# LapPass The Laparoscopic passport



Launched by ALSGBI in 2015, the LapPass is a nationally recognised certificate of proficiency in the technically demanding skills required for laparoscopic surgery.

Simulator training lends itself for practising and perfecting laparoscopic technical skills and the ALSGBI recognises those trainees who are able to demonstrate proficiency in a defined set of five laparoscopic tasks. These are not easy skills to perfect and the possession of the passport will be a badge of proficiency which will be recognised nationwide and mark out those who are serious laparoscopic surgeons. In turn, trainers will recognise that those in possession of the LapPass will be suitable for accelerated operative training. The 5 skills comprise camera holding (which will be assessed intra-operatively) and 4 technical skill tasks which will be demonstrated and assessed in training jigs.

# **ASSESSORS & ASSESSMENT**

We hope you will enjoy acquiring the LapPass. The tasks set are challenging but the skills required are very much clinically relevant and for most people not intuitive.

They will require practice, probably up to 10 hours per task. They are not intended in any way to remove the need for courses but much like the driving test, lessons will help speedy acquisition of the required proficiency and promote good habits. However on the day you still have to pass the test itself with or without formal lessons.

We run assessments at our Annual Scientific Meeting, it is perhaps the best opportunity for trainees to get access to

assessment sessions with a proven faculty and practice sessions on funded regional training days in order to deliver local ALSGBI training. Please watch the website and newsletter for further information. The tasks are designed to be able to be conducted on low fidelity jigs and we would encourage practice in this way.

# **ASSESSMENT FORMS**

Acquire your assessment forms by visiting: www.alsgbi.org/trainees/passport

Once completed, please email these forms to Mrs Jennifer Treglohan at jtreglohan@alsgbi.org

The ALSGBI has 12 Regional Representatives and a Director of Education ready to help trainee members to achieve the LapPass. For further details contact **jtreglohan@alsgbi.org** who will put you in touch with the correct surgeon. For certification you will need to join the ALSGBI **https://members.alsgbi.org/Join-Now** 

Dedicated team:

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Turnover to

## **CAMERA HOLDING SKILLS**

Minimum of 6 cases each at least 30 minutes long.

- Sole camera holder.
- Forewarn operator that this is an assessable task
- At least 3 cases using 30 degree

## SKILLS TO BE DEMONSTRATED

- Camera precision: Target to be maintained within the centre of the image for the majority of the time and to the satisfaction of the operator.
- An appropriate distance from the target tissue to be maintained and to demonstrate proactive dynamism with 'zooming in' for precise tasks and 'zooming out' for general views and instrument exchanges.
- An understanding of the principles of the 30 degree laparoscope with demonstration of orientation whilst maintaining the horizon.
- Appropriate teamworking skills.

# The 4 Key Tasks

## Task 1 •

#### **GRASPING & MANIPULATION**

Target time to complete: 4 minutes. Flexible pad, 3 posts, 3 polo mints, 15cms string, 2 Johannes forceps.

#### **INSTRUCTIONS - FOR EACH MINT:**

- Floor to post 1: left hand only.
- Post 1 to 2: right hand only with rotation of mint so it is now upside down.
- Post 2 to 3: transfer from one hand to other in mid air.
- Post 3 to floor: pass along string without touching floor.



### Task 2

#### TYING EXTRACORPOREAL ROEDER KNOTS AND PLACING THEM TO SIMULATE APPENDICECTOMY

Target time to complete: 8 minutes. Partially inflated glove with 4 lines at 1cm intervals along one digit, long length of suture material, 2 Johannes forceps or knot pusher, Laparoscopic scissors.

#### INSTRUCTIONS

- Create and place three Roeder knots; two proximally in zone 1, one distally in zone 3 and divide finger in zone 2.
- Glove and tip must not deflate.



## **CUTTING AN ACCURATE DISC**

Target time to complete: 3 minutes.

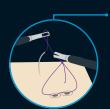
Glove or chamois leather, laparoscopic scissors, graspers.

Solid circular line (diameter must be at least 5cms) on glove or chamois leather, with inner and external parallel dotted lines 0.5cms away.

Touching/breaching dotted line disqualifies.

### INSTRUCTIONS

• Cut disc from pad without breaching dotted lines and without damaging underlying tissue.



### Task 4

#### SUTURING / CREATE 2 SECURE, RECOGNISED SURGICAL KNOTS UNDER SLIGHT TENSION

Target time to complete: 6 minutes.

Flexible pad with 2 dots drawn 1cm apart, braided suture, needle driver, Johannes forceps, laparoscopic scissors.

#### INSTRUCTIONS

- Place and tie 2 sutures to draw 2 dots together securely under tension. Suture placement must be contained within the dotted areas.
- Acceptable knot types: Szabo, single-handed reef knot, surgeon's knot (intracorporeal).

# Learning to tie a Roeder Knot

#### Stage 1 -

- Loop the tie around the structure to be ligated and bring out the end through the same port.
- Choose one end to be the static end (in this instance the left sided thread coloured blue for ease).
- This is the **STANDING END** (blue).
- IF THERE IS A NEEDLE THE NEEDLE END MUST BE THE **STANDING END.**
- The other end then is to become the knot which will slide along the static (STANDING) limb. This is the ACTIVE END (white/red).



Stage 2

half knot as

Throw a





# Stage 3

Continue with the **ACTIVE END** and complete a full turn around demonstrated. both threads.

Continue around once more finishing with the **ACTIVE** END next to the **STANDING** thread.



## Stage 5

- Use the ACTIVE END to throw a jamming half hitch around the **STANDING END.**
- The effect of this is so that as the knot is tightened on the tissues the half hitch will automatically tighten and the knot will be secure.

# Stage 6

- The knot may be tightened.
- The line of the **STANDING END** is seen to be straight and the knot will now slide along this onto the tissues as a one way slipping knot.
- Cut the excess thread and slide the knot onto the tissues by whatever means appropriate.

Visit www.alsgbi.org/trainees/passport to view training videos.







