

Information about the course:

- Provides hands-on practice over two days for advanced Upper GI procedures using Da Vinci XI.
- 6 candidates on 3 stations (2 candidates for each station)
- Cadaver-based simulation
- Da Vinci XI system
- Includes both Benign (including Bariatric) and cancer resection UGI surgeries. Adjustments through the course to the special interests of each candidate
- Short video presentations of all procedures
- Experienced faculty to provide tips and guidance for surgical techniques.
- Dinner at Day One evening to allow time for socialisation and to facilitate discussions between candidates and faculty members.
- Eligibility criteria for candidates:
 - o Senior trainees/fellows who finished or about to finish training
 - o Consultants in their early robotic career
 - o UK- based or international
 - o Had completed basic robotic training
 - o Had experience in performing complex/advanced upper GI surgeries.
 - o Candidates are encouraged to send CVs to to complete registration. Please highlight robotic experience and summary of Logbook for UGI cases (Approval is required before registration is completed)

Provisional Timetable:

Day One:

08:00-08:30: Registration, coffee/snacks

08:30-09:00: Welcome and introductions

09:00-09:45: Videos and presentations for robotic cholecystectomy and robotic Hiatus hernia surgery

09:45-10:45: Robotic Wet lab for cholecystectomy

10:45-12:00: Robotic Wet lab for Hiatus hernia repair.

12:00-12:30: Lunch Break

12:30-12:45: Videos and presentations for robotic sleeve gastrectomy
12:45-13:00: Videos and presentations for robotic gastric bypass
13:00-14:30: Robotic wet lab for sleeve gastrectomy
14:30-16:30: Robotic wet lab for gastric bypass
16:30-17:00: Closure and feedbacks

Day Two

08:00-08:30: Registration, coffee/snacks
08:30-08:45: Videos and presentations for small bowel anastomosis
08:45-09:00: Videos and presentations for central lymph nodes dissection in gastrectomy or abdominal part of esophagectomy
09:00-10:30: Robotic Wet lab for small bowel anastomosis
10:30-12:30: Robotic Wet lab for central lymph node dissection in gastrectomy or abdominal part of esophagectomy
12:30-13:00: Lunch Break
13:00-13:30: Videos and presentations for thoracic part of esophagectomy
13:30-16:00: Robotic Wet lab for thoracic part of esophagectomy*
16:00-16:30: Closure and feedbacks

**This part can be adjusted to candidate's needs and speciality*

Key practice steps for each exercise:

Robotic cholecystectomy:

- Dissection to identify callot triangle
- Use of hemolocks for cystic duct
- Dissection of gall bladder off liver bed.

Robotic Hiatus hernia repair:

- Dissection of esophagus around the hiatus and into mediastinum
- Repair of crurae using interrupted stitches.
- Performing Nissen Fundoplication

Robotic Sleeve gastrectomy:

- Dissection along greater curve of stomach including short gastric vessels.
- Use stapler to create the neo-gastric tube.

Robotic Gastric bypass:

- Dissection to create the gastric pouch.
- Performing gastro-jejunostomy anastomosis using Sueform stapler
- Closure of enterotomy +/- 2ry layer of stitches.

Robotic Small bowel anastomosis:

- Use Sueform stapler to create side-to-side anastomosis.
- Use of stitch to close the enterotomy.

Robotic Central abdominal lymphadenectomy:

- Use the hook diathermy to dissect Lymph nodes around common and proper hepatic arteries.
- Identification of origin of left gastric vessels and apply hemolocks to take them with related lymph nodes
- Kocherisation of duodenum

Robotic thoracic part of esophagectomy:

- Dissection of esophagus from aorta and azygous vein
- Dissection of esophagus from pericardium, bronchi and trachea
- Performing anastomosis between Esophageal stump and gastric tube.