**Operative Performance Rating System (OPRS)**

**CREATION OF ARTERIOVENOUS (AV) FISTULA**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Evaluator:** |  | | **Resident:** |  |
| **Resident Level:** | |  | **Program:** |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | **Date of Procedure:** |  | | **Time Procedure Was Completed:** |  | | | | **Date Assessment Was Completed:** | |  | **Time Assessment Was Initiated:** | |  | |

Please rate this resident's performance during this operative procedure. For most criteria, the caption above each checkbox provides descriptive anchors for 3 of the 5 points on the rating scale. "NA" (not applicable) should only be selected when the resident did not perform that part of the procedure.

**Case Difficulty**

|  |  |  |
| --- | --- | --- |
| 1 | 2 | 3 |
| Straightforward anatomy, no related prior surgeries or treatment | Intermediate difficulty | Abnormal anatomy, extensive pathology, related prior surgeries or treatment (for example radiation), or obesity |
|  |  |  |

**Degree of Prompting or Direction**

|  |  |  |
| --- | --- | --- |
| 1 | 2 | 3 |
| Minimal direction by attending. Resident performs all steps and directs the surgical team independently with minimum or no direction from the attending, to either the resident or to the surgical team. | Some direction by attending. Resident performs all steps but the attending provides occasional direction to the resident and /or to the surgical team. | Substantial direction by attending. Resident performs all steps but the attending provides constant direction to the resident and surgical team. |
|  |  |  |

**Procedure-Specific Criteria**

**Placement of Incisions**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 5  Excellent | 4  Very Good | 3  Good | 2  Fair | 1  Poor | | NA |
| Proximal incision slightly distal to antecubital crease – graft to radial side of arm; loop length 2/3 of distal to wrist |  | Position of incision is functional but not optimal for exposure of target vessels |  | | No concept of functional needs of procedure –graft too short or too long |  |
|  |  |  |  |  | |  |

**Dissection of Vessels**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 5  Excellent | 4  Very Good | | | 3  Good | | 2  Fair | 1  Poor | NA |
| Excellent independent dissection of all vessels; mindful of plans for anastomosis | | |  | Exposes brachial artery sufficiently for anastomosis with guidance. Preserves most significant superficial veins | |  | Disregard for superficial veins; injury to brachial artery or deep vein |  |
|  | |  | | |  |  |  |  |

**Suturing Graft**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 5  Excellent | 4  Very Good | 3  Good | 2  Fair | 1  Poor | | NA | |
| Independently sews with correct needle angle and at the correct orientation throughout the anastomosis |  | Generally pierces graft and vessels at 90 degrees and passes from intimal surface out of artery |  | | Sutures from adventitia to intima on artery; inappropriate thickness/spacing of bites | |  |
|  |  |  |  |  | |  | |

**Tunnel Graft**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 5  Excellent | 4  Very Good | 3  Good | 2  Fair | 1  Poor | NA |
| No kinks; appropriate depth graft; proximal to distal suture line |  | Able to position graft adequately with guidance |  | Kinks; too deep placement; directly below distal incision |  |
|  |  |  |  |  |  |

**General Criteria**

**Instrument Handling**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 5  Excellent | 4  Very Good | | 3  Good | | 2  Fair | | 1  Poor | | NA | |
| Fluid movements with instruments *consistently* using appropriate force, keeping tips in view, and placing clips securely |  | | Competent use of instruments, *occasionally* appeared awkward or did not visualize instrument tips | |  | | Tentative or awkward movements, *often* did not visualize tips of instrument or clips poorly placed | |  | |
|  |  |  | |  | |  | |  | |

**Respect for Tissue**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 5  Excellent | 4  Very Good | 3  Good | 2  Fair | 1  Poor | NA |
| *Consistently* handled tissue carefully (appropriately), minimal tissue damage |  | Careful tissue handling, *occasional* inadvertent damage |  | *Frequent* unnecessary tissue force or damage by inappropriate instrument use |  |
|  |  |  |  |  |  |

**Time and Motion**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 5  Excellent | 4  Very Good | 3  Good | 2  Fair | 1  Poor | NA |
| Clear economy of motion, and maximum efficiency |  | Efficient time and motion, some unnecessary moves |  | Many unnecessary moves |  |
|  |  |  |  |  |  |

**Operation Flow**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 5  Excellent | 4  Very Good | 3  Good | 2  Fair | 1  Poor | NA |
| Obviously planned course of operation and anticipation of next steps |  | Some forward planning, reasonable procedure progression |  | Frequent lack of forward progression; frequently stopped operating and seemed unsure of next move |  |
|  |  |  |  |  |  |

**Overall Performance**

Rating of 4 or higher indicates technically proficient performance (i.e., resident is ready to perform operation independently, assuming resident consistently performs at this level)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 5  Excellent | 4  Very Good | 3  Good | 2  Fair | 1  Poor | NA |
|  |  |  |  |  |  |

**Please indicate the weaknesses in this resident’s performance:**

|  |
| --- |
|  |

**Please indicate the strengths in this resident’s performance:**

|  |
| --- |
|  |