**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 | 4 | 5 |
| 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**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Substantial Direction  1 | 2 | Some Direction  3 | 4 | Minimal Direction  5 |
| Unable to direct team, use/choose instruments, or anticipate next steps as surgeon or as first assistant without constant attending prompting |  | Actively assists and anticipates own and attending’s needs, performs basic steps with occasional attending direction to resident and/or surgical team. Somewhat hesitant and slow to anticipate or recognize aberrant anatomy, unexpected findings, and/or “slowing down” moments |  | Performs all steps and directs team with minimal direction from attending to either resident or team, i.e., anticipates needs, sets up exposure for self and assistant, transitions fluently between steps, gives clear direction to first assistant, maintains situation awareness, calmly recovers from error and recognizes when to seek help/advice |
|  |  |  |  |  |

**Procedure-Specific Criteria**

Please assess performance and indicate the degree of prompting for **each item.** The assessment score for each item **may differ** from the prompting score for that item.

**Incision**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Substantial Direction  1 | 2 | Some Direction  3 | 4 | Minimal Direction  5 | NA |
|  |  |  |  |  |  |

**Exposure**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Substantial Direction  1 | 2 | Some  Direction  3 | 4 | Minimal Direction  5 | NA |
|  |  |  |  |  |  |

**Identification of Hernia Sac**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Substantial Direction  1 | 2 | Some Direction  3 | 4 | Minimal Direction  5 | NA |
|  |  |  |  |  |  |

**Repair - Insertion of Mesh**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Poor  1 | Fair  2 | Good  3 | Very Good 4 | Excellent  5 | NA |
| Inadequate orientation of mesh positioning and suturing, with complete reliance on faculty instruction for identification of defect and sac |  | Satisfactory (required some direction) orientation of mesh, positioning and placement of sutures without tension or redundancy |  | 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 |  |
|  |  |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Substantial Direction  1 | 2 | Some Direction  3 | 4 | Minimal Direction  5 | NA |
|  |  |  |  |  |  |

**General Criteria**

**Instrument Handling**

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

**Respect for Tissue**

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

**Time and Motion**

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

**Operation Flow**

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

**Overall Performance (not included in calculation of mean score)**

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

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Poor | Fair | Good | Very Good | Excellent |
|  |  |  |  |  |

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

|  |
| --- |
|  |

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

|  |
| --- |
|  |