**Operative Performance Rating System (OPRS)**

**OPEN VENTRAL HERNIA**

|  |  |  |  |
| --- | --- | --- | --- |
| **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**

**Incision**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 5Excellent | 4Very Good | 3Good | 2Fair | 1Poor | NA |
| Excellent planning of incision, taking into consideration planned procedure and prior surgery; drew with marking pen |  | Demonstrated an understanding of most principles in planning and making incision |  | Poor incision planning |  |
| [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |

**Exposure**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 5Excellent | 4Very Good | 3Good | 2Fair | 1Poor | NA |
| Precise and efficient dissection to posterior rectus sheath and mobilization of fascia (3-5 cms from hernia edge) to expose hernia neck |  | Satisfactory dissection and mobilization with occasional inefficient handling of instruments and need to reposition retractors/assistants; incomplete exposure of posterior fascia |  | Poor dissection technique/use of tissue plains |  |
| [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |

**Identification of Hernia Sac**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 5Excellent | 4Very Good | 3Good | 2Fair | 1Poor | NA |
| Excellent and accurate identification and reduction of sac and contents |  | Satisfactory (required some direction) location and reduction of sac and identification of entire defect |  | Complete reliance on faculty instruction for identification of defect and sac |  |
| [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |

**Repair - Insertion of Mesh**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 5Excellent | 4Very Good | 3Good | 2Fair | 1Poor | NA |
| Excellent (independent) orientation of mesh, positioning (smooth side to bowel, onlay or sublay) and placement of sutures (includes four corner sutures) without tension or redundancy |  | Satisfactory (required some direction) orientation of mesh, positioning and placement of sutures without tension or redundancy |  | Inadequate orientation of mesh positioning and suturing, with complete reliance on faculty instruction for identification of defect and sac |  |
| [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |

**General Criteria**

**Instrument Handling**

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

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

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

**Operation Flow**

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

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

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

|  |
| --- |
|  |

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

|  |
| --- |
|  |