

# PBA: Laparoscopic Cholecystectomy

## PROCEDURE-BASED ASSESSMENT IN GENERAL SURGERY

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

### Feedback

Verbal and written feedback is a mandatory component of this assessment. Please use this space to record areas of strength and suggestions for development which were highlighted during discussion with the trainee.

TRAINEE'S REFLECTIONS	
Trainee's reflections on this activity	
What did I learn from this experience?	
What did I do well?	
What do I need to improve or change? How will I achieve it?	
Trainee's comments	

ASSESSOR'S FEEDBACK	
General	
Strengths	
What did the trainee do well?	
Development needs	
Recommended actions	

**Rating**

N=Not observed / I=Improvement required / S=Satisfactory / A=Above Average / E=Excellent / NA=Not applicable

<b>Competencies</b>	<b>Rating</b> N / I / S / A / E / NA	<b>Comments</b>
<b>I. Pre-operative planning</b> 1 Recognises indications of the procedure 2 Arranges / reviews relevant investigations 3 Considers possibility of co-existing CBD stones, e.g. pre-op ERCP, IOC 4 Anticipates potential surgical difficulties 5 Checks patient records, personally reviews investigations		
<b>II. Pre-operative preparation</b> 1 Checks in theatre that consent has been properly 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 5 Demonstrates careful draping of the patient's operative field 6 Ensures general equipment and materials are deployed safely (e.g. catheter, diathermy) 7 Ensures appropriate drugs administered		
<b>III. Intra-operative technique</b> 1 Demonstrates knowledge of optimum skin incision/portal/access 2 Achieves an adequate exposure through purposeful dissection in correct tissue planes and identifies all structures correctly 3 Completes a sound wound repair where appropriate 4 Protects the wound with dressings, splints and drains where appropriate 5 Changes patient position to optimise surgical field exposure, e.g. head up, right side up 6 Consistently handles tissue well with minimal damage 7 Controls bleeding promptly by an appropriate method 8 Demonstrates a sound technique of knots and sutures/staples 9 Uses instruments appropriately and safely 10 Proceeds at appropriate pace with economy of movement 11 Anticipates and responds appropriately to variation e.g. anatomy 12 Deals calmly and effectively with unexpected events/complications 13 Uses assistant(s) to the best advantage at all times 14 Communicates clearly and consistently with the scrub team		

15	Communicates clearly and consistently with the anaesthetist		
16	Creates a pneumoperitoneum safely		
17	Safely inserts an appropriate number of ports		
18	Achieves proper cranial and lateral fundal retraction		
19	Dissects cholecystectomy triangle safely		
20	Demonstrates critical view of safety		
21	Checks presence of cystic duct stone		
22	Safely ligates and divides cystic duct and cystic artery		
23	Recognises the need for conversion		
24	Recognises indications for operative cholangiogram		
25	Performs operative cholangiogram safely and interprets radiological findings appropriately		
26	Carefully mobilises gallbladder off the liver		
27	Checks hemostasis and bile leak		
28	Safely extracts gallbladder from a port site		
<b>IV. 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 if applicable, labels and orientates specimens appropriately		
5	Maintains a good rapport with patient and relative, willing to communicate with them the progress and answering their questions; full explanation of the pathologic finding and appropriate referral to other specialties if necessary		

**N.B.** \*Assessors are normally trainers, associate consultants, consultants or 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.*

**Overall Rating** (tick as appropriate)

Level 1 – Can do with assistance	<input type="checkbox"/>	Comments:
Level 2 – Competent to do independently	<input type="checkbox"/>	
Level 3 – Manage to complete complex case	<input type="checkbox"/>	
and deal with complications		

**Signatures**

Trainee:	Assessor:
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