

# Independent Assessment Form: Simple Laparoscopic Urological Surgery

|  |           |             |
|--|-----------|-------------|
| Trainee:   | Assessor: | Surgery:    |
| Hospital:  | Duration: | Blood Loss: |
| Operation more difficult than usual? Yes / No (If yes, state reason) |           |             |

| Competencies |   | Rating<br>N / F / P / E | Comments |
|--------------|---|-------------------------|----------|
| <b>I.</b>    | <b>Pre operative planning</b>   |                         |          |
| 1            | Recognition of anatomical and pathological abnormalities (and relevant co-morbidities) and selects appropriate operative strategies / techniques to deal with |                         |          |
| 2            | Demonstrates ability to make reasoned choice of appropriate equipment, materials or devices (if any)  |                         |          |
| 3            | Checks materials, equipment and device requirements with operating room staff   |                         |          |
| 4            | Ensures the operation site is marked where applicable   |                         |          |
| 5            | Checks patient records, personally reviews investigations   |                         |          |
| <b>II.</b>   | <b>Pre operative preparation</b>  |                         |          |
| 1            | Checks in theatre that consent has been obtained  |                         |          |
| 2            | Gives effective briefing to theatre team  |                         |          |
| 3            | Ensures proper and safe positioning of the patient on the operating table   |                         |          |
| 4            | Demonstrates careful skin preparation and draping of the patient's operative field  |                         |          |
| 5            | Ensures general equipment and materials are deployed safely (e.g. catheter, operative energy source)  |                         |          |
| 6            | Ensures appropriate drugs administered  |                         |          |
| 7            | Arranges for and deploys specialist equipment (e.g. Laparoscopic stacks/monitors) effectively   |                         |          |
| <b>III.</b>  | <b>Intra operative technique</b>  |                         |          |
| 1            | Demonstrates knowledge of optimum port sites for laparoscopic telescope and instrument access   |                         |          |
| 2            | Achieves adequate camera port access through purposeful dissection in correct tissue planes and identifies all structures correctly                           |                         |          |
| 3            | Follows an agreed, logical sequence or protocol for the procedure   |                         |          |
| 4            | Consistently handles tissue well with minimal damage  |                         |          |
| 5            | Controls bleeding promptly by an appropriate method   |                         |          |
| 6            | Uses instruments appropriately and safely   |                         |          |
| 7            | Demonstrates a sound technique of knots and sutures/staples (if applicable)   |                         |          |
| 8            | Proceeds at appropriate pace with economy of movement   |                         |          |
| 9            | Anticipates and responds appropriately to variation e.g. anatomy  |                         |          |
| 10           | Deals calmly and effectively with unexpected events/complications   |                         |          |
| 11           | Uses assistant(s) to the best advantage at all times  |                         |          |

| Competencies |   | Rating<br>N / F / P / E | Comments |
|--------------|---|-------------------------|----------|
| 12           | Communicates clearly and consistently with the scrub team   |                         |          |
| 13           | Communicates clearly and consistently with the anaesthetist   |                         |          |
| 14           | Asks for mentor for help and/or converts to open where appropriate  |                         |          |
| 15           | Performs safe placement of the specimen within a retrieval bag and delivery of the specimen from the abdomen within the bag |                         |          |
| 16           | Performs sound and secure haemostasis including internal inspection of port sites prior to closure                          |                         |          |
| 17           | Demonstrates safe insertion and placement of drain (if applicable)  |                         |          |
| 18           | Completes a sound wound repair  |                         |          |
| 19           | Protects the wound with dressings, splints and drains where appropriate   |                         |          |
| <b>IV.</b>   | <b>Post operative management</b>  |                         |          |
| 1            | Ensures the patient is transferred safely from the operating table to bed   |                         |          |
| 2            | Constructs a clear operation note   |                         |          |
| 3            | Records clear and appropriate post operative instructions   |                         |          |
| 4            | Deals with specimens. Labels and orientates specimens appropriately   |                         |          |

**Rating:**

**N = Not appropriate**

**F = Fail**

**P = Pass**

**E = Excellent**

### Overall Rating

|                  | Tick as appropriate | Comments |
|------------------|---------------------|----------|
| <b>Fail</b>      |                     |          |
| <b>Pass</b>      |                     |          |
| <b>Excellent</b> |                     |          |

**Signatures:**

|                 |                  |
|-----------------|------------------|
| <b>Trainee:</b> | <b>Assessor:</b> |
|-----------------|------------------|

**N.B.**

\*Assessors are normally consultants/ professor.

\*The trainee should explain what he/she intends to do throughout the procedure. The Assessor should provide verbal advice if required, and intervene if patient safety is at risk.