

GENERAL SURGERY EMERGENCY 1

## JOINT COMMITTEE ON HIGHER SURGICAL TRAINING

### General Surgery Operative Experience and Competence Summary

Name of Trainee: \_\_\_\_\_ NTN/FTN/LAT/Other  
 Hospital/Post: \_\_\_\_\_ Year: 1 / 2 / 3 / 4 / 5 / 6/7  
 Name(s) of Trainer(s): \_\_\_\_\_ CCST DATE / /  
 This form covers the period starting: / / and ending: / /

Total Experience (BST & HST)			Comp. Level	Procedure	Experience this post			Competence Level*	
P	PA	A			P	PA	A	Tr 1	Tr 2
				Diagnostic Laparoscopy					
				Closure of Perforated Peptic Ulcer					
				Operations for GI Bleeding					
				Emergency Cholecystectomy					
				Splenectomy for Trauma					
				Emergency Hernia Repair					
				Laparotomy for Small Bowel Obstruction					
				Small Bowel Resection					
				Laparotomy for Large Bowel Obstruction					
				Laparotomy for Perforated Colon					
				Stoma Formation					
				Appendicectomy					
				Drainage of Ano-Rectal Sepsis					
				Laparotomy for Abdominal Injury					
				Laparotomy for Post-Op Complications					
				Bladder Drainage					
				Suprapubic Cystostomy					

**Full instructions for the completion of this form can be found on the reverse side**  
 (\*Where trainers disagree on the level of competence, the lowest level should be accepted)

Signature of Trainee: \_\_\_\_\_ Date: / /  
 Signature of Trainer 1 \_\_\_\_\_ Date: / /  
 Signature of Trainer 2 \_\_\_\_\_ Date: / /

When completed, please send the top copy to.....retain a copy for your portfolio, and send the third copy to the Specialty Manager in General Surgery, Offices of the SAC in General Surgery, Royal College of Surgeons of England, Lincoln's Inn Fields, London WC2A 3PN.

## Operative experience

**Trainee:** Enter your electronic logbook totals\* for the total number of procedures that you have performed since you began surgical training (BST and HST) in the first three columns

Enter your electronic logbook totals\* for the number of procedures that you have performed during this training period in the three 'Experience this period' columns.

- \*     **P**     Performed without direct supervision (**or supervising a junior trainee**)  
      **PA**    Performed with supervision by a senior trainee or consultant (supervisor at table  
          or in the theatre ie a consolidation of all logbook categories apart from P & A)  
      **A**     Assisting a senior trainee or consultant

(Note: Regardless of their level of competence, trainers are reminded that trainees can only operate under the direction of a named consultant.)

## Operative competence grading

**Trainer(s):** Rate the trainee's competence to perform each procedure at the end of this training period according to the following rating scale:

- U**     Unknown (not assessed) during this training period  
**A**     Competent to perform the procedure unsupervised (can deal with complications)  
**B**     Does not usually require supervision but may need help occasionally  
**C**     Able to perform the procedure under supervision  
**D**     Unable to perform the entire procedure under supervision

Use the following checklist of core skills to help you when making your assessment\*:

- Checks patient case record and that **consent** has been obtained
- **Communicates** well with the theatre team
- Thorough **preparation** (marking, catheter, antibiotics etc)
- Good **scrub** and aseptic technique
- **Positions** patient correctly on operating table
- Makes appropriate **incision(s)**
- Purposeful **dissection** in correct tissue planes
- Demonstrates sound knowledge of **anatomy**
- Familiar with all the **steps** of the procedure
- Uses the correct **instruments** efficiently
- Handles dangerous instruments **safely**
- Uses **assistant(s)** to the best advantage
- Possesses good hand-eye **co-ordination**
- Handles tissues **gently and dextrously**
- Reliable **suturing and knotting** techniques
- **Sound repair** or anastomosis
- Uses **diathermy** appropriately and safely
- Able to **control bleeding** by suction, clips or sutures
- **Closes wound** neatly and securely
- **Timeliness:** the procedure is unhurried but with no unnecessary delay
- Good documentation (**operation note and postop. instructions**)  
    (\*Not all of these will apply to every procedure)