

TECHNICIAN PRACTICAL PERFORMANCE TEST LABORATORY MICROKERATOME LAMELLAR PROCESSING

Applicant's Name: _____

Eye Bank: _____

Examiner's Name:
(please print) _____

Total Points: **Aseptic Technique** _____ **Surgical Technique** _____

Aseptic Points Range: 11 - 10 Pass 9 or Less Fail

Surgical Points Range: 18 - 14 Pass 13 or Less Fail

ASEPTIC TECHNIQUE

- 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? _____
- Wrapping of instruments (includes double wrapped, single-wrapped, and visi-peel bag)
1 Acceptable
0 Unacceptable If unacceptable, describe: _____
- Kit unwrapped so that the sterility of instruments, equipment, and sterile field are not compromised
1 Yes
0 No If aseptic technique violated, note how: _____
- Placement of non-sterile items around sterile field
1 Acceptable
0 Unacceptable If unacceptable, describe: _____
- 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: _____
- Gloving technique
1 Acceptable
0 Unacceptable If unacceptable, describe: _____

7. Transfer of corneoscleral disc or whole eye from container to sterile field
- 1 Acceptable
0 Unacceptable If unacceptable, describe: _____
8. Placement of instrumentation and equipment during procedure
- 1 Acceptable
0 Unacceptable If unacceptable, describe: _____
9. Instruments used for conjunctival resection– Per Eye Bank’s SOP
- 1 Acceptable
0 Unacceptable If unacceptable, describe: _____
0 Not performed: SOP requires removal however technician did not perform
1 N/A: Eye Bank’s SOP does not require
10. Measurement of the stromal bed while maintaining aseptic technique (ie. using pachymetry during procedure) – Per Eye Bank’s SOP.
- 1 Acceptable
0 Unacceptable If unacceptable, describe: _____
0 Not performed: SOP requires, however technician did not perform
1 N/A: Eye Bank’s SOP does not require
11. Transfer of corneoscleral disc to vial or viewing chamber of storage solution
- 1 Acceptable
0 Unacceptable If unacceptable, describe: _____

SURGICAL TECHNIQUE

1. Objective(s) for bed thickness established and nomogram consulted and used correctly – Per Eye Bank’s SOP
- 1 Acceptable
0 Unacceptable If unacceptable, describe: _____
0 Not performed: SOP requires, however technician did not perform
1 N/A: Eye Bank’s SOP does not require
2. Microkeratome set up and appropriate check(s) run according to manufacturer’s recommendations – Per Eye Bank’s SOP
- 1 Acceptable
0 Unacceptable If unacceptable, describe: _____
0 Not performed: SOP requires, however technician did not perform
1 N/A: Eye Bank’s SOP does not require

3. Conjunctiva removal (360° peritomy) – Per Eye Bank’s SOP
- 1 Acceptable: complete removal
 - 0 Unacceptable: compromised cornea, incomplete removal or contaminated the tissue
 - 0 Not performed: SOP requires, however technician did not perform
 - 1 N/A: Eye Bank’s SOP does not require
4. Cornea placed on Artificial Chamber satisfactorily (ie. centers cornea, does not fold, induce stress lines, or traumatize endothelium) – Per Eye Bank’s SOP
- 2 Acceptable
 - 1 Acceptable: slight problems
 - 0 Unacceptable: many problems If many problems, describe: _____
 - 0 Not performed: SOP requires, however technician did not perform
 - 2 N/A: Eye Bank’s SOP does not require
5. Adequately assesses pressure (ie. does not induce stress lines or traumatize endothelium) – Per Eye Bank’s SOP
- 2 Acceptable
 - 1 Acceptable: slight problems
 - 0 Unacceptable: many problems If many problems, describe: _____
 - 0 Not performed: SOP requires, however technician did not perform
 - 2 N/A: Eye Bank’s SOP does not require
6. Smooth pass with microkeratome
- 2 Acceptable
 - 1 Acceptable: slight problems
 - 0 Unacceptable: many problems If many problems, describe: _____
7. Anterior Chamber Maintained
- 2 Acceptable
 - 0 Unacceptable: anterior chamber collapsed
8. Thickness and diameter of stromal bed measured - per Eye Bank’s SOP (*Note: The timing of this step may vary between banks, but should occur at the time specified by each Eye Bank’s SOP)
- 1 Acceptable
 - 0 Unacceptable
9. Removes cornea from artificial chamber, does not fold cornea, induce stress lines or traumatize endothelium – Per Eye Bank’s SOP
- 2 Acceptable
 - 1 Acceptable: slight problems
 - 0 Unacceptable: many problems If many problems, describe: _____
10. Manual dexterity during procedure
- 2 Acceptable
 - 1 Acceptable: slight problems
 - 0 Unacceptable: many problems If many problems, describe: _____

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

- 1 Yes
- 0 No

12. 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: