ALS Syllabus

<u>Upper Gastro-intestinal Surgery</u>

This core syllabus is intended to outline the requirements for surgical trainees intending to undertake laparoscopic surgery as part of their specialist training. The following three grades of training will be used in the document to identify at which stage of training the core knowledge or specialist operative skills should be acquired.

BST

Knowledge and technique expected of a basic surgical trainee at the MRCS examination

HST

In addition to the knowledge and technique expected of a basic surgical trainee at the MRCS examination - the additional knowledge and technique expected of a higher surgical trainee with a specialty interest other than upper gastro-intestinal surgery at the ICB examination and on award of the CCST in General Surgery

SPECIALIST

In addition to the knowledge and technique expected of both a basic surgical trainee at the MRCS examination and expected of a higher surgical trainee with a specialty interest other than upper gastro-intestinal surgery at the ICB examination - the additional knowledge and technique, expected of a higher surgical trainee with a declared specialisation in upper gastro-intestinal surgery at the ICB examination and on appointment as a Consultant with an interest in upper gastro-intestinal surgery.

GOAL: Following the completion of appropriate training in upper gastro-intestinal surgery and laparoscopic techniques, trainees will be knowledgeable in the application of laparoscopic procedures to upper gastro-intestinal surgery.

I. General Considerations.

- A. Trainees will be able to do the following:
- 1. Discuss the basic principles of laparoscopic surgery including an understanding of the physiological effects of pneumoperitoneum and pneumothorax and the principles of safe access.

 BST
- 2. Discuss the potential complications which may be associated with

laparoscopic surgery including their diagnosis and management. **BST** 3. List and discuss the proposed advantages and disadvantages of laparoscopic surgery in general. **HST** 4. List and discuss the proposed advantages and disadvantages of laparoscopic upper gastro-intestinal surgery. **SPEC** 5. Discuss the equipment and its set up, patient positioning, and instrumentation for the performance of a laparoscopic upper gastro-intestinal procedure. **SPEC** 6. Discuss the physiologic impact of laparoscopic surgery as it relates to cardiovascular, respiratory and immunologic function. **SPEC** II. Indications and Contraindications A. Trainees will be able to do the following: 1. Discuss the indications and contraindications for laparoscopic management of the following categories of upper gastro-intestinal disease: Benign **SPEC** • Malignant **SPEC** III. Complications A. Trainees will be able to do the following: 1. Discuss the prevention, identification, and management of general complications occurring during laparoscopic surgery. **BST** 2. Discuss the prevention, identification and management of complications occurring during laparoscopic surgery in relation to specific conditions and procedures. **HST** IV. Procedures A. Trainees will be able to do the following: 1.Discuss the equipment setup, patient positioning, port-site placement, instrumentation, and conduct of the operation for the following procedures: **HST** Appendicectomy • Diagnositic laparoscopy with or without biopsy, liver biopsy and lysis of adhesions **HST**

Oesophageal resection	SPEC
Partial gastrectomy	HST
• Sub-total gastrectomy	SPEC
• Total gastrectomy	SPEC
• Gastro-enterostomy	HST
• Repair of perforated peptic ulcer	HST
• Nissen fundoplication	HST
Repair of rolling hiatus hernia	SPEC
• Splenectomy	HST
 Cholecystectomy and cholecystostomy 	HST
 Cholecysto/choledocho-enterostomy 	HST
Bile duct exploration	HST
Incisional hernia repair	HST
Staging laparoscopy	HST
Hernia repair	HST
2. Discuss the clinical situations and indications for conversion from	
laparoscopic to open procedures.	HST

V. Special Considerations

A. Trainees will be able to do the following:

1. Discuss the preoperative and intraoperative methods of identifying the relevant lesion.	HST
2. Discuss the role of bariatric surgery for obesity.	HST
3. Discuss the role for laparoscopic liver ultrasonography.	SPEC
4. Discuss alternative methods of laparoscopy (ie, gasless laparoscopy and hand-assisted laparoscopy).	HST
5. Discuss methods of possible prevention of port-site recurrences during laparoscopic surgery for cancer.	HST