinal Nurses and Associates, Inc., 2000</p> <p>APIC guideline for infection prevention and control in flexible endoscopy, Association for Professional in Infection Control and Epidemiology, Inc., PA 3., 2000 Video and Manual for disinfection of endoscopes by Olympus America</p>
REMARKS/NOTES:	<p>**Instruments failing the leak test cannot be processed in mechanical processors without causing extensive fluid invasion or damage to the internal components of the endoscope. Local directives will need to address adequate sterilization methods (i.e. cold sterilization) prior to sending the scope for repair.</p>
OBJECTIVE:	The trainee will successfully demonstrate without error the performance of manual cleaning of an endoscope.
EVALUATION INSTRUCTIONS:	<ol style="list-style-type: none">1. This QTP should be evaluated during actual performance of the tasks.2. Since this task involves direct patient care, ensure the trainee understands the process, knows inherent risk factors, and is closely supervised during the evaluation. The evaluator will STOP the procedure immediately and correct the trainee if performance may compromise patient safety. Ensure the trainee dons all personal protective equipment (PPE) required by current standards/precautions and follows applicable radiation safety guidelines.3. The trainee must satisfactorily perform all parts of the task with 100% accuracy, <i>without assistance</i>.4. Use the appropriate checklist when evaluating the task to ensure all steps of the task are accomplished.

5. Document competency upon satisfactory completion of the evaluation. Initial evaluation should be documented in the Specialty Training Standard (STS) of the trainee's CFETP. All recurring evaluation should be documented using AF Form 1098, *Special Task Certification and Recurring Training*, or using an approved substitute record.

PERFORM MANUAL PRECLEANING OF ENDOSCOPE

PERFORMANCE CHECKLIST

<i>PERFORM MANUAL PRECLEANING OF ENDOSCOPE</i>	SAT	UNSAT
PERFORMING MANUAL PRECLEANING OF ENDOSCOPE		
1. Gather supplies/equipment		
2. Don protective attire		
3. Suction water through endoscope		
4. Shut down electrical components		
5. Detach scope from processor		
6. Attach protective cap		
7. Submerge in tap water/perform leak test**		
8. Disconnect leak tester to passively release residual air		
9. Inspect for external damage/excess wear/inoperability		
10. Soak/wash in enzymatic detergent IAW manufacturer recommendations		
11. Brush working channel (at least 3 times)		
12. Brush air/water/suction ports		
13. Wash/brush air/water and suction buttons		
14. Rinse thoroughly with tap water		
15. Perform disinfection/sterilization		
FINAL RESULTS/NOTES: If the patient experiences pain or bleeding evaluation by the credentialed provider is indicated.		

FEEDBACK: Using this checklist as a source of information, discuss the trainee's performance indicating

ASSISTING WITH ESOPHAGOGASTRODUODENOSCOPY (EGD)

SUBJECT AREA:	Gastroenterology.
TASK(s):	Assist with upper endoscopic examination.
CFETP/STS REFERENCE(s):	Pertinent AF Form 797.
EQUIPMENT REQUIRED:	Upper endoscope, light source, bite block, 2% viscous lidocaine, topical anesthetic spray, two suction sources, oral suction, water bottle, sterile water, oxygen with nasal cannula, ECG monitor available, pulse oximeter, blood pressure cuff or monitor, biopsy forceps, 10% formalin jars, gloves, face shield, disposable gown.
TRAINING REFERENCE(s):	Lippincott Manual of Nursing Practice, (current edition); Gastrointestinal Diseases, Volume I and II, (current edition); Gastroenterology Assistant, (current edition); Manual of Gastrointestinal Procedures, (current edition).
REMARKS/NOTES:	**Notify physician if patient is currently on anticoagulation therapy, aspirin, or non-steroidal anti-inflammatory drugs. Reassure the patient that the endoscope will not interfere with breathing.
OBJECTIVE:	The trainee will successfully demonstrate without error the performance aspects of assisting with an EGD examination.

EVALUATION INSTRUCTIONS:

1. This QTP should be evaluated during actual performance of the tasks.
2. Since this task involves direct patient care, ensure the trainee understands the process, knows inherent risk factors, and is closely supervised during the evaluation. **The evaluator will STOP the procedure immediately and correct the trainee if performance may compromise patient safety.** Ensure the trainee dons all personal protective equipment (PPE) required by current standards/precautions and follows applicable radiation safety guidelines.
3. The trainee must satisfactorily perform all parts of the task with 100% accuracy, *without assistance*.
4. Use the appropriate checklist when evaluating the task to ensure all steps of the task are accomplished.
5. Document competency upon satisfactory completion of the evaluation. Initial evaluation should be documented in the Specialty Training Standard (STS) of the trainee's CFETP. All recurring evaluation should be documented using AF Form 1098, *Special Task Certification and Recurring Training*, or using an approved substitute record.

ASSISTING WITH ESOPHAGOGASTRODUODENOSCOPY (EGD)

PERFORMANCE CHECKLIST

ASSISTING WITH ESOPHAGOGASTRODUODENOSCOPY (EGD)	SAT	UNSAT
ASSIST WITH UPPER ENDOSCOPIC EXAMINATION		
1. Identify patient, explain procedure and validate written consent		
2. Verify NPO status, < 6 months: 4hrs, 6-36 months: 6 hrs, > 36 months: 8hrs		
3. Wash hands and don protective attire		
Obtain appropriate endoscope		
h air/water and suction buttons/lubricate with oil as needed		
6. Connect scope to light source and processor		
7. Turn equipment on (processor/light source/VCR/printer)		
8. Connect water bottle and suction		
9. Turn scope light on/white balance color scheme		
10. Split photograph screen		
11. Input patient demographics as applicable		
12. Perform pre-operation inspection (air/water/suction)		
13. Set up emergency equipment		
14. Set up supplies/equipment for standard special procedures		
a. Hot or Cold tissue biopsy		
b. Snare polypectomy		
c. Heater probe/gold probe electrocautery		
d. Schlerotherapy		
e. Balloon dilatation		
15. Position patient/drape appropriately		
16. Assist physician as necessary		
17. Monitor patient as required for conscious sedation		
18 Pre-clean and sterilize/high-level disinfect endoscope		
19. Disinfect bed/work area prior to next patient		
20. Verify post-procedure discharge instructions were given		
ASSIST WITH HOT BIOPSY OR SNARE POLYPECTOMY		
1. Set up electrosurgical generator (i.e. Endostat, Valleylab or equivalent)		
2. Attach grounding pad to patient		
3. Connect active cord to hot biopsy forceps or snare device		
4. Select generator settings as directed by physician/IAW manufacturers instruction		
5. Perform biopsy or polypectomy as directed by physician		
6. Process specimens for pathology		
FINAL RESULTS/NOTES: If the patient experiences pain or bleeding evaluation by the credentialed provider is indicated.		

FEEDBACK: Using this checklist as a source of information, discuss the trainee's performance indicating

PERFORM STERILIZATION OF ENDOSCOPE

SUBJECT AREA:	Gastroenterology.
TASK(s):	Perform sterilization of endoscope.
CFETP/STS REFERENCE(s):	Pertinent AF Form 797.
EQUIPMENT REQUIRED:	Automated endoscope processor
TRAINING REFERENCE(s):	Guidelines for the use of high-level disinfectants and sterilants for reprocessing of flexible gastrointestinal endoscopes, Society of Gastrointestinal Nurses and Associates, Inc., 2000 APIC guideline for infection prevention and control in flexible endoscopy, Association for Professional in Infection Control and Epidemiology, Inc., PA 3., 2000 Video and Manual for disinfection of endoscopes by Olympus America
REMARKS/NOTES:	**The elevator channel of diagnostic/therapeutic duodenoscopes requires repeated flushing with disinfectant and alcohol. Most mechanical processors do not have adaptors for the channel. Failure to properly irrigate this channel between uses has been shown to contribute to disease transmission and patient infection. See the manufacturers guide for further guidance.
OBJECTIVE:	The trainee will successfully demonstrate without error the performance aspects of performing sterilization of endoscope.
EVALUATION INSTRUCTIONS:	<ol style="list-style-type: none">1. This QTP should be evaluated during actual performance of the tasks.2. Since this task involves direct patient care, ensure the trainee understands the process, knows inherent risk factors, and is closely supervised during the evaluation. The evaluator will STOP the procedure immediately and correct the trainee if performance may compromise patient safety. Ensure the trainee dons all personal protective equipment (PPE) required by current standards/precautions and follows applicable radiation safety guidelines.3. The trainee must satisfactorily perform all parts of the task with 100% accuracy, <i>without assistance</i>.4. Use the appropriate checklist when evaluating the task to ensure all steps of the task are accomplished.5. Document competency upon satisfactory completion of the evaluation. Initial evaluation should be documented in the Specialty Training Standard (STS) of the trainee's CFETP. All recurring evaluation should be documented using AF Form 1098, <i>Special Task Certification and Recurring Training</i>, or using an approved substitute record.

PERFORM STERILIZATION OF ENDOSCOPE

PERFORMANCE CHECKLIST

PERFORM STERILIZATION OF ENDOSCOPE	SAT	UNSAT
PERFORMING COLD STERILIZATION OF ENDOSCOPE		
1. Gather supplies/equipment		
2. Don protective attire		
3. Ensure adequate pre-cleaning was performed		
4. Ensure well-ventilated working area		
5. Submerge entire scope in sterilization solution/document time		
6. Soak in sterilant (ie. glutaraldehyde) IAW manufacturer's instructions		
7. Rinse thoroughly		
8. Flush inner channels with isopropyl alcohol		
9. Hang in clean area to air dry		
PERFORM MECHANICAL STERILIZATION OF ENDOSCOPE STERIS II PROCESSOR		
1. Don protective attire		
2. Insert acid/buffer canister		
3. Rest scope in appropriate tray		
4. Connect endoscope to adapters		
5. Insert chemical strip		
6. Perform/document biological testing		
7. Initiate cleaning cycles		
8. Log sterilization data from printout		
9. Flush endoscope with isopropyl alcohol		
10. Hang to air dry		
11. Wipe down external surfaces of sterilizer		
12. Wash hands		
OLYMPUS/ETC (Follow manufacturer's instructions for the proper connection of individual scope to the processor)		
1. Don protective attire		
2. Ensure adequate levels of detergent, alcohol, and disinfectant		
3. Connect endoscope to adapters		
4. Close lid, enter scope/operator demographics		
5. Run cleaning cycle		
6. Monitor processors for cycle completion		
7. Remove scopes, hang to air dry		
8. Wipe down external surfaces of processor		
9. Wash hands		
FINAL RESULTS/NOTES: If the patient experiences pain or bleeding, evaluation by the credentialed provider is indicated.		

FEEDBACK: Using this checklist as a source of information, discuss the trainee's performance indicating

