



HEALTH
EDUCATION
& TRAINING

GOLDEN SCALPEL GAMES[®] 2019

Trainee Participant Guide



ACKNOWLEDGEMENTS

Produced by: Health Education and Training Institute (HETI)

HETI takes this opportunity to acknowledge the strong collaboration with Local Health Districts, Specialty Networks, the NSW Ministry of Health, NSW Health Pillars and other public health organisations.

HETI greatly values the partnerships and expertise without which the successful development of this resource would not have been possible.

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TRIM DOC19/3733



PARTICIPANT GUIDE



WELCOME

The Golden Scalpel Games is an educational team-based competition sponsored by the Health Education and Training Institute to showcase the surgical skills of aspiring young surgeons across the six Surgical Skills Training Networks in NSW.

This year's Golden Scalpel Games will be held on Saturday 17 August, 2019.

This guide contains information to help you prepare for the Games, including:

-  How to get to the venue
-  Program
-  What to expect on the Day
-  Station Overview

OUR VOLUNTEERS

There are complex logistics involved in running the Golden Scalpel Games and without our fantastic volunteers, who will spend the day judging, timekeeping, scoring, re-stocking stations and cleaning equipment, this day would not be possible.

A SUPPORTIVE STATE TRAINING COUNCIL

The Golden Scalpel Games has the full support of the HETI Clinical Surgical Training Council (CSTC), chaired by Associate Professor Kerin Fielding.

THE VENUE

The Golden Scalpel Games will take place at Level 5, Kolling Building, Royal North Shore Hospital, St Leonards, NSW 2065



GETTING THERE

TRAIN

The closest station is St Leonard's Station (550 m or 10 minute walk). To walk from the station, walk north on Herbert St and then turn left onto Westbourne St.

PARKING

The most convenient parking is P1 Parking from Reserve Rd or from Westbourne St. Pre-booked parking is significantly cheaper:

https://www.wilsonparking.com.au/park/2170_Royal-North-Shore-Hospital-Car-Park_Reserve-Road-St-Leonards

PROGRAM

Time	Event
11:45 – 12:15	Registration
12:15 – 12:45	Lunch
12:45 – 13:00	Welcome and Opening of the Golden Scalpel Games
13:00 – 13:30	1 st Station
13:30 – 14:00	2 nd Station
14:00 – 14:30	3 rd Station
14:30 – 15:00	4 th Station
15:00 – 15:30	5 th Station
15:30 – 16:00	6 th Station
16:00 – 16:30	7 th Station
16:30 – 17:15	Trophy, Medal and Certificate Presentations

WHAT TO EXPECT ON THE DAY

AT REGISTRATION

Teams will register on arrival and collect team shirts. You will be required to wear scrub pants, a theatre cap and practice universal precautions appropriately during the Games. Equipment for universal precautions will be supplied.

You will be asked to sign a media consent form. Photographs and quotes from the day may be used in other HETI publications promoting education and training in NSW.

DURING THE COMPETITION

Teams will rotate through seven stations every 30 minutes which includes:
 20 minutes – Task & assessment
 10 minutes – Feedback and station reset

A real-time scoreboard will be visible throughout the Games.

The event will conclude with the medal, certificate and trophy presentation.

GOLDEN SCALPEL GAMES STUDENT EDITION

The Golden Scalpel Games Student Edition will begin at 7:30am. All trainees are welcome to observe.

STATION GUIDELINES

The following guide is an overview of the stations and the key clinical areas that will be tested during the 2019 Golden Scalpel Games.

Tendon Repair Assessment

All participants will be required to perform a tendon repair using a Kessler core suture and a circumferential running suture. You will be assessed on your basic surgical principles and those principles outlined by RACS (choosing the appropriate suture material, instruments and surgical technique).

Laparoscopic Anatomy, Appendicectomy, Closure of Laparotomy

Teams split into two as follows

- 3 trainees for TASK ONE - laparoscopic anatomy / appendicectomy (2 senior / 1 junior)
- 3 trainees for TASK TWO - laparotomy closure (2 senior / 1 junior)

Task 1 – Laparoscopic Anatomy / Appendicectomy

Scenario: You have been left to complete a laparoscopic appendicectomy. The Fellow and SET registrar have left to go to another theatre for a major trauma. The Fellow and registrar have noted odd lesions in the abdomen and pelvis and have detached and divided the mesoappendix.

Part A: Laparoscopic Anatomy and Operation Report

The three trainees collaborate to complete tasks that test their knowledge of laparoscopic anatomy of the abdomen and or pelvis.

- Use rubber bands to mark specified anatomical landmarks laparoscopically
- Locate and identify a number of abnormal “lesions” laparoscopically

The junior member acts as camera operator for identification of the “lesions”. The two senior trainees proceed with Part B (appendicectomy) while the junior team member writes part of the operation report to include anatomically accurate sites of the abnormal “lesions”.

Part B: Laparoscopic Appendicectomy

The two senior trainees complete the “appendicectomy” by placing two endoloops at the base, and divide the appendix between the two endoloops. The trainees act as operator/camera holder in turn for each endoloop. The two senior trainees check the operation report and anatomical sites of the lesions once they have safely removed the appendix.

Task 2 – Laparotomy Closure

Scenario: You have been left to close the upper abdominal incision after a laparotomy for a perforated duodenal ulcer on a 60 year old male. There is some intestinal distension from peritonitis.

The two senior members act alternately as operator and assistant, each closing one half of the length of the fascial opening. The more junior member acts as the scrub nurse.

Trauma Scenario

Participants will role play in the simulated initial assessment of a severely injured trauma patient who requires immediate resuscitation and simultaneous identification and management of life threatening injuries. A systematic approach to the resuscitation utilising all 6 team members should be followed based on ATLS/EMST principles.

Simulated Theatre Station - Escharotomy

Participants will be asked to prepare/operate on a patient going to theatre for emergency bilateral escharotomies. This station includes gaining consent, time-out procedures, positioning, prepping and draping of the patient and then proceeding with the operation.

End-to-Side Anastomosis

Candidates will be required to anastomose vein or synthetic graft to an artery. It requires care to ensure that the integrity of the anastomosis is maintained, especially at the heel, while stenosis is avoided. There will be three stations for the double pipe Vascular Anastomoses where three team members will complete the task with three of them assisting.

Colorectal Anastomosis

Participants will be expected to perform a colorectal anastomosis using a single layered, interrupted sero-submucosal suturing technique. You are expected to complete the entire anastomosis in the 20 minute timeframe. You will be assessed on suture selection, placement, neatness, efficiency and air tightness of the anastomosis.

Wound Management

Participants will be required to complete simple and complex wound closure skills, including suture choice, instrument handling, safety and sharps management.



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