Surgical Skills Video-based Assessment Tool for Dermatology Residents

Kirk Sidey BA, Pooja Chitgopeker MD, Gretchen Roth MD, Karolyn Wanat MD, Brian Swick MD, Hillary Johnson-Jahangir MD, Marta Van Beek MD, Nkanyezi Ferguson MD
Disclosures/Conflicts of Interest

• None
Idea in Brief

Video recording of surgical excision
Systematic self-assessment
Video review of surgical technique
One-on-one faculty feedback

Goal: Improved surgical skills
Background

• Most common teaching methods
  • Surgical lectures
  • Experiential

• Limitations of these methods
Background

• Value of Video Review

  • Deliberate, retrospective self-review

  • Opportunity for trainer-trainee feedback

  • Increased feasibility of objective evaluation and multiple evaluators
Methods

1. Standard surgical excision wearing head-mounted video recording device
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2. Online self assessment (incorporating modified OSATS, Simple Excision and Repair Assessment Tool, ACGME milestones)
### Methods

- **Two sections**: Task-specific items and global rating scale.

- **Expansion of rating scale**: For increased granularity and more precise feedback.

- **Additional item**: Examining sharp safety.
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3. Review of the video (staff)
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4. **One-on-one meeting for feedback**
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4. One-on-one meeting for feedback
5. Repeat in approximately two months
Methods

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4. One-on-one meeting for feedback
5. Repeat in approximately two months
6. Compare survey results and elicit feedback
Preliminary Results
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• Total of 4 surgical excisions

• 4 self-assessments

• 2 reviewers
  • 8 staff assessments
Preliminary Results

Task-specific Items

- Higher Resident Rating: 16
- Higher Staff Rating: 4
- Same Rating: 2

Global Rating

- Higher Resident Rating: 1
- Higher Staff Rating: 6
- Same Rating: 1
Summary

• Many challenges with traditional surgical skills training techniques

• Recording surgical procedures creates value:
  • Self review, additional feedback, objective evaluation, multiple reviewers

• Methods:
  • POV videotaping, online assessments, video review, feedback, survey comparison

• Results
  • Early differences; Full results - TBD
Thank you!