



**Medical University of South Carolina
College of Health Professions
Extracorporeal Science Program**

**Program Minimum Skills for Eligibility to
Participate in Educational Programs and Activities**

The following skills are required by applicants to this program. These skills are in addition to the university minimum abilities and are program specific. Applicants to this program should possess these abilities with or without reasonable accommodations.

To successfully progress through the Extracorporeal Science Program, applicants must be able to perform the essential functions or tasks of a perfusionist using the following abilities:

Sensory:

- Discriminate changes in monitoring and life support devices using visual and auditory senses. This includes visual perception of depth, color and acuity (corrected to 20/40).
- Communicate clearly and effectively in English through oral and written methods in order to interact with other health care providers and patients of all ages.

Cognitive:

- Use reason, analysis, calculations, problem solving, critical thinking skills, self-evaluation and other learning skills to acquire knowledge, comprehend, and synthesize complex situations.
- Understand and follow specific procedural protocols as approved by the attending surgeons and follow directions given by the clinical instructors.
- Apply theoretical knowledge to practice to provide safe cardiopulmonary bypass
- Interpret information derived from auditory written and other visual data to determine appropriate perfusion management and related procedures.
- Measure and record data such as vital signs, intake and output, and laboratory results.

Behavioral:

- Demonstrate personal and professional ethical behavior, self-control as well as tactfulness, sensitivity, compassion, honesty, integrity, empathy, and respect.
- Work flexibly and effectively in stressful and rapidly changing situations.
- Cooperate with other members of the health care team to provide a therapeutic environment and safe patient care.

Name of Applicant _____ CollegeNet Username/ID _____
(Please type or print Last, First, Middle Initial)

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I have read the list of cognitive sensory and behavioral skills and attest that I can perform all the skills listed with or without reasonable accommodation.

Signed: _____ Date: _____

Printed Name: _____

**Students seeking to request an accommodation may do so by filing a “Disability Accommodation Request” form in the Student Services Center in the College of Health Professions.