

Dear Committee Members,

My name is Trudy Riehl. I have been a Certified Surgical Technologist for 25 years. I am the Surgical Technology Program Director at Bismarck State College, in Bismarck North Dakota and am finishing my third and final term on the Association of Surgical Technologists National Education and Professional Standards Committee. I learned today of the dangerous amendment being proposed to HB 2876, which was originally passed in 2015. Amendment HB 4106 will most definitely put the surgical patients of Oregon in danger by lowering the standards set for by HB 2876. Please, vote NO on this amendment.

Surgical Technologists have extensive training in the principles of aseptic technique and how these principles are applied in the operating room. Allowing untrained, unprepared, and uneducated persons to “learn on the job” would be detrimental to the safety and health of Oregon’s surgical patients. If this amendment passed it could set a precedent in other states and put thousands of surgical patients at risk nationally. Education for the surgical technologist takes time and practice. Prior to being allowed into an operating room, students in an ABHES or CAHEEP accredited surgical technology program must prove entry-level competency set for by the Core Curriculum in Surgical Technology. Accredited programs themselves, must prove they have met the education standards set forth by the CAHEEP and ABHES. Formal education ensures the safety of the patient. These patients are someone’s loved one and deserve to be protected. The practice of the Certified Surgical Technologist is one of precision and not one to be taken lightly. Without proper training, a surgical site infection may certainly cause the demise of a surgical patient.

The claims in the advertising material supporting this bill state “Today, nurses are having to step in and take over these responsibilities, and that's taking nurses away from what they do best. This program will help with the nursing shortage” are absurd. To say the nursing shortage is perpetuated by the shortage of Certified Surgical Technologists is ridiculous. We are two separate professions. Though there are operating room nurses who can function in the role of surgical technologist, most are used to fill the role of circulating nurse.

Hospitals are unwilling to pay surgical technologists based on their skill level, education, and expertise and that has contributed to the shortage in our profession. Community Colleges like the one where I am employed, are quite affordable. Most states are offering financial assistance to their citizens interested in healthcare. Doing away with qualified, properly trained, individuals is not the answer to a shortage.

I ask each of you to consider the role of the surgical technologist and the impact we have on the surgical patient. We must know the anatomy and physiology of the human body, be able to anticipate each step the surgeon makes, know the individual steps of the surgical procedure, know how to properly prepare, and combine medications, how to operate powerful and potentially dangerous surgical equipment, and above all, be our patient’s voice. *Aeger Primo* – The Patient First. The motto of the Association of Surgical Technologists and one of the first things I teach my students. We are there to fulfill our role within the surgical team, but above all to ensure our patients are safe. The simple drop of a hand, brush

of a sleeve or missed step can mean the difference between a successful patient outcome or a tragedy and that is nothing to leave in the hands of an apprentice.

State laws require a license to cut hair, take an x-ray, drive a car, but not to be a part of a surgical team. We place our hands upon and within the human body and yet there are those who believe our profession should be less regulated. Please help us protect surgical patients and vote NO on HB 4106. Every surgical patient deserves a Certified Surgical Technologist at their bedside.

Sincerely,

*Trudy Riehl, CST, FAST*

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