

Vascular Surgery PBA: Endovenous Ablation

Trainee:	Assessor:	Date:
Assessor's Position*:	Email (institutional):	GMC No:
Duration of procedure (mins):	Duration of assessment period (mins):	Hospital:
Operation more difficult than usual? Yes / No (If yes, state reason)		<input type="checkbox"/> Tick this box if this PBA was performed in a Simulated setting .

* Assessors are normally consultants (senior trainees may be assessors depending upon their training level and the complexity of the procedure)

IMPORTANT: 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 and alternatives to endovenous procedures		
C2	Demonstrates awareness of sequelae of operative or non operative management		
C3	Demonstrates sound knowledge of complications of endovenous ablation		
C4	Explains the procedure to the patient / relatives / carers and checks understanding		
C5	Explains likely outcome and expected time to return to normal activity and checks understanding		
II. Pre operation planning			
PL1	Demonstrates recognition of anatomical and pathological variations for selection of appropriate endovenous techniques		
PL2	Demonstrates ability to make reasoned choice of appropriate equipment, materials or devices (if any) taking into account appropriate investigations e.g. x-rays		
PL3	Checks materials, equipment and device requirements with operating room staff		
PL4	Ensures the correct leg is marked		
PL5	Checks patient records, personally reviews preoperative duplex imaging		
PL6	Adequate preoperative vein marking for phlebectomies, if planned		
III. Pre operative preparation			
PR1	Checks in theatre that consent has been obtained		
PR2	Gives effective briefing to theatre team		
PR3	Ensures proper and safe positioning of the patient on the operating table		
PR4	Demonstrates careful skin preparation		
PR5	Demonstrates careful draping of the patient's operative field		
PR6	Ensures general equipment and materials are deployed safely (e.g. catheter, diathermy)		
PR7	Ensures appropriate drugs administered (e.g. thromboprophylaxis)		
PR8	Arranges for and deploys specialist equipment (e.g. image intensifiers) effectively		
PR9	Positions specialist equipment (e.g. duplex, generator and local anaesthetic dispenser) appropriately		
IV. Exposure and closure			

E1	Demonstrates knowledge of optimum skin incision / portal / access - NOT APPLICABLE TO THIS PROCEDURE		
E2	Achieves an adequate exposure through purposeful dissection in correct tissue planes and identifies all structures correctly - NOT APPLICABLE TO THIS PROCEDURE		
E3	Completes a sound wound repair where appropriate - NOT APPLICABLE TO THIS PROCEDURE		
E4	Protects the wound with dressings, splints and drains where appropriate - NOT APPLICABLE TO THIS PROCEDURE		
E5	Tilts table into reverse Trendelenburg position		
E6	Ensures an adequate image for successful vein cannulation		
E7	Selects optimum site for vein cannulation (lowest point of reflux)		
E8	Administers local anaesthetic for venous cannulation (LA procedure only)		
E9	Prepares puncture needle, guide wire and access sheath (thermoablation procedures only)		
E10	Correctly applies appropriate dressings, compression bandage and/or stocking		
V. Intra operative technique: global (G) and task-specific items (T)			
IT1(G)	Follows an agreed, logical sequence or protocol for the procedure		
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/obesity		
IT8(G)	Deals calmly and effectively with unexpected events/complications		
IT9(G)	Uses assistant(s) to the best advantage at all times, if present		
IT10(G)	Communicates clearly and consistently with the scrub team		
IT11(G)	Communicates clearly and consistently with the anaesthetist		
IT12(T)	Communicates clearly and consistently with patient (e.g. warns them before tilting table and when discomfort likely)		
IT13(T)	Good personal, patient and staff safety (e.g. sharps, laser, volume of foam etc)		
IT14(T)	Punctures vein cleanly under duplex guidance		
IT15(T)	Ensures needle/cannula is within vein lumen		
IT16(T)	Controls bleeding promptly where cannulation has been unsuccessful		
IT17(T)	Ensures thermoablation procedures (EVLA, RFA, RFITT). Inserts guide wire under duplex and exchange to access sheath (+/- skin incision)		
IT18(T)	Inserts and duplex-guided manipulation of the appropriate thermoablation catheter up vein		
IT19(T)	Ensures safe positioning of the catheter end near to the SFJ/SPJ on duplex imaging		
IT20(T)	Changes table tilt to Trendelenburg position		
IT21(T)	Administers local/ tumescent anaesthetic solution under duplex imaging		
IT22(T)	Confirms target vein has been effectively isolated (halo effect)		
IT23(T)	Reconfirms correct position of catheter/ laser fibre tip at SFJ/ SPJ		
IT24(T)	Requests and checks correct connections of catheter +/- foot pedal to generator		
IT25(T)	Checks correct power setting generator settings for EVLA and RFITT		
IT26(T)	Ensures appropriate controls catheter pull back during thermoablation treatment		
IT27(T)	Maintains appropriate manual pressure to the vein during the procedure (RFA)		
IT28(T)	Confirms vein closure on duplex before removing sheath from vein		
IT29(T)	Performs stab avulsions, to remove all marked varicosities, if planned		
IT30(T)	Foam sclerotherapy: Elevates leg in sling to empty vein prior to injection of sclerosant foam		
IT31(T)	Demonstrates sound Tessari technique for mixing foam (4 air:1 sclerosant) with appropriate sclerosant concentration		

IT32(T)	Injects foam in small boluses and encourages regular ankle movements		
IT33(T)	Confirms presence of foam in all target veins on duplex imaging		
IT34(T)	Deals calmly and effectively with untoward complications of foam injection		
VI. Post operative management			
PM1	Ensures the patient is transferred safely from the operating table to bed		
PM2	Constructs a clear operation note		
PM3	Records clear and appropriate post operative instructions		
PM4	Deals with specimens. Labels and orientates specimens appropriately - NOT APPLICABLE TO THIS PROCEDURE		

Global Summary

Level at which completed elements of the PBA were performed on this occasion		Tick as appropriate
Level 0	Insufficient evidence observed to support a summary judgement	
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 Assessor (including strengths and areas for development):

Comments by Trainee:

Trainee Signature:

Assessor Signature:

Assessor training? No
 Written
 Web/CD
 Workshop

Time taken for feedback mins

Not at all Highly

Trainee satisfaction with PBA 1 2 3 4 5 6 7 8 9 10

Assessor satisfaction with PBA 1 2 3 4 5 6 7 8 9 10