



<h1 style="margin: 0;">Assessment of Operative Process Tracheostomy</h1>	<h2 style="margin: 0;">WBA FORM 02F</h2>
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Instructions

- This form is for Oral and Maxillofacial Surgery (OMS) Trainees. Trainees should refer to relevant sections of the [Accredited Training in OMS Handbook](#) detailing requirements for assessments.
- Please complete all sections of this form and email to omstrainee@racds.org

Trainee Details

Trainee name		Training year	OMS 1	OMS 2	OMS 3	OMS 4
Hospital			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clinical problem						
Date of procedure		Start time				
Duration		End time				

Competencies and Definitions

The trainee should explain what he/she intends throughout the procedure.

The assessor should provide verbal prompts, if required, and intervene if patient safety is at risk.

Ratings N = not observed/not applicable D = development required C = competent (no prompting/intervention required)

Competencies and Definitions	Rating N/D/C	Comments
Consent		
Demonstrates sound knowledge of indications and contraindications including alternatives to surgery		
Demonstrates awareness of sequelae of operative or non-operative management		
Demonstrates sound knowledge of complications of surgery		
Explains the perioperative process to the patient and/or relatives or carers and checks understanding		
Explains likely outcome and time to recovery and checks understanding		
Pre-operative planning		
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		
Demonstrates ability to make reasoned choice of appropriate equipment, materials or devices (if any) taking into account appropriate investigations		
Checks materials, equipment and device requirements with operating room staff		
Ensures the operation site is marked where applicable		
Checks patient records, personally reviews investigations		



Competencies and Definitions	Rating N/D/C	Comments
Pre-operative preparation		
Checks in theatre that consent has been obtained and appropriate time out procedures		
Gives effective briefing to theatre team		
Ensures proper and safe positioning of the patient on the operating table		
Demonstrates careful skin or mucosal preparation – as required		
Demonstrates careful draping of the patient's operative field		
Ensures general equipment and materials are deployed safely (e.g., suction, diathermy)		
Ensures appropriate drugs, inc. local anaesthesia are administered where appropriate		
Deploys specialist supporting equipment (e.g., operating microscope) effectively		
Exposure and closure		
Demonstrates knowledge of optimum skin incision/mucosal/portal/access		
Achieves an adequate exposure through purposeful dissection in correct tissue planes and identifies all structures correctly		
Completes a sound wound repair where appropriate		
Protects the wounds with dressings, splints and drains where appropriate		
Intra-operative technique		
Follows an agreed logical sequence or protocol for the procedure		
Consistently handles tissue well with minimal damage		
Controls bleeding promptly by appropriate method		
Demonstrates a sound technique of knots and sutures/staples		
Uses instruments appropriately and safely		
Proceeds at appropriate pace with economy of movement		
Anticipates and responds appropriately to variation e.g., anatomy		
Deals calmly and effectively with unexpected events/complications		
Uses assistant(s) to the best advantage at all times		
Communicates clearly and consistently with the scrub team		
Communicates clearly with the anaesthetist		
Ensures appropriate tracheostomy tube (type, additional sizes) ready, checks cuff		
Marks surgical site prior to neck extension: half way between cricoid cartilage and sternal notch or uses lower end of cricoid cartilage as a guide where unusual anatomy		
Ensures easy access for anaesthetist to the endotracheal tube		



Competencies and Definitions	Rating N/D/C	Comments
Injects LA prior to skin incision, makes horizontal skin incision or able to justify choice		
Incises superficial fascia and down to investing layer, ligating branches ant jugular		
Incises midline fascia over strap muscles, and exposes thyroid isthmus and veins (ligates as needed)		
Divides thyroid isthmus (not mandatory for all cases), uses tranfixion suture		
Uses cricoid hook to elevate trachea		
Alerts anaesthetist when ready to incise trachea		
Proceeds with tracheotomy at level of 2nd/3rd tracheal ring		
Liaises with anaesthetist to deflate the endotracheal tube cuff and withdraw until tip on sight		
Inserts tracheostomy tube and connects to airway, inflates the cuff		
Sutures wound edges as necessary, sutures/secures tracheostomy tube to skin (avoids tape use if near site of microvascular anastomosis)		
Places dressing between tracheostomy flange and skin, checks security and function tube		
Post-operative management		
Ensures the patient is transferred safely from the operating table to bed		
Constructs a clear operation note		
Records clear and appropriate post-operative instructions		
Deals with specimens. Labels and orientates specimens appropriately		

Procedure Outcome (completed by assessor)

Level at which completed elements of the AOP were performed on this occasion		Tick as appropriate
Level 0	Insufficient evidence observed to support a summary judgment	
Level 1	Unable to perform the procedure, or part observed, under supervision	
Level 2	Able to perform the procedure, or part observed, under supervision	
Level 3	Able to perform the procedure with minimum supervision (needed occasional help)	
Level 4	Competent to perform the procedure unsupervised (could deal with complications that arose)	



Comments by Trainee

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Trainee name			
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Trainee signature		Date	
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Comments by Assessor

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Assessor name			
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Assessor signature		Date	
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