



HEALTHCARE PROFESSIONALS COMPETENCY TESTING (HPCT)

Surgical Technician Certification Examination Scrubs Requirement

PLEASE NOTE THAT YOU ARE **NOT** REQUIRED TO COMPLETE THE SCRUBS BEFORE SITTING FOR YOUR CERTIFICATION EXAM. THE SCRUBS CAN BE COMPLETED **AFTER** YOUR CERTIFICATION EXAM.

When you complete your scrubs, give to your employer alongside your CST certification.

Name of Healthcare facility: _____

Name of Trainee _____

A minimum of 100 scrubs are required. A minimum of 50 scrubs must be in general surgery.

	First Scrub	2 nd Scrub	Type of surgery	Date	Preceptor sign
10 scrubs					
10 scrubs					
10 scrubs					
10 scrubs					
10 scrubs					
10 scrubs					
10 scrubs					
10 scrubs					
10 scrubs					
10 scrubs					
5 scrubs					
5 scrubs					
5 scrubs					
5 scrubs					

Preceptor Statement

I certify that _____ has completed the above signed scrubs and has demonstrated proficiency in her responsibilities as a surgical technician.

Name: _____

Title _____

Signature _____

Contact Email _____

Phone Number _____