Obstetrics & Gynaecology PBA: Caesarean Section

| Trainee: | Assessor: | Date: |
|------------|-------------|-----------|
| StR Year : | Start time: | End time: |

Elective / Emergency? (circle one)

Intermediate Training

Operation more difficult than usual? Yes / No If yes, state reason (e.g. high BMI)

Levels of complexity for each stage of training (circle one)

Basic Training First or second caesarean with longitudinal lie

Twins or transverse lie, preterm >28 weeks **Advanced Training** Preterm <28 weeks/major placenta praevia/fibroids in lower segment

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

Rating: N = Not observed or not appropriate D = Development required S = Satisfactory standard for CCT (no prompting or intervention required)

| | Competencies and Definitions | Rating N/D/S | Comments |
|------|---|-----------------|-------------------|
| I. | Consent | | |
| C1 | Demonstrates sound knowledge of indications and contraindications including alternatives to surgery | | |
| C2 | Demonstrates awareness of sequelae of operative or non operative management | | |
| СЗ | Demonstrates sound knowledge of complications of surgery | | |
| C4 | Explains the perioperative process to the patient and/or relatives or carers and checks understanding | | |
| C5 | Explains likely outcome and time to recovery and checks understanding | | |
| II. | Pre operative planning | PER TOLEN | |
| PL1 | Demonstrates recognition of anatomical and pathological abnormalities (and relevant co- morbidities) and selects appropriate operative strategies/techniques to deal with these e.g. nutritional status | | |
| PL2 | Demonstrates ability to make reasoned choice of appropriate equipment, materials or devices (if any) taking into account appropriate investigations e.g. ultrasound, MRI | | |
| PL3 | Checks materials, equipment and device requirements with theatre staff and blood bank if major haemorrhage is anticipated | | |
| PL4 | Ensures the operation site is marked where applicable | | Not applicable |
| PL5 | Checks patient records, personally reviews investigations | | |
| III. | Pre operative preparation | | British Frankling |
| PR1 | Checks in theatre that consent has been obtained | | |
| PR2 | Gives effective briefing to theatre team, including paediatrician | | |
| PR3 | Ensures proper and safe positioning of the patient on the operating table | | |
| PR4 | Demonstrates careful skin preparation | | The state of the |
| PR5 | Demonstrates careful draping of the patient's operative field | | |
| PR6 | Ensures general equipment and materials are deployed safely (e.g. urinary catheter, diathermy) | | |
| PR7 | Ensures appropriate drugs administered (e.g. prophylactic antibiotics, oxytocin) | | |
| PR8 | Arranges for and deploys specialist supporting equipment (e.g. cell salvager) effectively | ga A | 1 2 2 |

| Competencies and Definitions | | Rating N/D/S | Comments |
|------------------------------|--|-----------------|----------|
| IV. | Exposure and closure | | |
| E1 | Demonstrates knowledge of optimum skin incision/access | | |
| E2 | Achieves an adequate exposure through purposeful dissection in correct tissue planes and identifies all structures correctly | | |
| E3 | Completes a sound wound repair (rectus sheath) | | |
| E4 | Protects the wound with dressings and inserts drains safely where appropriate | | |

| V. IT1(G) | Intra operative Technique: global (G) and task-specific (T) items Follows an agreed, logical sequence or protocol for the procedure | |
|--------------|--|---|
| | To the sensitive of the control of the production of the control o | |
| IT2(G) | Consistently handles tissue well with minimal damage | |
| IT3(G) | Controls bleeding promptly by an appropriate method | |
| IT4(G) | Demonstrates a sound technique of knots and sutures/staples | |
| IT5(G) | Uses instruments appropriately and safely | |
| IT6(G) | Proceeds at appropriate pace with economy of movement | |
| IT7(G) | Anticipates and responds appropriately to variation e.g. anatomy | |
| IT8(G) | Deals calmly and effectively with unexpected events/complications if they occur | |
| IT9(G) | Uses assistant(s) to the best advantage at all times | |
| IT10(G) | Communicates clearly and consistently with the scrub team | |
| IT11(G) | Communicates clearly and consistently with the anaesthetist | |
| IT12 (T) | Safely enters peritoneal cavity | |
| IT13 (T) | Carefully mobilises bladder | |
| IT14 (T) | Performs appropriate uterine incision | |
| IT15 (T) | Safely and systematically delivers baby | |
| IT16 (T) | Completes delivery of placenta and membranes safely | |
| IT17(T) | Checks uterine cavity (empty, configuration) | |
| IT18(T) | Identifies and manages uterine atony appropriately | |
| IT19(T) | Safely secures both uterine angles | |
| IT20(T) | Identifies and safely secures any uterine extensions | |
| IT21(T) | Checks for pelvic pathology (uterus, tubes, ovaries) | |
| IT22(T) | Completes swabbing out of paracolic gutters | |
| IT23(T) | Ensures contracted uterus and complete haemostasis before closing abdomen | 4 4 4 5 |
| IT24(T) | Performs vaginal toilet and checks vaginal loss | 460 444 |
| IT25(T) | Checks urine colour at end of procedure | |
| IT26(T) | Closes the skin with attention to cosmesis and healing (e.g. excision of old scar) | |
| VI. | Post operative management | |
| PM1 | Ensures the patient is transferred safely from the operating table to bed | Manager of the same of the Salah |
| PM2 | Constructs a clear operation note | |
| PM3 | Records clear and appropriate post operative instructions | distinct the same of the same |
| PM4 | Deals with specimens. Labels and orientates specimens appropriately | Not applicable |

Global summary

| Level at which completed elements of the PBA were performed on this occasion | | | Tick as appropriate |
|--|---|------------------------------------|------------------------|
| | | | appropriate |
| Level 0 | Insufficient evidence observed to support a sum | mary judgement | |
| Level 1 | Unable to perform the procedure, or part observ | ed, under supervision | |
| Level 2 | Able to perform the procedure, or part observed | , under supervision | |
| Level 3 | Able to perform the procedure with minimum su | pervision (needed occasional help) | |
| Level 4 | Competent to perform the procedure unsupervise | | |
| Comme | nts by Assessor (including strengths and | areas for development). | |
| Comme | nts by Trainee: | | ž |
| | | | |
| Trainee | Signature: | Assessor Signature: | |