TECHNICIAN PRACTICAL PERFORMANCE TEST
DMEK PROCESSING

Applicant's Name:

Eye Bank:

Examiner's Name:
(please print)

Procedure Observed: ____________________________________________________________

Total Points:   Aseptic Technique   Surgical Technique

Aseptic Points Range:  10 - 9   Pass     8 or Less   Fail
Surgical Points Range: 10 - 8   Pass     7 or Less   Fail

ASEPTIC TECHNIQUE

1. Appropriate dress (Was the technician wearing moisture impermeable clothing with sterile sleeves/sterile
   impermeable gown, cap, mask and protective eye wear?)
   □ 1   Yes
   □ 0   No   If no, what was technician wearing? ___________________________________

2. Wrapping of instruments/supplies (includes double wrapped, single-wrapped, and visi-peel bag)
   □ 1   Acceptable
   □ 0   Unacceptable   If unacceptable, describe: ___________________________________________

3. Kit/supplies unwrapped so that the sterility of instruments/supplies and sterile field are not compromised
   □ 1   Yes
   □ 0   No   If aseptic technique violated, note how:___________________________________

4. Placement of non-sterile items around sterile field
   □ 1   Acceptable
   □ 0   Unacceptable   If unacceptable, describe:_____________________________________

5. Surgical hand antisepsis (via 3-5 minute scrub or EtOH-based surgical hand rub product) per AORN
   recommended practices and Eye Bank’s SOP
   □ 1   Appropriate
   □ 0   Inappropriate technique   If not appropriate, describe:________________________

6. Gloving technique
   □ 1   Acceptable
   □ 0   Unacceptable   If unacceptable, describe:____________________________________
7. Transfer of ocular tissue to sterile field
   □ 1 Acceptable
   □ 0 Unacceptable  If unacceptable, describe:___________________________________

8. Placement of instruments/supplies during procedure
   □ 1 Acceptable
   □ 0 Unacceptable  If unacceptable, describe:____________________________________

9. Aseptic technique maintained throughout procedure
   □ 1 Acceptable
   □ 0 Unacceptable  If unacceptable, describe:____________________________________

10. Transfer of corneoscleral disc to vial or viewing chamber of storage solution
    □ 1 Acceptable
    □ 0 Unacceptable  If unacceptable, describe:____________________________________

**SURGICAL TECHNIQUE** (use the section appropriate for dissection method used)

**PNEUMATIC (BIG BUBBLE) DISSECTION**

1. Manual dexterity during procedure
   □ 2 Acceptable
   □ 1 Acceptable: slight problems
   □ 0 Unacceptable: many problems  If many problems, describe:___________________________

2. Insertion of needle / cannula into stroma
   □ 2 Acceptable
   □ 1 Acceptable: slight problems
   □ 0 Unacceptable: many problems  If many problems, describe:___________________________

3. Creation of bubble
   □ 2 Acceptable
   □ 1 Acceptable: slight problems
   □ 0 Unacceptable: many problems  If many problems, describe:___________________________

4. Deflation of bubble
   □ 2 Acceptable
   □ 1 Acceptable: slight problems
   □ 0 Unacceptable: many problems  If many problems, describe:___________________________

5. Question: Did the technician perform this procedure as described in the Eye Bank policies and procedures manual?
   □ 1 Yes
   □ 0 No
6. Question: Did the technician explain deviations, if any, from the procedure as described in the Eye Bank policies and procedures manual?

☐ 1 Yes (or not applicable)
☐ 0 No

**DESCEMET PEELING (SCUBA / MODIFIED SCUBA) DISSECTION**

1. Manual dexterity during procedure

☐ 2 Acceptable
☐ 1 Acceptable: slight problems
☐ 0 Unacceptable: many problems If many problems, describe: __________________________

2. Scoring of Descemet Membrane to minimize tears

☐ 2 Acceptable
☐ 1 Acceptable: slight problems
☐ 0 Unacceptable: many problems If many problems, describe: __________________________

3. Dye (e.g. Vision Blue) initiated and rinsed

☐ 2 Acceptable
☐ 0 Unacceptable If unacceptable, describe: __________________________________________

4. Peeling of Descemet Membrane to minimize tears

☐ 2 Acceptable
☐ 1 Acceptable: slight problems
☐ 0 Unacceptable: many problems If many problems, describe: __________________________

5. Question: Did the technician perform this procedure as described in the Eye Bank policies and procedures manual?

☐ 1 Yes
☐ 0 No

6. Question: Did the technician explain deviations, if any, from the procedure as described in the Eye Bank policies and procedures manual?

☐ 1 Yes (or not applicable)
☐ 0 No

**COMMENT SECTION:**