

Hysteroscopic and Laparoscopic Surgery

Advanced Training Module (ATM)

Curriculum Objective

The Hysteroscopic and Laparoscopic Surgery ATM provides a framework to enable a trainee to consolidate and enhance the knowledge, clinical skills and professional abilities required to perform safe and effective laparoscopic and hysteroscopic surgery to the level of a Fellow who wishes to practice actively in this area. The aim is that at the end of the ATM a trainee should be able to operate at an RANZCOG/AGES level 4 skills level*.

The curriculum within this module is designed to:

- Produce graduates with advanced level skills in diagnostic and operative hysteroscopy and laparoscopic surgery such that they can use these skills to provide the advantages of minimal access surgery to their patients.
- Provide training which will position Advanced Trainees to consolidate existing skills and further increase their scope of practice following completion of the ATM through exposure to more complex conditions and undertaking procedures under supervision.
- Provide the FRANZCOG graduate with the foundation for a continuum of learning and ongoing CPD based on 'special interest' areas associated with this ATM, allowing on-going skills development by the FRANZCOG graduate, as required for future scope of practice.

Learning Outcomes

By the end of the ATM the trainee should have demonstrable knowledge, clinical and professional skills relevant to the following to evidence-based standards:

- Pre-operative assessment, diagnosis and planning for patients undergoing laparoscopic and hysteroscopic surgery
- Performance of hysteroscopic procedures
- Performance of RANZCOG/AGES level 3 and 4 laparoscopic procedures*:

RANZCOG/AGES Skill Level 3

Laparoscopic ovarian cystectomy and oophorectomy when there is normal anatomy. Laparoscopic salpingotomy or salpingectomy for the treatment of ectopic pregnancy.

RANZCOG/AGES Skill Level 4

Laparoscopically assisted vaginal hysterectomy (LAVH) and excisional surgery for AFS score level 3 endometriosis.

- Review and follow up of individual cases and undertake regular audits of cases and outcomes

*RANZCOG and AGES have grouped together procedures that require similar laparoscopic skills. See C-Trg 2, Guidelines for performing advanced operative laparoscopy, Consensus statement of the Royal Australian & New Zealand College of Obstetricians & Gynaecologists (RANZCOG) and the Australasian Gynaecological Endoscopy & Surgery Society (AGES) <https://ranzocg.edu.au/wp-content/uploads/2022/05/Guidelines-for-performing-gynaecological-endoscopic-procedures.pdf>

It is recommended that a suitable intermediate/advanced level endoscopic surgery workshop is attended. E.g., RANZCOG/AGES Advanced Trainee Workshop). Other courses may be completed such as electrosurgical safety.

Volume of cases and/or procedures for logbook[^]

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Logbook*	Hysteroscopies	30
	Operative hysteroscopies (hysteroscopic polypectomy or resection of small submucous fibroid)	10
	Laparoscopic cases as primary surgeon	50
	Operative laparoscopies as primary surgeon	30

[^]Supervision/teaching of junior trainees contributes to the logbook numbers

* The same theatre case may involve more than one procedure. E.g., Cases which include adhesions, laparoscopic ovarian cystectomy, oophorectomy and salpingectomy, hysteroscopy, and excision of endometriosis.

Estimated length of time for completion of this ATM

Trainees are expected to be able to complete training and assessment requirements for this ATM in 12 months (or the fractional equivalent) during 46 satisfactorily completed weeks of prospectively approved Advanced Training.

- 12-24 Months or the fractional equivalent
- The ATM may be undertaken concurrently with other ATMs
- The program should include:
 - A minimum of 45 theatre sessions per 12-month period
 - A minimum of 45 outpatient clinics per 12-month period

Guidelines for training sites offering this module

Sites that are not otherwise accredited for FRANZCOG training must become accredited in order to offer training in this ATM. Training sites electing to offer training for this ATM should be able to provide trainees with the necessary resources and clinical material to complete relevant training and assessment requirements, including:

- Direct supervision by consultant(s) credentialed in level 4/5 laparoscopic surgery
- Access to at least 45 theatre sessions per 12-month period
- Access to at least 45 gynaecological clinics per 12-month period
- Access to dry labs (box trainers) for supervised and independent learning
- The supervising surgeons must perform LAVH or TLH in preference to TAH where appropriate
- Access to the minimal number of procedures as follows:
 - 30 hysteroscopies
 - 10 operative hysteroscopies
 - 50 laparoscopic cases as primary surgeon
 - 30 operative laparoscopies

Performance of Hysteroscopic and RANZCOG/AGES level 3 and 4 laparoscopic procedures	Teaching and Learning Support	Assessment
Clinical knowledge and reasoning		
<p><i>Demonstrate knowledge and understanding of:</i></p> <ul style="list-style-type: none"> • Potential risks and complications of laparoscopic surgery (including anaesthesia) • Potential risks and complications of hysteroscopic surgery (including hysteroscopic sterilisation) • Equipment, instrumentation and theatre-set-up in particular the principles of electrosurgery, insufflators, light sources and video equipment. • The principles of safe use of energy sources including bipolar diathermy and ultrasonic devices • Safe entry techniques and port site problems • The principles and safe use of distension media • The use of posterior colpotomy and tissue retrieval bags • The principles of port site closure and the need to avoid port site hernia or damage underlying structures • Intraoperative and postoperative complications • The principles and management of major haemorrhage • Bowel and bladder complications and awareness of repair procedures • The surgical principles for the treatment of ureteric injury • Delayed onset complications such as peritonitis, ileus, faecal contamination, or urinary leakage. 	<p>Relevant annual meetings and conferences</p>	<p>3/12 & 6/12 assessments</p>

Pre-operative assessment, diagnosis and planning for patients undergoing hysteroscopic and laparoscopic surgery.	Teaching and Learning Support	Assessment
Clinical knowledge and reasoning		
<p><i>Demonstrate knowledge and understanding of:</i></p> <p>Anatomy and pathology</p> <ul style="list-style-type: none"> • The anatomy of the abdomen, female genital tract, bladder, ureters, and lower bowel • The specific anatomy in relation to laparoscopic and hysteroscopic surgery in particular the anatomy of the pelvic side wall • The pathological processes involved in cervical uterine and ovarian disease and endometriosis 	<p>Access to standard textbooks and journals</p> <p>ST</p>	<p>3/12 & 6/12 assessments</p>
<p>Assessment and diagnosis</p> <ul style="list-style-type: none"> • The different facets of obtaining a history of a woman's condition: pain, fertility, sexual function, menstrual history • Focused gynaecological examination for deep pelvic pathology • Relevant preoperative investigations, including transvaginal ultrasound scans • Outpatient/office methods of diagnosis and treatment • More complex investigations as required e.g., MRI, urinary tract investigations • Long-term complications of hysteroscopic and laparoscopic surgery 		
Clinical Skills		
<p>Assessment and diagnosis</p> <p><i>Be able to:</i></p> <ul style="list-style-type: none"> • Competently perform an examination and record findings appropriately • Select and interpret appropriate investigations as indicated by each case • Provide counselling regarding benefits, risks, and alternatives to hysteroscopic and laparoscopic surgery • Select patients appropriately for operative laparoscopy and hysteroscopy • Recognise the limitations of their operative hysteroscopic and laparoscopic surgery skills, and refer as appropriate <p>Maintain accurate notes of consultations including counselling on risks and expected outcomes</p>	<p>ST</p>	<p>3/12 & 6/12 assessments</p>

Performance of Hysteroscopic and RANZCOG/AGES level 3 and 4 laparoscopic procedures	Teaching and Learning Support	Assessment
<p>Clinical knowledge and reasoning</p> <p><i>Demonstrate knowledge and understanding of:</i></p> <ul style="list-style-type: none"> • Potential risks and complications of laparoscopic surgery (including anaesthesia) • Potential risks and complications of hysteroscopic surgery (including hysteroscopic sterilisation) • Equipment, instrumentation and theatre-set-up in particular the principles of electrosurgery, insufflators, light sources and video equipment. • The principles of safe use of energy sources including bipolar diathermy and ultrasonic devices • Safe entry techniques and port site problems • The principles and safe use of distension media • The use of posterior colpotomy and tissue retrieval bags • The principles of port site closure and the need to avoid port site hernia or damage underlying structures • Intraoperative and postoperative complications • The principles and management of major haemorrhage • Bowel and bladder complications and awareness of repair procedures • The surgical principles for the treatment of ureteric injury • Delayed onset complications such as peritonitis, ileus, faecal contamination, or urinary leakage. 	<p>Relevant annual meetings and conferences</p>	<p>3/12 & 6/12 assessments</p>
<p>Clinical Skills</p> <p><i>Be able to:</i></p> <ul style="list-style-type: none"> • Set up laparoscopic and hysteroscopic equipment, patient positioning, and recording of images • Demonstrate safe use of electro surgery • Demonstrate ability to assess peritoneal cavity by a range of techniques appropriate to the clinical situation e.g., direct entry, Veress, Palmers, Hassan • Undertake adhesiolysis using appropriate instruments or energy source • Demonstrate correct use of various haemostatic techniques • Demonstrate knowledge of how to deal with unexpected major haemorrhage • Recognise intraoperative complications and manage them, including when to convert to an open procedure and when to seek assistance from other specialists • Assess for bowel and bladder complications and repair as appropriate • Be able to recognise and manage delayed-onset complications • Maintain accurate and detailed operative records 	<p>Observation of technique and practice with assistance from supervisor</p> <p>Surgical courses</p>	<p>Logbook</p> <p>3/12 & 6/12 assessments</p> <p>Audit</p>

<p>Suturing:</p> <ul style="list-style-type: none"> • Demonstrate ability to be able to independently and competently perform intracorporeal and extracorporeal knot tying in a dry lab environment 	<p>Local unit to provide a dry laboratory equipped with simulators, training boxes and instruments to allow the trainee technical practice</p>	
<p>Specimen retrieval:</p> <ul style="list-style-type: none"> • Demonstrate proficiency in the trans abdominal or trans vaginal removal of tissue using tissue retrieval bags 		
<p>Laparoscopic techniques:</p> <p><i>Be able to:</i></p> <ul style="list-style-type: none"> • Perform primary port entry and alternative techniques for special cases • Perform positioning and safe insertion of secondary ports • Safely handle tissue with laparoscopic instruments • Perform sharp and blunt dissection • Safe closure of port sites using appropriate needles • Perform: <ul style="list-style-type: none"> ○ Division of dense pelvic and abdominal adhesions where the adhesions are seen to be well clear of the bladder, bowel, or ureter ○ Excision and ablation of peritoneal endometriosis and ovarian endometrioma where lesions are seen to be well clear of the bladder, bowel, or ureter ○ 2nd generation ablation 	<p>Drylab – box trainer (compulsory)</p> <p>Wetlab – lap simulation</p> <p>Suitable course on laparoscopic surgery which includes electrosurgery</p>	
<p>Hysteroscopic techniques:</p> <p><i>Be able to:</i></p> <ul style="list-style-type: none"> • Perform hysteroscopic procedures in a fluent and safe manner • Safely manage hysteroscopic fluid 		

<p>Demonstrate clinical competence in the review and follow up of individual cases and undertake regular audits of cases and outcomes. (from PFD ATM)</p>	<p>Teaching and Learning Support</p>	<p>Assessment</p>
<p>Clinical Skills</p>		
<p><i>Be able to:</i></p> <ul style="list-style-type: none"> • Demonstrate awareness of treatment options • Understand indications for referral • Manage postoperative voiding difficulty • Maintain accurate records 	<p>ST</p>	

Professional Abilities	Domains*	Teaching and Learning Support	Assessment
<i>Be able to:</i>			
<p><i>Communication</i></p> <ul style="list-style-type: none"> Communicate effectively with women, their partners, and families and in professional relationships with medical, midwifery, nursing and other healthcare colleagues Work effectively as a member of a team, specifically within the theatre environs as part of a MDT (surgeon, anaesthetist, OT nurses + others) 	CE PQ	Relevant annual meetings and conferences HEP	3/12 & 6/12 assessments
<p><i>Teaching</i></p> <ul style="list-style-type: none"> Demonstrate effective teaching at both undergraduate and postgraduate level: provide guidance, advice and feedback and conduct assessments (APSS) of junior registrars 	AA		
<p><i>Learning</i></p> <ul style="list-style-type: none"> Demonstrate attendance and participation at continuing education meetings Review and update professional practice Accept constructive feedback 	AA PQ		
<p><i>Research</i></p> <ul style="list-style-type: none"> Critically evaluate scientific studies and multicentre trials/systematic reviews Collect, collate, and review data 	AA		
<p><i>Leadership and Management</i></p> <ul style="list-style-type: none"> Demonstrate clinical leadership and management responsibilities 	PQ		
<p><i>Audit</i></p> <ul style="list-style-type: none"> Keep a logbook for self-audit purposes Be aware of National Surgical Mortality Database Demonstrate commitment to practice review and audit development 	PQ		
<p><i>Health Advocacy</i></p> <ul style="list-style-type: none"> Act as a health advocate at both patient and institutional level 	PQ		

Assessments - Glossary of terms

Formative

- LB Logbook
- TSR Training Supervisor Reports (3 monthly)

Summative

- TSR Training Supervisor Reports (6 monthly)

Teaching and Learning Strategies:

- eLM eLearning module
- ST Supervised Training
- HEP Hospital Education Program (include here any hospital meetings, case reviews etc. that would be relevant)
- TSR Training Supervisor Reports

Domains:

- CE Clinical Expertise
- AA Academic Abilities
- PQ Professional Qualities

Version Register

Version	Date of Version	Pages revised / Brief Explanation of Revision
v1	May 2018	Hysteroscopic and Laparoscopic Surgery ATM available for trainees
v2	December 2021	New branding of document, version register added