

AORN Standards for RN First Assistant Education Programs

Registered nurse first assistant (RNFA) education programs are designed to provide RNs with the educational preparation necessary to assume the role of the first assistant in operative and other invasive procedures.

The “Standards for RN first assistant education programs” serve as the foundation upon which RNFA programs are developed and implemented. These standards are intended to guide program administrators and faculty in designing and evaluating curricula. These standards are broad in scope, definitive, relevant, and attainable, and they provide the framework for RNFA education.

Standard I

Requirements for RNFA education programs shall include the following:

Programs shall

- A. be equivalent to one academic year of formal, post-basic nursing study.
- B. award college credits and degrees or certificates of RNFA status upon satisfactory completion of all requirements.
- C. be associated with schools of nursing at universities or colleges that are accredited for higher education by an accrediting agency that is nationally recognized by the Secretary of the US Department of Education.

The registered nursing program shall be approved by a state licensing jurisdiction for nursing programs at the university, college, or community college level or by another national or regional agency that is nationally recognized by the Secretary of the US Department of Education as a specialized accrediting agency for nursing programs.

- D. recognize AORN’s “Official statement on RN first assistants.”¹
- E. address all of the modules in the *Core Curriculum for the RN First Assistant*.²

Standard II

Preadmission requirements for RNFA education programs shall include the following:

- A. General admission requirements as determined by each educational institution.
- B. Proof of licensure to practice as an RN in the state in which the clinical internship will be undertaken.

- C. Verification of certification as one of the following:
 1. CNOR or CNOR eligible or
 2. board certified or board eligible as an advanced practice nurse (APN).

APNs without competence in intraoperative patient care must undergo an assessment regarding clinical skills and knowledge. If it is determined that skills and knowledge are deficient, faculty in the educational institution shall develop a plan to remediate identified deficiencies.

3. Certification must be submitted before program completion.
- D. Cardiopulmonary resuscitation (CPR) or basic cardiac life support certification (BCLS) is required; advanced cardiac life support (ACLS) is preferred.
- E. Letters of recommendation attesting to the years of experience as an RN and knowledge, judgment, and skills specific to surgical patient care.

Standard III

The didactic component of the curriculum for RNFA education programs shall be designed and evaluated based on a course description that identifies course content, faculty, length of the course, instructional and evaluation methodologies, and instructional resources.

- A. Course content shall emphasize the expanded functions unique to the RNFA during operative and other invasive procedures, including, but not limited to,
 1. preoperative patient management in collaboration with other health care providers, including, but not limited to,
 - performing a preoperative evaluation/focused nursing assessment,
 - communicating or collaborating with other health care providers regarding the patient’s plan of care, and
 - writing preoperative orders according to established protocols;
 2. intraoperative surgical first-assisting, including, but not limited to,
 - using instruments and medical devices,
 - providing exposure,
 - handling and cutting tissue,
 - providing hemostasis, and
 - suturing;

3. postoperative patient management in collaboration with other health care providers in the immediate postoperative period and beyond, including, but not limited to,
 - writing postoperative orders and operative notes according to established protocols,
 - participating in postoperative rounds, and
 - assisting with discharge planning and identifying appropriate community resources as needed.¹
- B. A multidisciplinary faculty shall include a minimum of
 1. a perioperative nurse with a master of science in nursing degree,
 2. a CRNFA, and
 3. a board-certified surgeon.
- C. The course shall be a minimum of one academic semester of study, including student assignments, classroom instruction, and laboratory practicums.
- D. Instructional methodologies shall include, but not be limited to, lecture, interactive discussion, independent study, instructional media, demonstration/ return demonstration, and laboratory practicums.
- E. Evaluation methodologies shall include, but not be limited to, written examinations, laboratory practicums, and independent critical thinking assignments.
- F. Instructional resources shall include
 1. *Core Curriculum for the RN First Assistant*² and
 2. texts or other instructional media that include anatomy and physiology, operative and other invasive procedures, and preoperative and postoperative patient assessment and management.

Standard IV

Specific requirements for matriculation in the clinical component shall include:

- A. Successful completion of all requirements of the didactic component and
- B. Evidence of current personal professional liability insurance for student/intern RNFA practice.

Standard V

The clinical component of the curriculum for RNFA education programs shall be designed and evaluated based on a course description that identifies course content, faculty, length of the course,

instructional and evaluation methodologies, and instructional resources.

- A. Course content emphasizes the expanded functions unique to the RNFA intern during operative and other invasive procedures, including, but not limited to,
 1. preoperative patient management in collaboration with other health care providers, including, but not limited to,
 - performing and documenting preoperative evaluation/focused nursing assessment,
 - communicating and collaborating with other health care providers regarding the patient plan of care, and
 - writing preoperative orders according to established protocols;
 2. validated documentation of intraoperative surgical first-assisting clinical experience, including, but not limited to,
 - using instruments and medical devices,
 - providing exposure,
 - handling and cutting tissue,
 - providing hemostasis, and
 - suturing;
 3. postoperative patient management in collaboration with other health care providers in the immediate postoperative period and beyond, including, but not limited to,
 - writing postoperative orders and operative notes according to established protocols,
 - participating in postoperative rounds, and
 - assisting with discharge planning and identifying appropriate community resources as needed.¹
- B. A multidisciplinary faculty shall include
 1. a board-certified surgeon in the RNFA intern's primary area of practice,
 2. an RNFA program faculty member, and
 3. an RNFA/CRNFA mentor, if available and/or desired by the student.
- C. The clinical course shall be a minimum of one academic semester and shall include, but not be limited to, intern assignments as assistant at surgery and patient care management.
- D. Instructional methodologies shall include, but not be limited to, physician-supervised clinical activities, assigned independent learning activities, a self-evaluative learning diary, a clinical case study project, and a surgical intervention participation log.

- E. Evaluation methodologies shall include, but not be limited to, completion of assigned independent learning activities, a self-evaluative learning diary, a clinical case study project, preceptor evaluations, a surgical intervention participation log, and mentor evaluations when applicable. Students must satisfactorily complete all requirements. The RNFA program faculty reviews all documentation. The surgeon preceptor provides a summative evaluation of achievement of competence and a letter of recommendation based on all required learning activities, as does the RNFA/CRNFA mentor when applicable.
- F. Instructional resources shall include
1. *Core Curriculum for the RN First Assistant*,²
 2. texts or other instructional media, and
 3. consultation and collaboration with other health care providers.

Glossary

Faculty: A person who is appointed by the educational institution to design, teach, or evaluate a course of instruction.

Advanced practice nurse (APN): Advanced practice nurse is a term used to refer to an RN prepared at the graduate level who has met advanced educational and clinical practice requirements for a particular and unique clinical practice focus. There are four principle types of APNs, including nurse practitioner (NP), clinical nurse specialist (CNS), certified nurse midwife (CNM), and certified RN anesthetist (CRNA).

CNOR: The documented validation of the professional achievement of identified standards of practice by an individual registered nurse providing care for patients before, during, and after surgery.

CRNFA: The documented validation of the professional achievement of identified standards of practice by an individual registered nurse first assistant providing care for patients before, during, and after surgery.

Preceptor: One who teaches, counsels, inspires, serves as a role model, and supports the growth and development of the novice for a fixed and limited period.

Mentor: One who provides encouragement and acts as a guide and facilitator while modeling professional nursing behaviors.

REFERENCES

1. AORN official statement on RN first assistants. In: *Standards, Recommended Practices, and Guidelines*. Denver, CO: AORN, Inc, 2007:404-406.
2. Vaiden RE, ed. *Core Curriculum for the RN First Assistant*. 4th ed. Denver, CO: AORN, Inc, 2005.

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