Syllabus

ICOG - FOGSI Certificate course in Gynaecological Endoscopy & Minimal Access Surgery

Objectives:

- 1. To impart comprehensive knowledge of the subject
- 2. To enhance the skills to a level to be able to perform simple and moderately advanced Gynec Endoscopic Surgeries in an equipped centre with adequate instruments & infrastructure for safe conduct of the surgeries.
- 3. The CSE (Centre for Skill Enhancement) should have the following:
 - Manned by adequate teaching personnel
 - Equipped with audio-visual facilities
 - Book library, video records (tapes, CDs &DVDs) of high educational value.
 - Centre should have inanimate lab with at least 2 models for hands-on training & practice for laparoscopy & hysteroscopy (pelvi-trainer & hystero-trainer) & for endo-suturing & knotting.
 - The centre should be conducting good number of Gynec Endoscopy surgeries to give full exposure to the trainees.
 - A log book describing different techniques learned on the models, and hours of practice for each should be signed & supervised by the trainer.
 - A log book with records of all details of Laparoscopic & Hysteroscopic surgical cases that the trainee attends (at least 60 cases in 6 months).
 - One topic may be allotted to each trainee as a research activity or a comparative data analysis related to MIS including Laparoscopic or Hysteroscopic surgery.

The candidate at the end of the training will acquire skill, full knowledge of advanced technology & shall be able to deal with:

- 1. Perform <u>Level 1 and Level 2</u> of Gynec Endoscopies related to the field of Ob/Gyn.
- 2. Appreciate the benefits, limitations and complications of the newer techniques.
- 3. Be aware of various instruments & equipments and their applications that are used in MIS
- 4. Detect and manage complications that may occur with these types of surgeries.
- 5. Physiological & Kinetic changes associated with Pneumo-peritonium required in Laparoscopy Surgery & changes related to uterine distension for Hysteroscopy surgery.
- 6. Basic knowledge of the general anesthesia & multi-para monitoring related to laparoscopic & hysteroscopic surgery.
- 7. Role of diagnostic Laparoscopy, Microlaparoscopy, Hysteroscopy, Microhysteroscopy
- 8. Conditions with pregnancy, correctable by Laparoscopy like Ovarian Cyst, ectopic pregnancy, Appendicectomy etc. Aimed at conserving the pregnancy & avoiding abortion.
- 9. Laparoscopic sterilization with fallope ring application or small segment excision of tube
- 10. A comprehensive details of pathologies correctable by Endoscopic Surgery like Endometriosis, Fibroids and Adhesions etc.
- 11. A complete knowledge of all instruments & equipments used along with their sterilization, proper usage & maintenance for effective, safe and long term usage.
- 12. A comprehensive knowledge of electro-surgery, the new energy sources vessel sealing devices, harmonic scalpel etc. with technical risks, complications & their management.
- 13. A full knowledge of alternatives for endometrial ablation, thermal balloon techniques etc.
- 14. Adequate imaging & laboratory tests for accurate diagnosis & proper treatment of patient
- 15. After 6–8 weeks of exposure to surgeries, the trainee may wash up to assist the surgeon to get hands on tissue feel & to develop a confidence to operate independently later.
- 16. Fertility Enhancing Endoscopic Surgery & dos & don'ts for a given patient.
- 17. Treating 'SUI, genital prolapse & pelvic floor defects' by endoscopic approach.
- 18. Knowledge of medico-legal & Ethical aspects of Gynaec Endoscopic & MIS.

- 19. Research, statistics & audit of all events
- 20. Role & place of laparoscopic Microsurgery in relation to open microsurgery
- 21. Optimum knowledge of crisis management in Gynaec Endoscopic & MIS.
- 22. Post surgical care following endoscopy surgeries & follow-up advice.
- 23. Knowledge of future technology like Robotic surgery, NOTES, Telemedicine
- 24. The training schedule is divided to basic understanding for 1-2 months, 3-4 months for hands on training & 5-6 months for refining the skill & techniques
- 25. The end point for this course is to enable a trainee to perform Gynec Endoscopic & MIS Surgery in a well equipped set up.

Skills: The candidate will be given an opportunity to observe (O), assist surgeries (A), perform with assistance (PA)and perform independently (PI) in various cases

Training methods: There will be regular training sessions for thecandidates, as follows:

- Lectures
- Video demonstrations
- Seminars, Symposia, Panel discussions, Journal club
- Ward rounds,Case presentations
- Presentationsof paper in Conferences
- Publication in important Journals
- Project Work
- Practical training ininanimate trainers, computerized&virtual reality modules
- Assisting live surgeries
- Performing surgeries under supervision
- 1. Lectures: Didactic: Selected common topics will be discussed during the first few months to enable thecandidate to enhance his skill learning. These would include: 1) Use of library 2) Research Methods 3) Use of computers
- 2. Video Demonstrations: The backbone of this training will be video demonstrations. The centre should have a good collection of videos of various endoscopic procedures (100+ laparoscopic, hysteroscopic & MIS surgeries). Points discussed at these sessions will be:
 - The operative procedure details
 - Problems that might be encountered during the surgeries
 - Dealing with different situations and pathologies
 - Various approaches to a given problem
 - Different techniques of surgery that can be adapted
 - Proper usage ofvarious instruments and energy sources.
- 3. **Presenting Papers in Conferences:** Candidates will be encouraged to-attend and present papers & videos at conferences/workshops in endoscopic & MIS surgery.
- 4. **Publications:** Each candidate will be encouraged to publish at least one article during this certificate course.
- 5. Practical training:
- Pelvi-trainer sessions: Various exercises, which mimic various steps of surgicalprocedures, are taught in these sessions on inanimate Pelvi-trainers.
- Models for learning Hysteroscopy skills & simulators for different pathologies
- Assisting surgeries: Trainees will get opportunity to assist a number of surgeries. As assisting surgeon he/she would learn the hand-eye coordination by holding the camera and handling instrument/s through the opposite port/s.
- Performing surgeries under supervision: Based on the skill & active involvement of the candidate he/she may be allowed to perform procedures at the discretion of the senior faculty. Type & number of surgery will be based on the expertise of the candidate.

6. Online Lecture series: There will be 24 lectures on virtual webinars 4 each in each month. Each centre head will be asked to prepare and deliver one lecture each. There shall be a mini exam of 10 questions at the end of each lecture. The list of lectures will be shared at the start of each course.

Topics:

- 1. Endoscopy OT set-up, choosing right equipments 13. Endometriosis; Surface and cyst
- 2. Recording and storage of videos
- 3. Abdominal entry techniques
- 4. Diagnostic hysteroscopy, reporting a procedure
- 5. Evaluation of pelvis, and reporting of procedure
- 6. Tubal sterilization
- 7. PCO drilling
- 8. Myomectomy Laparoscopy
- 9. Polyp & myoma resection Hysteroscopy
- 10. Hysterectomy
- 11. Ectopic
- 12. Ovarian cysts, simple, dermoid

- 14. DIE
- 15. Adhesiolysis and prevention
- 16. Tubal cannulation
- 17. Septate & T shaped uterus
- 18. Pelvic lymphadenectomy for Ca body
- 19. Laproscopy in congenital malformations
- 20. Tubal recanalization
- 21. Complications laparoscopy
- 22. Complications hysteroscopy
- 23. Prolapse procedures
- 24. SUI repair

Assessment for certification

Internal assessment: Based on evaluation of the log book (35), Publication (10) + 5 marks) For Paper Presentation, which shall include academic activities as well as the presentations & procedures carried out by the candidate.

The written assessment: There shall be a written assessment at the end of the training. Theory paper shall carry 100 marks (50 MCQs, and 10 short answer questions). Practical Exam: There shall be two examiners, appointed by the ICOG - FOGSI. 1 hour maximum 100 marks

Certification: Based on the recommendations made by the examiners, successful candidate would be awarded the Certificate by ICOG - FOGSI.

In case of unsatisfactory completion, the trainee will be given another chance to appear before the examiners (6 months) later.

Evaluation plan for ICOG endoscopy training course

	Total	250
5.	Practical	100
4.	Case solving (3)	060
3.	MCQ theory	025
2.	Certificate from training centre: Attendance, sincerity	025
1.	Log Book	040

For Basic Course Skills Assessment: Preceptor gives marks from 1-10 in every box for scoring purpose

(observe(O), assist surgeries (A), perform with assistance (PA)and perform independently (PI))

	Task	In Pelvic trainer – Assessed by Faculty	In computerized Simulator Assessed by Computer	Online software available for practice	In patient Done/assisted during surgery (O , A, PA , PI)
1	Camera navigation	1-10	1-10	1-10	1-10
2	Target navigation				
3	Instruments navigation				
4	Co-ordination with primary surgeon/assistant				
5	Grasping-suture/needle				
6	Cutting Round circle on paper & suture				
7	Clip applying on tubular structure				
8	Peg transfer				
9	Lifting & grasping				
10	Precision & speed				
11	Gently handling intestines				
12	Endoloop				
13	Tubal occlusion				
14	Salpingectomy				
15	Salpingostomy				
16	Lap TL-Falop ring				
17	Diagnostic laparoscopy				
18	Diagnostic hysteroscopy & Cu-T removal				
19	Hysteroscopic Tubal cannulation				
	Total concernant				

<u>For Intermediate Course Skills Assessment:</u> (observe(O), assist surgeries (A), perform with assistance (PA)and perform independently (PI))(Preceptor gives marks from 1-10 in every box for scoring purpose)

	Task	In Pelvic trainer – Assessed by Faculty	In Pig or cadaver Assessed by Faculty	In patient Done/assisted during surgery (O , A, PA , PI)
2				
Camera navigation				
Target navigation				
nstruments navigation				
Co-ordination with primary	1-10			
surgeon/assistant	1-10			
Hemostasis help	1-10			
	1-10			
	1-10			
3	Laparoscopic Myomectomy			
4	Laparoscopic surgery for Endometriosis			
5	Lap. surgery for Adnexal mass			
6	Total laparoscopic hysterectomy			
7	Lap.Adhesiolysis			
8	Laparoscopic Hemostasis			
9	Hysteroscopic septum excision			
10	Hysteroscopic small polyp/fibroid			
11	Hysterscopic Adhesiolysis for mild adhesions			
12	Laparoscopic ovarian cystectomy			
13	Laparoscopic salpingoophrectomy			
14	Laparoscopic suturing			