

## Vascular Surgery PBA: Peripheral artery angioplasty/stenting

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 <b>Simulated setting</b> .	
Complexity (tick which applies, if any)	<input type="checkbox"/> TASC A <input type="checkbox"/> TASC B <input type="checkbox"/> TASC C <input type="checkbox"/> TASC D <input type="checkbox"/> Involved artery <input type="checkbox"/> Iliac <input type="checkbox"/> Femoropopliteal <input type="checkbox"/> Other: (specify)	

\* 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
<b>I. Consent</b>			
C1	Demonstrates sound knowledge of indications and contraindications including alternatives to surgery		
C2	Demonstrates awareness of sequelae of operative or non operative management		
C3	Demonstrates sound knowledge of complications of surgery		
C4	Explains the procedure to the patient / relatives / carers and checks understanding		
C5	Explains likely outcome and time to recovery and checks understanding		
<b>II. Pre operation planning</b>			
PL1	Demonstrates recognition of anatomical and pathological abnormalities (and relevant co-morbidities) and selects appropriate operative strategies / techniques to deal with these		
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 operation site is marked where applicable		
PL5	Checks creatinine and also ensures nephrotoxic drugs, anticoagulants etc have been stopped		
PL6	Verifies relevant peripheral pulse status		
<b>III. Pre operative preparation</b>			
PR1	Checks in theatre that consent has been obtained		
PR2	Gives effective briefing to theatre team - NOT APPLICABLE TO THIS PROCEDURE		
PR3	Ensures proper and safe positioning of the patient on the operating table - NOT APPLICABLE TO THIS PROCEDURE		
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		
PR8	Arranges for and deploys specialist equipment (e.g. image intensifiers) effectively - NOT APPLICABLE TO THIS PROCEDURE		
<b>IV. Exposure and closure</b>			
E1	Demonstrates knowledge of optimum skin incision / portal / access		
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	Cleans anterior wall puncture of undiseased portion of CFA under ultrasound guidance		
E6	Ensures satisfactory deployment of percutaneous closure device		
E7	Demonstrates satisfactory haemostasis by pressure or by deployment of percutaneous closure device as appropriate		
<b>V. Intra operative technique: global (G) and task-specific items (T)</b>			
IT1(G)	Follows an agreed, logical sequence or protocol for the procedure		
IT2(G)	Consistently handles tissue well with minimal damage - NOT APPLICABLE TO THIS PROCEDURE		
IT3(G)	Controls bleeding promptly by an appropriate method - NOT APPLICABLE TO THIS PROCEDURE		
IT4(G)	Demonstrates a sound technique of knots and sutures/staples - NOT APPLICABLE TO THIS PROCEDURE		
IT5(G)	Uses instruments appropriately and safely - NOT APPLICABLE TO THIS PROCEDURE		
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		
IT9(G)	Uses assistant(s) to the best advantage at all times		
IT10(G)	Communicates clearly and consistently with nurses and radiographers		
IT11(G)	Communicates clearly and consistently with the anaesthetist - NOT APPLICABLE TO THIS PROCEDURE		
IT12(T)	Ensures adequate radiation protection (including minimising duration and dose of radiation by appropriate position and coning)		
IT13(T)	Infiltrates local anaesthetic using appropriate technique		
IT14(T)	Inserts guidewire into CFA, introduces dilator and sheath, and removes dilator		
IT15(T)	Flushes all sheaths and devices with Heparinised saline, keeps wires clean and ensures there are no bubbles or blood in contrast syringe when performing angio		
IT16(T)	Administers IV Heparin of appropriate dose		
IT17(T)	Advances guidewire across the lesion under fluoroscopic guidance		
IT18(T)	Checks angio to ensure luminal position and confirms extent and position of disease		
*	Primary angioplasty		
IT19(T)	Introduces and advances angioplasty balloon of appropriate length and diameter to diseased section		
IT20(T)	Inflates and deflates balloon appropriately, and withdraws balloon after satisfactory inflation		
IT21(T)	Checks angio to confirm adequate appearance and flow, and document run-off		
*	Primary or secondary stenting		
IT22(T)	Introduces stent of appropriate length and diameter over guidewire across diseased section		
IT23(T)	Deploys stent appropriately		
IT24(T)	Advances angioplasty balloon through the stent (if appropriate)		

IT25(T)	Inflates and deflates balloon appropriately, and withdraws balloon		
IT26(T)	Checks angio to confirm correct placement and deployment of stent, flow through the stent, and document run-off		
IT27(T)	Removes sheath		
<b>VI. Post operative management</b>			
PM1	Ensures the patient is transferred safely from the operating table to bed		
PM2	Constructs a clear operation note and completes the necessary registry/audit forms		
PM3	Deals with specimens. Labels and orientates specimens appropriately - NOT APPLICABLE TO THIS PROCEDURE		
PM4	Checks pulses and limb-perfusion at the end of 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	